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Let's talk
about sex

Nurse helps
couples heal



photo by Mike Lee

Traci Owen, RN, BSN helps couples survive cancer together.

by Mike Lee
Staff Writer

Traci Owen, RN, BSN has the title of survivorship manager at Tulsa's Cancer Treatment Centers. She's also the sexual awareness nurse or just the sex nurse for short.

But whatever she's called, hundreds of couples have found out she's been the savior of their relationships during a cancer diagnosis.

"What I noticed was at the beginning of a cancer diagnosis both partners are all

in," Owen said. "As cancer has become a disease of chronicity with people living longer with cancer and many ongoing treatments you see those couples silo off from each other at about 10 to 14 months."

Owen says couples often band together with the initial diagnosis.

Then roles change from husband and wife to caregiver and patient.

The tests, the nauseating chemo and other treatments begin to take their

Twenty Nurses
Honored at 2015
March of Dimes
Nurse of the
Year Awards



The March of Dimes Oklahoma Chapter, in partnership with the LeNorman Family, honored 20 outstanding nurses at the 2015 Nurse of the Year Awards.

Through Nurse of the Year Awards, the March of Dimes recognizes nurses who demonstrate exceptional patient care, compassion, and service. Whether serving as a health care provider, educator, or chapter volunteer, these nurses have played a critical role in improving the health of Oklahoma's residents.

"The winners of this year's Nurse of the Year awards are a testament to the caliber of nursing talent that is in our state," said Laurie Applekamp, State Director for the March of Dimes. "We know that not only the winners, but the nominees and finalists alike, are truly committed to their patients and profession and are all making great strides in their respective fields."

The event, chaired by Liz Michael, Vice President and CNO, Stillwater Medical Center, had over 400 attendees and raised over \$80,000, making it one of the top Nurse of the Year events in the country.

Event partners included Title Sponsor, the LeNorman Family, Platinum Sponsor Mercy Hospital, and Silver Sponsor Stillwater Medical Center. Nurse of the Year Awards are given annually in approximately 20 award categories. More than 500 nurses were nominated in Oklahoma and 94 of those were selected as finalists. Award Recipients were announced at a special awards event held on Thursday, September 17, 2015 at the Embassy Suites in Norman.

Oklahoma's 2015 Nurse of the Year Award Winners
Ann Kappen, INTEGRIS Southwest Medical Center
Category: Advanced Practice,

See OWEN Page 3

See AWARDS Page 2

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AWARDS
Continued from Page 1

Marcia Cordy, OU Medical Center
Category: Behavioral Health
Jackie Aguilar, Stillwater Medical Center
Category: Cardiology
April Adams, Duncan Regional Hospital
Category: Charge Nurse
Derek Biggs, INTEGRIS Baptist Medical Center
Category: Critical Care
Mark J. Fisher, OU Health Sciences Center
Category: Education, sponsored by Tulsa Community College
Valerie Austin, INTEGRIS Canadian Valley Hospital
Category: Emergency Services, sponsored by the LeNorman Family
Sandra Lawrence, Jack. C. Montgomery VA Medical Center
Category: General Medical/Surgical
Tamie Spring, Mercy Home Health
Category: Hospice, Home Health & Palliative Care, sponsored by Mercy Hospital



Cheri Oglesbee, Northeastern Health System
Category: Infection Control & Occupational Health
Amy Walkup, Shanoan Springs Nursing and Rehab
Category: Long Term Acute Care/ Long Term Rehab, sponsored by Stillwater Medical Center
Haley Coppedge, Chickasaw Nation Ardmore Family Practice Clinic
Category: Managed Care, sponsored by UMB Bank
Kimberly Jenkins, Mercy Hospital Oklahoma City
Category: Neonatal/Pediatrics, sponsored by Mercy Hospital
Terri Preston, INTEGRIS Baptist Medical Center
Category: Nursing Administration, sponsored by the LeNorman Family
Ellen Wardlaw, Mercy Hospital Oklahoma City
Category: Oncology, sponsored by American Fidelity Assurance Company
Sara Kernell, Oklahoma City Indian Clinic
Category: Public Health & Ambulatory Care
Susan Young, Mercy Hospital Ardmore
Category: Quality & Risk Management, sponsored by Bank 2
Alex Matlock, OU Medical Center
Category: Rising Star, sponsored

by RCB Bank
Vicki Cantrell, INTEGRIS Canadian Valley Hospital
Category: Surgical Services
April Loeffler, Saint Francis Hospital South
Category: Women's Health, sponsored by Stillwater Medical Center

The award recipients were determined by a distinguished selection committee comprised of health care professionals who screened the nomination forms in a blinded review process.

