

Medical Case 1: Kenneth Bronson

Guided Reflection Questions

1. How did the scenario make you feel? The scenario made me feel nervous, because I didn't expect him to go into anaphylactic shock. That was something I have never experienced on vsim, so it was a good time to think about what I would do if I was in this situation in real life.
2. What signs and symptoms led you to the conclusion that Kenneth Bronson was experiencing an allergic reaction? After I was administered his antibiotic, right away he stated that he was unable to breathe because his throat was swelling. Patients heart rate and respiratory rate also increased rapidly, and upon checking his skin, he had rashes on his chest.
3. Discuss the differences between mild, moderate, and severe anaphylactic reactions. Mild reactions include local symptoms (affecting a specific area of your body) such as a rash or hives, itchiness, watery/red eyes, hay-fever and runny nose. Mild reactions do not spread to other parts of your body. Moderate reactions include symptoms that spread to other parts of your body. Symptoms may include itchiness, hives, and/or swelling and trouble breathing. A severe allergic reaction, known as anaphylaxis, is a rare, life-threatening emergency in which your body's response to the allergen is sudden and affects the whole body. Anaphylaxis may begin with severe itching of your eyes or face. Within minutes, more serious symptoms appear, including throat swelling (which could cause problems with swallowing and breathing), abdominal pain, cramps, vomiting, diarrhea, hives and swelling (angioedema). You may also have mental confusion or dizziness, since anaphylaxis may cause a drop in blood pressure.
4. Discuss the importance of follow-up assessment's post-reaction. It is important to follow up after an anaphylactic reaction because there could be a delayed reaction, it's also important to ensure that implemented treatments are working.
5. What further needs does Kenneth Bronson have at the end of the scenario that future nursing care should address? At the end of the scenario, it is important that the nurse documents the allergic reaction. The patient will also need to be given an allergy bracelet; the doctor will also need to order a different antibiotic for the patient.
6. Reflect on how you would communicate with family members in an emergency situation if they were present at the bedside. I would ask the family member if they could please step aside, in the instance that they were in the way, because it is an emergent situation. Otherwise, I don't think it would be a problem for the family member to be in the room. I would calmly explain to the family member that the patient is having an allergic reaction to the antibiotics that were given, and that that can happen sometimes. Once the patient has

been stabilized, I would explain to them the precautions that would be administered in the future to ensure this type of situation did not occur again.

7. After completing the simulation and reflecting on your experience, what would you do differently (or the same) for the patient experiencing acute respiratory distress? I think something that I would have done different is to have epinephrine at the bedside, since this was a medication, the patient has never received before. This made me really think about how cautious we need to be with watching our patients when we administer new medications. However, something that I would not have changed are the steps I took after the patient started to experience an allergic reaction. I think I was prompt with taking measures to control the situation.
8. How could you prepare for clinical in order to plan ahead for potential patient emergencies? I think it's important to always review any allergies a patient may have before administering medications. I always ask my patients about their allergies upon doing my two patient identifiers, and then I ask again right before I administer any medications