

Midterm Clinical Reflection

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During the initial half of my time in pediatric staffing, I have expanded my knowledge in nursing assessments for a variety of pediatric patients, gained unit workflow experience on multiple floors, provided daily and critical care nursing interventions, and practiced accurate documentation.

Throughout my time so far, I feel that my preceptorship experience has greatly increased my nursing care knowledge and has enabled me to really connect what I have learned in nursing school lectures and clinicals to the practical aspects of nursing care. As I am learning the nursing role from my preceptor, I can recall lecture information and strengthen my knowledge when I am performing hands-on skills with patients. I feel that the preceptorship opportunity has increased my confidence in my ability to provide nursing care.

One example of nursing care that has enhanced my previous in-lecture knowledge, is simply a pediatric assessment. In module 5, I learned what is included in a pediatric assessment; during my time in the hospital, I not only know what is essential to assess, but I have a greater understanding of how my assessment indicates potential safety concerns, impacts overall patient status and care, and how it communicates to the patient's entire healthcare team.

In the nursery, my nurse and I had brought a patient for a circumcision procedure. Before the procedure, I assessed the baby's respiratory rate, heart rate, and temperature. During my assessment, I noted that this patient had cyanotic hands and feet, extremities that were cooler to the touch, and an overall lethargic presentation. The temperature I took was within normal limits but on the colder side and respirations were also normal but on the slower side. After the procedure, we brought the patient back to the mom's room because this patient needed to be placed under phototherapy due to his high bilirubin levels. Shortly after we left the patient, my nurse and I were called back by the mother who was concerned about her son's blue appearance. After measuring his temperature, which was below normal range, we brought the baby back to the nursery to be placed under the warmer. We placed the pulse ox monitor on the baby and realized he was desatting. We placed oxygen on this patient and notified the physician. Because of a simple assessment, this patient could receive quality care and reduce mortality risk. I comprehended how the assessment led to interventions to prevent further safety risks and corrected patient harm.

Assessments are vital to providing health care. Because of my experience in the nursery, I was able to gain experience in recognizing indicators to maintain safety, understanding what interventions to implement, contributing information to communicate to the health care team, and realizing when to include others in providing quality care.

During my next five shifts, my goal is to gain confidence in giving report, continue to practice documentation, enhance initial recognition of safety cues, and improve clinical judgment to prevent safety concerns.