Student Name:
Clinical Instructor:

ATI Real Life COPD Virtual Clinical Reflection Questions

1) Identify two members of the healthcare team collaborating in the care of this patient:
    a. _Allison RN_____
    b. _Rosa Gomez client's daughter _____
2) Did your patient have any abnormal blood work (lab)? If so, *select a priority finding* and discuss why that value is concerning.
    a. WBC is elevated at 13000 which indicates infections and or inflammation. His Hct was also low at 29 which mean there's a possible chance Mr. Gomez might be anemic.

    _____
    _____
    _____

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. Yes, his lungs were inflated bilaterally and his diaphragm was flatten along with changes of atelectasis._____

    _____
    _____
    _____

4) What were some of the teaching topics covered in the scenario? Why were they important to the care of this patient?
    a. The use of the inhaler in order to get the medication down in to the lungs and not just the back of the throat.

    _____

    b. Allison the RN described the antibiotic to Mr. Gomez and why it was given before administering and she described all possible side effects.

    _____

    c. She talked to him about his diet and explained that the doctor had changed him to a soft diet._____
    ____

5) Identify three ways that the nursing team demonstrated the promotion of patient safety?
    a. Doing the six checks to med administration

    _____

    b. Doing the 2 ID checks name and date of birth

    _____

    c. Using proper hand hygiene whenever providing care to Mr Gomez_____
    _____

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?

a. If **yes**, describe: Yes, nurse Allison us therapeutic communication skills when communication with the client's daughter about her concerns and when she communicated with other members of the health care team like the doctor, charge nurse, and respiratory therapist about Mr. Gomez.

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b. If **no**, describe:

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Reflection

1) Go back to your Preconference Form:
   a. Indicate **(circle, star, highlight)** the components of your preconference form that you saw applied to the care of this virtual patient.
2) Review your Nursing Problem Worksheet: Did you select a correct priority nursing problem?
   a. If **yes,** write it here: _____
   b. If **no,** write what you now understand the priority nursing problem to be: _Impaired mobility and risk for decreased cardiac output.

   _____

3) Review your Nursing Problem Worksheet: Did you see many of your anticipated nursing assessments and interventions used?
   a. Indicate **(circle, star, highlight)** the ones you saw utilized during the scenario.
   b. Were there interventions you included that *were not* used in the scenario that could help this patient?
      i. If **yes**, describe: _ the acetaminophen wasn't given because the client never complained of pain.

      _____

      _____

      ii. If **no**, describe:

      _____

      _____

4) Often patient care will take a different direction than we anticipated at the beginning of our shift. Did that happen here? _____
   a. How did that impact the nursing care delivered? __Yes, my priority problem was impaired gas exchange, and my second problem was acute pain. This impacted the care I provided because I had to use critical thinking during the time of my care because I couldn't due my planned interventions as I wrote them down. I was still able to provide care based off my clients needs._____

   _____

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b. What new, additional priority nursing problem (diagnosis) did you identify? (Refer to your NANDA list)
   i. Write it here: __Impaired mobility.
   _____

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 the simulation is how COPD is different in each individual when I've worked with COPD or Pneumonia Pts in the hospital the priority problem is often impaired gas exchange and as for Mr Gomez he wasn't really complaining of pain or shortness of breath. His O2 stat was 91% on 5L and he was later brought down to 4L which is in the normal limits for him. He also had a pleural effusion and a drainage bag which I've never seen before with COPD and Pneumonia pts._____
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