



salute to NURSES

An edition of The Daily Independent

Its Your TIME

GROUP WANTS TO DOUBLE THE
AMOUNT OF MALE NURSES BY 2020

LIVING LEGENDS

AAN HONORS
FIVE FOR
LIFETIME
CONTRIBUTIONS

PART OF GATEHOUSE MEDIA'S



COMING INTO YOUR OWN

EXPERTS' ADVICE TO FIRST-YEAR NURSES



A HEARTFELT *Thanks* FOR ALL YOU DO

Ridgecrest Regional Hospital Honors our Diverse and Incredible Nurses that Make a Difference Every Day.

Thank you to our Amazing Nursing Team for your tireless work and dedication!

We rely on nurses in so many of our departments. From infants to the elderly, our nurses impact the lives of their patients at every stage. Each of the following Ridgecrest Regional Hospital departments has nursing staff or management:

Bella Sera

Cardiopulmonary Services

Care Coordination

Case Management

China Lake Community

Care Clinic

Education

Emergency Department

Employee Health

Home Health, Hospice,

& Private Duty

Healthy Bone and Joints

Human Resources

ICU/CCU

Infection Prevention

Information Systems

Maternal-Child Services

Mountain View

Outpatient Services

Quality Improvement

Rural Health Clinic (RHC)

RHC-Cardiology

RHC-Dentistry

RHC-Mental Health

RHC-OB/GYN

RHC-Pediatrics

RHD-Podiatry

RHC-Trona

*Southern Sierra Medical
Clinic*

*Southern Sierra Specialty
Clinic*

Dermatology Clinic

Gastroenterology

General Surgery

Surgery

*Transitional care &
Rehabilitation Unit (TCRU)*

Urgent Care Clinic

Utilization Review

Women's Health

Specialists

FROM ALL OF US TO ALL OF YOU
THANK YOU!



CONTACT US
Phone: 760.375.4481
Fax: 760.375.4880

EDITORIAL
jbennett@ridgecrestca.com

ADVERTISING
pmckay@ridgecrestca.com

CIRCULATION
rconnors@ridgecrestca.com

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The latest in nursing gadgets

By **Melissa Erickson**
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Handy gadgets can make a nurse's work easier. Check out these favorites:

3M Littmann 3100

Electronic Stethoscope

Allheart.com
\$360

If you're looking to upgrade from an age-old classic, an electronic stethoscope offers plenty of tech-savvy features including amplification, audio output and noise reduction, while retaining the design and function of a traditional stethoscope. Easy-to-read backlit LCD display includes frequency selection, sound level, remaining battery life and patient's heart rate. Lightweight and comfortable to use.



Badge Blooms Retractable

Badge Holder

etsy.com/shop/badgeblooms
\$9

A retractable badge holder will get you quickly past locked doors and time clocks. Just because it's dependable, though, doesn't mean it has to be boring. Show off your ID and your style with an eye-catching badge holder from Badge Blooms, a company owned by a nurse-turned-entrepreneur. A portion of proceeds go to support the Save Abandoned Babies Foundation.

PhysiciansCare by First Aid

7-inch Bandage Shears

Amazon.com
\$10.28

You can pay much more, but these scissors with titanium-bonded blades will effortlessly cut gauze, tape, clothing and bandages and resist the stickiness of tape and glue. Sharp, lightweight and easy to use.



THE CAP AND CAPE

In the late 19th century, as nursing was founded and respected as a worthy and necessary profession, all nurses wore caps to cover their hair for sanitation.

The caps were designed so that a nurse could pull her hair back completely and secure it in a bun that would be covered by the cap. They were, in fact modeled after a nun's habit in order to keep hair neatly in place.

In the early 20th century, caps changed in style to a smaller, starched-white cap that instead of covering the hair, rested on top of the nurse's head. This modern style was also accompanied by another new piece to the nursing uniform: the cape. By this time, most nursing schools had their own distinct design, which ended up signifying where a nurse had received her training.

This was the beginning of the cap becoming more symbolic than practical. It became a fashion piece that represented the compassionate nature and trustworthiness of the nursing profession.

Famous Piece of Tradition

The most famous nursing cap was perhaps the cap worn by the graduates of the Bellevue School of Nursing in New York.

According to the National Library of Medicine, the cap, which resembled a white cupcake liner or coffee filter turned upside down with its sharp pleating and round shape, was known as the "Bellevue Fluff."

