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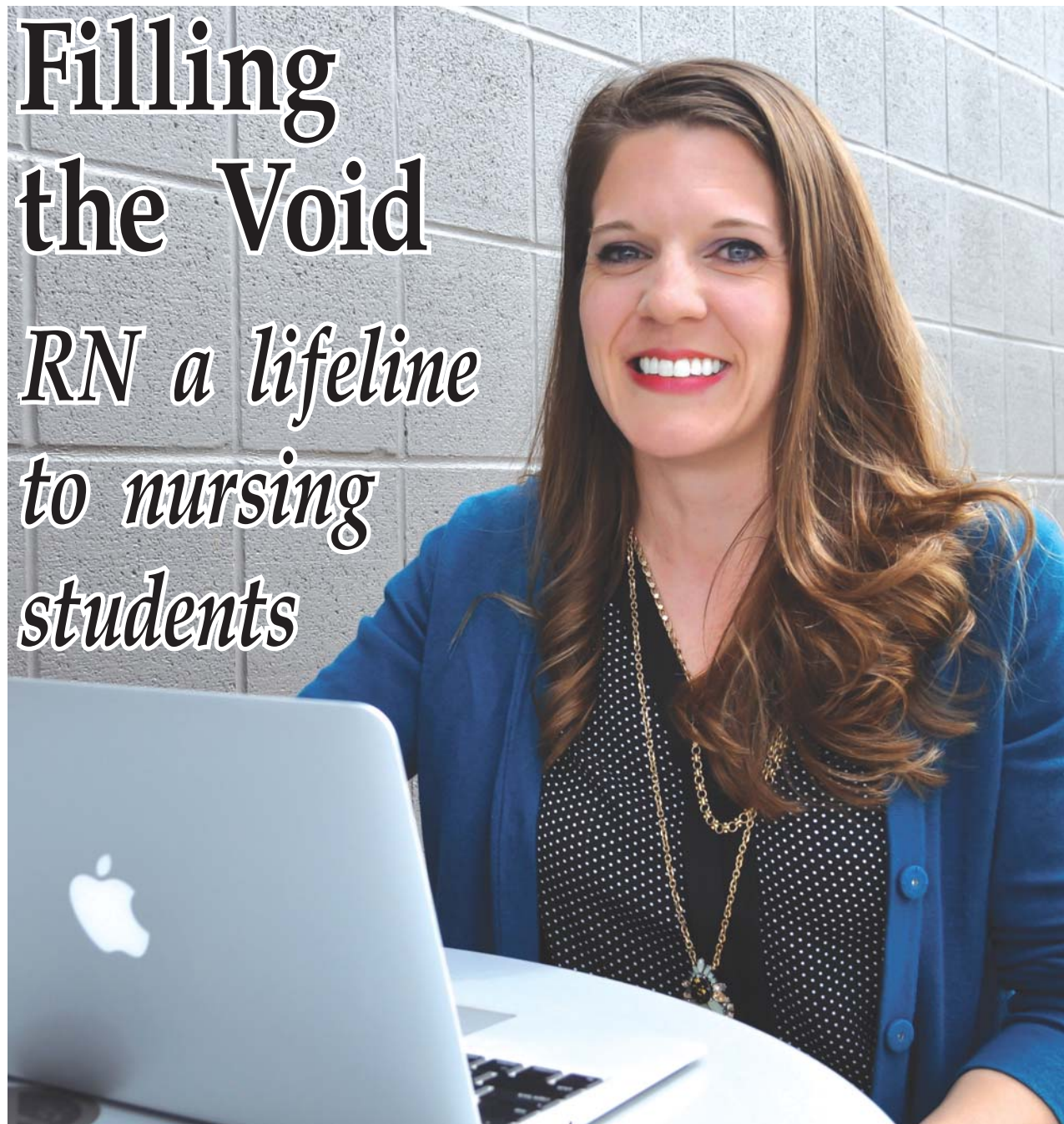
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Filling the Void *RN a lifeline to nursing students*



Brooke Butcher, RN, MSN, is helping nursing students who have found their education on hold due to Covid-19 restrictions.

by Bobby Anderson, RN, Staff Writer

Nursing school has never been easy.

