

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.

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| <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.

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| <p>Step 1 Description</p> <p>So, I had a pt who had a serious injury on his left hand. He was admitted to the hospital for a left and wound fracture resulting from a gun shot to that extremity. He was first admitted on 05/08/21 where he had labs drawn, and a left-hand X- ray that confirm this diagnosis as well. The exact fracture occurred on his left 3rd digitis, leaving him in acute pain and inflammation as well.</p> | <p>Step 4 Analysis</p> <p>Since his left hand was completely covered in a arm cast, it was difficult in performing my ROM and assessing the pulses bilaterally. I could only do the capillary refills and basic sensations on his left hand. I knew with this limited assessment; this could lead to failure to recognize issues regarding the left hand such as his pulses and skin integrity over bony prominences (ie. Elbow).</p> |
| <p>Step 2 Feelings</p> <p>My first thoughts after reading the report were, wow that's kind of cool and interesting as I have never seen or cared for a pt involved in a gun shot wound resulting in a fracture to the bone. Then, I also felt bad for the pt who was involved in this as it involved gun violence in some form that left him in pain.</p> | <p>Step 5 Conclusion</p> <p>I learned that it is not always easy to do what is required of a nurse when a pt is in a cast or any other restrictive device meant to heal the pt.</p> |
| <p>Step 3 Evaluation</p> <p>I contributed to lowering his verbal pain of 6 by administering a muscle relaxant (tramadol). I was indeed surprised he was not on a powerful opioid such as hydrocodone, until I saw on his bracelet that was allergic to codeine, so that would have prevented him from certain pain medications as well.</p> | <p>Step 6 Action Plan</p> <p>Something I would have done differently would be to remind the pts to avoid getting his cast wet. And to avoid rubbing any itching inside the cast, to simply try an air blower to rid of any itching that may be going on inside the arm cast. Overall, I know we just have to do our best and work around obstacles that could cost further complications in the future</p> |