1.  Prior to reporting to the clinical area, write down your own personal learning objective (s) for the day.

2.  At the end of your clinical day, reflect on your experiences.

3.  Explain if you were or were not able to meet your personal learning objective (s).

4.  Describe what you would do the same or differently to ensure you meet your objective during the next clinical experience.

Clinical Day 1

1. Learning Objective: definition of leadership and roles in the work setting as a student and as a nurse; learning about how the assigned unit works and the importance of the unit as part of the hospital
2. During the first clinical day, the nurse manager was able to quickly introduce me to the pace and general responsibilities of his job. I was surprised that he didn’t directly work with patients but with the staff of the OR and ASU. The unit, being an ambulatory care clinic, was very similar to my own job setting where understanding how to prioritize was essential to running the office. The nurse manager explained to me how leadership works in such a way that he must be able to distribute work and break times efficiently. That way, everyone can get things done on time without complaints, all while maintaining patient safety and satisfaction.
3. I think the first day went by very fast because when I arrived, the manager was in the middle of conferences and scheduling. Although he was able to generally introduce me to the unit, there were a lot of things I had to get used to, such as the color coding on the schedules. But I understood his explanation of his role as a leader in the position because of how the flow of patients goes; basically, the manager oversees his team which is made of all the staff in the unit. He ensures that people are able to get the break time and lunch time, which is important being a “union hospital”.
4. At the next clinical I think I should spend more time following the manager’s calls and see how he deals with problems that arise. When sitting at the desk, it was overwhelming because at some point it could be very quiet and then suddenly six people are there with problems and everyone is standing and talking at the same time. Not to mention the calls that comes up at the most convenient time.

Clinical Day 2

1. Learning objective: learn about the types of priorities that should be addressed at the unit (which ones should be dealt with first); review hospital handbook and patient safety management
2. Today at clinical, I think I was able to get used to the pace more because I was able to spend more time at the desk. The manager said he was in charge of scheduling again, meaning he was responsible for handing tasks and assignments to all the nurses and pairing up with surgeons for the scheduled procedures the next day. What was similar to my job was that at the end of the day, we also had to print out a finalized copy of the schedules for the following day to ensure that everything runs smoothly when the patients arrive. In addition, we also had to keep in mind how to fit the schedules to prevent any emergencies in case timing goes wrong or something happens. Also, there was a problem with the equipment in one of the Ors that lead to extremely weird EKG readings (PVCs, PACs, rapid fluctuation of heart rates) on five consecutive patients and a few physicians began arguing and raising their voices with each other. The manager demonstrated quick ability to appease the tension and figure out what to do next in the shortest time possible; I felt like I was watching a TV drama.
3. I definitely understood how the manager dealt with the problems that came up so my goals were basically met; first, any issues pertaining to patient safety were definitely a priority. Then, the manager mentioned that breaks and lunch times were probably the next important thing because he mentioned again that in a union hospital, the staff happiness is a big area to keep in mind. Today, he had sent everyone out to lunch but at 2pm, he was still trying to find someone to cover for himself while he took lunch break. I think it was very selfless of him to do that. I find myself doing that at work too, because I think putting people first is a not only a good leadership quality but a human quality in general.
4. I think during the next time, I would try to see if I could get a tour of the OR and attend some conferences. Also, I asked the manager when would be a good time to witness some chaos and he said at the beginning of the shift. That would mean arriving at 7am but I will try it.

Clinical Day 3

1. Objective: to understand how the dynamics of the unit is (i.e., how teams are made or how teams work together); continue hospital handbook review
2. My experience at clinical was different because my manager had some paperwork to do so I got the opportunity to shadow an OR nurse. In the OR, I followed a circulating nurse during a TAH procedure; I observed that her position in the team is somewhat like a leader in that she must be responsible for what the scrub nurse counts before, during, and after the procedure. In addition, she had to tend to the technical problems during the procedure to prevent any discrepancies and finally confirm the sponge and equipment counts at the end. The experience was very interesting and taught me a lot about how the OR works in real life as compared to how it is depicted in textbooks.
3. I think my objective was met but not as a nurse manager. Instead, I experienced a teamwork dynamic in the OR that requires good teamwork as much as the whole Ambulatory surgery unit.
4. For the next clinical day, I think I would like to see how the manager handles scheduling of his staff, especially how he prioritizes break and lunch times. I think I would also like to try the OR experience again.

