

## Learner Response Summary

Successful



Scenario: Clinical Procedure: Safe Medication Administration and Routes: Geriatric Population (002c)

Started On June 25, 2023

70.0 / -

### Next Step Choice







Your Choices:

- Patient History
- Begin a pain assessment with Wanda 5.0 pts 
- Review the Drs. Orders and MAR before getting pain medication for Wanda 5.0 pts 

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### Pain Assessment


Your Chat Interactions:

- Identified the severity of the pain 3.0 pts 
- Identified what provokes the pain 1.0 pts 
- Identified what qualities describe the pain 1.0 pts 
- Identified the region of the pain 1.0 pts 
- Identified the onset of the pain 1.0 pts 
- Identified what treatments help the pain 1.0 pts 
- Identified an understanding of what causes the pain
- Identified an understanding of the effect the pain has
- Identified an end goal for the pain
- Identified the troubles this pain causes

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### Drs Orders and MAR

Your Choices:

- Doctor's Orders Patient Name & DoB 3.0 pts 
- Doctor's Orders Patient ID 3.0 pts 
- MAR Patient Name & DoB 3.0 pts 
- MAR Patient ID 3.0 pts 
- Drs Orders Allergies 3.0 pts 
- MAR Allergies 3.0 pts 
- Doctor's Orders Toradol -2.0 pts 
- Doctor's Orders Tylenol-3 3.0 pts 

- MAR Toradol -2.0 pts ❌
  - MAR Tylenol-3 3.0 pts ✅
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#### 4 Checks

Your Choices:

- Comparing the name of the person, drug, dosage, route, time, and frequency of the medication against the MAR before preparing or removing the medication from its container or packaging. 5.0 pts ✅
  - After the preparation process has been completed, checking the name of the patient, strength, drug, dosage, route, and frequency of medication at the patient's bedside before giving it to the patient. 5.0 pts ✅
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#### Medication Selection

Your Choices:

- Acetaminophen 600 mg + codeine 60 mg PO 5.0 pts ✅
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#### Missed Rights

Your Choices:

- The right patient ❌
  - The right to refuse 5.0 pts ✅
  - The right education ❌
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#### Evaluation Timing

Your Choices:

- 30 minutes 5.0 pts ✅
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#### SBAR

Your Response:

S - Wanda Steele required pain medication to manage her pain related to a right humeral head fracture.

B - She came in to the ED due to a fall that caused a right humeral head fracture. She is wearing a sling and is awaiting consultation. She has a past medical history of CAD, high cholesterol and hypertension, osteoarthritis in fingers, past history of gastric ulcers due to NSAID overuse, MI 15 years ago, PE 12 years ago.

The right arm colour is normal, cap refill is normal, sensation and temperature stable, minor deformity, swelling and decreased movement in shoulder but able to move fingers, wrist, and elbow.

A - Her pain was assessed at 8/10 and Acetaminophen 600mg + Codeine 60mg PO was given.

R - She is awaiting orthopaedic consultation and further orders.

- Situation #1 1.0 pts ✓
  - Situation #2 ✗
  - Situation #3 1.0 pts ✓
  - Background #1 1.0 pts ✓
  - Background #2 ✗
  - Background #3 ✗
  - Background #4 ✗
  - Assessment #1 1.0 pts ✓
  - Assessment #2 ✗
  - Assessment #3 ✗
  - Assessment #4 1.0 pts ✓
  - Assessment #5 1.0 pts ✓
  - Assessment #6 ✗
  - Assessment #7 1.0 pts ✓
  - Assessment #8 ✗
  - Assessment #9 ✗
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### Let's loop back to the Learning Outcomes

Your Choices:

- Apply knowledge utilizing a pain assessment tool to determine a patient's need for analgesia ✓
  - Determine appropriate analgesia based on patient history and presentation ✓
  - Recall the steps to safe medication administration and the 4 medication checks ✓
  - Outline common adverse and/or side effects from medication on an elderly patient ✓
  - Explain the importance of clarifying medication orders for safe administration ✓
  - Examine the importance of SBAR as an effective tool to communicate patients' information to other members of the health care team ✓
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### Reflection on the aging population care needs

Your Response:

Age-related changes impact the patient's ability to take medications because elderly people often take more medications and they can get confused on what medications they are taking, they can believe they are taking too many medications and refuse, not understand why they need a medication, or they can become unable to swallow pills whole. Dementia can contribute confusion on how to take pills, or lead the patient to believe they've already taken the pills they are about to receive. Some way to help ensure elderly people taken their medications is to try and schedule them less frequently throughout the day, to crush their pills, and to have the family assist on best ways for the patient to take their pills.

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### Reflect and Respond

Your Response:

I believe that the reports that the aging population does not always receive proper nursing care and critical health care resources they deserve is valid especially during the pandemic, and sometimes this can be misinterpreted if this is not in the patients' wishes. Age bias/ageism may impact or affect my professional attitude and ability to provide culturally and physically safe wholistic care to elderly patients when health care resources are insufficient by thinking that a younger or healthier patient should receive resources before an elderly person due to perceived better outcomes.

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### **Self-Debriefing & Reflection**

Your Response:

The patient may have difficulty taking her pills by herself due to having limited range of motion in her right arm. The patient was getting frustrated when trying to assess her pain. The patient was holding her arm when being assessed for pain. This affected my choices as perceiving the patient is in a lot of pain and may be better consulted if pain relief is provided.

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### **Self-Debriefing & Reflection**

Your Response:

I have had similar situations with patients in pain who do not want to comply with a proper pain assessment due to them being in extreme pain. Although this is important to properly provide the right medication. This situation is similar because you have to be mindful to follow all the rights of medication administration especially in these situations, and it is important to give the patient the right to refuse.

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### **Self-Debriefing & Reflection**

Your Response:

No.

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### **Self-Debriefing & Reflection**

Your Response:

This scenario has reminded me of how important it is for the patient to have the right to refuse medication/treatment. This option should always be mentioned so the patient does not feel forced/obligated to do anything due to a power situation. This would build trust in the therapeutic relationship and may make the patient inclined to take further medication from the nurse.

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