

Medical Case 5: Skyler Hansen

Guided Reflection Questions

1. How did the scenario make you feel?

A: The scenario made me feel like I applied good nursing judgement. Reading the SBAR on the patient prior to starting the scenario I had an idea of what was going on with the patient and what things should be implemented to support the patient. Once the patient started to show signs of hypoglycemic crisis I acted quickly and felt confident in the interventions I chose.
2. What management options would have been appropriate if Skyler Hansen had been alert and could swallow?

A: If Skyler could have swallowed, juice could have been offered to the patient followed by a snack with complex carbohydrate and protein to level out his blood sugar.
3. If Skyler Hansen's acute hypoglycemic episode had not have been treated immediately, what could have happened?

A: If Skyler's hypoglycemic episode was not treated in a timely manner his blood sugar would have continued to drop and he would have lost consciousness, could have experienced seizure activity, and eventually died because of severe depletion of blood sugar.
4. If too much glucose were administered to Skyler Hansen while the health care team was trying to correct his blood glucose level, what could occur?

A: If too much glucose were administered during the hypoglycemic crisis, Skyler could have experienced a rebound effect and started showing signs of hyperglycemia.
5. What key elements would you include in the handoff report for this patient? Consider the SBAR (situation, background, assessment, recommendation) format.

A: Situation: 18-year-old male presented to ED. Presents with slurred speech, lightheadedness, drowsy, diaphoretic, irrational actions. Background: Type 1 diabetic diagnosed 6 months ago. Playing basketball with friends, last ate 5 hours ago. Situation: Normal vital signs, confused and disoriented upon assessment. BS low 40's, patient became unconscious and low oxygen. Placed IV and gave IV Dextrose IV push, 1mg IM Glucagon. Rechecked BS and in the 190's. Gave snack of cheese and crackers. Recommendations: continue to monitor blood sugar, educate patient on diabetic maintenance, s/s of hypo/hyperglycemia, importance of spacing food throughout the day.
6. Describe age-appropriate patient teaching for Skyler Hansen and resources that may be helpful to him.

A: Discuss signs to look for in hypo/hyperglycemia, discuss insulin usage and rotation of sites, discuss meals and when patient should be eating to prepare for activities. An app may be useful for this patient with educational content or as a tracking tool.
7. Discuss confidentiality and legal empowerment of 18-year-old patients such as in Skyler Hansen's case.

A: Since Skyler is of legal age, he has the right to confidentiality just as any other patient. If Skyler did not want his parents or friends knowing of what happened, then the healthcare team needs to respect that request of the patient and not notify parents. If Skyler wanted to refuse any of his treatments for any reason, he has that legal right to do so as well.
8. What would you do differently if you were to repeat this scenario? How would your patient care change?

A: I felt confident in my actions during the scenario, the only thing I may change if I had to repeat it would be my medication administration order. I originally gave the patient the IM Glucagon first before giving the IV Dextrose. I may have given the IV Dextrose first to see how my patient reacted to that before giving the IM injection which may not have needed to be given if the patient responded positively to the IV Dextrose.