



Reflections on Nursing

80 inspiring stories on the art and science of nursing

Acquisitions Editor: Nicole Dernoski Product Development Editor: Maria M. McAvey Production Project Manager: Priscilla Crater Creative Director: Larry Pezzato Manufacturing Coordinator: Kathleen Brown Marketing Manager: Linda Wetmore Prepress Vendor: SPi Global

Copyright © 2017 Wolters Kluwer

The stories in this book were originally published in *The American Journal of Nursing (AJN)*. Published by Wolters Kluwer.

All rights reserved. This book is protected by copyright. No part of this book may be reproduced or transmitted in any form or by any means, including as photocopies or scanned-in or other electronic copies, or utilized by any information storage and retrieval system without written permission from the copyright owner, except for brief quotations embodied in critical articles and reviews. Materials appearing in this book prepared by individuals as part of their official duties as U.S. government employees are not covered by the above-mentioned copyright. To request permission, please contact Wolters Kluwer at Two Commerce Square, 2001 Market Street, Philadelphia, PA 19103, via email at permissions@lww.com, or via our website at lww.com (products and services).

987654321

Printed in China

Library of Congress Cataloging-in-Publication Data

Title: American journal of nursing: reflections on nursing: 80 inspiring stories on the art and science of nursing.

Other titles: American journal of nursing (Wolters Kluwer) | American journal of nursing.

Description: Philadelphia: Wolters Kluwer, [2017] | Reprints of the Reflections columns from the American journal of nursing. | Includes index.

Identifiers: LCCN 2016038504 | ISBN 9781496359063

Subjects: | MESH: Nursing | Philosophy, Nursing | Nurse's Role—psychology | United States | Collected Works

Classification: LCC RT82 | NLM WY 16 AA1 | DDC 610.73092/2—dc23 LC record available at https://lccn.loc.gov/2016038504

This work is provided "as is," and the publisher disclaims any and all warranties, express or implied, including any warranties as to accuracy, comprehensiveness, or currency of the content of this work.

This work is no substitute for individual patient assessment based upon healthcare professionals' examination of each patient and consideration of, among other things, age, weight, gender, current or prior medical conditions, medication history, laboratory data and other factors unique to the patient. The publisher does not provide medical advice or guidance and this work is merely a reference tool. Healthcare professionals, and not the publisher, are solely responsible for the use of this work including all medical judgments and for any resulting diagnosis and treatments.

Given continuous, rapid advances in medical science and health information, independent professional verification of medical diagnoses, indications, appropriate pharmaceutical selections and dosages, and treatment options should be made and healthcare professionals should consult a variety of sources. When prescribing medication, healthcare professionals are advised to consult the product information sheet (the manufacturer's package insert) accompanying each drug to verify, among other things, conditions of use, warnings and side effects and identify any changes in dosage schedule or contraindications, particularly if the medication to be administered is new, infrequently used or has a narrow therapeutic range. To the maximum extent permitted under applicable law, no responsibility is assumed by the publisher for any injury and/or damage to persons or property, as a matter of products liability, negligence law or otherwise, or from any reference to or use by any person of this work.

I WW.com



Reflections on Nursing

80 inspiring stories on the art and science of nursing

Preface

A Note to the Reader

In 1983, the American Journal of Nursing debuted Reflections, a column devoted to narrative writing about memorable experiences. The short essays are authored mostly by nurses, but also by other health care professionals, patients and family members, and others who have a story to tell. Readers have told us that they often turn to this section first when they take up each new issue. It's always rated as one of the journal's most popular sections.

Why does *Reflections* resonate so deeply with readers? Perhaps it's because nursing is a stressful occupation requiring considerable knowledge of biological and social sciences, critical thinking in a fast-paced environment, and often, the performance of invasive procedures on patients whose illnesses may have rendered them anxious and fearful. Narrative essays allow for introspection and reflection on the meaning of what has transpired. They are, as well, a way of bearing witness to the varieties of human suffering and possibility.

