

Surgical Case 1: Marilyn Hughes

Guided Reflection Questions

1. How did the scenario make you feel?

I felt that I was aware early on that the patient was having signs of compartment syndrome and that is why I called the doctor right away in hopes that he would come and I would get new orders. I should have removed the pillow from under her leg but did not because the order said to keep the leg elevated and after calling the doctor he said to maintain current orders.

2. How would you recognize that Marilyn Hughes' condition was deteriorating?

The pain was not relieved by the morphine, the cast was very tight, she had numbness and tingling in the affected limb, the affected limb was pale and there were decreased pedal pulses.

3. What interventions exist to alleviate compartment syndrome, and what assessments indicate improved perfusion to the extremity?

4. Why is it important to maintain the limb at heart level versus elevating it above heart level? Elevating the limb above the heart can cause vasoconstriction which can worsen the compartment syndrome.

5. What could have happened in this scenario if Marilyn Hughes' condition was not treated expediently?

If the dressing was not loosened and the physician was not contacted right away then ischemia could have occurred in the affected limb causing muscle and nerve cell destruction.

6. What key elements would you include in the handoff report for this patient? Consider the SBAR (situation, background, assessment, recommendation) format.

7. What would you do differently if you were to repeat this scenario? How would your patient care change?

I would have taken the pillow out from under the affected leg.