But with canceled clinicals, changing lecture formats and an end to live educational opportunities, nursing students throughout the state are facing what feels like an insurmountable challenge.

Over the last two weeks hospitals across the state have suspended clinical rotations as the Covid-19 pandemic has grown. Likewise, nursing schools have suspended in-person lectures and

moved them online.

Exams still loom in the distance and graduations will be impacted.

Increasingly isolated nursing students are expressing fear about what all this means for their future.

Brooke Butcher, RN, MSN has a message for those students who feel abandoned.

"Really, I just want them to know they're not alone," Butcher said from home while social distancing with her own two small children

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Run on drug for COVID-19 imperils lupus patients



Oklahoma Medical Research Foundation immunologist Eliza Chakravarty, M.D. (Photo Courtesy Oklahoma Medical Research Foundation).

The prospect that hydroxychloroquine might be effective for treating the coronavirus has raised hopes in a country facing a pandemic. But it's also created a potential crisis for patients with lupus and other autoimmune diseases.

In clinics like the Oklahoma Medical Research Foundation's Rheumatology Center of Excellence, physicians routinely prescribe the drug to patients suffering from autoimmune disorders. President Donald Trump's touting of the drug—

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COVID-19

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as well as her brother's child. "I know a lot of students come to me and say 'We're expected to learn everything on our own and show up for a test.' That can put people in a tailspin. I thought if I could step in and provide a space where they can get the tools they need, content and resources that's one less thing they can stress about."

For nearly two years now the former college nursing professor has helped students online through The Nursing Professor.

Located online at thenursingprofessor.com, Butcher helps nursing students reach their ultimate dream.

Butcher earned her master's degree in 2011 and began teaching at Oklahoma City Community College.

She worked with the LPN career ladder track for students pursuing their RN. After a year she transitioned to teaching NP4 content.

She stayed until 2015.

She has a varied nursing background. She worked ER, cardiac neuro ICU and in an HIV unit in New York City before coming to Oklahoma Heart Hospital in 2009.

Butcher worked at Oklahoma Heart while she was teaching and taking care of her two young children.

"As a nursing student I could hardly afford a cup of coffee," she remembered. "I made a mockup of what I wanted to do and unbeknownst to me they posted it on the class Facebook page. Within 24 hours one of the students sent me back all of the names and more than 40 students had asked for this."

Butcher's service is more than a data content warehouse. She routinely engages students through Facebook Live Q&A sessions.

It's these sessions where students can really engage.

The last few days students have reached out to Butcher more often to try to find a way to anchor their education as their worlds change daily.

"A lot of them are wanting lecture-type material since they're not getting that in the classroom," Butcher said. "That's what we offer. With membership we have

access to a lot of different videos and PowerPoints that are narrated. They're getting content just like they would in class but they can watch it at their pace as many times as they need."

Butcher typically stresses three things to her nursing students:

- Take care of yourself – eating well, exercising and getting adequate sleep are important in nursing school to keep you well and keep your mind sharp.

- Don't just memorize while in school, learn the material and understand the rationale behind our interventions and the basic pathophysiology behind each disease process, because that is what will help you know what to do when you are face to face with your patient.

- Know your preferred learning style (or how you learn best) and utilize the learning resources that speak to that preferred learning style, as you are far more likely to understand it and remember when you do so.

Community more than content may be the biggest thing Butcher's site offers right now.

"It's highly valuable," she said. "Not only in uncertain times but I think nurses in general we all work as a team when we are in the hospitals and we learn that from a very early setting in nursing school moving into clinicals. It's really important to be able to reach out to others. I feel like when you're learning so much new information it's hard to gauge what you know well and what you don't and what you need to work on."