Many *Reflections* columns relate experiences that have left indelible imprints on the writer—a death that should not have occurred, a questionable course of action, an unforgettable encounter, a fractured relationship. But there are also many uplifting essays that detail the triumphs of providing care, teaching someone to be self-sufficient, achieving a new self-understanding, resolving discord, or perhaps seeing a loved one experience peaceful death. The one thing all the essays have in common is a good story that engages the reader.

This collection offers up a sampling of the articles we've published over the years. We hope you enjoy them.

Maureen Shawn Kennedy, MA, RN, FAAN Editor in Chief, American Journal of Nursing

Reflections on Nursing 80 inspiring stories on the art and science of nursing



Hearthreakers

1.	Cheryl A. Dellasega, PhD, RN, CRNP	
2.	The Hardest Decision Amanda L. Richmond, BSN, RN-BC	6
3.	The Price of a Miracle V. Jude Forbes, MSN, FNP	8
4.	No Regrets Arlene Koch, RN	11
5.	Florida Vacation Lorraine Randall, RNC	13
6.	In the Hand of Dad Sam Bastian, MS, APRN, BC	15
7.	Inseparable Dawne De Voe Olbrych, MSN, RN, CNS	17
8.	Steven Karen Roush, MSN, RN, FNP	19



Colleagues, for Better or Worse

someagaes, for Detter of W	
9. Roger's Angst Evelyn Lawson-Jonsson, BSN, RN	24
0. The Blame Game Natosha Cramer, BSN, RN	26
1. Who's the Fool? Nancy L. Ball, RN	28
2 Ordinary Things	30

32

13. Deception Corina DeVries, RN

Cindy McCoy, PhD, MSN, RN-BC



	28. The Pain Cortney Davis, MA, NP, RN	70
	29. At the Night Camp Meg Sniderman, RN	72
	30. Skipped Two Times Shixiang Luo, MSN, RN	74
	31. Tending Mr. Brown Dorothy Miller, RN	76
	Getting Started	
	32. The Prospering of Cheaters Ray Bingham, RNC	80
Lond	33. Touchy-Feely Stuff Sally Bellerose, RN	82
	34. Where's My Hospice Moment? Lyssa Friedman, RN, BSN, MPA and Veneta Masson, MA, RN	84
	35. My First Preceptor Judith L. Reishtein, PhD, RN	86
	36. Bed Bath Kathleen Hughes, MSN, RN, PNP-BC	88
	37. A Nurse? What Was I Thinking? Elizabeth Tillotson, BS	90
	38. A Special Kind of Knowledge Janet L. Richards, BSN, RN	92
	39. Coming Home to Nursing Nancy Walters, RN	94
2-7 L	All in the Family	
	40. Two Nurses—One Old, One New Lois A. Gerber, MPH, RN	98
	41. Morphine. Now. Peggy Vincent, RN, CNM	100
	42. At the Eye of the Storm Karen Schoonmaker, MSN, RN, CNL	102

	43. Census of One, Staff of Five Elizabeth Corso Falter, RN, CNAA, BC	104
	44. A Nurse's Mother's Nurses Donna Diers, PhD, RN, FAAN	106
	45. A Place for Palliative Care Carrie A. Bennett, MS, CNS-BC	108
	Doctor Jekyll and Doctor Hyde	
	46. Last Rights John A. Forrant, BSN, RN, CCRN	112
	47. My Turn Michael M. Bloomfield, MD	114
	48. A Smart Doctor Listens to the Nurses Ann Fleming Beach, MD	116
-37	From the Other Side	
	49. Seized Jennifer K. Englund, MSEd	120
	50. The Brat Tiana Tozer	122
	51. The Game of What If? Susan Luton	125
	52. The Third Way Andrew Merton	127
	53. Every Three Months Amy Noel Green	129
	54. Intake Interview Joy Ladin	131
	55. A Passing Shadow Gail Lukasik, MA, PhD	133
	56. A Stone of Contention Tim Bascom	135
	57. Swabbing Tubby Susan Clements	138
A STATE OF THE PARTY OF THE PAR		

