

Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Simulation Prebriefing

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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. **Initially I noticed that my patient is a 55-year-old woman that fell from 5ft and fractured her left lower leg. Having her left lower leg be fractured, this will guide me into my initial care of immobilizing the leg, elevating the leg, obtain vital signs, do a pain assessment, a neuro assessment, classifying the fracture, and giving meds as ordered. Also, since my patient is experiencing an open fracture, I would have to make sure they received a tetanus shot. Also noticing that my female patient has an enlarged prostate, this could mean there's an obstruction in the bladder/possible urinary issues.**
- What expectations do you have about the patient prior to caring for them? Explain. **Prior to caring for my patient, I have expectations that my patient will have delayed wound healing due to the history of smoking 2 packs of cigarettes a day, getting an**

ORIF, and history of hypercholesterolemia. have expectations that they will need PT after surgery and will need to gain back strength in their lower leg to reduce the complications of prolonged immobilization.

- What previous knowledge do you have that will guide your expectations? Explain.
I will then take my knowledge of education and educate my patient on smoking and how it could be affecting her healing process since her blood vessels are being damaged, decreasing the amount of blood flow and oxygen to wounds. Along with hypercholesteremia and how it is also reducing blood flow, explaining that a proper diet and exercise could help her.

Interpreting:

Interpret the following data:

What is the patient’s admitting diagnosis? Define the diagnosis. **The diagnoses resulted in a complete open oblique fracture of the left tibia and fibula.**

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

Abnormal Lab Values	Rationale for Abnormal Lab Values (Use complete sentences.)
BUN: 40 H	A high BUN level could be indicating that the kidneys aren’t working properly. And since the number is significantly high, the kidneys could be causing issues.
Creatine 2.1 H	A high creatine level could indicate that you could have kidney damage or kidney disease.
WBC 11.1 x 10	This level could be indicating that the patient is starting to have an infection somewhere in the body. Possibly due to the open fracture.

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

Diagnostic Testing	Results of Diagnostic Testing (Use complete sentences.)
Xray	It showed that there was 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)
Metoprolol (Lopressor)	T: antianginals, antihypertensives P: beta blockers	Hypertension	A: Monitor BP and Pulses regularly, s/s of bradycardia, s/s of angina E: educate on the s/s of angina/hypotension, to take the medication exactly as prescribed/ tampered, may cause dizziness SM: avoid getting up super-fast, avoid alc, take with meals/bedtime, fall risk
Atorvastatin (Lipitor)	T: lipid lowering agents P: hmg coa reductase inhibitors	Lowering cholesterol	A: obtain a diet history, monitor liver function tests, monitor muscle tenderness. E: take does as direct, medication should be used with diet restrictions, avoid grapefruit SM: fall risk due to s./s of muscle weakness, possible allergic reactions, let provider know if you plan on getting pregnant/unexpected pregnancies
Aspirin	T: antiplatelet agents, antipyretics, nonopioid analgesics P: salicylates, nonsteroidal anti-inflammatory drugs nsaids	Blood thinner	A: monitor RBC, assess limitation of movement, assess pain levels E: Take with full glass of water, report tinnitus, could have black tarry stools SM: alcohol may increase internal bleeding, sodium restricted diet, may cause fetal harm (notify females)
Tamsulosin (Flomax)	T: benign prostatic hyperplasia bph agents	Helps treat enlarged prostate	A: Assess for urinary hesitancy, monitor intake and output, assess edema daily

	P: alpha adrenergic blockers		E: take medication at same time each day, avoid driving, change positions slowly if feeling extremely dizzy SM: fall risk due to dizziness, reduce driving, limit caffeine and alcohol
Montelukast (Singulair)	T: allergy, cold, and cough remedies, bronchodilators	Prevention and treatment of asthma	A: assess lung sounds/respiratory, assess for suicidal thoughts, assess for rashes/allergy E: take med daily in the evening, don't discontinue without orders, educate that this doesn't treat acute asthma attacks. SM: be alert for mood changes, warn if pregnant or breastfeeding, could take meds with food