CARE: A SPEECH

FOR

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Hi, my name is Joselyn. Tonight I want to speak to you about a simple word that has so many meanings, especially to people who do what we do. I have been a critical care nurse for the past six years. I work in the Intensive Care Unit at the hospital where I work. I care about my job. I care about my patients, and I care about all of you. The word “care” means so much to each one of us, and it has so many different meanings as well. Think about it. As nurses, we care for our patients, we have a team that works with us providing care, and the care we give to all around us helps to hopefully restore people to health.

The ICU patient has life threatening injuries or illnesses that require very special care and attention. The patient in an intensive care unit has complicated health care needs and there are many reasons and conditions that require such constant and close care. The patient may have been in an accident. He or she may have a life threatening illness. They may require serious surgery. Without the very critical care provided in the ICU, patients in such serious conditions might otherwise die. The care we provide to those who are sick or injured can mean the difference between life and death.

As nurses, there are so many different ways to provide care in such critical situations. We must be prepared at all times and know how to give the care that is so important to our patients’ survival. We must care about what we do and how we do it. To sustain life, the patient may have to be placed on cardiac monitors, ventilators, external pacemakers, dialysis, or possibly balloon pumps to mechanically reduce body temperature. Patients may have abnormal blood pressure, irregular heartbeats, low blood count, or they may not be able to breathe on their own. Very strong drugs may be required to treat patients. As nurses, we must care about all of the conditions we may see, and we must know how to care for and heal the sick and injured.

Patients that are admitted to the ICU have very special and critical needs. They may come to the ICU after being treated in the emergency room. They may be brought to the ICU if their condition gets very bad and requires more constant care. When a patient’s condition gets really bad, a code is called and the health care team responds, providing the necessary care to hopefully assist the patient in getting well again. Each emergency code means something different, and as nurses we are trained to know how to provide care in each emergency situation.

We all work within a team of very specialized health care providers. We must care about our team to make sure we can save lives as much as possible. The health care team includes doctors, residents, interns, nurses, respiratory therapists and pharmacists.

If a patient’s heart stops beating, the code for that emergency is called. The team knows that they have to give CPR, cardio pulmonary resuscitation. This is given until more people from the medical rescue team appear, and then the doctor in charge will direct his team to continue more efforts to revive the patient. The doctor has to decide what treatment would work best. He may choose to administer more drugs, provide defibrillation, and instruct which medications to give, when to shock and when to terminate the code. If necessary, the respiratory therapist will assist with anesthesia or possibly set up a ventilator and check to see if the patient’s blood is properly oxygenated. The pharmacist will help to prepare and provide any medications ordered for each patient. The nurse and her team are possibly the most constant part of the care team. One nurse may take the patient’s history, a second may administer medication and life saving intravenous fluids, and a third will record patient data. The nursing team carefully monitors the patient, checking vital signs, and making sure the patient is as comfortable as possible. These medical teams must have their wits about them at all times. As I describe these procedures to you, it may seem very orderly and calm, but when you consider that everything is going on at the same time in a very crowded space, you can imagine how important it is to stay focused on treating the patient and helping him or her to heal and survive.

I remember a young 23-year-old girl. She had a blood disorder. I was working the night she was admitted to the ICU, breathing tube in place, and bags of intravenous fluids were being administered. I remember her family waiting in the corner of the small room, and as we tried with all of our might to save this young girl, her family cried and begged the doctor, “We know to you she is a patient, but to me she is my daughter. God, please don’t take my daughter.” Marguerite was coded for 2 long, impossibly hard hours. The team tried everything to save this girl, but in the end, she passed away. I am sure the team was almost as grief stricken as the family. I am sure we thought of this poor girl’s fight, her family and the loss they now had, and we thought of our own families and how we might feel if this had happened to someone we loved. Every case is different and some end in tragedy.

We always must remember the word “care.” We must think of the patients we care for. Someday it might be one of us or one of our loved ones in the bed waiting to be treated. We must think of the team around us, that we are a part of, that provides such important care to the patient, and we must think of the care we provide. Remember to care about what you do, who you work with and how you treat people. Always care about caring.

Thank you all.