Covenant School of Nursing Reflective

Student Name:

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.

Step 1 Description A description of the incident, with relevant details. Remember to maintain patient confidentiality. 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 • 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?	**Step 4 Analysis** • 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'
Step 2 Feelings Don't move on to analyzing these yet, simply describe them. • 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?	**Step 5 Conclusion** • 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?
Step 3 Evaluation • 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?	**Step 6 Action Plan** • 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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Student Name: Brianna Luera

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.

Step 1 Description I was in pediatric simulation and we had a patient with ventricular septal defect and he heart rate was high and her blood pressure was low and she was irritable. I thought she was irritable because she was in pain and so did the other student nurse that was simulating the situation with me. We hadn't noticed that her potassium was low until we called the doctor to see if the doctor wanted us to hold her medications, digoxin and furosemide, because her heart rate was 190. Now, we noticed that her potassium was low and the doctor wanted us to give a bolus to raise her potassium. We also drew up her acetaminophen, because we thought she was in pain. During post conference, our instructor informed us she was irritable due to her low potassium not pain.	Step 4 Analysis A normal potassium level is between 3.5-5.0 and the patients was below the normal range. This can be caused using diuretics, which the patient was on. This shows that monitoring the patient's electrolytes level should be closely monitored when on diuretics because the body is excreting fluids, which can lead to hypokalemia
Step 2 Feelings During this situation, at the beginning I was kind of all over the place because the patient was crying and I didn't know what was wrong with her. I was thinking she was crying because she was in pain and I wanted to give her medication so she wasn't in pain anymore. So overall I felt nervous and not too sure what to do to help the patient, who was a toddler and couldn't express her feelings to me.	Step 5 Conclusion I could have made the situation better by being more assertive with the patient's parent by telling her I am going to do all my assessments and I will let you know what I find. This way I don't feel the pressure from the parent to just assume that that the child is in pain, but I still want to hear the patient out and listen to their concerns because they can be the first to catch important signs and symptoms about their child even if they don't understand the underlying cause of it.
Step 3 Evaluation It was good that we noticed that her potassium was low, and had gotten the order from the doctor to give the bolus. It wasn't good that we didn't put two and two together and understand the signs and symptoms of hypokalemia. If we had noticed this, we wouldn't have needed to administer the acetaminophen that we gave for pain because she wasn't in pain she was irritable. I was good that the other student that I was with noticed that we needed to call the doctor about the high heart rate, because that's when we noticed the low potassium.	Step 6 Action Plan I think overall this was an amazing learning experiences and it shows the importance of understanding the patient's laboratory values and signs and symptoms to catch when a patient's labs might be below or above normal range. I also learned the importance of just remaining calm in a situation when a child is crying and a parent is concerned and asking questions. I would also ensure to look at the at the patient's lab values before going into the room just to see if anything was abnormal first.

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