Responding to a medical situation off duty: it doesn’t seem like it really happens, until it does. If you choose to respond to a medical situation when you are off duty, then there are some important safety elements you should consider. I will speak from my experience as an EMT, and I am not giving absolute direction on what you should do. You must use your judgment skills to assess a scene for safety and provide appropriate care.

Never run to the scene. Running increases the tempo of your thoughts and the anxiety of the people around you. As a result, you may miss important scene details or make an error in haste. Your approach to the scene should be slow enough for you to evaluate for safety and identify escape routes if you must retreat quickly.

Consider where you are and what’s around you. Are you on the road responding to a fallen motorcyclist? Are you in a grocery store? Are the attacker’s whereabouts unknown, and will they come back to continue to harm? Does anyone have a weapon? Are there wires, broken glass, or noxious fumes present? Are there other people in your party that may be put at risk if you stop to help? Elements of your environment can put you at risk for becoming a patient yourself. If the scene is unsafe, sometimes it’s better to call 911 from a safe distance and provide information than it is to join the scene and become injured.

Do you have the equipment you need to take standard precautions? It’s possible for you to be exposed to bloodborne pathogens if you do not have the appropriate safety equipment. If you find someone who is not breathing, or who is bleeding profusely, it is your call whether you want to risk exposure.

Every scene is different. The most important action you can take is by calling 911. You often do not have all the resources you need to properly care for this patient. Therefore, you should activate the system to send you the people that do. When you are talking to the 911 dispatcher, describe the facts of the scene. For example, if the patient is not breathing, tell the dispatcher that the patient is not breathing. This provides information to the responding Fire and EMS crews as they drive over. If a patient does not have a pulse and if you do not have a barrier mask, you can do continuous chest compressions until crews arrive with oxygen.
OFF DUTY: Continued from page 1

equipment. The more quickly the 911 system is activated, the sooner help will arrive, and improve patient outcomes.

Before you leave the scene, talk to every agency that’s involved to see if they need something from you. For example, the medics may have told you that you can stop CPR, but the cops still need to get a story from all witness-
es. Don’t leave until every agency has cleared you, and you will save yourself the headache of having to return to the scene to provide the information.

During the situation, you may have seen something traumatic or experienced critical incident stress. It is important for you to debrief and grieve as needed, and seek help doing so if you are having trouble doing it on your own. It can be hard to figure out how to grieve for a stranger that you tried to help but that ended up dying on scene. Always protect yourself physically and emotionally when responding to a medical situation, for you won’t be able to care for others if you become injured yourself.

Tips for Professional and Effective Communication with Faculty

By Micheal Strabala
CNSA Undergraduate Rep
4th Semester

Communication is one of the cornerstones of nursing. Whether providing patient teaching, seeking information from another member of the interdisciplinary healthcare team, or clarifying concepts with instructors, nursing students are constantly communicating. However, the rigorous pace and pressure of nursing school requires great amounts of time and energy from Sacramento State nursing students as well as School of Nursing faculty. In a stressful world where everyone is trying to fulfill many competing demands, professional communication often suffers—Ain’t nobody got time for that!

Do not fear, however! The following are three helpful tips to ensure professional and effective communication with School of Nursing faculty.

1. Face-to-face communication is always best. No matter what it is you want to discuss with faculty, try your hardest to accomplish it face-to-face. Make an appointment during office hours. Stick around after lecture to ask your question, or ask when would be a convenient time to set up a meeting to discuss your issue. One of the biggest advantages in using this method of communication is that it establishes rapport. If you want your faculty to remember you and your specific issue, it is best if you can talk face-to-face.

2. Always be professional, courteous, and respectful. If you are communicating via email or text message, always introduce yourself. One such example is, “Good morning, Professor [X], My name is [X], and I am one of your students in [X]. I’m writing to ask about…” Be specific and concise in your communication. Some faculty will provide you with explicit instructions on how they wish to receive email or text communication from you—follow these instructions explicitly! In addition, address your faculty with the respect s/he deserves; never forget that you are addressing your instructor, so avoid communication that is casual. When you give appropriate respect, you will receive it in return.

3. Be patient and realistic about response time. This one is important, because you are not the only one that wants or needs something from your faculty. School of Nursing faculty members maintain many professional contacts, and therefore have very busy schedules. If you are communicating via email or text, you need to understand that many faculty members receive hundreds of emails every week. Every single week! Be mindful that any email or text communication is likely to require at least 48 business hours before you can expect a response. Remember and respect that your faculty will address your concern or question, you just need to allow them appropriate time to do so. If you have an issue that cannot wait that long, then you need to reconsider whether emailing or texting is the wisest option in the first place.
I can’t imagine nursing without a clock. As a student, I am seemingly bound to it. At home, I set alarms to ensure my body wakes up at times that it’s not physiologically able to do so on its own. On testing days, I watch the countdown timer of my N123 exam dwindling. In clinical, I follow the second hand on my wristwatch as I attempt to count the number of my patient’s weak, thready pulses in half a minute. In class, during lectures, I obsessively observe the dial on the wall as if my pedantic gazes will some how speed up time.

