

vSim - Medical Scenario 4: Carl Shapiro Guided Reflection Questions

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How did the scenario make you feel?

I thoroughly enjoyed this scenario specifically, I feel like it was a good practice of the steps required to provide quality CPR and what to do in the event of an emergency such as cardiogenic shock and asystole.

What could have been the causes of Carl Shapiro's ventricular fibrillation?

Some of the major causes of ventricular fibrillation that Mr. Shapiro may have experienced hypotension, obesity, smoking, and his history of heart disease that runs in his family.

When performing CPR for Carl Shapiro, what are quality indicators you are performing resuscitation correctly?

In order to assure proper cpr, we need to check for signs of quality compressions. These include total chest recoil with a depth of two inches, a rate of at least one hundred compressions a minute, and a ventilation ratio of 30 to 2. We also need to check the patient's pulse before starting any form of CPR, this is super important.

If Carl Shapiro would have had a return of spontaneous circulation (ROSC), what would your next interventions be?

The immediate interventions after a patient has a return of spontaneous circulation are to ensure airway patency, putting the patient on a 12 lead ECG, stopping CPR, and to administer medications when necessary.

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

In the handoff report I would be sure to mention that Mr. Shapiro's chest pain was relieved with nitroglycerin. We note that the patient went into vfib, then we responded with the emergency response and immediately performed CPR. An ED was also used to deliver shocks and CPR was continued until a ROSC was achieved. For the next

nurse, I would recommend keeping a close eye on the telemetry monitor and being mindful of the necessary interventions in the event of another emergency.

If Carl Shapiro's family members had been present at the bedside during the arrest, describe what you could have done to support them during this crisis.

If the patient's family was present, I would do my best to calm their anxieties by explaining every procedure we are performing to keep the patient alive. I would also allow them to leave the room if they needed to because it can be traumatic to witness a loved one having CPR performed on them.

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

If I was to repeat this scenario, I would definitely treat Mr. Shapiro with his medications at a quicker rate, it was imperative that we give him nitroglycerin because they alleviate his immediate symptoms so this is incredibly important.