Pediatric Case 6: Eva Madison (Complex)

Guided Reflection Questions

Brooke Tucker

Opening Questions

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

I like virtual simulation because it's a good way to get experience without having to be around real people and get embarrassed when making mistakes. I got a little stressed after I administered the D5W that was ordered because I wasn't sure what I was supposed to do next.

Describe the actions you felt went well in this scenario.

Everything went fine until I thought I didn't do enough so I stared doing things that weren't ordered. Once I found out I didn't need to do any extra stuff I got a 100 on the scenario.

Scenario Analysis Questions[*]

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

Making sure I had the correct pt. and making sure the person in the room was a relative. Then I wanted to do a head-to-toe assessment and obtain her vitals to see how critical of a state she was in. After I determined her to be overall stable, I asked about allergies so I could give her what was ordered.

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

Normal saline should be given first because it contains sodium and chloride so it replaces fluid loss and the patient had been vomiting.

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

Possibly cardiac issues due to her potassium levels as well as kidney issues.

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

---

[*] *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/

Active listening to her concerns, answering any questions she may have, tell her the hospital has a Chaplain that she can speak to.

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

I need to not perform any unnecessary interventions or perform things that were not ordered. I think the first time I did the simulation I didn't verify that the family member was actually her mother. I also didn't inform the mom on her daughter's condition.

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

Contact precaution. Gown and gloves so the nurse doesn't spread it to any other patients.

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

5 year old female pt. c/o vomiting, diarrhea for the past few days. She has been unable to keep fluid down and has no output since 2000. Pt. was given a bolus of NS before I came in and was complaining of abd. Pain 4/10 on FACES scale. I hung D5W ¼ NS at (time) at a rate of 62mL per hour. Vitals are: pulse of 185, tympanic temp. of 99 F, BP of 80/64, O2 at 94% RA, and RR 30. Dry mucous membranes and delayed capillary refill. Provider ordered strict I&Os, daily weight checks, and CBC in the morning.

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 not do anything that was not ordered by the provider. I was being extra cautious and put up seizure pads and other things like that. I would also do least invasive to most invasive which I did for the most part but I forgot at times.

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

I would know recognize signs of dehydration faster than I would have before doing the simulations. I will also include the parent and perform teaching/education.