

SIMULATION MEDICATION ERRORS REFLECTION QUESTIONS

Directions: Provide in-depth, thorough answers to each of the following questions by October 31st, 2025 at 0800. Answers should be added directly into this document and must total at least 400 words. Please submit to your personal Edvance360 Dropbox along with the completed Variance Report. Include all medication errors on one Variance Report.

Mallory Jamison

1. Explain errors in the process that could have contributed to this incident. **Errors in the process that could have contributed to this incident are that we did not check the IV pump due to the fact that the fluids were already running. Because we didn't check the IV pump, we did not recognize that the fluids were running at the wrong rate. With the Ibuprofen, we administered the wrong amount because we saw that the dose on the order and dose on hand was the same number, so we automatically calculated it that way instead of checking on Skyscape to ensure that the dose was appropriate. With the Acetaminophen, we did check with Skyscape for the appropriateness of our dose, however we were looking at the wrong med dosage on Skyscape which caused us to miscalculate the dose.**
2. What are the potential complications that could have occurred to this patient related to the medication error(s)? **Potential complications that the patient could have experienced related to our medication errors include that with the fluids, he could have gone into fluid overload and exhibited signs and symptoms such as edema, shortness of breath, tachycardia, or others. The Acetaminophen could have caused renal failure or hepatotoxicity, and the Ibuprofen could have caused hypersensitivity reactions such as anaphylaxis, renal failure, or extreme hypertension.**
3. What follow-up care would you provide to the patient related to the medication error(s)? **I would provide follow up care to the patient such as a reassessment to look for any signs of reaction from the overdose such as edema, lung crackles, increased shortness of breath, or other symptoms related to fluid overload from the fluids that were running. I would also check his vitals to make sure he didn't have any severe tachycardia, hypertension, or any other imbalances in his vitals that could occur from the medication mistake. It would also be important to monitor his liver function tests including bilirubin. In addition, the patient should be monitored for any signs of an anaphylactic/hypersensitivity reaction including facial swelling/flushing, throat tightness, headache, etc.**
4. How would you prevent this type of event from occurring in the future? **I would prevent this type of event from occurring in the future by slowing down on my work and making sure to clarify medication orders with the supply, clarifying the order with the recommended dosage range, and using resources such as Skyscape to make sure**

that the calculation that I got makes sense and is safe for my patient's weight. I will also make sure to double check my dose with another nurse or even a third nurse if needed and make sure that we come to an agreement on the dose being safe.

5. Write an SBAR to the healthcare provider regarding this incident.

S: Noah Sleeping is a 3-year-old male full code with a milk allergy admitted with croup and being treated accordingly including orders for Acetaminophen for a fever, Ibuprofen for a fever, and maintenance IV fluids.

B: Student Nurses Bri, Leah, and I went to administer these medications according to schedule and had the fluids running 80ml/hr instead of 52ml/hr, Acetaminophen 275mg instead of 225mg, and Ibuprofen 20mg instead of 150 mg.

A: Upon reassessment, Noah complained of no signs of hypersensitivity reaction or adverse side effects and his vitals were within normal limits. His fever subsided.

R: Continue to monitor Noah for signs of hypersensitivity/anaphylaxis such as throat tightness, facial rash/swelling, or tachycardia and other adverse reactions of the medications' overdose and report accordingly. Implement continuous blood pressure monitoring and monitor patient's liver function tests.