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### ATI Real Life COPD Virtual Clinical Reflection Questions

- 1) Identify two members of the healthcare team collaborating in the care of this patient:
  - a. RN Allyson
  - b. RN Cody
- 2) Did your patient have any abnormal blood work (lab)? If so, *select a priority finding* and discuss why that value is concerning.
  - a. Yes, Patient has an abnormal Hemoglobin of 9.3g/dL which is below a male's average range which should be around anywhere from 14-18 g/dL. This patient Hmg is very low. Another abnormal finding is there WBC of 13,000mm<sup>3</sup>. It is higher than 11,000. We want anything below that, anything above that there is a possible infection. Hematocrit is also low & phosphorus, albumin too. There glucose is very high, normal range is between 70-100 maybe be diabetes.
- 3) Did your patient have any abnormal clinical diagnostic tests? If so, what were they and what was the abnormal finding? What can that indicate?
  - a. Patient SAO<sub>2</sub> is very low, meaning the percentage of oxygen in the blood is low (hypoxemia)
  - b. Under the note of radiology there is a note of “Notable hyperinflation of bilateral lung fields and flattened diaphragm. Changes characteristic of atelectasis in bilateral bases. Abnormal area of density presents in the left lung base suspicious of pneumonia.”  
& extensive left-sided pleural effusion noted in the lower lung field. This is marked change from the previous radiologic view & the hyperinflation, flattened diaphragm remains unchanged. Atelectasis of right lung base persists.  
Due to these finding we understand why the SAO<sub>2</sub> is at 88%.  
Chest X-ray reveals extensive left sided pleural effusion which indicates fluid build up and can affect heart pumping and stop lungs from working appropriately
- 4) What were some of the teaching topics covered in the scenario? Why were they important to the care of this patient?
  - a. The teaching of Ceftriaxone. It is important for patients to know what they are taking and the effects of it.
  - b. Nurse Allyson displayed a video to the patient and patient's daughter to demonstrate information of metered dose inhalers.
  - c. Verbalizing again the need of Mr. Gomez to use his incitive spirometer to help him with his breathing.
- 5) Identify three ways that the nursing team demonstrated the promotion of patient safety?
  - a. Nurse Allyson stopping the IV once Mr. Gomez complained of itchiness & started doing basic vital signs
  - b. Nurse Allyson asking the patient on how they feel when doing the IV push and discarding the IV push in the sharp's container.
  - c. Always verifying patients name and DOB to make sure we have the right patient.

- 6) Do you feel the nurse and medical team utilized therapeutic communication techniques when interacting with individuals, families, and health team members of all cultural backgrounds?
- If **yes**, describe: Yes, when RN Jessica let Mr. Gomez daughter express her concerns on her father being alone. Also, when Mr. Gomez daughter went to look for RN Allyson and once, she was able to locate her RN Allyson had her full attention to the daughter's concern.
  - When RN Cody listened to Mr. Gomez concern on his pain.
  - Perfect communication between the respiratory therapist and RN Allyson & concerns were expressed. Great communication between the nurse and the provider Mr. Simpson too.
  - If **no**, describe:

### Reflection

- Go back to your Preconference Form:
  - Indicate (**circle, star, highlight**) the components of your preconference form that you saw applied to the care of this virtual patient.
- Review your Nursing Problem Worksheet: Did you select a correct priority nursing problem?
  - If **yes**, write it here: I did choose one correct which was his impaired gas exchange
  - If **no**, write what you now understand the priority nursing problem to be:  
For my 2<sup>nd</sup> patient problem was body weight problem however I would change it to Fatigue w/decreased exercise tolerance due to what I saw when being with the pt. Mr. Gomez most of the time felt tired and felt like he did not want to answer questions due to him feeling fatigue. Or Inadequate nutritional intake because I saw that they changed his diet during time of care.
- Review your Nursing Problem Worksheet: Did you see many of your anticipated nursing assessments and interventions used?
  - Indicate (**circle, star, highlight**) the ones you saw utilized during the scenario.
  - Were there interventions you included that *were not* used in the scenario that could help this patient?
    - If **yes**, describe: Assess vital signs, I saw this once RN Allyson stopped the IV & she couples of times assessed Mr. Gomez lung sounds. They encourage Pt to use the incentive spirometer couple of times. In the beginning they also assessed his mental status by asking what hospital he's at and saw that he was not able to respond.
    - If **no**, describe: Independency of ADL's, assessing mobility. This was not assessed which I think they could have. To see effects on his body when he mobilizes but I understand he may be a risk of falls.

- 4) Often patient care will take a different direction than we anticipated at the beginning of our shift. Did that happen here? \_Yes, it did
- a. How did that impact the nursing care delivered? The nurses had to find another way to help Mr. Gomez to feel better. Patient was found with pleural effusion, so a drainage was to be put and that took a different direction also his breathing. When the IV was first put we expected to Mr. Gomez to not have a reaction however he did and needed to be stopped. There was a bleeding that occurred during the time of care which was unexpected.
  - b. What new, additional priority nursing problem (diagnosis) did you identify? (Refer to your NANDA list)
    - i. Write it here: \_\_\_Inadequate nutritional intake & Fatigue w/ decreased exercise tolerance\_\_\_

What was your biggest “take-away” from participating in the care of this patient? How did this impact your nursing practice:

My biggest “take away” from participating in the care of this patient is the unexpected findings. I was expecting to take of this patient with the information I already knew and problems however new problems occurred such as the IV causing itchiness, the unexpected bleeding. Its those findings that I did not expect to happen at first and I think this impact many nursing practices and changes throughout our time of care because of other factors. So that’s my biggest “take-away” to expect the unexpected.