Princess Hernandez

Surgical Case 3: Doris Bowman

Documentation Assignments

1. Document Doris Bowman's vital signs that occurred in the case.
   - Assessment: Heart rate: 108. Pulse: Present. Blood pressure: 155/92 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 93%. Temp: 99 F (37 C). Pain 6/10
   - After giving morphine the client started having respiratory depression. Respiration less than 6
   - 15 minutes after first assessment: Heart rate: 102. Pulse: Present. Blood pressure: 139/77 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)
2. Document the actions that should be taken when Doris Bowman's severe respiratory depression occurs.
   - When Dorsi Bowman's severe respiratory depression occur, we started assisting a patient who was breathing. Ventilation should be 10-12 breaths per minute. Then the oxygen should be 10 L/min. You were able to provide sufficient ventilation.
   - We gave the patient Naloxone 0.2 mg IV push to reverse effect of opiods.
3. Document the airway management that occurred during the scenario.
   - Ventilation should be 10-12 breaths per minute. Then the oxygen should be 10 L/min. You were able to provide sufficient ventilation.
   - When controlled we changed to nasal cannula.
4. Identify and document key nursing diagnoses for Doris Bowman.
   - Acute pain related to surgery evidence by patient report of pain 6/19
   - Ineffective breathing pattern related to opioid intoxication evidence by severe respiratory depression and respiration of less than 6.
5. Referring to your feedback log, document the nursing care you provided and Doris Bowman's response.

Feedback Log

© Wolters Kluwer Health | Lippincott Williams & Wilkins

0:00	You arrived at the patient's side.
0:00	You introduced yourself.
0:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 108. Pulse: Present. Blood pressure: 155/92 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 93%. Temp: 99 F (37 C)*
0:13	You washed your hands. To maintain patient safety, it is important to wash your hands as soon as you enter the room.
1:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 106. Pulse: Present. Blood pressure: 151/91 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*
1:40	You identified the patient. To maintain patient safety, it is important that you quickly identify the patient.
2:01	You attached a 3-lead ECG. It is correct to attach the monitor to the patient.
2:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 106. Pulse: Present. Blood pressure: 153/91 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
3:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 152/91 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
3:21	You attached the pulse oximeter. It is a good idea to monitor the saturation and pulse here. This will allow you to reassess the patient continuously.
3:36	You measured the blood pressure at 152/90 mm Hg. It is appropriate to monitor the patient by measuring the blood pressure.
4:04	You checked the temperature at the mouth. The temperature was 99 F (37 C).
4:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 151/90 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
4:13	You looked for normal breathing. She is breathing at 21 breaths per minute. The chest is moving normally on both sides.
4:49	You checked the radial pulse. The pulse is strong, 105 per minute and regular. It is correct to assess the patient's vital signs.
5:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 148/89 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
5:13	You assessed the patient's dressing. This is correct. Assessing any dressings the patient has is always important.