Capping

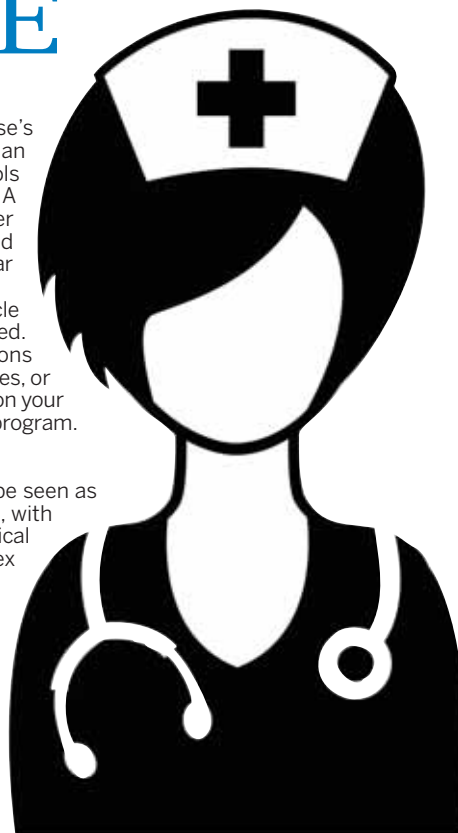
The cap also signified a nurse's knowledge. In fact, "capping" became an important ceremony in nursing schools performed in front of family and friends. A nursing student would receive her school's cap either after a designated period, such as completing the first year of training, or at graduation.

The nursing cap also became the article through which rank could be distinguished. Many schools followed military traditions and chose to classify rank through stripes, or a sort of colored band; sporting a band on your cap identified a nurse as a senior in her program.

Cutting the Cap

Eventually, the nursing cap came to be seen as impeding on patient care. In the 1980s, with the introduction of "scrubs" in the medical profession and the desire for a unisex uniform, the cap all but disappeared.

There are still many developing and developed countries that employ the nurse's cap, including Japan and South Korea. Even though the tradition has faded within the day-to-day of the profession in the United States, the cap still holds significant symbolic value as a representation of service, trust and dignity.



FIRST-YEAR NURSES

By **Melissa Erickson**
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A career in nursing promises to be rewarding, but with every new path comes challenges. Here are a few words of advice from experts to new nurses.

“Your first year as a new nurse is key to your career success. During my first year, I carried an index card in my pocket and wrote down things I wanted to look up after work when I got home. For example, why is this drug used for this problem? Why is this lab test important in the diagnosis? Why is the heart rate abnormal? Is this endocrine problem? This was a wonderful habit, and my knowledge at the end of one year had markedly improved. It also set me up for lifelong learning. I believe this activity in my first year set me up for success in nursing.”

— *Registered nurse Kathleen D. Pagana, author of “The Nurse’s Etiquette Advantage”*

“My best advice is to join and get active with the American Nurses Association at both the national and state levels. You have to immerse yourself in the community of nursing. You can’t stay isolated in the profession and succeed. Networking and meeting people are ways to find cutting-edge knowledge. And build a support system. If you want to do something well, you have to rub shoulders with others who are successful in the same field. Also, at the state level, reduced memberships are offered for first-year nurses, and

professional dues are often tax deductible if you itemize.”

— *Registered nurse Donna Cardillo, also known as The Inspiration Nurse and author of “Your First Year As A Nurse: Making the Transition From Total Novice to Successful Professional”*

“Advice to a new nurse would be to network in-person at the facilities where you’d like to work. Oftentimes, hospitals have a day each month where they perform open-house-type events to advertise their open positions and meet on the spot with one of their recruiters. Use this opportunity to make a good impression with your appearance, and have multiple copies of your resume to hand out. Also be prepared to answer interview-type questions such as knowing your strengths/weaknesses, answering common clinical scenarios specific to that unit, and discussing how you work in teams or handle a particularly stressful situation. Also, apply for positions on the institution’s website, but be aware that they often receive numerous resumes that exceed the number of available positions. The key is to stand out and make a good, long-lasting impression.”

— *Stephen A. Ferrara, associate dean of clinical affairs and assistant professor at Columbia University School of Nursing*

“The most important piece of advice I have for new graduate nurses is to get comfortable asking questions.



They need to know that it's OK to say 'I don't know' and then seek the answer. They shouldn't be afraid to ask for help ... doing so will prevent errors!"

— *Rebecca Maley, student success coordinator, University of Michigan School of Nursing*

"To the new nurse:
Be open to and look for opportunities to learn something new.

Keep the patient and family the focus of your care.

Always understand the reason or rationale behind everything you do.

If you don't know something, look it up or ask a trusted mentor.

You are an important member of an interprofessional team — build these relationships, gain their respect and trust.

