

Guided Reflection Questions for Surgical Case 2: Stan Checketts

Opening Questions

How did the scenario make you feel?

- I felt better with this scenario than I did with the other one. I felt as though I didn't struggle so to say with this one than I did with the previous scenario.

Scenario Analysis Questions*

PCC/EBP/S When reflecting on the care of Stan Checketts, what are signs and symptoms you can assess in the next patient you care for who might be at risk for dehydration?

- Dry mucous membranes, N/V/D, abnormal skin turgor, no urination, weakness.

EBP/QI Discuss signs and symptoms of hypovolemic shock.

- Cool, clammy skin, confusion, no urine output, rapid respirations, sweating.

PCC/EBP Discuss assessment and expected findings in a small bowel obstruction.

- Abdominal pain, abdominal distention, not passing gas, abdominal cramping on and off, constipation.

PCC/S/I/EBP What key questions does the nurse ask in an acute abdominal pain assessment?

- How often does the pain happen? Does anything make the pain worse? Does anything make it better? Can you describe the pain?

PCC/EBP/S In evaluating Stan Checketts' laboratory values, what if any abnormalities did you find?

- Hcb, Hct, hyponatremia, metabolic alkalosis.

PCC/EBP/S Stan Checketts had a nasogastric (NG) tube inserted for gastric decompression. What are the preferred methods for confirming placement of the NG tube?

- The preferred method for confirming placement of a NG tube would be an x-ray.

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

- Stan Checketts is here for a small bowel obstruction. He has an allergy to Demerol. He complained of not urinating, having dry mucous membranes, and vomiting. He was given a fluid bolus, 2mg morphine for pain, 4mg ondansetron for nausea and has a 3 lead EKG. He has a NG tube at low intermittent suction and is NPO. He had labs and

an abdominal x-ray done. He is on 2L nasal cannula for SPO2 >92. Continue to monitor for any further complications.

Concluding Questions

What would you do differently if you were to repeat this scenario? How would your patient care change?

- I would make sure I did my respiration count and see how the patient was breathing. I don't think it would change a lot of what I did in the scenario but it is a crucial assessment that I need to do.

* *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/>*