© Wolters Kluwer Health | Lippincott Williams & Wilkins

5:27	You asked the patient if she could describe her pain. She replied: 'It hurts around my stomach, please give me something for the pain.'
5:35	You asked: How bad is the pain? She replied: 'It's pretty bad, I'd give it a 6.'
5:46	You provided patient education. This is correct. It is important to use every opportunity to provide patient education.
6:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 149/89 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
6:25	You asked if the patient was allergic to anything. She replied: 'No, I am not allergic to anything.'
6:41	You assessed the patient's IV. The site had no redness, swelling, infiltration, bleeding, or drainage. The dressing was dry and intact. This is correct. Assessing any IVs the patient has is always important.
7:10	*Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 150/90 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
7:12	You flushed the cannula.
7:30	A 2 mg dose of morphine was injected IV. You should consider administering this drug slowly. It was reasonable to give an opioid here. It is important to use the basic rights of medication administration to ensure proper drug therapy..
7:30	The patient started developing respiratory depression.
7:43	*Patient status - ECG: Sinus tachycardia. Heart rate: 100. Pulse: Present. Blood pressure: 147/88 mm Hg. Respiration: 15. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
7:50	You looked for normal breathing. She is breathing at 7 breaths per minute. The chest is moving normally on both sides.
7:53	*Patient status - ECG: Sinus rhythm. Heart rate: 93. Pulse: Present. Blood pressure: 134/80 mm Hg. Respiration: 7. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*
8:12	The patient's respiration rate dropped below 6 breaths per minute.
8:14	*Patient status - ECG: Sinus rhythm. Heart rate: 90. Pulse: Present. Blood pressure: 123/73 mm Hg. Respiration: 5. Conscious state: Somnolent. SpO2: 94%. Temp: 99 F (37 C)*
8:23	You started assisting a patient who was breathing. You were able to provide sufficient ventilation.
8:45	You looked for normal breathing. The chest is moving normally on both sides.
8:59	The ventilation rate was 3. The correct ventilatory rate for an insufficiently breathing patient is approximately 10-12 breaths per minute, Continued hypoventilation may

© Wolters Kluwer Health | Lippincott Williams & Wilkins

be harmful to the patient.

8:59 You looked for normal breathing. The chest is moving normally on both sides.

9:07 *Patient status - ECG: Sinus rhythm. Heart rate: 93. Pulse: Present. Blood pressure: 121/69 mm Hg. Respiration: 2. Conscious state: Unconscious. SpO2: 93%. Temp: 99 F (37 C)*

9:14 The oxygen rate was 2 L/min. You should use at least 10 L/min of oxygen for this system.

9:25 You administered 0.2 mg of naloxone IV. Naloxone is the appropriate drug to give here to reverse the effect of the opioid.

9:32 *Patient status - ECG: Sinus rhythm. Heart rate: 95. Pulse: Present. Blood pressure: 122/68 mm Hg. Respiration: 4. Conscious state: Somnolent. SpO2: 92%. Temp: 99 F (37 C)*

9:42 *Patient status - ECG: Sinus rhythm. Heart rate: 95. Pulse: Present. Blood pressure: 122/68 mm Hg. Respiration: 19. Conscious state: Appropriate. SpO2: 92%. Temp: 99 F (37 C)*

10:04 You looked for normal breathing. She is breathing at 20 breaths per minute. The chest is moving normally on both sides.

10:17 You stopped ventilating the patient.

10:23 You placed a nasal oxygen cannula. This was part of your orders.

10:31 You provided patient education.

10:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 106. Pulse: Present. Blood pressure: 142/79 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 93%. Temp: 99 F (37 C)*

11:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 105. Pulse: Present. Blood pressure: 142/79 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

12:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 104. Pulse: Present. Blood pressure: 140/78 mm Hg. Respiration: 21. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

13:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 103. Pulse: Present. Blood pressure: 139/76 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

14:38 You phoned the provider in order to discuss the patient.

14:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 103. Pulse: Present. Blood pressure: 141/78 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

15:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 102. Pulse: Present. Blood pressure: 139/77 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

16:21 You measured the blood pressure at 140/78 mm Hg.

© Wolters Kluwer Health | Lippincott Williams & Wilkins

16:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 102. Pulse: Present. Blood pressure: 140/78 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

16:48 You checked the temperature at the mouth. The temperature was 99 F (37 C).

16:59 You asked the patient if the pain was better after the medication. She replied: 'I have less pain now.'

17:06 You asked: How bad is the pain? She replied: 'Not too bad, it's about a 4.'

17:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 102. Pulse: Present. Blood pressure: 138/77 mm Hg. Respiration: 20. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

18:05 You listened to the lungs of the patient. The breath sounds are normal.

18:32 You listened to the abdomen of the patient. You could hear hypoactive sounds from the abdomen. This is reasonable.

18:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 101. Pulse: Present. Blood pressure: 136/76 mm Hg. Respiration: 19. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

18:58 You assessed the patient's dressing. If you are in doubt, it is always a good idea to reassess any dressing the patient has.

