PRIORITY CLINICAL DECISION-MAKING SKILLS

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Learning Objectives:

- The participant will learn how to develop a clinical simulation of multiple patient scenarios to assist students learning how to develop critical thinking skills.
- The participant will discuss innovative approaches used in nursing education to develop clinical scenarios incorporating cultural and patient acuity while using a multidisciplinary team format.
- The participant will understand strengths and challenges in creating and utilizing multiple patient scenarios for clinical simulation.

Who are we?

- College of Saint Mary, located in Omaha, Nebraska, is the only all-women's Catholic college in the region.
- Nursing Degree opportunities – LPN, ASN, BSN, MSN and EdD
- Diverse student population – nontraditional and traditional ages, age range 18-50, (48% 25 and younger, 26% 26-30 age range, 21% - 31-40 and 5%- 41-50)

Learning Objective #1

- Developed a clinical priority decision making scenario that allowed students to explore in a safe environment that encouraged them to apply the nursing process while caring for four diverse patients.

Factors that lead to the development of this type of scenario

- NCLEX and Assessment scores identified need for students to increase priority assessment skills
- Student evaluation surveys indicated students wanted more frequent opportunities to care for more than one patient at a time in the clinical setting
- Community healthcare systems voiced a need for recent graduates to have better critical thinking skills

The participant will learn how to develop a clinical simulation of multiple patient scenarios to assist students learning how to develop critical thinking skills.

Reviewed the course objectives of all courses with a clinical component

Identified disease processes that were common among all levels but especially focused on the senior level med-surgical course

Conducted a literature search of text books student used and evidenced based practice guidelines

- After the identification of the four top medical diagnoses faculty then developed each patient separately.
- With development of each patient we incorporated the best practice with consideration of the scenario limitations.
- Identified common nursing and medical assessment findings, treatments options and potential outcomes for each individual patient.

Learning Objective #2

- The participant will discuss innovative approaches used in nursing education to develop clinical scenarios incorporating cultural and patient acuity while using a multidisciplinary team format.

Steps taken to encourage participation

- Identify few key faculty
- Solicit advice from other faculty
- Demonstrate scenario to course faculty
- Utilize the magic words…

Budget?

- Estimated Cost
  - Creating the mileux
    - Reusable items
    - One time use items
  - Faculty cost
  - Scheduling the Lab

Scenario: DKA/hyperglycemia

Presimulation Review Questions:

- 1. What events could precipitate DKA/hyperglycemia?
- 2. What are the physiological reasons for DKA/hyperglycemia?
- 3. What are the most common signs and symptoms of DKA/ hyperglycemia?
- 4. List two nursing diagnoses for a client experiencing DKA/hyperglycemia?
- 5. What is your goal as the nurse of a client with DKA/hyperglycemia?
- 6. Determine the proper pharmacological strategies and nursing interventions utilized by nurses for a client with DKA/hyperglycemia.

Setting the scene

- Patient Care Scenario:
- A 38 year old female client from China is admitted having been seen in the family practice clinic. She has Type 1 Diabetes Mellitus, ran out of blood glucose monitoring test strips and couldn't afford to get any more. She did not feel well all weekend, so she went to the clinic today (Monday). She has a history of silicosis and is currently taking oral steroids. Other meds include Metformin, _Novolog Mix 70/30 (Pamela, can we get? if not…NPH)_ insulin. Her blood sugar is 588; she complains of anorexia, N/V, polyuria, polydipsia, weakness and fatigue. Her vital signs are: T 98, P 102, R 22 and Kussmaul, BP 110/60. Her skin is dry and turgor is absent. She has dry mucous membranes. She voided. Blood has been drawn for CBC, metabolic profile, HgbA1c.

Setting the scene

- Doctor's Orders:
- 1L Normal Saline *state:* 1L over 30 min, 1L over 1 hr, 1 L over 2 hr,
- 1L over 4 hr, 1L over 8 hr. Add 10-20 mmol KCL to 2nd and subsequent liters of fluid.
- Start Humalog R insulin with IV bolus of 0.15u/kg. Run insulin drip at 0.1u/hr. (check order sheet)
- Do Accu-Chek blood sugar every hour and follow insulin drip orders.
- Check urine ketones with each voiding.
- Draw ABG's

Instructors Guide #1 DKA/Hyperglycemia

Client Status, Events/Data/Management Algorithm

- Drowsy, c/o N/V.
- "I'm not very hungry."
- Dry skin. Requests to go to BR to void.
- Lungs have crackles
- Lethargic with admission interview
- T: 98.2, P: 104, R: 24, BP: 106/58

Expectation of Student

- 1. Quick head to toe focused assessment.
- 2. Check blood sugar.
- 3. Start IV & fluid
- 4. Check mental status
- 5. Assess for S/S of dehydration

Scenario Progression

- Lungs still have crackle.
- Having difficulty concentrating to answer admission questions.
- Accu-Chek=592.
- 1. Assess lungs
- 2. Start sliding scale insulin with Accu-Chek q 1 hour.
- Voids

- Lab results:
- WBC 12,000
- K+ 5.6
- Mg+ 1.5
- Na+ 132
- HgbA1c 11%
- Urine ketones: large
- 1. Check urine ketones
- 2. ABGs drawn
- 3. Call labs to Dr.
- 4. Dr. refers client to endocrinologist

- Endocrinologist orders insulin drip.
- ABG's:
- pH: 7.23
- pO2: 85
- pCO2: 46
- HCO3: 13
- 1.Set up pump for insulin drip per orders.
- 2.Refer to Diabetic Educator and Dietician
- Refer to Social worker for help getting strips.

