

Simulated Clinical Experience (SCE™) Overview

Location: Home Setting

History/Information:

The patient is a 54-year-old Muslim female who lives in a small house with her husband of 25 years. They moved to this country from Pakistan 10 years ago. Her 23-year-old daughter lived with them until recently when she moved to continue with her education. Her daughter provided a good deal of emotional support. The patient has been asthmatic for eight years. She is well educated and had been compliant with her treatment plan but was hospitalized two weeks ago due to a severe exacerbation of her condition. Her daughter told her healthcare provider prior to discharge that during the last two months, the patient has been unable to keep up with her household responsibilities and that she appears to be under a great deal of emotional stress. Her husband has recently been struggling economically with the small business he runs with his brother. A one week follow up home visit was ordered to evaluate the patient's status and management of her treatment plan. Based on the patient's height and age, charts predict her peak end flow to be 460 liters per minute. However when her asthma is controlled her personal best averages 420 liters per minute. Upon arriving in the home the learner finds the patient is alone and the house appears cluttered and dusty.

Learning Objectives:

1. Demonstrates appropriate nursing interventions for the adult patient with asthma (APPLICATION).
2. Designs and integrate a comprehensive teaching learning plan for the asthma patient (SYNTHESIS).
3. Identifies nursing interventions that should be implemented when domestic violence is suspected or recognized (ANALYSIS).
4. Discusses how cultural diversity impacts nursing care (COMPREHENSION).
5. Describes and integrates concepts relating to cultural diversity in planning, implementing, and evaluating the care of a Muslim patient (SYNTHESIS).

Healthcare Provider's Orders

Diagnosis: Moderately Persistent Asthma (on stepwise approach scale)

Discharge medications:

Budesonide 200mcg per inhalation 2 puffs every morning

Salmeterol 25mcg per inhalation 2 puffs every twelve hours

Rescue medication: Albuterol inhaler 1-2 puffs for symptoms every 20 minutes; Not to exceed three doses. After one dose may use 1 unit dose of medication in nebulizer

treatment one time only. If using rescue medications more than once per day notify healthcare provider

Discharge self management instructions for action plan:

Monitor peak flow numbers in the morning soon after awakening, before and 15 minutes after using rescue medications

Patient's peak flow goal (personal best) - 420 liters per minute

Green Zone Level 1: Able to do usual activities, usual medications are controlling asthma:

Peak flow is 420-336 (100 - 80%)

Medications: Budesonide 200mcg per inhalation 2 puffs every morning,

Salmeterol 25mcg per inhalation 2 puffs every twelve hours

Yellow Zone Level 2: Increasing symptoms, wakening at night, usual activities somewhat limited, increased need for rescue medication

Peak flow is 336-210 (80 - 50%)

Medications: Increase budesonide to 2 puffs every morning and every evening Add prednisone 40mg PO once every day until symptoms are alleviated and peak end flow value has normalized. Continue for three days after this, call if symptoms persist

Red Zone Level 3: Increased symptoms longer than 24 hours, usual activities are severely limited, Rescue medications have not relieved symptoms

Peak flow is less than 210 (less than 50%)

Medications: Increase budesonide to 3 puffs every morning and 3 puffs every evening; If no relief after rescue medications, or can't reach healthcare provider seek emergency treatment

Notify healthcare provider of any changes in level of treatment

Conduct standard asthma education

Questions to Prepare for the Simulated Clinical Experience

1. Discuss the pathophysiology of asthma.
2. Discuss the educational points that should be included when implementing standard education for the asthma patient.
3. What are the components that should be monitored during a home visit?
4. Explain the stepwise approach and how it is utilized in care of the asthma patient.
5. Describe the tools that should be used to assist the asthmatic patient in managing their disease.
6. What are the common devices used to monitor and administer medications for asthma? Describe the technique for proper use.
7. What are the medications that are currently recommended for the management of asthma? List the actions and major nursing considerations of these medications.
8. Discuss the emphasis and roles of the home health care nurse.
9. What are the warning signs of domestic violence?
10. Describe the interventions that are necessary when the nurse suspects domestic violence.
11. Describe the basic values that tend to be universal beliefs of Muslims and how these may influence health care delivery.
12. Discuss interventions that can enhance health care delivery when dealing with cultural diversity.

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