The March of Dimes works to end premature birth and other problems that threaten our babies. We help moms have full-term pregnancies and healthy babies. If something goes wrong, we offer information and comfort to families. We research the reasons why babies are born too soon or very sick and work on preventions.

The March of Dimes is the leading nonprofit organization for pregnancy and baby health. With chapters nationwide, the March of Dimes works to improve the health of babies by preventing birth defects, premature birth and infant mortality. For the latest resources and information, visit marchofdimes.com or nacersano.org. Find us on Facebook and follow us on Twitter.

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OWEN

Continued from Page 1

toll.

There's fatigue, loss of sex drive and, often times, ability to function.

Partners may be living with cancer but the disease's first real victim is intimacy.

"There is very little that we do that doesn't have some sort of effect on sexuality," Owen said.

A 2009 study published in the journal Cancer found that a married woman diagnosed with a serious disease is six times more likely to be divorced or separated than a man with a similar diagnosis. Among study participants, the divorce rate was 21 percent for seriously ill women and three percent for seriously ill men.

A control group divorced at a rate of 12 percent, suggesting that if disease makes husbands more likely to split, it makes wives more likely to stay.

That's why Owen begged her administrators a few years ago to make her position permanent.

"Patients are waiting for healthcare providers to bring up those side effects and the healthcare providers are sitting back and waiting for the patient to bring it up," Owen said. "I've been amazed at how many healthcare

providers are not comfortable discussing sexuality.

"Several patients told me they brought it up and they felt shut down so they've never brought it up again."

Away from the hospital, Owen and husband, Michael, serve as the marriage counseling team at Asbury United Methodist in Tulsa.

The duo, who lead an eight-session premarital counseling course, are sometimes seen as an obstacle.

"Usually they dread us," Owen said. "They come in thinking they are going to be judged for whatever."

But at CTCA, people are beating a path to her door.

"Usually if someone doesn't cry on our first visit I figure I haven't dug deep enough," Owen said. "This is so emotional and it's such a connection issue. When that partnership begins to struggle the patient becomes weaker. So if we can keep that marriage strong and that relationship connected to each other the patient always fairs better."

A CNA since 17, Owen has 31 years in health care.

"I have no other skills," she laughs.

The 1989 Central State University grad has loved every season of her nursing career.

"I was that kid at three telling

everyone I was a nurse," she said. "I feel like I was put here and that was my role to be a nurse. I can't imagine doing anything different with my life that would be any more fulfilling. For me, nursing is a passion and I love that I'm 26 years down the road and I still have such a passion for being a nurse."

Owen cut her nursing teeth at St. Francis in Tulsa in 1990, where she had the dubious distinction of being the first new grad ever hired at the trauma center.

"A lot of the staff was really mad the director had brought in this young chick with no experience," Owen said. "Those nurses were so hard on me but they formed me into a really strong nurse. I loved trauma medicine."

Since 1988, Cancer Treatment Centers of America (CTCA) has been helping patients win the fight against cancer using advanced technology and a personalized approach.

Four of the CTCA hospitals have maintained the Centers for Medicare & Medicaid Services' coveted Five-Star Quality Summary Rating based on patient experience, a reflection of the Patient Empowered Care model and Mother Standard at the heart of operations.

At the Tulsa center, Owen helps

both couples and providers unpack their sexual baggage.

"Nurses, doctors - all of your healthcare team are trained in the anatomy," she said. "We know all the correct names. We know the location, physiology and function and disease. But when we start talking about the issue of sexuality that brings in a whole psychological realm and we're not prepared for that in training."



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Pretty as a Picture Painting to relax - Inidan Clinic OKC

by Vickie Jenkins - Writer/Photographer

Meet Staci Deland, RN, Care Manager at the Indian Clinic in N.W. Oklahoma City, OK. Attending school at Southwestern Oklahoma State University in Weatherford, OK, Oklahoma City Community College and Metro Tech, both in Oklahoma City, OK, she worked at several hospitals over the years but knew that the Indian Clinic would be a perfect fit for her. "Those schools were great and I loved it," she said. "I am Native American and the patients at the Indian Clinic really seem to open up and relate to me. It is nice when we have so much in common. I feel very fortunate to have this job and I enjoy it so much," she adds.

Asking Deland if she had any

mentors in school, she replies, "All of my teachers were my mentors and I appreciated each one of them. My friends in school soon became small groups and we would help each other. I think that my LPN friends were my biggest mentors. I am still in contact with some of those teachers and friends."

