

Reflection Journal Directions:

Directions: Provide in-depth, thorough answers to each of the following questions. Answers should be added directly into this document and must be at least 750 words in length. Submit your journal to the Edvance360 Dropbox for the appropriate simulation scenario (Scenario #1, Scenario #2) by the Saturday following the simulation experience, no later than 2200.

Responding:

- Discuss one thing you noticed, how you interpreted it, and how you responded. Do you feel your response was appropriate? Explain.

I noticed that after surgery to fix an open complete fracture to the tibia and fibula that my patient was refusing SCDs for the right leg as well as refusing to ambulate. I interpreted this as I needed to educate my patient on the importance of early ambulation to prevent deep vein thrombosis or other complications such as pulmonary embolisms. Once I entered the patients room, my patient was complaining of pain in the right leg. Upon examination I noticed that the lower right leg was red, warm to the touch, and had 1+ pitting edema. I responded by calling the patients' healthcare provider and informed him of the patient's condition as I interpreted this as a possible deep vein thrombosis. The healthcare provider order labs such as a D-dimer to be done. The patient then started to complain of chest pain in the right side of her chest and her pulse ox started to drop to an 88%. I listened to the lung sounds and noticed the right side was diminished, so I called the health care provider to make them aware and see what they wanted to be done. More labs were ordered as well as a spiral CT of the chest. Once the test results came back and the CT came back I called the healthcare provider to inform him that there was a pulmonary embolism in the right upper lobe and he ordered oxygen, pain medication, as well as a blood thinner to aid in the prevention of further blood clots. While I do feel that my response was appropriate for this patient, I need to work on gathering all the information needed from the patient before I call the provider. Initially when I noticed the leg was red and warm to the touch, I forgot to check if any edema was present and had to go back into the patients room to check. In the future I want to make sure that I do a complete assessment so that way I am able to provide all the evidence to the provider so we can provide the patient with the best care possible.

- Provide an example of collaborative communication you utilized within the scenario. During simulation the patient had complained of chest pain and rated it a 6/10. In the MAR the patient had Percocet ordered every 6 hours, but when I called the healthcare provider he also order morphine for the patient PRN is the pain continued after the Percocet. The Provider also order enoxaparin now and every day. I was able to communicate the information from the doctor to my fellow medication nurse and determine which medication to give first and which pain medication to give when and why. We decided to give the enoxaparin first as the patient had a pulmonary embolism and felt this needed to be taken

care of first. Then we decided the Percocet was the first pain medication that needed to be given for pain as the MAR stated to give the Percocet for pain of a 6 rating. The morphine was ordered for breakthrough pain after giving the Percocet and this was a PRN order, so we decided to give this medication last.

- Discuss one example of your communication that could use improvement. What did you say? How would you reword this statement? Be specific.
In simulation I would get the orders from the doctor but I didn't write anything down and was very sure of myself. Next time I need to write the orders down, especially the medications and read them back to the doctor to make sure that those are the correct ones, as well as verify them in the MAR. During simulation I just repeated back to the doctor one word at a time or asked for them to repeat themselves, which if I needed clarification is okay to do. However I need to make sure that in the future I have the right medication, dose, route, and even labs ordered for that patient as well as having them done in a timely manner.

Reflecting:

- How did you evaluate an intervention you performed? Was the intervention effective and what would you do differently in the future if it was ineffective?
I noticed that the patient's pulse ox started to drop to an 88% so I made the decision to put 2 liters of oxygen on the patient. This intervention was effective and managed to keep the patient oxygen within the 90s. However, while I was on the phone with the provider, I noticed that the oxygen level kept dropping and going back up, so next time I would maintain or even think about adding on another liter to maintain a stable oxygen level.
- Write a detailed narrative nurse's note based on your role in the scenario.
Sam Smith is alert to person, place, and time. 24 hours post operation from an ORIF. Patient complained of pain the right lower leg, upon examination the leg was red, warm to the touch, and had pitting 1+ edema. Provider was called and ordered for a D-dimer to be done as well as pain medication to be administered. Patient's pulse ox dropped to an 88%, was placed on 2 liters of oxygen via a nasal cannula. Patient stated having pain in their chest and rated the pain a 6/10. Lung sounds were diminished in the right lobe. Provider was called and notified of the findings orders for BNP, ABG, troponin, spiral CT scan, and morphine for pain ordered. ABG came back Ph of 7.55, PaO₂ 60 mmHG, PaCO₂ 19 mmHG, HCO₃ 24 mEq/L indicating respiratory alkalosis. BNP 250 pg/mL. Troponin 1.1 ng/mL. D dimer 1.5 ug/mL. The spiral CT scan revealed a pulmonary embolism in the right upper lobe. Provider was called and notified of all the previously listed results, and order of enoxaparin 1.5mg/kg subcutaneous now and daily. Medication was administered and the patient was educated on how to use an incentive spirometer.
- Reflect on opportunities for improvement. Based on your performance, what steps will you take to help improve your clinical practice in the future?

I noticed in the chart that the patient needed to be educated on the use of an incentive spirometer so I went and grabbed it and tried to educate the patient on it while they were in pain and struggling to maintain their oxygen level. I realize that this intervention is something that I could have saved for last and done at a different time. Next time in clinical I will use better judgement on my patients condition and focus more on what they need right now and become less task oriented.

- Use a meme or a word to describe how you felt before, during, and after the simulation scenario (one meme or word for each phase). Why did you choose these pictures or words?



Before... Nervous, not knowing what to

expect.



During,

how I felt towards myself for forgetting the simplest of things, such as lowering the patients bed.



After, simulation not being as bad as I thought it would be and I finally get a break and recover from the first 8 weeks of class.