	58. To the Child They Were All One Kind Sandra Stone	140
	59. Breathing Room Linda Meierhoffer, MS, MPA, BA	142
	Tables Turned	
A	60. To Mania and Back Joan Schmidt, MS-MPH, RN, ACRN	146
	61. At Her Mercy Alice C. Facente, MSN, RN-BC	148
	62. Big Love Marcia Gardner, MA, RN, CPNP, CPN	150
	63. A Mind in Search of Its Moorings Jean DiMotto, JD, MSN, RN	152
	64. The Other Cancer Story Suellen Hozman, BS, RN	154
	65. The Enduring Self Marilyn Wargo, BSN, RNC	156
	66. The Sacraments of Sister Thecla Madeleine Mysko, MA, RN	158
6 1	Making A Difference	
VÁ	67. Am I Going to Be Okay? Danielle Allen, RN	162
	68. Socks and All Bryanne Hickey Harrington, BSN, RN, CNOR	164
	69. A Change of Heart Nancy Cabianca, RN	166
	70. A Brief Respite Kelly Carroll, BA, RN	168
	71. May I Have a Band-Aid? Marie F. Kerscher, BEd, RN and Veneta Masson, MA, RN	170
	72. The Dirtiest House in Town Alice C. Facente, MSN, RN, BC	172

73. What One Thing Will Make Today Better for You? Susan L. Goff, MS, RN	174
Memorable Patients	
74. Hiding a Tender Soul Cheryl Kane, MEd, BSN, RN	178
75. Keeping Secrets Elena Schwolsky, MPH, RN	180
76. A Man of Few Words Kathryn Mason, MSN, RN, PCCN	182
77. I'm Sorry, Mama Claire Browen, BSN, RN	184
78. Convicted Lisa M. Cook, BS, RN	186
79. Edna and the Bedside Tables Diane M. Goodman, RN	188
80. Thomas Emily Maloney, BA, EMT-B	190
References 193	





Heartbreakers

Stories of great loss witnessed or experienced—pediatric tragedies, hospice stories, hard choices about treatment or the end of life.

"I stood in the doorway and watched a family subtract a member right before my eyes."

Amanda L. Richmond, BSN, RN-BC

The Grief Train

There's no lesson plan for recovering from loss.

Cheryl A. Dellasega, PhD, RN, CRNP

As an assistant professor on tenure track, I was assigned to teach Death and Dying, an elective course. Although I had worked clinically with many grieving people and experienced personal losses, the daunting syllabus covered everything from the history of death rituals to euthanasia.

After a harrowing first semester, it got easier to teach the course. Surprisingly, in a small auditorium packed with over 100 upperclassmen, students were always willing to share tender feelings. They spoke of near-death experiences, the slow demise of a beloved family member or friend, personal recovery from serious illness, drive-by shootings and other forms of violence, abortion, suicide attempts, and traumatic accidents they blamed themselves for. Often, there were tears, and sometimes, referrals to counseling.

Always, there was a search for better answers than mine:

"How do you know people ever finish grieving?"

"What exactly makes it harder to live without a child than a parent?" Eventually, another junior faculty was assigned to teach Death and Dying, and I went on to join a study that required focus groups about end-of-life care. The issues that emerged there were strikingly similar to those voiced by my students.

Then came "the Morning." There was coffee, the newspaper, and ironed shirts. I was getting ready for a student's dissertation defense and Paul, my husband, faced his own challenging day. As I prepared to shower, a crash sounded beyond the bedroom door. Something about the silence that followed made me grab my robe and go running.

My middle-aged husband was sprawled at the bottom of our basement steps, as peaceful as a young boy floating down a stream on a hot summer afternoon, arms and legs loose and eyes closed. I was able to keep his heart and breath going until the ambulance crew arrived.

Months earlier, an older married couple we loved died within months of each other. He had Parkinson's and she had cancer; it was painful to witness their mutual decline. After one visit, Paul shook his head and said, "Don't let that happen to me. Just pull the plug and give me morphine."

In the ED, when a physician showed me a CT scan outlining the flood of blood in my husband's brain, I wondered if the declaration had been some kind of morbid déjà vu.

