**Bone Pain in Cancer Patients**

Reem Boudali

Faculty of Nursing, University of Windsor

NURS3542-10

Professor Braco Topcagic

November 12, 2021

**Student statement:** By submitting this reflection, I am acknowledging that it is my own work. Comments are my own and have not been used in any previous work (inside or outside the institution). I have followed the rules outlined by my instructor and am compliant with the University of Windsor, St. Clair College, and/or Lambton College Academic Integrity Policy.

Student Name: Reem Boudali Student Number: 110007510 Date: November 12, 2021

|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | **Satisfactory** | **Unsatisfactory** | **Student Reflection (must be typed)** |
| **Look Back**  **(L)** | * Identifies **ONE** relevant clinical event/experience/ learning opportunity that was significant/impactful in one or two sentences. * Describes this **ONE** clinical event so that the reader can gain an understanding of what occurred. * Provides opinion/idea/perspective and feelings related to own. role/actions/performance in this clinical experience. | * Does not provide a clear and succinct description of ONE clinical event, experience or learning opportunity. * Does not provide own feelings related to the clinical experience. * Identified event, experience, or learning opportunity is not relevant to clinical practice. | On November 9, I cared for a patient with malignant bone pain. Throughout the shift, she expressed immense pain levels despite the administration of various pain medications. As the student nurse, I felt bad not being able to help relieve her pain other than helping her deep breathe and reposition to make breathing easier. |
| **Examine Experience**  **(E)** | * Selects a scholarly article that relates to this clinical experience (may use a CNO standard or BPG in addition to article, but not in lieu of an article). * Briefly summarizes key ideas/findings of the article. * Compares/contrasts own ideas/thoughts with those expressed by the author(s) with explanation. | * Does not incorporate a scholarly article. * Summary of the key ideas/findings of the article are not included.      * No explanation of the author’s ideas/thoughts compared/contrasted with own. | The article I found delves into the topic of bone pain in cancer patients. The author explains that bones are a common site for metastasis in cancer patients. They also note that there is no correlation between the site of metastasis and the level of pain patients experience; it is different for each patient (Zajączkowska et al., 2019). Another issue with bone cancer is breakthrough pain. Breakthrough pain is sudden, severe, acute pain that is separate from the constant cancer pain. Zajączkowska et al. (2019) note that the treatment for bone cancer is targeted at both the pain and prevention of future issues such as fractures. The analgesic-specific treatment includes non/opioid analgesics, bone-targeted therapies (NGF inhibitors; osteoclast inhibitors), and adjuvants (corticosteroids, anticonvulsants).  I completely agree with the point that pain is different for each patient, not just with bone cancer, but with any situation. Pain is subjective and has a different meaning for each person. |
| **Appraise**  **and**  **Analyse**  **(A)** | * Discusses at least **two** other people’s ideas/opinions/ perspectives that should be considered related to this clinical event (how might they feel: e.g. client, peer, family, other discipline, etc.).   **\*\***A reflection graded as ***excellent would also include the following:***   * Examines perspectives surrounding this event at the level of nursing in general, and/or society in general (e.g. impact on health care system/nursing profession, political, financial, cultural influences on Canadians). * Identifies how the event/situation challenged own perspective(s) and status quo (usual way of doing things). * Poses questions that should be considered due to their significance to nursing practice. | * No other perspectives are discussed. * Only one other perspective is discussed | Patients and their families may feel as though the patient is not receiving enough treatment in regard to the pain. Families do not want their loved one to be in pain and it can be frustrating when the current treatments due not cover the full extent of their pain. In addition, patients may be frustrated that their nurse does not do much when they express pain. I have many patients complain to me that they keep telling their nurse that they have pain, but never receive anything for relief.  From my experience, most nurses often downplay patient’s pain. They usually respond that the patient is confused (like in cases where the patient has dementia) or that the patient is drug-seeking. I have noticed this occur when the patient constantly complains of pain. While it is important to assess whether the claim is true or not, it is also important to remember that pain is subjective and what the patient says it is. It is unethical to assume what kind of pain the patient should be in based off their diagnosis.  Despite this, a major question that is often brought up in this discussion of pain medication is “how much is too much?” The issue of overmedicating patients is big and can make it difficult for providers to choose between reducing adverse medication effects and untreated pain. |
| **Research**  **and**  **Revision**  **(R)** | * Provides summary of learning from this clinical experience and from the article findings. * Identifies what they could have done differently in this clinical experience. | * Summary not provided * Does not identify what they could have changed about their own role/actions/performance in this clinical experience. | Overall, I learned that pain is a different experience for each patient and that treatment should involve both pharmacological and non-pharmacologic methods. On top of what I did in this clinical experience, I could have used more non-pharmacological pain treatments like distraction, music therapy, and guided imagery. |
| **New Perspective**  **(N)** | * Incorporates specific examples of how this new/enhanced knowledge will be implemented into future practice as a nurse. * Identifies a nursing resource(s) that will assist to develop this aspect of practice (e.g. identify a specific nursing textbook etc.). | * No specific examples for implementation into future practice are incorporated. * Does not identify a nursing resource to assist with learning | In the future, I will make sure to accurately assess my patient’s pain. In cases where the patient has immense breakthrough pain, such as with bone cancer, I will look into options like patient-controlled analgesia (PCA) to ensure the continuity of care.  One nursing resource that I can use to learn more about pain and treatments for pain is the Fundamentals of Nursing textbook. Pharmacological resources such as Lexicomp will also help to learn more about specific analgesics. |
| **Concept Identification** | * Identifies and describes key curricular concepts that influence the experience (minimum one in 1st year; two in 2nd year; three in 3rd year; minimum four in 4th year)   (critical thinking, know-based practice, evidence informed decision-making, health, teaching & learning, professional practice, communication, leadership, collaboration, safety, person family centered care, and informatics) | * Does not identify and/or describe related curricular concepts that relate to the experience/reflection. | Know-based practice – understanding the cause of the pain  Person-family centre care – listening to the patient’s concerns and acknowledge their pain, understanding that each person experiences pain differently |
| **References and APA Format** | * Scholarly article(s) and any additional resources (CNO, BPG) correctly cited in reflection in APA format. * Title page in correct APA format * Reference in correct APA format | * Incorrect APA format throughout reflection * Incorrect APA format on title page * Incorrect APA format for article(s) and/or other sources. | **Student Reference(s) in APA Format:**  Zajączkowska, R., Kocot-Kępska, M., Leppert, W., & Wordliczek, J. (2019). Bone pain in cancer patients: Mechanisms and current treatment. *International journal of molecular sciences*, *20*(23), 6047. https://doi.org/10.3390/ijms20236047 |
| **Grade:** | **□ Satisfactory □ Excellent** | **□ Unsatisfactory** |  |
|  |  |  |  |