

Guided Reflection Questions for Medical Case 1: Kenneth Bronson

Opening Questions

How did the scenario make you feel?

At first, since I knew he had pneumonia and that I was probably only going to have to admin antibiotics, I didn't feel worried or anything. However, that quickly changed when he had an anaphylactic reaction to Ceftriaxone. Everything after that happened so quickly. I definitely needed to be on my toes and act quickly so it would be fatal. It's hard not to panic in those situations and its best to call HCP stat! I followed the orders and tried to help him reach a normal O2 level. And make certain that his airway wasn't constricted anymore.

Scenario Analysis Questions*

PCC, EBP What signs and symptoms led you to the conclusion that Kenneth Bronson was experiencing an allergic reaction? As soon as he said that something felt really wrong all of a sudden just shortly after administering the Ceftriaxone.

PCC, EBP Discuss the differences between mild, moderate, and severe anaphylactic reactions.

Mild: skin rash, hives, itching, flushed face, pale skin, runny nose/sneezing

Moderate: Swelling of lips, face, and eyes, Hives more heavily present, vomiting, Low BP, weak pulse, dizziness

Severe: Syncope, dyspnea- fast and shallow breathing, wheezing, tachycardia, clammy skin, LOC decreased.

EBP/S Discuss the importance of follow-up assessments post-reaction. - It's important to not assume that just because they look or feel better and no longer having an allergic reaction, that you stay with them and monitor them closely because there could be a chance of a delayed reaction. It never hurts to reassess their respiratory rate and auscultate lung sounds.

Concluding Questions

What further needs does Kenneth Bronson have at the end of the scenario that future nursing care should address?

Closely monitor him just in case he could have a reaction again.

Reflect on how you would communicate with family members in an emergency situation if they were present at the bedside.

I would first tell them to not panic and to call for help stat. Afterwards, I would provide teaching on why such reactions take place and what is done to treat it.

After completing the simulation and reflecting on your experience, what would you do differently (or the same) for the patient experiencing acute respiratory distress?

I think its important to not panic and call for help as soon as possible. You have to act quick in these situations- its detrimental to the patient living or dying. Follow all provider orders and if in doubt, ask someone else for help.

How could you prepare for clinical to anticipate potential patient emergencies?

Know which complications could arise in the clinical setting and what treatments or methods are used to manage those emergency situations. We never know what can happen, one minute your patient is fine and 10 seconds later they can't breathe. As a nurse, you can know certain interventions that could help or if not, sure you can always call the provider. Nurses should always use their best judgement and critical skills and always keep the patient's safety in mind.

* *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/>*