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Catherine Beachner

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Reflections on North Texas Ob-Gyn Internship

Catherine Beachner

University of Arkansas

For my honors project, I chose the experiential-based track through completion of an internship. I had the opportunity to work as a nurse intern at North Texas Ob-Gyn Associates, located in Lewisville, Texas, over the summer between the months of May to August 2019. This position proved to be a positive learning experience as I gained a better understanding of the roles of a nurse in the obstetric and gynecologic field and grew in my own abilities to work in a medical environment. In this essay, I will provide a description of my internship, overall analysis of my experience, and a patient case study.

North Texas Ob-Gyn Associates provides women's health services to women of all ages. The practice is made up of six physicians, one nurse practitioner, and one nurse midwife. The main office is located in Lewisville, Texas with another location in Flower Mound, Texas. I worked alongside Dr. Tovar, who co-founded the practice in 1980, and his nurse, Ms. Rice. Appointments begin with measurement of the patient's weight and a blood pressure by the nurse. In addition, all patients provide a urine sample upon arriving to the office. Information gathered during the patient interview with the nurse depends upon the reason for the visit. If it is an obstetric patient, the interview is focused on current symptoms related to pregnancy, their birth plan, and screening for disorders. During well-woman visits, overall health history is collected with updates in patient's health status, and the nurse asks specific questions regarding patient concerns or requests for the doctor. Patients being seen for specific gynecologic conditions will have a more focused interview regarding their situation, and the nurse may explain procedures that will occur. Once the initial interview by the nurse is completed, she inputs the patient's information into the chart and sends this to the doctor, who then sees the patient. His visit with the patient includes an overall health history with a focus on the reason for the visit. During well-woman visits, the doctor usually completes a breast examination, listens to the patient's heart and

lungs, and completes a pelvic exam and pap smear. During prenatal check-ups, he assesses the fetal heartbeat and fundal height, completes screenings, such as GBS tests, and interviews the patient on her overall wellness during pregnancy. For specific gynecologic conditions, the doctor completes a focused assessment and health history interview. After the assessment, the doctor meets with the patient in his office to conclude the visit and provide further guidance or answer questions as needed.

My responsibilities during my internship were dependent on the patient load and scheduled appointments or procedures each day. I worked about 20 hours each week and eleven weeks total. My main responsibility was to assist Dr. Tovar during his examinations and procedures. I also acted as a chaperone for Dr. Tovar, as he is a male physician who sees only female patients, and provided emotional support for the patients. For all pregnant women, I assessed the fetal heart rate and fundal height prior to his examination and ensured that the patients had changed into their appropriate drape sheet and/or top depending on the reason for the visit. Dr. Tovar would check my assessments to ensure they were correct measurements. During his examinations, screening tests, pap smears, and other in-office procedures, my roles included assisting through handing him appropriate instruments, providing patient support, collecting and labeling specimens, cleaning the procedure room, and sterilization of instruments. When the nurse was unable to call patients back to the rooms, I filled-in by collecting the patient's weight and blood pressure. In between patients' appointments, I cleaned exam rooms for the next patient. In addition, I collected patients' urine samples and performed urine dipsticks for glucose and protein. I conducted further analysis with an extended urine test or a urine culture if ordered by the doctor. Lastly, I communicated information between the patients,

doctor, and nurse, as needed. Overall, my duties during this internship were extensive and dependent on the situation.

I learned countless skills through this position that will help me excel in my future nursing career, especially related to patient interactions. One of the most important skills I learned was how to interact with women of all ages, especially pregnant and postpartum women. Along with this skill, I learned how to provide emotional support to this population. Many of the procedures that occur in Ob-Gyn offices cause anxieties. From pap smears to cryotherapy, these procedures can be uncomfortable, painful, and intimidating for patients. By watching the nurse and her abilities to calm patients, I slowly became more comfortable in my own abilities to console patients and ease their anxieties. Lastly, I gained experience in interacting with patients of all different cultures, backgrounds, and languages. The office has a translator always on duty to assist Spanish-speaking patients. In addition, Dr. Tovar cared for many Asian patients who spoke their native languages and would bring a family member or a translator to assist during appointments. Through this experience, I learned how to successfully conduct an appointment with a translator present. Because pregnancy and birth are highly influenced by culture, I was also able to learn about these differences through interacting with patients of different backgrounds.

In addition to skills learned through patient interactions, I gained an extensive knowledge of obstetrics and gynecology. I was able to observe and assist with procedures in the office, including IUD insertions and removals, birth control implants in the arm, colposcopies, cryotherapy, pessary insertions and removals, and sonograms. This hands-on experience enabled me to learn how to assist the doctor and gain a better understanding of these procedures that goes far beyond reading about them in a textbook. I feel confident in my ability to appropriately

collect and label specimens during examinations, such as Pap smears, GBS tests, STD screening, biopsies, etc. Another tangible skill I gained was how to assess the fetal heart rate using the Doppler fetal monitor and measure the fundal height of pregnant patients. Over the eleven weeks, I became more skilled and able to accurately measure these. I also learned applicable lab values related to obstetrics and gynecology and how to appropriately analyze the results. Another important learning experience occurred when I had the opportunity to observe two vaginal deliveries. I acted as a support person for these patients because I had met them on multiple occasions during in-office visits and was able to assist them during their labors. I also gained a better understanding of nurses' roles during labor. Throughout my eleven weeks at the office, I acquired many beneficial skills related to obstetrics and gynecology.

