

Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

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 my patient had been nauseous and vomiting for the past 2 days. She was laying flat on her back when I came in so one of the first things I did was sit her up to make sure she did not aspirate if she did have to vomit. She did end up vomiting and it had a coffee ground, greenish appearance. Due to this, she was NPO so she did not have a risk of vomiting more things up. I used my previous knowledge of GI bleeds to determine that her emesis appearance was due to her GI bleed. I also noticed that her HCT and HGB was low which was also a result of her active GI bleed. Her PTT and INR were also elevated, putting her at a higher risk of more bleeding. Her potassium and sodium were also low from her vomiting and losing electrolytes over the past 2 days. Due to this, we started her on IV fluids to rehydrate her and hopefully get some of the electrolytes back in the correct range.

Provide an example of collaborative communication you utilized within the scenario (consider interactions with your student nurse partner as well as members of the interdisciplinary team such as lab, the healthcare provider, surgery, PT/OT, radiology, etc.).

An example of collaborative care we utilized during this scenario would be that we inserted the NG tube together and grace helped me verify the medications. We had to call the provider and update him on how the patient was doing and our new findings. We gave him an SBAR report so he could get a better story about his patient. He had ordered an NG tube and IV fluids which we repeated back to verify. We completed both of those tasks and we collaborated with X-ray to verify placement of the NG tube. Our group did

not do this but the second group of our simulation collaborated with the social worker because the patient had expressed some concerns about not being able to afford her diabetes medication. This also raised some other concerns because as Lynn asked more questions, we eventually came to the conclusion that she did not have a job or a stable place to live. This is important because in order to maintain her health, she needs income and a place to live.

Discuss one example of your communication that could use improvement. What did you say? How would you reword this statement? Be specific.

One example of my communication would be that I would ask the patient about her allergies before I gave any medications. This is 1 thing that I did forget. I verified her name and date of birth but not her allergies, which is equally as important. I will ask her next time when I verify her name and date of birth to also verify her allergies. I also could have done a better job communicating with the patient as I felt like I relied a lot on the assessment nurse to assess the patient's need for medication and reassess afterwards to see if the medications helped at all. I normally do this well but next time I will be sure to reassess the patient's pain after giving pain medications and I will assess the need for any further medications.

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?

An intervention I performed would be that I raised the head of the bed to prevent aspiration because she had been vomiting for the past 2 days. This was effective because she did vomit a couple minutes later and this helped prevent her from aspirating. We also checked her blood sugar during our assessment because we had got in report that her skin was pale and cool which are signs of hypoglycemia. We just wanted to be sure that her blood sugar was not low before we did anything else.

-

Write a detailed narrative nurse's note based on your role in the scenario.

NURSING NOTE

Date

04/10/24

NG tube inserted into the left nare. Exit site is 30 cm at nare. Connected to intermittent wall suction. Contents are coffee ground appearance, brown, and green. Pt tolerated well and states it has given her some relief from the nausea.

Med nurse note:

Pt rated pain 5/10 with nausea and x1 emesis. The emesis had a coffee ground appearance, brown and green. She received morphine 1mg for pain and phenergan 25mg for nausea.

Reflect on opportunities for improvement. Based on your performance, what steps will you take to help improve your clinical practice in the future?

To improve on areas in the future, I now have more knowledge about NG tubes and that the IV fluids need to be running before insertion so that if the patient starts to quickly decline, we would be able to help their blood pressure by giving them a lot of fluids to hopefully bring them back to baseline. In the future, I will always make sure that I have fluids running before I insert an NG tube. I also need to improve on my communication between the patient and I. I do well on this normally but I feel like I was relying a lot on my assessment nurse for my information when I should have just gone into the patient's room and got it myself.

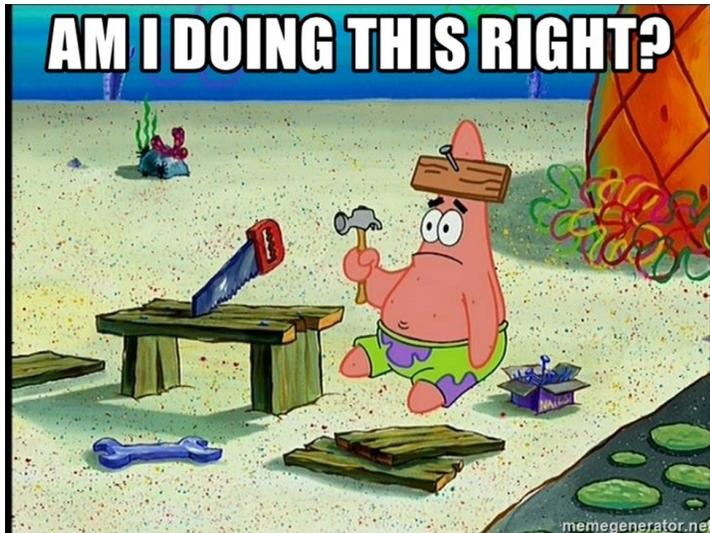
Use a meme or a word to describe how you felt before, during, and after the simulation scenario (one meme or word for each phase). Why did you choose these pictures or words?

Before: I chose this picture to represent how I felt before simulation. I was a lot less nervous than the last simulation. Sometimes the simulation almost feels like you are playing “dress up” because you know it is not a real life situation but we still treat it as if it was...just like when you are kids!



During: I chose this picture to represent how I feel during simulation because without your professors there, like real clinical, you really don't have any sort of 100% reassurance. Yes, we can refer to our other group members, but you never know if they will know how to answer your

question or guide you through a skill. Being the medication nurse, this role is nerve racking because you always have professors watching every step of the way, especially during medication passes in clinical, and for simulation you have to remember every little thing yourself.



After: I chose this picture for how I felt after simulation because it is such a relief hearing the words "Congratulations, you're done!" at the end of each simulation. When you are reaching the end, your mind races thinking of all the things you still need to do or what you forgot to do. But then hearing those words gives you a moment of relief knowing that you successfully completed the simulation.