Be accountable — own your own practice. If you make a mistake, report it and learn from it.

Become a fierce advocate for your patients and families.

They are overwhelmed and often totally confused by what is happening — you are there to guide them, teach them and be their voice so they are heard."

— *Susan Grinslade, assistant dean for undergraduate programs and clinical professor, University at Buffalo School of Nursing*

"I would encourage nursing students entering the workforce to find a position where they can enter into a nurse residency program (not all health-care organizations offer these). Residency programs are designed to support new nurses (education, mentorship, etc.) during the first year of practice and are associated with much lower attrition rates."

— *R. Shelly Lancaster, associate professor of nursing, interim assistant dean/director of outreach and college relations, University of Wisconsin Oshkosh College of Nursing*

"If you don't know something, look it up or ask a trusted mentor.

You are an important member of an interprofessional team — build these relationships, gain their respect and trust."

SUSAN GRINSLADE

"The best piece of advice that I would give a new nurse to help jump-start their career is to network while they are going through their clinical rotations. Have them understand that developing effective networking capabilities will take them further than their education level. Effective networking begins with understanding that networking is building relationships. Take the time to build relationships with nurses they admire and would seek to role model. The adage is true, 'it isn't what you know it is who you know.' I don't think anyone addresses this issue when student nurses are rotating through clinical settings, and it is one of the most valuable pieces of advice for the success and longevity of their nursing career."

— *Registered nurse Michelle Podlesni, president of the National Nurses in Business Association*

WHAT NURSES REALLY DO



Nurses play critical roles in hospitals, rehabilitation centers and various other care facilities. The template of the caring, compassionate nurse from years gone by — the stereotype that still exists today — at times overshadows all of a nurse's real responsibilities.

This is not to say care and compassion aren't key traits that successful nurses have and employ, but they are much more than "nurse maids."

Here are some of the most pressing roles of a nursing professional:

- Nurses in emergency departments are often tasked with triaging patients based on their own expert assessment.
- Nurses require state and federal certification or licensing, and many hold advanced degrees from notorious programs.
- Nurses are responsible for coordinating patient care with physicians, physical therapists and social workers, among others.

- Nurses found and run health care systems for under-served communities, providing care to patients struggling with substance abuse, various forms of violence and prenatal care.

- Nurses can be doctors. Nurses can earn a doctor of philosophy (PhD) or a doctorate in nursing practice (DNP).

- Nurses must earn continuing education hours every year to stay informed of current and new trends and technologies in the field. Medicine is constantly evolving, and it is imperative for nurses to keep up.

- In fact, according to a 2001 World Health Organization report, nurses and midwives make up between 50 percent and 90 percent of the number of health practitioners in numerous countries.

- Nurses forge new ground in health care, having been responsible for founding the Red Cross and Planned Parenthood, as well as the development of mental institutions and the Nurse Army Corps.

LIVING LEGENDS

Nursing group honors five for lifetime contributions

By **Melissa Erickson**

More Content Now

Compassionate, driven, caring, trustworthy and dependable are just some of the words that describe nurses. For five outstanding people in the nursing profession, here are two more: Living Legends.

The American Academy of Nursing bestows its highest honor on four to five nurses each year, naming them Living Legends. These eminently accomplished pacesetters have made huge contributions in nursing and health care over the course of their careers.

Here are the most recent recipients, along with a brief description of the multiple contributions they have made to nursing that continue to reverberate throughout the health services field today.



LINDA BURNES BOLTON

A renowned champion of community nursing and a global advocate for empowering communities of color to actively participate in their care, Burnes Bolton has been committed to enhancing patients' health literacy and increasing diversity within the health profession. "I stand on the shoulders of nurses in science, academia, practice and community that have contributed to improving health and health care across the world," she said.



ANN WOLBERT BURGESS

This Connell School of Nursing professor is a trailblazer in the study of the impact of trauma and abuse on victims. A professor of psychiatric nursing at Boston College, Burgess is a pioneer in the field of forensic nursing, which is the intersection of law and nursing. She has worked with the FBI to study links between child abuse, juvenile delinquency and subsequent perpetration, and her current research focuses on elder abuse in nursing homes and military sexual trauma. "Nursing is a wonderful career. Nursing offered me not only the opportunity to care for patients but to continue to do research and advance nursing science," she said.



JOYCE J. FITZPATRICK

Previously serving as the dean of the Frances Payne Bolton School of Nursing at Case Reserve Western University, Fitzpatrick is best known for her contributions toward advancing the science of nursing education at universities and health ministries around the world. From developing educational interventions on HIV/AIDS prevention in Uganda to designing a 10-hospital project to improve the nursing care provided to elders, her research has been focused on meaningfulness in nurses' work lives related to satisfaction, turnover and empowerment.



