

## **Midterm Clinical Reflection**

### CSON Module 8

Having completed four clinical shifts with my preceptor up to this point, I can say a handful of things regarding my experience. I was assigned to night shift in the SICU for my preceptorship. So far, I have spent three of my shifts in the SICU and one of my shifts in the PICU, sitting for ECMO. I've had two shifts canceled due to my preceptor calling in and one shift canceled due to being placed on call.

My first night of clinical was spent in the SICU. Not much happened that night due to my preceptor being sick and us only having one patient, however, I did get to orient to the unit. I also got to spend my time watching what a normal shift might look like for my nurse in regard to organization and time management. My next shift was spent in the PICU, sitting for ECMO. Having never had any exposure to ECMO, this shift was quite interesting. So much to learn, in so little time, but I felt like getting the opportunity to sit and watch the process was an experience that I'll likely never get quite like that again. Our patient went from having strep to suddenly being in MODS, DIC and having fasciotomies and or wound vacs on nearly all extremities. An extremely eye-opening experience as to why it's so important to go to the doctor and seek treatment when sick, especially for the pediatric population. Not only that, but our patient and their family members were strictly Spanish speaking. As someone who has had a loved one in and out of hospitals, especially more recently, this hit home for me. I couldn't help but think about how terrifying it had to be for this patient's parents, having to sit back and trust that the caregivers knew what they were doing. When they couldn't understand the language we were speaking to each other let alone, they also didn't have the medical experience to fully understand what was happening and why.

The last two shifts I have completed were in the SICU. These two shifts, I felt, went really well in the way of my progression as a novice nurse. I was able to take on the care and charting for both of my ICU patients at the same time. I made great strides in my charting and in my time management. In these shifts, I was also able to make use of the doppler to locate my patient's pedal pulses. I was able to insert a foley catheter, monitor and manage an ART line, manage Bi-Pap, manage a PCA pump, manage levophed administration and titration based on my patient's status as shown by their ART line BP. I was able to get more use to and comfortable with the way the shift runs for the nurses, as to when you should do what. I've done lab draws through an ART line and peripheral line, taken part in an admission of a patient from the heart hospital. I've also gotten to see how detrimental levophed can be to some patients and how having it off can quickly and drastically tank a patient's vitals. I have also gotten more comfortable with chest tube management and monitoring.

Overall, being someone who has only ever personally worked in med-surg like settings, I feel as though selecting the SICU for my preceptorship has been really great for my overall learning. I have gotten more hands on experience with the critical care aspects of nursing in these past four shifts, than I ever really have in my work experience. In my personal life, my brother has had a myriad of different surgeries and critical care medical experiences that have in turn taught me a great deal. However, that has pretty much been the extent of my critical care learning up this point other than the few days spent in module 7. So, for me, getting to work these shifts in the critical care setting as a soon to be new grad nurse, as opposed to a family member, has been really helpful to me in allowing me to get the full picture as to why certain things have to be

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done and when. The ICU can be extremely disorienting, I know this through watching my brother as a patient. It can also be incredibly frustrating for loved ones when it feels like there's never much time in between a nurse being in their room. For me, getting to see both sides, as a family member and as a caregiver, I feel as though it is really going to help me better communicate with my patients and their loved ones and better offer support to them overall. Understanding their position as a loved one, as well, as mine as the caregiver, helps bring the care full circle for me. Overall, I've learned and grown so much in just these past four shifts, that I can't wait to see what else I can learn in my remaining shifts.