

Alicia McGraw

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Z-Chapter 12: Case Study

Thomas, an RN on a busy medical-surgical unit, is caring for 32 year-old Sofia who is a Hispanic female admitted with hypoglycemia. During patient rounding, Dr. Payne notes that Sofia has a glucose level of 42. He writes an order for an amp of D50 and a CXR. Upon completion of the orders, he hands the patient's chart to the unit coordinator.

Just as the patient is leaving for her x-ray, Anna, RN comes in to relieve Thomas for lunch. Thomas reports the following to Anna: patient is alert and oriented to self only. She has not spoken since admission and only nods when her name is called. Dr. Payne made rounds but did not report any changes in treatment for Sofia at this time. The unit coordinator did state that there was a new order for an x-ray and the patient has just been transported to the x-ray department by the orderly.

Ten minutes after receiving report, Anna receives a call from the x-ray tech who states they cannot perform the x-ray because the patient does not have an armband on and she is speaking in Spanish. Anna goes to the x-ray department and is unable to identify the patient, so she asks for a Spanish-speaking interpreter. The interpreter states that the patient is confused.

Anna returns Sofia to her room and checks the chart. She finds the new order for D50 and administers the medication immediately. The patient wakes up and is alert and oriented.

Questions:

- 1. Identify the team members involved in this scenario.
 - Thomas, Anna, UC, Dr. Payne
- 2. Identify the errors which took place in this scenario.
 - First, whoever obtained the blood glucose level should have directly told the doctor and waited for orders, and immediately act on those orders. If Dr. Payne was the one who obtained the level for some reason, he should have either told the patients nurse the new orders, or he should have made the UC aware of the stat orders. Thomas and Anna both should have been aware of the new orders, and should have assessed their patient face to face. There was a lack of communication with everyone, starting with the physician. The nurse who took over took the word of the following nurse on the patient instead of assessing for herself. Thomas should have made sure that she was wearing a wrist band from the get go. It should have been related to radiology that the patient did not speak English so that a translator could have gone down with her.

- 3. Identify what was done correctly in this scenario.
 - Radiology recognized that she did not have an ID band on, and they also made sure to have a translator so that they could communicate with her. This made her confusion evident which was very important in getting her treatment for her hypoglycemia. Once the nurse was made aware of the order it was administered stat which made the patient more stable.
- 4. If you were Thomas, what would you have done differently?
 - If I was Thomas I would make sure to look through the patients chart after the doctor had seen her, so that I could see any new orders that may have been put in. He also should have made sure she had a patient ID on, and he should have realized that she needed a translator.
- 5. If you were Anna, what would you have done differently?
 - If I were Anna I would have assessed my patient face to face when I took over instead of taking the previous nurses word. I would have checked the chart to make sure all orders had been pursued.
- 6. In addition to the team members identified in the scenario, who are some individuals in the healthcare setting who must communicate with one another?
 - The UC should have made the nurse aware that the doctor was finished with her chart so that the nurse could look at it. All ancillary departments must communicate with the nurse when it comes to their patients care, especially if there is a change in the patients status. Doctors must communicate with the nurses as well, especially when they add new orders. This is extremely important when putting in stat orders such as D50 for a blood sugar of 42.
- 7. What should you consider when communicating with others?
 - Communication is very important in any work setting, but it is extremely important when you are dealing with patients in the hospital. You want to have a smooth line of communication and make sure that everything is clear and concise, and that everyone who plays a part in patient care is on the same page. Patient outcome benefits greatly when communication is clear and open.

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