

Midterm Clinical Reflection

During my clinical, a 5 year old female was brought into the Emergency Department by her parents due to an ATV accident she was in. Her hand came out of the vehicle while it was flipping which caused injury to her left hand. X-rays were performed which showed one of her fingers were broken. The patients hand did have multiple cuts and deep scrapes on the front and back of her hand and two of the fingers were swollen. The Dr decided to clean the hand and put a temporary cast on it until she was able to see an orthopedic physician. The patients was given ketamine during the cleaning and she became very anxious saying that she felt dizzy. She was then given a small does of sedative to calm her down, which she did. The hand was cleaned and the temporary cast was placed.

When the RN and I entered the patients room for the first time I the patient was laying on the bed covered with her blanket while holding her hand up from the elbow. There were visible scrapes and cuts all over the hand and I thought she was tough for her age because the injury looked bad. When we assisted the Dr with the cleaning and cast placing, the patient was really scared, crying and screaming. I felt and showed sympathy for her. I tried to take her mind off of the situation by asking her what character was on her blanket that she had. While crying she said it was a unicorn and told me how her birthday she just had was unicorn theme. I felt sad that she was feeling the pain from the cleaning of her hand but I also understand that she needed it.

I think the whole situation went well while she was being treated for her injuries. Her mother and father were present which helped to keep the patient calm. Her mother tried her best to keep telling her how great she was doing while the cleaning of her hand and cast were done. I didn't realize that the ketamine would make the patient feel so dizzy which suprised me. She expressed how dizzy she felt and I witnessed her eyes moving back and fourth uncontrollably. The Dr did explain that this could happen and asked the RN to give the patient a small dose of sedative. He really wanted to make sure the patient was comfortable. I was able to distract the patient a couple of times by asking her questions, trying to take her mind off of the procedure that was being performed.

What I can apply to this situation from my previous knowledge is that ATV accidents are common and usually a lot worse. I do not know if the patient was wearing a seat belt or not but she was very lucky to have only a hand injury from this accident. There have been many ATV accidents that have caused TBI and even death. Children riding in ATV's should be taken seriously and considered extremely dangerous.

In conclusion, I have learned that some injuries may look worse than they are. I thought the patients whole hand was broken due to all of the scrapes and cuts that she had. Luckily she only had the one broken finger to that hand. She was such a tiny little girl and the situation could have been a lot worse. I think parents with ATVs should consider keeping their children out of them until they are older or make sure the ATV only goes under a certain speed. I don't know the exact reasons why or how her hand was injured from the accident but I do know it could have been prevented.

I can use this situation for further events by verbalizing to younger patients how well they are doing during a procedure. I can also try and distract them from focusing on it by asking them questions about the things they may have brought with them such as a blanket, a stuffed animal or even a character on their clothes. This can allow them to stay calm and ensure the procedure continues smoothly.