

Clinic Observation

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Observation

Observation in the clinic included a nurse administered a depo-provera birth control shot. The Nurse's role included reading the doctor's orders and evaluating if the orders were appropriate, confirming orders with the patient and effectively administering the depo-provera shot according to CDC guidelines. The nurse is also required to answer any questions the patient might have, hand printed drug information to the patient, and document the shot administration.

The nurse's role applied to empowering the individual as the patient got to decide which birth control method she was interested in, and the patient was satisfied in the effectiveness and maintenance of the birth control method. The patient is educated by the nurse regarding her care which is empowering. The patient did not want to be pregnant within this next year and was interested in the depo-provera shot. Specific patient considerations include that the patient is a firefighter and works 48 hour shifts. Birth control that is reliable and easy to maintain is important for this patient. Depo-provera is a method of birth control that empowers the individual to be in control of her body even with a busy and hectic schedule. Patient left educated about when her next appointment would be required for her birth control maintenance which is empowering because one short shot appointment once every 3 months is easier to facilitate than remembering to take the pill at the same time every day.

The nurse checked the orders the doctor gave for her patient. The patient had been here before and was coming in for a shot of depo-provera which she had had in the past as well. The patient checked in at the front first. Then the patient came into the office where she told the nurse her name and date of birth. Her height, weight and vitals were taken. The patient confirmed she was here for another dose of depo-provera. The patient was educated on the effectiveness of Depo-Provera (6% failure rate), does not protect against STIs, and she should come back for

another shot in 3 months (Ricci et al., 2021). Printed information was provided to the patient.

The patient was informed that the shot would be in the ventrogluteal site. The nurse landmarked the injection site by the iliac crest and the greater trochanter using her index and middle finger in a “v” shape to outline the injection site. This is the correct method to locate the ventrogluteal injection site (Ricci et al., 2021). The nurse’s hands were washed, gloved before using alcohol to cleanse the site and the needle was 22 gauge inserted about an inch deep into the muscle layer. The nurse did this to properly avoid infection as well as effectively administer the medication to the muscle layers (Ricci et al., 2021). The nurse recommended the patient call to report any side effects to the number listed on the information handout as well as call the office if she experiences excessive pain, soreness, fever or heat in the injection site. The nurse also recommended that the patient call back to schedule another shot appointment in 3 months closer to when the patient’s schedule is known. This was done to maintain the effectiveness in the birth control method.

References

Ricci, S., Kyle, T., & Carman, S. (2021). *Maternity and pediatric nursing (4th ed)*. Wolters Kluwer.