

Covenant School of Nursing Reflective



Learning to be a reflective practitioner includes not only acquiring knowledge and skills, but also the ability to establish a link between theory and practice, providing a rationale for actions. Reflective practice is the link between theory and practice and a powerful means of using theory to inform practice thus promoting evidence based practice.” (Tsingos et al., 2014)

Using the Reflective Practice template, document each step. The suggestions in the boxes may help you as you reflect on the incident. This Reflective Practice document will be reviewed by faculty and then you will post the final reflection in your LiveBinder folder.

<p>Step 1 Description A description of the incident, with relevant details. Remember to <u>maintain patient confidentiality</u>. Don't make judgments yet or try to draw conclusions; simply describe the events and the key players. Set the scene! It might be useful to ask yourself the following questions</p> <ul style="list-style-type: none"> • What happened? • When did it happen? • Where were you? • Who was involved? • What were you doing? • What role did you play? • What roles did others play? • What was the result? 	<p>Step 4 Analysis</p> <ul style="list-style-type: none"> • What can you apply to this situation from your previous knowledge, studies or research? • What recent evidence is in the literature surrounding this situation, if any? • Which theories or bodies of knowledge are relevant to the situation – and in what ways? • What broader issues arise from this event? • What sense can you make of the situation? • What was really going on? • Were other people's experiences similar or different in important ways? • What is the impact of different perspectives eg. personal / patients / colleagues?
<p>Step 2 Feelings Don't move on to analyzing these yet, simply describe them.</p> <ul style="list-style-type: none"> • How were you feeling at the beginning? • What were you thinking at the time? • How did the event make you feel? • What did the words or actions of others make you think? • How did this make you feel? • How did you feel about the final outcome? • What is the most important emotion or feeling you have about the incident? • Why is this the most important feeling? 	<p>Step 5 Conclusion</p> <ul style="list-style-type: none"> • How could you have made the situation better? • How could others have made the situation better? • What could you have done differently? • What have you learned from this event?
<p>Step 3 Evaluation</p> <ul style="list-style-type: none"> • What was good about the event? • What was bad? • What was easy? • What was difficult? • What went well? • What did you do well? • What did others do well? • Did you expect a different outcome? If so, why? • What went wrong, or not as expected? Why? • How did you contribute? 	<p>Step 6 Action Plan</p> <ul style="list-style-type: none"> • What do you think overall about this situation? • What conclusions can you draw? How do you justify these? • With hindsight, would you do something differently next time and why? • How can you use the lessons learned from this event in future? • Can you apply these learnings to other events? • What has this taught you about professional practice about yourself? • How will you use this experience to further improve your practice in the future?

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I was in SICU East 4 for my clinical rotation on November 3rd and 4th. I was assigned the care of a patient each day. I was in the role of the student nurse. I felt excited and a little less nervous than my previous clinical rotation because I had already seen what SICU was like. I was assigned a patient who was brain dead on Tuesday November 3, 2020; I found it difficult to speak to this patient because I knew they couldn't hear me. I spoke to my clinical instructor about this and she had me realize that even though this patient was brain dead due to bad decisions they made they were going to give someone else a better life because they were donating their organs.

On Wednesday November 4, 2020 I was assigned to a patient who was found down and unresponsive. This patient came in with diabetic ketoacidosis (DKA), metabolic acidosis and respiratory failure. This patient was on an insulin drip, norepinephrine drip, potassium, and bicarb. I knew the insulin was treating the high blood sugar, norepinephrine is a vasopressor and was maintaining the blood pressure, bicarb was treating the metabolic acidosis by increasing the PH and HCO₃ levels, but I didn't know why the patient was receiving potassium. I learned that when insulin is given, insulin drives potassium out of cells thus causing potassium levels to decrease, so the potassium was given in order to maintain potassium within normal limits. The nurse I was with taught and showed me the insulin protocols that covenant has in place, so I was able to see and follow that protocol. My nurse made a mistake at one point with determining the rate of the insulin, and I was able to catch the mistake and inform my nurse of it. I caught the mistake because I was teaching one of my classmates about the insulin protocol and how it was done. I was proud of myself because I wasn't afraid to speak up and let my nurse know that I believed she had made a mistake. I was also able to teach one of my classmates how to draw blood out of an art line.

I plan to continue being enthusiastic and willing to learn so that I can continue to connect what I have learned in lecture to clinical experiences. I will continue to take any opportunity given to me to learn/practice skills and to continue expanding my knowledge.