

## Meredith Edwards

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Guided Reflection Questions for Surgical Case 2: Stan Checketts

### Opening Questions

How did the scenario make you feel?

This scenario made me feel that I need to pay close attention to the physician's orders and there were many tasks that needed to be completed for this patient.

### 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?

I would look for dry mucous, thirst, decreased urine output, poor skin turgor and changes to their heart rate/BP.

**EBP/QI** Discuss signs and symptoms of hypovolemic shock.  
The symptoms of hypovolemic shock are weakness, fatigue, thirst, increased heart rate, mental confusion, hypotension, and pallor.

**PCC/EBP** Discuss assessment and expected findings in a small bowel obstruction.  
With a small bowel obstruction, you would be monitoring emesis consistency/color/amount, Skin turgor for dehydration, pain level, bloating of the abdomen, output of the NG tube, auscultation of the bowels. You would find loss of appetite, constipation, vomiting, swelling in the abdomen, and inability to pass gas.

**PCC/S/I/EBP** What key questions does the nurse ask in an acute abdominal pain assessment?  
The nurse would ask the patient to rate their pain on a scale of 1-10, point to the location of pain, ask how long they have been experiencing the pain, if anything makes the pain worse or better. The nurse would also auscultate their bowel sounds, look at the abdomen, and palpitate if the patient could tolerate this and there was no pulsing in this area.

**PCC/EBP/S** In evaluating Stan Checketts' laboratory values, what if any abnormalities did you find?  
There was abnormalities with his electrolytes such as his sodium, his WBC was elevated, his HCT and HGB were abnormal, his creatinine was also abnormal.

**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 of confirming his NG placement is 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.

I would ensure that the incoming nurse knew why he is in the hospital, current symptoms, current treatments, labs, scans, IV fluids, medications, interventions with oxygen, and ECG readings. I would discuss the patient's response to different interventions and improvements.

### **Concluding Questions**

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

If I was to do this scenario again I would not have administered the second dose of ondansetron the second time due to it being too soon. I would have educated the patient about the scheduling of the ondansetron and the need to follow the orders from the physician.

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\* *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/>*