"In these chaotic times it's really nice to have the community there to lean on each other and remember we're all in this together."

Butcher stresses that even during this time of chaos students should approach their studies in a systematic manner.

Also, seek out resources that help solidify content.

"So often I feel like most nursing students and other sciences their learning styles are more audio-visual and they need to be finding those resources that speak to that learning style because it's going to make a greater overall impact," she said.

You can also find out more about The Nursing Professor on Facebook.



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DRUG

Continued from Page 1

and its cousin, chloroquine—as a potential treatment for COVID-19 has threatened supplies of a therapy that doctors rely on to control symptoms of lupus and rheumatoid arthritis.

“This is a medicine we consider critical,” said Eliza Chakravarty, M.D., a rheumatologist who treats hundreds of patients suffering from autoimmune disease at OMRF. “It’s disease-stabilizing for lupus, and going off the medication increases risk for flares and other health issues. It’s one we think people should stay on forever—even if they become pregnant—so it’s important that the supply chain remains in place.”

Reports from China and France suggest that the two drugs, originally developed as treatments for malaria, help patients suffering from COVID-19. But, experts say, those results are not based on the sorts of carefully controlled clinical studies that are necessary to validate the drugs’ safety and effectiveness in treating the virus.

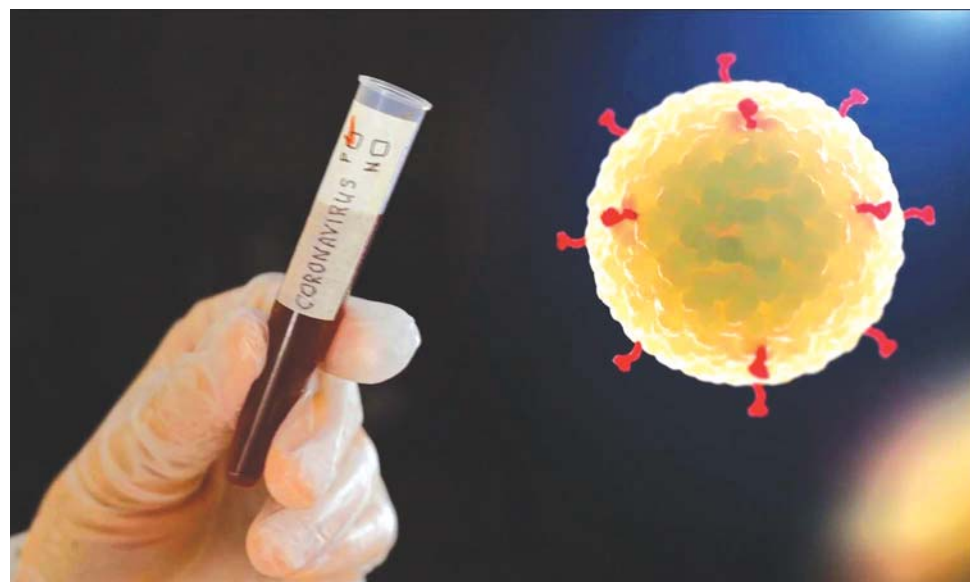
“We often see early results in drug trials that seem promising but do not pan out in larger, more scientific trials, so it is best not to overhype these drugs right now,” said Joan Merrill, M.D., a rheumatologist and lupus researcher at OMRF who also serves as chief advisor, clinical development, to the Lupus Foundation of America.

Clinical trials are starting in some locations around the U.S., Merrill said. “It needs to be studied as quickly as possible, but in a controlled, scientific way that produces reliable results.”

In the meantime, shortages of hydroxychloroquine (also known as plaquenil) are already occurring, said OMRF’s Chakravarty. At some point, patients with conditions like lupus and rheumatoid arthritis may have trouble refilling prescriptions, particularly when others who don’t need the drug try to stockpile it.

On Saturday, Gov. Kevin Stitt ordered a limit to prescriptions of the drug “to ensure there is adequate supply for patients who need it most.”

