

## Reflection 1

At the beginning of the clinicals, I was nervous because I wasn't sure what to expect when we are there for 12 hours and how that would be different from a shorter shift. As the shifts have passed, I have been less nervous because I know I can always ask my preceptor and depend on them to help me if I have questions. I have enjoyed being so involved with the patients and being at clinical for the whole 12 hours compared to previous modules clinicals. I like doing the documentation as well since that is such a big part of a nurse's job that we haven't been very involved in before.

In one of my most recent shifts, I saw how different people's perspectives can be. My preceptor felt that a family member was concerned about some things that weren't really problems and got a scan ordered by the doctor that didn't particularly need to be done. They were constantly asking if we knew when the scan was going to be. After the scan before the results came back, when we were giving a medication, the family member was telling other family members that they just didn't feel that anything was getting done about their concerns. This was interesting to us because the doctor had ordered a scan and was doing what they could for the concern. On our end, everything that we were able to do was being done. When the family member called us in there again to talk about the problem, my preceptor explained what she thought about the concerns and was able to assuage her. In this way, my preceptor explaining her thought process about it was helpful and the family member needed that to gain perspective.

They also discussed the family member's concerns about their treatment the night before and the night nurse. To them, the night nurse didn't come when they needed them and so they had to wait 10-15 minutes for someone to help them with their IV pump alarming. To the night nurse, he was busy dealing with the other patient and was not able to help them every time they needed something. The family felt like the nurse wasn't helpful while really he was busy. I can use this to improve my practice by explaining more what I'm thinking when someone is concerned about something, and apologizing or saying something about being with my other patient if they appear bothered by my not being there immediately.

Another aspect I can use to improve my practice is being able to anticipate the patient's needs. I saw this when my preceptor placed extra pads on the bed when moving this patient because she had done this the day before and made a mess. It can be patient specific like this or something as simple as knowing exactly what you need to do that day, like getting the sheets to remake the bed.