And when the closing bell finally does sound off, how do I embrace my “free time” off the clock? Do I enjoy the company of other humans, perhaps in an hour that is happier than most? That sounds nice, but not likely. Do I do my body a service and go on that 3-mile run that I keep promising myself? Ha, that’s a good one. Or, do I simply lie in bed alternating between an ineffective cycle of mindless app switching on my phone and staring at the ceiling while staving off the existential dread? That’s beginning to sound a lot more like my time off the clock.

But then I have these rare moments where I’m volunteering on a burn unit and I’m helping to change out all the dressings of a patient with full thickness burns across 90% of his body. He is intubated, ventilated and unable to speak. Suddenly it hits me that this person would probably love to have just one minute “off the clock” from his problems. Perspective can be a funny thing. Maybe I’ll keep this in mind next time I’m off the clock, staring at my timepiece with a level of anxiety befitting of a Woody Allen movie.

UCDMC Externship: What It Is and A Few Helpful Tips

By Joseph Yoga
CNSA BTN Post-Entry Coordinator
3rd Semester

In January 2017 I started the externship program at the UCDMC Medical ICU, and what a wonderful experience it has been for me. Although the tasks of a Student Nurse Extern are somewhat more limited than those of a nursing student, there are plenty of things that keep me busy throughout my shift. My duties include providing hygienic care, repositioning and transferring patients, measuring vital signs and I&O’s, stocking the supplies in the patients’ rooms, charting in the EMR, and assisting RNs in procedures and assessments; however, I am not allowed to handle medications, draw or administer blood, insert or remove IV’s or feeding tubes. Every work day at the MICU is a chance to learn more about efficient nursing care on critical patients. I witness medical procedures such as para/thoracentesis, intubations, dialysis, and arterial line starts. More importantly I am able to help patients get better. The externship is a great opportunity to impress the nurses and the unit managers with my work ethic and to build connections with other hospital staff. Furthermore, it exposes me to how the unit operates, hopefully increasing the likelihood of me getting hired there when I graduate – it is a great resume booster!

There are limited spots offered for the nurse externship at the UCDMC, so here are some helpful tips.

1. Make connection with your nurses and other staff members during clinical. The units you are placed at may be hiring; they may look for potential employees, and your nurses are great references for the unit managers. That being said, the externship is not exclusively for nursing students who have had UCDMC for clinical; there are externs who have never been at UCDMC before. Even if you are not placed at UCDMC for clinical, the managers may reach out to your hospital units for recommendations.

2. Show your interest to the hiring managers during the interview. They will not know that you want to work at their particular units unless you tell them or give some obvious hints. Ask what they expect of their current and potential employees.

3. Seek out opportunities. Be proactive both in and outside of school: join nursing organizations, volunteer at clinics, and apply to internship/externship programs. All of us nursing students have impressive academic backgrounds, but these extra things can separate us from the rest of the applicants. Good luck!
Second semester students representing Sac State Nursing at a career fair at Union Mine High School. Left to right, Jason O'Keefe, Melissa Linck, Brittany Shaw, and Deanna Lamy.

First semester students put on their white coats, as they are welcomed to the nursing profession. Congratulations!

Fourth semester student Kaite Sippel and third semester student Angela Maguad having fun learning body parts in Spanish during the Wednesday night medical terminology course. Muy Bien!
Keep Calm, You’re Moving on Up!

Second semester students showing their yellow badge pride!

Fourth semester students ready to graduate!

Class of Fall 2018 students welcomed into Sacramento State’s School of Nursing.

Third semester students are ready to go green!
Are you man enough... to be a nurse?

Buy your Men in Nursing T-shirts today!!

Important Upcoming Dates

April 12 (Wednesday):
Career Fair
2:30pm-5pm room1049

April 14 (Friday):
CNSA member meeting
4:30pm room 1050;
Election day!

April 28 (Friday):
Men In Nursing Meeting
4:30pm room 1050;
Kaiser new grad residency info!

May 18 (Thursday):
Pinning for 4th semester students

May 20 (Saturday):
Graduation Commencement

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www.facebook.com/SacStateNursing

Submit pictures for the Monthly Shot!

For each issue, it is nice to see pictures of you and/or your nursing school buddies doing awesome nursing-related activities! Become a celebrity and submit pictures for the May issue! Send pictures today to:

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