# NRS 460 RS T2 Benchmark Case Study Timothy Smith ICU

## Student Name

Program Name or Degree Name (e.g., Bachelor of Science in Psychology), University

COURSE XXX: Title of Course

Instructor Name

Month XX, 2024

#### NRS-460 Benchmark - Case Study: Timothy Smith – Intensive Care Unit (ICU)

Directions: Read the case study below. Evaluate the information and formulate a conclusion based on your evaluation. Complete the critical thinking table and submit the completed template to the assignment dropbox.

The purpose of this assignment is to evaluate patient data to navigate decision-making in ambiguous situations, assist the patient and family in managing complex care needs, and perform effectively in an interdisciplinary team.

### **PART I:** Health History and Medical Information

Evaluate the health history and medical information for John Doe, presented below.

After his discharge from the ED, John was transferred to the Intensive Care Unit (ICU) for specialized care and monitoring, where he took over as his nurse. Upon arrival at the ICU, John was identified as Timothy Smith. He arrives intubated on a ventilator and requires continuous assessment for his TBI, multiple fractures, and underlying psychological conditions. Specialty providers are considering the risks vs. benefits of ahematoma evacuation. Upon entry to the ICU, Mr. Smith has been diagnosed with:

- 1. Severe Traumatic Brain Injury with a GCS score of 6, managed with an external ventricular drain (EVD)
- 2. Respiratory instability managed with a ventilator
- 3. Femur fracture with open reduction and internal fixation (ORIF)
- 4. Hairline fracture of 3 left ribs

Laboratory Tests, Results, and Vitals:

1. EVD - Intracranial Pressure (ICP) - 12

- 2. Echocardiogram (EKG): Sinus Tachycardia Rate 128
- 3. Arterial Blood Gas (ABG):
  - a. PaCO2 Level 51 mmHg,
  - b. HCO3 Level 30 mEq/L
  - c. pH 7.39
  - d. PaO2 79 mmHg
  - e. SaO2 98% on ventilator
- 4. Respiratory Rate: mechanical ventilation rate 14 with no spontaneous respirations
- 5. CBC
  - a. White Blood Cells: 12.9
  - b. Hemoglobin: 13.6
  - c. Hematocrit: 38.7
  - d. Platelet Count: 310,000
- 6. CMP:
  - a. Potassium 4.5 mEq/L
  - b. Sodium 135 mEq/L
  - c. Bilirubin: 2.1 mg/dL
- 7. GCS 8 after placement of EVD and drainage of 10ml of sanguineous fluid from drain.
  - a. Deficit for only opening eyes to pain (2)
  - b. Verbal response is incomprehensible sounds (2)
  - c. Motor score of (4) withdraw from pain

## **PART II: Critical Thinking Activity**

Use the findings from your evaluation to complete the following:

### Power of Attorney

Upon arrival in the ICU, you discover Mr. Smith does not have a power of attorney.

Discuss how you would determine who would make decisions on his behalf. Your response should be a minimum of 150 words.

Upon discovering that the patient in question does not have a power of attorney, there are several critical steps a nurse ought to follow to achieve the desired results. Based on the patient's case study, it is crucial to mention that the best thing to do is for a nurse to check for any existing evidence that needs to be reviewed and make a decision based on the facts presented in the advance directives. It is also wise to consider checking for many legal documents, especially a living will and durable power of attorney for healthcare. This will provide a leeway to help specify the patient's wishes and the designated health care proxy or

surrogate decision maker. If such documents are not there, themost appropriate step is identifying the patient's next of kin (Alsayed & Gunosewoyo, 2023). Normally, this can be close relatives such as spouses, parents, siblings, or adult children. The order of priority, such as spouse, adult children, parents, or siblings, should be followed. The selected kin should understand Timothy's health needs and make decisions based on his best interests and known values and preferences.

How can you utilize the chaplain to assist in locating the family? Your response should be a minimum of 150 words.

