

IM8 Midterm Reflection

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Reflecting on my first half of clinicals, I have encountered situations and patients that have really enriched my learning experience in the NICU. My first patient I cared for was a 3 day old baby with a poor prognosis. This baby was full term and admitted with a diagnosis of Hydranencephaly. My biggest role in this baby's care was hanging his meds, starting his tube feed, and watching his vitals. My feelings early on were those of compassion and empathy for this baby. Aside from a poor prognosis, his mother was 16 years old and hadn't been down to visit him once in 3 days. She was an immigrant from Guatemala and suspected to have been sex trafficked. While we were caring for baby, there were meetings behind the scenes between the drs, Lubbock Police Department and other state departments trying to determine a plan for mom and baby. During my shift, the baby remained stable until he started having some brady episodes. We hooked up a 12 lead machine to him to attempt to get a strip to read during this dip in his heart rhythm. but of course once we had him hooked up and ready he never dipped down as low as he had previously. During his next care, I noticed he was beginning to have these apneic episodes where he would hold his breath for a few seconds. I quickly grabbed my preceptor RN, Esme, and she stepped in to help. Over the next few minutes his apneic episodes grew in length. He became blue and his oxygen saturation dipped into the low 50s. Right as Esme was about to start bagging baby, our neonatologist and NP arrived and his color started coming back and numbers came back up. Being a part of this critical event was a great learning experience. I felt I contributed to his care by quickly realizing there was an issue and seeking assistance.