

Starting off the day I was horrified to enter a room with a patient and have to interact with them. Luckily, this did not last long as we jumped right in to making the beds in various rooms. I was able to make three separate beds, and this allowed for me to see various patients and begin to feel okay walking into the rooms and interacting with these people. I felt overwhelmed by meditech and all of the various tabs and portals that you could go to. Eventually, it all began to make sense as to where I needed to navigate to in order to chart or see various things for a patient.

Something that comforted me as I worked throughout the day was the feedback that the patients would give. They were very open and blunt about things that they needed and what they did not need. I felt comforted because in on campus clinical we worked with mannequins that had no emotion and gave no verbal/nonverbal feedback to something you do. Like when I made a bed some would say whether or not they thought it looked good and that boosted my confidence and competence in the task. In a different situation I was doing a skin assessment and was told where I could not touch the patient's skin due to injury. This comforted me because then I knew that I would not be hurting the patient while performing an assessment.

When doing the accucheck I learned that you have to apply more pressure than I originally thought to get the needle to puncture the skin. Otherwise, you have to really milk their finger in order to get the blood to flow out. Another task that I had to learn how to trouble shoot was taking the patient's respiration while they are being checked by the dynamap.

Recently in Clinical Applications we learned how to change a wound dressing wet to dry and luckily the RN on duty was able to show me what it's like to change one. It is nice to see something that you learned in class in practice soon after learning it because it helps solidify the various things that we were taught about keeping a sterile field. I thought it was interesting how they did not seem to do the formal set up that we learned in class and that sterile gloves were not used. Again, it was nice to see how the patient reacted to the dressing because a mannequin showed no emotion, nor could the mannequin help with the dressing like the patient could.

I think that the day was successful and that although there are many things that I did not do to perfection. I now know what I can do to perform these tasks in a more perfect manner that will feel less awkward for me and the patient.