In the case of Timothy Smith, a hospital chaplain can play a crucial role in locating his family. Chaplains are trained to provide emotional and spiritual support and often have skills in communication and mediation that can be invaluable in such situations. Firstly, the chaplain can use his compassionate approach to build rapport with Timothy if he becomes conscious or with visitors who might have information about his family. They can gently inquire about any known contacts or personal details that might help identify and locate family members. Secondly, chaplains often have access to community resources and networks. They can reach out to local religious organizations, community centers or social services that might have

connections to Timothy's family (Alsayed & Gunosewoyo, 2023). This network can be useful if Timothy's family is not immediately reachable through standard hospital records.

Additionally, the chaplain can work closely with the hospital's social work department. Together, they can review Timothy's personal belongings upon admission, such as a phone or wallet, which might contain contact information. The chaplain's role in providing emotional support can also help ease the stress and anxiety of the situation for both the patient and the staff involved in the search.

Quality vs. Quantity of Life

Health care professionals often have to have difficult conversations with patients and families in the intensive care unit (ICU) regarding prognosis and outcomes.

What resources are available to have a difficult discussion with Timothy's family on quality versus quantity of life?

Your response should be a minimum of 150 words.

Based on Timothy's case study, the resources available that can be leveraged to improve the quality of healthcare outcomes by making effective decisions include a palliative care team whose specialists have experience with adequate training on how to handle discussions about end-of-life care. These team members can guide how to effectively manage symptoms and make decisions that align with patients' health needs, values, and references. An ethical committee also provides solutions to complex scenarios by offering a framework that helps mediate

discussions. Chaplaincy services and social workers are also important resources that provide spiritual and emotional support to the family and help them navigate the healthcare system (Alsayed & Gunosewoyo, 2023). Additionally, educational materials such as brochures and articles about end-of-life care and support can be provided to the family to help them make informed decisions. Perhaps patient advocates and counseling services should be provided to help provide needed support by advocating for patients' rights and health needs (Hossain et al., 2023).

Given Mr. Smith's assessment findings, discuss his quality of life should he receive hematoma evacuation surgery.

Your response should be a minimum of 150 words.

Given Mr. Smith's assessment findings, the decision to proceed with hematoma evacuation surgery must carefully weigh the potential benefits and risks, particularly concerning his quality of life. The potential benefits of providing the above healthcare services include helping minimize intracranial pressure (ICP), which is an important step in preventing further brain damage and improving neurological functions. It will also stabilize the patient's condition, allowing for more effective treatment and management of other injuries associated with the trauma and other physiological conditions (Hossain et al., 2023). The potential risk associated with this care service is that it.

may be linked with serious health complications such as infections and bleeding, which may worsen patients' health issues. It may also result in neurological deterioration due to patients' severe TBI. The quality-of-life consideration will include the patient's current neurological status as a result of the CGS scorer of 8 POS -EVD placement and dependence on a ventilator. Severe TBI

#### **Ethical Considerations**

Ethical considerations are an important part of nursing care but become especially vital when dealing with trauma patients, considering the potential of poor prognosis.

Discuss the ethical considerations of palliative care, possible outcomes, and limitations with Mr. Smith's condition, taking into account his assessment findings. Your response should be a minimum of 200 words.

In discussing Mr. Smith's case, several ethical considerations in palliative care come to the forefront. In this scenario, the provision of palliative care services focuses on improving the quality of life for Mr Smith since he has a serious illness by managing symptoms and providing support for difficult medical decisions. In this case, one of the ethical considerations includes patent autonomy, which entirely respects his right to make critical decisions about his treatment by ensuring that he is fully informed about his condition and the best available treatment options. Also, beneficence and non-maleficence should be balanced to ensure the patient has the most effective and harm-free treatment options (Hossain et al., 2023). This will help improve patient outcomes and

minimize the potential risk of medication errors. Also, it is wise to consider informed consent, where the patient decides based on the potential benefits and risks associated with each treatment option. Open communication should also be embraced, focusing on improving patients' quality of life by managing patients' pain and providing needed emotional and psychological support. This will help the family and the patient cope with the stress and anxiety that come with severe TBI. The only limitations with ethical considerations may include the emotional burden on the family and prognostic uncertainty resulting from a complicated decision-making process.

