

Guided Reflection Questions for Surgical Case 4: Vernon Watkins

Opening Questions

How did the scenario make you feel?

I had to take this scenario three times, mainly because of the dosage calculation. It made me feel more confident in taking care of someone that might be having a pulmonary embolism.

Scenario Analysis Questions*

PCC/EBP/S Discuss your use of adjunct oxygen therapy for this patient, including why you chose a particular oxygen device, rate, and flow.

I chose the wrong oxygen device at first because of the flow rate, but I corrected it with the non-rebreather. I knew that he needed a high flow rate because he was having trouble breathing.

PCC Discuss Vernon Watkins' arterial blood gas (ABG) analysis result and explain what caused this result.

His results were respiratory alkalosis possibly caused by him having increased respirations and his anxiety level.

S/EBP Discuss the use of a heparin nomogram (guideline for heparin titration) and safety related to this intervention.

The goal is to titrate the heparin to keep the patients PTT level between 60-100 seconds. The patients PTT level should be checked routinely, and the heparin drip adjusted accordingly.

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

That the patient is having an acute pulmonary embolism after post op surgery. Patient came into the ED with abdominal pain and was taken to surgery for a bowel perforation. The dressing looks good and he has bowel sounds in all four quadrants, but he started to complain of pain in his leg and is refusing to ambulate. He started to have trouble breathing so I placed a non-rebreather on him running at 10L. The provider ordered a Heparin drip but he is still complaining of having trouble breathing. I notified the provider of this again and he is on his way. I recommend just keeping a close eye on him and to see what the provider's next step is.

PCC Discuss why Vernon Watkins may be at risk for right ventricular failure as a complication of his pulmonary embolism (PE).

The blood clot in his lungs is impeding the blood flow from the right ventricle to the left ventricle.

PCC Discuss how you would communicate with the patient in acute respiratory distress in this emergency situation and what effective communication techniques you would use.
I would advise the patient about everything that is going on in a calm manner. I would reassure him that we are doing everything to help him feel more comfortable.

Concluding Questions

Consider what would have happened if Vernon Watkins' family members had been present at the bedside, and describe how you would have supported them during this acute episode. What would you do differently if you were to repeat this scenario? How would your patient care change?

I would verbalize each step before, or as I am performing it, so that family knows what is going on. I would keep them informed and be available for their questions. If they became upset, or were too much to handle, I would ask another nurse to assist me.

* 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/>