

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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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>Yesterday In clinical I was charting at the nurses' station when a patient called out, "Nurse". He complained of being hot and shaky. After having read in his chart that he was a diabetic, and noticing the sweet odor of his breath, I decided to check his blood sugar – which was in the 400s. I knew that this was extremely high, and action was required to remedy it. Prior to this interaction, while his wife had been drinking one, the patient had talked about how much he had been craving a soda. This led me to believe that the patient had gone against dietary advice and drank what was left of his wife's soda. After getting his nurse, she called the physician for permission to administer an unscheduled dose of insulin.</p>	<p>Step 4 Analysis</p> <p>One thing that could be applied to the situation from my previous knowledge of Diabetes, was the risk of Hyperglycemia. I knew the causes, risks, and measures to take in order to avoid/lower a patient's high blood sugar.</p>
<p>Step 2 Feelings</p> <p>This situation reassured me that, if scenarios like this occur in the future, I will know the step-by-step process necessary to fix it. The nurse played a vital role in my learning experience. She helped walk me through this situation, giving detailed instruction on what I would need to do. Due to the fact that we had already learned about the seriousness of Diabetes, I felt a sense of clarity about the steps that needed to be taken.</p>	<p>Step 5 Conclusion</p> <p>The situation could have been avoided by being more direct or honest in delivery of dietary restrictions and possible risk factors of Hyperglycemia. I believe it is also important that loved ones involved in the patient's care also be educated on the detrimental causes of enabling their loved one.</p> <p>In this case, the non-compliance could have likely been a contributing factor to the necessity for amputation of the patient's toe.</p>
<p>Step 3 Evaluation</p> <p>The steps taken to lower the patient's blood sugar were very logical. The only difficulty we faced was the fact that his blood sugar spiked during a time when he was not scheduled for a dose of insulin. Due to the fact that physician permission was required, this wait-time could have resulted in the subsequent elevation of the patient's already high blood sugar.</p>	<p>Step 6 Action Plan</p> <p>With hindsight, I would likely have a conversation with guests or caretakers upon arrival. I would stress the importance of not enabling or tempting the patient by entering with items of dietary restriction. I also plan to educate the patient and reiterate the seriousness of Hyperglycemia.</p>