Psychosocial and Spiritual Considerations

Providing holistic nursing care for patients with complex conditions requires the nurse to consider the patient's psychosocial and spiritual needs.

Given the patient's current situation, discuss ways in which the nurse can take into account and address the patient's psychosocial and spiritual needs. Your response should be a minimum of 150 words.

In Mr. Smith's current health situation, addressing his psychosocial and spiritual needs is essential for holistic care. Providing psychological needs such as family involvement and emotional support to the patient is necessary. Allowing the patient to express his fears and anxiety about his health concerns will help minimize the development of negative feelings of isolation and emotional distress. Also, family engagement in decision-making about the treatment of their kin is important as it will provide the

comfort and support needed to help align care goals within the patient's values and preferences. Also, counseling services by a social worker or counselor are important as they will provide the patient with additional support that will facilitate in coping with his current health issues and any emotional changes he may be facing. The spiritual needs needed to support Mr. Smith include providing spiritual care concerning his beliefs (Jha & Ghewade, 2022). This involves regular visits by the chaplain or any other spiritual advisor to provide him with comfort, guidance, and necessary support to facilitate quick recovery. Also, the patient's beliefs should be respected by ensuring they are considered and incorporated into his care plan.

#### **Economic Issues**

BSN-prepared nurses understand system-based practice, including financial and economic considerations related to providing care.

Due to the multi-system
injuries,Mr. Smith incurred,
discuss theeconomic issues that
the individual and family may
encounter. Consider his ability
to work, housing needs,
supplemental income,

In Mr. Smith's current health situation, addressing his psychosocial and spiritual needs is essential for holistic care. Providing psychological needs such as family involvement and emotional support to the patient is necessary. Allowing the patient to express his fears and anxiety about his health concerns will help minimize the development of negative feelings of isolation and emotional.

temporary disability,
insurance, and medical
expenses. Your response should
be a minimum of 200 words.

distress. Also, family engagement in decision-making about the treatment of their kin is important as it will provide the comfort and support needed to help align care goals within the patient's values and preferences. Also, counseling services by a social worker or counselor are important as they will provide the patient with additional support that will facilitate in coping with his current health issues and any emotional changes he may be facing. The spiritual needs needed to support Mr. Smith include providing spiritual care concerning his beliefs (Jha & Ghewade, 2022). This involves regular visits by the chaplain or any other spiritual advisor to provide him with comfort, guidance, and necessary support to facilitate quick recovery. Also, the patient's beliefs should be respected by ensuring they are considered and incorporated into his care plan.

# Collaboration

What is the purpose of collaborating with the following when providing care for Mr. Smith? Explain the role of each team member's competency and how they contribute to Mr. Smith's care.

Occupational Therapists	These specialists will help Mr. Smith regain the
	ability to perform daily activities by assessing and providing
	ability to perform daily activities by assessing and providing
	interventions to improve fine motor skills, cognitive
	functions, and adaptive techniques for daily living. Their
	contribution will facilitate Mr. Smith's regain of

	independence in activities such as dressing, bathing, and
	and a Chin R Chin 2022)
	eating (Min & Shin, 2022).
Physical Therapists	It's their duty to assist in restoring Mr Smith's
	physical mobility and strength by developing and
	implementing strategies such as exercise programs to
	implementing strategies such as exercise programs to
	improve muscle strength, joint mobility, and overall
	physical function (Min & Shin, 2022). They will contribute
	physical ranction (trim to simi, 2022). They will contribute
	to his outcomes by aiding in the recovery of his femur and
	rib fractures, which will enhance his mobility and reduce
	,,,
	pain.

