

Covenant School of Nursing Reflective

Addison Fassauer – IM8

<p>Step 1 Description</p> <p>The 120 days with my preceptor have been filled with learning and guidance. The floor I am precepting on has welcomed me with open arms. I cannot wait to start my graduate nursing position here. I have learned the ropes and functionality of the floor, which has made my skill sets more efficient. During these 120 hours I have started IVs, blood draws, medications, DC art lines, foleys, central line dressing changes, and much more. The most complicated scenario I was in was when the patient art-line came out. My preceptor, another nurse, and I were in the elevator when this situation happened. My preceptor guided me to assist in this accident that was executed spontaneously. During this intervention my preceptor, the other nurse, and I were getting into the elevator to go to CT. In a matter of seconds, the art line discontinued from the pressure bag. This caused the art line to have an open line and which the patient started to expel blood. This incident happened on my eighth day. I kept the situation as calm as possible as my preceptor assisted confidently. The result did not cause complications and became a learning experience. The patient did lose some blood, but my preceptor and I handled it with professionalism and teamwork. I am thankful for the skill sets and positivity I have received from my preceptor. We were all put in a scenario that we have never experienced. We achieved the fault with confidence and time management.</p>	<p>Step 4 Analysis</p> <p>Completing my studies as a module eight student, I have learned about <i>what an art-line is</i> from my recent Lewis Medical Surgical book. An art-line is a thin catheter that is inserted into an artery, not a vein. This device is commonly used to monitor blood pressure more accurately than a blood pressure cuff. It has a continuous waveform from the monitor every second. This device is helpful when medications, like blood pressure, are being titrated in patient care. In addition, the art-line can be used to get blood analysis like sugars and labs. Art-lines prevent further trauma to the patient's skin and reduce the risk of missing a vein and having to restick the patient. The only issue with this device is that you cannot put medications into the line. This arterial line should also be in conjunction with a peripheral IV. In conclusion, the art-line is a benefit more than a risk. Every IV line connected to the patient should be labeled to prevent the medication from entering the art-line. My preceptor has never experienced this type of situation before. It was beneficial to both of our knowledge. This situation impacted our nursing perspectives and revealed how we could prevent it in the future.</p>
<p>Step 2 Feelings</p> <p>These 120 hours have grown my confidence expeditiously. Through trial and error, I have learned from my mistakes, allowing me to have a firm foundation as a future registered nurse. When the art-line continued to expel blood, I felt I kept my nerves to a minimum. In the moment, I tried to understand the mechanics of what went wrong. I reevaluated the situation by observing the art-line about what was causing the blood to keep flowing. As soon as my preceptor stepped in, I found the source. He and the other nurse were confused about what caused it, but I quickly revealed the issue. We intervened on the problem in the elevator. We were able to handle the problem until a respiratory therapist arrived to us at CT. We talked about how I felt at that moment. Even my preceptor and the other nurse shared their feelings; overwhelming. Over the days I have been assigned to this unit, I have received encouragement and ultimate inspiration. Even in this situation, I felt pleased that I had not just one but two nurses that did not make me feel unintelligent. The positive outcome was more than I expected.</p>	<p>Step 5 Conclusion</p> <p>My preceptor, the other nurse, and I handled the situation with grace. We all collaborated to address the issue. The experienced proved that teamwork and communication promotes a positive outcome. Now, I do not believe that the situation could have been better. For example, my preceptor, the other nurse, and I were calm and collected during this point in time. Along with the other days I have been here, I have seen how efficient the floor works. I am still learning how the ICU operates vs. a medical surgical floor. The environments are entirely different from one another. In the event, I have learned to be more aware and cautious of my surroundings. Double-checking is a priority! The amount of force that the art line was under caused the ART line to separate from the pressure bag. This situation could happen to anyone, and I am thankful to have my preceptor step in and explain what happened. We worked together to keep the patient safe, and we all learned in this scenario.</p>

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Step 3 Evaluation

The significant aspect of this event was that I experienced what would happen if there was not enough slack between the patient and the ART line. The complications could have gone two ways. One, the line did disconnect from the pressure bag and two the line could have been severed from the patient. In my perspective, I am glad it did not harm the patient. The pressure bag allows the blood from backing up and the infusion is kept under pressure. Visual acuity played a vital role in this situation. We did not see the extent amount of slack that was obtained between the patient and the ART line. The bad part about this event was that the elevator just closed when we saw the disconnection. The patient was in a major car accident and was need of the ART line because of the blood pressure medications they were on. My preceptor and the other nurse were so collective and understanding even before I found the source of concern. During the situation, I expected a different outcome from the nurses. They explained all the good things we achieved in the situation, which I believe calmed the whole environment. I can use this situation as an example for the rest of my career and act on the issue with confidence.

Step 6 Action Plan

What I think about this overall situation is that you must make mistakes to learn from them. Of course, you want to avoid errors on a patient, but this event could have been practiced in the simulation lab. I would advocate the module seven faculty to teach us, students, the functions of an art-line in detail. In the simulation lab, we students can draw blood from the device. Explain the pros and cons of what the art-line does and what the pressure bag does in depth. I have learned to assess the line and to make sure there is enough slack between the patient and the ART line. I know to address the problem if the bag is disconnected from the ART line itself. For my future experiences, I will use this event as a lesson. I will never forget the day I was stuck in an elevator with two other nurses. As a future preceptor, I will use this event as a teaching moment to prevent other future nurses from making this error. The 120 hours I worked have been knowledgeable. The event about the art-line is the one that stuck out to me the most. It has achieved to be the most complicated devices I have delt with. It can go wrong in several ways. In the 120 hours, I performed on the ART line over and over before. This was the second incident I felt that stuck with me.