Deland knew she would work in the medical field when she was little. "My grandmother was a nurse and she was always telling me how much she liked it. She would say, 'Staci, you need to be a nurse.' Everyone told me that I had the perfect personality since I liked being around others and taking care of them. I also had an aunt that was a nurse. I guess you could say

that I was kind of pushed into it," she says with a laugh.

Describing herself concerning her job, Deland says, "I am a very friendly person or so I am told. I work hard, doing the best job I can and I always stay positive. My favorite thing about my job is the fact that I get to talk to all of the patients. I want to learn new things and I always get very excited about learning."

"In your opinion, what makes a good nurse?" I ask Deland. "I think a good nurse needs to have lots of patience. She needs to be flexible and realize the schedule will change at the last minute. A nurse needs to have diligence and be there for their patient. That person needs to be a good student and continue to give it their all. Also, going into the medical field gives someone so many options. There will some good days and some bad days but I can tell you for sure, the good days outweigh the bad. Just go into it telling yourself, I can do it!"

"The biggest challenge in the medical field right now is how the technology of the computer has changed everything so much," Deland says. "There are a lot of

changes going on right now and I am proud to say that I have become computer savvy. The advantages to the change in technology is how the patients are being taken care of and we, as in healthcare, can move forward."

Deland tells me that her favorite part of the job is communicating with the patients and their families, relating to them in a special way. "It is so much fun when we hear the patients talking about the Native American and all of the tribes, parades, and Pow-Wows. Some of the patients can speak the language fluently," she comments. "My grandmother is from the Native American tribe, Winnebago. She was fluent in the language at the age of 5 and now, she teaches the children to speak the language. I am proud of my heritage."

"Do you have any hobbies," I ask Deland. "Well, I am a big OU fan so I am excited about the football season. I love to paint pictures; it is very relaxing for me. I guess you could say that I am a musical/athlete because I play tennis and play the clarinet," she states. "I am also expecting my first baby in January so I am getting ready to be a new mother soon so there is so



Our daughter, Mariee, was a star softball player at the University of Oklahoma. She was full of life, and we were so blessed that she came into our lives. Family and friends were very important to Mariee. She loved her mother, father, two brothers and her sister immensely. Although she never realized her dream to be a teacher someday, when we look back and we see all her accomplishments at the age of 26, we're amazed. When she died in a motorcycle accident, we knew that Mariee wanted to be a donor. She was a giving soul and that's just something that she would do. We know that all of the people who received Mariee's organs survived, and we met the little boy who received one of her kidneys. Because of Mariee, he was healthy enough to throw out the first pitch at an OU softball game. What a blessing that she was able to help so many people.

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Staci Deland, RN, stands in front of her paintings that add to her office décor. "Painting is very relaxing for me," she states.

much that goes along with having a baby."

Asking Deland if she had any words to live by, she replied. "Be

friendly, stay positive and enjoy life."



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5 Truths about Nursing Everyone Needs to Know

Nurses are life-saving, dedicated professionals who work tirelessly day in and day out for the well-being of their patients. They are the first to see patients and often the last to comfort in a time of need. But do you truly know who is on the other end of that stethoscope? Let's explore the many myths about the nursing profession.

Here are several myths and misconceptions about the nursing profession debunked.

Myth: Nurses are assistants to physicians.

Reality: We are actually equal partners in health care, each with a separate and unique yet vital role. One is not an elevated version of the other. Nurses work to keep you healthy and well, helping you to heal when necessary, providing you comfort and care, supporting you at the end of your life, and bringing new life into the world.

Myth: Most nurses work in hospitals.

Reality: Only about half of all nurses work in hospitals. The rest work in varied settings such as public health, schools, corporations, pharmaceutical companies, wellness centers, law firms, law-enforcement agencies and government agencies, just to name a few. Nurses also work doing health research, setting health-care policy, running not-for-profit and government health agencies, as health care facility administrators, and managing technology and patient-care data.

Myth: Physicians are the real experts in health care.

Reality: Nurses are health-care experts in their own right. Much of their work involves health teaching to patients and family members. Examples include: Teaching an adolescent (and his/her family) who is newly diagnosed with diabetes how to monitor blood sugar, inject themselves with insulin, prevent complications and so on; helping and supporting a woman newly diagnosed with breast cancer to navigate her way through the scary and convoluted maze of cancer treatment, symptom management and medical appointments; working closely with a man who has recently had a heart attack to prepare him for the physical and emotional challenges of his medical condition while returning home and continuing his recovery and rehabilitation; instructing first-time parents how to care for their newborn; providing grief counseling and support to family members of loved ones who are dying or have passed away. These are just a few examples.