MARTHA HILL

Recognized around the globe for her research projects, Hill's expertise focuses on vulnerable and underserved populations. Her work has been instrumental in the prevention and treatment of hypertension and its complications, particularly among young, urban African-American men. As dean of the Johns Hopkins University School of Nursing from 2001 to 2014, and a member of the faculty since the school was established in 1983, she has played a major role in mentoring nurses, students and physicians as clinicians and researchers.



COLLEEN CONWAY-WELCH

Conway-Welch said she is most proud of starting a "bridge" program at Vanderbilt University where college graduates in other majors can complete a bachelor's of science in nursing program in 12 months and go right on to complete the master's in nursing science in 12 months. "I am also most proud of being a nurse-midwife and starting Vanderbilt's nurse-midwifery education program as well as the clinical program, and achieving a birth center. We do over 1,600 deliveries a month," she said. "My credo: One gets power by giving it away."



HAPPY NATIONAL NURSES WEEK

Thank You
Just isn't enough...
but it's a start!


Ridgcrest
REGIONAL HOSPITAL

CELEBRATING 2017
NATIONAL NURSES WEEK
MAY 6-12

Nursing Profiles



Daphne Unhassoiscay, RN

I always knew I wanted to be a nurse and care for others. My mother was a wonderful nurse and as I was growing up I watched her and we would run into patients and they would thank her and were so appreciative of the way she cared for them. I wanted to be like her and help others. My mother taught me to be compassionate and nursing is the perfect field to give compassion to others.

I started working as a phlebotomist at Drummond Medical Group in 1981. I graduated from the Cerro Coso LVN program in 1984 and continued working and

going to school and became an RN in 1996. In 2001, I decided to quit nursing and start a Family Child Care. My son had been born and I wanted to spend time with him as he was growing. When he turned 16 years old in 2014, God began to speak to me about going back into the nursing field. Ridgecrest Regional Hospital blessed me with the opportunity to return to nursing. I'm very grateful to be a nurse and to work with the awesome staff at Ridgecrest Regional Hospital. Being able to be a part of an organization that cares for patients and also this community is a great gift.

More about

Daphne Unhassoiscay, RN

HOMETOWN
Ridgecrest

EDUCATION
LVN, Cerro Coso
Community College
Graduate
AS, RN
New York University

Nursing Profiles

Leanne Burt, RN

I come from a family with many nurses throughout the generations. My mom is a nurse, but she didn't push my sisters or me toward the profession. I contemplated several professions while growing up, eventually deciding I liked the idea of becoming a nurse.

I started my education in a pre-nursing program in Ohio. When it came time to enter into a BSN program, I jokingly asked my parents if I could transfer to a program in San Diego. To my surprise, they said yes! While in San Diego, I joined the Navy, met my husband & had our 1st son; graduating with my BSN in 1991.

The Navy took us to Great Lakes, IL where we spent the next seven years and had our second son.

In 1998, we returned to Ohio to be nearer family. We spent three years there before I was enticed by a recruiting agency to come join a community hospital in the beautiful desert setting of sunny Southern California (they forgot to mention the heat & wind!). I have worked in many different settings throughout my career, but I must say, I like this one the best.

I have been a night shift Administrative Nursing Supervisor at RRH since 2001 & I enjoy the roles I play & the work that I do (most of the time!). The staff works well together to meet the nightly challenges we face. Night shift is where I excel & no one can drag me into the light! Thank you RRH for being a good fit!



More about

Leanne Burt, RN

House Supervisor,
Nursing Administration

HOMETOWN

Seville, Ohio

EDUCATION

BSN, Point Loma Nazarene College (University)

Diane Alexander, RN

As a native Californian attending public schools, the idea of becoming a nurse never entered my mind. I attended community college and eventually UC Berkeley where I met my husband, got married, gave birth to our first child, and completed a BA in psychology--in that order. I became a licensed pilot, thinking aviation might be a career path, but after realizing I was too short to be an airline pilot, I began taking the science prerequisites for a career in health care. I decided to go into nursing because I thought, correctly, that I could get a job anywhere.

