REFLECTIVE ESSAY

Emergency put my skills to the test

When a patient’s condition deteriorated, Liam Evans raised his concerns, then led CPR during a cardiac arrest

During a clinical placement on a general medical ward in my third year of training, I started managing a caseload of my own patients.

At the beginning of a shift, during handover, a patient reported being in severe pain. The patient, who was male and in his fifties, had been admitted with rectal bleeding. After checking his medication chart, I noted he had only been prescribed paracetamol and codeine for pain relief, and had been given paracetamol an hour before.

Early warning score

After my mentor and I spoke to the patient, he told us he usually takes liquid morphine at home, so we bleeped the on-call doctor and requested a medication review.

A nurse practitioner reviewed the patient and a stat dose of liquid morphine was prescribed and given, with good effect.

A short while later, when we were doing the medication round, the patient still seemed to be distressed and I had a feeling that something was wrong. I carried out a full set of observations and the patient had an early warning score (EWS) of six, indicating that he needed an urgent review.

By this time, the ward doctors were in, so I asked them to review the patient. They decided to carry out an urgent chest X-ray and blood tests, and I offered to escort the patient to the X-ray department.

Staying calm

While we were in the department, the patient became unwell. I started to assess him using the ABCDE method – airway, breathing, circulation, disability and exposure – but during assessment the patient stopped breathing and had a cardiac arrest.

I asked the radiographer to get help and immediately started cardiopulmonary resuscitation, leading and managing the cardiac arrest until senior help arrived.

This experience increased my confidence, showing me that I have the knowledge and skills to react in emergency situations. I was amazed that I managed to stay calm, given the gravity of the situation, and that I led the arrest until help arrived.

It also highlighted why EWS monitoring is so vital, as well as underlining why clear communication and strong leadership are essential in emergency situations.

Unfortunately, the attempt to resuscitate the patient was unsuccessful and he died.

I learned valuable new skills through this experience and feel much more confident in my ability to manage deteriorating patients in the future.

The positive feedback I gained from staff involved in the arrest also increased my confidence in my knowledge and abilities, which I’m sure will make me a better practitioner, both as a student and as a qualified nurse.