Nurses also have expertise in wound care, minimizing the risk of infections, avoiding and treating skin ulcers, managing pain, managing chronic illness, maintaining and attaining health and well-being, providing comfort care, counseling, coaching and much more.

Myth: There is a nursing shortage because no one wants to be a nurse anymore.

Reality: On the contrary, most schools of nursing have a two- to three-year waiting list to get into their programs. Nursing is a hot career goal these days! The shortage, which is starting to show itself, is a result of an increased need for nurses as the population ages, nurses taking on more roles in the healthcare sector, and a large number of baby boomer nurses predicted to retire soon.

Myth: Real men don't go into nursing.

Reality: More and more men are discovering the great opportunities that nursing offers, including satisfying and meaningful work, good salary and many pathways to advancement. And although only 7% of all current nurses are men, schools of nursing are reporting that their student body consists of 12-15% men. So, those numbers will be increasing!

Today more than ever nurses are proud to stand together and do what they do best, make a difference.

Donna Cardillo, RN, MA, CSP (Certified Speaking Professional) of DonnaCardillo.com travels the world helping women and healthcare professionals to live fearlessly in career and life and to reach their full potential. She does that as a keynote speaker, columnist, author, and cut-up. Donna is an expert blogger at DoctorOz.com and the author of three books, with the 4th on its way.



by Donna Cardillo, RN, MA, CSP

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Oklahoma's NURSING TIMES

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140 GENERAL NURSING

We are seeking caring and dependable people to work in the homes of elderly and disabled clients

Gentiva Health Services is seeking caring and dependable people to work in the homes of elderly and disabled clients in Lawton, Fletcher, Apache, Elgin, Randlett, Devol, Frederick, & Walters area. Will assist with preparing meals, shopping, personal care, errands, light housekeeping, and other assigned duties. We offer flexible day, evening, and weekend shifts. Must be at least 18 years of age with a clean criminal background. MUST have reliable transportation. No certifications or prior experience required. Fax resume to 580-248-9995. Please contact us by phone at (580) 248-9998 for any questions. To apply in person please visit us at 2210 W. Gore Blvd, Suite 3, Lawton, OK, 73501. E.O.E. M/F/D/V

We are taking applications for Registered Nurses, Licensed Practical Nurses, Certified Medical Assistants and Certified Nurse Assistants.

Artesian Home of Sulphur is taking applications for RNs, LPNs, CMAs and CNAs. Please apply in person at 1415 W 15th between 8:00AM to 4:00PM Monday thru Friday. Ada, Ok 74820

We Are Looking To Add Licensed Practical Nurses For 2-10 And Night Shift. Also Hiring Certified Nurse Aides.

The Bartlesville Health And Rehab Community Family Is Looking To Add Lpns For 2-10 And Night Shift. Also Hiring CNAs. We Offer Major Medical, Dental And Vision To Full Time Employees, As Well As Payroll Deductions Such As Scrubs And Shoes. Come Apply At 3434 Kentucky Place, Bartlesville, OK 74006

140 GENERAL NURSING

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GROWING HOME HEALTH AGENCY in search of qualified staff to meet the needs of private duty clients in their places of residence. If you are a Certified Home Health Aide, Nurse Aide or Standby Assistant looking for satisfying employment, apply in person today at Caregiver Services of Bartlesville, a locally owned business serving the community with distinction for the past 30 years. Drug screening and background check required. New Hire wage increases. 100 SE Frank Phillips Blvd Suite #302 Bartlesville, OK 74003

Now Hiring Weekend Registered Nurse, Weekend Licensed Practical Nurse, Housekeeper, Cook And Dietary Aides.

Apply in person, Broken Arrow Nursing Home. 424 N Date Ave, Broken Arrow, OK 74012

Now hiring for Certified Nurse Assistants/ Certified Medical Assistants for evening and night shift. Competitive wages and benefits.

Corn Heritage Village of Corn is now hiring for CNA's/ CMA's for evening and night shift. Competitive wages and benefits. Apply in person at 106 W Adams St, Corn, OK 73024.

We are now hiring an Licensed Practical Nurse for the 3-11 shift and Certified Nurse Assistants/ Certified Medical Assistants on the 3-11 shift.