We moved to Virginia where I earned a BS in nursing at George Mason University. Our search for greener pastures took us to New England and I got my first nursing job at Dartmouth Hitchcock Medical Center. There, I worked as an IV nurse and in neurology, as well as in oncology where I first had the opportunity to work with people at the ends of their lives. When our son was almost through high school and I was contemplating more education to become a nurse practitioner, our second child came along and plans changed. I took a job as a school nurse and librarian in the

small Vermont elementary school that he would attend. Nine years later, we moved to Albuquerque and I knew it was my time to become a hospice nurse. I found my niche in hospice and would never do any other kind of nursing. I have a passion for helping patients die comfortably in the setting of their choice. Our most recent move brought us to Ridgecrest where I am enjoying part-time hospice work and the small town. When we leave here we'll retire in New Mexico.

I've always had lots of hobbies, and now I concentrate on quilting, weaving, and silversmithing. When it gets hot in Ridgecrest, I spend time in Missoula, Montana, where our older son and his family live and our younger son attends the University of Montana. We also have a small RV and enjoy escaping to the cooler temperature in the Sierras.

I definitely made the right choice by going to nursing school because being a nurse has provided me with a very fulfilling career of which I can be very proud. I've touched many lives and had the opportunity to meet incredible people from all walks of life.



More about

Diane Alexander, RN

Hospice

HOMETOWN

Whittier, CA

EDUCATION

BA, UC Berkeley
BS, George Mason University

Barbara Dolan, RN

I am so happy that I had a mid-life crisis; the experience has completely changed my life! My husband accepted a job at China Lake in 2009. Because of the move to Ridgecrest and the "Worst recession since the great depression", I ended up sacrificing a hand-made soap and lotion business that I owned and loved. New to the community, endless time on my hands, and with the support of my husband, I decided to attend college for the first time in my life.

I registered at Cerro Coso Community College with the goal to become a Hospice nurse. I now have two Associates degrees, one in Math & Science and one in Nursing. I completed the LVN program in December 2014,

sat for my nursing boards, and became a Licensed Vocational Nurse in April 2015.

I have been working as part of the Hospice team at Ridgecrest Regional Hospital ever since. I strongly believe in the Hospice philosophy, to provide palliative care for patients that are at the end of their lives. Providing support and guiding our patients and their families through the dying process can be very challenging. What moves my heart is the commitment and love I witness every day by all the spouses, families, and friends that allow the terminally ill person to die in the place of their own choosing, with dignity, and in peace.



More about

Barbara Dolan, LVN

Hospice

HOMETOWN

St. Helens, Oregon

EDUCATION

AS Nursing,
CCCC, LVN Program

Nursing Profiles

Ruth Zerby, RN

I was born and raised here in Ridgecrest, as the child of one of the few families that did not work on the base. It was when I was a child after getting a toy doctor kit that I began thinking about a career in healthcare. From there I continued to think along the lines of healthcare as my love for science and math grew. Initially I thought I wanted to be a neurosurgeon. In high school, I took the ROP class of health careers at Burroughs and had my first opportunity to work directly with nurses.

After high school, I needed money for college so I enlisted in the United States Army as a medical specialist (medic). It was here working in various positions including the OR (operating room) that I learned a few things. One, nurses were the ones who had the most personal touch with their patients and often the greatest impact. Two, I actually hated the OR (operating room). So, I began to look into nursing schools. Thanks to the recommendation of some wonderful nurses (from both my health career days and the Army) I was able to get into the vocational nurse

program here at Cerro Coso and graduated in 1989. At that time, there was no local RN programs in Ridgecrest and life events such as having children, getting married and later divorced delayed my career some. I then remarried a friend from high school who was in the Navy. We moved to Oak Harbor WA and it was here that I had the opportunity to finally go back and obtain my RN. So, in 2009 at the age of 44 I obtained my RN, associate degree. After my spouse retired we returned to my hometown of Ridgecrest. I then obtained my bachelors in 2015 and am now working on my Masters in nursing to become a Family Nurse Practitioner. My family, especially my now adult children, have been my biggest supporters in my nursing career.

Over the years, I have worked in many areas of nursing from pediatrics to elderly, from outpatient to inpatient and currently work in Home Health and Hospice. Overall, I can honestly say I love people and enjoy helping them through difficult situations.



More about Ruth Zerby, RN

Home Health

HOMETOWN
Ridgecrest, CA

EDUCATION
Cerro Coso Community College for ADN, Skagit Valley Community College BSN, Grand Canyon University MSN/FNP, Currently attending Walden University

Warner Fellows, LVN

In 2010, I enrolled in the Cerro Coso CNA program and got to experience working in Ridgecrest Healthcare Center for the first time. I was extremely shy at first but eventually became quite comfortable as I got to know the residents and staff members. Much to my surprise, I found that not only did I like working in the nursing home, I actually loved it!

