

Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Simulation Prebriefing

Name: _____ Jessica Bower _____

Questions to answer in the prebriefing and reflection journal 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 (Sim #1 Prebrief, Sim #2 Prebrief) 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 in her prior history she has COPD, smokes 2 ppd X 30 years, HTN and atrial fibrillation. I also noticed she is (supposed to be taking) metoprolol and montelukast. This patient has a lot of heart issues and lung/breathing issues that could make it harder now that she fell and is in pain.**
- What expectations do you have about the patient prior to caring for them? Explain. **My expectations of the patient would be to hope they are willing to do all interventions to help them heal and get better, such as taking the medication they have been noncompliant with, also keeping open communication about their needs and/or questions.**
- What previous knowledge do you have that will guide your expectations? Explain. **My expectations stem from working in the clinical setting with other patients and being in a constant state of communication with them. Many patients feel anxious and frustrated**

over their extended stay or treatments and/or why they have to take certain medications or do certain things but it is important to explain to them and reassure them why it is important to adhere to all interventions. Patients seem to be more receptive to wanting to do things and take medications when they understand why, so communication and positive encouragement are key for the healing process.

Interpreting:

Interpret the following data:

What is the patient’s admitting diagnosis? Define the diagnosis. The patient came in with left leg pain after a 5 foot fall off a ladder. After an x-ray was done the diagnosis is a complete open oblique fracture of the left tibia and fibula. The open fracture means the bone has broken through the skin, and a complete oblique fracture mean the bone was broke and a downward angle and all the way through the bone.

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

Abnormal Lab Values	Rationale for Abnormal Lab Values (Use complete sentences.)
WBC (increased)	Elevated white blood cell could indicate infection. This may be COPD related or fall with leg injury.
RBC (increased)	Elevated RBC could indicate issues with lungs such as low O2 levels. This could potentially be because of the history of COPD as well as being a smoker.
BUN (increased)	Increased BUN can indicate issues with kidney function. Due to the history of an enlarged prostate and being prescribed Tamsulosin, this could indicated kidney issues.
Creatinine (increased)	Increased creatinine levels can also indicate kidney disease. This could also be related to problems stemming from an enlarged prostate and being noncompliant with medication.

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

Diagnostic Testing	Results of Diagnostic Testing (Use complete sentences.)
X-Ray: Anterior/Posterior and Lateral view of the left lower leg	There appears to be a complete open oblique fracture of the left tibia and fibula.

Medications (provide a list of all medications (home and on eMAR) 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) (List at least 3 per medication)
<p>Generic: Metoprolol 25mg PO twice a day</p> <p>Trade name: Lopressor and Toprol XL</p>	<p>Therapeutic - Antianginals, antihypertensives</p> <p>Pharmacologic - beta blocker</p>	Hypertension	<p>Assessment- Monitor blood pressure, pulse, respirations, Education- Instruct patient to take as directed (same time each day), teach patient to check pulse daily and BP biweekly, have blood tests done to check kidney/liver function periodically. Safety Measures- abrupt withdrawal may cause life threatening arrhythmias, hypertension, or myocardial ischemia, increased risk of dizziness and orthostatic hypotension so ensuring safe environment and how to prevent falls, learn to recognize and be aware of signs of low heart rate dropping, anything 50-60 beats per minute must report to HCP.</p>
<p>Generic: Aspirin 81mg PO daily</p> <p>Trade: Bayer</p>	<p>Therapeutic – antiplatelet agents, antipyretics, nonopioid analgesics</p> <p>Pharmacologic – salicylates</p>	<p>Prophylaxis of transient ischemic attacks and MI.</p> <p>*Due to history of Hypercholesterolemia, smoker, COPD</p>	<p>Assessment – review patient history, monitor for signs of allergic reactions such as fever, rash, swelling, assess GI bleeding or ulcers. Education – take with full glass of water, avoid taking with antacids within 1-2 hours of taking, if experiencing black/tarry stools or fever contact HCP. Safety Measures – avoid alcohol because it can increase risk of GI bleeding, be cautious when</p>

			taking with other anticoagulants may increase risk for bleeding, monitor over the counter medications may have an interaction.
<p>Generic: Atorvastatin 10 mg PO daily</p> <p>Trade: Lipitor</p>	<p>Therapeutic – lipid lowering agents</p> <p>Pharmacologic – hmg coa reductase inhibitors</p>	Hypercholesterolemia	<p>Assessment – obtain diet history, evaluate serum cholesterol and triglyceride levels, monitor liver function tests. Education – May be administered with or without food, take as directed and do not double up on dose if forget one, do not drink grapefruit juice. Safety Measures – Monitor liver function and to watch for liver issues such as jaundice or dark urine, this medication may cause muscle-related side effects, so report any muscle weakness, tenderness etc, watch taking with other medications or OTC meds and herbal vitamins.</p>
<p>Generic: Tamsulosin 0.4mg PO daily</p> <p>Trade: Flomax</p>	<p>Therapeutic – benign prostatic hyperplasia bph agents</p> <p>Pharmacologic – alpha adrenergic blockers</p>	Enlarged Prostate	<p>Assessment – assess for urinary hesitancy, incomplete bladder emptying, assess after first dose for orthostatic hypotension, monitor I &O. Education – Emphasize the importance of taking medication, take medication same time each day, do not double dose. Safety Measures – this medication may cause dizziness so avoid driving or other activities until response is known, caution to move positions slowly, emphasize on importance of follow up visits.</p>
<p>Generic: Montelukast 10mg PO</p>	<p>Therapeutic – allergy, cold and cough remedies,</p>	COPD	<p>Assessment – assess lung sounds, BP and respirations, assess for allergy symptoms.</p>

daily	bronchodilators		Education – Take medication same time each day with/without food, may cause headache and dizziness, do not discontinue medication abruptly. Safety Measures – Monitor for mood changes such as anxiety, depression or suicidal thoughts, this is a preventive medication and should not be used for an asthma attack, do not discontinue or reduce other asthma medications without speaking with HCP.
Trade: Singulair	Pharmacologic – leukotriene antagonists		