For a person at low risk, there’s no evidence hydroxychloroquine



will shield them from the coronavirus, Chakravarty said. For some, the drug can cause side effects, like heart issues, eye or muscle problems.

Unless they’re participating in clinical trials testing hydroxychloroquine as a preventative against the coronavirus, said Merrill, healthy people should not be taking the drug. “Although antimalarials are well understood and can be used safely and effectively in people with lupus and rheumatoid arthritis, the

doses reported in early reports on COVID-19 are higher than commonly used for these chronic conditions, and little is known about risks of widespread use and drug interactions in an elderly, disabled population,” she said.

“Everybody wants the drug because they think it’s protective, but we don’t know that,” said Chakravarty. “However, we know our patients need to have access to this medication.”

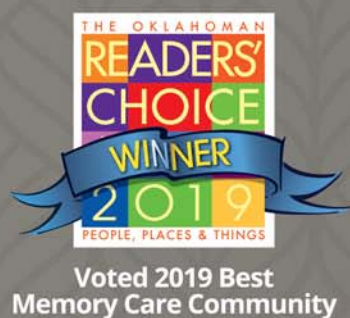


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CAREERS IN NURSING

ER NURSE IS PREPARED FOR UNEXPECTED SITUATIONS

by Vickie Jenkins - Writer/Photographer

Face it; we have all been known to have a few accidents over the years. Whether young or old, during a sporting event or stepping off of a curb wrong, it is just a small portion of accidents that make people rush to the ER. Do we panic? Some of us do, sometimes. Do the ER doctors and nurses panic? No, they have it all under control.

At Integris Community Hospital, you will find a team of professionals, doctors, nurses, a lab technician and a radiology technician. One special nurse is Lauren Hammer, RN.

Growing up in Blackwell, OK, Lauren was always interested in helping care for other. "When I was growing up, my dad seemed to have some major medical issues come up every few years. It seemed natural for me to help take care of him, no matter what the situation was. I just knew that I wanted him to get better. It was in the year 2000 that my dad discovered that

he had cancer. He went through chemo and it was then that I had a real desire to take care of him; I didn't think of any other career. I decided to become a nurse; taking care of my dad and others that needed me. My dad is in remission now and doing well. I guess you could say that my dad influenced me to be a nurse and I am glad that he did," Lauren commented.

"I love being a nurse and I like working here in an ER setting. This is a fast-paced place and I like the variety of patients that we see," she said with a smile. "Sometimes, I run into a bit of a challenge but I have always liked challenges, making sure I can reach my goal, doing my job the best way that I can. A challenge actually makes me try even harder to do the best job that I can and to me, that is very important," Lauren added.

Lauren contributes her willingness to learn to several of her

mentors when she was in nursing school. "Several nurses took me under their wing. They were always there for me when I needed a helping hand. I felt like there were several that went out of their way to keep me focused on the right path to follow. All of them were so helpful and I will always remember them for that. I feel like I learned how to be the best nurse I could be. I continue to try to learn a little more each day as I take care of the patients. I have plenty of compassion, something that all nurses need to have, along with being a great listener. I think a nurse needs to know that it is one of the most important qualities of a nurse; to listen to the patient. Really, listen to them," she commented. "We also need to be compassionate with the patient's families. We have such a big effect on them too and as we listen to them, we are building trust with


them. Also, I think a nurse needs to be an advocate. We need to speak up for them when needed and be their voice."

"Even though we are smaller than a hospital, we are big in teamwork. My co-workers are wonderful and we always have each other's back, no matter what the situation. It is amazing how close we become to our family away from home," Lauren said. "We see about forty patients a week and we stay pretty busy."

"The most rewarding part of my job is when I know that I am helping the patients in such a way that we make them feel at ease; calming them down when they have an accident. I feel like a nurse has one of the most rewarding jobs around and I wouldn't change it for anything. It is all worth it," Lauren commented.