Please apply in person at The United Methodist Health Care at 2316 W. Modelle, Clinton, OK

140 GENERAL NURSING

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Hospice Nurses. Hospice of Green Country, the only non-profit United Way supported hospice in Tulsa, has positions open for RN Case Manager and LPN Hospice Nurse. OK nursing license required. Previous hospice experience and Allscripts software a plus. Qualified candidates who desire a focus on excellent patient care, please send resume to fax 918-747-2573. 1120 S. Boston, Suite 200 o Tulsa, OK 74119. EOE

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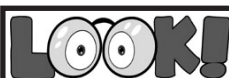
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140 GENERAL NURSING



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Now hiring Certified Nurse Assistants, Licensed Practical Nurses, and Registered Nurses

HERITAGE COMMUNITY, a skilled nursing/assisted living facility is now hiring licensed CNAs, LPNs, and RNS. Please apply in person at: Heritage Community, 1401 N. Lelia Guyman, OK 73942. EOE

140 GENERAL NURSING

We are taking applications for the following positions:
Nursing Center:
Licensed Practical Nurse/Registered Nurse - 11pm - 7am / Part-time Certified Nurse Assistant - 11pm - 7am / Full-time Cook - Full-time Independent Living Housekeeper - Monday-Friday - Full-time Wait Staff - Part-time

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204 REGISTERED NURSE

Are you a licensed RN and interested in a rewarding career with a great team? You should come talk with us! We are currently seeking qualified candidates for a Hospice RN Case Manager.

We are also taking applications for certified HHA's / Aides. We offer a competitive salary and great benefits. Send your resume to fax #918-551-6890. 1515 E 71st St SUITE 100. Tulsa, OK 74136. EOE

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204 REGISTERED NURSE

REGISTERED NURSE

ALEXANDER HEALTH CENTER. The REGISTERED NURSE reports to the Director of the AHC and provides direct patient care in a university clinic setting to both students and employees. Minimum: Oklahoma R.N. license with current BLS/AED certification; minimum of three years work experience in an emergency, ambulatory care or college health facility. Preferred: BSN; EMR proficiency, 12-Lead ECG monitoring, phlebotomy experience. Hours are 8am to 5pm, Monday-Friday, 12 months. 800 South Tucker Drive. Tulsa, OK 74104 The University of Tulsa is an EOE F/M/Disabled/Veteran.

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Oklahoma's NURSING TIMES

Special to the Nursing Times

Nursing favorites: Moment with Mamie

By Felicia Lucas, LPN

"Are you the family of the cute, fat beagle of the neighborhood?" a young man in biker shorts and helmet asked me. The knock at the door had startled me, as it had been such a lazy Father's Day, and my ex-husband was visiting with my son, Daniel and I that afternoon.

The cute, fat Beagle dog was named Rascal, and had been such a gift from God three years prior. My mother had just been diagnosed with ALS (Amyotrophic Lateral Sclerosis) aka Lou Gehrig's Disease, and in an effort to relieve some of the emotional stress and pain we were going through, Daniel and I had stopped at a local pet store to "look" at some puppies. I had grown up around animals, and loved puppies and kittens, so I welcomed the reprieve from the anxiety of my mother's fast approaching future.

Daniel and I both noticed the cute

"Beagle" puppies, and I noted the price - \$125.00!

When Daniel asked to hold one of the puppies, a certain one seemed to look at him in a way of "you're finally here". As he reached into the bin to pick him up, the "magical" bonding was instantaneous. I can't explain it, but I was compelled to buy the puppy, who would not allow Daniel to let go of him - not that Daniel tried hard. He was like Velcro in his arms, and Daniel and he assumed the position of "spirit brothers" from that point on I remarked that he was "sure a rascal", and the name stuck. "Rascal" although we should have named him "Houdini" as he always found a way to get out of our acreage that was securely fenced. We were constantly seeking new ways to block any measure of possible escape. No matter how long we watched out the window

when he was outside, the moment we returned to our normal activity, we'd hear an "aroomp! aroomp!" and our Rascal would be howling after some rabbit or squirrel that had dared to enter into his view, and chasing it off down the street, outside the fenced-in back yard! We could NEVER find how he got out - we never located any hole no matter how many times we scoured the fence line! Eventually, the surrounding neighbors just accepted the fact that the "cute, fat Beagle" was the self appointed mascot of the neighborhood, and would wave to him as they drove slowly by. If truth be told, I think he adopted quite a few of the neighborhood kids, and was fed a lot of treats, which only encouraged his rebellious attitude against being "just a dog." The other dogs of the neighborhood could be seen "talking" with him through their own fence lines, and, much to Rascal's embarrassment, would bark and yelp loudly when I called for him from the front door.

