

## IM 8 Midterm Reflection

I am completing my preceptorship in Palliative Medicine Mercy 7. So far, my experience has been extremely eye-opening. I have had many experiences with both palliative patients as well as med-surge overflow patients. When I picked out my preceptorship, I did not know that there was an opportunity to be part of palliative medicine so I was extremely excited to see how I could incorporate spiritual and comfort care to grieving patients and family. When I began my first day I was overwhelmed with anxiety however, the unit has welcomed me with open arms. My preceptor, Eva Leal, has exhibited a lot of encouragement and has chased many opportunities for me. When I began to demonstrate an eagerness to learn, the rest of the unit had also begun searching for learning opportunities for me. This included basic skills like postmortem care, pulling out foleys, giving medications to even smaller and more complex teaching moments such as cluster-care and discharge-planning documentation.

A huge part of my experience has also been applying critical thinking skills. Completing thorough assessments for my patients and even on the family. During the most vulnerable parts of their lives it can be overwhelming, so constantly observing and being perceptive to patient and family cues is important. I have even been able to point out situations that make me question the application of patient care and provide education; An example of this would be on my second shift. I saw that a patient's dressing was completely sanguineous and saturated. There was no name or date on the dressing of when it was placed. In this scenario I was able to question my nurse and ask if we should change the dressing or just change the IV site. She agreed that it would be best to change it due to the lack of name and date documentation on it. Furthermore, the patient asked why we were changing it and we explained the situation and the risks if it was kept in placed. The patient agreed and it became an opportunity to use critical thinking, a chance to perform a skill, and a moment of sincere education. As a result of providing this education, we were able to establish a stronger rapport with the patient and family at the bedside. Many of our patients have stayed with us for weeks at a time, so I have learned extensively that initiating the family in their care is precedent to establishing a good and virtuous rapport. As I continue my preceptorship, I am noting my strengths and weaknesses. Subject matters such as communication and education is something I am very strong in. However, I must work on my time management. This includes prioritization and cluster care, and to help achieve improvement, I have been letting everyone on the unit know!

So far, my experience has been very positive; I am learning to be quicker with understanding cues and getting into a foundational routine. Nonetheless, I am also not afraid or intimidated to ask questions. I want to be able to learn how to work as a team and collaborate with every member in the patient's care plan. Ultimately, I have been learning the emphasis on empathy. Anyone can complete these skills and that is why we are trained to provide education so patients can be discharged and do them at home. However, you must have the heart to understand the patient's heart. Trying to understand their feelings and fears is a learning tool that is part of empathy, and it is one of the most rewarding themes I am gaining knowledge in since starting my preceptorship. Nonetheless, I am looking forward to learning more in the upcoming weeks!