My project was mainly focused on overall learning, which consisted of hands-on experience working in the office and completion of my learning goals, and assisting Dr. Tovar and Ms. Rice to better enable them to successfully complete their duties. Learning occurred first through my observation of the nurse's and doctor's respective roles and second through actively participating in patient care. At the beginning of my internship during the first week, I wrote out my learning goals for Dr. Tovar to review and approve. Throughout the eleven weeks, Dr. Tovar brought to my attention certain cases that were applicable to my learning objectives and provided educational articles for me to review and discuss. Lastly, my project was centered on providing assistance in the office where necessary. On certain days, I would solely be Dr. Tovar's assistant during his examinations so that Ms. Rice could focus on completing the initial patient interview and assessment. On other days, I would help Ms. Rice by bringing patients back to exam rooms for her. After gaining more experience in the office, I felt that I truly was providing necessary assistance in the office that allowed for a smoother work day for those around me.

Although this internship proved to be an exceptional learning experience, a few problems were encountered. My inexperience with obstetrics and gynecology proved to be problematic. My nursing course on this topic took place after the summer internship, so there was a learning curve. As mentioned previously, many patients spoke different languages, which proved to be challenging. When the translator was not present, I had to find creative ways to communicate with these patients. Another apparent problem was that the overall work environment of the office was stressful with obvious tensions. At least four providers work on any given day in the main office. There is one nurse for each provider, in addition to one translator and two other nurse who are responsible for answering phone calls and floating where needed. All of the nurses sit in a small nurse's station located in the center of the office. The work day proves to be stressful at times due to a high patient load. This fostered a difficult work environment that enabled pessimistic attitudes. These negative attitudes made it hard to focus on work at times. My internship had countless positive aspects with a few negative occurrences throughout.

My expectations and goal for the internship were fully met. As mentioned previously, I grew immensely in my skills related to patient interaction, as well as technical nursing skills. Before starting this internship, I had a personal goal for myself to grow in my confidence interacting with patients. This goal was met due to the necessity to interact with countless patients every day. I found myself starting out the internship very shy and timid; however, I became increasingly confident in my interactions with patients overtime. In addition, Dr. Tovar enabled me to meet all of my learning goals that were outlined at the beginning of the internship. A few of the topics I was interested in included HPV and cervical cancers, methods of contraception, maternal health and impact on fetal development, and common gynecologic

surgeries. Dr. Tovar provided scholarly articles on the topics of HPV and cervical cancer. I reviewed these and was able to discuss the topics in-depth with him. I was also able to review countless pamphlets provided by the office and medical textbooks over topics, such as methods of contraception. After gaining a base knowledge of this information, I could better understand conversations Dr. Tovar had with patients, and we could converse after the patients left with more depth. This system was beneficial in that I was able to study the information and then apply it in a real-world scenario. The only way that my expectations were not met fully during this internship were that I believe my skills as a nursing student could have been better utilized with more responsibilities. During nursing school, I have learned and practiced how to draw blood, give shots, complete assessments, etc. If my responsibilities had been expanded, I could have practiced and applied these skills more fully. I also would have benefitted from having access to the office's charting system so that I could learn more about patients' histories. Overall, my expectations and goals for the internship were thoroughly met with numerous opportunities for learning.

In order to analyze my overall experience with my internship, I will explain North Texas Ob-Gyn's mission and how my project contributed to this, an overview of what I learned and how I grew during this experience, and ethical considerations that this internship brought to light. On their website, North Texas Ob-Gyn states, "Our staff is committed to providing you the highest quality women's health services since 1980 and look forward to helping you enjoy your best health throughout every stage of your life" ("North Texas Ob-Gyn Associates," 2018). Through my work with my internship, I actively took part in this mission by positively contributing to the delivery of the highest quality care possible with a focus on patient-centered care. I admire how Dr. Tovar gives his patients control in their health and enables them to have



ownership in their choices. By taking part in this, I feel that I was able to live out the mission by allowing women to live their best health. Lastly, I learned about and took part in women's health across all ages. My learning goals were not centered on one age-group but rather delivery of care throughout every stage of life. I believe that I successfully contributed to the organization's mission by taking part through my project.

In addition to gaining technical nursing skills through this internship, I also took part in deeper learning that enabled me to grow and change in a positive way. First, I grew in my abilities to work under stress. Most days were spent with a full schedule of three patients at a time and many more waiting. When we were exceptionally busy, we would have to bring patients back and use extra rooms, so we would have four patients at a time. This helped me learn time-management and prioritization skills as I was forced to decide what was most important for me to do in certain situations and where my resources could be the most beneficial. In relation to working under stress, I also learned to be more self-sufficient. Ms. Rice consistently had a heavy-workload, so once I was oriented to my position, she was unable to walk me through every task I completed. Because of this, I learned how to work on my own, when to ask for help, and how to decipher the difference between these two situations. Lastly, and most importantly, I learned how to be more self-confident in my abilities. The nurse I worked with expected me to deliver high-quality care and held me to high standards. This forced me to know my abilities, develop them further, and be able to answer for my actions. Overall, I experienced substantial growth and positive changes through this position.