Lauren and her husband, Ricky

See HAMMER Page 5



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Working at Integris Community Hospital-West, the medical staff is ready to care for the patients' variety of unexpected situations.

HAMMER

Continued from Page 4

have a little girl, Tynley who is five months old. Ricky is a high school baseball coach. Lauren and Ricky have a special way of celebrating their vacation every year. 'We go to a major league baseball park.

We are so much into baseball, that we named our three dogs with the New York Yankees baseball team in mind. There is a Great Dane, Bronx, a lab, Buddy, who looks like Air Bud and then a Chihuahua Pomeranian, Mendoza after Jessica Mendoza who was an Olympia softball player.

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Latest COVID-19 Update from INTEGRIS Health

At INTEGRIS, we continue to respond to the ever-changing and escalating situation surrounding the global spread of COVID-19. These are the latest steps we are taking to better prepare for the possible influx of patients this virus may bring.

WHAT'S NEW:

- INTEGRIS, Mercy, Norman Regional, OU Medicine and SSM Health St. Anthony add further visitation restrictions. Adult patients will be allowed no visitors, with the exception of Labor and Delivery patients who will be allowed to have one visitor. Children will be allowed one visitor for the duration of their stay. These visitors must be at least 18 years old.

- We are also asking that no more than four people enter into an elevator at a time.

- Similar to our decision to postpone all elective surgeries, we have also made the decision to postpone all INTEGRIS ambulatory endoscopic GI procedures for at least the next two weeks.

- In accordance with the American College of Radiology, we are also postponing non-urgent outpatient imaging studies. These studies include, but are not limited to, screening mammography, MRI, CT and ultrasound. This excludes obstetrical ultrasounds. We will reevaluate every two weeks to determine if these services can resume.

- Continuous communication is critical to provide our caregivers with the most up-to-date information they need to safely and effectively perform their job duties. For this reason, we are now offering a video update to our caregivers, twice daily, seven days a week.

- INTEGRIS continues to receive medical supply donations from the public.

PREVIOUS PREPARATIONS:

- Executive and medical leadership held a teleconferenced Q&A forum to answer caregiver questions about COVID-19 response.

- Temperature and symptom screening for caregivers and visitors is now implemented.

- Emergency back-up child care services have been identified for our caregivers with small children.

- INTEGRIS, Mercy, Norman Regional, OU Medicine and SSM Health St. Anthony all postpone elective, non-urgent surgeries and procedures.

- All INTEGRIS sites are preparing to provide symptom screening for visitors and caregivers. Those with a fever or respiratory symptoms will not be allowed into the facility.

- Individuals who wish to donate additional PPE, are asked to contact the Incident Command Center at 405-951-8735. (Ex. dentists, vets, construction workers, painters, etc.)

- When possible, face-to-face meetings are being replaced with Skype, WebEx or other available technologies.

- We have created a provider and caregiver hotline for caregivers and providers to ask questions.

- Visitors are now required to register upon entry of one of our hospitals. Check-in stations will be at points of entry.

- Visitor access to our hospitals will be limited to specific designated entrances, in most instances these locations will be the hospital's main entrance and the emergency department entrance.

- Plans related to secure additional staffing and supplies continue. We are identifying caregivers who can be reassigned to the areas they are most needed.

- We have initiated our Incident Command Center

- Revised our visitation policy to limit the number of guests in the hospital

- Closed certain entrances, waiting rooms and clinics.

- We are evaluating surge capacity through drills and planning exercises

- We are encouraging INTEGRIS Virtual Visits instead of in-office visits

- We have asked caregivers to self-monitor for fever or other symptoms

- Added additional and more frequent cleanings

- Increased the number of hand sanitizer stations

- Posted hand washing reminders in highly visible areas

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Kobey Trower considers himself a lifelong learner who always held a goal of earning a bachelor's degree. For him, choosing to complete his Bachelor of Science in Nursing (BSN) at Oklahoma State University was an easy decision.

