

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?

Covenant School of Nursing Reflective

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>I am on south 7 at Covenant Hospital and this is week four of clinical rotations. We had a middle age confused patient admitted who had a history of ETOH abuse. The patient was being transferred to a rehab center so would be getting discharged soon. He had a PICC line in that would need to be removed. The nurse I was assigned with asked me if I wanted to take it out. At this time, I have only seen the videos provided in class and through HESI regarding PICC line removals. Now when it comes to me getting the chance to do a hands-on procedure or task, I take it. My nurse would walk me through it, and I will get to remove the PICC line.</p>	<p>Step 4 Analysis</p> <p>PICC line removal is usually accomplished without complication. However, there is a potential risk for infections or embolus. I did feel that nurses get so use to removing them that they might forget how easy it can be to cause harm to a patient when removing it. Several teachers have shared their personal experiences of knowing someone that removed a PICC line incorrectly and the patient suffer from it. An air embolism can occur, catheter breakage or vein wall damage.</p>
<p>Step 2 Feelings</p> <p>At first, I was feeling nervous and a little scared. In class and from other nursed you always hear scary storied about this type of procedure going wrong. I thought what if I do it wrong and cause harm to the patient. That is the last thing I would want to do is cause any harm to my patient. My nurse reassured me that if I didn't want to do, I could watch her, or she could walk me through it, and I do it. With my nurse reassuring me I started to feel more comfortable and confident in myself. Having confidence, I feel puts the patient more at ease, they gain trust in you. I feel if you don't have confidence in yourself, it reflects off you and your patient can sense this thus cause a negative feeling or outcome. I felt great with outcome. I felt like I did a good job for it being my first time.</p>	<p>Step 5 Conclusion</p> <p>I feel I could have made the situation better by being more knowledgeable on this specific event. That would have given me more confidence all around. I do feel it being my first time I was extra cautious and went a little slow to make sure I was doing everything right and the patient understood everything I was telling him and able to follow directions. The catheter was not measured once it was out, I feel if I would have spoken up about it maybe this would have been addressed. I learned to trust the process, trust myself in knowing I have the skills to do these things. If I don't, I can learn them and obtain the skills. I am always up to learning something new.</p>
<p>Step 3 Evaluation</p> <p>The sutures were a little embedded into the patient's skin, so when I removed them, it did cause some discomfort for the patient. I had to pull on them a little hard to get them out. That honestly was the most difficult part of the whole procedure. After I removed the sutures everything else went kind of fast. What I did well was follow my nurse's instructions and guide. She said out loud what I and the patient needed to do. I then repeated to the patient to take a deep breath and hold it. I also feel I pulled it out at good speed. For it being my first time, I did not know how long the catheter would be, so I did not know how far back I would be pulling. I didn't pull it to slow, and the patient did great. I did expect a different outcome only because this patient was already confused. I didn't know if he would understand us when we told him to hold his breath. I was scared he would try to breath while I was pulling the line out.</p>	<p>Step 6 Action Plan</p> <p>In the future I am aim to be more proactive. I will have a better understanding of PICC line removals to improve my skills and caring process. I can use this experience and learn from it, know what I can do different next time. I will take this and put it to use on the next opportunity I get to remove another PICC line. This taught me to always brush up on material because you never know what you will come across and you want to be at least semi-prepared.</p>