

Nutrition_Clinical SEL Competency 2.2 and reflection

For this competency, I took the first week to learn the SOP and how each dietitian operated within their own floor. Within these operations, they had a unique way of assessing malnutrition, wounds, length of stay and low BMI for age. After I grasp how they operated I developed my own screening tools that aligned with the hospital. The assessment for malnutrition varied and many would only check a few areas of the body along with using malnutrition charts and imaging to properly assess. I used these same tools along with talking with family and the patient themselves to gather more in-depth information. However, for wounds I aligned with about half of the dietitians when it came to wound assessment and care. Many of the dietitians were reluctant to give Juven to patients depending on their specific circumstance and I aligned with this idea. I would try like the others, to ensure that the nutrition aspect was fulfilled first then supplement after, but many would supplement first. The next subject was length of stay, and this was pretty straight forward but the time frame would vary based on the number of patients seen that day. I would try to lower the time frame to allow myself more hands-on experience with patients who are within the SOP time frame or had conditions that would warrant a initial visit. I would always relay this to the dietitian I was working with to talk through the process to ensure that these patients warranted a visit. Finally, BMI for age, and because most of the patients within this setting wad over 65, we did the same as with length of stay. If we had limited patients that day or week, we would try to see more patients who may be borderline on the criteria. Given all these aspects, I ensured that I came in every day before my preceptor and found all patients who fit that criteria for the day and prescreened and created a list that I could see. I would then review the entire list with the preceptor, and they would choose the appropriate patients for me.

Reflection

While most of my SELs, I worked with 1-3 preceptor per site, but this SEL gave me an chance to experience a wide array of views from 8 different preceptors. At Northwestern, they had a SOP for all these criteria, but each dietitian had their own approach, and this helped me develop me own as well. This experience helped me further develop the idea of variability in thinking when working with patients. I really enjoyed shadowing and working with the different dietitians because some have been doing it for 20 plus years, while others just started working just a few months, but all gave me valuable insight. Something interesting I learned from the overall experience was how variable these applications can be with each patient and while we may have read and done these practices during our course work, the only way to truly refine this practice is with repetition with actual patients. I had to complete these assessments plenty of times with different populations and this developed my ability for my future career but also gave me an understanding of the conditions and environments factors that all come to play. I had some challenges with adopting and implementing these assessment tools. While shadowing the dietitians, because of the variability, I found it challenging to take each approach and stay within the scope while working with other dietitians. The other challenge I encountered, was trying to implement to assessment with the different patient populations and how at times it can be difficult to use Epic or the patient alone. I mention this because during some circumstances I wasn't not able to meet the patient and I had to assess with only using information that at times could be inaccurate on epic. This experience drastically improved my ability to assess what I need to improve upon for my future career, and while I still need to improve in this area, I thought it was a valuable lesson. I think future students, should try to aim if possible, to have more than one preceptor to have the same experience that I had. I have this opinion, because

while having one preceptor may give you more one on one time with them, getting a wide array of experiences or thought could help you build your foundation in nutrition and in general.