

Guided Reflection Questions for Surgical Case 2: Stan Checketts

Opening Questions

How did the scenario make you feel?

I thought the scenario was fairly straight forward, the orders made sense and it was an educational simulation. I did click the wrong things accidentally a few times which messed with my score, so I need to slow down and take my time.

Scenario Analysis Questions*

PCC/EBP/S When reflecting on the care of Stan Checketts, what are signs and symptoms you can assess in the next patient you care for who might be at risk for dehydration?

Signs and symptoms of dehydration include: dry mouth and tongue, no tears (if crying), sunken eyes and cheeks, dark urine, lightheadedness, fatigue, headache.

EBP/QI Discuss signs and symptoms of hypovolemic shock.

Signs and symptoms of hypovolemic shock include: agitation, cold clammy skin, confusion, decreased urine output, weakness, pallor, tachypnea, bleeding, rapid heart beat and low blood pressure.

PCC/EBP Discuss assessment and expected findings in a small bowel obstruction.

A patient suffering from a small bowel obstruction will likely have not been able to have a bowel movement or pass flatus, they will experience abdominal pain, possibly abdominal distention, hypoactive bowel sounds, and nausea and vomiting.

PCC/S/I/EBP What key questions does the nurse ask in an acute abdominal pain assessment?

The nurse will ask about the location of the pain, ask to describe the type of pain (sharp, stabbing, cramps, etc.), when the patient's last bowel movement was, if anything relieves the pain, if anything makes the pain worse.

PCC/EBP/S In evaluating Stan Checketts' laboratory values, what if any abnormalities did you find?

Stan's H&H, WBC, CL and Na levels were all elevated.

PCC/EBP/S Stan Checketts had a nasogastric (NG) tube inserted for gastric decompression. What are the preferred methods for confirming placement of the NG tube?

The best way to confirm NG tube placement is an abdominal X-ray, you can also auscultate the abdomen.

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

I would indicate that he had come in for a small bowel obstruction that caused him to go into hypovolemic shock and dehydration and that our main priority at the moment was fluid replacement and that we need to continue to monitor his urine and NG tube output and continue to draw labs to check for further changes in electrolytes.

Concluding Questions

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

I would focus on my critical thinking a little bit more and drawing connections between why he was experiencing hypovolemic shock as a result of the vomiting caused by the intestinal obstruction, and I would more readily assess for signs of dehydration. Mainly I need to focus on putting the pieces together of the whole patient not just one specific problem.

** 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/>*