Learning Objective #3

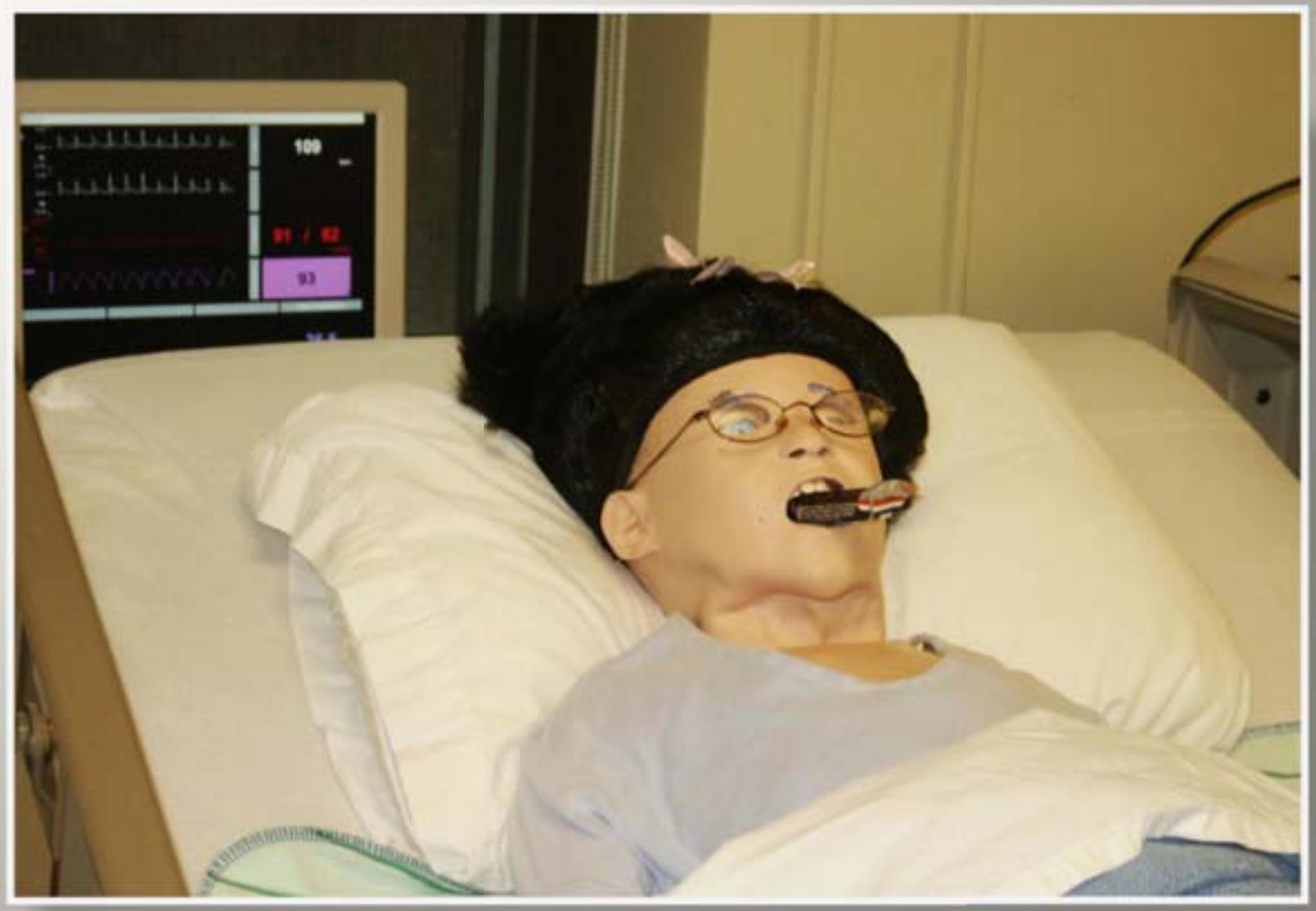
- The participant will understand strengths and challenges in creating and utilizing multiple patient scenarios for clinical simulation.

Our Virtual Hospital

- Nursing Lab- partitions to divide patients
- Nursing faculty at every bed
- Bells for call lights
- Nursing station
- Charts, forms, SBAR, phone
- Medication / pharmacy area

Our Patients

- Lena Mae Williams
  - 85 y/o African American female
  - Pneumonia, Confusion
- Tai Su
  - 38 y/o Asian female
  - DKA, Hyperglycemia
- William Brown
  - 50 y/o Caucasian male
  - Chest pain, GERD
- Jerry Kregg
  - 55 y/o Caucasian male
  - R/O Pancreatitis vs Cholecystitis



Our Students

- Groups of 8 students per team
- Work in teams
- Charge nurse, Primary nurse, Secondary nurse, LPN, Documentator, Communicator, Looker-upper, Medication RN

VIDEO