

Guided Reflection Questions for Medical Case 2: Jennifer Hoffman

Opening Questions

How did the scenario make you feel?

This scenario felt familiar to me. I've been in her shoes many times. V-sim stresses me out regardless of the situation I'm given, but I liked her scenario overall.

Scenario Analysis Questions*

PCC What assessment findings would indicate that the patient's condition is worsening?
Dropping O2 sat, increased wheezes, increase in pallor or even cyanosis, presence of retractions and accessory muscle breathing.

PCC When a patient develops a rapid onset of shortness of breath, what are the nurse's immediate priorities?
I would want to see their SaO2 and listen to their lungs for priority assessment. As far as comfort goes, I would want to apply O2 if I see a dropping sat and sit them up. I might have them do some tripodding or pursed lip breathing.

PCC/I Review Jennifer Hoffman's laboratory results. Identify which results are abnormal and discuss how this relates to her clinical presentation and the disease process.
She was in respiratory acidosis, meaning her pH was low while her CO2 was high. She was retaining CO2 due to the asthma exacerbation, which made her acidotic. Her shortness of breath, pallor, wheezes, all supported these lab results.

Concluding Questions

What communication techniques are important for an extremely anxious patient who is having difficulty breathing?

Using a calming tone but being very direct. I think it's important to be direct with any patient, but using the correct tone makes all the difference.

What patient teaching priorities would be important for the patient who has experienced an acute exacerbation of asthma?

Keeping a rescue inhaler on hand, taking medications as prescribed even if asymptomatic, avoiding triggers such as allergens or rigorous activity. It is important that the patient knows when to come in if they are having an asthma attack.

What discharge instructions regarding home medications would you provide the patient related to medications to use to alleviate symptoms of an acute asthma attack?

As I stated above, taking medications as prescribed is very important. Knowing how to use the rescue inhaler is very important (shake before use, inhale on expulsion of medication, hold breath for 10 seconds, repeat in 2 minutes if needed, etc) but also how to use nebulized albuterol if that is a home medication. This might require case management to get a home nebulizer.

What resources would you recommend for the patient experiencing asthma?

I would recommend checking the allergens every morning to know what kind of day it might be.

I would also recommend activity groups with other asthmatics so that the activities aren't triggering for her lungs (walking groups, indoor activities, etc).

What is the importance of the asthma action plan in managing the care of a patient with asthma?

It's extremely important for the patient to know what to do and when in order to take care of themselves. It's also important that everyone on the care team is on the same page as far as the care plan is concerned.

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

I would've applied higher oxygenation sooner, but Vsim doesn't let me do that. I also would've used a peak flow to measure her expiration as an assessment tool for interventions.

** 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/>*