

Scenario Overview

The Kidney Disease scenario focuses on a 60-year-old male newly diagnosed with renal failure, with a recent hospitalization for atrial fibrillation and stage three ulceration.

Primary characters you will meet in this scenario:

Viewing **1** of 1



Becky
Registered Nurse,
Emergency
Department



Allyson
Registered Nurse




Amanda
Registered Nurse,
Charge Nurse



Paul
Assistive Personnel



Jennifer
Registered Nurse,
Home Health



Dr. Kindlebrook
Provider

Dr. Grassler
Provider,
Nephrologist

Mr. Robert Jones
Client



Using the SBAR format, identify the information Nurse Allyson received from report that will enable her to provide safe care to Mr. Jones. Fill in the relevant information in the box below. Once you complete this section, click on the submit button at the bottom of the screen.

Compare the answer you submitted to the information below:

S – Situation

The emergency department admitted Mr. Jones at 4:30 AM for shortness of breath and weakness. After treatment, he is transferring to the telemetry unit.

B – Background

Sixty-year-old African-American male with a history of peripheral vascular disease, type II diabetes mellitus, chronic kidney disease, coronary artery disease, and atrial fibrillation. A provider recently discharged him from the facility after he treated Mr. Jones for atrial fibrillation and a type II diabetic ulcer of the right foot. Mr. Jones did not complete prescribed antibiotics after his discharge. He is noncompliant in managing his diabetes. He smokes one pack of cigarettes a day and uses alcohol three to five times a week.

A – Assessment

Mr. Jones is awake, alert, and oriented x 3. Current vitals are: BP 112/70, P: 158, R: 34, T: 99.1, and O₂ sat 91% on 2 L via nasal cannula. ECG indicates atrial fibrillation; placed on telemetry. Chest x-ray: opacities greater in right lung than left lung. Altered lab values include: sodium 128, potassium 5.1, BUN 44, creatinine 3.0, and glomerular filtration rate 25. His total bilirubin was 2.8, calcium 8.7, WBCs 16.1, hemoglobin 9.3, hematocrit 28.2, and blood glucose 71. We did a digoxin level, which was 0.6. He has a soiled dressing on his right foot and is a stage III ulcer. A #20 gauge IV catheter was inserted peripherally in his left forearm and a nurse gave him 1,000 mL of 0.9% sodium chloride. Intake: 1,000 mL Output: none. No family present.



Mr. Jones was admitted to the Emergency Department (ED) at 4:30 AM due to shortness of breath (SOB) and weakness. Following treatment, he is slated for transfer to the telemetry unit.

B - Background

A 60-year-old African-American male with a medical history encompassing peripheral vascular disease, type 2 diabetes, chronic kidney disease, coronary artery disease, and atrial fibrillation. Recently discharged after treatment for atrial fibrillation and a type 2 diabetic ulcer on the right foot, Mr. Jones did not adhere to prescribed antibiotics post-discharge. He exhibits non-compliance in managing his diabetes and engages in smoking (one pack daily) and alcohol use (3 to 5 times weekly).

A - Assessment

Mr. Jones is awake, alert, and oriented to person, place, and time. Current vital signs include:

Nurse Allyson is preparing to perform a sterile dressing change to Mr. Jones's foot. After removing the exam gloves, performing hand hygiene, and gathering the needed supplies, what are the next steps Nurse Allyson should take for the dressing change? (Reorder the steps by dragging them into the desired sequence.)

The nurse should first apply clean gloves to remove the old dressing, then place the dressing in a moisture-proof bag and remove her clean gloves. Next, she performs hand hygiene prior to donning sterile gloves, covering the wound with a sterile dressing, and securing it.



✓ Apply clean gloves.

✓ Remove dressing and place in moisture-proof bag.

✓ Remove clean gloves.

✓ Wash hands.

✓ Apply sterile gloves.

✓ Cover with sterile gauze.

✓ Secure dressing.



Nurse Allyson is preparing to call the provider about Mr. Jones's difficulty breathing. Which of the following orders should she recommend to the provider?

Administering furosemide (Lasix) 20 mg IV bolus will ease the client's breathing by promoting excretion of excess fluids, which can lead to pulmonary edema.



Albuterol 1.25 mg via nebulizer

Decrease IV fluid rate to 50 mL/hr.

Furosemide (Lasix) 20 mg IV

Repeat chest x-ray.



Mr. Jones's total urinary output is 50 mL. His total IV fluid intake since admission is 1550 mL. Which of the following is an appropriate nursing intervention at this time?

Obtaining a bladder scan will identify the presence of the approximate amount of urine in the bladder.



Massage Mr. Jones's bladder.

Obtain a bladder scan.

Have Mr. Jones stand at the bedside to void.

Obtain an order for urinary catheterization.