

Nursing reflection



Running Head: REGISTERED NURSE BECOMES A POSTOPERATIVE

PATIENT. Nurse Becomes Postoperative Patient Insert Here Here The obese nurse with a history of depression observed that she is a patient in her hospital and no one seems to care about her as a patient. She concluded this when she realized her poor postoperative nursing care: “ No one has done an assessment, diagnosis, planning, intervention, nor outcome evaluation?” “ Why am I in tears? “ Doesn’t anyone care if I am in pain following surgery, my IV infiltrated or I have wet my adult underwear?” “ Haven’t they read my patient chart to find out what my pre-surgical health status was? What kind of surgery I had? And, if I will be going home later today?” “ Are they aware of complications that may occur in these limited hours? And, they may have to admit me to the hospital if complications arise?” “ I am in tears?” I bet they think it is my depression. I cannot talk because I am still on the ventilation machine. “ Can’t they have me write my needs down on a piece of paper?” Okay, perhaps me writing will not work with the IVs in my arms.” But, have not they heard of asking ‘ Yes’ or ‘ No’ questions with one blink of the eye lids for ‘ yes’ and two blinks of the eye lids for ‘ no’. “ What am I going to do?” They zing in and out of my room faster than a honeybird. While most agree that there is a nursing shortage and nurses are at their wits end for delivering patient care, it is imperative that nurses use the basic rules in providing quality nursing care especially in the critical postoperative nursing care.

Nurse Becomes Postoperative Patient

According to Surgery Encyclopedia: Postoperative Care (11/16/2008), postoperative care is management of a patient after surgery. Our nursing patient has many issues and she should. Presuming there is a Post

Anesthesia Care Unit (PACU), how long did she stay there and did she have any complications?

She knows the goal of the postoperative nursing staff is to prevent complications within the first twenty-four hours. How can they do this? When she arrives to the area the nursing staff should do an assessment, diagnosis, planning, intervention and outcome evaluation, this sounds similar to SOAPIE with a couple of modifications. However, when you do your assessment, it would be advantageous to quote her on how she feels postoperatively including why she is crying. Did she feel pain during surgery? Remember that when you chart. On a scale from 1-10, one she is in awful pain and ten feeling no pain. How does she rate? Is she too sedated? Is she on a patient-controlled analgesia pump? Perhaps, you will have to put time in your schedule to assess her pain level and push the button to deliver her pain medication. Including, find out from her if she had same day surgery. Alternatively, read her chart. Who would not be crying, if they were suppose to go home that day. She could be beneficial assisting the postoperative nursing staff in meeting their goal. It is essential to include her in her care.

References

Postoperative Care. (n. d.) In Surgery Encyclopedia online. Retrieved November 16, 2008, from <http://www.surgeryencyclopedia.com/Pa-St/Postoperative...>