

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.

One thing I noticed was that my patient had said she was feeling “funny.” When I asked her what she was feeling like, she told me she felt dizzy and lightheaded. I thought back to the patient’s history and knew she was a type 2 diabetic, so I asked her if she usually felt that way with a low blood sugar. The patient didn’t know because she doesn’t check her blood sugar a lot, so I decided to check it. The blood glucose was 70, which is normal, but since the patient was NPO due to her GI bleed that she was admitted with, I knew the blood glucose was going to keep dropping. I responded by calling the provider and letting her know the situation, and dextrose at 125 mL/hr was ordered. I did not think to check the blood glucose after the dextrose was administered, but I should have to make sure it was going up.

[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.).

I utilized collaborative communication when providing education with my student nurse partner. I had asked my patient if she was working, and she said she was unemployed. The patient then asked if there were any programs that could help her receive diabetic supplies and a place to stay, since she said she didn’t have a home. Me and my partner started to bounce ideas off each other to inform the patient of her choices and the things out there that could help her. We also educated her

about the use of aspirin on a daily basis and offered an alternative medication to treat her migraines.

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

I feel like my communication with the healthcare provider could use improvement because I did not stand up for myself when the provider called and was being rude about me calling for the IV dextrose. I should have explained that I'm only looking out for the safety of the patient, and if we don't fix the problem now, it will become much worse. I tend to think providers are the ones to have the last say and it doesn't matter if the nurse is disagreeing with something or have to take it when there is unprofessionalism coming from someone of a higher level than you.

**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 did was checking the patient's blood glucose after she said she was feeling dizzy and lightheaded. The intervention was effective because I was able to know that her blood glucose was dropping and called the provider so they could order the IV dextrose to raise it. Another intervention I did was to irrigate the NG tube to make sure it wasn't clogged, and the patient said they were feeling better after I did it.
- 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 several 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' in white. The main content area is a table with two columns. The first column is labeled 'Date' and contains the text '4/11/2024' and '1400'. The second column contains the text: 'Pt suddenly c/o dizziness and lightheadedness. VS were stable, so decided to do a FSBS. It was 70. Pt reported noncompliance with FSBS regimen for type 2 DM. Decided to call provider since pt is NPO, and blood glucose would naturally drop. The provider ordered IV dextrose at 125 mL/hr. Blood glucose still needs to be re-taken and done q6h.'

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

I feel like I could have done better with my assessment of the patient. I was only able to do the vital signs and pain assessment. I also decided to irrigate the NG tube, when it did not need it because I felt like I needed to do something with it. Since I knew that the patient was a type 2 diabetic, I should have remembered that blood glucoses are going to naturally drop when a person can't eat or drink anything.

- 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: Relaxed



During: Confused



After: Accepting



I chose relaxed for the before phase because I felt like I really prepared myself for what I was walking into. I knew I was going to be the assessment nurse and have always felt confident in my assessment skills. The NG tube placement was the thing that gave me a little anxiety, but I watched

a bunch of videos to brush up on my skills and felt ready for it. I also had had a patient in clinical with a GI bleed and knew I could think back to that experience for simulation. I chose confused for my during phase because I did my assessment and did the FSBS, but then couldn't think of any other interventions that I could do. I felt like I should have been doing much more but was confused on where to go from there. I chose accepting for my after phase because I realized, after my first simulation experience where I was feeling disappointed in myself, that these are only to help you with your clinical judgement, and you just need to do your best.