Clinical Day 4

1. Clinical objective: try to pick up the phone to help out at the desk; manage schedules and sort break times
2. My nurse manager asked me if I wanted to follow him or go to the OR again. I didn’t really want go to the OR room because the room felt too cold to stay for an extended period of time. I followed my manager for a bit but he had to do more paperwork so he took me on brief tour of the OR on the 5th floor. I learned that different procedures were divided among the 5th floor unit, such as neuro, cardiac, robotics, and orthopedics. I was introduced to many different advanced technologies on the floor, such as minimally-invasive methods of heart valve replacement procedures. The control room that is connected to the one of the surgical rooms was very warm and I wanted to stay there. But then I saw there were robotic surgeries scheduled for today so I got a scrub jacket and asked my manager to let me shadow a circulating nurse for a robotics surgery. I got lucky today because I was able to witness the end of a robot-assisted colectomy procedure, then after lunch, the start of the same type of procedure too. There was something about the singed scent of skin that made my stomach churn but I’m glad I was able to keep my lunch from coming out of my throat. The scrub nurse let me help her tie her gown and taught me how to set up the sterile field in preparation for the surgery. It was too bad I hadn’t seen this procedure prior to writing a paper on the technological advancements of nursing because I would have definitely written about the robot. Either way, it was a very valuable experience because I got a front row seat of a very impressive set up and procedure.
3. I think my goal was met because halfway through the colectomy procedure, there was a phone call and the circulating nurse told me to pick it up because she was too far from the phone. Even though I didn’t know what the person was saying and the nurse had to come across the room to pick up the phone herself, I think it still counted.
4. For the next clinical experience, I think I want to follow a nurse in orthosurgery because I want to wear the special helmet they use for orthosurgery. If my nurse manager is there tomorrow (he was unsure of his schedule because he has jury duty), he also promised to take me to some scheduled meetings, which I have not been at so far, so my day will be busy tomorrow. If my nurse manager is not there, I think I will go to the unit next door and shadow a nurse there with my colleague because I am interested in radiology too.

Clinical Day 5

1. Clinical Objective: help out around front desk; learn the flow of staffing and how the manager handles shifts and sick calls
2. It was very busy as usual when I arrived on the unit; the manger put me into one of the OR rooms to shadow a circulating nurse again because he was too busy. I went to follow a breast implant surgery and the nurse let me help them scrub in for the procedure. After the procedure, I saw the nurse manager doing paperworks and he explained that he was filing for an employee warning notice. What happened was that there was an OR nurse who had a repeated misconduct, and she was involved in incorrect specimen handling and labeling. This is a serious problem because her actions affected the transfer time for the specimen to leave the OR room and reach the labs, delaying diagnoses and follow up for the patient. The manager explained to me that it was her second offense. During the first reprimand, she had been warned that if she were to make the mistake again, she would have to deal with serious consequences and be suspended for a time period. The manager explained that it was also his responsibility to write up the regulations for her and determine the duration for which she will be suspended for. I missed the manager’s phone call with the head of the department about the situation because I was in the OR but the manager said they had agreed on basically what he told me.

After lunch, I was sent to follow a circulating nurse again and watched/helped the scrub nurse open packs and prepare the room. The surgeon brought three ‘students’ with her, who were there for “educational purposes”. One of them was a recent graduate from med school in Burma; however, she was actually part of a volunteer program that Maimonides contracted with and she not part of any formal program. In addition, her volunteer period actually ended for a month now, but was able extend the contract because the surgeon vouched for her. When they were introducing themselves to the room and the Burma doctor mentioned it, the circulating nurse spoke up and questioned whether she had obtained proper permission from the manager. The surgeon tried to dismiss the circulating nurse but the nurse insisted that the Burma doctor have a talk with my nurse manager before proceeding. The surgeon took the Burma doctor outside and they took a good 40 minutes before coming back into the room. Meanwhile, the anesthesiologist prepared the patient for a good sleep. When the surgeon came back, the situation was cleared with administration and the procedure finally began. After the procedure, I asked my nurse manager about the problem and he explained that it was very professional for the circulating nurse to speak up because it could jeopardize the patient’s safety if we had let it proceed with just the words of the surgeon. The manager had to reach out to the volunteer program supervisor, who had to review her paperwork before finally allowing the doctor to participate. The manager explained that a few months ago, a similar incident happened in the L&D hall at the main hospital, where a high school student who was part of one of the volunteer programs had scrubbed in for a surgery because he was an acquaintance of a surgeon there. However, this person was not trained and should not have been allowed to scrub in.

1. My goal wasn’t met today but I was able to experience different problems that occurred and the manager taught me how he handled those situations. I think during these times when people are uncertain, they always refer to the managers for help, which is where the critical role of a leader comes into play in teamwork.
2. Well, because of the growing pandemic of the COVID-19, I don’t know where we will be the following week. If we can come into clinical, I hope I can finally get a chance back upstairs at the 5th floor OR for the orthosurgery experience because the circulating nurse I followed today said she can help me see the schedule for the following Tuesday since she normally works upstairs and only had to come fill in spots in the 1st floor unit because they were short-staffed.