The ventilator was turned off and the nurses administered morphine, even though they assured me he wasn't in pain. Family and friends waited until his heart rhythm dwindled to nothing and his breathing slowed, then quit.

In the months that followed, I was tunned by my failure to manage any aspect of grief. Sleep became my preferred activity of daily living because in the light stages of slumber, Paul's voice would seem to rumble in the next room, or stairs would squeak under his step. Three times he appeared in dreams, so much like his living self that I awoke in the midst of a conversation with him.

For months, I could only eat nutrition bars that tasted like cardboard. I lost so much weight I was referred to an eating disorder specialist, who diagnosed the anorexia of grief.

As the first anniversary of Paul's death approached, I booked a cross-country train trip. It wasn't to meet new people or see new scenery, but a desperate attempt to grab onto something bigger than my life.

I slept, showered, and ate on board, all new experiences. Passing through the Midwest, I took my laptop into the clear-domed observation car, intending to write about my sorrows but sightseeing instead. The next morning, I woke to the Columbia River Gorge in Oregon, a place too beautiful to be captured by a cell phone camera focused through a train window.

Everywhere, there were metaphors for life and loss—homeless people squatting in the Sacramento station during morning rush hour, "family style meals" eaten with strangers, and memories of other train trips, with and without Paul. As we headed back east, I still didn't believe the pain of loss would ever go away.

That's when a woman in the compartment across from mine struck up a conversation. As we crossed miles of Mississippi water and swampland, our stories spilled out. She was older, but also a nurse and a recent widow.

"We had a wonderful and long life together. He survived his cancer for more years than anyone thought he could, so I'm grateful," she said with a slow nod. Hours later when she got off the train, a shimmer of her peace remained.

Late that night, the long, low train whistle reminded passengers that someone was guiding us safely forward while we slept. Guru Elisabeth Kübler-Ross's stages of grieving kept time with the wheels rocking against the track as I drifted into dreams: "denial," "anger," "bargaining," "depression," and finally, "acceptance."

No amount of expertise could have prepared me for such a sudden and searing loss. My students had pressed me for better, more specific answers, but as my train sped onward, I understood just how few there really were.

The Hardest Decision

Summoned from overseas, a husband and father finds a drastically altered future.

Amanda L. Richmond, BSN, RN-BC

hat she was still beautiful made her situation all the more tragic. She had little visible damage. An EVD tube snaked out from under her hair and deposited its contents into a drip chamber. Her chest rose and fell at a preselected rate of 14 breaths per minute. iv lines disappeared under her gown and terminated into a central line. On the monitor, her vital signs were flawless.

Her outward appearance did nothing to suggest the chaos lying under her skull. A passenger in a vehicle that had flipped multiple times at highway speed, she'd suffered a severe traumatic brain injury. She was the only person injured out of the five involved. In the near future, the other four would come to visit her and find themselves racked with guilt while they thanked God that they'd been spared. She had two young children, a threeyear-old and a newborn, as well as a military husband who was stationed overseas.

He arrived in the middle of the night, still in military regalia. His hand trembled when he shook mine. He was dry-eyed, but I could see the muscles bunching in his jaw. He followed me into his wife's room. "She doesn't look that bad," he said, with hope in his voice.

I quietly explained her injuries to him.

We spoke about her care and condition and then I retreated to give him some privacy. He sat in the chair I had placed next to her bed and took her hand. I could see his shoulders shaking and I knew he was grieving for her—and for himself and their children as well. I could see his lips moving, but I don't know if he was pleading to God or to her, begging for her life back.

He stayed for a couple of hours, and I silently wove myself around him to tend to her various lines. When he finally stood to leave, he said, "Call me when she wakes up." I didn't have the heart to remind him that she wouldn't. Instead I just told him I would call if there were any changes.

When I arrived at work the next evening, he had again taken up his vigil at her side. This time he had a crying baby with him. Noticing the tension and frustration in his face, I went in to see if I could help out. He angrily thrust the baby at me. "My own son doesn't even know me," he said. "I've been gone since before he was born."