

N321 Adult Health I

Clinical Reflection Form

Name: Tayelor Lowe

Date: April 15, 2025

End of clinical Journal

1. Briefly write about your experience(s)

- I would say that I had a pretty solid semester. I got to practice lots of skills, such as inserting IVs and passing medications. Because OSF is a smaller hospital, I was exposed to much more illnesses and diseases, such as encephalopathy. However, OSF does lack a lot of resources, which is a little disappointing.

2. What are things you learned?

- I learned to try and jump in whenever opportunities are available. I also learned that Foley catheters and, just yesterday, learned that IVs, are a struggle for me. I am fine and feel great until the patient starts to say “Owe” and then I feel super lightheaded and as if I am going to pass out. I am continuing to work through this though by watching every IV insertion possible and watching every foley catheter insertion possible too. I am coping through exposure therapy- ha-ha. I will say though, it is super frustrating that I feel this way because the process doesn’t freak me out. I think it is more of a mental thing when I think about how uncomfortable this must be for the patient. I am getting a job as a tech, so I am hoping this will help me tremendously come this fall.

3. What are things you would do differently?

- While the last couple of clinical days I jumped in to do IVs, I wish I jumped in earlier. I was afraid, but I had to be honest with myself. Being afraid means no learning and that cannot happen in this career or especially in the position I am in as a student. I also learned that I need to put forth more work regarding my care plans. I thought I was doing well on them, but apparently not. I will need to put forth much effort next semester.

4. What is your major “take home” from clinical experience(s)?
 - Do not be afraid to mess up. Listen to the advice from the other nurses. Take these opportunities seriously. Just jump in there, even if you are afraid.

5. Explain how you meet the course outcomes

Utilize clinical judgment to begin prioritizing nursing actions that promote positive patient outcomes.

- I met this outcome by constantly reminding myself of the ABCs. One way I used my clinical judgment was to always monitor my patients. I would get patients who would have these coughing fits and their O2 would drop, or they would be laying down and their O2 would drop. The first thing I would do was go in there and set them up. I am always trying to assess my patients and see what they need in that moment.

Apply pathophysiology to provide safe, evidence-based nursing care to patients with common acute and common health conditions.

- The care plans forced me to dive deeper into the pathophysiology of my patients. I was able to take what I learned from them and apply them to my patients. For example, I had a patient this semester who had encephalopathy because her assisted living facility gave her too much of her own medication, as well as someone else’s medication. Because I had never seen something like that, I did not know her plan of care upon initial assessment. I was able to learn more about how to handle this situation by looking up the patho, talking to the health care team, and reading her chart.

Describe culturally competent care to adults by discussing care and empathy during interactions with all patients, families, and significant others.

- Since we live in Danville, we do not often see diversity- either I religion, cultural differences, or races. I did not have a patient who was necessarily culturally different than me. However, I did see many different types of patients- men, women, black, white, tall, short. I always treated them like humans. It is their choice regarding their personal plan of care.

Differentiate appropriate communication skills and professional behaviors in interactions with patients, nursing team members, and the interdisciplinary healthcare team.

- This has always been a strong suit for me. If I noticed anything slightly off, either with someone's respirations or the way that some would cut corners and I would intervene, I would always tell the nurse, even if the little things were not a big deal.

Provide patient education to promote health and prevent illness.

- I met this outcome. For one, I was able to teach a patient about hypertension, how to lower it, and the risk factors/side effects. I was also able to have a conversation with someone in the emergency room about quitting meth. He did say he was not going to do it again. Even though I highly doubt that, it still makes me feel good inside.

Perform intermediate nursing psychomotor skills for safe, quality patient care.

- I made sure to get help if I needed to dress a patient for the safety of them and myself. I made sure to always do the little things like sitting with them and talking or cleaning their room for them. It is the little things like that, that make me happy.