

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?

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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>My patient this morning had a blood pressure of around 190/100 when the nurses aid took the first set of vitals. So my nurse pulled all of this patient's meds and we decided to go give hers first. She had about five different blood pressure medication scheduled, which were all her normal home meds. We gave them and waited about an hour and reassessed her blood pressure. This time it was around 180/90. So obviously the medication didn't completely work. The nurse called the doctor to get another medication ordered and we gave that, which I believe was hydralazine. After another 40 minutes or so, I took her blood pressure again and it was 150/55.</p>	<p>Step 4 Analysis</p> <p>Ultimately my patient's blood pressure was so high because she has end-stage renal disease and horrible edema mainly in her lower extremities. The fluid build-up was causing her heart to have to work harder thus giving her high blood pressure.</p>
<p>Step 2 Feelings</p> <p>I've never had a patient with a blood pressure that high and so I was really taken back when I saw that initial number. I've always thought that if a patient had a blood pressure that high, they would certainly have to be on the brink of death. Now, I definitely know that's not true. My patient today was napping, and all her other vitals looked great, she was obviously not dying.</p>	<p>Step 5 Conclusion</p> <p>This situation went as well as expected. I learned about new blood pressure medications that my patient was taking. I've also never given an IVP medication for blood pressure. This patient was a perfect example of all the manifestations we learned about with ESRD so although it was a bit of a scary situation, it was cool to see that in real life.</p>
<p>Step 3 Evaluation</p> <p>I think this was a really great learning experience for how to trouble shoot a stubborn blood pressure that won't come down. I got to see each step that my nurse took to address the situation until we reached the number we wanted. For me, the difficult part was not freaking out. My first instinct is that we should call the doctor right away but that's not the best first choice.</p>	<p>Step 6 Action Plan</p> <p>Like I mentioned previously, this allowed me to see my nurse problem solve from start to finish. I feel like the major missing piece for me when it comes to nursing is how to organize your day and address a situation such as this one and still get the rest of your patient care done.</p>