

## 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 that this patient has a history of an enlarged prostate but the chart states that this patient is a female. Females do not have prostate glands so this would be impossible unless they are a transgender female. I also noticed that their BUN and Creatinine levels are high so I will assess for kidney issues and urinary retention. Their WBC count is high so I will assess for infection from the open fracture.

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

I will expect them to be in a lot of pain because of their broken leg. Due to their WBC count, I will expect them to have an infection due to the open fracture. After surgery, I will expect them to be in a full leg cast to prevent movement to heal. I will have to watch for circulation issues in this left leg and implement some sort of circulation measures for the right leg. I will do frequent neurovascular checks of the left lower extremity. I will assess for S/S of constipation and work will physical therapy to get my patient practice ambulating with crutches if ordered from HCP. I will assess for S/S of compartment syndrome as this is a medical emergency. I will do this by using the 6 P's and neurovascular checks.

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

My knowledge of the musculoskeletal system and the 6p's will guide my expectations for the care of this patient. I will encourage them to take the analgesics and other medications prescribed after surgery and administer within 1 hour of return from OR. I will also work closely with the provider to follow bedrest/ambulation orders after surgery. I will ensure that they have an up to date tetanus and diphtheria toxoid shot due to their open fracture.

**Interpreting:**

Interpret the following data:

Admitting medical diagnosis (definition of the diagnosis):

This patient came in for a fall and they have a broken tibia and fibula of their left leg. This is an open oblique fracture. Open fracture means that the bone is protruding through the skin. An oblique fracture means that the bone broke at an angle.

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

<b>Abnormal Lab Values</b>	<b>Rationale for Abnormal Lab Values</b>
WBC (11.1) H	possible infection of wound from fall
Creatinine (2.1) H	Hypertension, enlarged prostate, could be due to infection
BUN (40) H	Hypertension, enlarged prostate, could be due to infection

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

<b>Diagnostic Testing</b>	<b>Results of Diagnostic Testing</b>
X-ray	Complete open oblique fracture of left tibia and fibula

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

<b>Medication (generic and</b>	<b>Classification (therapeutic and</b>	<b>Indication for use (specific to this</b>	<b>Nursing Interventions (Assessment, Education,</b>

<b>trade name)</b>	<b>pharmacologic)</b>	<b>patient)</b>	<b>Safety Measures)</b>
Metoprolol Lopressor	Antihypertensive Beta blocker	HTN treatment	Monitor BP & HR Monitor I's & O's, daily weights Assess for S/S of HF
aspirin	Antiplatelet salicylates	Enlarged prostate inflammation	Monitor for GI bleed Monitor for allergic reaction
Atorvastatin Lipitor	Lipid lowering agents Hmg coa reductase inhibitors	Hypercholesterolemia treatment	Obtain diet history with regard to fat consumption Monitor serum cholesterol & triglyceride levels Monitor liver function
Tamsulosin Flomax	Peripherally acting antiadrenergic	Enlarged prostate gland treatment	Assess S/S of BPH Assess for orthostatic hypotension Monitor I's & O's & daily weights Rectal exams throughout treatment are recommended to assess prostate size
Montelukast Singulair	Bronchodilators Leukotriene antagonists	COPD treatment	Assess lung sounds Monitor for changes in behavior (suicidal thoughts) Assess for allergic reaction