

Pediatric Case 6: Eva Madison (Complex)

Guided Reflection Questions

Opening Questions

How did the simulated experience of Eva Madison's case make you feel?

I felt unsure of myself but also confident in my abilities to make her feel better and follow the providers orders

Describe the actions you felt went well in this scenario.

I feel I assessed Eva well and asked her appropriate questions for her age group.

Scenario Analysis Questions*

EBP List in order of priority your initial nursing actions identified for Eva Madison based on physical findings and family interaction.

-assess, admin ordered fluids, reassess, collect samples, educate on a better diet and prevention and signs to become aware of

EBP When initiating a fluid bolus for a dehydrated child, what type of fluid should be given and why?

-normal saline or 5% glucose in NS until labs have been drawn

EBP What complications might Eva Madison face if her symptoms are not recognized and treated in a timely manner?

-Hypovolemic shock if dehydration were to progress, skin breakdown from diarrhea, and fluid and electrolyte imbalances

PCC What measures should be initiated to decrease anxiety in Eva Madison's mother while simultaneously caring for Eva?

-Communication when doing anything and education on why you are doing these things

S/QI Reflect on ways to improve safety and quality of care based on your experience with Eva Madison's case.

-A further assessment of my findings once something was off

* The Scenario Analysis Questions are correlated to the Quality and Safety Education for Nurses (QSEN) competencies: Patient-Centered Care (PCC), Teamwork and Collaboration (T&C), Evidence-Based Practice (EBP), Quality Improvement (QI), Safety (S), and Informatics (I). Find more information at: <http://qsen.org/>

S/QI What infection control measures should be taken in this case and why?

-contact precautions due to the stool sample and urinalysis and being close and touching the patient

T&C/I What key elements would you include in the handoff report for this patient? Consider the situation-background-assessment-recommendation (SBAR) format.

- S Eva Madison continuing of care of dehydration from vomiting and diarrhea
- B Eva came into the emergency room after v/d for 3 days and a lack of urination. Fluids were administered down stairs. Patient weighed 21.8 kg a month ago and is now at 20.5 Kg. I have started an IV of D5 1/2 Ns at 62mL/hr.
- A Respirations were fast but they were equal and clear, heart rate was in the 180s but slowly coming down after those fluids. SPO2 was 97% and temp was around 99. Complained of stomach pain and cramping. Bowels were hyperactive. Mucous membranes were dry and skin turgor was tenting.
- R I think we should draw some labs up to further assess electrolyte imbalances and continue monitoring hydration status and pain.

Concluding Questions

Reflecting on Eva Madison's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?

I would contact the primary care provider to see if there was any sort of pain medication that we could give or something for her stomach cramps. I also would approach this with more investigation and asking the parents more hx so I know how to proceed from there.

Describe how you would apply the knowledge and skills you obtained in Eva Madison's case to an actual patient care situation.

I would apply the knowledge that you aren't supposed to give a dehydrated patient fruit juice because of the high levels of sugar. I was not aware of this beforehand.