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 in simulation that she was a type one diabetic that was throwing up a lot and had not gotten her blood sugar taken yet for the day. She had expressed she was feeling "off". We had gotten her blood sugar of the day which was 70. With loosing so much fluid and having a finger stick blood sugar of 70, I interpreted all that information to indicate she was hypoglycemic. I would respond by initiating the 15-gram rule if she was not NPO by giving her simple carbs or a juice to bring her blood sugar up. She was NPO so I responded by calling the healthcare provider and requesting an order to get dextrose so that it can be infused as well as take blood sugars every 6 hours or as needed. I feel as if my response was appropriate because I was helping the patient to get back to a stable baseline with everything her body is currently going through.

- **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.).**
  Some collaborative communication I utilized was with the health care provider and with my student nurse partner. I had knowledge about the opioid medication morphine that was a physician's order to give for pain. Since I did have knowledge, I utilized my partner to let me know the vital signs before the medication was given. The blood pressure was low, so I used my nursing judgment to not give it. After the dextrose was administered through the IV, the vital signs went up a little bit but were still a little low. I communicated the vital signs that were just taken with the health care provider and was hoping to get their input on whether I just hold off on it again because the blood pressure was a little low still, even though her pain was rating 6 out of 10 or give the medication since it did increase and looks a little better than it did.

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

An example of communication that I could improve upon would be to the healthcare provider. I had called the health care provider and gave the situation on what the patient was feeling like currently and the background and then talked about the assessment that I had found as in the blood pressure being low and her being in pain rating it a 6 out of 10. I had wanted to know if I should give the medication or not, even though the blood pressure improved because it was still considered low. I would reword this statement by telling the provider the exact initial blood pressure of 97/ 59 and then retake of the blood pressure at 105/ 62 and it was improving but still low, so I want to be cautious when giving this opioid medication because she is still in pain.

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 evaluated giving dextrose for her low blood sugar and morphine for pain based on her signs and symptoms as well as objective data and subjective data that was given to me. Her finger stick blood sugar was 70 and she was feeling very off so that helped me evaluate that she was hypoglycemic and how I needed to care for her. Rating her pain a 6 out of 10 helped me evaluate that I needed to give pain medication. The interventions that I did were give D5W through her IV as well as Morphine IV push. These were effective because her blood sugar rose up to 93 and her pain was now at a 3/10. If it was ineffective I would then call the healthcare provider back and let him know we needed more dextrose as well as a stronger dose of pain meds to help this patient.

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

Nursing | Flow Sheets | Provider | Labs & Diagnostics | MAR | Collaborative Care | Other

NURSING NOTE	
Date	Second day with Nasogastric tube in nose. Coffee-ground appearance of blood draining from NG tube. Patient complained of feeling "off". Pain in abdomen was rated at a 6/10. Concerning findings communicated to me with blood pressure at 97/ 59 and Blood sugar of 70. Dr. Dunbar was called and notified of these findings. D5W was ordered. D5W was administered at 125 mL/hr and pain re-evaluated still being at 6/10. 1 mL Morphine IV push was given. Pain re-evaluated at 3/10.

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

  Some opportunities for improvement would be trusting and using my nursing judgment. Since the blood pressure was still low, I had to use my nursing judgment on if I give this pain medication or not.

Some steps that I will take to help improve this in my clinical practice in the future would be trusting myself and trusting my nursing judgment because I need to remember that I do want what is best for my patient and I do trust my nursing abilities.

- 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 the simulation: Me before simulation as I am seeing the prebrief handoff report and seeing they had a GI bleed with black tarry stool and N/V

During simulation: Me during simulation when we re- checked the vitals and the BS and they both were going up

Me after simulation when we successfully got the patient’s vitals and BP back up and the pain reported having 3/10 pain instead of 6/10