

## Debriefing Guide

### Pediatric Case 3: Sabina Vasquez

#### Opening Questions

#### **1. How did the simulated experience of Sabina Vasquez's case make you feel?**

I felt terrible for Sabina Vasquez. I have never had asthma or pneumonia, but I'm sure it is uncomfortable. Having pneumonia is unfortunate, and dealing with that as a small child must be hard. A young child does not have as much experience with managing pain as an adult does.

She seems to be in distress, but thankfully her mother is by her side and able to comfort her. She has an upper airway infection and a fever of 102.2 F.

It must be hard to deal with the condition that affects the child's ability to play and do activities that a typical five-year-old does daily. She has to be in extreme discomfort.

#### **Describe the actions you felt went well in this scenario.**

The first time I completed this scenario, I did not execute my actions correctly. I missed many necessary steps, for example, washing my hands at the beginning. After running through the simulation once, I was able to correct my actions the second time around. Completing my assessments, I was much more thorough and directed. Being exposed to this vSim once helped me to focus on what Sabina needed in terms of directed assessments.

I feel as my communication was clear with Sabina and her mom. Completing Sabina's medication administration also went well. I was able to take the proper steps in giving Sabina her fluids of normal saline and D5W.

#### **Scenario Analysis Questions[1]**

#### **List in order of priority your initial nursing actions for Sabina Vasquez based on physical findings and family interaction.**

Sabina has a history of asthma. She uses an albuterol inhaler that she uses for asthma attacks. When I assessed her, her priority was to administer oxygen

because of her respiratory distress. Her oxygen was low when she arrived at the ED, but with an oxygen intervention, her oxygen saturation went up to 94%. Since her chest XR revealed pneumonia in her lungs, giving her medication to help with pain will help. It is also essential for the nurse to monitor her vital signs. She is tachycardic, most likely from dehydration. Administering her intravenous fluids along with encouraging oral fluids, should help.

**What complications might Sabina Vasquez face if her symptoms are not recognized and if care is not initiated on time?**

She is in respiratory distress and at risk of being deficient in oxygen saturation. If her respiratory distress continues untreated, she can develop Acute Respiratory Distress Syndrome (ARDS). ARDS occurs when the lung's alveoli fill with fluid instead of oxygen. Often, pneumonia is the cause of ARDS. Sabina is breathing rapidly and has an increased heart rate. Her condition has resulted in her dehydration, which is apparent from her increased heart rate, trying to compensate for hypovolemia. Her decreased tissue perfusion can also lead to an altered state of mind. Sabina may have an altered level of consciousness because of her organs are not being perfused sufficiently.

**What actions should be taken to ensure the delivery of appropriate information to Sabina Vasquez's mother?**

Since Sabina Vasquez is of Hispanic descent, there may be some issues with language. It appears she speaks English correctly and effectively when I ask her questions. However, I do not fully know the extent of how fluent Sabina and her mother are in English. If Spanish is their primary language, it may be beneficial to present the information in Spanish. Involving a translator for Sabina Vasquez and her mother will allow for ease of communication and relay accurate information.

The nurse can see if there is a hospital interpreter on-call in the hospital or contact a translator via phone or tablet. Having a translator will allow for Sabina and her mother to have a better understanding of how to care for her respiratory condition properly.

**Recognizing the acuity of the situation, how would you include Sabina Vasquez and her mother in the decision-making process?**

Since Sabina Vasquez is a young child, it is essential to involve her mother. Her mother is Sabina's primary caregiver. As a nurse, I would be sure to address Sabina in an age-appropriate manner while communicating to her with her preferred and first spoken language. Moreover, I am going to direct critical health information to her mother, who will have a greater understanding of what should occur for Sabina. Making sure Sabina knows how to use her inhaler by utilizing the teach-back method will further confirm the proper use of the device. Besides, having Sabina's mother shows the nurse how Sabina is supposed to use the inhaler will allow for adequate delivery.

