

## Pediatric Case 1: Jackson Weber (Core)

### Guided Reflection Questions

#### Opening Questions

How did the simulated experience of Jackson Weber's case make you feel?

Honestly, I felt fine with the simulation up until Jackson actually started having a seizure. I have had a tonic-clonic seizure myself, so I know first hand how intense, painful, and just down right scary they can be. When they happen, you want to do everything in your power to make them stop, but sometimes you just have to wait them out.

Describe the actions you felt went well in this scenario.

I think the way I handled the situation once he started seizing in general went well. I stayed calm and did what I knew was necessary in order to best protect him and keep him breathing.

#### Scenario Analysis Questions<sup>\*</sup>

**EBP/S** What priority problem did you identify for Jackson Weber?

I didn't feel like the situation he was in was very serious to him. That could've just have been because of the scenario itself though. It also didn't seem as important to mom considering she hadn't made the time to bring him in to the neurologist in around 15 months. He's not receiving the routine care/check-ups that he should be receiving considering the severity of the seizures he's having.

**EBP** What complications might Jackson Weber face if safety precautions are not taken during the seizure activity and if treatment is not implemented after the seizure?

If safety precautions aren't taken during a moment of seizure activity, Jackson could aspirate. He could lose his airway and stop breathing. If not turned onto his side he could choke to death. Could potentially hit his head and or bite through his tongue. After the seizure, if treatment is not implemented, Jackson could have others without any real known cause and it could out him at risk for even more injuries.

**PCC** What should the nurse teach Jackson Weber's mother regarding the ongoing care of his condition?

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<sup>\*</sup> 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/>

Jackson needs routine follow-up appointments with his neurologist. If these seizures are suddenly occurring again like this, then something is likely not right. He needs to be monitored and if possible to catch what might trigger the seizure, that would be helpful as well. Either way, Jackson's mother needs to be made aware of the severity of her son's current condition.

**PCC/S** What seizure precautions should be taken by the nurse in anticipation of and at the onset of Jackson Weber's seizure? How might such precautions vary from hospital to hospital?

Seizure pads on the side rails of the beds, suction set-up and oxygen set-up plugged in and ready to go at the patient's bedside. Some hospitals may have a sitter in the room with the patient to watch them, some hospitals may even have a camera in the room and some hospitals will just have the seizure pads set up. It depends on the facility and the severity of the patient's condition/

**PCC/S** Describe strategies to empower Jackson Weber and his mother in the management of his seizures.

Supply them with support groups outside of the hospital to where they may be able to connect with other people the same age as Jackson, experiencing the same things. Provide them with as much information that we have at our facility in regards to his seizure activity. Maybe even get case management involved to try to figure out a game plan for the next time Jackson needs to go to the doctor and mom says she can't take him because of work.

**T&C** List potential team members in Jackson Weber's care. (Explain your answer.)

Neuro - because of his seizure activity.

Respiratory therapy - due to the potential for him desating during and after his seizure

Case management - to help figure out travel to and from doctor's appointments

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

Jackson's mother is a single mother trying to make ends meet and because of this, she's been able to get him to and from doctor's appointments. It doesn't seem as though they fully understand the severity of the situation he is in, so education is going to be key! Providing them with as many resources as possible will likely be the most beneficial.

### **Concluding Questions**

Reflecting on Jackson Weber's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?

I ran through the simulation twice. The first time, trying to catch my bearings and then the second time, really running through the scenario. Because of that, I don't feel as though I would've changed anything.

Describe how you would apply the knowledge and skills you obtained in Jackson Weber's case to an actual patient care situation.

I have patients on my floor at work frequently who are on seizure precautions. I've been fortunate enough to have been able to avoid seeing a patient seizing so far. However, being someone who's had a tonic-clonic seizure myself, I've tried to be very tuned in when I see anyone with those pads on because I know they're no fun but I also understand that they serve a very important purpose.