During this internship, I encountered a few situations that brought to light ethical considerations. The obvious language barrier that occurred for many patients had the potential for ethical implications. Translating information can be stressful and adds extra time to the

appointment. Because of this, vital information could be lost during the translation, which would put these patients at risk for not receiving the best possible care. In addition, patients may feel uncomfortable explaining certain health issues and having to use a translator could further add to this anxiety. Lastly, some patients bring their own translator or use a family member to translate. Family members may withhold information during the conversation either purposefully or on accident, again contributing to the patient's quality of care. Another potential ethical issue that occurred was apparent when I encountered multiple patients who were not motivated to care for themselves. In the office, we described this dilemma with the question, "How do you help patients who do not want to help themselves?" An example of this happened with a teen mother who came in for her first prenatal visit when she was six months pregnant. During her second visit, it was apparent that she was non-compliant with the doctor's recommendations, such as taking her prenatal vitamins, and had failed to attend her scheduled sonogram. As her care provider, the focus is to provide all of the resources and information available for the mother to attain the best care possible. However, if she decides to be non-compliant, this situation is out of the provider's power, which causes an ethical dilemma. Overall, no serious ethical issues arose during my time at the office, but closely examining the potential for these issues is important to ensure that patient-centered care is always achieved.

In order to provide a comprehensive overview of my position at North Texas Ob-Gyn, I will outline a patient case study to further explain my role. The patient, with initials B.W., was a 23-year-old gravida 2 para 1 presenting to the hospital on 06/19/19 for induction of labor at 39 weeks gestation. She had received prenatal care throughout her pregnancy from Dr. Tovar. The patient had no significant medical or surgical histories. She was induced at 0800 with Pitocin, was GBS positive and received penicillin, and received an epidural around 1000. At 1700, she

was determined to be 10 cm dilated and began pushing. Upon assessment at this time, she presented with pain rated at a 7/10 and exhibited signs of moderate anxiety. Her vitals were a heart rate of 104 beats/min, blood pressure of 130/80, respirations of 18/minute, and temperature of 99.0 °F. After pushing until approximately 1800, the nurse determined the baby was about to deliver. She paged the doctor and encouraged the patient to resist the urge to push, if possible. The patient stated, "I have to push I cannot wait." The doctor was on the way, but the baby was delivered at 1815 and weighed 8 pounds and 10 ounces. Dr. Tovar entered the room at about 1 minute post-delivery and delivered the placenta and cut the umbilical cord. In addition, he sutured the patient's perineal laceration. Post-delivery, the baby was cleaned off, measured, weighed, and assessed. After this occurred, the baby was put on the mother's chest for skin-to-skin.

An applicable nursing diagnosis for this patient during labor would be "acute pain related to the effects of labor and delivery process" (Carpentio, 2017). The patient reported her pain at a 7/10 during labor and when pushing began. In addition, she showed signs of pain, such as facial grimaces and elevations in heart rate and blood pressure. The goal for this patient was to maintain effective pain control through breathing techniques, non-pharmacologic interventions, and analgesia from the epidural. Nursing interventions to enable the patient to reach this goal included talking her through her contractions and pushing, guiding her through her breathing techniques, use of aromatherapy, distractions, such as massage by her partner, utilization of a peanut ball, and continued use of the epidural. In addition, the nurse continued to assess the patient's pain frequently. Given the nature of labor, the patient's pain was not relieved as the labor progressed. Once the baby was delivered and during the postpartum period, the patient had a decreased pain level. However, she continued to have afterpains, perineal pain, and general

fatigue, which are normal findings postpartum. This experience allowed me the opportunity to gain a deeper understanding of the labor process and the nurse's role during labor.

Evaluation of my internship at North Texas Ob-Gyn was conducted through a description of my position, analysis of the internship, and an overview of a patient case study. My responsibilities in this position were dependent upon the patient load for the day but mainly included assisting Dr. Tovar during appointments. I gained an extensive range of skills through my work, from growing in my confidence in interacting with patients to learning how to complete physical tasks, such as measuring fetal heart rates. My honors project was focused on my overall learning, which occurred through completion of my learning goals. There were few negative aspects of my position, but the main issue that occurred was my own lack of knowledge regarding obstetrics and gynecology prior to the beginning of the internship. However, I believe that my goals for the internship were fully met. I was able to actively participate in the office's mission statement by providing patient-centered care. In addition, this internship allowed me to take part in learning that went beyond developing technical skills. I grew in my ability to work well under stress and became more self-sufficient and confident in my abilities. There was potential for a few ethical issues, such as language barriers and caring for patients who are not motivated to care for themselves. Overall, this experience proved to be a positive learning opportunity that helped me gain numerous skills that I will carry with me throughout my nursing career.

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