

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. 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?

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We were given two assignments to complete that were over electrolyte imbalances and hypovolemic shock. In the electrolyte imbalance case study, we were given a scenario with a patient who was experiencing hypokalemia and we were asked critical thinking questions about the patient's condition. In the hypovolemic shock assignment, we were required to state what was an indication, a contraindication, or a nonessential intervention for a patient in hypovolemic shock. We were also required to put our rationes for every answer to explain why we would do the things that we said we would.

Throughout both of the assignments, I was thinking critically and trying to use my knowledge and best judgement to answer the questions. The assignments made me feel like I could take care of a patient who was hypokalemic or in hypovolemic shock after I thought it through and researched more about both conditions. I feel confident in my answers and proud of myself for being able to apply the things I have learned in nursing school to a scenario and to possibly even a real patient in the future.

Both of the assignments were good for us to think about nursing a little deeper and to consider each factor about our patient into our decisions. For example, their vital signs, what other meds they are on that could be influencing their diagnosis, and what interventions that the patients were doing on their own at their house that were either helping or hurting them. I struggled more with the hypovolemic shock assignment because I have not yet fully understood what it is and what to do for it. But because of the worksheets, I dove back into my notes and learned more in depth what causes hypovolemic shock and the treatment for it. Specifically, I learned how to position a patient experiencing hypovolemic shock which was an ah-ha moment for me because I learned that you put them in Trendelenburg to increase their BP and HR. I think I did a good job of utilizing my knowledge from past modules and applying what I have learned in the hospital and throughout my other experiences to complete these assignments.

In my experience in clinical rotations in the hospital, I have actually taken care of a hypokalemic patient, so I was able to apply that knowledge to this assignment. We have also learned about hypokalemia and hypovolemia in lecture, so I could recall what I learned. Although every health care worker has a different perspective on everything, the signs/ symptoms and treatment for hypokalemia and hypovolemia are universal as far as replacing electrolytes, fluid, and blood as indicated according to the patient's diagnosis and condition.

In conclusion, I could have made the situation better by looking over my notes beforehand. In hindsight, I could have looked at my clinical notes too in addition to my lecture notes to fully grasp the two conditions, and I could have even looked up some information out of the book. I have learned more about critical thinking and how to apply what I know to an actual scenario that I could potentially deal with in real life in my future nursing career.

Overall, I think that these two assignments helped me tremendously think through things completely instead of just looking at the surface of what a patient looks like or feels. I enjoyed reading the situations and knowing the answers, it increased my confidence as not only a student, but a nurse as well. I can learn from these lessons for when I care for patients with electrolyte imbalances or in shock, and I will be able to recall what I learned, and I further solidified what I already knew.