

## Covenant School of Nursing Reflective Practice

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<p><b>Step 1 Description</b> I was on S8 taking care of a pt who had just had a surgery to amputate their foot all the way up to their knee; mind you, it was only supposed to be his toes getting cut off and not his entire leg. He was needing help changing his brief because he had a bowel movement without knowing. Aubree, Meg &amp; I were in the room trying to help get him all cleaned up &amp; he was very embarrassed because 3 female nurses just walked in; we could tell her was alarmed &amp; immediately felt like he shouldn't have pushed his call light. I assured him that we were all there to help him with anything he needed no matter what because that is what we are there for. He still was iffy with us helping, but eventually he started helping us try to undo his brief &amp; helped us with turning him in the bed. Meg helped hand me the wipes in order to wipe him and Aubree helped me turn him and tuck the new pad &amp; brief underneath him. During the process, he repeatedly apologized that he had an accident in his brief and told us that last week he would've been able to make it to the bedside commode at least; that a lot has changed. I reassured him that he is more than welcome to ask for help with anything &amp; that we would provide the best care we could. I told him to give himself time with learning how to walk &amp; be gentle w/ his mental health, given trauma.</p>	<p><b>Step 4 Analysis</b> Broader issues that arise from this particular event are things like mental health issues, coping problems, giving up on PT (progress is slow) &amp; body image issues. There is a lot of evidence within one of my textbooks that shows pts that have an amputation of some sort will have an increase in depression or the start of depression. There is just a lot going on and losing part of your body is hard to deal with alone. I feel that getting him into a good rehab place &amp; a good counselor will be beneficial to his mental &amp; physical health. I also feel that other people's experiences in this certain situation were different than mine. I was the main one talking to the pt while getting him cleaned up. Aubree did ask an important question while we were in there. She asked if the pt had any pain on his coccyx and the pt replied that there wasn't any pain. Later on in the day, the pt ended up reporting severe pain on his coccyx &amp; will end up needing pressure wound care due to him not being turned as much as he should since he isn't as dependent as he was before coming to the hospital.</p>
<p><b>Step 2 Feelings</b> When I first walked into the room I wasn't that thrilled to be in there to change a dirty brief. Poop is the one thing that gets me, anything else I can handle. I was thinking that this is going to be really difficult for me to go through because I was the main person doing everything for the pt. I usually am the one that helps hold the pt out of the soiled garment, but this time I was the person help clean. I quickly got over those negative thoughts &amp; it really opened my eyes to seeing how I would feel if I was that pt; my attitude turned around immediately &amp; I am grateful for that. It made me think of how embarrassed he must be having to have his "diaper" as he called it, changed; much less by a bunch of females. I wanted to treat him how I would want to be if I was in that situation or even my grandma who has dementia. I feel great about the final outcome because I was able to boost his spirits throughout the process. It was very humbling to put myself in his shoes. I no longer have a problem with soiled briefs because I know the mental toll that it takes on the pt now without even being in the room with him very long. It isn't a hassle or a chore, it is simply caring for the pt with a whole heart no matter what.</p>	<p><b>Step 5 Conclusion</b> I could have made this situation better by staying with the pt a little longer after finishing the brief change &amp; bed bath. I felt like he could've used a friend to talk to about what is going on &amp; how we could help him while he is at the hospital. Every time I walked by his room he looked very lonely just staring at the wall. Next time, I would like to spend more time with him (if he is still there) if I am able to just so his mental health doesn't decline faster than it needs to. I learned that things don't go as planned &amp; having people around you to help is always a good thing to have. I would also like to help feel and be as independent as he can; it will help him know that he really doesn't &amp; won't always require a lot of help from others; just take things slow &amp; things will progress with a positive outlook.</p>
<p><b>Step 3 Evaluation</b> It was good that I was able to help him feel a little better mentally about his current situation. He wasn't in very good spirits when I first walked in; embarrassed, apologizing, asking what we are going to &amp; dwelling on what he was able to do the prior week before his surgery. I personally couldn't relate to his situation, but I quickly put myself in his shoes in order to help boost his mood. I explained to the pt that a lot has happened within the last week; he lost more than just his toes, he is having to learn what balance is all over again, he is coping with the loss of the bottle half of his leg. All of these things are so much trauma that the pt doesn't really even think about until they are said to him. It wasn't easy for him to say, "yeah I lost the majority of my leg" and look down at it for it not to be there. I just kept repeating to give himself time to learn this new lifestyle modification &amp; give himself some credit for how far he has come just in a week; that things will get better. By the time we were done changing everything out, he was in better spirits about the situation &amp; said he will continue to push forward.</p>	<p><b>Step 6 Action Plan</b> A conclusion that I draw is that nothing is beneath me. I am of service to all my patients no matter what. Even doing things I might not like as much as others is still very vital to my pt care &amp; that is what is important to me. Things such as a brief change aren't the fun things we get to do as nurses, but the brief itself can cause so much with the pt without us even knowing (mentally). I will use the lessons learned from this event in the future by going in the room with a positive outlook on things &amp; really try to understand what the pt is going through. I will be able to apply these learnings to future situations because this is something I will be doing a lot throughout my career as a student nurse &amp; RN in the future. Like I have stated before, nothing is beneath me; I am of service to who needs it. This taught me that I am very open to change even if I don't like it at the moment. I love that I made the pt feel better by doing something so simple. It makes me feel amazing that he feels better by even a hair. This will improve how I care for my pts in the future greatly because I now have a new outlook on the small things.</p>