

Madison Gage

Medical Case 1: Kenneth Bronson

Guided Reflection Questions

1. How did the scenario make you feel?

This scenario made me feel confident. I did have to repeat it, but I realized the mistakes I made and corrected them when I tried again. This scenario made me feel better about my critical thinking skills.

2. What signs and symptoms led you to the conclusion that Kenneth Bronson was experiencing an allergic reaction?

The signs and symptoms that led me to the conclusion that he was having an allergic reaction were that the patient reported his throat was swelling. The patient also reported worsening pain, his oxygen saturation lowered, and he became tachycardic. The reaction was also almost immediately after starting the medication.

3. Discuss the differences between mild, moderate, and severe anaphylactic reactions.

Mild: Generalized to an area, such as skin and subQ tissue in one area generally. You would have erythema and edema.

Moderate: Organ involvement, you could see dyspnea, n/v, diaphoresis, chest tightness and more

Severe: Hypoxia, hypotension, and could lead to neurologic compromise.

4. Discuss the importance of follow-up assessment's post-reaction.

It is important to continue to monitor the patient because anaphylactic reactions can be delayed. We would want to make sure the patient does not have another one.

5. What further needs does Kenneth Bronson have at the end of the scenario that future nursing care should address?

Smoking cessation would be a future thing to address. Smoking puts the patient at risk for many complications.

6. Reflect on how you would communicate with family members in an emergency situation if they were present at the bedside.

I would calmly, and quickly explain to the family what is going on and ask them to wait in the waiting room or outside the room depending on what was wrong with the patient. In this case, I believe they could remain in the room.

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 what I would do next time is act more quickly, get the patient's head of bed up, put on the nonrebreather, and call the provider.

8. How could you prepare for clinical in order to plan ahead for potential patient emergencies?

I could prepare by quickly assessing life-threatening situations, and what actions I would need to take as a nurse. If I gave a patient a medication and they started complaining of a tightening throat and ect... I would know that I need to give epinephrine.