Firelands Regional Medical Center School of Nursing

Medical Surgical Nursing

Reflection Journal Directions:

Name: Nevaeh Walton

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 (Sim #1 Reflection Journal, Sim #2 Reflection Journal) by the Saturday following the simulation experience, no later than 2200.

Responding:

- Summarize your clinical judgment utilized in this scenario by discussing all relevant data you noticed, how you interpreted this data, and how you responded. Do you feel your response was appropriate? Explain.

  I noticed that my patient had a slightly elevated white blood cell count of 11.1 X 10^3 µ/L, normal range is 4,500-11,00 µ/L. This could be a sign of infection possibility in her left lower leg where her injury is, or it could be related to her history of COPD. I would respond to this by thoroughly assessing the wound for any redness or drainage. This could affect when the patient would be able to have surgery and I would suggest to the health care provider that the patient be started on antibiotics. I also noticed that the patient had a high BUN level of 40mg/dL, normal is 6-20 mg/dL, and a high creatinine level of 2.1 mg/dL, normal is 0.6-1.1 mg/dL. Both of these values can show possible impaired kidney function. This would affect how I would respond by looking close at the medications that are ordered for this patient and if any of them would be contradicted because of these labs. I also noticed that when the patient complained of lower leg pain, she also was not able to move her toes, felt some numbness and tingling, felt a lot of pressure, showed a decrease in color, and had no pedal pulses. These signs are related to compartment syndrome and the health care provider needed to be called immediately. The wound dressing on the leg was also loosened, ice should have been removed, and pillow used for elevation of the foot was removed. I also noticed that the patient was complaining of sharp chest pain, shortness of breath, and had a low pulse ox reaching as low as 88%. These are signs of fat embolism syndrome and the health care provider needed to be called immediately. The patient was put of oxygen and given 1.5 mg of enoxaparin, which can help prevent blood clot formation. They were also given 4 mg of morphine for pain. I would also respond by elevating the head of the bed to improve oxygenation, and administering isotonic fluids eventually to maintain perfusion. I would then monitor for fluid overload. The patient's vital signs and mental status would also be assessed frequently to monitor for worsening conditions or signs of

confusion. Compression devices would also be used to increase blood flow and prevent clots. Tests such as arterial blood gases and chest x-ray was used to confirm patient has hypoxemia and PE. I do feel like the responses to the scenarios were appropriate because it led to proper patient care.

- 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.).
  One example of collaborative communication I used within the scenario was between my student nurse partner to double check medication doses before giving them to the patient. We also discussed potential interventions the patient would benefit from due to their signs and symptoms of FES. When we got the diagnostic tests back, we also discussed what they could mean and how it would affect the patient.

- 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 that could use improvement would be when calling the pharmacy, I should have been more descriptive when referring to the patient. I could have done this by including more of the background for the patient, and more information on why they came in. I called because I believed that I didn't have the correct amount of medication to give to the patient. Even though I was wrong I could have said, "I'm calling about Sam Smith in room 3402-1. She is a 55-year-old female that came in with a lower leg fracture and had a recent ORIF surgery and has no known allergies. She has a history of COPD and is now showing possible signs of Fat embolism syndrome. She is on oxygen and has been prescribed 142.5 mg enoxaparin but currently the medication room only has (in the scenario there was 150 mg in a 3mL vial, which was enough, but if this situation was right, I would have given an amount lower than the prescribed dose). Is the medication on its way? Do I need to contact the health care provider for an alternative?"
- What is a conflict you experienced during the simulation? Write a CUS statement addressing the conflict you identified.

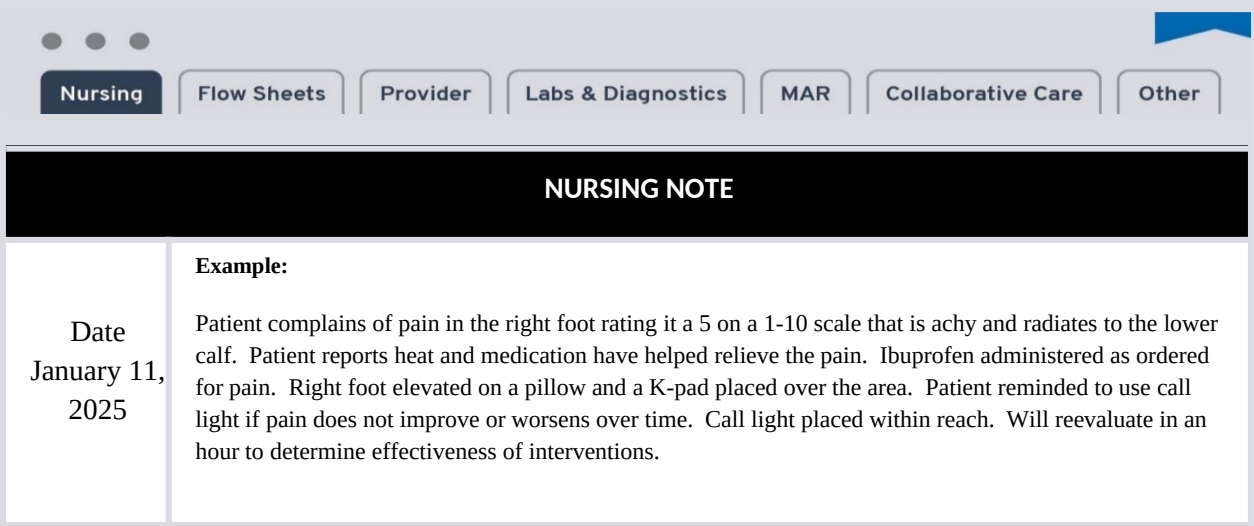
I'm concerned that the patient is having sharp chest pain and has a sPO2 of 88%. I am uncomfortable because of the sudden onset of these symptoms. I believe that the patient is not safe; there might be a serious health concern, and we need to call the provider immediately.

