Student Name:
Clinical Instructor:

ATI Real Life THA Virtual Clinical Reflection Questions

1) What was Dale's fall risk score? 45 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. Fall risk band on and non-slip socks.
   b. Bed in lowest position and bed alarm on always.
   c. Use of gait belt when ambulating.
2) From the pre-op exercises teaching scenario, pick one that Dale demonstrated incorrectly and explain how you would teach the correct technique.
   a. Dale exhaled forcefully into the Incentive Spirometer. I would correct Dale by telling them that the correct use is to inhale through the tube on the IS like you are sucking a thick milkshake through a straw, slow and steady.
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 does not include a numeric score for pain, and it does not include rate of administration including gtt/mL, gtt/min, and mL/hr.
   b. Morphine is dispensed in 2mg/ml concentration. If Merryll gave 4 mg, how many ml's of morphine did she administer? 2 mL's of morphine.
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. Interventions include elevating the heels off the mattress and applying aquacels to prevent breakdown.
   b. Concerns if no interventions are implemented are skin breakdown, pressure injuries, and infection of the open wound.
5) Identify three ways that the nursing team demonstrated the promotion of patient safety?
   a. Utilizing a gait belt and a walker when ambulating Dale and ensuring the wheels on the wheelchair were locked before they got up.
   b. Elevating heels slightly off the mattress since Dale was feeling some discomfort and to prevent skin breakdown.
   c. Utilization of IS and coughing and eep breathing after auscultation of crackles in the lungs to prevent atelectasis.
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: Everyone was very respectful towards Dale and their partner with their pronouns and sexual identity.
   b. If **no**, describe: N/A

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: Impaired Gas Exchange
    b. If **no,** write what you now understand the priority nursing problem to be: N/A
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: N/A
        ii. If **no**, describe: All my selected interventions were utilized in the care of Dale.
4) Often patient care will take a different direction than we anticipated at the beginning of our shift. Did that happen here? N/A
    a. How did that impact the nursing care delivered? A lot of Dale's complications were specific to pos-operative care and were handled as such.
    b. What new, additional priority nursing problem (diagnosis) did you identify? (Refer to your NANDA list)
        i. Write it here: Risk for Falls due to inadequate home safety measures.

What was your biggest "take-away" from participating in the care of this patient? How did this impact your nursing practice: My biggest takeaway is that post-operative complications include every part of the body and thorough assessments are important for catching these complications and handling them promptly and accordingly. This reminded me to pay very careful attention to detail when doing my head-to-toe assessments on any patient.