

# Ep #139: Handling Emergencies in Primary Care: Be Prepared for the Unexpected



## Full Episode Transcript

With Your Hosts

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Welcome to the *Real Deal Nurse Practitioner Club*, the podcast for nurses who are ready to pass their boards and thrive in their careers as real deal nurse practitioners. I'm Anna and I'm the Director of Nursing Content at Blueprint Test Prep. Whether you're deep in exam prep or stepping into practice, I've got you. It is time to become the confident, knowledgeable NP that you're meant to be. Let's dive in.

Hello everyone and welcome back to the *Real Deal Nurse Practitioner Club Podcast*. Today I've got a little bit of a different kind of episode planned for you all. I'm going to talk about how to handle emergencies in the primary care setting. I know when I first started NP school for my FNP, I thought that working in primary care was going to be smooth sailing, right? I'm not expecting to see a lot of acute stuff that I was used to seeing as an RN in the hospital.

But emergencies can still happen in primary care. So today we're going to cover some of the possible kinds of emergencies you might encounter in primary care and just some general advice on what to do to make sure you and your clinic are prepared. So, what kind of supplies and equipment do you want to make sure you have on hand? Do you or the staff need any special training? Basically, what can you do to minimize risk for patients experiencing a medical emergency.

Now, this will not be all encompassing. I do not have that long with you, but these are just some examples in primary care in the role of the clinician. So, first, what are some of the emergencies in primary care that you might see and how does it affect you? In sharing stories between colleagues, some interesting emergencies that have occurred include acute asthma attack, allergic reactions, an active febrile seizure, a patient in a thyroid storm experiencing supraventricular tachycardia, and even a patient experiencing acute stroke symptoms. And that's just to name a few.

Remember, sometimes patients don't understand the significance of the symptoms they're having, or they quickly become worse during their visit. As you can tell, just about any type of emergency can walk into the door of

## **Ep #139: Handling Emergencies in Primary Care: Be Prepared for the Unexpected**

your clinic. So, the next question is, what's your role? Obviously, the patient's health and safety is your top priority.

As the first contact in the emergency situation, first things first, you need to assess the situation by evaluating the patient's airway, breathing, and circulation, and start any basic life support measures as necessary. And if needed, get help and alert local emergency services. Then, you need to work alongside the rest of the medical staff to prioritize management and stabilize the patient while awaiting further care or awaiting those emergency services.

And that really brings us to the next part that I want to talk about, which is risk stratification, or basically, how do we categorize and triage patients based on their condition and the likelihood of an adverse event. There are some emergencies that could be managed in the primary care office, such as the asthma flare, minor lacerations, or even a hypoglycemic episode. And I'll talk next about what kinds of medications and equipment the clinic should have available to address those types of common emergencies.

But what about a patient with active chest pain? Or the one having acute stroke symptoms? Or presenting with signs and symptoms consistent with an acute surgical abdomen. Going back to that nursing process that you learned in undergrad, assessment is first. You'll want to obtain a history as much as you're able to from the patient, anyone accompanying them, and look at their medical record. And then you'll obtain vital signs, conduct your assessment, and focus really on that chief concern.

So, for example, on a patient with chest pain, can you reasonably rule out an acute cardiac event? For a patient with acute respiratory symptoms, is stridor present? Are they requiring supplemental oxygen based on their pulse ox reading? For a patient experiencing a mental health crisis, how can you ensure both their safety and your safety while awaiting emergency personnel?

## **Ep #139: Handling Emergencies in Primary Care: Be Prepared for the Unexpected**

Now that you're thinking about really how to approach this patient experiencing an emergency, let's talk about medications and equipment that you're going to want to locate in your clinic. If you are a student in a clinical rotation, or you're even a Real Deal NP out in your own practice, the next time you're in the clinic, take a look, see what emergency supplies are there. The medications you have on hand may vary a little bit depending on if you're in a specialty clinic or not, but some basics are acetaminophen including suppositories, ibuprofen, diphenhydramine, epinephrine is a big one, 85 milligram aspirin tablets, naloxone, oxygen tank with tubing, nasal cannulas and masks, albuterol for a nebulizer treatment, glucose gel and a glucagon emergency kit, and even normal saline IV bags.

And then in terms of equipment, an AED is a must and the ability to start an IV could also be very helpful. And I mentioned albuterol a second ago, so make sure that a nebulizer machine is available. And then a 12-lead ECG is typically available in most primary care offices, and that can be used to help diagnose the condition, as well as provide a baseline ECG reading to be given to emergency personnel. And then of course, a glucometer for quick blood sugar readings is a must, and a basic suction setup is very helpful.

And then lastly, you'll want to double check the expiration dates of those medications, check the quantity, and make sure any necessary maintenance is done on equipment. For example, you really don't want to go set up supplemental oxygen and then realize the tank is empty. Or go obtain a 12-lead ECG and then you find out the machine doesn't work or it needs some sort of calibration.

Now, most offices and healthcare systems should have procedures in place for monitoring emergency equipment. But if not, as a Real Deal NP, you will be a leader in any emergency situation, and it is your responsibility to make sure you and your clinic are prepared.

## **Ep #139: Handling Emergencies in Primary Care: Be Prepared for the Unexpected**

And that leads into the last part here. Is there any specific training that you need to be able to handle emergencies in your primary care office? Well, first things, as a healthcare provider, you should at minimum be certified in basic life support and CPR. And that is going to give you a solid foundation to manage the patient while awaiting emergency services. You'll also want to make sure that all of the staff, including those not working in direct patient care roles such as secretaries or administrative assistants, are also CPR certified. They are usually the first people to lay eyes on the patient, and they can help identify emergencies early so that proper care can occur as soon as possible.

Now, beyond basic life support and CPR, it would be helpful to conduct practice drills or at least have monthly huddles with staff going over different scenarios. That way, everyone can practice the steps involved and be on the same page with what their role would be should an emergency happen. And you'll want to make sure that everyone is aware of where these basic supplies are, such as wheelchairs, oxygen tanks, and the AED, for example.

Lastly, if an emergency does happen, then once the patient is stabilized and follow-up is scheduled, or they were transferred to a higher level of care, then a debriefing session with the staff should occur. What went well? What could have gone better? Are there changes or improvements that need to be made for next time? Right, debriefing is not at all about pointing fingers about things that went wrong, but really it's a great opportunity to reflect on the experience, the process, look at everyone's feelings, and just make improvements.

Okay. I really liked this topic. I hope you all learned something and had a great time reviewing it. Right, we went into handling emergencies in primary care and just how to best prepare for those circumstances. In primary care, you are going to see a wide range of patients and conditions, but there is that high likelihood that you'll have to manage an emergency in your clinic one day. Some you may be able to manage in the office, and

## **Ep #139: Handling Emergencies in Primary Care: Be Prepared for the Unexpected**

others you'll have to transfer the patient to the hospital or some higher level of care.

But no matter what, make sure you stay up to date on your basic life support training, review the supplies available to you, and get the rest of the staff involved in preparations. That type of preparation will contribute to so many positive outcomes for your patients. As always, thanks for tuning in and I'll see you next time.

Thanks for listening to another episode of the *Real Deal Nurse Practitioner Club*. If you want more information about the different types of support that we offer to students and new nurse practitioners, you can visit [npreviews.com](http://npreviews.com). We'll see you next week.