The online program, which launched in Fall 2017 and is accredited by the Commission on Collegiate Nursing Education (CCNE), provides students with a convenient and flexible option to complete their bachelor's degree in as little as one year. With this degree, graduates are qualified for leadership roles in a variety of healthcare environments.

Trower works as a registered nurse (RN) at the Oklahoma Heart Hospital in Oklahoma City. While he initially enrolled in the BSN program to achieve his goal of earning a bachelor's degree, Trower now plans to earn his master's degree and become a nurse educator.

"Now that I have my bachelor's, I've become more interested in nurse education," Trower said. "I want to make sure each new graduate has all of the tools and resources to work accurately and efficiently."

When Trower decided to complete his nursing degree to

achieve his professional goals, it was important to find an accommodating program for his busy schedule. The full-time or part-time curriculum option offered at OSU was a huge selling point. Trower, who took one course at a time and completed the program in two years, said the deciding factor was the 100 percent online coursework.

"The curriculum and accessibility of the classes made it very easy to work around my work schedule and get all of my assignments done in a timely fashion, without having to stress," Trower said.

While many courses involved a group project and discussion posts, Trower said he found collaborating with other professionals in an online setting enriching without being distracting.

"All of the students were working full-time jobs," Trower said. "We had some people who worked in ICU, some in labor and delivery, others in clinic and research settings.

The accessibility of the coursework helped us keep on the same page for group projects. It was super convenient for me to work full time and still have a life without being tied down. That aspect of it helped keep my attention and keep me moving through the program."

Ultimately, the mission of the RN to BSN program is to prepare nurses to practice

professional nursing that meets the dynamic health care needs of individuals, families, groups, communities and global populations. Faculty facilitate the education of students in the art and science of nursing to provide leadership with an emphasis on ethics, wellness, cultural competency and population-based and professional inter-collaborative practice.

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SITUATION UPDATE: COVID-19

AS OF 03/23/2020

- * As of this advisory, there are 81 positive cases of COVID-19 and two deaths in Oklahoma.
- * If you are coming from a country or a region with widespread ongoing transmission of COVID-19 (Level 3 Travel Health Notice), you may be screened when you arrive in the United States. After you arrive home, take the following steps to protect yourself and others:
1. Stay at home. Do not go to work, school, or leave your house for 14 days. Discuss your work situation with your employer.
 2. Monitor your health. Take your temperature with a thermometer two times a day and monitor for fever (temperature of 100.4°F/38°C or higher). Also watch for cough or trouble breathing.
 3. Practice social distancing within the home. Avoid contact with other people for the 14 days. Maintain distance (approximately 6 feet or 2 meters) from family members and others in the home when possible.
- * Before there was community spread of COVID-19 in Oklahoma, monitoring pending PUIs was a way to track all imported suspect cases as a means of preventing community spread. Now that there is community spread of COVID-19 in Oklahoma, the PUI metric no longer reflects the current outbreak status in Oklahoma. This is largely driven by the high volume of people being tested at labs independent of the Oklahoma State Department of Health (OSDH)
- See UPDATE next page

COVID-19

Oklahoma Test

Results

Positive (In-State)	81
Positive (Out-of-State)	2
Hospitalizations	15
Deaths	2

COVID-19 Cases by

Age Group

Age Group, Years	COVID-19 Cases*
00-04	2
05-17	0
18-49	36
50-64	23
65+	20
Total	81
Age Range	0-88 yrs

COVID-19 Cases by

Gender

Male	38
Female	43
Total	81

COVID-19 Cases by

County

County	COVID-19 Cases by County*
Canadian	2
Cleveland	16
Custer	1
Garvin	2
Grady	1
Jackson	1
Kay	5
Logan	1
McClain	1
Muskogee	1
Noble	1
Oklahoma	29
Pawnee	3
Payne	3
Pontotoc	1
Tulsa	11
Washington	2
Total	81

Data Source: Acute Disease Service, Oklahoma State Department of Health. *As of 3/16/2020 6:00 a.m.

