NORTHWEST IOWA COMMUNITY COLLEGE Simulation Lab

Simulation Design Template

COURSE: PN 1A

PRIMARY HEALTH CONDITION: POST-OP

Simulation Learning Objectives:

1. **Recognize signs and symptoms of complications related to post-op care (GLO #2)**
2. **Identify priority nursing cares for a client in the post-op period (GLO #3)**
3. **Assess and initiate pain management (GLO #4)**
4. **Perform dressing change (GLO #3)**

Client Information:

Age: 32 **DOB:** 2/20/xx **Gender:** Male **Setting:** Surgical floor

Name: David Smith **Allergies:** Betadine/Ink

Admission Date: 2 days ago **Weight:** _131.5_kg **Height:** _150_cm

Attending Physician: Dr. Smith

History of Present illness:
Snowmobile accident 2 days ago. Was in ICCU for the first 24 hours. Had surgical repair of fracture left tib/fib fracture. Has multiple rib fractures. Has been stable on the surgical unit. Foley catheter was D/C'd 6 hrs ago and he has not voided. Hesitant with getting up due to pain. PO pain med given 1h ago

Social History:
Occasional social drinker of beer; smokes 1 ppd; works in factory working 12 hour shifts.

Primary Medical Diagnosis:
Left Tib/Fib fracture with surgical repair

Surgeries/Procedures & Dates: Left Tib/Fib repair 36 hours ago.

Past Medical History: Depression

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Simulation Room Set- up:

Setting __Acute Care_____ Type of Manikin Used __SimMan Essential_____

Props : (available for all simulations – BP cuff, pulse ox, glucometer, O2 set-up)
Additional Props: D5NS @ 100ml/hr; dressing to left lower leg; ice bag; bladder filled; urinal; incentive spirometer; nicotine patch on

Initial Manikin Settings:

Vitals	Lungs	Heart	Abdomen	Other
99.1-90-20 136/86 Pulse ox-95%	Diminshed/course bases	Normal	Hypoactive	Dressing to left lower leg -large amount blood drng Distended suprapubic area

Mock Medications Required:
Ondansetron
Hydrocodone 10mg/Acetaminophen 325mg tablets
Nicotine patch
Morphine 4mg/1mL

Documents Required (indicate what information will need to be handwritten on forms):
Kardex
MAR
Physician Order form

Lab Values:
CBC
Basic Metabolic Panel

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Scenario Progression Outline

Name: David Smith **DOB:** 2/20/xxx **Age:** 32

Timing (approximate)	Manikin Actions	Expected Interventions	Comments
Stage I	Moans, "I feel fine but my leg doesn't feel right. I got up for lunch and I bumped it and it hasn't felt right since." Pain at a "6" if prompted. Sharp stabbing in left leg. "I am not feeling sick to my stomach." If prompted.	Performs pain assessment. Performs focused assessment. Cap refill <3 sec Administers pain medication- Morphine IM Dressing change/reinforcement	
Stage II	"I have to go to the bathroom"	Provides urinal as does not want to get up to void. Unable to void. Suprapubic area distention Notifies physician.	
Stage III	Orders received. Continues to c/o need to void.	After SBAR completed, orders received to straight cath the client. Return of 500 mL amber urine.	Scenario is complete when student: -Completes a pain assessment and administers meds -Changes/reinforces dressing -Notifies physician and catheterizes the patient.

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Laboratory Report

Name: David Smith Med Record #

Sex: Male Allergies: Betadine, Ink DOB: Feb 20 Age: 32

CBC

Value	Patient Result	Reference Range
WBC	11	4-10
RBC	5.0	4.5 - 5.5
Hgb	10.8	14 – 16.5
Hct	39%	40 – 50%
Platelets	155,000	130,000 – 400,000

BMP

Value	Patient Result	Reference Range
Na++	132	135-145
K+	3.4	3.5-5.0
Chl	98	95-105
CO2	28	22-26
BUN	20	10-20
Creatinine	1.1	0.6-1.2
Glucose	108	70 - 110

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Healthcare Provider Orders

D5NS @ 100 ml/hr
Activity as tolerates
Physical Therapy BID
Occupational Therapy QD
Incentive Spirometer every 1 hr while awake
Ice to involved leg
Vital Signs every 4 hrs.
CMS checks every 4 hrs.
Notify MD of any significant changes. (call and SBAR for cath)
CBC and BMP every am for 3 days.
OK to shower. Do not get leg dressings wet.
O2 at 2L if pulse ox < 90% on RA.
Diet as tolerated.
Dressing change q12h and prn

Medications:

Docusate sodium 200 mg po every day.
Nicotine patch 14 mg topically every day.

PRN Medications:
Ondansetron 4mg IV q4h prn nausea
Hydrocodone 10mg/Acetaminophen 325mg tablets 1-2 tabs every 4-6h prn moderate pain
Morphine 2 mg IM q4h prn breakthrough pain
Lorazepam 2mg po q6h prn anxiety

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MAR

Name: David Smith Med Record # 123456 Sex: Male DOB: Feb 20 Age 32

Allergies: betadine/ink

Height 150cm Weight 131.5 kg

MAR verified by:	2300-0659	0700-1459	1500-2259
ROUTINE			
Docusate sodium 200mg po every day		***08 NN***	
Nicotine patch 14mg topically every day		***08 NN***	
PRN			
Ondanestron 4mg IV q4h prn nausea			
Hydrocodone 10mg/Acetaminophen 325mg 1-2tabs po q4-6h moderate pain	**04** ***TN***	**08** ***NN***	
Morphine 2mg IM q4h prn breakthrough pain			
Lorazepam 2mg po q6h prn anxiety			

Initials	Name and Title	Initials	Name and Title
TN	T. Nelson, RN		
NN	N. Nelson, RN		

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Debriefing Discussion Points:

1. **What nursing/medical problem is occurring?**
   Impaired Circulation

2. **What caused or could have caused the problem?**
   Tight cast/DVT/edema/
   Compartment Syndrome

3. **Discuss treatment given**

4. **Discuss teamwork**

5. **Discuss what each individual person "did well"**

6. **Discuss the "take away" from the experience**

This workforce solution is funded by the IHUM Consortium which is 100% financed through a $15,000,000 grant from the U.S. Department of Labor's Employment & Training Administration.