Covenant School of Nursing Reflective Practice

Learning to be a reflective practitioner includes not only acquiring knowledge and skills, but also the ability to establish a link between theory and practice, providing a rationale for actions. Reflective practice is the link between theory and practice and a powerful means of using theory to inform practice thus promoting evidence based practice." (Tsingos et al., 2014).

Using the Reflective Practice template on page 2, document each step in the cycle. The suggestions in each of the boxes may be used for guidance but you are not required to answer every question. This Reflective Practice document will be reviewed by faculty and then you will post the final reflection in your LiveBinder folder.

Step 1 Description

A description of the experience, with relevant details.
Remember to maintain patient confidentiality. Don't make judgments yet or try to draw conclusions; simply describe the events and the key players. Set the scene! It might be useful to ask yourself the following questions

- What happened?
- When did it happen?
- Where were you?
- Who was involved?
- What were you doing?
- What role did you play?
- What roles did others play?
- What was the result?

Step 2 Feelings

Don't move on to analyzing these yet, simply describe them.

- How were you feeling at the beginning?
- What were you thinking at the time?
- How did the event make you feel?
- What did the words or actions of others make you think?
- How did this make you feel?
- How did you feel about the final outcome?
- What is the most important emotion or feeling you have about the incident?
- Why is this the most important feeling?

Step 3 Evaluation

- What was good about the event?
- What was bad?
- What was easy?
- What was difficult?
- What went well?
- What did you do well?
- What did others do well?
- Did you expect a different outcome? If so, why?
- What went wrong, or not as expected? Why?
- How did you contribute?

Step 4 Analysis

- What can you apply to this situation from your previous knowledge, studies or research?
- What recent evidence is in the literature surrounding this situation, if any?
- Which theories or bodies of knowledge are relevant to the situation – and in what ways?
- What broader issues arise from this event?
- What sense can you make of the situation?
- What was really going on?
- Were other people's experiences similar or different in important ways?
- What is the impact of different perspectives eg. personal / patients / colleagues' perspectives?

Step 5 Conclusion

- How could you have made the situation better?
- How could others have made the situation better?
- What could you have done differently?
- What have you learned from this event?

Step 6 Action Plan

- What do you think overall about this situation?
- What conclusions can you draw? How do you justify these?
- With hindsight, would you do something differently next time and why?
- How can you use the lessons learned from this event in future?
- Can you apply these learnings to other events?
- What has this taught you about professional practice? about yourself?
- How will you use this experience to further improve your practice in the future?

Adopted: August 2016

Covenant School of Nursing Reflective Practice

Name: Instructional Module: Date submitted:

Use this template to complete the Reflective Practice documentation. Use only the space provided. Information that is not visible is lost.

Step 1 Description

I was able to watch a twin cesarean birth at W&C. I was able to help out the nurse by counting and storing bloodied towels. I was also able to weigh them and calculate how much blood loss she had. There were at least 16 people in the room which made it very hard to move around especially with sterile fields everywhere

Step 4 Analysis

Actually seeing the things we have discussed in class helped me understand it better. In this situation, it is relevant to know what are the priorities for a cesarean procedure to help the patient go through the process smoothly.

Step 2 Feelings

I was excited to see a twin birth and experience seeing a pre mature birth since I was also a preemie. Seeing the birth made me feel excited for parents especially that they came out somewhat healthy for being only 29 weeks gestation

Step 5 Conclusion

I think I could have done better by being more involved but I learned a lot from this experience. I learned how to care for a patient with twin babies. I also learned how to massage a fungus

Step 3 Evaluation

It was a good procedure for both the mom and the babies. There wasn't any complications and it went pretty smoothly. Tiffany and the other OR nurse did a great job controlling the room with so many people in it

Step 6 Action Plan

I had a great time with this experience. It was a hectic and busy day but I can confidently saw this is top 3 for me when it comes to my clinical experiences in nursing school