As Rascal grew, so did the progression of my mother's illness. When she could still hold and feel him, she would hold Rascal and state that he seemed to always "smell like a puppy"! He brought joy to the whole family during a difficult time, and would often come running when he would overhear me crying about the anticipated loss of my mother. After her passing, I continued Nursing School, and he would often wait up for me, greeting me after a long night of clinical studies. He often rolled over on his back, allowing me to practice hearing with my stethoscope, and was frequently rewarded with his favorite treat - hotdogs!

After my divorce, Rascal gave me the security I needed as he and I slept alone in our big, quiet house. Often, he would be waiting in the driveway if I should be "late" (past 10:00pm) in returning home, then, after giving me a stern look, would turn and walk silently toward the house.

On that Father's Day morning, I had spent an unusual moment of "love" with Rascal, rubbing his stomach and telling him how much I appreciated all that he had meant to us, and he looked at me in that same "magical" look that he and Daniel had shared, and seemed to tell me that he loved me so much, too.

As I spoke with the young man at the door, I sensed an alarm in his voice as he inquired about our connection to the "cute, fat Beagle". Since Daniel had left on his bike to visit his friend, my first thought was

that Rascal had somehow followed him outside and was roamin' the streets of our quiet neighborhood again. "He's just been hit by a jeep, and I think he's hurt!" Everything moved in slow motion, as I ran outside the front door. There, in the middle of the road, lay my 3 year old baby, Rascal. He didn't move, and I couldn't grasp mentally if he were dead. I, an end-of-life nurse, who had so many times held the hand of a dying person, and noted the very moments of last breath and life of a human being, couldn't discern if he was breathing, if he had a pulse. His pupils appeared fixed, and he wasn't responsive - but how could I know? He had brown emesis flowing from his mouth, and I comforted him with love and soft words, as my ex-husband lifted him into the back seat of the car to transport him to a nearby animal hospital. As I rode in the back seat with him, I slowly began to realize that maybe, maybe, he was dying, or had already died. I began to do what I had encouraged so many families of my patients to do at the last moments of the living - talking to him, thanking him for his life, love and loyalty to me and "his" family and saying goodbye. When we arrived at the animal hospital, the blur of the technician, and my clumsy questions of "are you sure he's gone?" seemed like a dream as he lifted Rascal out of the car. The technician allowed me to use his stethoscope as I, like so many times before, listened to his heart. I was in a daze as the tech explained that city ordinances would not allow us to bury him on our property, and he discussed disposal options with us.

I couldn't stop crying as we headed home to find Daniel, and of course we all mourned our loss together.

The grief was fresh on my mind the next morning as I prepared to meet an elderly patient that I cared for. It was my day off, and I had volunteered to assist in obtaining a mammogram of her at a nearby diagnostic clinic, since she had no family, and our facility's transporter was unable to stay with residents at appointments. I met Mamie* and the transport van at the clinic, and sat quietly with her as we waited her turn for the xray procedure.

Mamie was a quiet woman with the bluest eyes I had ever seen. She was always smiling and cooperative, but never spoke. Alzheimer's Disease had taken a toll on her, and it was unsure if she could, or ever would, speak. She just seemed

See FAVORITES next page

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FAVORITES
Continued from Page 8

to quietly observe her surroundings throughout the lively days of the facility where she resided, and where I was employed as a care coordinator.

I had noted a lump on her right breast a few days prior, and a mammogram was needed to evaluate it. I held her hand as we were taken to the exam room for testing. As I began to undress her and place the pink drape over her, she remained trusting as I explained, again, that we had to let the “lady” look at her breast and take a picture.

While we waited, I couldn’t get Rascal off of my mind, and I couldn’t stop myself from sharing the story with Mamie. As I began sharing the events of the previous day with Mamie, she just sat and smiled, looking off with those blue eyes in her private world as usual. With an exasperating sigh, I commented; “Oh, Mamie, do you think animals go to Heaven?” In a movement that

paralleled the familiar “magic” of Rascal , she turned her head toward me and looked straight into my eyes. As she mesmerized me with those crystal blues, she opened her mouth and voiced the only words I have ever heard her speak: “Well, of course they do!”

I’m not sure if I was stunned at her speaking, or at the confirmation that I felt I had heard straight from Heaven - but I was overwhelmed with the peace that my beloved Rascal would be with me again. Not in this world, but forever in the next

It’s been 12 years since I last heard that “aromp! aroomp!” from the cute, fat Beagle that just couldn’t help being “such a dog”. Occasionally, I relive those last moments with him over and over, but with peace, I also relive that moment with Mamie, who was every bit “my nurse” that morning.

