

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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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>A patient needed to provide a urine sample via straight cath. The patient refused and after she spoke with her doctor a second time, she agreed to have the straight cath done for a urine sample. The nurse explained to her as did the doctor about why just taking a sample from bed pan would not suffice and how they needed a clean sample. We informed the patient to call us when she was ready for the catheter. The patient immediately started to cry and stated that she knows it was going to hurt. We assured her that the procedure would be quick and would only be done when she was ready. When the patient was ready the nurse and I went in to do the procedure. The patient was crying loudly and her body was very tense. The patient's husband consoled her and held her hand. The nurse helped me keep my sterile field and held the patient's legs open so that I had a clear view. The nurse even pointed to where I should put the catheter. I was aiming for the wrong orifice and the nurse took the cath from me and completed the procedure. We both had sterile gloves and maintained a sterile field. A clean urine sample was obtained all the while the patient cried and complained about how the procedure was hurting.</p>	<p>Step 4 Analysis</p> <p>My nurse told me that he pointed to where I needed to aim and I told him that I thought I had it. My nurse assured me that the more I see the female anatomy then I will become more familiar with where to put the catheter. My nurse informed me that some patients are harder than others when placing the catheter. In SIM lab, the mannequin peri area does not have any hair that you have to move out of the way and the hole is pretty obvious. However, if a human patient you have to move hair out of the way and ask them to stay still. I am not sure how other student nurses have done on their first attempt at a catheter and I haven't talked to my only nursing friend about my situation. I'm sure others have gone in with more confidence than I have and were probably successful.</p>
<p>Step 2 Feelings</p> <p>My nurse informed me that I would be performing the straight cath and that he would guide me and be there to help. I couldn't do this, not only was I nervous and scared but so was the patient. Literally, she was crying and upset about the procedure. I had never placed a catheter in a real live patient and even the mannequin I practiced on was not with the same catheter equipment. I was even more nervous because the patient was crying about how it hurt and we hadn't even touched her yet. The patient was very upset and I was very nervous. When my nurse saw that I was going for the wrong orifice he quickly took over. I felt like a failure and I felt embarrassed. The most important feeling I had was that I was incompetent.</p>	<p>Step 5 Conclusion</p> <p>I think having more confidence would have made my situation better. I feel like maybe I don't know the female anatomy as well as I thought I did. I mean, I was really almost stuck a catheter in my patient's vagina!!! I think maybe I should have clarified with my nurse where I was going to place the catheter. I really don't know what could have made this situation better. I am so embarrassed about it.</p>
<p>Step 3 Evaluation</p> <p>What was good about the experience is that we maintained a sterile field. I was nervous about that because it was drilled in SIM lab to always keep your sterile field. I was able to do at least that. I was able to experience a procedure with a very upset patient and I was able to keep my composure and tell her that she was going to be okay and that it would be over soon. I don't know why or how I was still aiming for the wrong area. I was aiming towards the vagina instead of the urethra. I thought I knew what I was doing. Although I was nervous and scared, I thought that I would still be able to accomplish this task. We still were able to get the urine sample but had I put the catheter in the wrong place we would have had to start all over with an already upset and scared patient.</p>	<p>Step 6 Action Plan</p> <p>The next time I have the opportunity to do a foley cath or straight cath I am going to rock it!! I am going to let all the nurses know on my floor that I want to observe when they do a foley/straight catheter. I am going to have more confidence in myself and not put myself down if I fail. I have to get this right especially if I want a clean sample. I have five more clinical days to go so hopefully I will get another chance to redeem myself.</p>