NURSE TALK

I would like to work with only five patients each day. Not more than that!



Barbara Aldridge, RN

I love my job as a nurse but...I would like to be independently wealthy so I could choose my hours; that would definitely be a perk!



Belinda Summerville, RN

What would your ideal job be?

Mercy
Mercy
Rehabilitation
Hospital

My ideal job would be a nurse advocate; not only to provide care for patients, but to be sure patients and caregivers receive the care they deserve.



Betty Williams, RN

I love fast paced nursing; things that get my adrenaline pumping! One day, I would love to work in a trauma setting!



Jasmin Baily, LPN

UPDATE

Continued from Page 10

Public Health Laboratory. Therefore, we will no longer report daily PUI numbers to prevent causing confusion as we transition to an expanded process of testing for COVID-19 in Oklahoma.

* There is a high incidence of cases in the 18-49 age group. People of all age groups are asked to stay home and practice social distancing.

* The Governor's Solution Task Force is actively working to expand COVID-19 testing through public-private partnerships, engaging OU and OSU laboratories and deploying satellite testing

units in Oklahoma, Tulsa, Kay and Pittsburg Counties.

* The Oklahoma State Department of Health (OSDH) continues to support guidelines from the CDC related to social distancing and personal hygiene. OSDH encourages Oklahomans to stay home, reduce person-to-person contact, wash hands frequently, and avoid touching your face. If you develop symptoms such as fever, shortness of breath or cough, please contact your medical professional or call the COVID-19 call center at 877-215-8336 or 211 for assistance.

* For more information, visit coronavirus.health.ok.gov.



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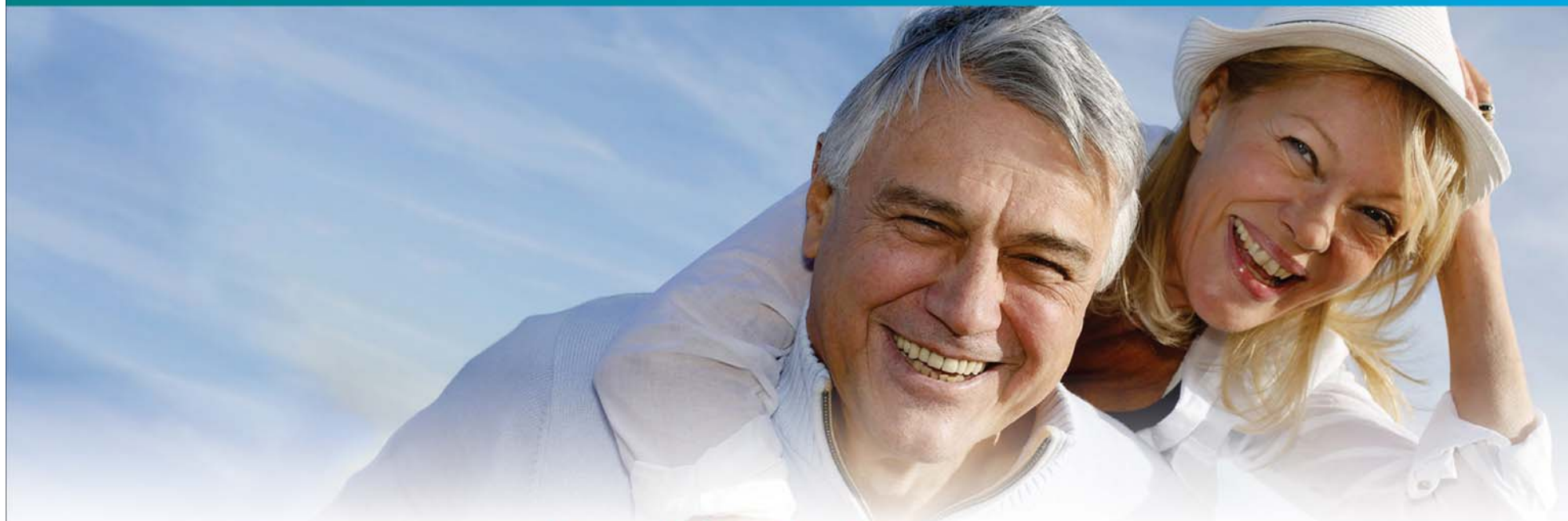
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ANA MET WITH PRESIDENT TRUMP TO DISCUSS CORONAVIRUS PREVENTION STRATEGIES

