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**AMSN 2025**  
**Unit 2**  
**Z-Chapter 12: Case Study**  
**On-line Content (1hour)**

Unit Objectives:

- Describe the basic components of communication. (6)\*
- Identify effective ways of communicating with the health care team. (4,5,6)\*
- Apply effective communication skills in various nursing activities. (2,4,5,7)\*
- Discuss team building, group problem solving, and interprofessional practice. (5,6,7)\*
- Analyze components of interprofessional practice. (5)\*

\*Course Objectives

**Assignment:**

Read Z-Chapter 12 pg. 276-304, Z-Chapter 12 online PowerPoint, and ATI: Leadership and Management Chapter 1,2,& 3.

Read the case study, then answer the case study questions below.

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, RN; Anna, RN; Unit Coordinator; Dr. Payne; orderly for the medical-surgical floor; Sofia, the patient; the x-ray tech.

### **2. Identify the errors which took place in this scenario.**

Thomas did not get the patient an interpreter nor did the orderlies or doctors try to use one. The low blood sugar was not reported right away and wasn't taken care of very well, especially considering this was the reason for admission. Since the patient had no wrist band Thomas had to manually type in her number and assume the patient was correct due to the speech incompatibilities; this ignores the 5 rights and three checks of medication administration. The unit coordinator notified the nurse of the CXR but should have notified him about the new medication first. The orderly had taken Sofia to the x-ray unit without Sofia understanding. Since she was off the floor during the report the nurses did not correctly do report on the patient; they should have laid eyes on Sofia prior to Thomas leaving. Sofia was also not stable at the time of the report which is frowned upon.

### **3. Identify what was done correctly in this scenario.**

The doctor had written out the orders instead of only speaking to them and handed them to the unit coordinator. Once Anna found out about the D50 she administered it immediately to raise the patient's blood sugar. Anna also did not argue with the Xray technician and promptly brought the patient back from the Xray unit to get proper care.

### **4. If you were Thomas, what would you have done differently?**

If the patient was not responding I would have tried to call the contacts listed to get some information and give her the communication book that has pictures she could point to for needs and a whiteboard to write on. Considering that her family is Hispanic I would have tried introducing myself in Spanish to see if she was receptive to that more. Since I only know general Spanish with little medical terminology knowledge, I would have used the interpreter for relaying any information I could not speak myself. I would have followed up with the orderly after the glucose check to determine what it was and relay that to the doctor so I could get medication quickly since 45 is very low. I also would not have left the room until I had a bracelet on Sofia, that was a poor ethical and legal decision from Thomas because a patient's bracelet is their main form of identification, and we cannot give meds or do any procedures without confirming the bracelet first. Relating to the bracelet, since Sofia wasn't responding to English it's likely she could have been ignored by the orderlies and could have tried getting out of the room to pertain to her needs such as finding water or food. I would not have let the patient leave the floor prior to my lunch; just in case I was needed during that time.

### **5. If you were Anna, what would you have done differently?**

I would have politely asked if Thomas could take his lunch once Sofia returned. When any report is given it is ethical to do a bedside report so that both nurses lay eyes on the patient and have the most recent LOC and activity level. I would have also requested to go over orders and glucose labs before relieving him just to ensure all care/orders are up to date and accurate. On the way down to Xray I would have tried to call Thomas to give him the update and ask him to assist since the patient seems distressed and he is the primary nurse. After getting the patient back to the floor and checking orders then providing the correct medications, I would have notified the charge nurse about the situation because signs of negligence are prominent in this case.

### **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?**

Doctors must communicate with either the charge nurse or the nurse with orders so that care is updated quickly. Dietary staff must be working with nurses or orderlies to ensure that patients get fed and are getting adequate intake. The entire medical staff should be communicating with the patient since they are the center of focus. Orderlies and PCTs need to update nurses with care changes and anything out of normal ranges such as vital signs or glucose levels. Everyone should also be communicating with case management to ensure the patient is following their plan of care and that they are on the right path to get discharged. Medical staff should also speak with family on the contact list in the chart so that they are updated, and holistic care is performed.

### **7. What should you consider when communicating with others?**

When communicating with others you should consider the situation, the admission of the patient, the care that you have provided, and any recommendations or requests for the other person. Consider that when someone is offering to be nice and take care of your patients while you go on break, your patients should be stable and aware of the care they are receiving. Do not communicate with someone and assume they know something; assume they do not know anything about the scenario. Answer all questions honestly and completely so ensure that there are no errors in their understanding of the situation.

*In order to receive credit for this online content (1H), the assignment must be completed in full and submitted in the Z-Chapter 12 dropbox by the due date and time (1/23/2025 at 0800). Any assignment not completed in its entirety will result in missed class time and must be completed by the end of the semester to pass the course.*