

Guided Reflection Questions for Medical Case 1: Kenneth Bronson

Opening Questions

How did the scenario make you feel?

- This scenario made me feel tense. I was nervous at first, but then I took the right actions to care for my patient appropriately.

Scenario Analysis Questions*

PCC, EBP What signs and symptoms led you to the conclusion that Kenneth Bronson was experiencing an allergic reaction?

- The patient's heart rate & respiratory rate increased rapidly, and his blood pressure and oxygen saturation decreased. He complained of dyspnea and felt like his throat was closing.

PCC, EBP Discuss the differences between mild, moderate, and severe anaphylactic reactions.

- Mild reactions: cause local symptoms like rash, hives, pruritus, watery eyes, and rhinorrhea.
- Moderate reactions: cause hives, pruritus, swelling, and dyspnea.
- Severe reactions: these are life-threatening and can display throat swelling, dysphagia, severe pruritus, pain, vomiting, or dizziness.

EBP/S Discuss the importance of follow-up assessments post-reaction.

- It's crucial to reassess your patient after an anaphylactic reaction because there can be a follow-up delayed response. Also, you want to be sure the treatment works for your patient.

Concluding Questions

What further needs does Kenneth Bronson have at the end of the scenario that future nursing care should address?

- The patient's allergy documentation should be charted immediately. The patient should be given an allergy bracelet, and the provider should provide new treatment orders for pneumonia.

Reflect on how you would communicate with family members in an emergency situation if they were present at the bedside.

- I would ask them to step out of the room. I would comfort the family to the best of my ability and explain that he is allergic to the antibiotics given. After resolving the situation, I would explain what was given and that this can sometimes happen. I would tell them the precautions that will be put in place to ensure this does not happen again.

and reassure them that the provider is aware of everything that took place and that new documentation is in place to prevent this from happening again.

After completing the simulation and reflecting on your experience, what would you do differently (or the same) for the patient experiencing acute respiratory distress?

- If I experience this again, calling the provider is always important. I would keep epinephrine at the bedside before administering medications the patient has not been given. I would place the patient in an upright position to help with breathing.

How could you prepare for clinical to anticipate potential patient emergencies?

- Review or ask patients about any possible allergies before medication administration. If they have allergies, I will ask them how they reacted to that medication in the past.

* The Scenario Analysis Questions are correlated to the Quality and Safety Education for Nurses (QSEN) competencies: Patient-Centered Care (PCC), Teamwork and Collaboration (T&C), Evidence-Based Practice (EBP), Quality Improvement (QI), Safety (S), and Informatics (I). Find more information at: <http://qsen.org/>