

Final Reflection

Working in the medical field requires you to be fully engaged from the start to the end of shift because not only are the patients trusting you, but their families are as well. After completing my ten shifts in the Cardiac Intensive Care Unit, I feel accomplished and felt determined to learn more every shift during my preceptorship. In the beginning, I was able to see how Jill responded to questions and learned how to adapt my answers in a way that would not give false hope to the patient. I learned that if she didn't quite know the answer to something, then she would let the family know that she will find the answers for them. But for the most part she provided them a brief explanation as to why we were doing certain things the way we were doing them. This was reassuring to the patient and family members because they felt like their concerns were being acknowledged. I like how we developed a sense of trust with the patient and family members.

During my preceptorship, I learned from Jill the importance of writing your labs down because as doctors round they tend to ask about the critical lab values and statuses of the patient. So, as I continue my nursing career, I plan to make this a priority when I work in the ICU.

There was one case that stood out to me during my last five shifts we had a patient who was angry, agitated, and alone. This patient was cachectic with a sense of failure to thrive. He was admitted for hypotension and diarrhea. Although he was angry and agitated, we were able to meet all his needs in the sense of his physiological and psychological needs. We treated him the same as all our other patients and this made it harder for him to stay angry all the time. He would make several comments about how diabetes was his disability, and he couldn't do anything for himself. This made me sad, but we continued to push and encourage him to do as much as he could. He was extremely sick so when there was an action that he could not do, we would help

him. This patient had pancolitis with negative stool cultures for C.diff. Throughout the days we had him we noticed a decline and contacted the doctors. We noticed that he had developed a cough, and we were having a hard time maintaining his blood pressures. After a chest x-ray was ordered this patient had developed pulmonary edema, his blood work shown a huge jump in white blood cell count, and his electrolytes were depleting, and his kidney levels increased. It was interesting to see the progression of how fast things could change in the span of a couple of days. We contacted the infectious disease doctor, and he changed the antibiotics we had him on.

I enjoyed my time in the cardiac intensive care unit with Jill. And I appreciate her for teaching me the basics on charting and the importance of charting notification documentations when contacting providers. I appreciate her for showing me how to put pieces of the chart together on paper and how to stay organized when giving report. I appreciate the night nurses for staying patient with me as this is all new to me while giving report. This was a different learning environment but overall, my time at Covenant Medical Center was a good learning experience.