

## Almira Factora

### Medical Case 5: Skyler Hansen

#### Guided Reflection Questions

1. How did the scenario make you feel?  
The scenario was familiar to me since we had a similar hypoglycemia case for our fundamental's simulation lab. I felt comfortable going into the case as I read the patient's scenario carefully. However, when I started the case, I did miss out some important orders, which I should have double checked before administering to the patient.
2. What management options would have been appropriate if Skyler Hansen had been alert and could swallow?  
If Skyler Hansen had been alert and could swallow, I would provide him with one of the following sources: 3-4 glucose tablets, 4-6 oz of fruit juice, 2-3 tablespoons of honey, or 6-10 hard candies.
3. If Skyler Hansen's acute hypoglycemic episode had not have been treated immediately, what could have happened?  
If the patient's hypoglycemic episode had not been treated immediately, seizures, change in level of consciousness, unresponsiveness, hypoglycemic coma or death could occur.
4. If too much glucose were administered to Skyler Hansen while the health care team was trying to correct his blood glucose level, what could occur?  
If too much glucose were administered, the patient would go into DKA (diabetic ketoacidosis).
5. What key elements would you include in the handoff report for this patient? Consider the SBAR (situation, background, assessment, recommendation) format.  
Situation: Skyler Hansen is an 18 year old male, brought to the ED due to an episode of hypoglycemia.  
Background: Skyler Hansen has no known allergies. The patient has Type 1 diabetes. He has not eaten anything for at least 5 hours, and was acting irrationally with slurred speech.  
Assessment: Patient is now alert and oriented x4. I obtained vital signs and notified the provider. Temp 98.6, RR 12, 3-lead ECG showed sinus rhythm. 50% dextrose was administered IV, protein and carbs provided, and blood glucose is now 102. The patient has no pain complaints.

Recommendation: Assess if patient can manage without nasal oxygen. Check the blood glucose every hour. Follow up on my education of the patient.

6. Describe age-appropriate patient teaching for Skyler Hansen and resources that may be helpful to him.

First, I would ask Skyler Hansen what he knows about his diagnosis. Then, I would provide further education about preventing another hypoglycemic episode. Skipping meals and excessive exercise without eating could cause blood sugar level to drop. I would educate him to check blood glucose levels before extreme exercises and to eat a light snack before exercise. Also, educate the patient signs of hypoglycemia and to have glucose tablets in case of a hypoglycemic event.

7. Discuss confidentiality and legal empowerment of 18-year-old patients such as in Skyler Hansen's case.

As an 18-year old patient, Skyler is considered an adult and can make his own decisions. The nurse is able to provide care and nursing education, as long as the patient agrees and provides consent to the nurse.

8. What would you do differently if you were to repeat this scenario? How would your patient care change?

I would carefully read the doctor's orders. The first time I played the scenario, I started a 50 mL infusion of normal saline at 1000 ml/hr. The ordered rate was 50ml/hr and the ordered volume was 1000ml. Although this is just a simulation and practice, it is still important to make sure that orders are read thoroughly and the right medications and fluids are administered correctly.