

Guided Reflection Questions

Opening Questions

How did the simulated experience of Linda Waterfall's case make you feel?

With this scenario I felt a little frustrated, there were many new tabs with a lot of questions to choose from. For me it is easier speaking with a real patient, if I notice a patient is upset I know how to react but on this vsim it's not just a quick reaction or a fluent conversation. I have to keep stopping and pausing to find the question I'd like to ask and hunt of which section or tab it might be under.

Talk about what went well in the scenario.

During the scenario I knew that the patient was nervous and seemed anxious. I knew to have her take a few deep breaths to help her relax and that I needed to talk with her to see if she could and would express what the cause of her anxiety was. Her heart rate and respirations were increased which I was assuming might have occurred because she was anxious but I still knew to check the lung and heart sounds just to be sure there were not additional complications.

Reflecting on Linda Waterfall's case, were there any actions you would do differently? If so, what were these actions and why?

The patient kept talking about her medication bundle and I had no clue what she ment by that I thought maybe a bag of medication at first. I know a lot of people when they go the the hospital bring their medication or a list of medications. I didn't think it was a cultural thing, this is why the vsims are a little hard for me because I can ask the questions I wan't to ask the patient. I find myself having to find ones that best fit the situation that sometimes aren't helpful with communicating with the patient.

Scenario Analysis Questions*

PCC What priority problem(s) did you identify for Linda Waterfall?

My priority was trying to get the patient to relax. I knew she was getting anxious, I wanted her to take some deep breaths and I wanted to find the cause as to why she was feeling this way. She also refused her medication and was debating on surgery because of her anxiety.

*If the nurse did not recognize or respond appropriately to Linda's concerns, what could the ramifications be?

She could have became adgitated or hyperventilated if I wouldn't have responded by talking to her and having her take deep breaths to relax. In regards to her surgery if I wouldn't have talked with her she possibly still could have went throught with it being unsure or the opposite and just walked out. Being a nurse you need to be there to talk with the patient giving

them all the information and letting them make their decisions. Not only that but be there to be their advocate, not doing anything would be neglect.

PCC/I Discuss the importance of a medication bundle for Native Americans.

When doing this scenario I wasn't sure what she meant by her medication bundle. I then learned that a medication bundle is a wrapped collection of sacred items one may carry. These items are a demonstration of the holy spirit and are believed by their culture to heal people. This explains why she was acting the way she was by being anxious and questioning surgery.

T&C What other individuals in addition to the primary care team should be involved in Linda Waterfall's case?

Her cousin was in the room as long as the patient was okay with it I would have and could have involved her. It's always nice to have a family member involved in patients care not only for support but for help and reassurance. I know that when I have been a patient and in a vulnerable state I don't always hear what's going on or there is too much going on to focus and take it all in, so it's nice and helpful to have that family member there involved and also asking questions that the patient may not have thought about.

PCC In Linda Waterfall's situation, what therapeutic communication techniques would be most effective?

I think that the therapeutic communication technique that would have been most effective for Linda would be listening. She seemed anxious and sometimes people who are anxious just need someone to listen and talk to. We talked about this during our 1st orientation, that sometimes people don't have someone to listen or someone that they feel comfortable talking to, a big part of nursing is building that patient trust.

Concluding Questions

Describe how you would apply the knowledge and skills that you obtained in Linda Waterfall's case to an actual patient care situation.

With the specific scenario knowing that she is from another culture and has such strong beliefs, I would have if time allowed have taken a step back and reviewed the patient's culture that way I could possibly avoid any cultural clashes and wouldn't offend the patient. I could and would also ask the patient as long as I knew it wouldn't work them up or agitate them, especially with a psych patient. All I can do is just make sure that I am educated with their culture in whichever way that I can as soon as I can.

* The Scenario Analysis Questions are correlated to the Quality and Safety Education for Nurses (QSEN) competencies: Patient-Centered Care (PCC), Teamwork and Collaboration (T&C), Evidence-Based Practice (EBP), Quality Improvement (QI), Safety (S), and Informatics (I). Find more information at: <http://qsen.org/>