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### ATI Real Life THA Virtual Clinical Reflection Questions

- 1) What was Dale's fall risk score? Is that score considered low, medium, or high risk? What interventions in Dale's care should you be implementing?  
(Use your resources from class and clinical Fall Risk Score Interventions)
  - a. 50
  - b. High Risk
  - c. Fall risk band, call bell and personal items within reach, grippy socks, adequate lighting, room free of clutter, bed alarm on, 3 bed rails up, and assistive devices within reach.
- 2) From the pre-op exercises teaching scenario, pick one that Dale demonstrated incorrectly and explain how you would teach the correct technique.
  - a. He incorrectly used the incentive spirometer, instead of breathing in through the tubing he blew into the incentive spirometer. I would tell him to use the tubing as if it was a straw and suck in as hard as he could.
- 3) Dale receives morphine sulfate for his hip pain. The morphine order is for 2-4mg IV Q 3-4 hours for severe or breakthrough pain. What is wrong with this order?
  - a. It doesn't have a range for how many mg to use based on pain level. For example, 3mg for 4-6 pain, 4mg for 7-10 pain. Or something of the sort to advise the nurse exactly how much to give.
  - b. Morphine is dispensed in 2mg/ml concentration. If Merryll gave 4 mg, how many ml's of morphine did she administer? 2mL
- 4) Dale is assessed for skin integrity on his heel. What are some interventions the nurse could implement to protect his skin? What are the concerns if no interventions are implemented?
  - a. They could turn him every 2 hours rotating between supine, left side, and right side to reduce the risk of pressure injuries.
  - b. By promoting early ambulation after surgery to the chair for meals or up to walk for a little bit.
- 5) Identify three ways that the nursing team demonstrated the promotion of patient safety?
  - a. Bobby Lee evaluated Dale's legs for size for compression stockings to promote blood flow and reduce the risk of DVT.
  - b. After Bobby Lee inserted his IV, he remembered to lower his bed all the way to reduce Dale's risk for falls while waiting for surgery. He was also reminded to not get up without help by Merryll after surgery.
  - c. Multiple times throughout his stay his name and DOB was verified by the nurses to make sure the right patient was receiving the right care/surgery.
- 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: Nurse Amani left many opportunities for Dale to express his concerns to her or ask questions throughout her teaching. She also made continuous eye contact and provided a quiet/private area for them to talk. Also,

when Dale became frustrated with Devon, she was able to explain how Devon was trying to help and de-escalate the situation.

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: **Acute Pain**
  - b. If **no**, write what you now understand the priority nursing problem to be:  

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- 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:  

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    - ii. If **no**, describe: **Almost everything I had was shown in the care of this patient and even what I had that wasn't shown exactly the way I wrote it was evaluated/treated somehow during his time of care.**
- 4) Often patient care will take a different direction than we anticipated at the beginning of our shift. Did that happen here? **No, I anticipated he would be in pain and have impaired mobility which he did after surgery.**
  - a. How did that impact the nursing care delivered?  

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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 skin integrity.**

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

That even though this was only an elective surgery and not an emergency one it still had a lot of impact on the patient. They were still in a lot of pain throughout the whole process and had some anxiety about how the surgery would go. This taught me that even though it may not seem like a crazy/big surgery to me it is still stressful to the patient and that every surgery no matter how small deserves the highest level of care possible to give to the patient.