

Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Reflection Journal Directions:

Word count: 757

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.

One thing that I noticed with the patient is that he was uneducated about the nasogastric tube. He kept asking for a glass of orange juice even after I explained that he is NPO; therefore, I interpreted this as a risk. It was very important at this moment to keep his stomach empty of all content including fluid so I educated on the purpose of the nasogastric tube and that it would exacerbate symptoms if he drank or ate anything and put content into his stomach. This could potentially be a risk for aspiration swallowing with the tube, so education was necessary for patient safety.

- 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 my partner and I had was after she checked his sugar. She communicated with me that the patient is a diabetic and has normal saline running and with his low sugar, it needed to be switched to saline with dextrose. I was then able to get the patient the correct fluids. This was very important information because if the patient's sugar bottomed out with the problems he was already experiencing, a negative outcome would be likely. I spoke with the patient after switching the fluids and he told me he felt much better; this was a good outcome for the patient and potentially avoided complications.

- 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 needing improvement would be my responses to questions. The patient was uneducated about the nasogastric tube and asked a bunch of questions and I think if I was more knowledgeable, I could've given a clearer answer for the patient to understand. I forgot exactly what I said but with more knowledge it would've been a clearer answer. Patients also understand things differently than us healthcare workers sometimes, so I need to just keep learning how to communicate in that language and continuing to acquire knowledge about what I'm doing.

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 that I performed was providing pain management with morphine. The intervention was evaluated as effective because the patient's pain level went down, and he did not require further pain management. Not that it was ineffective, but one thing I would do differently is instead of disconnecting the line and going directly through the j-loop, I will use the medication port on the IV line to administer medications due to a decreased risk of infection. If this was ineffective in the future, I would talk to the provider and ask if we can switch to a different pain medication or try a different dose. If those options didn't work, I would offer non-pharmacological forms of pain management such as music, visual/auditory distraction, etc.

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

The screenshot shows a software interface for a nursing note. At the top, there are navigation tabs: Nursing (selected), Flow Sheets, Provider, Labs & Diagnostics, MAR, Collaborative Care, and Other. Below the tabs is a black header with the text "NURSING NOTE". The main content area is a table with two columns: "Date" and a larger text area. The date is "4/10/24". The text area contains a detailed narrative note about a patient with a GI bleed, including information about vitals, glucose levels, pain management, and education.

NURSING NOTE	
Date	
4/10/24	<p>Patient in for GI bleed black tarry stool x2 days. Vitals initially stable on assessment. Patient became woozy during the assessment in which his sugar was checked by the assessment nurse. The patient's glucose level was low, so I switched normal saline to saline with dextrose @ 125 mL/hr to provide him with the correct fluids for being diabetic. Patient's sugar shortly after went up and stated to me that he was starting to feel much better. During further assessment, the patient started to complain of abdominal pain. Vital signs were stable, and I administered morphine which was effective pain management for the patient. Patient was NPO and continued to ask for something to drink, so I also educated on the purpose of the nasogastric tube and the importance of following the NPO order. Further consult with endoscopy needed.</p>

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

Opportunities for improvement would be providing education to patients. I could've given clearer education regarding the nasogastric tube, and I could've implemented education on the importance of using alternate medications from aspirin. I will start finding time during assessments or setting aside time throughout the day to provide pertinent education to the patients.

- 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. For some reason, I always get nervous before simulations. Everyone is watching you and one little mistake feels a lot worse than it should. During: decent. I didn't know exactly how to

feel during, it wasn't going great, but it wasn't going horrible. I started to feel better towards the end with the patient being switched to the right fluids and pain was being managed effectively. After: good. I felt good after because I helped get the patient the right fluids and helped with pain management and it overall went well. I knew I had improvements such as providing clearer education on the nasogastric tube, and I also could've educated on home use medications but the actual scenario itself went well with no errors.