

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 have patient who have a mitral valve regurgitation and he had it repair last week. He has a lot of cardiac issues such as Myocardial Infarction, Coronary Artery Disease, Heart stents, Congestive Heart Failure. His ejection fraction is 35%, so he's not pushing a lot of blood. He has an IV access on his neck - Milrinone and Dobutamine is running. The doctor order that day to decrease Dobutamine because they are trying to wean him off of it and he also order it to change it to midline IV access. He also has an arterial line and wound vacuum connected to his sternum where they did the surgery (Mitral Valve Annuloplasty).

I was kind of nervous because it's our first day back on clinicals and I thought it was going to be chaotic because it's ICU, but it was a good day. I'm able to see a lot of things that we studied such as arterial line and I'm able to do the process of getting blood in it because they ordered a coagulation lab because he's going to Interventional Radiology for thoracentesis that afternoon because of pleural effusion on his right lungs. Also, how they try to level it on his midaxillary and zero it out. I'm able to see how they put in midline IV access with ultrasound. He had a physical therapist that helped him walked around the unit and I saw that they really don't want him to use his arms because that might strain his chest and upper arm muscles. The nurse that I was with also shows the dual chamber temporary pacemaker device and with that they are trying to hold the Enoxaparin to discontinue the temporary pacer wires. Furthermore, when the doctor was there on the room and he said something that impacts me in a way, he was talking about the medication and he asked one of the nurse practitioner what is the half-life of Milrinone and she did not know. He said it's important to know what it is because they can't take the patient off of it immediately because that can cause complication and that it will take days to wean it off of it. He also said that we can't just take or remove someone off of something once we see the patient is improving and the goal is not to make the patient go home because he will be back on the hospital again after 3 days.

I really learned a lot of things and my nurse was really good at explaining stuff. Also, the patient that I had is really nice. Everything went smoothly the time that I was there. I did assessments, give medications, drawing blood on ART line, and assist the nurses. Mostly observe because my nurse has a new nurse that she is orienting.

I can apply to this situation is the ART line safety measures like the transducer needs to be level with the patient's midaxillary, which they did. He is at risk for infection because of the surgery.

I learned how to check for safety equipment, communication, teamwork, patient's condition - what they did to treat it until the day that I was there.

Overall, it was a good day. I see learned a lot of things. I can use the lessons I learned to really know my patient's medications - why are they getting it, drug-drug interaction, etc., do all my safety measures to ensure safety of the patient. Yes, I can apply the things I learned on to other events. This taught me about professional practice that nurses really have a lot of responsibility, I knew that but we're almost at the end of nursing school and it's all just coming together, and we will be an actual nurse - it's nerve-wracking but going to do my best to be the a good nurse.