



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.

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 • 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?	Step 4 Analysis • 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. personnel / patients / colleagues?
Step 2 Feelings Don't move on to analyzing these yet, simply describe them. • 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?	Step 5 Conclusion • 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?
Step 3 Evaluation • 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?	Step 6 Action Plan • 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?

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.

Step 1 Description On April 24th at 1100 on the 5th floor of the Covenant Children's hospital in the simulation lab I was graded on my critical thinking and skills. Ms. Starch and a module 5 instructor were there to observe me and act as the patient I cared for, Mr. Dunn. During my graded CPE I assessed the patients pain level and patency of IV site before getting the patients medications that were due. Then I safely administered the patients' PO and IV meds.	Step 4 Analysis During prep for the graded CPE I used my critical thinking to decide what medications were appropriate for the patient at the time. I based what to give by looking at vitals, labs, and doctor orders. For example, I didn't administer the patient a blood thinner injection because his platelet count was under 100,000. If I was to give the medication to the patient, it could have caused severe bleeding. The severe bleeding could cause unnecessary complication resulting in longer stay in the hospital or death.
Step 2 Feelings Days leading up to CPE was a roller coaster of anxiety, nervousness, and nausea. As much as I rehearsed what I would do, I was still terrified that I would forget something small. What helped me relax during the performance is Ms. Starches understanding of the stress I was under. After completing and passing I felt overly accomplished and proud of myself.	Step 5 Conclusion I feel as I could have done better explaining to my patient the risk of taking too much acetaminophen instead of abruptly saying it'll cause liver failure making the patient nervous taking it. I learned to better explain side effects with out scaring the patient.
Step 3 Evaluation Even though CPE was difficult because of all of the emotions, it was such a great learning experience. The reason I feel it is a great experience is because I'm the only nurse and call the shots instead just being in the shadows and following someone else around. I loved that I was able to draw up and pull my own meds. I felt like a nurse and not a student nurse.	Step 6 Action Plan Overall, CPE went great. I safely administered the right medications without causing any harm to my patient. I was comforting and informative. I made sure the fall risk patient was safe by having his side rails up, bed down, call light in hands, and comfortable before exiting the room. Once again, CPE was an amazing learning experience!