

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 the patient had a history of nausea and vomiting and dark tarry stools the past 2 days. I interpreted a GI bleed from the dark tarry stools. During sim the patient did have dark tarry stools and very dark emesis that indicated coagulated blood. My partner and I called the HCP to obtain an order for NG tube placement to help decompress the stomach and IV fluids to prevent dehydration (from the emesis and stools.) I feel our response was appropriate because we did everything that we could and when we needed further direction, we phoned the HCP to obtain further orders for the patient. The patient lab results showed a low red blood cell count, low hemoglobin, low hematocrit, low potassium, glucose was low, white blood cell count was low, and PT/PTT/INR was elevated. The lab findings reflect an internal bleed with an infection. The low potassium is from the patient vomiting. Patient is losing potassium as she vomits. It will be important to get an order for daily labs to ensure patient lab results were improving. I noticed that the patient was NPO. Placing a patient on NPO helps to prevent aspiration and also if patient needed surgery, its important to have NPO status to also prevent complications during surgery.

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[Ex. I noticed that my patient only produced 325 mL of urine in the last 24 hours, weight increased 1.5 kg since yesterday, BP is decreased at 90/58, and their lower extremities have 2+ pitting edema. Additionally, the urine analysis showed proteinuria, serum sodium 132, potassium 5.6, BUN 47, creatinine 2.9. This coupled with the admitting diagnosis of severe dehydration due to vomiting, limited oral intake, the patient's age (75) and a history of diabetes mellitus type 2, I interpret this to mean that the patient is likely experiencing an acute kidney injury (AKI). I would respond by initiating strict I&Os, performing daily weights, elevating the lower extremities and notifying the healthcare provider with requests for the following orders: telemetry, a potassium reducing agent, low sodium and potassium diet, and IV fluids.]

- 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 communication that I utilized within the scenario was asking my partner for help in times of need. Our teamwork was excellent. Another example was calling the

HCP. The HCP was very snippy, and my partner and I remained professional as much as possible and obtained the orders that we needed for our patient. It is important to have objective data gathered before you call because HCP are very busy also. We also received a GI consult for our patient relating to the GI bleed.

88 words

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

Have more objective data gathered before calling the HCP. I could have said “Patient Roberta Melena, came in with a GI bleed, History of PUD, DM, Diverticulitis, persistent headaches, VS 100/60, 78, 20, 98.1, 98%, dark tarry stools with coagulated emesis, c/o of abdominal pain, I am looking to get an order for NG tube for abdominal decompression and IV fluids to prevent dehydration.

64 words

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 administered pain medication and an antiemetic to help control the patients’ symptoms that she was experiencing. Its important to have pain and other symptoms under control / treated before doing your assessment to ensure a correct baseline. Pain can affect vital signs and the antiemetic helped to prevent aspiration. My intervention was effective. In the future if my intervention was ineffective, I would have called the HCP and gave them a SBAR and asked for more orders to help treat the patients’ symptoms. I could have also put cool washcloths on the patient forehead and back of neck, that could have helped with the nausea.

106 words

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

NURSING NOTE	
Date	Patient came onto unit with complaints of persistence headaches, dark tarry stools, with nausea and vomiting. Vital signs 100/60, 78, 20, 98.1, 98%. New order received to place NG tube on low intermittent suction and start normal saline on 125 ml/ hr. Patient tolerated NG tube placement. IV site shows no signs of redness, warmth, drainage, edema. Patient remains NPO. Morphine and Promethazine administered per order for