I was promoted to RNA in 2013, where I enjoyed greater challenges and responsibilities. I got to work with a great team to promote active healthy lives for our residents and to participate in problem-solving some of our unique challenges. In 2015 I began the Cerro Coso LVN program, which at the time felt like the best and worst decision of my life. The program was

stressful, challenging, progressed quickly, and I loved every minute. I got my nursing license in 2016 and continue to work at Bella Sera.

If you were to ask me if I wanted to be a nurse when I was growing up, I would have said "heck, no" and said that I wanted a career in computers/programming. When I started as a CNA in 2010 I didn't really see myself being a nurse either. Now, I can't really see myself doing anything else. I love what I do and feel that nursing was always my true calling, even if I didn't see it earlier. I enjoy the team I work with at Bella Sera and look forward to continuing to help shape and better the future for our residents.



More about Warner Fellows, LVN

Bella Sera Transitional Care Unit

HOMETOWN
Beaufort, SC

EDUCATION
LVN, Cerro Coso Community College BS, Computer Information Systems

Tarah Hill, RN

Both of my parents are in the medical field, so I've been exposed to the challenges and rewards that this career field offers for as long as I can remember. I watched them work 12+ hours on days, nights and weekends or get called in on a day off for an emergency. As a kid, I didn't understand and would complain when I'd have to be quiet all day because my mom had to sleep after she worked all night in the ER or ICU. I thought she was being overprotective when she would warn me of what could happen if I didn't wear my helmet or seatbelt. It wasn't until I became a nurse myself that I understood what she was talking about! She had seen it all.

After graduating high school, it took me a couple college semesters to figure out that nursing was the right choice for me. I was hired at RRH in 2002 as a phlebotomist, then worked part-time as an ER tech while going through school. Once I was in the program, I gave it everything I had. I remember feeling so overwhelmed and intimidated by the seriousness of caring for someone who is so close to death or, on the

opposite end, helping to bring a baby into the world safely.

I still have so much admiration for my nursing instructors, preceptors and fellow students in Bakersfield who helped me gain the maturity, skills and confidence to find my purpose.

After graduating with my BSN in 2006, I came back to RRH and transferred from ER into the ICU. Over the years, I've had the privilege to float to multiple departments and to work with and care for some amazing individuals. I've shared laughs and tears with my colleagues, patients and their family members. I am grateful for the experiences and value the lessons I have learned and the people I met during my time in ICU. Last year, I accepted a position as an Infection Preventionist and have truly found my niche. I am passionate about providing quality care and I believe my current position gives me the opportunity to have a direct impact on promoting wellness and keeping our patients and staff members happy and safe.



More about Tarah Hill, RN

Resource Nurse/Infection Preventionist

HOMETOWN
Ridgecrest, CA

EDUCATION
BS Nursing California State University, Bakersfield

Nursing Profiles

Breanne Chromi, RN

I was born and raised in Ridgecrest and after graduating high school my aunt encouraged me to take a nursing assistant course at the community college. After completing the course I worked at the nursing home and was then offered a job by the Director of Nursing at Ridgecrest Regional Hospital. I worked as a nursing aid/unit clerk in the ICU. At this time, I was working on a major in microbiology- and became very interested in nursing once I started working in the ICU, thanks to my mentors Jenny Hugbo and Cindi Weidenkopf. After applying for the Earn to Learn program and having the opportunity to receive assistance for my education I worked on the Medical/Surgical floor as an LVN

while I was in the RN program.

I accepted a position in the ICU where I worked and began to grow as a nurse for the next few years. I transferred over to the ER to gain more knowledge and experience as an RN. I am now working as a Charge Nurse in the ED as well as the Emergency Medical System Liaison for all pre-hospital personnel and the Trauma Coordinator for our Level IV Trauma Center.

I have learned a lot while working as an RN and hope to learn so much more as time goes on. This job takes sacrifice, compassion, strength and some fear and I wouldn't give it up for anything.



More about

Breanne Chromi, RN

Resource Nurse/Charge/MICN Trauma Coordinator/EMS Liaison

HOMETOWN
Ridgecrest, CA

EDUCATION
LVN, Cerro Coso Community College
RN, Cerro Coso Community College
BSN, Ohio University

Mindy Olsen

For over 20 years, I have participated in the incredible changes to Ridgecrest Regional Hospital and to healthcare. It is my honor to serve the community. During my 35 year career I have performed in various nursing specialties ranging from Medical-Surgical to Home Health, medical office nursing to Interventional Radiology. I am grateful for the opportunities I have had in utilizing my skills in different disciplines of nursing.

