

Guided Reflection Questions for Surgical Scenario 1: Marilyn Hughes

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Opening Phase

How did the scenario make you feel?

During this scenario, I felt anxious and concerned due to the patient's chief complain of pain, even after the morphine was administered an hour earlier. I was concerned because the patient's pain was not going away, despite multiple interventions. Although I felt anxious at times, I was able to critically think to solve this patient's case.

Scenario Analysis Questions*

PCC/EBP/S How would you recognize that Marilyn Hughes' condition was deteriorating?

I recognized her condition was deteriorating when her pain was unrelieved despite multiple interventions. She also could not feel her toes or move them, and her vital signs were worsening and increasing. Her skin was also pale around the extremity and she was diaphoretic.

PCC/S What interventions exist to alleviate compartment syndrome, and what assessments indicate improved perfusion to the extremity?

Interventions that exist to alleviate compartment syndrome, and some that I even used in the scenario are loosening the dressing on the affected limb. This relieved some pressure that the patient was experiencing, along with pain. Another intervention that is oftentimes used is a fasciotomy. This intervention also relieves pressure via surgical interventions. Assessments that indicated improved perfusion to the extremity include return of feeling in the extremity, and no pallor, as well as regular pedal pulses and capillary refill.

EBP/S/PCC Why is it important to maintain the limb at heart level versus elevating it above heart level?

It is important to maintain the limb at heart level versus elevating it to maintain arterial pressure in the extremity.

PCC/EBP/S What could have happened in this scenario if Marilyn Hughes' condition was not treated expediently?

If this patient's condition was not treated, she would develop tissue necrosis due to the loss of blood flow to her leg, which could possibly require amputation of the extremity.

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

I would state the background of the patient and how the incident happened, (she fell down the stairs after slipping), and that she has a left tib-fib fracture. I would also

state that she came to the floor post-op and had a dressing on the affected extremity, and that she reports having unrelieved pain. I then go on to tell the nurse that she has numbness and tingling in her toes, as well as swelling and pallor, she was diaphoretic, and the dressing was extremely tight. I would tell the nurse that I intervened by loosening the dressing and that the provider was notified as well.

Concluding Questions

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

If I were to redo this scenario, I would immediately check the dressing and loosen it instead of waiting, and I would also do a peripheral neurovascular assessment sooner than I did. I would also try more non-pharmacologic interventions to try and reduce this patient's pain level. Overall, I feel that I was successful treating this patient, but definitely have room to grow in my critical thinking and prioritization skills.

* *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/>*