Advocates safety and staffing for nurses and increased testing to combat COVID-19

the American Nurses Association (ANA) Chief Nursing Officer Debbie Hatmaker, PhD, RN, FAAN, met with President Donald J. Trump to urge the administration to provide a sufficient supply of appropriate personal protective equipment (PPE) for nurses and to share the need for creative staffing strategies to sustain the nursing workforce so they can continue to provide care during this pandemic. ANA was among 12 other nursing organizations attending the White House meeting.

Echoing earlier letters from ANA to Congress, Dr. Hatmaker underscored the critical role that nurses play in caring for patients and how taking steps to protect and sustain the nursing workforce and other frontline providers is essential to ensuring the health care system has the capacity to care for the growing number of patients infected with coronavirus (COVID-19).

"Our number one priority is keeping frontline health care professionals, including our nurses, healthy by making sure they have the personal protective equipment they need," said

Dr. Hatmaker.

She shared stories of nurses reusing masks and relying on other materials to protect themselves, creating unsafe conditions that could negatively impact both nurses and patients.

"If frontline professionals are put into danger and become sick, it will exacerbate the crisis in the U.S., much like we have seen happen in China and Italy," said Hatmaker. "ANA stands ready to work with all stakeholders to solve this crisis, but without proper personal protective equipment our job will become immensely more difficult, leading to more deaths and even further damage to our nation."

Key points highlighted by Dr. Hatmaker included:

Safety:

- ANA calls for the highest level of respiratory protection along with appropriate training to protect health care professionals. Noting that Centers for Disease Control and Prevention (CDC) guidance from March 10, 2020 is not consistent with Occupational Safety and Health Administration (OSHA)

March 14, 2020 guidance affirming the use of N95 respirator or protection that is higher, ANA called upon the CDC to align its guidance with OSHA guidance.

- ANA supports the administration in encouraging construction companies to donate N95 respirators to health care facilities. ANA also proposes the U.S. government adopt a recommendation from the World Health Organization that incentivizes industry to ramp up production of N95 respirators that meet the current OSHA guidelines. Incentives can include easing restrictions on the export and distribution of PPE and other medical supplies.

Staffing:

- ANA promotes the use of telehealth technologies to provide care, reduce exposures, and preserve PPE and other facility resources during this emergency. We encourage the administration to work with private insurance companies to include advanced practice registered nurses (APRNs) as qualified health care providers who can bill for telehealth services provided.

- ANA recommends adjusting nurse staffing plans in real time based on the number of COVID-19 cases within a facility and patient needs. Flexibility and additional assistance are necessary given the need to don and doff appropriate PPE and for psychological support during this time of high stress.

- ANA suggests implementing creative staffing strategies that utilize nurses who are currently not in direct patient care and senior nursing students to help meet patient demand. For example, those with inactive licenses, school nurses, and senior nursing students could serve in drive-through testing, long term care facilities and in assistive roles.

Capacity:

- ANA advocates for the removal of barriers to testing and treatment, such as cost and access, to aid in the early identification and treatment of infected individuals. ANA acknowledges having an increased testing capacity will result in more cases of COVID-19, but this early identification will help minimize the spread of COVID-19.



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In life he gave us joy, in death he gave others joy as his organs and tissues were donated, so others could live. Endless smiles, big blue eyes and giant hugs that gave me the best feeling ever – are just a few things I will miss.

While we miss Corban, we will never forget him, knowing his spirit lives on in the lives of others provides us comfort. I wish you could have met our "little man" because you would have loved him.

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