

Sydney Sharp  
Vsim #4 Reflection

1. Dehydration is a “trigger” for a sickle crisis. Providing fluid not only helps to rehydrate the patient, but it also allows more fluid into the bloodstream to decrease the risk of sickled RBCs from sticking together and clotting. Fluid therapy promotes healthy blood flow.
2. Acute chest syndrome is a major symptom Brittany could face if there was not intervention in a timely manner. Brittany could also experience acute pain and possibly infections.
3. I would provide teaching on the different triggers that cause a sickle crisis and how to avoid these triggering events. Adequate hydration is a major factor in sickle cell anemia. I would make sure to teach the parents and Brittany about drinking adequate fluid throughout the day especially if participating in activity. I would teach how to recognize signs and symptoms of a crisis and the importance of wearing a medical alert bracelet. I would teach the family to apply heat to the area if Brittany were to experience pain in a joint and to take pain medication as needed. I would also stress the importance of going to the emergency room if Brittany were to experience severe signs and symptoms of a crisis such as a fever or changes in vision.
4. In Brittany’s case, I would have tried the nonpharmacological methods to attempt and reduce pain and any anxiety of Brittany’s before conducting my interview and assessment. I believe offering the stuffed animal to Brittany beforehand would have provided some temporary relief before I administered the morphine.
5. In an actual case, I would be more observant of my patients symptoms and perform a thorough patient history. These actions would allow me to know the onset of the crisis and how to avoid putting my patient in that situation. The information obtained from the patient and family would also allow me to fully understand the situation as well as make better decisions when it comes to interventions.