

### ATI Real Life COPD Virtual Clinical Reflection Questions

- 1) Identify two members of the healthcare team collaborating in the care of this patient:
  - a. The nurse
  - b. The respiratory therapist
- 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, the patient had a low prealbumin level. Prealbumin is a measure of a person's nutritional status. Low levels of prealbumin can indicate malnutrition, which can be further impacted by the patient's chronic COPD. The patient also does not have the best lifestyle choices, as he smokes and drinks alcohol. The low prealbumin levels indicate that there is a protein deficiency in the body, which is concerning due to the patients COPD, and it can largely impact recovery.
- 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, my patient received a new Chest X-ray which indicated that the patient had a pleural effusion. This meant that the patient likely needed to have a thoracentesis and/or a chest tube. Ultimately, the patient ended up with a chest tube to help treat the pleural effusion.
- 4) What were some of the teaching topics covered in the scenario? Why were they important to the care of this patient?
  - a. How to use a metered dose inhaler: This was important to the care of the patient because he lives alone, and he needs to know how to administer the metered dose inhaler himself, both safely and effectively.
  - b. The nurse taught the patient about his lifestyle habits, like smoking and drinking, and taught him several ways on how to help fix these habits in order to hopefully help him with his COPD.
  - c. The nurse taught him about his allergic reaction to the ceftriaxone, and how that could be related to his other medication allergy. This is important to the care of this patient because it is important for the patient to know of any possible medication allergies, and it would help him know in the future that he had an allergic reaction to the ceftriaxone.
- 5) Identify three ways that the nursing team demonstrated the promotion of patient safety?
  - a. The nursing team demonstrated patient safety by always using the two patient identifiers, name and date of birth. With every encounter with the patient, the nursing team always asked for name and date of birth, to confirm that they were giving the correct nursing care to the correct patient.
  - b. The nursing team demonstrated patient safety by educating the patient on all aspects of his care. When the patient had an allergic reaction to ceftriaxone, the

nurse made sure to tell the patient that he was having a reaction, and that is can be common due to this other medication allergy. The nurses would educate him on what they were going to do, and why they were going to do it.

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- c. The nursing team demonstrated patient safety by promptly responding to any concerns from the patient or his family. When his daughter told his nurse about the allergic reaction from his antibiotic, the nurse was very prompt to respond and check on the patient. When he was complaining of chest pain, the nursing team made sure to inform the physician as soon as possible and assess the patient to make sure he was still breathing okay. By addressing his concerns promptly, they were able to ensure that he was still being safe and cared for.

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- 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, the nurse and medical team did utilize therapeutic communication techniques when interacting with both the patient and the family. When the patients daughter got upset and worried about her father living alone and by himself, the nurse made sure to perform active listening and encouraged both the patient and his daughter to talk about their worries and express their feelings. When communicating with others on the health care team, they made sure to listen to what was being said and communicate effectively. When the assistive personel was informed of the patients chest pain, she listened to the patient, ensured him that his concerns were being addressed, and informed the nurse and other members of the healthcare team, who all listened effectively.

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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: Impaired gas exchange
- 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: No, no other interventions or assessments were used in this scenario. I had listed some interventions like coughing and deep breathing, but these in fact did not help this patient, as he was receiving too much oxygen, so this would not be a good intervention for him. Another intervention I had listed was to increase the oxygen rate, assuming that the patient's oxygen saturation would be low. However, with this patient, his oxygen saturation was high and the patient needed to be titrated down on oxygen rather than increased.
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4) Often patient care will take a different direction than we anticipated at the beginning of our shift. Did that happen here? Yes

- a. How did that impact the nursing care delivered? While the main priority for this patient was still to keep his respiratory function good, towards to end of the simulation, the patient injured himself and experienced some skin breakdown, shifting the focus of the care onto his skin breakdown rather than his respiratory status, as it had been stable.
  - b. What new, additional priority nursing problem (diagnosis) did you identify? (Refer to your NANDA list)
    - i. Write it here: Risk for impaired skin integrity
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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 that different people can have different responses to the same disease. This patient had COPD, which typically means that the patient will have a low oxygen saturation, and will need to be on oxygen therapy. While this patient was on oxygen therapy at 5 liters, this ended up being too much for the patient, as he had an oxygen saturation of 93%. This patient had to be titrated to a lower amount of oxygen, and this is not what I was expecting, as I had seen that many patients with COPD are usually on 3 to 4 liters of oxygen. Many of my planned interventions included coughing and deep breathing, but this was not helpful for this patient, as he was already receiving too much oxygen, and this would not have helped him. This made me realize that while the disease itself can be characterized by similar symptoms, every patient can respond differently, and every patient will not respond the same way to the same treatments, nor will every patient need the same treatments. This will help me in the future nursing practice, as I

will always take this into consideration to provide patient-centered and patient specific care.

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