

N431 Adult Health II

Clinical Reflection Form

Name: Kaylee Andersen

Date: 03/07/25

Clinical Rotation Site: Critical Care Unit (3rd Floor)

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

- a. I was happy that I was able to stay in CCU. It was very educational with how complex most of the patients are. With my one patient, he had a lot of heart issues with retaining fluid around his heart and lungs. He ended up getting transported to a hospital in Peoria because it was a higher level of care, and if they needed to do surgery to drain the fluids, that hospital would have been able to. At this time, Danville does not have anyone to perform the complex surgery. My other patient had COPD, and seeing how depressed he was about his health condition was eye-opening. All I wanted to do was to give him a hug, but I was learning how/what to ask in situations like that. Lastly, the third patient was admitted for influenza. We did not really do much with her, but she was there because of the impact the influenza virus had on her respiratory system. She was very short of breath when I helped her to the bathroom. It's crazy how everyone reacts differently to the virus and how much it can impact a patient.

2. What is one thing you learned?

- a. This is hard to choose one thing I learned because I learned a lot. If I had to choose one, it would be what hypoplastic left heart syndrome was. It was the whole left side of the heart did not develop enough to function properly. Regarding my patient, his left ventricle was not developed, which led to the oxygenated/deoxygenated blood mixing.

3. What is one thing you would do differently?

- a. One thing I would have done differently is to do more chart reviewing in the downtime. I did a lot of reviewing the patients who had heart issues, but I did not really look at the other two patients. I was just so fascinated with the heart issues.

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

- a. The takeaway from today is that someone's level of consciousness can change rapidly each time the nurse is in the room. At one point, my patient was A/O x4 and having a full conversation, and the next time, he was not able to stay awake or sign a paper for transport to Peoria Hospital. The nurse stated that there could have been a factor that was causing the in/out of consciousness, Rather, it could been his oxygen levels or the air/fluid that was built up around his heart and lungs.

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

- a. There really is nothing else to mention. I enjoyed my rotation at CCU. I kind of wished that there was a little more to do, but it's okay to have a quiet night.