

Clinical makeup from 11/18/2020 (Olivia Jones)

How did the simulated experience of Olivia Jones's case make you feel?

- I felt hesitant during this simulation. I wasn't sure what to do or what was expected for the completion of the scenario. Even after assessing and implementing the provider's orders, the patient didn't seem to improve. Her nausea didn't go away and her bp was still high. I skipped over some assessment options that I normally would not have missed if it were a real patient. The simulation is not so user friendly. There are a lot of individual options and searching required.

Describe the actions you felt went well in this scenario.

- I think once I figured out where the orders were and how to administer them, the scenario went well. There was a bit of a learning curve since I've never done a vsim like this. I think my critical thinking improved from this scenario. I had to figure it out on my own. It's different from a live clinical where we have an experienced nurse there for support.

Scenario Analysis Questions[*]

EBP What are the indications that Olivia Jones's preeclampsia has progressed?

- Olivia had indications including complaints of epigastric pain related to her need to vomit, increased blood pressure, hyperreflexia as seen from her deep tendon reflexes test, the oliguria and need for a Foley catheter, blurred vision and a severe headache, the crackles in her lungs, and potentially the increased heart rate of the fetus.

PCC/I Olivia Jones was placed on magnesium sulfate for treatment of her preeclampsia. What are the indications for this drug, and what should be taught to the patient regarding side effects?

- Magnesium sulfate is used to reduce the risk of seizures resulting from preeclampsia. She needs to know what seizure precautions will be implemented. These include oxygen and suction at the bedside and bed padding. She should also be aware of the potential side effects of the medication. Side effects include arrhythmias, circulatory collapse, respiratory paralysis, diarrhea, slow/weak pulse, weak or absent deep tendon reflexes, and drowsiness.

T&C What key elements would you include in the handoff report for this patient?

Consider the situation-background-assessment-recommendation (SBAR) format.

- Situation: 23-year-old African-American female, G1P0, 36-weeks gestation, and has been diagnosed with severe preeclampsia
- Background: BP 172/102, R 22, HR 115, T 99, O2 89, complaints of headache, feeling the need to vomit, blurred vision, RUQ pain, fetal HR is tachycardic and 160 bpm, the uterus is soft, no contractions felt, fetal movement palpated, deep tendon reflexes are brisk, hyper-reflexive, and noted clonus graded 4+, crackles noted in both bases

- Assessment: preeclampsia is increasing in intensity, blood pressure is increasing, along with epigastric pain
- Recommendation: begin a dose of magnesium sulfate, monitor blood pressure, respiration, urinary output, and DTRs every hour, and continue to institute seizure precautions, keep patient on bed rest, and limit environmental stimuli.
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S What safety measures should be initiated while Olivia Jones is in the hospital?

- Oxygen and suction should be at the bedside. Lights should be dimmed and stimulation should be reduced. The patient should remain on bed rest with padding on the rails for protection.

S/QI Based on your experience with Olivia Jones's case, reflect on possible nursing actions for enhanced safety and quality improvement.

- Patient distress could be reduced and distraction from pain could be done by enhancing safety and providing emotional support. Focusing on preventing preeclampsia and management of the disorder helps quality improvement.

Concluding Questions

Reflecting on Olivia Jones's case, were there any actions you would do differently? Explain.

- I would do a full assessment and ask more questions about her pain and fetal movement. I would do a full assessment before administering the provider's order. I need to remember to educate the patient and communicate more.

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

- This simulation will help me to know what to monitor in a pregnant woman with complications. Knowing to monitor DTRs, BP, respiration, vision changes, and urine output for a patient receiving magnesium sulfate will help prevent further complications. It's also important to remember there are two patients to consider. I feel like I know how to care for the pregnant patient better and know to monitor both mother and fetus.