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•	Sandars, J.	. The use of re	eflection in m	nedical educa	tion: AMEE (	Guide No. 44	. Medical

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#### Level 1: Non reflective-Habitual action

• Superficial descriptive writing. Fact reporting, vague impressions, without reflection.

#### Level 2: Non reflective-Thoughtful action

• Elaborated descriptive writing. Fact reporting, clear impressions, without reflection.

#### Level 3: Reflection

• Movement beyond descriptive writing to reflecting. Attempting to understand, question, or analyze the event.

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Who, what, and why? I was involved in a patient confrontation; an elderly patient was unhappy with hospital stay and wanted to be discharged home. She was under our general surgical team for a head injury and observation after normal CT head. She had been seen our ward round and told that she was medically fit for discharge but still awaiting social services: her house has been reviewed and deemed unsafe so she was waiting for banisters to be installed. The issue was raised with me by chance as I was doing other things on the ward. I explained this to her and although she remained annoyed I was able to make her understand what the delay was and she returned to her bedside. She did not seek further clarification that day.

**How did it make you feel?** At the time I felt rushed and frustrated. I had a lot of other work to be done and this was distracting from that. She had already been told she was waiting for social services in the morning. I understand why this was difficult for her but did not think I would be able to do anything to help.

**Why did it happen?** The morning round was quite rushed and so our explanation was limited to telling her we were waiting for social services. I can understand from her point of view this may have meant very little, and so my explanation of what exactly we were doing may have relieved some frustration. Having been waiting up to this point, it is no surprise she continued to be angry but may have been accepting of this plan.

What will you do differently in the future?

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