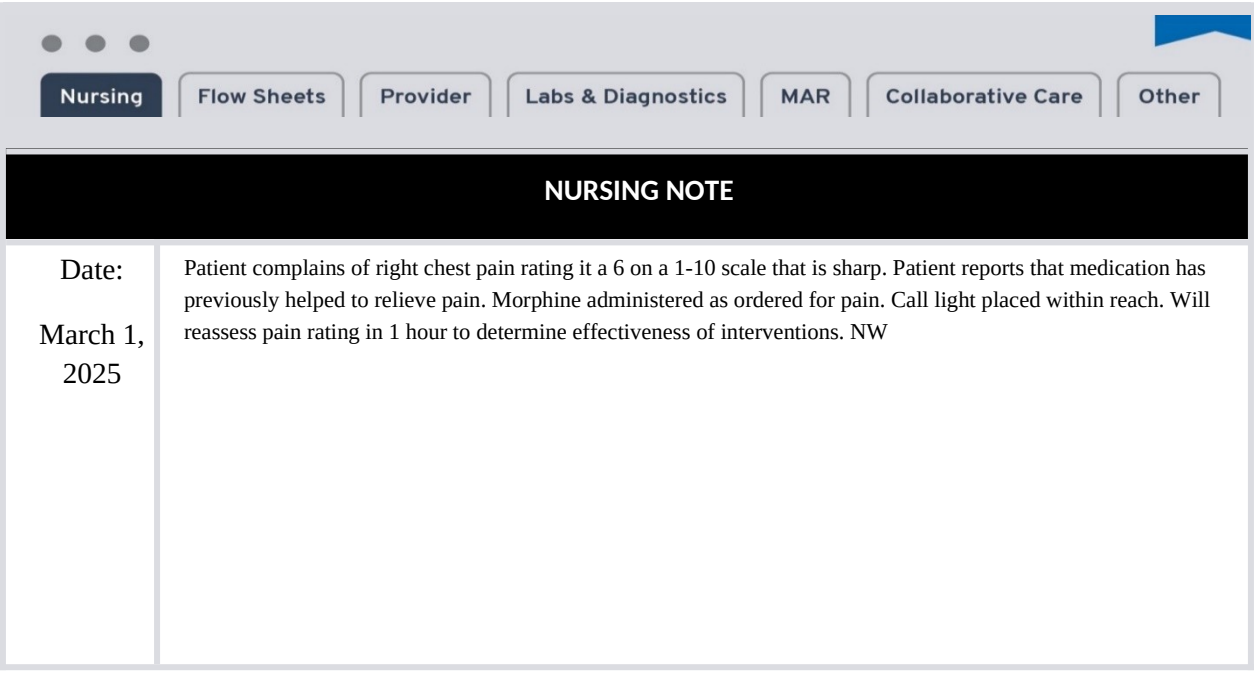
Reflecting:

- 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?
  One intervention I preformed how by giving 4 mg of morphine to the patient when they were experiencing pain. This intervention was effective and I evaluated it by asking the patient their pain rating before and after giving then medication. Since the pain level decrease the intervention was effective. If it was ineffective I would check the MAR and

see what other medication would be indicated for the patient at that time, or performed some non-pharmacological pain management techniques to decrease pain.

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





- Reflect on opportunities for improvement. Based on your performance, what steps will you take to help improve your clinical practice in the future?
  I will take steps to accurately check my medication math and slowdown in order to correctly give doses. This will improve my clinical practice in the future.

- 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 (I was nervous before the start of the simulation). During: Engaged (I was fully involved in the scenario). After: Reflective (Thinking about what went well and what didn't).**