



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 maintain patient confidentiality. 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 (e.g. 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.

<p>Step 1 Description My patient was an 84 yr. old male, who came in with a diagnosis of urosepsis. He was admitted, and I was the nurse planning on his medications. The medications that I ended up giving was levofloxacin for urosepsis, and clopidogrel, an antiplatelet medication. I held some medications like Lisinopril because the blood pressure was 90/80. I also didn't give, any pain medications because the patient had a pain of 2/10. I also held the acetaminophen because the patients temperature was 98.7.F. Overall I gave my medications and also did my teachings on the given time.</p>	<p>Step 4 Analysis The impact of 20min time was to ensure that we don't spend time one patient, because we are assigned other patients to take care of. The impact of knowing the right medications to give was to not make the mistake of giving for example Lisinopril if the B/P was to low it could cause severe hypotension. The impact of the instructors in the room was to give us feedback for us to improve. My overall analysis was patient safety and security.</p>
<p>Step 2 Feelings I was feeling a bit nervous because of the atmosphere of being watched, but I just got into what I was to do and did it. I felt better after completing on time. This event made me feel confident in my skills as a nurse.</p>	<p>Step 5 Conclusion I have learnt to make sure I know my 4ps and patient education on them, upon every exit. I have learnt to hold medications according to doctors' orders and use of critical thinking. I have also learnt on time management and to never put all 4 side rails up because it's a restraint. Also place call light within the patients reach. My overall conclusion was I learnt how to be a safe nurse.</p>
<p>Step 3 Evaluation This event helped me to know, when to give and hold medications. I have also become more confident in my communication towards the patient. This CPE, has also taught me to practice more patient education about the 4ps. This helps the patient, understand their care more. I think my CPE went well, I just had a few errors, like not placing the call light close to the patient, and putting all 4 side rails up.</p>	<p>Step 6 Action Plan I will use this experience to improve my practice in the future by remembering my 4p's upon every exit and patient teaching on the 4p's. It has also taught me about the critical decisions we make about medications we give, according to the assessments or data needed on the medication. I have also learnt on the 4 side rails being a restraint.</p>