(If you have a favorite nursing story, please send to Oklahoma’s Nursing Times. Be sure to include your permission to share. News@oknursingtimes.com)

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Autumn Light Hospice:

580-252-1266

Carter Healthcare & Hospice:

OKC - Adam Colvin, Vol. Coordinator,
405-947-7705, ext. 134; Tulsa - Mike
Gregory, Vol. Coordinator,
918-425-4000, ext. 114

Centennial Hospice:

Becky Johnson, Bereavement
Coordinator 405-562-1211

Chisholm Trail Hospice:

Tiffany Thorne, Vol. Coordinator,
580-251-8764

Choice Home Health & Hospice:

405-879-3470

City Hospice:

Beth Huntley, Vol. Coordinator,
405-942-8999

Comforting Hands Hospice:

Bartlesville: 918-331-0003

Companion Hospice:

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405-282-3980; Edmond: 405-341-9751

Compassionate Care Hospice:

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Vicky Herrington, Vol. Coordinator,

918-641-5192

Hometown Hospice:

Robin Boatman, Com. Relations, Broken
Arrow: 918-251-6441; Muskogee:
918-681-4440.

Crossroads Hospice:

Elizabeth Horn, Vol. Coordinator,
405-632-9631

Cross Timbers Hospice:

Ardmore-800-498-0655
Davis-580-369-5335 Volunteer
Coordinator-Shelly Murray

Excell Hospice:

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Faith Hospice of OKC:

Charlene Kilgore, Vol. Coordinator,
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Freedom Hospice:

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Coordinator, 405-789-2913

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405-418-2659

Golden Age Hospice:

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OKC OK 73108 405-943-0903

Grace Hospice Foundation:

Sharon Doty, Dir of Spec. Projects -
Tulsa 918-744-7223

Harbor Light Hospice:

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1009 N Meredian, Oklahoma City, OK
73107 405-949-1200

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LaDonna Rhodes, Vol. Coordinator,
918-473-0505

Heartland Hospice:

Shawnee: Vol. Coord. Karen Cleveland,
405-214-6442; Norman: Vol. Coord. Lisa
Veauchamp, 405-579-8565

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Health in Tulsa: 918-412-7200

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Physician's Choice Hospice:

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405-936-9433

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PromiseCare Hospice:

Angela Shelton, LPN - Hospice
Coordinator, Lawton: (580) 248-1405

Quality Life Hospice:

405 486-1357

RoseRock Healthcare:

Audrey McCraw, Admin. 918-236-4866

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405-608-0555

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Shawnee/Cushing: 405.258.2333 Toll
Free: 888.901.6334

Woodard Regional Hospice

580-254-9275 Cathy Poe, RN Director



**Vicki L Mayfield, M.Ed., R.N.,
LMFT Marriage and Family
Therapy Oklahoma City**

*If you would like to send a
question to Vicki, email us at
news@okcnursingtimes.com*

Q. I am 34 and totally stressed out working in corporate America. When I had to add an anti-anxiety medication to face my cubicle, I knew this was not a good fit. What I find interesting is the number of people who have made negative comments about my choice to do something fun even if it means making less money. Why do people have to be so negative?

A. The fact that you became alarmed at your growing anxiety and need for medication to get through your work day is life saving. Your body is telling you that you are paying a high price to work for this company. It is one thing to get up in the morning and take a vitamin but needing anti-anxiety medication to function for the next eight hours is crazy.

So kudos to you!!!

There will always be people who see the glass as half empty and voice negative comments. It is disappointing when people think we do not have the brains to write a different life script. Life is not "One size fits all." Some people are risk takers, some stay securely inside the box and some are curious about what else might be out there.

We cannot accept taking medication in order to cope with our jobs as the norm.

When I left my job with the State of Oklahoma, making a good salary with good benefits but bored out of my mind; only one person encouraged me to take the risk to do something that I felt passionate about. I was a single mother with a five year old child that I had to provide for but I was losing myself in "my cubicle." Five months into the job I knew the fit was wrong; my frequent trips to the cafeteria when I was not hungry was at least something to do.

Nine months was all I could do. I left my salary, benefits and boredom and pursued my dream. I had one person who thought my mental, emotional and physical health was a priority over big money. It is not rocket science that money does not buy happiness but it does buy medications and co-pays for doctor's appointments.

We cannot stay in a bad situation and except medication to make it all better. It might make it tolerable but that is not better. It buys time until the next symptom appears. Like it or not, the body will always let us know if we are in a bad place.

So for all those people out there who are negative about your choices remember that is a reflection of their fears and anxieties. It is not about you. The box is a home for many.