Respiratory Therapists	Their purpose is to help Manage Mr. Smith's
	respiratory instability by monitoring and adjusting ventilator
	settings, providing respiratory treatments, and educating the
	patient on breathing exercises (Min & Shin, 2022). This will
	ensure optimal respiratory function and prevent
	complications such as pneumonia.
Speech Therapists	The goal is to address the communication and
	swallowing difficulties the patient experiences by assessing,
	evaluating, and treating speech, language, and swallowing
	disorders. This will further help Mr. Smith regain his ability
	to communicate effectively and safely swallow food and
	liquids.

The role of dietitians is to ensure that Mr Smith
receives adequate nutritional support by assessing his
nutritional needs and developing a patient-centered diet plan
(Min & Shin, 2022). This will support Mr. Smith's recovery
effectively by providing the necessary nutrients for healing
and energy.
Their essence is to oversee his overall rehabilitation
process by coordinating and managing the rehabilitation
plan and addressing physical, emotional, and cognitive
aspects. This will provide a comprehensive care approach to
Mr Smith's recovery and ensure that all aspects of his
rehabilitation are addressed.

Their role is to facilitate managing and treating Mr.

Smith's wounds by assessing, cleaning, and dressing

wounds and monitoring for potential signs of infection. This

will contribute to the healing of surgical sites and prevent

complications such as infections.

Their duty, in this case, is to address Mr. Smith's

psychological and cognitive issues by evaluating cognitive

functions and providing interventions for psychological

conditions. This will support Mr Smith's mental health

wellness and cognitive recovery, promoting overall

rehabilitation.

The selected two team members from the above willbe Physical therapists whose musculoskeletal expertise will design a personalized rehabilitation program for Mr Smith's femur and rib fractures, enhancing his muscle strength, joint mobility, and overall physical function. They will manage his pain using techniques like manual therapy and heat or cold therapy and educate him on proper body mechanics to prevent further injury (Min & Shin, 2022). Meanwhile, respiratory therapists will manage Mr Smith's respiratory instability by adjusting ventilator settings and providing therapeutic interventions such as bronchodilators and chest physiotherapy. They will also educate Mr. Smith and his family on respiratory care techniques and equipment, ensuring he maintains adequate oxygenation and ventilation. Together, these therapists will play crucial roles in Mr Smith's recovery, enhancing his mobility, strength, and respiratory function while empowering him and his family with the knowledge to manage his care and prevent re-injury (Prasad & Gupta, 2020).

Effective team dynamics are essential in healthcare

to ensure that each team member's role is clearly defined

and that work is delegated appropriately. To achieve this, several principles can be applied. Firstly, a clear role definition is crucial, where each team member has a welldefined scope of practice outlining their responsibilities and limits. This can be achieved through detailed job descriptions, ensuring adequate training and certification, and conducting regular updates to adapt to changing healthcare needs. Secondly, effective communication is vital, with open channels for sharing information, regular team meetings to discuss patient care plans, and maintaining accurate documentation (Sdrulla & Chen, 2020). Thirdly, fostering a collaborative culture is important, as is promoting interdisciplinary collaboration, engaging in teambuilding activities, and setting shared goals aligned with patient care priorities. Fourthly, delegation based on competencies ensures tasks are assigned according to each team member's expertise, supported by regular skill assessments and appropriate supervision.

Additionally, accountability and feedback mechanisms, such as performance reviews and a culture of continuous improvement, help maintain high standards.

Lastly, a patient-centered approach involves patients and their families in the care process, educating them about care

plans and empowering them to participate actively in their recovery. By applying these principles, healthcare teams can ensure effective role definition and task delegation, leading to improved patient outcomes and a cohesive team environment.

Effective interprofessional communication is crucial when treating Mr Smith, as it ensures that all team members are aligned and can provide cohesive care. Each interdisciplinary team member, including occupational therapists, physical therapists, respiratory therapists, speech therapists, dietitians, physiatrists, wound care nurses, and neuropsychologists, must communicate their information professionally, accurately, and timely. This approach helps create a comprehensive care plan that addresses all aspects of Mr. Smith's recovery. Professional communication ensures that each team member respects the expertise and contributions of others, fostering a collaborative environment (Sdrulla & Chen, 2020). Accurate communication is vital to avoid misunderstandings and errors, which can significantly impact patient outcomes. Timely communication allows for prompt adjustments to the care plan based on Mr. Smith's evolving needs, ensuring that interventions are effective and coordinated. By adhering to these communication principles, the team can work synergistically, reducing the risk of complications and enhancing Mr. Smith's overall recovery process.

