

N431 Adult Health II

Clinical Reflection Form #2

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Clinical Rotation Site: CT7 CCU

1. Briefly write about today's experience(s)

In the CCU, I followed a wonderful nurse, Alexis, who walked me step-by-step through everything we did and explained why it was done in that way. We cared for a 73-year-old male who was in the CCU under sedation, on a ventilator, and CRRT for an acute kidney infection. It was suspected that this patient had gotten the AKI from his body going into shock from a recent bowel resection. During the time at clinical rotations, I was able to assist with oral care, rotate the patient, administer Protonix, check the patient's blood glucose every hour and adjust the insulin medication accordingly (with a dual sign-off from the nurse), help switch the CRRT bags, and help check every drain output every hour. The surgical team came in to assess the patient's laparotomy but was concerned to close it due to severe swelling of the body. The surgical team decided to wait until 2/28 to try and close the peritoneal cavity. For the rest of the day, it was determined to continue ventilation and try and reduce the body's fluid (without throwing off the patient's blood pressure – he was on a vasopressor medication).

Along with all of the medical side of things, I got to experience what the CCU does during active tornado warnings. Since the tornado sirens kept going off and many of the patients are hooked up to way too many wires and machines to move into the hallway, Carle's protocol is just to close all of the blinds in every room to protect the patient from any potential broken glass or flying debris, and we were to close the doors to every room. I felt that this wasn't going to protect the patient very much, but I understand that due to all of the equipment, it was not possible to move every patient into the hallway.

2. What is one thing you learned?

Overall, even though we only had one patient, we were kept busy. I was worried going into this experience that I was not going to be doing much other than sitting around, but this was not the case. I was constantly moving and doing stuff to care for the patient and make sure that he was taken care of and as comfortable as possible.

3. What is one thing you would do differently?

Next time, I feel like I would like to do a little more hands-on nursing care. Even though I was able to assist with oral care, medication administration, and rotating the patient, I felt that I was more reserved and let Alexis, RN, take control and just walk me through everything by demonstrating. I feel like next time, I would ask her or another nurse to walk me through the process as I am doing it, so I can get both a hands-on and listening experience rather than just a demonstration. I understand that due to the critical state of some of these patients, that it is not always possible for me to do everything, but it would never hurt to ask just to see if it was possible, as this is how I learn the best.

4. What is your major “take home” from today’s clinical experience(s)?

I feel like there are a lot of little details that CCU nurses have to consider, that many other nurses who are not trained in this area would overlook and potentially put the patient more at risk for more serious complications. I now realize that CCU nurses must depend a lot on observational skills to better help their patients get better, as many of them are sedated and aren’t able to tell them what is wrong or what hurts.

5. Is there anything else you would like to mention?

Alexis is a wonderful nurse who recently graduated from Parkland. She explained everything to me in detail because she said she “understands what it’s like to be a nursing student and how intimidating it can be to be in a clinical setting with a nurse who doesn’t seem to want students around.” I feel that she went above and beyond for both me as her student and for her patient. She would talk to the patient and treat him with respect, even though he was under sedation because he is still a person and a patient. She seems to truly care about what she does and for her patients.