

Medical Case 3: Vincent Brody

Guided Reflection Questions

1. How did the scenario make you feel?

This scenario made me feel more prepared to care for a patient experiencing a pneumothorax and all of the sudden interventions that accompany it, as well as the many assessments involved.

2. When a patient develops a rapid onset of shortness of breath, what are the nurse's immediate priorities?

Immediately assess their airway and breathing effort, as well as their vital signs continuously and apply oxygen as needed, immediately notify the provider and bag patient if needed.

3. What assessment findings would indicate that the patient's condition is worsening?

Abnormal ABG levels, shortness of breath, chest pain, loss of consciousness, abnormal breathing pattern, decreased O2 sat.

4. Review Vincent Brody's laboratory results. Which results are abnormal? Discuss how these results relate to his clinical presentation and chronic disease process.

The patient was in respiratory acidosis initially with no compensation and mild hypoxemia. The abnormal levels consisted of a low Ph and a high PaCO₂. This occurs due to hyperventilation and the body's inability to remove all carbon dioxide from the lungs- a normal finding for a COPD patient.

5. What are safety considerations when caring for a patient with a chest tube?

Always receive a chest x ray beforehand along with signed consent, administer pain meds before insertion, receive post op chest x ray and consistently assess breathing, vital signs and lung sounds. Always monitor chest drainage system and test chest tube to ensure it is working.

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

Include symptoms the patient is exhibiting, what interventions you [performed and how they responded to those interventions. What their initial diagnosis is, any allergies, and

what you recommend this patient needs, as well as updated vital signs and meds previously given.

7. What patient teaching priorities would be important in the patient experiencing an acute exacerbation of COPD?

Teaching the patient to utilize their oxygen is very critical to help keep an exacerbation under control, as well as teaching them to sit up and use breathing treatments as needed.

8. For a patient with COPD who is stable, what resources would you recommend?

I would recommend COPD support groups to be able to speak with others who struggle in life with COPD, as well as online websites regarding education about COPD and tips to stay healthy and maintain stability.

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

I would remember to ask for signed consent and educate before medication administration of morphine along with the chest tube insertion. I would educate more to provide the patient with knowledge of their circumstances and the treatments needed.