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IM6 PMH

August 28, 2024

TTHSC SIM: Reflection

In simulation this week when I went in, I was very anxious before we started. My patient was having alcohol withdrawal symptoms and he played the part very well by being consistent, very anxious, and having tremors. Once I started my scenario it went better than I had originally anticipated, I expected it to be hard to communicate with the patient but in reality, with some of the therapeutic communication tools it was easier. Somethings I think that went well were the medication administrations, I felt really confident after having the psychopharmacology lecture. I felt as if I was more comfortable in what I was giving and why. My SBAR was also in my opinion good when calling the doctor. I felt I could've done better by moving more quickly once I noticed my patient was very anxious, it felt like I was moving in slow motion. I also could have recommended the nicotine inhalant so the patient would feel relief of his craving almost instantly since the patch would take hours longer.

When I was the patient, I felt really bad for making the nurse anxious due to all the pacing and being "mean" in character. I had to be a super anxious patient pacing and very sad about her breakup and very determined to get a cigarette. This patient was very manipulative and emotional towards the nurses. At some points I had to hold in my laughter because I am usually very quiet, and it was different from what I'm used to. When practicing using therapeutic communication as the nurse, I felt less awkward approaching unique situations. This really allowed me to practice engaging in conversation with a patient who isn't programmed to be a

“yes man” and had me be mindful in what I was asking as it could be potentially cause a patient to “shut down”.

Fortunately, I have had previous experience's with patients with a mental disorder and it's never been stigmatized in my family. Being Hispanic it is rare to see a family willing to listen and I'm very grateful for that support system. With all the different types of patients we saw I think this will help me be more mindful to take more time with people who have mental disorders and keep my patience even when tensions are high.