

Covenant School of Nursing Reflective

<p>Step 1 Description My patient had suffered a fall that caused a cervical vertebrae fracture. This type of injury requires a neck brace to be worn to stabilize the fracture. This brace limits range of motion in the neck, because of this, my patient had a consultation with occupational therapy. I had never seen an injury of this type so I made sure to be present for the consultation. The occupational therapist was educating my patient and the patient's two daughters about the ways that gravity can affect our posture. Gravity tends to pull our shoulders down which can create added tension in our shoulders and into our neck creating a slumped posture. The occupational therapist placed a folded pillow under each arm to bring her elbows further away from her rib cage and to allow them to rest in an elevated position. The patient was able to relax their shoulders and neck to help alleviate pain associated with posture. The placement of these pillows also helped my patient eat lunch without having to push or pull her arms forward or backward. The patient was able to use the range of motion in their elbows to bring the utensil to their mouth without moving their shoulders. My patient was positioned in a way where they could still perform activities of daily living without being compromised.</p>	<p>Step 4 Analysis This incident allowed me to use my background in Kinesiology while observing my patients range of motion. Because of my background, I believe I was able to understand the occupational therapist when she was describing the importance of limiting flexion and extension of the upper extremities when working with cervical spine injuries. Being able to apply nursing with kinesiology allowed me see how posture affects the different muscles in the cervical area as well as learn a new intervention to help alleviate that pain for my patient.</p>
<p>Step 2 Feelings When the occupational therapy consultation started I wasn't sure if an evaluation was going to take place or if the therapist was going to perform any exercises with my patient. As the consultation went on I quickly learned that the therapist had done a good amount of evaluation just talking with the patient. Seeing my patient light up when her elbows were stabilized with the pillows made me feel that my patient had finally been understood, that they weren't compromised anymore because of her pain and neck brace. The work the therapist did with my patient made me appreciate simple interventions that allow for a greater outcome. This made me feel hopeful that my patient would see her injury as a temporary setback and that they will continue to be positive learning new ways to perform activities of daily living. This incident was a reminder that we are all working together for the benefit of this patient.</p>	<p>Step 5 Conclusion In this incident, I could have advocated for the patient more so that the patient could answer questions for themselves. I know that family likes to be present when treatment is being given to the patient but, in the end, the patient needs to be the one benefiting from the treatment. I believe that the family members stepping back and observing the therapist work and allowing her to educate them while educating the patient would have been beneficial for everyone. This incident has taught me that involved family members like to be involved in all aspects of their family member's care. In hindsight, if there was a way to get the family members out of the room so that the therapist could work uninterrupted, I would have done so. This situation has taught me that no matter the circumstances my job is to advocate for my patient.</p>
<p>Step 3 Evaluation The therapy consultation was a good interaction because ultimately the patient was able to find relief. The therapy worked well when all of the family members were on board with what the therapist was saying. What didn't work well is when the family members would answer for the patient instead of allowing the patient to answer for themselves. For this type of therapy to work, the therapist needs to know how the patient is receiving and or interpreting the interventions. The therapist was able to keep the focus on the patient so that the patient and therapist both received proper feedback from each other. I helped answer questions from the family members when applicable to allow the therapist to keep working, I also went and got extra supplies when needed. I was mostly observing the consultation but wanted to ensure my patient had a smooth session with minimal interruptions.</p>	<p>Step 6 Action Plan I believe this situation was beneficial for the patient and myself. The patient learned a new way to complete a daily activity and relieve pain, I learned a simple intervention I can implement with my patients in the future. Each day I spend in clinical, I am learning to be confident in myself and to have confidence in my actions for the benefit of my patient. This confidence will allow me to be a better advocate for my patients. From this situation, I observed the therapist complete her job in an environment that made her frustrated. This observation has made me realize that not every environment is going to be perfect, regardless of the frustrations or speed bumps that come up, you have to keep working. This incidence was a great example of how to provide care and relief to the patient while also allowing the family members to feel validated. This is an experience I will carry with me into future practice.</p>

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