

Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Simulation Prebriefing

Name: ___ Kayli Collins _____

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.
 - With the patient's symptoms and history, I would do a thorough GI focus assessment, pain assessment, and neuro assessment. She has a history of multiple GI disorders, with the GI bleed she may have some pain, and she has a history of migraines, which all affect the initial nursing plan of care. I was also closely watch her vital signs for decreased BP and HR and signs of infection.
- What expectations do you have about the patient prior to caring for them? Explain.
 - Expectations I have for this patient is possible discomfort in the abdomen, nausea, possible bloody emesis or stool, and lightheadedness due to blood loss and possible anemia.
- What previous knowledge do you have that will guide your expectations? Explain.

- o Previous knowledge I have is that there is a possibility that this patient will need an NG tube because of the GI bleed, nausea, and vomiting. I also know too watch the patient's blood pressure closely because if it starts to drop then the GI bleed as likely become much worse.

Interpreting:

Interpret the following data:

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

The patient's admitting diagnosis was a GI bleed. A GI bleed is a bleed anywhere in the gastrointestinal/digestive tract, so anywhere from mouth to anus.

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

Abnormal Lab Values	Rationale for Abnormal Lab Values (Use complete sentences.)
Hgb 9.5 g/dl	Her hemoglobin is likely low because of the GI bleed. This low level shows that she has lost some blood.
Hct 30.2%	Her hematocrit is also likely low because of the GI bleed, which further shows that the patient has been losing blood.
Na 135	The sodium level is slightly low because the blood loss is causing some fluid and electrolyte imbalances
K 3.4	The potassium is also low because of the bleed and fluid and electrolyte imbalance
Glucose 122	The glucose is elevated because the patient has DM type 2 and may be experiencing a hyperglycemic episode, this is also may be a typical blood glucose value for her
PT 17 seconds	PT is a clotting factor and this is elevated because of the bleed so the patient will likely be having difficulty with blood clotting
PTT 90 seconds	PTT is also a part of blood clotting, so this is also elevated because of the patient's GI bleed
INR 2.2	INR is also a part of blood clotting, when this is elevated the blood is taking longer to clot which also goes along with the GI bleed

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

Diagnostic Testing	Results of Diagnostic Testing (Use complete sentences.)
NA	NA

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)
Omeprazole, Prilosec	Antiulcer agent, proton pump inhibitor	GERD, duodenal ulcers	<ol style="list-style-type: none"> 1. Monitor bowel function 2. Educate to take PO before meals, DNC 3. Educate on avoid NSAIDs and aspirin
Metformin, Glucophage	Antidiabetics, biguanides	Type 2 DM	<ol style="list-style-type: none"> 1. Observe for signs of hypoglycemia 2. Administer with meals to minimize GI effects 3. Educate that this is not a cure for diabetes
Aspirin, Acuprin	Antiplatelet agents, antipyretics, nonopioid analgesics, salicylates, NSAIDs	Mild to moderate pain	<ol style="list-style-type: none"> 1. Educate to take with a full glass of water 2. Educate that may need to be withhold for surgery if using long term 3. Educate that taking with 3 or more glasses of alcohol may increase risk of GI bleed
Phenergan, Promethegan	Antiemetics, antihistamines, sedative/hypnotics, phenothiazines	Treatment and prevention of nausea and vomiting	<ol style="list-style-type: none"> 1. Assess for falls risk (drowsiness, orthostatic hypotension) 2. Assess serum glucose, may cause an increase 3. Monitor blood pressure and heart rate
Morphine	Opioid analgesics, opioid agonists	Severe pain	<ol style="list-style-type: none"> 1. Assess LOC 2. Assess bowel function 3. Educate that may cause drowsiness and dizziness

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