AMSN 2020 Comprehensive Simulation
                    Assessment/Interventions
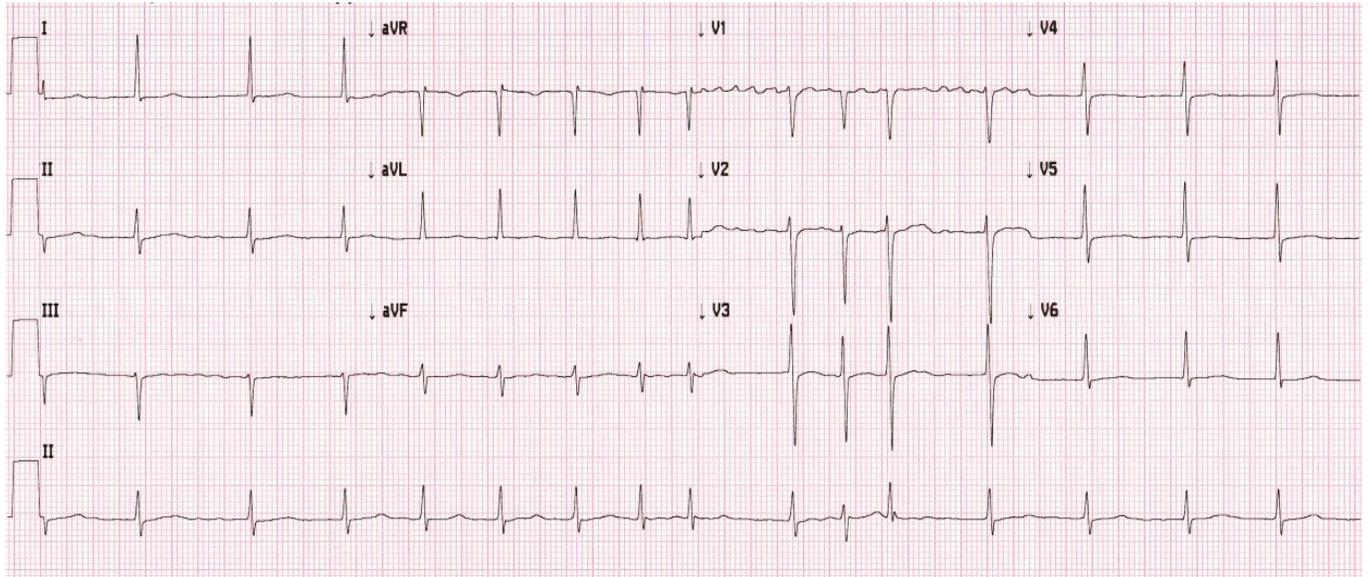
<u>Directions:</u>
1. Assessment: List all assessments that you have been given throughout the scenario (ex- BP, SpO2, etc.), and those that you as the RN need to perform upon Nicky's admission to 4C.
2. For each assessment, provide the intervention you would do in response to the finding or to prevent a complication.
3. Interpret the Post-PTCA ECG (page 2)

ASSESSMENT	INTERVENTION
ER Vitals: T 98.0 °F HR 55 bpm RR 18 BP 80/60 SPO2 92%	Monitor frequently and notify physician of any changes, look for trends to see deviation from baseline. IV bolus 2000 mL NS for hypotension, O_2 2L NC for hypoxia.
Weight 90 kg	Note for Medication Dosage
12 Lead EKG	ST elevation in Leads 2, 3, avF Notify Physician STAT!
Pain 10/10 Mid Sternal Chest	Administer 2 ASA 81 mg tab, 3 0.4 mg SL NTG, Morphine Sulfate 4mg IV
Lab: Troponin 0.8	Notify Physician and prepare patient for Cath Lab
aPTT 17.6	Heparin bolus followed by initiation of gtt per protocol Brilinta loading dose
Cath Lab: Mid LAD 40%, Prox CIRC 20%, PRox RCA 100% EF 35%	PTCA to prox- MID RCA Alpine Stents x2 Placed
Rt groin Exoseal	Monitor for S/S of infection, and circulation issues
4C Vitals: T 98.9°F, BP 108/56, HR 118, RR 24, SPO2 91%	O2 2L NC Continue to monitor and watch trends. Notify Physician of any abnormalities
12 Lead ECG	Note changes post-Cath and notify physician of abnormalities.
Post Cath abnormal Labs: BNP 275, Cholesterol 218, Triglycerides 275, HDL 32, Troponin 4.1, CK 437, CKMB 8.08	Notify physician of lab values and educate patient on lifestyle changes available to prevent this from happening again and to improve overall health
Pain 0/10	Document and continue to monitor

Post-PTCA ECG   Nicky Heartbreaker

Heart Rate: 60-90 bpm   Rhythm Regular or Irregular (R-R Intervals): Irregular

P Wave (upright, inverted, absent, 1 to each QRS?)   absent   PR Interval: none

QRS Interval: .04   QT Interval: 0.32   ST Segment (elevated, depressed, or flat) flat

Interpretation: Atrial fibrillation.