

<p><b>DESCRIPTION:</b></p> <p>During patient handoff my certified nursing aid listed all of her patients and started each patient she thought was more of a priority. She then told us what patients would be good for us to get vitals on and document their vitals for her. The prognosis that both of my patients had were fractures. One patient had a fracture in her right ulna and radius. She was also post-op for two days and was discharged later on in the afternoon. My other patient had a fracture in her right knee. As I was caring for my patient, her doctor entered the room and informed her that they planned to repair the fracture non surgically. After receiving the news about her injury she became very confused as to why they weren't going to surgically repair it. I noticed that the doctor seemed very hurried and didn't use appropriate communication with the patient. I informed the nurse and she went onto the patient's eMAR to read the notes that the physicians said. She then went to educate the patient about the reasoning behind her treatment. I then witnessed discharge and how important it is to ask questions in between any teachings when indicated.</p>	<p><b>ANALYSIS:</b></p> <p>Something I could have applied to my situation is trying different types of therapies with my patient such as passive range of motion exercise and spirometry. There weren't many issues that arose during my clinical. However, one thing that I do believe is crucial for healthcare workers as a whole need to become more involved. When I saw my patient learn what her non-surgical procedure was and understood that it is the best option for her as an individual. She became less concerned. As clinical went by, I also saw how the nurses and aids were helping each other navigate through EPIC. They worked together to teach one another the things they do know and admit if they don't know something. This in my opinion is what makes me excited to become a nurse because despite the chaos in any situation, you will have someone to fall back on when you need something.</p>
<p><b>FEELINGS:</b></p> <p>As I walked throughout the hallways of the hospital I realized how lonely other patients are. My patient that was ordered to be discharged happened to have her husband by the bedside and had a lot of support to help her around. They explained to me how their accident occurred and how the entire family came down to Lubbock to visit. I noticed that being in such an unfortunate situation like the hospital and losing function of your limb is stressful. To be able to have someone by your side is not only relieving mentally but physically as well. After my patient was</p>	<p><b>CONCLUSION:</b></p> <p>I think that the most important thing that I could take away from my clinical experience was that it's crucial to make a patient feel cared for and "loved" in a sense. I also believe that patients need human connection just like anyone else in this world. Just because some patients are withdrawn and don't want to speak, such as another student nurse's patient. It's still important to communicate with them and allow them time to answer.</p>

<p>discharged from the hospital I saw my other patient sit on her chair staring out the window. I quickly noticed the difference in the situations and knew that it was my job to sit there and be present. I saw how lucky we are as nurses/CNAs to be able to get a full glimpse of a stranger's life and learn so much about them. Seeing how much more engaged my patient became with me inspired me to take the time out of my day to connect with patients.</p>	
<p><b>EVALUATION:</b></p> <p>I believe that the best thing that happened during my clinical experience was that I became more confident in my nursing skills and communication. I also became more aware of my questions and how I was going to approach conversations with my patients. However, the best thing that I accomplished was learning to be more aware and present with my patients. I also realized that advocating for my patient is crucial. I noticed many doctors don't take the time to talk to their patients. It's our job to assure to include the patient in their care plan and to let them know what the healthcare team plans to do with their future. I feel that I contributed to by giving my patient a sense of "connection" and allowing them to feel heard. It gave me a sense that I was making a difference in someone's day and letting them know we are always here to listen.</p>	<p><b>ACTION PLAN:</b></p> <p>An action that I believe was disappointing in my opinion was when the physician came in she didn't really let my patient finish her sentences. She had a tendency to try and finish my patients sentences and my patient felt that she could say what she wanted. One thing that I wish I could have done differently was to ask the patient to say what they felt they didn't get to ask before they physician leaves. However, I know that I'm not much in a position to do or say such a thing. I think it's fair for the patient to not feel rushed by a physician because you end up just forgetting what you wanted. I also wish that the physician could have explained to the patient how the procedure works and educate her how they're going to heal her broken knee.</p>