

PMH SIMULATION

I was anxious about going into SIM this week. I am still working on my communication, so it was nerve racking because I have heard it is all about communication in this area of healthcare. When my scenario played it was not as bad as I thought. For the scenario I was the primary nurse we communicated well and gave her space, sbar was good, giving her options of what would make her feel safe. What could have gone better, sitting on a stool to be eye level with the patient and maybe giving her alternative methods to deal with a panic attack. I could have done more teaching on coping strategies. I played the patient with borderline personality disorder. A person with a borderline personality disorder, I could not imagine how exhausting it would feel, feeling all the emotions they feel. Especially because they feel things very deeply. When I was the secondary nurse to the ptsd patient, I felt more at ease. I knew how to word my questions and how to get the patient to talk about her feelings with the nightmares and her paranoia. This whole experience was eye opening. I liked the way Dr. Harrison stated that it is the same as a patient who vomits, we need to get them cleaned up and give them something for vomiting. These patients cannot help the symptoms they feel. This has made me change my mind about mental health. It is true some of us respond from an emotional place. We should not, we need to take a step back and think before we respond. I really enjoyed SIM, I did carry my past sim experiences and was expecting something to go bad. What I learned in this experience I will take with me when I become a nurse. The phrases I See You, Tell Me, You Seem are very helpful and will continue to use even if I do not go into psych. I will also carry on the care you give to these patients you can give to any other patient because we all are going through something that is unseen.