



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?

Covenant School of Nursing Reflective

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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>Today at the simulation center, there patient was an 8 month old who has a new colostomy. The father was at the bedside with the patient and continued to tell the nurse how much pain the patient was in. The patient also was crying, with a high heart rate and blood pressure. The nurse left to get medication and when she came back, she first administered the antibiotic IVPB, and then administered the IVP morphine last. The patient stayed in pain while the antibiotic was administered first and the parent continued to mention the pain the child was experiencing. I was the observer in the scenario.</p>	<p>Step 4 Analysis</p> <p>Even the outcome would have been the same no matter the order, it would have been a better use of time if the morphine was administered first. The nurse would have eased the pain and stress of the parent, and then hook up the antibiotic. While the antibiotic was running, the ostomy bag could have been emptied and teaching taken place.</p>
<p>Step 2 Feelings</p> <p>As the observer, it was difficult to stand by and watch when I would have administered the morphine first to relieve the patient of any pain. Even though the nurse was not wrong in the order that she chose to administer the medication, I would have chosen to do it differently. I think the final outcome was still the outcome of if the order was different, but the patient would have been relieved of pain sooner and the parent put at ease sooner as well.</p>	<p>Step 5 Conclusion</p> <p>I would have first given the morphine over five minutes. Then I would have started the antibiotic. I then would have talked to the dad about ostomy care and emptied the bag. Once the morphine had kicked in, I would have started any cleaning and dressing change care that needed to happen on the ostomy so that the pain would be less. I learned from this event, that even though one way is not necessarily the wrong way, I need to always think about the best options.</p>
<p>Step 3 Evaluation</p> <p>What was good about the event was the medications were given correctly, and patient was relieved of pain and given antibiotics so to prevent infection. Also the communication and teaching from the nurse to the parent was really great. The morphine was diluted in the wrong amount of normal saline, but this will be avoided next time. Overall the event went well, I just would have done the order a little differently.</p>	<p>Step 6 Action Plan</p> <p>Next time I will look at all the medications I am to administer before hand, and plan ahead which ones would be best and what order. I will base the order on what will be best for the patient and try to make time for all aspects of care for the patient and teaching for families.</p>