

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>I was able to do my first blood draw today during clinicals at 0930 with my patient in 78. My nurse was with me as I stuck the patient and helped assist me in locating the best vein to stick. I used the butterfly to stick my patient. Originally, I stuck the patient in the left arm but was unable to draw blood, even with the nurses help. I then attempted to draw blood from the patients right antecubital area and was successful. The blood was then sent to the lab via the tube system.</p>	<p>Step 4 Analysis</p> <p>I was able to apply the knowledge I learned from IM2 in order to aseptically and safely draw blood from my patient. Aseptic theory is very important in order to protect both the patient and I from accidental needle sticks or infection. If the patient or I was stuck with a dirty needle she could risk infection or the spread of a disease. Additionally, without cleaning the skin bacteria could be introduced into the blood stream or contaminate the blood specimen. We also changed needles when we switched the location of the stick. Most of the student I have spoken with have had to try more than once on their first blood draw, most likely because we are all still new to this.</p>
<p>Step 2 Feelings</p> <p>I was a little nervous to try and draw blood on a patient for the first time, but I was mostly just excited. During the time, I was thinking about aseptic techniques and ensuring everything was clean. I was thinking about the best place to stick the patient and remembering everything I learned in IM2. Once I stuck the patient and saw the flash of blood, I was very excited, and I only got more excited as I saw the blood in the tube. My nurse was very encouraging and helpful; she made me feel reassured and confident that I was using all the right techniques and doing the blood draw correctly. I felt a little worried whenever the first stick didn't work, and I felt bad for the patient having to get stuck multiple times. Overall, I was very happy with the outcome but definitely think I could have done better. I think the most important feeling during this was pride. I was very proud of myself for sticking with it and being able to draw blood and even taking the initiative to ask the nurse if I could do the blood draw. I second guess myself a lot so when I'm able to perform a task it makes me feel proud and more confident in my abilities.</p>	<p>Step 5 Conclusion</p> <p>I could have made the situation better by holding the arm more firmly when sticking the patient, the first time. This might have stopped the vein from rolling. I also could have been more accurate with my needle stick and smoother when taking the needle out of the patient's arm. I think my nurse could have let me find a better vein location on the first arm instead of using the first one we found. I would have done the first needle stick differently by getting a good angle and grip on the arm. From this event I was able to learn how the veins should feel when you draw from them and I also got more experience with blood draws.</p>
<p>Step 3 Evaluation</p> <p>It was a very good learning experience and I learned a lot from it. It was also a little disappointing having to stick the patient twice. The easiest aspects of the blood draw were the tourniquet, attaching the tube, and disconnecting the tube. The harder aspects were the actual stick itself, and also withdrawing the needle and taping up the area. The only reason this was difficult for me is because I was trying to withdraw the needle by clicking the button that withdraws it but the nurse wanted me to pull the needle straight out and that made me very nervous. I think I did well with the second stick and remaining calm when things didn't go as planned. My nurse was so helpful and guided me through the process. The only thing that went wrong would have been the first stick because I was unable to get a flash, and neither was my nurse. This was most likely from the vein rolling or not picking a better vein to stick.</p>	<p>Step 6 Action Plan</p> <p>Overall, I think this was a tremendous learning experience and I really enjoyed being able to get to do my first blood draw. Next time I would hold the arm more firmly to ensure the vein doesn't roll and I would also take more time to find the best vein possible. I will apply the lessons I learned from this blood draw to all the ones in my future to ensure they get better with each time I do it. This lesson is also useful for IV starts as well as teaching me to relax under pressure and still deliver. This has taught me to be more confident in myself. It has also taught me how to correctly draw blood aseptically and safely.</p>