Ridgecrest is my home. My husband and I raised three children here, and my oldest followed my footsteps into the RN profession. As both a community member and as a healthcare

provider, I have long advocated for comprehensive oncology services for our neighbors, family members, and friends who suffer from a variety of cancers. At RRH we are preparing to provide this service to the community to offer relief for those patients forced to travel long distances for care. Fortunately, my background in nursing has included the care of the cancer patient.

I am a proud advocate for my patients and recognize that care does not end in medical treatment. I believe healthcare encompasses the relationships with my patients and their families, extending far beyond recovery.



More about

Mindy Olsen, Resource Nurse

Outpatient Services, Outpatient Pavilion

HOMETOWN
Rapid City, South Dakota

EDUCATION
Dakota Wesleyan University, Mitchell, South Dakota

Michelle Kirk, LVN

I was born in Ridgecrest at Ridgecrest Regional Hospital I became a Certified Nursing Assistant in 2003 at Beverly Manor, with my Director of Nursing in the same class. In 2006, I became a Licensed Vocational Nurse, graduating from Career Care Institute in Lancaster, California. I started at Cerro Coso Community College in 2008 and continued my education in child development. I have worked in the Bella Sera facility off and on since 2003. I have also worked in such places

as Monterey park, Montessori, Santa Theresa, San Dimas Community Hospital, and Home Health.

I grew up in a family that always helped others; and, we always had lots friends come to visit. At 16 years old I helped take care of my grandmother who had a diabetes and dementia. After I started the Certified Nursing Assistant program, I decided I loved helping other people and being at a purposeful job making a difference in people's lives.



More about

Michelle Kirk, LVN

Bella Sera

HOMETOWN
Long Beach

EDUCATION
LVN through Cerro Coso, A.S., RN through Bakersfield College



Honor

YOUR FAVORITE NURSE

during National Nurse Week

The Development Foundation welcomes you to join us in honoring your FAVORITE NURSE.

The Grateful Patient Program at Ridgecrest Regional Hospital Development Foundation is a thoughtful way to show your gratitude to your favorite nurse for the exceptional care that you or a loved one has received.

When you make a gift of \$50 or more in honor of someone who has provided you or a family member with outstanding care, the person you are honoring will be sent an acknowledgement of your appreciation, along with a silk gerbera daisy.




RIDGECREST REGIONAL HOSPITAL
DEVELOPMENT
FOUNDATION

Every gift - regardless of size - makes a difference and is truly an investment in the health of our community..

For more information, please contact Tamara Tilley at (760) 499-3955 or email us at Development.Foundation@rrh.org. You can also find information or make at www.rrh.org.

IT'S YOUR TIME

Group wants to double the amount of male nurses worldwide by 2020



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"Instead of focusing on how men and women nurses are different, there really needs to be a change in thinking that a nurse is a nurse, no matter their gender."

**JASON MOTT,
AMERICAN ASSOCIATION FOR
MEN IN NURSING**

they should. I think one of the reasons for this is that there are not people who understand the mindset of these men in the population. Nurses are the people who interact with and provide education for their patients."

By Melissa Erickson
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As women are being encouraged to pursue careers in male-dominated fields like engineering and the sciences, more men are discovering the diverse opportunities in female-dominated nursing fields, with their relatively good pay, job openings and path to advancement.

After all, you can't put a gender on quality nursing care.

HISTORY

Nursing wasn't always a profession associated with women, and it began long before Florence Nightingale in the 1800s.

"The first nursing school was in India and opened in 250 BC. Men were the primary nurses until the mid-800s. Most male nurses before that time were either priests or in the military," said Jason Mott, assistant professor at the University of Wisconsin Oshkosh School of Nursing, and secretary of the board for the American Association for Men in Nursing.

Things changed in the 1800s, when men were not allowed to enter nursing schools.

"It wasn't until the 1950s that men were again allowed to enter nursing school and become nurses," Mott said. "One of the most famous male nurses is American

poet Walt Whitman. During the Civil War, he provided nursing care to wounded soldiers."

RECRUITMENT

Statistics show "the percentage of male nurses is 10 to 11 percent of the nursing workforce. This equates to approximately 350,000 male nurses in the United States," a number that has remained fairly flat in recent years, Mott said. But, that's an increase of about 7 percentage points since 1970, when male nurses made up about 3 percent of the industry, he said.

Male nurses tend to make more money than their female counterparts, according to a survey published in JAMA in 2015. The wage gap was between \$5,000 and \$10,000, and the study pointed to an adjusted wage gap of \$5,100 overall.

