



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?

Covenant School of Nursing Reflective

Student Name:

Use this template to complete the Reflective Practice documentation. Do not exceed the space in each box. Any information not visible to you is lost.

<p>Step 1 Description</p> <p>In our Sim I was one of the nurses in our scenario and our patient had ventricular septal defect and was experiencing hypokalemia, so we needed to give a KCL bolus. Me and Brianna knew what we were doing but got flustered in the process. We knew that the potassium was low and the heart rate was very high and the bp was low so we decided to call the doctor and see what he wanted us to do with the Lasix and digoxin. He wanted us to give the KCL bolus over 3 hours. So we went and got the med and hung it but I didn't know the rate and wasn't too sure about it so I decided to pause the med so it didn't do any harm.</p>	<p>Step 4 Analysis</p> <p>We can apply the signs and symptoms and know that the patient was experiencing hypokalemia. Some issues that could've arise from the event is that if we had not paid attention to the doctors' orders we could've possible killed the baby by making the heart stop with the KCL.</p>
<p>Step 2 Feelings</p> <p>In the beginning I was very nervous but confident at the same time. I was thinking oh my gosh we are going to have to give lots of meds, but it turns out we only had to do one. The whole not knowing the rate of the fluid made me feel dumb and anxious because I could possibly hurt this patient.</p>	<p>Step 5 Conclusion</p> <p>In order to not look like incompetent nurses, we should've figured out the rate in the med room and not at the bedside. I have learned that sometimes families want to pressure you into doing things quickly when you have to do things beforehand. And I learned that I need to stand up for the patient and not get rushed because I work for the patient not the family.</p>
<p>Step 3 Evaluation</p> <p>It was good that we learned a lot about what to do in a situation like that with the mother insisting on us to do something. But not doing something that we should have done in the med room at the bedside like not knowing the rate made us not look like confident nurses and might scare the patient and family. We did all the rights of mediations and the basic things right but the IV med got us with the rate.</p>	<p>Step 6 Action Plan</p> <p>I will always know now to check the rate and verify everything before going into the room. It will help me in the future because I won't make the same mistakes I did in the scenario. I can apply the aspect of slowing down and thinking before doing something in all parts of my life and career.</p>