Medical Case 4: Carl Shapiro

Documentation Assignments

1. Document Carl Shapiro's cardiac rhythms that occurred in the scenario.

Mr. Shapiro's cardiac rhythm was normal sinus rhythm for the majority of the time. Then, the ECG showed V-Fib and he coded. After resuscitation, his ECG went back to normal sinus rhythm.

2. Document the changes in Carl Shapiro's vital signs throughout the scenario.

Mr. Shapiro had his vitals taken. His respiratory rate was 12 breaths/min; his heart rate was 91 beats/min with PVC's; his pulse was present; his BP was 128/76; his SpO2 rate was 94%; and his temperature was 98.6°F. When he coded, his heart rate was absent; his respirations were 0; his BP was absent; and his SpO2 was 0%. He became unconscious and did not respond to me. After CPR and resuscitation, his vitals went back to normal.

3. Identify and document key nursing diagnoses for Carl Shapiro.

Mr. Shapiro was at risk for decreased cardiac output related to left ventricular failure. He was also at risk for ineffective peripheral tissue perfusion related to decreased cardiac output.

4. Referring to your feedback log, document the assessment findings and nursing care you provided.

Mr. Shapiro was alert & oriented x4. I asked him what brought him in today and he said for chest pain. I asked him to describe the pain and he said, "feels like an elephant sat on my chest." He said that after medication, he felt better and wanted to be discharged. After taking his vitals, I assessed his IV site and had continuous ECG monitoring, pulse ox, and BP. After auscultating his chest and lungs, I also assessed his skin. I also provided patient education because he smokes. When he coded, I immediately called the code team and began CPR at a ratio of 30:2. I turned on the AED and attached pads to his chest. After analyzing the rhythm I made sure to call clear and waited to shock him. After delivering a shock, I continued CPR until he regained consciousness. After he had ROSC, I stopped CPR and stayed with him until code team came.