

Pediatric Case 4: Sabina Vasquez (Complex)

Guided Reflection Questions

Opening Questions

How did the simulated experience of Sabina Vasquez's case make you feel?

It made me think and maybe feel overwhelmed at first, but then I started getting into it.

Describe the actions you felt went well in this scenario.

I think the second start I had went well with recognizing my assessment findings and pairing them with an intervention. I think calling the provider for a one time order was a good idea, and increasing the oxygen with a albuterol treatment was the appropriate intervention because the vitals responded.

Scenario Analysis Questions^{*}

EBP List in order of priority your initial nursing actions for Sabina Vasquez based on physical findings and family interaction.

The priority intervention would be to increase the oxygen saturation by giving a breathing treatment and upping the liters via nasal cannula. Then the goal is to bring down the fever with antipyretics and get her antibiotics started.

EBP What complications might Sabina Vasquez face if her symptoms are not recognized and if care is not initiated in a timely manner?

She could go into further respiratory distress which would show a drop in oxygen saturation, increased respirations, and tachycardia resulting in increased work on the body while she already has pneumonia. Then complete respiratory failure if unnoticed which leads to death because of the bodies need for oxygen.

PCC What actions should be taken to ensure the delivery of appropriate information to Sabina Vasquez's mother?

An approved interpreter should be used for all teaching to verify for understanding and so the child can get correct care after discharge.

^{*} 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/>

PCC Recognizing the acuity of the situation, how would you include Sabina Vasquez and her mother in the decision-making process?

Respiratory distress is a high acuity situation, but the mother can be included along the way by being taught what to do in these cases. The mother can be shown how to work the nebulizer, assist in distraction or comfort positioning. The most important thing is the respiratory status of the child and they can be most involved after her status has improved. Ultimately teaching them both how to manage asthma exacerbations will promote the most independence in care and make them feel like they have a say in their care. Along with answering any questions that may be had.

S/QI Reflect on ways to improve safety and quality of care based on your experience with Sabina Vasquez's case.

With cases like this it is important to make sure room is set up with oxygen, suction, vitals machine and whatever else the expected patient could need. There is definitely a need for continuous pulse oximetry and hourly rounding.

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

5 year old admitted with pneumonia. Hx of asthma and inhaler use to manage. Fever of 102, given acetaminophen, needs to be reassessed. Oxygen sat dropped earlier in shift to 94 able to be brought back to 97 with 4L and nebulizer treatment. Antibiotics started today. No labs drawn yet, right arm IV access in ACL. D5 running with piggyback of azithromycin. Should remain on continuous pulse oximetry, and there's standing orders in case she dips down again. Diet regular when not having difficulty breathing. Daily weight and height noted earlier, no known allergies. Mom may need translator.

QI As you begin to think about discharge planning for Sabina Vasquez and her family, what teaching needs to be provided?

How to work all equipment needed at home (nebulizer and inhaler), the importance of follow up appointment and finishing antibiotics, and encourage fluids to break down thick mucous secretions. Also signs to look for that indicate need for medical attention and respiratory distress.

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Concluding Questions

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

On my first attempt I should have read my orders better, and just did a focused respiratory assessment due to the urgency of the situation. The second go around I did a good job at assessing and intervening.

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

With these skills I can recognize distress quicker and intervene. These orders are exactly what a real provider might order, and the intervention would be similar if not the same. The main priority is to get them breathing regularly again and to get their saturation up.