

<p><b>Step 1 Description</b></p> <p>My nurse and I were in the patient's room to give them their medications. The patient had one IV push medication and the rest were PO medications. The nurse asked me to give the push medication and handed me two saline flush syringes that she had removed the white cap and expelled the air from. I went to the patient's right side so I could give them the medications. The nurse noticed that I was struggling because my hands were full (the two flush syringes and the medication). I did not put the syringes down because the sterile part was not covered so I was trying to latch a flush while I still had the other flush and medication in my hand. I was having trouble contacting the flush and the nurse told me that I did not have to hold all of it in my hand and to just set it on the bed. I set them on the bed in a way that the sterile part was not touching anything and then proceeded to flush the IV, give the medication, and flush the IV again.</p>	<p><b>Step 4 Analysis</b></p> <p>We are taught and know that cleaning the IV and keeping the tip of the saline flush sterile is an easy way to avoid introducing bacteria into the IV and eventually in the blood stream. If I was to continue put the flush down on the bed without the cap, I would have a high likelihood of causing someone to have an infection.</p>
<p><b>Step 2 Feelings</b></p> <p>I felt comfortable giving the medication until she handed me the already opened syringes. I have shaky hands, so I use a different method to attach the syringe to the IV so that I do not contaminate it, and I need complete use of both hands. I also do not want to give the patient an infection because I laid a syringe on the bed when I could have easily left the cap on it and prepped it right before I was going to use it. I know the nurse was trying to be helpful, but I wish she would have just let me prep the flushes myself.</p>	<p><b>Step 5 Conclusion</b></p> <p>In conclusion I should have just prepped everything myself. I knew the nurse was going to ask me to give the push medication and should have taken charge of the task that the nurse gave me so I could have avoided stress and the possibility of introducing bacteria into my patient's blood stream.</p>

<b>Step 3 Evaluation</b>	<b>Step 6 Action Plan</b>
<p>The good thing was that the patient still received the medication, and I did not break the sterility of the flush of medication. The bad thing was that I was stressed because I did not like the idea of accidentally giving the patient an infection that could have been easily avoided by leaving the caps on the flushes.</p>	<p>I understand the importance of doing everything possible to prevent the patient from getting a hospital acquired infection. Not only is this bad for the patient but it also affects the hospital because they would possibly have to pay for the treatment. From now on I will do what I was taught and keep everything clean or sterile.</p>