

### Scenario 3: Dehydration

- 1) List in order of priority your initial nursing actions identified for Eva Madison based on physical findings and family interaction.

Assess IV line, if the line is alright start administering the IV fluids ordered by the physician, reassess patient's vitals and closely assess respiratory and cardiac, collect urine and stool samples ordered, and educate on signs of dehydration for the future and how much fluids she should be receiving to prevent dehydration.

- 2) What complications might Eva Madison face if her symptoms are not recognized and treated in a timely manner?

She could progress to hypovolemic shock if her dehydration isn't treated promptly. If she continues to vomit and have diarrhea, she could also have fluid electrolyte imbalances. Lastly, if her diarrhea isn't treated, she could end up with problems with her skin integrity.

- 3) What measures should be initiated to decrease anxiety in Eva Madison's mother while simultaneously caring for Eva?

Communicating therapeutically and being honest with how the treatment is going and her diagnosis. Give the mother all the information she needs to understand what is going on so that she can have a better understanding.

- 4) Reflecting on Eva Madison's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?

I would assess the pertinent data that was associated with dehydration faster so that I could start the administration of fluids faster. I would do this so that the patient can get the hydration she needs faster.

- 5) Describe how you would apply the knowledge and skills you obtained in Eva Madison's case to an actual patient care situation.

I'll apply my knowledge and skills obtained in this case when assessing a patient with similar problems. Now I will be able to set up what I need to assess so that I get a fuller picture of what is going on with my patient. I will also make this process go smoother so that my patient gets the care they need as soon as possible.

Browser tabs: Covenant SON & SOR, vSim for Nursing | Maternity and Pediatrics, MATERNITY AND PEDIATRICS

Address bar: <https://simserver.wkhp.com/pediatrics-tablet-combo/course/htmldeploy/kuhlau.html?variant=MPC&patientId=EvaMadisonComplex-20131024&short=Ev...>

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**vSim for Nursing | MATERNITY AND PEDIATRICS**

**Eva Madison**

Adm on: 1/20/2021  
Date of birth: 1/28/2015  
Age: 5  
Gender: Female  
Diagnosis: Dehydration



**Basic view** | Detailed view | Simulation time: 20:47 Mins

- 0004 You washed your hands. To maintain patient safety, it is important to wash your hands as soon as you enter the room.
- 0128 You identified the child. To maintain patient safety, it is important that you quickly identify the child.
- 0138 You identified the relatives. This is important, as the patient is below 18 years of age.
- 0208 You provided patient education. This is correct. It is important to use every opportunity to provide patient education.
- 0220 You provided education to the relative regarding the child's condition. This is correct. It is important to use every opportunity to provide education.
- 0244 You assessed the oain level using the FACES scale. The child answered 2 on the FACES pain scale with a range of 0 to 5.
- 0417 You listened to the lungs of the child. The breath sounds are clear and equal bilaterally. In the clinical situation, you should auscultate the lungs both anteriorly and posteriorly.
- 0438 You listened to the heart of the child. This is reasonable. There were regular heart sounds without murmurs.

**Your main opportunities for improvement**

- ✖ You should reassess the child's breathing at this point.

Retry | 0 1 0 | **93% SCORE** | Continue

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Browser tabs: Covenant SON & SOR, vSim for Nursing | Maternity and Pediatrics

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**Post-Simulation Quiz**

**Quiz Stats**

Name:	Student 23 CSON	Quiz completed in:	1.31 mins
Date:	2021-1-20 Time: 12:01:41	Questions answered:	10
		Number correct:	9 (90%)

**Answer Key**

**QUESTION 1:** The nurse is admitting Eva, a 5-year-old with severe gastroenteritis and... [more](#)

**Your Response:** Correct!

**Correct Response:** Assessing Eva's heart rate, skin turgor, and last urine output

**Explanation:** Checking heart rate, skin turgor, and last urine output is the best way f... [more](#)

**QUESTION 2:** The nurse would expect which of the following laboratory results to be ... [more](#)

**Your Response:** a) Urine specific gravity  
b) Creatinine

Windows taskbar: Type here to search, 100% battery, 12:03 PM 1/20/2021

#### Scenario 4: Sickle Cell

- 1) What is the relationship between fluid and oxygen therapy in the treatment of sickle cell anemia?