19:22 You examined the patient's skin. There is normal skin turgor. Her skin is cool, and she is very sweaty.

19:32 You provided patient education.

19:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 101. Pulse: Present. Blood pressure: 139/77 mm Hg. Respiration: 19. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

20:01 You asked the patient how she felt. She replied: 'A little better.'

20:14 You asked: How bad is the pain? She replied: 'Not too bad, it's about a 4.'

20:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 100. Pulse: Present. Blood pressure: 134/75 mm Hg. Respiration: 19. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

20:48 You checked the capillary refill time. The capillary refill time was less than 2 seconds.

21:42 *Patient status - ECG: Sinus tachycardia. Heart rate: 100. Pulse: Present. Blood pressure: 135/75 mm Hg. Respiration: 18. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

22:42 *Patient status - ECG: Sinus rhythm. Heart rate: 99. Pulse: Present. Blood pressure: 134/74 mm Hg. Respiration: 18. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

© Wolters Kluwer Health | Lippincott Williams & Wilkins

23:42 *Patient status - ECG: Sinus rhythm. Heart rate: 99. Pulse: Present. Blood pressure: 135/74 mm Hg. Respiration: 17. Conscious state: Appropriate. SpO2: 95%. Temp: 99 F (37 C)*

23:46 You asked the patient if the pain was better after the medication. She replied: 'I have less pain now.'

23:52 You asked: How bad is the pain? She replied: 'Not too bad, it's about a 3.'

24:42 *Patient status - ECG: Sinus rhythm. Heart rate: 98. Pulse: Present. Blood pressure: 132/73 mm Hg. Respiration: 17. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

25:42 *Patient status - ECG: Sinus rhythm. Heart rate: 97. Pulse: Present. Blood pressure: 132/73 mm Hg. Respiration: 16. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

25:49 You looked for normal breathing. She is breathing at 16 breaths per minute. The chest is moving normally on both sides.

26:42 *Patient status - ECG: Sinus rhythm. Heart rate: 97. Pulse: Present. Blood pressure: 129/72 mm Hg. Respiration: 16. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

27:14 You asked the patient if the pain was better after the medication. She replied: 'I have less pain now.'

27:20 You asked: How bad is the pain? She replied: 'Not too bad, it's about a 2.'

27:42 *Patient status - ECG: Sinus rhythm. Heart rate: 96. Pulse: Present. Blood pressure: 128/70 mm Hg. Respiration: 15. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

27:47 You asked the patient how she felt. She replied: 'A little better.'

27:52 You asked the patient if she needed anything. She replied: 'I'm not sure what I need.'

28:42 *Patient status - ECG: Sinus rhythm. Heart rate: 95. Pulse: Present. Blood pressure: 127/70 mm Hg. Respiration: 14. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

29:42 *Patient status - ECG: Sinus rhythm. Heart rate: 95. Pulse: Present. Blood pressure: 125/69 mm Hg. Respiration: 14. Conscious state: Appropriate. SpO2: 94%. Temp: 99 F (37 C)*

30:00 The simulation has timed out.

Nursing management objectives for the patient in the post anesthesia care unit are to provide care until the patient has recovered from the effects of anesthesia, is oriented, has stable vital signs, and shows no evidence of complications. Pain control is a critical component of postoperative care and often includes IV opioid analgesic medications to provide immediate but short-acting pain relief. The most common adverse effects of opioid analgesic agents are constipation, nausea, vomiting, pruritus, and sedation. Respiratory depression is a less common but serious adverse effect. Prevention of clinically significant opioid-induced respiratory depression begins with administration of the lowest effective opioid dose, careful titration, and close nurse monitoring of sedation and respiratory status throughout therapy. If respiratory depression occurs, the nurse provides appropriate oxygenation and ventilation and calls for help.

© Wolters Kluwer Health | Lippincott Williams & Wilkins

© Wolters Kluwer Health | Lippincott Williams & Wilkins