

## 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.

**I noticed a history of BPH while being a female, which seems contraindicated. The pt is non-compliant with her medications. She takes Daily metoprolol for hypertension, aspirin for a-fib, atorvastatin for hypercholesterol, Tamsulosin for BPH, and Montelukast r/t asthma/allergies. All medications listed are important to take every day. ORIF r/t fx in Left Tibula and Fibula. Mixing Metoprolol and Montelukast may be contraindicated R/T Beta blockers and bronchodilators.**

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

**I expect the patient to be in extreme pain in LLE. Watch for S/S of compartment syndrome and assess the 6 P's. The patient will be bed-bound after surgery, so frequent neuro checks.**

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

**Education that was previously taught during M/S r/t post-op and the 6 P's will help to guide my expectations.**

Explain. **Interpreting:**

Interpret the following data:

Admitting medical diagnosis (definition of the diagnosis):

**The admitting diagnosis is a fall from a ladder, causing the need for an Open Reduction Internal Fixation (ORIF). An ORIF is a surgery to fix severely broken bones in order to realign the location with metal rods, plates, screws, or sutures. It is often an emergent surgery. Additionally, the patient's age and injury from the ladder increase the risk of osteoporosis. Prevention of falls for the patient's safety should be included in care.**

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

<b>Abnormal Lab Values</b>	<b>Rationale for Abnormal Lab Values</b>
<b>WBC 11.1 High (4.5-11)</b>	<b>Slightly elevated; watch for S/S of infection</b>
<b>Creatinine 2.1 High (0.6-1.2)</b>	<b>R/T Kidney function, Monitor I/O</b>
<b>BUN 40 High (7-20)</b>	<b>R/T Kidney function, Monitor I/O</b>

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

<b>Diagnostic Testing</b>	<b>Results of Diagnostic Testing</b>
<b>XR LLE</b>	<b>Complete Open Oblique Fx of Left Tibia &amp; Fibula</b>


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

<b>Medication (generic and trade name)</b>	<b>Classification (therapeutic and pharmacologic)</b>	<b>Indication for use (specific to this patient)</b>	<b>Nursing Interventions (Assessment, Education, Safety Measures)</b>
<b>Metoprolol PO 25mg BID</b>	<b>T- Antihypertensive P-Beta Blocker</b>	<b>Hypertension</b>	<b>BP, HR, I/O, Kidney Function</b>
<b>Aspirin 81mg PO Daily</b>	<b>T- Antipyretic, Non- Opioid Analgesic P- Salicytes</b>	<b>A-fib</b>	<b>Bleeding</b>
<b>Atorvastatin 10mg PO Daily</b>	<b>T- Lipid-lowering agent P- hmg coa reductase inhibitor</b>	<b>Hypercholsterol</b>	<b>Liver Function Diet</b>
<b>Tamsulosin 0.4mg PO Daily</b>	<b>T- N/A P- Antiadrenergic</b>	<b>BPH</b>	<b>Hypotension, I/O</b>
<b>Montelukast 10mg PO Daily</b>	<b>T- Bronchodilator P- Leukotriene Antagonist</b>	<b>Asthma, Allergies</b>	<b>SI, Lung Sounds, Allergy Symptoms</b>