When a patient with sickle cell anemia becomes dehydrated a sickle cell crisis can occur. To prevent this a patient needs to be properly hydrated so if they can't fully hydrate themselves orally, they will need IV fluids to ensure that they don't become dehydrated. Oxygen therapy is important because if a patient does have a sickle cell crisis, they may need supplemental oxygen. This is why monitoring oxygen saturation is so important so that you can ensure that the patient is properly oxygenated during one of these crises. Hypoxia can also trigger cells to sickle so it's important to prevent it.

- 2) What complications might Brittany Long face if her symptoms are not recognized and treated in a timely manner?

She could develop leg ulcers, have retinal detachment, splenomegaly, hepatomegaly, kidney abnormalities, and bone changes.

- 3) Document the patient teaching that you would provide for Brittany Long and her family before discharge, including disease process, nutrition, signs and symptoms of crises, prevention of infection and dehydration, and pain management.

For the disease process, I would explain that the patient has blood cells that can sickle under certain triggers. These include dehydration, acidosis, hypoxia, temperature changes, and infection. When the cells sickle, they can cause a Vaso-occlusive crisis. Signs and symptoms of a crisis include acute pain, fever, severe abdominal pain, painful edematous hands/feet, arthralgia, leg ulcers, and cerebrovascular accident. Nutrition is important to keep the patient hydrated so that they can avoid being dehydrated. This includes adequate oral hydration from liquids as well as foods like soup, ice pops, pudding, and ice cream. To prevent infection, they should avoid being around sick people, seek care immediately if there is a sign of infection, wash their hands properly, and take all prophylactic antibiotics prescribed. For pain management, they should provide as much nonpharmaceutical pain management as possible and provide any pain medication if needed.

- 4) Reflecting on Brittany Long's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?

I would read the order more clearly to see when labs needed to be drawn. I would do this just to make sure that I'm drawing the right labs and at the right time.

- 5) Describe how you would apply the knowledge and skills that you obtained in Brittany Long's case to an actual patient care situation.

I will pay special attention to all vital signs since they could indicate needing to call the physician to be able to provide proper treatment for my patient. I will also make sure I get all the information I need before making the call so that the physician knows the whole scenario. This will be useful with all patients since it sometimes is necessary to make these calls if the patient is showing certain symptoms. I will also be more careful when I read a provider's order.

**vSim for Nursing | MATERNITY AND PEDIATRICS**

**Brittany Long**  
 Adm on: 1/19/2021  
 Date of birth: 12/10/2015  
 Age: 5  
 Gender: Female  
 Diagnosis: Sickle cell anemia

**Your main opportunities for improvement**

**Basic view** | **Detailed view** | Simulation time: 21:01 Mins

- 0004 You washed your hands. To maintain patient safety, it is important to wash your hands as soon as you enter the room.
- 0023 You identified the child. To maintain patient safety, it is important that you quickly identify the child.
- 0032 You identified the relatives. This is important, as the patient is below 18 years of age.
- 0204 You provided patient education. This is correct. It is important to use every opportunity to provide patient education.
- 0213 You provided education to the relative regarding the child's condition. This is correct. It is important to use every opportunity to provide education.
- 0238 You assessed the pain level using the FACES scale. The child answered 3 on the FACES pain scale with a range of 0 to 5.
- 0515 You examined the child's legs. The right lower leg is warm to the touch. There is normal elasticity of the skin. She looks slightly pale, and her skin is cool.
- 0640 You listened to the lungs of the child. The breath sounds are clear and equal bilaterally. In the clinical situation, you should auscultate the lungs both anteriorly and posteriorly.

100% SCORE

**1** Suggested Reading | **2** Pre-Simulation Quiz | **3** vSim | **4** Post-Simulation Quiz | **5** Documentation Assignments | **6** Guided Reflection Questions

**Post-Simulation Quiz**

**Quiz Stats**

Name:	Student 23 CSON	Quiz completed in:	5.54 mins
Date:	2021-1-20 Time: 12:45:58	Questions answered:	10
		Number correct:	10 (100%)

**Answer Key**

**QUESTION 1:** The nurse is caring for a patient with sickle cell anemia who is exhibitin... [more](#)

**Your Response:** Correct!

**Correct Response:** Assess pain frequently and administer medications routinely  
 Administer oxygen if saturations are less than 92% to promote adequate oxygenation  
 Administer hypotonic fluids intravenously to promote hemodilution

**Explanation:** The immediate priorities in the treatment of vaso-occlusive crisis are p... [more](#)

Ricci, S., Kyle, T., and Carman, S. *Maternity and Pediatric Nursing*, 3rd Edition, p. 1806, Comparison Chart 46.3