

Firelands Regional Medical Center School of Nursing  
Faculty Manual

Psychiatric Nursing 2025

**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. Your reflection journal should be a minimum of 750 words (not including the questions). Submit your journal to the appropriate dropbox (Simulation Reflection Journal) by **Saturday June 28, 2025 at 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.

[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.]

- During this experience I assisted the assessment nurse in following CIWA scale protocols. I was in the second half of the simulation after morning medications were administered. So, after assessing the patient following the CIWA scale we determined her scale to be 34, which indicated that she needed lorazepam 4mg PO to be administered. Then to reevaluate her in 30 minutes to one hour following CIWA. Her heart rate, respiratory rate, and blood pressure we determined to be appropriate prior to and following administration of the medications. 99, 14, and 148/86. I feel that my response was appropriate because we utilized the protocol as well as communicated with each other as well as the patient on the procedure.
- Describe your communication with your patient; was it therapeutic and professional? Provide one example of how you connected with your patient.
  - My communication with the patient was minimal, however when I educated her on the medications I was administering, I used therapeutic communication. Patients

going through withdrawal and mental health issues can be paranoid, so explaining the medication thoroughly including side effects, and educating on her letting us know if something feels wrong is very important in creating rapport and a trusting relationship between me and the patient. I also added input with the assessment nurse's communication; she educated on the importance of utilizing programs and services in the area. Including AA, Sandusky artisans, and the use of counselors or therapists. My input was that counselors are beneficial to everyone, including those with recent losses and those battling substance use issues. These services are given to those on 1 South to reach long term goals of sobriety.

- 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 the healthcare provider, case management, pharmacy, etc.).
  - During this scenario I communicated with the assessment nurse on the best course of action for medications, vitals, and communication. After assessing the patient's CIWA score I was able to communicate with her and correctly follow the protocol for the administration of lorazepam. Vital signs are also important in the administration of lorazepam because of the relaxing sedative effects, knowing her respirations, SP02 on room air, heart rate, and blood pressure verified I could administer the medication. We also were both able to collaborate on services that would be beneficial for the patient while on 1 South, as well as following discharge.
  
- Discuss one example of your communication that could use improvement. What did you say? How would you reword this statement? Be Specific.
  - For the patient I did stumble over my words at some points and this is something that happens when I get nervous. I also wish that I had more to communicate with her about. At one point she was on top of the bed, which is a major fall risk, so I asked her to sit down. I don't remember my exact words but being flustered I do not think I used proper therapeutic techniques. I want to work more on my patient communication to be better prepared for moments like these.

**Reflecting:**

- Describe one teaching need that you identified or implemented. What was the patient's response to that teaching need?
  - We educated on services on the unit and off the unit to address her alcohol use as well as services to help her grieve the loss of her friend. Her response for most of the scenario was to explain that she does not drink at all, that she does not go to the clubs or bars. During the scenario she sometimes would say she still went out to the same places her and her friend went to, that was something they used to do together. She at

times seemed receptive to the teaching, others she would deny she needed help with her drinking. She did seem interested in communicating with counselors during her stay on the unit, however.

- How did your expectations change as the simulation progressed? How did you adjust your nursing care to these new expectations?
  - Knowing the timeline from when she stopped drinking, and the second half of the scenario 4 hours later I knew her withdrawal symptoms were going to start having more of an effect on her. For this simulation, I figured she might have a slight change in vital signs and possibly mental status within the 4 hours. The change in condition occurred because of the detoxification taking place. I adjusted my care into communicating with the patient, administering lorazepam and trying to assist the patient in relaxing and educating on services available for grief counselling and AA.
- Write a detailed narrative nurse’s note based on your role in the scenario.

The screenshot shows a software interface for writing nursing notes. At the top, there are navigation tabs: Nursing (selected), Flow Sheets, Provider, Labs & Diagnostics, MAR, Collaborative Care, and Other. Below the tabs is a header labeled "NURSING NOTE". The main content area is a table with two columns: "Date" and "Text".

NURSING NOTE	
Date January 11, 2025	<b>Example:</b> Patient complains of pain in the right foot rating it a 5 on a 1-10 scale that is achy and radiates to the lower calf. Patient reports heat and medication have helped relieve the pain. Ibuprofen administered as ordered for pain. Right foot elevated on a pillow and a K-pad placed over the area. Patient reminded to use call light if pain does not improve or worsens over time. Call light placed within reach. Will reevaluate in an hour to determine effectiveness of interventions.

The screenshot shows the same software interface as above, but with a student's entry in the "Date" and "Text" fields.

NURSING NOTE	
Date June 26, 2025	Patient was assessed following CIWA scale protocol. Score 34, 4mg of PO lorazepam (Ativan) administered. Patient denies pain and nausea at this time. Educated on medication and services for grief counseling and alcohol abuse. Patient reminded to use the call light. Call light placed within reach. Will reevaluate in an hour following CIWA scale protocol.

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

- I hope that in the future that I have more experience communicating with patients that are experiencing withdrawal symptoms. I was not able to communicate much during this experience, but the little I did I felt flustered and did not feel like my communication was therapeutic. For doing medications, I helped the assessment nurse in assessing/ using the CIWA scale as well as following protocol for medications required/ordered.
- 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? Explain.



Before: Ready to get this simulation done. No matter how hard you try to prepare for simulation, you are always terrified. No amount of book reading and videos prepares me.



During: My face in the simulation when I saw Lucy standing on the bed. If she falls do, we fail the simulation lol.



After: Thank goodness, I can go home and hop into bed. Ready to get back to the grind and study hard this weekend for the busy Monday coming.