

Medical Case 4: Carl Shapiro

Guided Reflection Questions

1. How did the scenario make you feel?

The scenario made me feel nervous because I have never encountered this situation before. We have learned about what to do in lecture if this occurs however I was not confident in which order to take steps in.

2. What could have been the causes of Carl Shapiro's ventricular fibrillation?

The fact that Carl came into the ED with chest pain is a possible initial indicator of an MI. Also looking at his lab work, his troponin levels were elevated.

3. When performing CPR for Carl Shapiro, what are quality indicators you are performing resuscitation correctly?

Making sure whoever is performing CPR is doing 30 compressions to 2 breaths and allowing for chest recoil.

4. Discuss safety aspects during defibrillation.

During defibrillation, we want to make sure the pads have been placed in the appropriate places on the patient. Also, before initiating the shock, we must clear the patient and make sure no one is touching the patient.

5. If Carl Shapiro would have had return of spontaneous circulation (ROSC), what would your next interventions be?

Assessing his pulse to make sure he is getting perfused. Also, providing adequate oxygen.

6. What key elements would you include in the handoff report for this patient? Consider the SBAR (situation, background, assessment, recommendation) format.

Provide the physician with information such as he came into the ED with chest pain that occurred while exercising, the interventions that were performed which were nitroglycerin given sublingually that relieved his chest pain, assessment data that includes his labs such as elevated troponin levels, his ECG, and recommending the physician come see him to get a better look at what is going on and inform me of any additional interventions that need to be done to promote recovery.

7. If Carl Shapiro's family members had been present at the bedside during the arrest, describe what you could have done to support them during this crisis.

To support them, I would inform them what is going on and what would be done to save Carl's life. I might ask them to step out of the room to give the health care workers space and to allow them to perform necessary interventions to save Carl without distractions.

8. What would you do differently if you were to repeat this scenario? How would your patient care change?

I would monitor Carl more closely to depict any changes such as his ECG rhythm. I would call for the code team as fast as possible and initiate CPR right away. Also, I learned during vSIM to increase his oxygen to 10L/min. My patient care would not change except for the fact I needed to be able to intervene faster to control the ventricular fibrillation.