

Guided Reflection Questions for Surgical Case 2: Stan Checketts

Opening Questions

How did the scenario make you feel?

It made me feel organized having a background of the patient, following the physician's orders as well as using my critical thinking. I was able to successfully accomplish my care to the patient by understanding that I had limited time and trying to do assessment and interventions that were most important.

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? **poor skin turgor, low blood pressure, high heart rate, dry mucosal membranes.**

EBP/QI Discuss signs and symptoms of hypovolemic shock. **Decrease level of consciousness, cool clammy skin, hypotension, tachycardia, tachypnea.**

PCC/EBP Discuss assessment and expected findings in a small bowel obstruction. **Abdominal pain, nausea, decrease flatus, constipation.**

PCC/S/I/EBP What key questions does the nurse ask in an acute abdominal pain assessment? **What were you doing when pain started, Pain level from 1 to 10 scale, locations, describe the pain, does anything make it feel better, when was the last bowel movement, when was the last meal and what was it.**

PCC/EBP/S In evaluating Stan Checketts' laboratory values, what if any abnormalities did you find? **Sodium, urea nitrogen, creatinine, hemoglobin, hematocrit, wbc.**

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? **Abdominal x-ray**

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. **Stan Checketts, 52 y/o, arrived at the ED reporting severe abd pain, n/v, abd is distended, poor skin turgor, dry mucus membranes, currently NPO, has an NG tube, has not urinated since yesterday, auscultated hyperactive bowel sounds, last vital signs ECG: Sinus tachycardia. Heart rate: 123. Pulse: Present. Blood pressure: 110/78 mm Hg. Respiration: 29. Conscious state: Appropriate. SpO2: 93%. Temp: 99 F (37 C). Was given ondansetron 4mg and morphine 2mg for nausea and pain PRN. Right forearm IV site, IV bolus 500mL of normal saline.**

Concluding Questions

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

Something I missed was after given nausea medicine, I missed to reassess patient of nausea. I would want to reevaluate my patient to make sure the medicine worked and they are feeling better.

* 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/>