

Guided Reflection Questions for Medical Case 1: Kenneth Bronson

Opening Questions

How did the scenario make you feel?

I was a little bit frantic when my patient started having an allergic reaction and none of my interventions seemed to be working but after some time passed, his vital signs and lung sounds began to return to normal and I was able to relax.

Scenario Analysis Questions*

PCC, EBP What signs and symptoms led you to the conclusion that Kenneth Bronson was experiencing an allergic reaction? He said his throat was tight and he started wheezing more than he was originally. He also had a rash on his chest and his vital signs increased.

PCC, EBP Discuss the differences between mild, moderate, and severe anaphylactic reactions. A mild reaction can be a rash, localized itching, and some congestion or runny nose. A moderate reaction can be widespread itching, difficulty breathing, and swelling. A severe reaction is very serious and may include swelling of the mouth/throat, hives, vomiting, diarrhea, and confusion/dizziness. A severe reaction requires immediate treatment.

EBP/S Discuss the importance of follow-up assessments post-reaction. Anaphylactic reactions can cause post-reactions up to 5 days after the initial reaction and these reactions can be just as dangerous as the original reaction.

Concluding Questions

What further needs does Kenneth Bronson have at the end of the scenario that future nursing care should address?

Educate him that he does have an allergy to some meds and teach him to let future healthcare providers know about it.

Reflect on how you would communicate with family members in an emergency situation if they were present at the bedside.

Educate them that the patient is having an allergic reaction and we will be giving the patient meds and other interventions in order to stop the reaction. Also teach them that there may be several people in and out of the room and ask them to please stand out of the way until the patient is stable.

After completing the simulation and reflecting on your experience, what would you do differently (or the same) for the patient experiencing acute respiratory distress?

I would keep most of my treatment plan as it was. I will, however, keep in mind that the meds that I give will not work immediately and it will take a few minutes for the patient start to return to baseline.

How could you prepare for clinical to anticipate potential patient emergencies?

I could consider different interventions and care plans for different emergencies.

* *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/>*