

NAME: _____Synthia Gomez_____ DATE: __09/24/2025_____

POST-CLINICAL REFLECTION OB Simulation Reflection - due on Thursday by 2359

To strengthen your clinical judgment skills, reflect on your knowledge and the decisions made caring for this patient by answering the reflection questions below.

Reflection Question	Nurse Reflection
What feelings did you experience in clinical? Why?	I was a bit nervous going into sim because in LD and PP there are two patients a nurse must care for. That sounds a bit overwhelming depending on what mother, baby, or both need or situation may be. This takes critically thinking on prioritization.
What did you already know and do well as you provided patient care?	I feel I did well in patient education. In real patient interactions I think education and teaching-back are very important so, I try my best to focus on that area and ensure there is understanding from patients.
What areas do you need to develop/improve?	I need more practice on OB focused assessments. I can execute the assessment, but I am still unsure of what I am feeling such as in Leopold's maneuver, and I want to confidently and correctly place tocos.
What did you learn today?	I learned during sim how to more effectively collaborate with other members of the hospital and how to keep the patient's environment calm even if urgent interventions are happening.
How will you apply what was learned to improve patient care?	I will always inform the patient of what is going on (late decels, fetal tachycardia) and what interventions are going to be implemented for the safety of both patients. I like to help possibly ease the anxiety of the patient with clear communication and explanation of what to expect so there is little room for fear for the worst.
Please reflect on how your OB simulation learning experience assisted in meeting 2-3 of the Student Learning Outcomes .	<ol style="list-style-type: none"> 1. Clinical Judgement: I had standing orders to perform IUR on my mother that was in triage for decreased fetal movement, but I did make the decision for the intervention. I had done 40 minutes of a non-reactive stress test and baby was having minimal variability, so I began the 4 turns and helped patient get admitted from triage. 2. Professionalism: I identified family members in patient's room and passed no judgment on sister who would not help patient clean cat litter at home for safety of the fetus and mom. I also checked on patient's mental health when the conversation of her stillborn came up and I offered to sit and talk with her if she needed to. I would promptly comfort and answer patient questions regarding the baby's instability while keeping a calm attitude.