Simulation Prebriefing

Questions to answer in the prebriefing are based on Tanner's Clinical Judgment Model:

Directions: Provide in-depth, thorough answers to each of the following questions. Answers should be added directly into this document. Details from the patient's chart can be located on Edvance360 in the Simulation Resources folder labeled Scenario # 1 or Scenario # 2. The prebriefing questions related to noticing and interpreting should be typed and submitted via Dropbox labeled with the simulation name (Prebrief Scenario # 1, Prebrief Scenario # 2) by **0800** the day of your simulation. The prebriefing assignment can be found in the Simulation Resources on Edvance360.

Report:

Review the patient's information in the chart provided on Edvance360 in the Simulation Resources. Utilize the handoff report sheet while reviewing the chart. Fill in the appropriate information from the chart in the corresponding sections of the handoff report sheet. This will be checked for completion immediately prior to starting each simulation scenario.

Formulate additional questions for the off-going nurse to clarify unclear information or missing details. These questions can be written on the back of your handoff report sheet.

Noticing:

What is one thing you notice from the patient's history or report that will guide your initial nursing care (maybe it is specific labs, their diagnosis, or past medical history, etc.)? Explain.

Her left leg fracture would lead my initial cursing care because it is causing her serve pain and she cannot use the leg. It was also the reason she came into the hospital. It is most important to get that fixed to help with the pain and back to her independence.

What expectations do you have about the patient prior to caring for them? Explain.

I would expect the patient to decline the medication that will be given to her because she is non-compliant with the medication she takes at home. I do expect her to be compliant with the pain medication because she is in severe pain, and it is going to take a lot of intervention to get that pain level down.

What previous knowledge do you have that will guide your expectations? Explain.

Previous knowledge that leads me to this is she has multiple medications at home that she is not compliant with that are prescribed to her so I don't think she is going to be compliant with the medication I would provide. But I do think she will take the pain medication I will give her because this fracture is going to cause a lot of pain.

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Interpreting:

Interpret the following data:

Admitting medical diagnosis (definition of the diagnosis): Her diagnosis was a left lower leg fracture. The definition of her fracture is a complete open oblique fracture of the tibia and fibula meaning protruding through the skin, complete break through the bone from left to right with a slant.

Laboratory data (give rationale for all abnormal lab results):

Abnormal Lab Values	Rationale for Abnormal Lab Values
WBC	This could be due to inflammation from the fall or some type of an infection
BUN	Could mean your kidneys aren't working to full capacity.
Creatinine	Patient has impaired kidney function.

Diagnostic testing (explain what diagnostic tests were done with results):

Diagnostic Testing	Results of Diagnostic Testing
X-ray	Anterior/Posterior and Lateral view of the left lower leg
Impression	a complete open oblique fracture of the left tibia and fibula.

Medications (provide a list of all medications with classification, indication for use, and nursing interventions):

Medication (generic and trade name)	Classification (therapeutic and pharmacologic)	Indication for use (specific to this patient)	Nursing Interventions (Assessment, Education, Safety Measures)
Metoprolol 25mg PO twice a day	T-antihypertension P-beta blockers	Hypertension	Montior vital sign like BP, monitor intake and output

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Aspirin 81mg PO daily	T-antiplatelets P-salicylates	Mild pain	Monitor signs of distress and hypersensitivity
Atorvastatin 10mg PO daily	T- lipid lowering agent. P-hmg coa reductase inhibitor	Management of hypercholesterolemia	Montior liver function, monitor creatine kinase
Tamsulosin 0.4mg PO daily	T-benign prostatic hyperplasia agents P-alpha adrenergic blockers	Benign prostatic hyperplasia	Assess orthostatic hypotension and monitor intake and output
Montelukast 10mg PO daily	T-allergy/ cold and cough P-leukotriene antagonist	Chronic treatment of asthma	Monitor mental status and assess for rash