



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><b>Step 1 Description</b>                  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"> <li>• What happened?</li> <li>• When did it happen?</li> <li>• Where were you?</li> <li>• Who was involved?</li> <li>• What were you doing?</li> <li>• What role did you play?</li> <li>• What roles did others play?</li> <li>• What was the result?</li> </ul>	<p><b>Step 4 Analysis</b></p> <ul style="list-style-type: none"> <li>• What can you apply to this situation from your previous knowledge, studies or research?</li> <li>• What recent evidence is in the literature surrounding this situation, if any?</li> <li>• Which theories or bodies of knowledge are relevant to the situation – and in what ways?</li> <li>• What broader issues arise from this event?</li> <li>• What sense can you make of the situation?</li> <li>• What was really going on?</li> <li>• Were other people's experiences similar or different in important ways?</li> <li>• What is the impact of different perspectives (e.g. personnel / patients / colleagues)?</li> </ul>
<p><b>Step 2 Feelings</b>                  Don't move on to analyzing these yet, simply describe them.</p> <ul style="list-style-type: none"> <li>• How were you feeling at the beginning?</li> <li>• What were you thinking at the time?</li> <li>• How did the event make you feel?</li> <li>• What did the words or actions of others make you think?</li> <li>• How did this make you feel?</li> <li>• How did you feel about the final outcome?</li> <li>• What is the most important emotion or feeling you have about the incident?</li> <li>• Why is this the most important feeling?</li> </ul>	<p><b>Step 5 Conclusion</b></p> <ul style="list-style-type: none"> <li>• How could you have made the situation better?</li> <li>• How could others have made the situation better?</li> <li>• What could you have done differently?</li> <li>• What have you learned from this event?</li> </ul>
<p><b>Step 3 Evaluation</b></p> <ul style="list-style-type: none"> <li>• What was good about the event?</li> <li>• What was bad?</li> <li>• What was easy?</li> <li>• What was difficult?</li> <li>• What went well?</li> <li>• What did you do well?</li> <li>• What did others do well?</li> <li>• Did you expect a different outcome? If so, why?</li> <li>• What went wrong, or not as expected? Why?</li> <li>• How did you contribute?</li> </ul>	<p><b>Step 6 Action Plan</b></p> <ul style="list-style-type: none"> <li>• What do you think overall about this situation?</li> <li>• What conclusions can you draw? How do you justify these?</li> <li>• With hindsight, would you do something differently next time and why?</li> <li>• How can you use the lessons learned from this event in future?</li> <li>• Can you apply these learnings to other events?</li> <li>• What has this taught you about professional practice? about yourself?</li> <li>• How will you use this experience to further improve your practice in the future?</li> </ul>

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><b>Step 1 Description</b></p> <p>I had a patient who came into the sim lab with urosepsis. They needed an IVPB of an antibiotic and a PO medication for anti-platelets. I administered the PO medication correctly. I did my patient teaching, 7 rights, 3 med checks and my universal competency. However, I failed to administer the IVPB correctly because I was too caught up in my own head to not hear what I was nursing out loud. I stated that I would put the IVPB in the most distal port and I did not even reach for the most distal port. I ended up doing an IV bolus of an antibiotic, which caused me to fail my first sim. The second round of sim I successfully administer the IVPB.</p>	<p><b>Step 4 Analysis</b></p> <p>I think it is important to stick to your strengths and for me, CPE is not one of them. It is just a weird situation for myself because I love patient care and knowing that I am not dealing with a patient takes away the experience. When I am in clinicals or working as an aide, I know I am there for the patient, and I am not doubting my abilities but contemplating on how I can make this patient's hospital experience better. In CPE, I'm overthinking about my performance, and I am wondering how I can mess up. I believe after this incident, that I will continue to pretend to be someone else almost like I am acting and that will allow me to not overthink.</p>
<p><b>Step 2 Feelings</b></p> <p>In the beginning of the simulation, I felt no emotion because it is a robotic task. However, when it comes to CPE, I begin to talk to myself and when things are going to smooth, I start to doubt myself. Almost like I have imposter syndrome and there is no way I should be doing good in a CPE. Then I begin to overthink in my head, it does not necessarily make me panic but it puts me in a brain fog state. After I made the mistake, I was relieved because it put me out of an A range and now, I can start my summer break a week early because I do not need to study anymore.</p>	<p><b>Step 5 Conclusion</b></p> <p>If I could redo this simulation, I would have started flat and unaffectionate, which is the opposite of my personality, so that I would not be overthinking myself and be more focused on performing my skills. I am a confident person, and I should not be overthinking specially when there are no risks involved when treating a mannequin.</p>
<p><b>Step 3 Evaluation</b></p> <p>The good thing about CPE is that I passed. The bad thing is that it took me two tries to do so and I had to drive all the way back to sim lab to retake it. The easy part was doing the CPE the 2<sup>nd</sup> time because I was just pretending to be someone else. The difficult part was having to drive back. I did a good amount of patient teaching, and the PO medication administration went well. I did not expect to mess up because I have not had this blunder for quite the amount of time.</p>	<p><b>Step 6 Action Plan</b></p> <p>I think everything happens for a reason and life moves on. It is not the end of the world to make mistakes. The next time I do a CPE, I will communicate with my instructors that I will be acting as a person who is emotionless and unaffectionate, but I will complete all the necessary skills. I felt mad, when Dr. Nesbitt thought I was mad at her because I was far from it. For me, I believe Sim causes unnecessary doubt for my skills, but it is a necessary evil. I will just resort to the strategy my psychologist came up with that has helped me pass these CPEs. I just thought maybe I could have gotten over these irrational thought process, but I guess not.</p>