

Simulation Prebriefing

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 would do an assessment of vitals along with an abdominal assessment. I would assess vitals to clarify what I got in report as well as to watch for any signs of decline. I would then do an abdominal assessment to look for any signs of perforation or peritonitis. His history of persistent ingestion of aspirin and multiple GI problems puts him at risk.

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

I expect the patient to be nervous or anxious because he is vomiting and has black tarry stools. I expect to perform routine vitals so that I can catch any signs of a worse diagnosis as early as possible.

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

In class we learned about the signs of perforation with GI bleeds, and they include a fast heart rate, severe abdominal pain, Kussmaul respirations, weak pulse, absent bowel sounds, and a board-like abdomen on with palpation.

Interpreting:

Interpret the following data:

Admitting medical diagnosis (definition of the diagnosis): bleed found in the gastrointestinal tract

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

Abnormal Lab Values	Rationale for Abnormal Lab Values
HGB low	GI bleed
HCT low	GI bleed
Na low	vomiting
K low	vomiting
Glucose high	Diabetes
PT	Aspirin and low potassium
PTT	Aspirin and low potassium
INR	Aspirin and low potassium

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

Diagnostic Testing	Results of Diagnostic Testing
Stool specimen	Occult blood

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)
Omeprazole 40 mg PO daily	Antiulcer agent PPI	GERD	Assess bowel function, abdomen, and pain
Metformin 500 mg PO daily	Antidiabetes Biguanide	diabetes	Assess for hypoglycemia, educate on s/s
Aspirin 325 mg PO every 6 hours PRN	Antiplatelet Salicylates	for headaches	Assess for s/s of bleeding, pain, educate risk for bleed and to try Tylenol
Phenergan 25mg IM every 6 hours as needed	Antiemetic Phenothiazines	for nausea and vomiting	Assess BP, HR, RR, assess for extrapyramidal side effects, monitor for signs of neuroleptic malignant syndrome
Morphine 2 mg IV every 4 hours as needed	Opioid analgesic/agonist	for pain	Assess pain, LOC, BP, HR, RR, bowel functions, and educate on risk for addiction