Prioritization Tool

	URGENT	NOT URGENT
IMPORTANT	Urgent & Important DO **Monitor FHR and maternal V/S** **Gave LR**	Not Urgent but Important PLAN **Educating the parents on what to expect with cesarean procedure**
NOT IMPORTANT	Urgent but Not Important DELEGATE **Counting surgical towels** **Weighing bloody surgical towels**	Not Urgent and Not Important ELIMINATE **Bringing ice water**

Education Topics & Patient Response:

Education about what to expect from the procedure — patient stated they understood the risk and benefits of the procedure

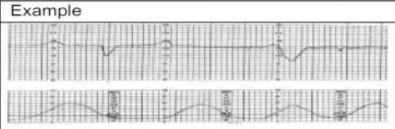
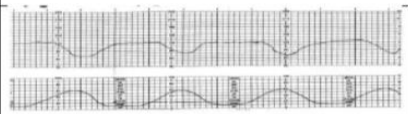
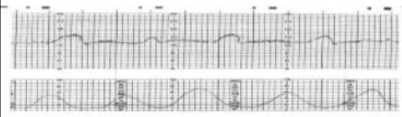
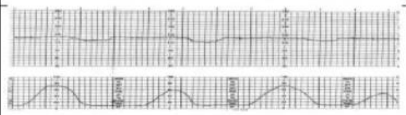
Education about preterm babies having to go in the NICU — dad, despite his worries understands why they need to be put in the ICU

Complete this during your labor and delivery experience and turn it in with your paperwork. Ask your instructor or TPC nurse to check over your findings

Situation:
Date/Time: **08/27/25** Age: **23 y/o**
Cervix: Dilation: _____ Effacement: _____ Station: _____
Membranes: Intact: ____ AROM: _____ SROM: _____ Color: _____
Medications (type, dose, route, time):
_____
Epidural (time placed): _____

Background:
Maternal HX: **Hx of hypertension r/t to pregnancy**
Gest. Wks: **29 weeks** Gravida: **2** Para: **1** Living: **1** Induction / Spontaneous
GBS status: + / - **neg**

Assessment (Interpret the FHR strip-pick any moment in time):
Maternal VS: T: **98.7** P: **110** R: **20** BP: **110/66**
Contractions: Frequency: _____ Duration: _____
Fetal Heart Rate: Baseline: _____
Variability: Absent:_____ Minimal:_____Moderate:_____Marked:_____
Type of Variables: Early Decels:____ Variable Decels:___ Accels:____ Late Decels:____
Category: _____ (I, II, III)

Pattern	Example	Cause	Interventions	Desired Outcome
Variable Decelerations		**C**ord Compression	Discontinue oxytocin Change maternal position Administer oxygen at 10 L/min by nonrebreather face mask. Notify provider Vaginal or speculum examination to assess for cord prolapse. Amnioinfusion Assist with birth if pattern cannot be corrected.	Relieve Cord Compression
Early Decelerations		**H**ead Compression	Continue to monitor labor progress.	Maintain Oxygenation Healthy fetus at delivery
Accelerations		These are **O**K!	Continue to monitor labor progress.	Maintain Oxygenation Healthy fetus at delivery
Late Decelerations		**P**oor Placental Perfusion	Discontinue oxytocin Assist woman to lateral (side-lying) position. Administer oxygen Correct maternal hypotension Increase rate of intravenous solution. Palpate uterus to assess for tachysystole. Notify provider Consider internal monitoring Assist with birth if pattern cannot be corrected.	Maximize Oxygenation Increased Perfusion to Placenta

Recommendation/Nursing Plan:
Describe the labor process and nursing care given as well as any complications you witnessed:

Describe any Intrauterine Fetal Resuscitation measures utilized and the reason:

Delivery:
Method of Delivery: **cesarean** Operative Assist: _____ Infant Apgar: ____/____ QBL: **548 mL** Infant weight: _____