

Guided Reflection Questions for Surgical Scenario 1: Marilyn Hughes

Opening Phase

How did the scenario make you feel?

In the beginning, I felt like I was performing everything I should have done. I did have attempts that were not perfect, but I finally understood what I was missing. As so I got the hang of it, I realize the important pieces that were missing. The reason to lower the extremity and to see if the patient can wiggle her toes. This would also include if she can feel both of her lower extremities bilaterally.

Scenario Analysis Questions*

PCC/EBP/S How would you recognize that Marilyn Hughes' condition was deteriorating?

To recognize that the patient condition was deteriorating was her vital signs. They were increased due to the pain she was having. When doing the intervention for her neurovascular assessment, I concluded that her bandage was too tight. I needed to follow up with some questions about her extremities. Was she able to feel her toes and could she wiggle them? Bilaterally, her effected extremity was deteriorating, and I needed to do something about it.

PCC/S What interventions exist to alleviate compartment syndrome, and what assessments indicate improved perfusion to the extremity?

The interventions that were conducted were to unelevated the extremality. She was not perfusing to her affected leg, and I needed to act. When lowering the affected extremity to heart level may improve arterial perfusion.

EBP/S/PCC Why is it important to maintain the limb at heart level versus elevating it above heart level?

Stated above, the extremity was needed to be maintained at heart level to improve arterial perfusion. This means to get oxygen to the extremity.

PCC/EBP/S What could have happened in this scenario if Marilyn Hughes' condition was not treated expediently?

If her condition was not treated, her affected extremity could lead to prolonged decrease in circulation and the extremity could have been lost. Overall, the assessments and vital signs are VITAL. Her complication can be prevented.

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

For SBAR, I would include in the situation of the patient of who she is, why she is in the hospital, and state that she is post op. The background would include more detail about how the treatment is going and what needs to be addressed. In the assessment would include vital signs and what complication is arising. The recommendation would include the patient to lower the affected extremity and how compartment syndrome may be present. I would then state I would follow up with the patients' vital signs, pain, and overall perfusion of the extremity.

Concluding Questions

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

When I did repeat the scenario, I knew that I was missing some pieces for the neurovascular assessment. Instead of going straight into vital signs, I should have addressed her pain more seriously and went straight to assessing the bandage. I knew she was in pain but after assessing the dressing, I knew exactly why. Her vital signs reflected to the pain she was experiencing which added to my assessment data.