Tender lives

Mercy NICU brings hope for families

Brandy Chaney, RN, fulfills her job as a clinical advocate at the Mercy NICU while knowing what it's like for a family member to wait for word on their premature baby's future.

by Mike Lee - Writer/Photographer

Brandy Chaney, RN, knows first-hand the value of the Neonatal Intensive Care Unit at Mercy Hospital in Oklahoma City.

She found out she was having twins during her first six months of working there. Her babies ended up being patients in the NICU as well.

"So I always tell parents that I've been on both sides of the bedside, to where I've been the nurse and I've been the parent," Chaney said. "I think that helps me a little bit in what I do."

Her position as a clinical advocate allows her to educate nurses about new products. She serves as their advocate for bringing in new things so that they can do their best work possible for the babies they help.

She always wanted to be a labor and delivery nurse, but when she was doing her clinical work at nursing school, she spent some time in the NICU.

"Once I was here, I was sold and never wanted to do anything else," Chaney said.

Her husband is a paramedic and they both say they are happy with their careers, thinking they would not be suited for each other's careers. Chaney has been with Mercy for 15 years with 12 of those years at the NICU.

September was designated as Neonatal Intensive Care Awareness Month. Mercy Hospital continues to strive to meet the challenge for caring for delicate lives born at its NICU in Oklahoma City, said Shonna Cox, RN, assistant nurse manager.

"We have a level 3 nursery and I think we do a great job as advocating for babies to stay with parents as long as they can," Cox said. "We have something called the Transition



Nursery."

The Transition Nursery was started within the last two years. If babies don't necessarily need to be admitted to the NICU, they can go to the Transition Nursery and be looked after by an NICU nurse."

Both women have been witness to hundreds of lives touched by Mercy. One of the latest babies was born at 22 weeks and five days into development.

"She was a triplet and she ended up being the only surviving one, but she's been our youngest surviving one recently."

Chaney said many of the infants grow up to become children who return to Mercy with their parents to say thank you. Christmas cards arrive every year filling a large double door.

"We actually have a NICU family Facebook page now," Chaney said. "We see a lot of birthday pictures on there."

Chaney's own girls were born a pound apart. They are 11 years old now and are about 15 pounds apart in weight. They also differ in height by 5 inches.

Her experience helped her to be more empathetic as a nurse. She knows what it's like to go home to an empty crib without her newborns.

Chaney said she always felt like she was leaving her babies with friends instead of at a hospital when she had

See MERCY next page



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If you could appear on a T.V. show, what would it be and why? Epworth Villa

"I would be on 'Who Wants to be a Millionaire' so I would have the opportunity to win BIG money!"



Sherelle McCuller,
LPN

"It would be the show 'Wheel of Fortune'. Why? So, I could win money for my son's college expenses."



Charlotte Newkirk,
RN

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"Price is Right' because I watched it with my grandma."



Rhonda Spears, RN

I would be on 'Impractical Jokers' because I like to have a good time and make people laugh."



Ashley Cochenour,
LPN

MERCY

Continued from Page 10

to return home.

"I know, too, what it's like to be hopeful that they're coming home one day and now we're looking at them being here another two weeks," Chaney said. Infants in the NICU usually stay there from two days to six months.

The NICU runs as a well-oiled machine. Great cooperation and teamwork is a comment often heard by the NICU staff. The NICU has been super busy this last month with nurses coming in to work overtime every day, she said.

"It's heartening to see how dedicated we all are in making sure all our babies are being taken care of," Chaney said.

Mercy reinforces its system of care by equipping its nurses with the technology and continuing education that saves lives. Cooperation with other Mercy hospitals helps to make this possible, she explained.

They do quarterly reviews, presenting the best evidence-based research in the field. Emergency procedures must stay as up-to-date as possible to ensure optimal care.

Most NICUs have evolved into

doing a family centered care model, Chaney continued. They focus as the family as a whole as the patient and not just the baby, she said.

"We have a whole series of education classes for the parents to help them be involved in the babies' care," Chaney said. "We're changing policies all the time so they can do some of the things the nurses do. We're working on training for the parents to do baths all the time so they don't have to watch the nurse give their baby a bath."

The hardest part is separating the parents from their babies. So anything the nurses can do to alleviate that is becoming more common in the NICU.

"We get to see that what we're doing is not in vain," she said. "There's hard days. We have kids that don't make it, that aren't doing wonderful but they're still out there."

"We had another baby that was here for a long time and she went home for a month or two and she got sick. So we all got to help support her mom even when she wasn't a patient here, but was a patient somewhere else. And that meant a lot to that mom. She expressed several times how much it meant to her that we were still supporting her."

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