Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Simulation Prebriefing

Name: Arabella Escobedo. Simulation #1 Musculoskeletal Focus

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.
    - The patients past medical history that has guided my initial nursing care would be, the patients history of COPD as well as their smoking habits in the past. This initial knowledge of their past would help me understand their baseline of vitals, as in having a low O2 between 80-90 would be considered normal for someone diagnosed with COPD. Also knowing they have atrial fibrillation, this could lead to the feeling of faintness and heart palpations and these are symptoms I could keep an eye on.
- What expectations do you have about the patient prior to caring for them? Explain.
    - The expectations I have for my patient prior to caring for them would be, them being in extreme pain. After the fall I would expect them to be in pain and need to

have that pain controlled properly. I would also expect them to be barrel chested, and have a normal low O2 stats, given that they have COPD. I could also expect an abnormal heart rhythm with auscultation.

- What previous knowledge do you have that will guide your expectations? Explain.
    - The pervious knowledge that I have would be understanding that someone with COPD may have abnormal vital signs compared to someone who doesn't. This is to not be alarming but to also understand the patients baseline before hand. Since I have taken care of someone with atrial fibrillation before, I understand that their heart rhythm maybe be different as well as to keep a look out for symptoms regarding faintness, chest pains and "feeling like their heart is skipping a beat"

Interpreting:

Interpret the following data:

What is the patient's admitting diagnosis? Define the diagnosis.

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

Abnormal Lab Values	**Rationale for Abnormal Lab Values (Use complete sentences.)**
WBC 11.1 high	A high WBC level would show a possible infection.
BUN 4.0 high	A high BUN level could indicate ineffective clearance of urine or a possible blockage.
Creatine 2.1 high	A high creatine level could indicate fluid retention as well as dehydration.

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

Diagnostic Testing	**Results of Diagnostic Testing (Use complete sentences.)**
Xray of left lower leg	This X-ray shows an open oblique fracture of the patients left tibia

	and fibula of the leg.

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	Antihypertensives	For their Hx od HTN	Monitor their blood pressure, pulse and educate patient on making sure they are taking them as directed.
Asprin	Antipyretics/ antiplatelets	Since they have Afib, to help reduce the chance of a MI or stroke	Assess for signs of an allergic reaction, signs of bleeding related to GI and Educate the patient on avoiding alcohol while using.
Atorvastatin	Lipid lowering agent	For their hypercholesterolemia	Monitor their creatine kinase levels, notify healthcare provider of any muscle pain or tenderness, and advise the patient to stop smoking and exercise regularly.

Tamsulosin	Benign prosaic hyperplasia	For the patients enlarged prostate	Assess the patient for signs of urgency or incomplete emptying of the bladder, monitor their I+Os as well as weight, and educate on the importance of continuing the medication as ordered.
Montelukast	Bronchodilators	For the patients COPD	Assess for worsening of depression or anxiety, educate patient about how this medicine is not used for acute attacks, and advise the patient to keep an eye out for any panic attacks, anxiety while taking the medication.