



THE NURSES' STATION

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BEDSIDE REPORTING AT MMSC

You may have heard rumors about bedside report and were wondering just what it is and why the nurses on Med/Surg are doing bedside reporting. First of all, bedside reporting involves oncoming and off-going nurses discussing patient report at the patient's bedside. The nurses use a report template (which they created) to discuss the patient's care while the patient and family listen to what is being discussed.

There is less concern related to inaccurate or a lack of information because the report process includes actual patient visualization. In addition, patients are more knowledgeable about their health today and want to be involved in the process of planning their own care.

During bedside report Med/Surg nurses have identified communication barriers with patients, educational needs (whether in the hospital or discharged), and are able to address assessment issues such as an infiltrated IV. Bedside report improves patient safety, e.g. addressing orientation of the patient; increases communication between caregivers; and patients/families are provided the opportunity to know who their caregiver is early in the shift.

When reporting is finished, nurses feel they are more aware of their patient's issues, which enables them to better plan and prioritize nursing interventions. Increased staff satisfaction with bedside reporting encourages teamwork and promotes accountability.

The communication process at the

Key Practice Points:

- The communication process at bedside meets the needs of both patients and nurses by providing an opportunity to improve patient safety and increase patient collaboration in the plan of care.
- The bedside report increases the oncoming nurse's ability to immediately confirm the previous shift's report by visualizing the patient and getting a baseline assessment to compare against changes during the shift.
- Bedside reporting reassures patients that the nursing staff works as a team, and patients witness a safe, professional transfer of responsibilities.

bedside meets the needs of both the patient and the nurse and is a win-win situation for all.

The Breakroom

Please help welcome our summer
BSN student interns.

Internships are
June 8th - August 8th.

WELCOME

Emily
Mueterthies
Mt. Mercy College

ER Preceptor
Susan Schill

Collette
VanderPlas
Grandview College

WCC Preceptors
Kristi Rowley &
Bobbi Brandenburg

Nicole
Thien
Allen College

Float Preceptor
Michelle Stalzer

Happy National Nurses' Week May 6-12

The work of America's nurses to save lives and maintain the health of millions of individuals is the focus of this year's National Nurses Week, celebrated annually May 6-12 throughout the United States. This year, the American Nurses Association (ANA) has selected "*Nurses: Caring Today for a Healthier Tomorrow*" as the theme for 2010.

A Brief History of National Nurses Week

1953 Dorothy Sutherland of the U.S. Department of Health, Education, and Welfare sent a proposal to President Eisenhower to proclaim a "Nurse Day" in October of the following year. The proclamation was never made.

1954 National Nurse Week was observed from October 11 - 16. The year of the observance marked the 100th anniversary of Florence Nightingale's mission to Crimea. Representative Frances P. Bolton sponsored the bill for a nurse week. Apparently, a bill for a National Nurse Week was introduced in the 1955 Congress, but no action was taken. Congress discontinued its practice of joint resolutions for national weeks of various kinds.

1972 Again a resolution was presented by the House of Representatives for the President to proclaim "National Registered Nurse Day." It did not occur.

1974 In January of that year, the International Council of Nurses (ICN) proclaimed that May 12 would be "International Nurse Day." (May 12 is the birthday of Florence Nightingale.) Since 1965, the ICN has celebrated "International Nurse Day."

1974 In February of that year, a week was designated by the White House as National Nurse Week, and President Nixon issued a proclamation.

1978 New Jersey Governor Brendan Byrne declared May 6 as "Nurses Day." Edward Scanlan, of Red Bank, N.J., took up the cause to perpetuate the recognition of nurses in his state. Mr. Scanlan had this date listed in Chase's Calendar of Annual Events. He promoted the celebration on his own.

1981 ANA, along with various nursing organizations, rallied to support a resolution initiated by nurses in New Mexico, through their Congressman, Manuel Lujan, to have May 6, 1982, established as "National Recognition Day for Nurses."

1982 In February, the ANA Board of Directors formally acknowledged May 6, 1982 as "National Nurses Day." The action affirmed a joint resolution of the United States Congress designating May 6 as "National Recognition Day for Nurses."

1982 President Ronald Reagan signed a proclamation on March 25, proclaiming "National Recognition Day for Nurses" to be May 6, 1982.

1990 The ANA Board of Directors expanded the recognition of nurses to a week-long celebration, declaring May 6 - 12, 1991, as National Nurses Week.

1993 The ANA Board of Directors designated May 6 - 12 as permanent dates to observe National Nurses Week in 1994 and in all subsequent years.



Inspired by the generosity of Chris Schill this past holiday season, the ICU has decided to collect personal care items to be donated to the House of Compassion. If anyone has items that they would like to donate, there will be a box in the ICU break room for this purpose. Also, if any other units in the hospital would like to start their own collection, I would be happy to collect and deliver as needed. Any questions or comments, please contact Holly in ICU @ x 5155.

Thank you in advance!!

