

PED 1 & 2 Online Clinical Assignment

Scenario 1: Seizure disorder

1. What priority problem did you identify for Jackson Weber?
 1. In my opinion, the priority problem I identified was ineffective airway clearance due to his seizure.

2. What complications might Jackson Weber face if safety precautions are not taken during the seizure activity and if treatment is not implemented after the seizure?
 1. He could have possibly experienced injury to his body if the seizure pads were not placed, and if items were not removed from the bed. He also could if choked if not placed in the proper position.

3. What key elements would you include in the handoff report for this patient? Consider the situation-background-assessment-recommendation (SBAR) format.
 1. I would include details about his last seizure, I would also include the medications that were administered following the seizure, and his current condition, his background of seizure history.

4. Reflecting on Jackson Weber's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?
 1. I feel that this scenario was laid out in the order that the events should have occurred. I probably would have done the neuro assessment before I did a cardiac and pain assessment considering his seizure history. All the necessary precautions were done to safely take care of the child once the seizure occurred.

5. Describe how you would apply the knowledge and skills you obtained in Jackson Weber's case to an actual patient care situation.
 1. If this were a situation that happened to an actual patient I would have probably freaked out since I have never been exposed to situations like this. I would have implemented seizure precautions, documented the start time, duration, and characteristics of the seizure, and would have called for my nurse. This was a very neat experience because it put me in the heat of the moment without being there in person. I still experienced all the emotions that I would have if this were an actual situation!

Scenario 2: Asthma/Pneumonia

1. List in order of priority your initial nursing actions for Sabina Vasquez based on physical findings and family interaction.
 1. My priority would be to do a focused respiratory assessment, so check her respirations and breath sounds. Then I would get her vital signs with focus on her BP and O2 sat. Then from there I would administer her medications according to the EMAR, and while doing so use that time to educate the family about the medications and answer any further questions.
2. What complications might Sabina Vasquez face if her symptoms are not recognized and if care is not initiated in a timely manner?
 1. One condition that Sabina might face is respiratory distress that can put her at risk for inadequate tissue perfusion if her symptoms are not recognized and care is not initiated in a timely manner.
3. As you begin to think about discharge planning for Sabina Vasquez and her family, what teaching needs to be provided?
 1. One thing that I would include in my d/c teaching would be proper administration of her medications, keeping the house clean to avoid the buildup of dust or any allergens to reduce triggers, keep Sabina in a smoke free environment as this can cause flare-ups, and to avoid hypoallergenic pets. I would also educate her mom on what to do if her daughter is having an exacerbation and how she will present.
4. Reflecting on Sabina Vasquez's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?
 1. This scenario laid out the appropriate steps to provide safe and evidence-based care to Sabina. One thing that I probably would have done different would have been to start with the respiratory assessment and then follow up with the pain assessment.
5. Describe how you would apply the knowledge and skills obtained in Sabina Vasquez's case to an actual patient care situation.
 1. If this were a real situation, I feel that this scenario has equipped me to take care of my patient properly and safely. I would make sure to take the proper precautions once my patient said they were having trouble breathing. I would sit them up to open the airway and ease their breathing. I would also make sure my patient had the pulse ox on to monitor their O2 sat and the correct oxygen delivery device on. I really enjoyed this because I do not think I would've been able to practice this exact situation during my time on the floor.