

BEEBE HEALTHCARE

MARGARET H. ROLLINS SCHOOL OF NURSING NURSING 101 – FOUNDATIONS OF NURSING Communication Reflection Assignment

Student: Jordyn Palmer		Date of Interaction: 09/23/2025	
Client Initials: AB	Age: 86	Admitting Diagnosis: CVA	
General Information:			
Description of Environment: The patient's room was not clustered. I saw their bags on one of the tables, but there seemed to be no trash on the floor. The bathroom looked clean as well. The patient had the TV on most of the time and their personal belongings within reach. The call bell was also in reach, bed was in the lowest position, and the chair alarm was on for safety due to the patient sitting in it. The bed alarm was on when the patient was in it. The patient was on the 5 th floor and room 516.			
Description of Client: The 86-year-old patient had a clean hospital gown on, sitting in a chair next to the bed, and hair brushed. They also had a hospital eyepatch on their left eye as well. The patient was able to listen and answer my questions with hand gestures. The patient overall seemed anxious about their eye, but enjoyed the conversation due to smiling at the end of the conversation and thanking me for talking to them.			
Goal of Interaction: The goal of the interaction was to help decrease anxiety of the right eye (trouble to keep open).			

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Interaction Narrative		
Minimum of five (5) & maximum of eight (8) interactions in order as it occurs – number each exchange		
Student:	Patient:	Analysis:
1. Your statements with non-verbals “How is your eye doing today?” <i>Direct eye contact and in front of the patient standing towards the patient.</i>	Clients statement with non-verbals “My eye is a lot foggier than yesterday” <i>Patient points to right eye as they are sitting down in their chair with an upset tone.</i>	Technique: Open-ended Rationale for use: The patient had trouble opening their right eye (not normal). I wanted to understand more of the situation and see if their eye is getting better or worse. Effectiveness: It was effective because they explained their condition was worse from the following day. They were willing to talk to me about the current condition of it.
2. Your statements with non-verbal “How does that make you feel?” <i>Direct eye contact and in front of the patient standing towards the patient with my head</i>	Clients statement with non-verbal “It makes me feel very anxious” <i>Patient is sitting down in their chair with hands raised (palms up and elbows bent) with</i>	Technique: Open-ended Rationale for use: This technique helps me to understand

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<p><i>tilt with empathic tone.</i></p>	<p><i>an upset and worried tone.</i></p>	<p>more of what emotion they are currently feeling at the moment.</p> <p>Effectiveness: It was effective because I got to understand more of their emotions, in which was anxiety. In addition, it helps me to better understand how they are feeling in the moment and what I can do to help.</p>
<p>3. Your statements with non-verbals</p> <p><i>“You said you feel anxious?” Lean forward with direct eye contact while standing in front of the patient with empathetic tone.</i></p>	<p>Clients statement with non-verbals</p> <p><i>“Yes, I really do.” Patient is still sitting in the chair facing me with a frown and points to face.</i></p>	<p>Technique: Restating</p> <p>Rationale for use: The technique was used to show that I was listening to the patient and cared about how they felt.</p> <p>Effectiveness: It was effective because the patient confirmed that they were truly anxious about their right eye. Also, the question showed I listened and cared.</p>

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<p>4. Your statements with non-verbals</p> <p>“I see that you pointed to your face. Can you explain to me what that means?” <i>Leaning forward while standing in front of the patient curious tone.</i></p>	<p>Clients statement with non-verbals</p> <p>“Yes. I don’t want anything wrong with my eye because I am afraid of what it will do to my self-image.” <i>Patient has an upset tone and is sitting in the chair.</i></p>	<p>Technique: Clarifying</p> <p>Rationale for use: It was used to help clarify the reason behind pointing to her face and give me a better understanding.</p> <p>Effectiveness: It was effective because I understand the reasoning behind her pointing to her face. The patient is worried about self-image or portrayal.</p>
<p>5. Your statements with non-verbals</p> <p>“Now I understand. Can you tell me some ways that help you deal with this anxiety?” <i>Head nodding and in front of the patient with a curious tone.</i></p>	<p>Clients statement with non-verbals</p> <p>“Well, I like to do deep breathing while closing my eyes.” <i>Patient is facing me with now a calm tone</i></p>	<p>Technique: Open-ended</p> <p>Rationale for use: It was used to help me better understand if the patient had any personal techniques to deal with anxiety.</p> <p>Effectiveness: It was effective because they had a technique, and I can encourage them to use it.</p>

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<p>6. Your statements with non-verbals</p> <p>“That’s good. Are you going to use your deep breathing when you feel anxious about your right eye?” <i>Smiling while facing the patient with an encouraging tone.</i></p>	<p>Clients statement with non-verbals</p> <p>“Yes, I am.” <i>Patient smiles while sitting in the chair.</i></p>	<p>Technique: Direct Question</p> <p>Rationale for use: It was used to clarify that the patient will use their deep breathing technique to help decrease anxiety with their right eye.</p> <p>Effectiveness: It was effective because the patient smiled at the end and clarified that they would use the deep breathing technique to help decrease anxiety with their right eye.</p>
<p>7. Your statements with non-verbals</p>	<p>Clients statement with non-verbals</p>	<p>Technique:</p> <p>Rationale for use:</p>

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		Effectiveness:
8. Your statements with non-verbals	Clients statement with non-verbals	Technique: Rationale for use: Effectiveness:

Evaluation:

Reflection:

To conclude, the patient was awaiting discharge, but it did not impact our conversation. They were talking mostly during the conversation. It seemed they enjoyed the conversation due to smiling at the end and thanking me. I thanked them as well before I left for the day.

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Barriers:

One barrier was that their eye patch kept falling during the beginning of the conversation. This made it difficult for the patient to look at me directly, but I was able to adjust the eye patch for them, so it is more comfortable.

Personal Strengths & Weaknesses:

My personal strengths are that I am good at listening and that most of my nonverbals aligned with my verbal's well. For example, leaning forward and facing the patient when I was speaking to show concern.
My weaknesses are being able to continue the conversation (worrying about what to say) and to keep eye contact with the individual when they are speaking. I tend to look elsewhere sometimes, due to anxiety of other tasks, when my focus should be the patient in that moment.

Strategies for Improvement:

Some strategies for improvement are to build more confidence with starting the conversation and to let the conversation flow rather worrying what question to ask next or what to say. Also, making sure to stay focused on the patient.