N431 Adult Health II

Clinical Reflection Form

Name: Rancey Rouse Date: 06/17/2023

Clinical Rotation Site: OSF-ICU

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

Today, I watched the charge nurse and observed the various roles in this position. I observed how nursing in the critical care unit (CCU) differs from other units in the hospital that I have previously been to. I was able to help provide care for a patient that came down with atrial fibrillation with supraventricular tachycardia. I administered digoxin twice and witnessed his heart rhythm return to normal sinus with pre-ventricular contractions. The patient's heart rate ranged from 140-180 and higher and returned to normal after the second dose of digoxin. The patient stated he did not feel any palpitations and felt normal, which was interesting. I also watched the charge nurse insert an intravenous catheter using an ultrasound machine with the help of the CCU provider.

2. **What is one thing you learned?**

I learned digoxin push time and how to give a long push time. I watched an admission process on this unit and how different it is from other nursing units. I also witnessed that when the heart rate was high, the blood pressure was low due to compensation. Once the heart rate returned to normal, the blood pressure rose. We have learned about the body's ability to help compensate in class, but witnessing it helps apply the information and further grasp the content.

3. **What is one thing you would do differently?**

When preparing to administer digoxin, she added it to a flush instead of drawing the medication into an empty syringe. She also did this without holding it upside down, and this scared me personally because I would be afraid of some of the flush (normal saline) getting into the medication vial and not having the correct amount. Also, I had asked about asking the patient about history, and she said they do not worry about things like that in this unit. I understand that the patient may often be unable to say their history or have time. However, in a situation like this, and if not busy, a patient's history can always help to assess further the situation to help determine the cause. The priority is always to get the patient in a stable condition, but after history can be important to know what else is going on in the body and causing labs to be abnormal and to help find the cause of the condition being treated.

4. **What is your major "take home" from today's clinical experience(s)?**

A significant take home from today's clinical experience is how essential teamwork is in nursing. All nursing units require teamwork, especially the critical care unit. The nurses announce everything that's going on with their patients so that each nurse is aware of the situation because they all help each other. This helps provide better care in situations where the patient's nurse is not around in an emergency. Everyone else knows the patient's condition and interventions for the patient. Nurses can be very busy sometimes, and being a charge nurse holds more responsibility. It was a wonderful experience watching and learning from Ramona and seeing how she does things with notes and remains calm throughout the shift.

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

After experiencing critical care, this is where I would want to work. I like how small the unit is to keep an eye on patients, how close the nurses are, and work together. I would love to be able to go there again for clinical. I am better at multitasking and focusing on many things while keeping busy rather than being slow and overthinking. Ramona was a great nurse to follow. She is very knowledgeable and knows the why to my questions, which helps me learn.