

Vanette Martinez-Gonzalez

IM8/2S

Janet Pia, MSN, RN, CCRN

02/10/2025

Final Clinical Reflection

My experience in the pediatric floor has been great so far but I was able to go down to the 2S floor. I was excited to take care of oncology patients since we did not take care of any in the Pedi floor. Oncology has grabbed my attention ever since I took IM5, and I was assigned to the outpatient oncology clinic. During my shift we were assigned only one patient, so we got ready to listen to report.

My day started off by listening to report and that alone took about 30 minutes because we had to go over all the new updates, labs, medications, etc. We were assigned a 15-year-old male who was diagnosed with Acute Lymphoblastic Leukemia (ALL). ALL is a type of cancer that affects the blood and the bone marrow. During our assessment I could tell our patient was not feeling good. He did not answer any of the questions we would ask him. The patient had his mother at the bedside, so she was the one that mention he had been very nauseous and that she did not want him to throw up anymore. For oncology patients it is very difficult for them not to throw up since most of their medications side effects is nausea. So, we told the mother that it would be best to give the nausea medication before giving the chemo administration around 1100. We assessed his chemo port to make sure everything looked good. So we decided to let the patient get some more rest before we gave the morning medications.

My patient had a lot of medications scheduled throughout the day and I was excited to do more med admin. I had a different preceptor that day and my med administration did not go as planned since she would do most of the med admin, so I only spiked a bag of fluids and gave an IV push. I thought I would be able to do all the med admin except chemo. My patient's ANC level was good, so my nurse grabbed all the supplies needed for chemo administration. This process was very interesting to watch. It was interesting to see how two registered nurses verified the calculations and to make sure they were following the seven rights of med administration. It was different to see my RN wear PPE during this process, but methotrexate is a powerful drug. My RN said she would be the one to dispose of the patient's urine and I was glad she was taking precautions with me.

As the day went on, we were able to converse with the patient since he was probably feeling better. He was complaining about his NG tube since that was making him more nauseous. He did not want to have his NG tube, but we tried to explain to him that he needed to get his protein, and the NG tube would help with that. So, they decided to do another X-Ray to make sure placement was good. His NG Tube was in his intestines and that made me confused because I thought it would be in his stomach, but they said the placement was correct. We also had an order to do a clare change and that was also interesting to watch. The whole process was sterile and that was my first time seeing another sterile process for an oncology patient. The patient also has a wound on his right toe, and we had to soak his feet in warm water using magnesium salt. He was complaining of loss of sensation, numbness and tingling so we decided to do neurovascular assessment.

In conclusion, this shift was different from the rest. Even though we only had one patient for most of the shift we stayed busy. This patient had many meds that would take a while to admin since this patient did not want to take any of them because he would throw up right after. The process to administer chemo took a while and everything had to be done next to another RN. Oncology patient have a special place in my heart and I like to take care of them.

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IM8/Pedi

Janet Pia, MSN, RN, CCRN

02/21/2025

CPS case

On 02/21/2025 we had a patient for a short period of time, but I had never experienced a CPS case in real life. It is very interesting how lawyers get involve. My 5-month-old patient had a broken femur. What was very strange is the fact that no one knew how it happened, neither the parents nor the grandparents. The have had a previous incident with their 2-year-old child that involved CPS as well. They ended up taking the child into custody under CPS. It makes me feel sad because I only hear about cases like these on the news or internet but not in person.