The ICU Staff

WHY NURSE CERTIFICATION IS BENEFICIAL



Certification confirms your knowledge of nursing in your specialty area to hospitals, peers, patients and to yourself. It promotes excellence in nursing and benefits patients/families, employers and nurses.

Nurse Certification Benefits Patients and Families

As healthcare has become more complex, it has become increasingly vital to assure the public that healthcare professionals are competent. Certification provides patients and their families with validation that the nurse caring for them

has demonstrated experience, knowledge and skills.

Nurse Certification Benefits Employers

Employers who embrace and support nurse certification are better positioned to thrive in the highly competitive healthcare market. Also, the ongoing education and experience that comes with certification reduces a nurse's exposure to occupational risk and better prepares him/her to make informed decisions about their practice.

Nurse Certification Benefits Nurses

By becoming certified, nurses validate their expert knowledge and skills and therefore position themselves for appropriate recognition and a improved sense of confidence and achievement. As a voluntary process, certification shows a nurse's commitment to career development and dedication to patient care.

For a listing of certifications and eligibility requirements go to the AACN website at: www.aacn.org



CATH LAB NURSING

The role of the Cardiac Catheterization Lab RN is to admit and discharge patients as well as provide support to the team by circulating, scrubbing or monitoring procedures. Their process includes physical assessment, interview, lab work, EKG's, and pre and post procedural education. Their main role is as a circulator supporting the cardiologist and the other team members by providing necessary equipment and medications needed during procedures. Additionally, they may scrub-in on the case with the cardiologist and monitor cases from the control room where they record all the events of the case and monitor the vital signs and waveforms.

Our RN's have a background in cardiac step-down or intensive care nursing that provides them with the necessary knowledge such as ACLS, IV drips, cardiac rhythms, and specific pathologies that are crucial to know during acute cases. They all have gone through rigorous training in procedures, equipment, waveforms, circulating, monitoring and scrubbing. They must know all the job duties of each member of the team to be able to anticipate the next move.

Every day and each case provides the opportunity for our RN's to learn more about the pathology of the heart and the circulatory system. In addition to all the continuous training and research the RN's have to keep apprised of, they also take call a minimum of 15 days and two weekends a month. They are committed to their position in the Cath Lab and to providing the best care for their patients and families.



Left to Right:

Scott Goodwin, RN

Pamela Dougherty, RN

Maria Shipley, RN

Not Pictured:

Traci Schuler, RN

Susan Pelz, RN

Clinical Coordinator

After receiving my assignment on the Med/Surg Unit, I walked down the hallway to take a peek at my patients before listening to report. When I turned around I noticed a woman walking towards the elevator crying. I hurriedly tried to catch up to her, but the elevator doors shut. My day continued with thoughts of that lady.



Standing at the nurse's station after lunch I saw the same lady standing outside a patient's room crying. As I approached, she turned and she extended her arms and we hugged. She told me her dad was dying from complications of a stroke. I lost my dad several years before under the same circumstances and all of those painful memories came back. Taking a few deep breaths and centering myself, I asked her what I could do to help. I offered to call a family member, clergy, social services or a friend, but she declined. She asked me if we could speak privately in her dad's room. After she introduced me to her dad, who was unresponsive, we stood quietly at the bedside. She stared down at him while I gently rubbed her dad's hand. After several minutes, we walked to the family room. She shared with me that they had unresolved issues and she wished she had treated him differently. She talked while I listened.

When my shift ended I walked down the hallway to see Mr. B and his daughter one more time. I left his room with a feeling of satisfaction having been able to help another family through a difficult time. When I returned to work the next day I was told that Mr. B had passed away.

A few months later as I was standing in the grocery store, I heard someone shouting my name. Looking around I saw Mr. B's daughter and she almost knocked me down with the biggest bear hug. She thanked me for listening and caring.

What I have experienced over and over is that when people are sick or hurt they need the caring touch and expertise of a nurse, and they need to know that you will care for their body, mind and spirit.
~ Maggie Schwarck, RN, Director of Education ~

Want to share your experience as a nurse with others? It is amazing how many lives a story can touch. Share your personal stories, inspire your fellow nurses, and support the nursing profession.

If you have a story that you would like to share, we would love to hear from you. Here is how to submit a story:

- The story should be no more than 300 words in length
- The story should be accompanied by your name and job title (and picture if you wish).
- Send your story to Maggie Schwarck by E-mail at mschwarck@marshmed.com; regular mail to the MMSC Education Department, or by Fax to 641-753-2748



QI/ED Council has been working on resource guides. We have a draft for PCA pumps (operation and trouble shooting) completed. Now we are working on a flush guide for PICCs and Central Lines. If you have a need for a quick resource for a procedure or equipment, contact your QI/ED representative.

QI/ED COUNCIL At Work

QI/ED would like to take a moment to thank you for your continued hard work with the patient hall passes. We would just like to remind ALL NURSES to PLEASE put your name and cell phone number on the hall pass so you can be reached, if necessary. This is very important. Also, UNIT SECRETARIES, if you are filling out the hall pass for a nurse, please remember to include the nurse's name and cell number on the form.

Thanks again for your hard work!! Keep it up!!