

Mental Health Case: Randy Adams

Guided Reflection Questions

Opening Questions

How did the simulated experience of Randy Adams' case make you feel?

I was pleasantly surprised with my confidence while going through the simulation experience. It opened my eyes to some of what it is like to be a veteran and the PTSD that is associated with it. It was very infuriating to think about the fact that proper care wasn't really provided by the Veterans Affairs, and that he was not willing to work with them any longer. Thankfully Randy had a very supportive wife but this may not be the case for everyone, this simulation really made me think about the veterans who don't have someone who can help them find the proper care especially if the VA is not doing its job. I am a spouse of a military member so this really hit home for me and was honestly very triggering because this could very easily be a situation my family would have to deal with.

Talk about what went well in the scenario.

I think I did a good job at coming into the scenario with a plan of what I was wanting to accomplish in my time frame. I was able to successfully conduct 3 separate PTSD screening tools to be able to compare them to the screenings that were conducted at the time of the patient's injury. I think that I was able to judge the severity of the situation and provide the appropriate education to the patient and his wife. I was able to deliver the information that was within my scope of practice without stepping on the physician's toes.

Reflecting on Randy Adams' case, were there any actions you would do differently? If so, what were these actions and why?

I think that I could have addressed the spouse and her role more had I had the time, I dismissed the patient when he suggested I ask his wife one of the questions. I realize now that this was not therapeutic especially when I had already verified with the patient that he wanted her to be present and participate in his care. I also think that there were some responses that he gave that may have warranted more questioning but the simulation did not allow for it. I think that in reality I would like to establish more of a baseline and determine what was different especially regarding what his PTSD was like prior to his accident and then what it is like now.

Scenario Analysis Questions*

PCC/S What could occur if Randy Adams kept taking his sumatriptan succinate?

Sumatriptan succinate is not meant to be a long term or preventive migraine treatment it is only meant for acute migraine attacks. You can get what is known as medication overuse headache which will cause headaches when the medication wears off. Patients using Sumatriptan succinate more than 10 days per month is considered overuse and will cause these headaches. If

migranes persist it is important to advise your patient to discuss other treatment options with their physician.

PCC/I Discuss the types of support groups and resources that would be beneficial to Randy Adams and his family.

Support groups for veterans with PTSD will be very beneficial for Randy to help him. There are also support groups for military spouses that would be beneficial to Randy's wife. They could also participate in family or marital counseling and could find coping mechanisms to use within the family dynamic and the marital relationship. There might also be play groups in their area for military families and this could be something that Randy's wife to take their children so that Randy can rest and recover in a quiet environment.

I What benefit services are available for veterans with PTSD?

According to the Veterans Affairs website there is a REACH program that targets any and all veterans needs. I went to the website and you can select your needs and it will pull up programs that may be able to help for example it had a directory of local support groups for veterans as well as their spouses. There were also online support groups for people who may be interested in that. It also pulled up depression and anxiety screening tools to do self evaluations and put you in contact with physicians covered by military insurances.

PCC What discharge teaching needs to be given to Randy Adams' wife related to his care?

She should know to watch for changes in his cognitive status as well as level of consciousness because of the medications he is on. She should also know that these medications are not to just be stopped at the drop of a hat and that if her husband is having concerns about them he should contact his physician instead of just stopping them. She should also understand the severity of a PTSD diagnosis and what it could mean for her and her family since they have children. She should be encouraged to stay involved in his care and to participate in doctor and therapy visits.

Concluding Questions

How would you apply the skills and knowledge gained in the Randy Adams case to an actual patient situation in different acute care units (emergency room, intensive care unit, obstetrics unit, etc.)?

I think more than anything I learned the importance of a spouse or support person to patients. It is vital that we keep them involved and educate them on what is going on with the patient. At the the end of the day typically our patients are going to have families that want to care for them and we need to create an environment that is conducive to that. I also learned some of the resources available to military families and how to get my patients in contact with them. This is something that can be used across all acute care units because of the vast population of military members in the country.

* *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/>*