**Based on your experience with Sabina Vasquez's case, reflect on ways to improve safety and quality of care.**

Since Sabina is a young child, the nurse must speak to her in a way she understands. If she is more comfortable with Spanish, acquiring a translator to communicate with her will help her know how to manage her condition. Ensure her mother understands what is going on and proper use of her inhaler before activity (i.e., soccer). Educating both Sabina and her mother is imperative for them to feel empowered to have control over Sabina's respiratory condition. Sabina is young, so making sure she is up-to-date on immunizations will be helpful to limit the occurrence of sickness. Education on pneumonia and asthma and interventions to incorporate will ensure improvements in Sabina's health.

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

*Situation*

Hello, I am the nurse caring for Sabina Vasquez in room 1900 from the peds floor. Sabina Vasquez is a five-year-old female who is experiencing respiratory distress with a recent diagnosis of pneumonia. She arrived at the ED with complaints of respiratory distress. A chest x-ray confirmed the diagnosis of pneumonia in her right lung. Her mother mentioned that she had had an upper respiratory infection for the past few days. She is in slight pain and appears distressed. She is currently stable, and her pain has decreased.

*Background*

Sabina is a five-year-old Hispanic female who has a history of asthma. She was diagnosed with pneumonia and had a history of acute asthma attacks, which she utilizes her inhaler. She got oral pain meds on arrival to the ED. I have administered

Azithromycin 190 mg/kg orally, acetaminophen elixir 240 mg PO every 6-4 hours as needed for fever, and albuterol nebulized 2.5 mg in 2 mL NS every 4 hours. The first dose was given in the ER 2 hours ago.

### *Assessment*

She is currently stable, and her pain has decreased. She seems to be much more comfortable now.

### *Recommendation*

She is still running her maintenance fluids and should continue until complete.

## **As you begin to think about discharge planning for Sabina Vasquez and her family, what teaching needs to be provided?**

Teaching on the proper use of Sabina's inhaler is critical for the appropriate administration of medication for Sabina when her health is in a compromised state. Its intended effects may not occur if a patient does not use a medical device or medicine correctly. Thus, the patient can become compromised. Sabina must understand what symptoms to watch out for, interventions to employ, and finally, the best way to treat Sabina's condition. Having both Sabina and her mother teach back to the nurse's necessary education for proper care will allow for Sabina's health to be managed well. Also, watching out for allergens will help to minimize Sabina's asthma. Making sure to keep Sabina's living situation clean will decrease allergens in the environment.

### Concluding Questions

## **Reflecting on Sabina Vasquez's case, were there any actions you would do differently? If so, what were these actions, and why would you do them differently?**

Reflecting on Sabina Vasquez's case, I would have administered pain meds sooner. She wasn't in the most pain according to her assessment on the pain scale, but she appeared very distressed, and her respirations were high. Also, I wish there was an option to educate her family on the importance of enlightening her teachers and personnel on respiratory distress signs to watch. Informing her teachers and classmates on caring for Sabina outside of her home will allow Sabina to improve health security. The more others around Sabina have awareness; the likelihood of Sabina's health becoming compromised reduces. I educated her mother a bit, but I

believe it is essential for her to know as much as possible since she is Sabina's primary caregiver.

**Describe how you would apply the knowledge and skills obtained in Sabina Vasquez's case to an actual patient care situation.**

I would be sure to communicate with the child at an appropriate language level, so they are comfortable with me. If the child is more satisfied with their first language, i.e., Spanish, I would be sure to call a translator for accurate communication. Trust is also essential for any nurse-to-patient relationship since trust leads to patient satisfaction and improved health outcomes. I would also be sure to comfort the child in the best way that I can since children are emotionally immature when dealing with feelings such as pain. Being in a hospital is very scary, and it is essential to make them feel as comfortable as possible. I would be sure to give my patient fluids and pain meds as quickly as possible so they could be more at ease sooner.