

Covenant School of Nursing Reflective Practice



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 on page 2, document each step in the cycle. The suggestions in each of the boxes may be used for guidance but you are not required to answer every question. 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 experience, with relevant details. <u>Remember to 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' perspectives?
<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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Adopted: August 2016

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Instructional Module: 6

Date submitted: 10/20/21

Use this template to complete the Reflective Practice documentation. Use only the space provided. Information that is not visible is lost.

<p>Step 1 Description</p> <p>It was my first shift precepting and we had 5 patients for the day. Of the 5 patients, 3 of them required blood to be drawn for labs. Since it was my first day on the floor, I followed my preceptor and just did as much as she would let me and as much as I was comfortable with. I am not comfortable with blood draws and starting IV's, so when the time came to do the labs, I stepped out of the way and let my preceptor handle it. She put the tourniquet on and started feeling for veins to poke. She had gloves on and alcohol ready to go so I assumed she was going to go ahead and draw the blood. I was wrong, she told me to put gloves on and go over and start looking for veins. I had said earlier that I did not enjoy doing blood draws and how I felt like I was not good at it. She then said, "you won't get better if you don't try, it's okay if you don't get it on the first stick." I was very nervous because in all my past attempts of drawing blood or starting IV's, I always failed. The patient was calm and encouraging during the interaction as well. I found my vein, I put the needle in. saw the flash, and boom I was successful on the first stick!</p>	<p>Step 4 Analysis</p> <p>In this situation, the main thing that could have gone wrong was us not being able to find a good enough vein to draw blood from and of course, me failing on my attempt to draw. It really was just a simple post op blood draw, nothing out of ordinary. I would like to think that the patient was slightly nervous as well, most likely because they did not want to be poked several times. I am sure my preceptor has felt the same way I did when she was a student as well.</p>
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Step 2 Feelings

When I had first heard that we had that many labs to draw, I was really counting on my preceptor not making me do them. I hate doing blood draws because it always makes me feel terrible when I must stick the patient multiple times. I know it hurts and I hate getting blood drawn on me as well. When my preceptor said that it was like a come to light moment for me. She was right, you only get better at things when you practice. The whole process was nerve wracking but as soon it was over, I was happy and relieved it went well.

Step 5 Conclusion

From this event I was able to gain a bit more confidence when it comes to drawing blood. I was able to learn new techniques for later use and hear some feedback on my technique. I think everything went well because my preceptor, the patient, and the family members were encouraging the whole time. Only thing I would do differently is not be hesitant. Being hesitant is not going to help me in the future.

Step 3 Evaluation

Best part about this situation was I was able to successfully draw blood on the first stick. Another thing is I was able to practice and work on the skill of drawing blood. My preceptor talked me through it and gave me pointers throughout the process. It was very helpful that the patient was encouraging and understanding as well. The patient had a family member in the room too, and they motivated me too. Nothing went wrong in this, and I was able to contribute to patient care.

Step 6 Action Plan

Overall, this situation went very well, I do think I should have been more confident in the beginning and trusted myself. We had more blood draws after this specific patient, and it helped me succeed in the other labs for the day as well. I can use the things I learned in the future. This experience will allow me to approach tasks with a more positive and willing-to-try mindset.