

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. personnel / 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 had my clinical rotation on the SICU floor at the Covenant Hospital. First thing in the morning, I performed a full head to toe assessment on my patient who had a GI bleed. She was awake, alert, oriented, and in good spirits. The other nurses were saying that today was the best she had looked since she had been there. During my assessment, I noted no abnormalities besides a tachycardic heart rate. A few hours later, her blood pressure dropped to the 40s and her heart rate increased to 220. Her hemoglobin had also dropped from 8.0 mmHg to 5.0 mmHg. She was yellow, cold, clammy, and yelling in pain. A code was started on her and she was intubated, and I was able to assist and observe. After we got her stabilized, we took her down to CT and it was concluded that she had an esophageal bleed that was filling her abdominal cavity with blood.

At the beginning of the code, I was feeling very hesitant and scared. I didn't know what role I needed to play and how I could help without getting in the way. The event made me feel nervous for my patient and her daughter that was in the room at the time that this was taking place. The most important feeling that I felt was confusion because, like I said previously, I had been in her room multiple times and assessed her and she looked stable and in a good condition.

I think that the teamwork performed by the hospital staff was good during the code. Everyone worked together and knew their role and how to best help the patient. One thing that I thought was bad was that no one was explaining to the family member what was going on or reassuring her in any way. I think that the entire process went well considering that we were able to stabilize my patient during a time of crisis. I did well helping out where I was needed, even if it was just grabbing supplies, taking notes, and cleaning up clutter in the room that was in the way.

I can apply my knowledge to this situation by learning about how a code is ran in lecture and in lab, and then actually seeing it and being involved in it in person. I knew the roles that needed to be filled and I even knew the medications that were being given. There is evidence saying that the family member should stay in the room during a code, and that is because it allows the family to see what we were doing and just allow them to be there during such a difficult time for the patient and the family. In this particular situation, the family member did stay in the room and I think that it made her feel more confident in her mom's care.

I think I could have made the situation better by getting to the patient's room faster. At the time this began, I was next door in another patient's room helping him use the bathroom. Looking back, I would have been more insertive and offered to do more than I did, even if I am just a student. After this event, I have learned the importance of teamwork and how vital it is to constantly check your patients' status, even if they were just fine a few hours ago.

Overall, I think that this situation was a good learning experience. I was able to apply what I have been reading about to real life and it was an eye-opening event. I am able to acknowledge my weaknesses and what I can improve on but also realize my strengths and continue to better my nursing practice. I will be praying for this patient and I hope that her medical team is able to treat her to the best of their ability. In conclusion, I can draw that things can change in the blink of an eye and that is important to always stay on your toes.