

Medical Case 5: Skyler Hansen

Guided Reflection Questions

1. How did the scenario make you feel?
In this scenario I had a little more confidence. I was worried about the patient crashing.
2. What management options would have been appropriate if Skyler Hansen had been alert and could swallow? **I would have been able to give the patient something by mouth such as juice and carbs.**
3. If Skyler Hansen's acute hypoglycemic episode had not have been treated immediately, what could have happened? **The patient's blood sugar would have continued to drop, patient would have become unresponsive, had a seizure, and would have possibly needed to be resuscitated. This would have been a medical emergency.**
4. If too much glucose were administered to Skyler Hansen while the health care team was trying to correct his blood glucose level, what could occur? **Normally the body is better at dealing with hyperglycemia vs. hypoglycemia. If not treated hyperglycemia long-term can cause damage to the eyes, kidneys and nerves and a patient may go into DKA. We would have to focus our care on trying to bring the patients sugar down. With hyperglycemia this is also affects the way a patient body heals.**
5. What key elements would you include in the handoff report for this patient? Consider the SBAR (situation, background, assessment, recommendation) format. **Patient 18yr old male with a History of DM Type 1 was admitted for hypoglycemia. Patient was playing basketball and became lightheaded. Upon my assessment he was not oriented to place but would answer questions. Initial Blood glucose was 58. I called the HCP and received orders. Iv to right was started and administered 50ml of 50% dextrose in water. Patient became more aroused and oriented x3. Patients' blood glucose was 200. Provided carbs, protein, and education to the patient. Continue to monitor blood glucose and vital signs for any changes.**
6. Describe age-appropriate patient teaching for Skyler Hansen and resources that may be helpful to him. I would educate the patient on the signs and symptoms of hypoglycemia and how to treat it. Teach the patient how to use a glucose monitor. Provide a referral to for dietician or nutritionist to come talk to the patient as well.
7. Discuss confidentiality and legal empowerment of 18-year-old patients such as in Skyler Hansen's case. **Since the patient is 18, he is considered an adult and can sign any forms without a parent. The patient would also have to add his parents or anyone he prefers on the HIPPA forms in case they try to call or ask about his medical concerns. No information can be given to anyone not on the HIPPA form.**
8. What would you do differently if you were to repeat this scenario? How would your patient care change? **I would first try to arouse the patient then right after getting a blood glucose call the provider to get orders. I would also do a neuro assessment shortly after he wakes up since he had mentioned he did not know where he was at. Continue to monitor his blood glucose**