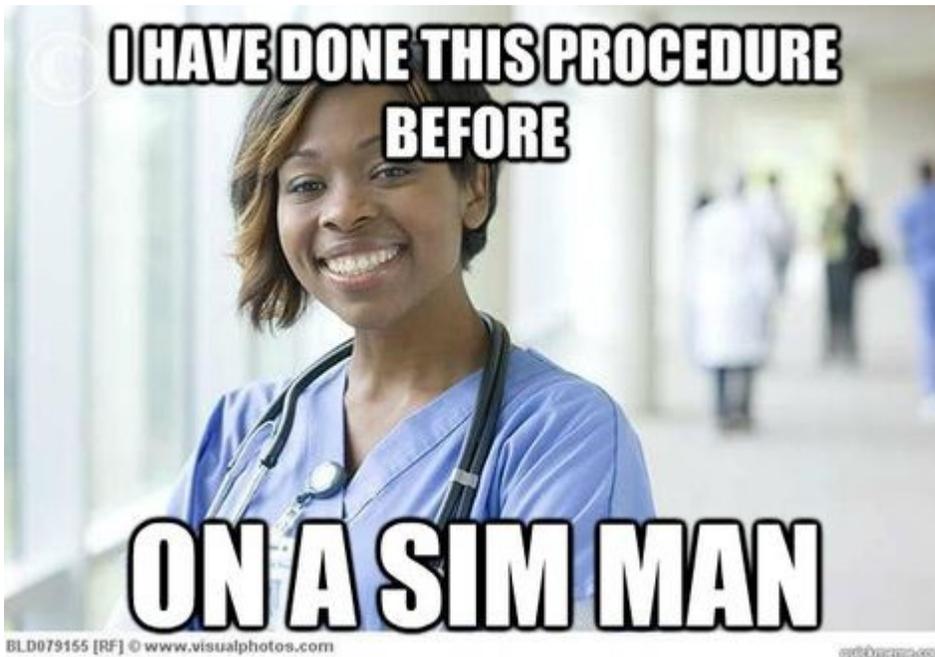
pain and nausea and vomiting. Morphine and Promethazine effective. Call light within reach. HOB at 30 degrees.

84 words

- Reflect on opportunities for improvement. Based on your performance, what steps will you take to help improve your clinical practice in the future? Remember to ask name and date of birth and confirm allergies prior to medication administration. By asking name and date of birth helps to prevent medication errors. I also forgot to flush IV before and after medication. This helps to ensure patient received full dose of medication and to maintain IV patency. I went to bed at 9:30 pm and not sure why I was not on my game today. I didn't even take melatonin last night. In the future, I will try my best to be more awake for my next simulation.

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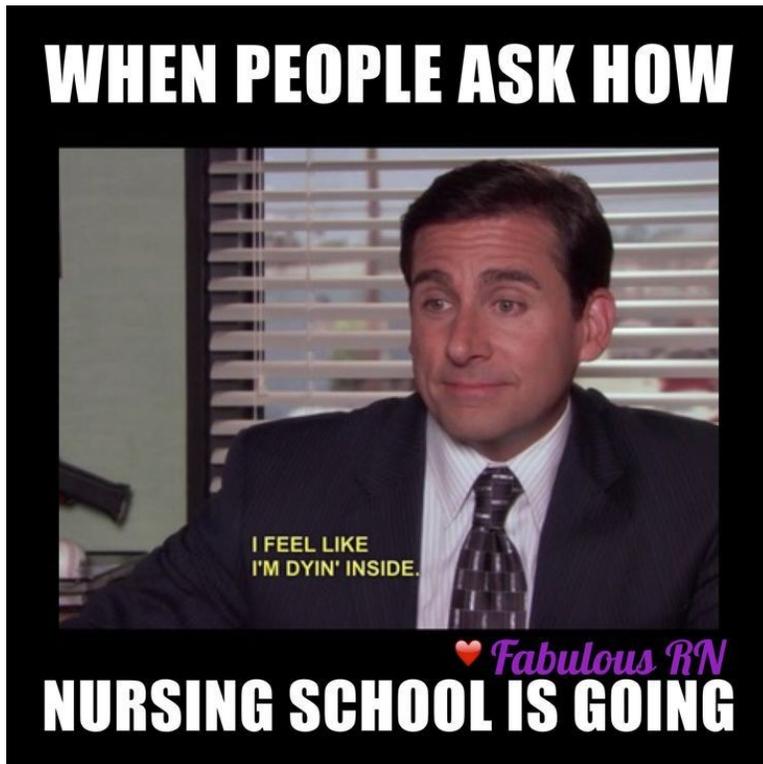
- Use a meme or a word to describe how you felt before, during, and after the simulation scenario (one meme or word for each phase). Why did you choose these pictures or words?



I chose this meme because I have never hooked up a patient to low intermittent suction or inserted an NG tube on a real live patient before. If a patient asks if you have done this before you say "Yes

I have” confidently. You never want to tell a patient this is your first time doing it in real life because they will be very nervous and afraid of you.

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This is me right now with roughly 3 weeks remaining of this semester and especially during sim lab. I am mentally and emotional drained right now. I am trying my absolute hardest to cross the finish line with excellence. This is similar to reliving senioritis. So much is hitting you at the same time and its important to give yourself time for yourself to prevent mental exhaustion.

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