

My Most Memorable Nursing Experience

During my first semester clinical, on an oncology unit is where my most memorable experience happened. The patient I had for that night was an elderly male recently diagnosed with leukemia and had been admitted for chest pain and shortness of breath. Over the previous two days he had a significant decrease in his level of functioning. The main concern at this time was an infection on his right hand from an IV placement where there was significant redness and warmth. The nursing staff was following the infection, marking on his arm each shift how far the redness advanced. They were concerned that his body could not fight off the infection and cause him to die. The patient's wife and daughter were in to visit that evening and were very concerned in regards to his condition. The nurse came in to talk with them. She discussed the infection and the concern; she also mentioned DNR status and the use of life supporting measures the family wanted in case of an emergency. This made the family frightened and questioning the care their loved one received at this hospital, as the patient was able to walk into the hospital on admission but at this time he was unable to speak clearly and move with any coordination. The family then requested to speak with the physician. The physician came in and explained that the infection was the cause for these symptoms and explained the severity of the infection. He also addressed life saving measures the family wanted. Again, this got the family upset and scared, they weren't ready for death.

When the doctor left the room I saw the opportunity to have a therapeutic discussion with the family. I talked with them for about forty minutes discussing the

death and dying process, religion and my perspective on the situation. Most importantly, I spent time with them, listening to their concerns and addressing them. They weren't prepared for him to pass yet. But following that discussion the family realized that there was hope and they were relieved and pleased that I spent the time talking with them. In the following weeks of clinical, I saw this family regularly. They always stopped me in the hallway to say "Hi" and to talk a little. And of course, I stopped to peek in his room to see how he was progressing. The last I saw of him he was able to speak fluently, carry a conversation and move independently enough to get to the bathroom.

This experience gave me an understanding that healthcare workers need to spend more time with patients and their families. Only by doing this can we understand and address their concerns, and do what is needed to make them feel at ease. I also learned that sometimes it is not the patient that needs the most care but the family.