

# Covenant School of Nursing Reflective Practice



*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 on page 2, document each step in the cycle. The suggestions in each of the boxes may be used for guidance but you are not required to answer every question. This Reflective Practice document will be reviewed by faculty and then you will post the final reflection in your LiveBinder folder.

<p><b>Step 1 Description</b> A description of the experience, with relevant details. <u>Remember to maintain patient confidentiality.</u> 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</p> <ul style="list-style-type: none"> <li>• What happened?</li> <li>• When did it happen?</li> <li>• Where were you?</li> <li>• Who was involved?</li> <li>• What were you doing?</li> <li>• What role did you play?</li> <li>• What roles did others play?</li> <li>• What was the result?</li> </ul>	<p><b>Step 4 Analysis</b></p> <ul style="list-style-type: none"> <li>• What can you apply to this situation from your previous knowledge, studies or research?</li> <li>• What recent evidence is in the literature surrounding this situation, if any?</li> <li>• Which theories or bodies of knowledge are relevant to the situation – and in what ways?</li> <li>• What broader issues arise from this event?</li> <li>• What sense can you make of the situation?</li> <li>• What was really going on?</li> <li>• Were other people's experiences similar or different in important ways?</li> <li>• What is the impact of different perspectives eg. personal / patients / colleagues' perspectives?</li> </ul>
<p><b>Step 2 Feelings</b> Don't move on to analyzing these yet, simply describe them.</p> <ul style="list-style-type: none"> <li>• How were you feeling at the beginning?</li> <li>• What were you thinking at the time?</li> <li>• How did the event make you feel?</li> <li>• What did the words or actions of others make you think?</li> <li>• How did this make you feel?</li> <li>• How did you feel about the final outcome?</li> <li>• What is the most important emotion or feeling you have about the incident?</li> <li>• Why is this the most important feeling?</li> </ul>	<p><b>Step 5 Conclusion</b></p> <ul style="list-style-type: none"> <li>• How could you have made the situation better?</li> <li>• How could others have made the situation better?</li> <li>• What could you have done differently?</li> <li>• What have you learned from this event?</li> </ul>
<p><b>Step 3 Evaluation</b></p> <ul style="list-style-type: none"> <li>• What was good about the event?</li> <li>• What was bad?</li> <li>• What was easy?</li> <li>• What was difficult?</li> <li>• What went well?</li> <li>• What did you do well?</li> <li>• What did others do well?</li> <li>• Did you expect a different outcome? If so, why?</li> <li>• What went wrong, or not as expected? Why?</li> <li>• How did you contribute?</li> </ul>	<p><b>Step 6 Action Plan</b></p> <ul style="list-style-type: none"> <li>• What do you think overall about this situation?</li> <li>• What conclusions can you draw? How do you justify these?</li> <li>• With hindsight, would you do something differently next time and why?</li> <li>• How can you use the lessons learned from this event in future?</li> <li>• Can you apply these learnings to other events?</li> <li>• What has this taught you about professional practice? about yourself?</li> <li>• How will you use this experience to further improve your practice in the future?</li> </ul>

Adopted: August 2016

## Covenant School of Nursing Reflective Practice

Name: Instructional Module: Date submitted:

*Use this template to complete the Reflective Practice documentation. Use only the space provided. Information that is not visible is lost.*

### Step 1 Description

On 11/1 a 75 year old female arrived at the ER with chest pain which she had originally believed to be heartburn but it worsened and didn't resolve so the patient then made her way to the ER. After a full work up it was determined the patient was experiencing a STEMI so they immediately rushed her to the cath lab and did an angiogram. In the angiogram it was discovered the patient was 99% occluded in the RCA so they went in and did a stent and while they were performing that procedure they came across the severe multi vessel disease. They finished the stent and then came to the conclusion that an ACB would be needed which is also known as a triple bypass. This patient was then transferred to SICU 3 which is where Katy, Landry and I assumed post-op care of the patient. It was my first open heart surgery patient and it was pretty intense. Patient came up still intubated and they were on Levo, amiodarone, inulin drip, D5 ½ NS with 20 mEq of K, dobutamine, propofol, and also had three chest tubes (2 mediastinal and one in the left pleural space. Surgery was successful and the patient was stable when we assumed care.

### Step 4 Analysis

I was able to apply some things from my previous knowledge of a lot of the medications I knew because of being a pharmacy technician and as for my chest tube knowledge and CABG knowledge we had learned about in module 7. But we all know that what you learn in class is really not much until you actually encounter it in the real world and see it with your own eyes. I mean of course a bigger issue of this situation would have been if the patient had a stroke but luckily we were able to avoid that. I will say at first it was very confusing because the patient came up on all these medications and it kind of seemed overwhelming but Landry explained it so well I really understood what was going on. I feel like we all had a similar experience as far as the patient but everyone else is way more experienced with patients like these and also probably a lot more comfortable.

### Step 2 Feelings

.I am not sure anything was easy about this patient but I mean that in a good way. I learned so much with this patient. This is probably one of the best learning experiences I have had with a patient. It was very complex with everything going on. At first it can definitely be a little overwhelming just with all the channels, all the lines and tubes but once you get familiar with the situation and what was what it really wasn't near as bad as it looked. Landry and Katy were so helpful as well. Landry is orienting Katy so he would be asking her questions that really made you think. He would also walk you through why the answer was the answer. If you thought these really had you thinking it really gave you a better understanding of the patient. I felt good about the outcome. The patient was stable and eventually weaned off the propofol and extubated. The emotion that comes to mind is excitement for me because learning about something and actually understanding something so complex gives me confidence that I somewhat know what is going on, which I feel like is impressive for someone that hasn't even graduated yet.

### Step 5 Conclusion

I learned what a heart patient looks like in the ICU and how to care for them and just kind of some of the similarities like cardiac medications, fluids and etc. that might be used on all heart patients post-op. I also got to learn about a surgery I have never seen before and also I had never seen three chest tubes before either. I really believe no one could have made it better. Everyone has been so helpful when it comes to teaching about what is going on. I am not sure what else I could have done differently. I feel like I communicated well about what they possibly wanted me to do and I did what they told me. I just need to hold on to this knowledge of what I learned and carry it with me on future heart patients that I encounter in my career.

**Step 3 Evaluation**

The communication and cooperation with everyone involved was very good. I feel like I did good before we even got the patient. I communicated with them on what they wanted me to do and even though there were three of us, other nurses on the floor came and helped with the admission as well. Nothing really went wrong, everything was smooth and we took care of all necessities in caring for a post-op ACB patient. I contributed by assisting Katy in hanging the many medications. Helping with the initial assessment as in pedal pulses, temperature, measuring the foley output. Along with looking at the drainage of the chest tubes and the drains. This situation could have been very hectic but I feel like everyone involved communicated well and efficiently completed all needed tasks.

**Step 6 Action Plan**

Overall this situation was very helpful and full of things to be learned and I believe the preceptors involved did very good of teaching and involving me in the patient care. I definitely feel like I can carry this knowledge and use it for future heart patients I encounter in the future. I will use the experience to begin expanding my knowledge on heart patients and what to do for them and as I continue to do so until I will be able to take care of a cardiac patient more quickly and efficiently on my own. Overall this patient was a very good learning experience.