

<p>Step 1 Description My last week of clinical was busier than previous weeks. Just like every clinical morning, I walked in praying for a good day. First off, as soon as my nurse and I received report, a patient's husband was informing us that his wife was not responsive or waking up. Secondly, we had a recurrent patient that comes to the hospital quite often who was constantly in pain and he stated that he was hurting everywhere. We had help from numerous nurses mainly all morning, and we still couldn't get our patients their medications at their 0900 ordered time. I got a taste of what the life of a nurse is like during part of their shift and it was overwhelming, but in a positive way because I saw it as new learning opportunities.</p>	<p>Step 4 Analysis Based off learning from school, I realized that one of the most important things a patient must have is adherence and the WANT to get better and heal. My second patient did not have the motivation for any of that and it truly saddened me. However, I understand that I will probably see a lot of those patients in my future career. As mentioned before, my patient who was unresponsive was confusing for all of us. As we were taking her for a CT scan, we noticed that she was having consistent tremors/movements with her arms and hands. Eventually a few of the nurses thought that she was seizing. That was the first time I saw that. It was a scary thing for me to see. Seeing the patient's eyes roll back and the jerky movements was a new thing.</p>
<p>Step 2 Feelings When we first walked into the patient's room who was unresponsive, I was a bit shocked because it was the first time I had seen it happen. Every little attempt was not working, and I saw some intense sternal rubs happen and the patient still wasn't waking up. It honestly made me feel saddened as well, because I saw the fear in the patient's husband's eyes. I saw the confusion in all the nurses faces, and I already knew something was wrong. For the other patient who presented with unbearable pain, I wasn't sure on how to approach him because every little touch he would complain about. He'd tell us to stop doing his wound care, and to stop cleaning him up because he has a loose bowel movement. He wanted us to leave him alone. He grabbed my arm and I was a bit concerned at first, but after a few seconds I realized that this could be me. I finally spoke up and told the patient what we were doing and explaining all steps we were performing. I also initiated an empathetic touch, because in my mind I thought that would be comforting for the patient.</p>	<p>Step 5 Conclusion Regarding my patient who was unresponsive, we did the best we could and did what was ordered. Once CT was done, the provider ordered her to be transferred over to the ICU unit. My patient who complained of pain was a challenge, but I believe I succeeded the best I could. I believe that others could have made the situation better by having a bit more empathy. I understand that some aids, or other professionals see the same patients, but I still feel like you should have some empathy for the patient. I noticed that the aid was being rough with the bedding changes, and I could tell the wound care specialist was frustrated with the patient. I believed I helped the situation because when we completed everything, the wound care lady stated that I calmed him down.</p>
<p>Step 3 Evaluation The good thing about both situations is that I learned new things and saw new things. One thing I noticed that I found odd was that while the night nurse was giving report to my nurse about our patient who was unresponsive, was that she wasn't looking concerned at all. My nurse asked the husband if the patient not responding or waking up was new, and he stated no, but the night nurse stated the patient has been that way already. The night nurse was telling the husband unrelated things concerning the problem, and I could tell the husband was getting frustrated because of his responses to her. The difficult thing for me to see regarding my other patient was that I could tell he didn't care about getting better. He did not want to take his medications and refused to be cleaned. The patient also did not want to shower or ambulate. His response was always, "I don't want to."</p>	<p>Step 6 Action Plan I plan to continue to have empathy for all my future patients no matter the kind of day it is. Working as a team with others this week also helped me realize how important it is to help each other out if possible. A perfect example is that my nurse and I did not know where the CT department was, but thankfully other nurses that were on the same floor helped us transfer the patient to CT STAT. Many learning opportunities and lessons learned during the last week of clinical.</p>