The presence of diversity, equity, and inclusion (DEI) significantly enhances the dynamics of team-based communications in healthcare settings. Diversity brings a variety of perspectives, experiences, and skills to the team, which can lead to more innovative solutions and comprehensive care plans for patients like Mr. Smith. When team members come from different cultural, educational, and professional backgrounds, they can contribute unique insights that enrich decision-making. Equity ensures that all team members have equal opportunities to contribute and that their voices are heard and valued. This fosters a sense of belonging and respect, which is crucial for effective collaboration (Sdrulla & Chen, 2020). When team members feel valued and respected, they are more likely to communicate openly and honestly, leading to better patient outcomes. Lastly, inclusion promotes an environment where all team members feel comfortable sharing their ideas and concerns without fear of discrimination or bias. This inclusive atmosphere encourages everyone to participate

actively and engage, essential for addressing complex healthcare challenges. By embracing DEI principles, healthcare teams can improve communication dynamics, leading to more effective patient-centered care. This approach benefits the team and enhances the overall quality of care provided to patients like Mr. Smith.

ICU psychosis, also referred to as ICU delirium, is a severe and temporary form of delirium that can occur in patients within an Intensive Care Unit (ICU). This condition manifests as a sudden onset of confusion, disorientation, hallucinations, and agitation. Patients may experience heightened anxiety, restlessness, and paranoia, often resulting in a significant disconnect from reality. Note that a wide range of factors contribute to the development of ICU psychosis, including sensory deprivation, sleep disturbances, continuous exposure to artificial lighting, and the stress associated with critical illness (Sdrulla & Chen, 2020). The constant noise from medical equipment and frequent interruptions of medical procedures can further exacerbate the condition. ICU psychosis is distressing for both patients and their families, but it is typically reversible

with appropriate management and care.

Nurses play a crucial role in preventing ICU psychosis/delirium through several interventions. Regularly reorienting patients helps maintain their connection to reality by reminding them of the date, time, and location and clearly explaining procedures and treatments. Promoting sleep hygiene is essential; minimizing noise and light disturbances at night and establishing a regular sleep-wake cycle can significantly improve sleep quality. Early mobilization, such as encouraging patients to sit up or do light exercises, reduces the risk of delirium (Sdrulla & Chen, 2020). Effective pain management and avoiding oversedation are critical, with regular pain assessments and using the least sedating pain relief options. Providing cognitive stimulation through activities like conversation, reading, or puzzles keeps the patient's mind engaged. Lastly, involving family members in care offers emotional support and familiarity, which can be comforting for the patient. By implementing these strategies, nurses can significantly reduce the incidence of ICU psychosis/delirium and improve patient outcomes.

Mr Smith is at a high risk of developing ICU

psychosis, also known as ICU delirium, due to several factors. His severe traumatic brain injury (TBI) and a Glasgow Coma Scale (GCS) score of 6 indicates significant brain trauma, increasing his vulnerability to delirium. The need for an external ventricular drain (EVD) further highlights this risk. Additionally, his respiratory instability managed with a ventilator, and lack of spontaneous respirations suggest high sedation levels, which are strongly associated with ICU delirium. His multiple fractures, pain, immobility, and use of pain medications, particularly opioids, exacerbate this risk. Abnormal lab values, such as elevated white blood cells and bilirubin, indicate underlying infections or metabolic disturbances contributing to the risk (Sdrulla & Chen, 2020). Finally, the ICU environment, characterized by constant monitoring, sensory deprivation, and sleep disturbances, can precipitate delirium. These combined factors place Mr. Smith at a significant risk of developing ICU psychosis.