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My greatest challenge at my clinical was assessing my patient who was in excruciating pain. At first, she did not want me to assess her, and after utilizing therapeutic communication I was able to cultivate a space for her to feel more open to the assessment I had to complete on her. While I was able to gain her trust by listening to her frustrations and validating her experience, it was still a challenge for me to find the right time to assess her. When I would go to check up on her she would be eating, with a doctor or PCA and the last time I checked on her she had visitors who stayed for the entirety of my clinical time. A bioethical concern that I had was the lack of availability of anti-microbial wipes for completing blood pressure because without the wipes there is risk for spread of infection and can cause a health care provider who is rushing to possibly not prioritize the cleanliness of the blood pressure equipment. My greatest accomplishment was creating a relationship with my patient who was very upset and reluctant when I first came in to introduce myself. In making her feel comfortable and seen I was able to complete her blood pressure and her patient interview without any difficulty. This is an accomplishment because when patient is in excruciating pain it is often difficult to get them to communicate with them without a challenge.

I demonstrated my technical skills by demonstrating my knowledge of the head-to-toe assessment and bed making. I did miss a few areas in the assessment, and I was still able to perform well with majority of the areas of the assessment. I forgot to assess the back of the ears for if the patient had any lesions or pressure sores. I demonstrated planning and intervention of cultural, holistic competent care for my patient while considering their perception of health and illness by connected with her through our belief of God. We prayed together for her health, and I told her I would keep her in my prayers since we both share the belief that prayers can be a part of recovery from health problems. I demonstrated interpersonal communication skills with an interdisciplinary healthcare team by communicating my patients status to my nurse, and by asking her ways that it could make it easier while working with my patient. The nurse gave me helpful advice, and even went into the room with me to show me the ways she can complete her tasks in the difficult circumstances of working with a patient with severe pain. I demonstrated interpersonal skills with my classmates and instructor by ensuring to communicate any tasks our instructor wanted us to complete, and I ensured to consistently keep my instructor in the loop so she would know about my progress without having to search for me.

“The end of something is better than its beginning. Patience is better than pride.”
Ecclesiastes 7:8. This bible verse carried me during my clinical rotation because I was still overcome with emotion from the previous day of not doing well on my exam, and this verse gave me hope and faith. It reminded me to continue trusting in God’s plan and to be patient with it, so that I may be present during my clinical rotation and extend patience to the patient who was upset and in pain. I showed initiative to pray by praying with her when she asked if I would pray with her and for her, in this way I also demonstrated a willingness to care for culturally diverse patients. This clinical experience was a great learning experience.