

Not Just a Job, an Adventure

Some of a nurse's biggest challenges happen off-duty

When my son Jim was four years old, he called me at work late one night. "Mom," he squeaked urgently, "Why did you put kittens in Aggie's kennel? You know that Aggie doesn't like kittens. You need to come home and take the kittens away."

I wondered what the heck he was talking about. Aggie was our pregnant, 2-year-old St. Bernard, but kittens? As my fellow nurses gathered around to find out why my son was calling me at midnight, it slowly dawned on me: he didn't mean kittens, but puppies. I realized that Aggie must have gone into labor early and was now delivering her litter.

Special Delivery

Knowing that my husband was out of the country on military duty, my head nurse had my colleagues help assemble a labor/delivery kit and sent me home to handle this unexpected

obstetric emergency. That night, with my son as my nursing assistant and memories of my L&D rotation flashing through my mind, I helped our first-time canine mother deliver a dozen adorable puppies.

Our impromptu L&D room was hastily converted to a nursery, complete with blanket warmer (the dryer),

decision to pursue a career in nursing.

A Little Crisis

One of the biggest challenges for any nurse is learning to spot the less-obvious emergencies, which can be particularly difficult when they involve those nearest and dearest to our hearts. Years ago, my family moved to



Nurses' homes are often like tiny field hospitals, prepared to deal with everyday and not-so-everyday emergencies.

a sterilization kit for bottle feeding (glass baby bottles and a pot I had used when nursing my own children) and childproof gates to keep wandering puppies from the hazardous world outside. Fortunately, Aggie turned out to be an amazingly cooperative and compliant patient, and her delivery was one of the more memorable ones of my career. I was particularly grateful for my fellow nurses' unconditional support and understanding. Then again, who can resist newborn puppies?

As nurses and first responders, we're often called upon to help when disaster strikes our community. No less significant are the smaller emergencies that occasionally pop up to test our skills and training, like giving the family dog "mouth-to-snout" resuscitation in a speeding car on the way to the veterinary ER, while an Oklahoma City police car clears a path for you through the holiday traffic, lights flashing and sirens blaring.

Adventures like that help to keep my job interesting and reaffirm my

Bangkok, Thailand, where my husband was stationed. As both a nurse and a good mother, I did my best to help my family cope with Bangkok's oppressive heat and humidity, but my son Jim began to complain that his head hurt. I initially responded as I would with any other headache, but in short order Jim began vomiting, unable to keep anything down. That little voice many of us develop in our profession began to warn me that my son's illness was more serious than I thought. My suspicions grew when Jim actually said, "Take me to the doctor," not something parents expect to hear from even a precocious toddler. I took him to the field hospital, where he was diagnosed with — you guessed it — dehydration. Fortunately, it was nothing a couple of hydration IVs couldn't resolve.

Many years later, my son returned the favor when I suffered a bout of uncontrollable vomiting during a road trip through America's heartland. Now grown and a trained field medic him-



Jim grew up to be a medic who saved his mother's life.

self, Jim used his skills to fashion a makeshift IV to administer an antiemetic to his very sick mother. I can only imagine what a sight we must have made on the side of a small country road, hundreds of miles from the nearest city. It was a good thing that my son, like his mom, always travels with a well-stocked first aid kit!

"But, Doctor..."

When I reminisce about my experiences as both a nurse and a mother, I'm often reminded of the times doctors have discounted my opinion or observations about illnesses or injuries in my family. I've often wondered, did they discount my opinion because I was a mother or because I was a nurse?

One example was the time my daughter Chris complained of wrist pain after taking a nasty spill while roller skating. At first, I thought the wrist was sprained and told her to ice it, but by morning, her hand was visibly swollen, so I took her to the ER. The doctor X-rayed her wrist and diagnosed a severe sprain, recommending a half-cast for four weeks. "Are you sure?" I responded. "It looks like a possible fracture to me." The doctor looked again and reaffirmed his original conclusion. Though still skeptical, I took Chris for her half-cast and then drove her home.

Four weeks later, just as we were preparing to remove the half-cast, the hospital called to say that after reviewing her chart, they had determined that her wrist was indeed fractured, and we should return to the hospital post-haste for a full cast. Needless to say, Chris was not happy about the new diagnosis, which caused her to miss a swim meet, but it did give her the opportunity to practice using her other hand.

First Responder

Like any good Boy Scout or Girl Scout, nurses live by the motto "Be Prepared," whether we're on duty or not. I can't think of a single nurse I've known whose home wasn't like a tiny field hospital, dealing with all manner of everyday and not-so-everyday emergencies. Although my own children and their childhood friends are now grown, with children of their own, they still sometimes knock on my door for help with ailments and injuries. I always remind them to see a doctor for a thorough going-over, but in a pinch, I'm always there to provide advice and wisdom or assemble an impromptu rapid response team.

Nursing provides a never-ending array of unique and memorable experiences, not only with our patients and their families, but also in our personal lives. That's what I love about being a nurse: there's never a dull moment. **WN**



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