The American Association for Men in Nursing is actively recruiting men to enter the nursing profession with its "20 x 20" campaign. The goal is to have 20 percent male enrollment in nursing programs throughout the United States and the world by the year 2020.

"Nursing is a great profession. The pay is on the higher side. Plus, there is job security," Mott said. "Besides the financial possibilities for men in nursing, there are other tremendous opportunities. Traditionally, males as a whole tend to not seek health care as much as

In addition to those benefits, having a stronger male presence in nursing is an "opportunity to focus on men's health issues and strengthening the health of the general public. This is one of the biggest values that men bring to the nursing profession," Mott said.

BARRIERS

Within nursing men tend to gravitate toward certain specialties.

"These areas include the emergency department, intensive care unit, surgery and then certified registered nurse anesthetist for male nurses with graduate degrees," Mott said.

Do men face certain challenges or discrimination working in a female-dominated environment?

"It is true that many times, men are questioned about some of the care that they provide and that their care, especially providing intimate care, is sexualized," Mott said. "By having more men in nursing, this false image will hopefully go away."

"Instead of focusing on how men and women nurses are different, there really needs to be a change in thinking that a nurse is a nurse, no matter their gender. While they may do things a little bit differently, both genders are in nursing for similar reasons, mainly providing care for the patients they serve."



Ridgecrest Regional Hospital Nursing Staff

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**CELEBRATING 2017 NATIONAL NURSES WEEK
MAY 6-12**



By Melissa Erickson
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While the duties and responsibilities may be the same, nurses on the night shift are forced to sleep against the clock.

"Getting sufficient sleep is the key to maintaining alertness during night shift and during the drive home," said Ann E. Rogers, Edith F. Honeycutt Chair in Nursing, professor and director of graduate studies at Emory University's Nell Hodgson Woodruff School of Nursing. "Night-shift workers have higher accident rates on the drive home, and nurses have killed themselves or others because they have dozed off on the drive home."

Here are a few tips from Rogers to meet the unique challenges of working overnight:

- Being successful starts with scheduling. Make sure that you've scheduled shifts that allow you to get enough sleep after work.

- Be careful with your caffeine intake. Avoid drinking caffeinated beverages so that you can benefit from the arousal effects of caffeine when working nights. "Caffeine consumed in the first part of the night shift — midnight to 3 a.m.

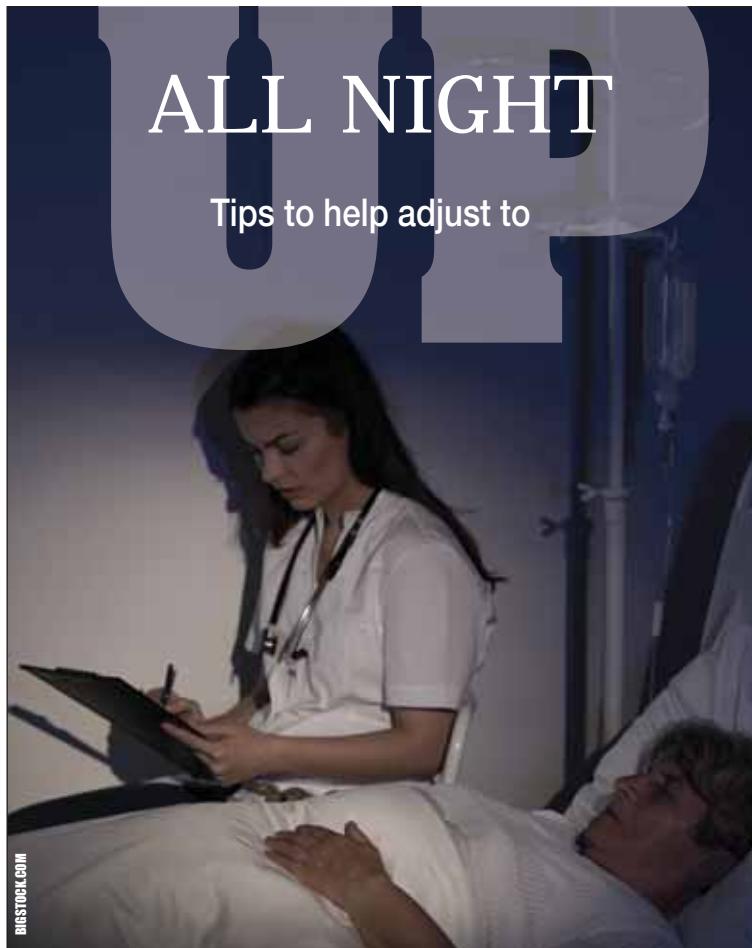
or 7 p.m. to 3 a.m. — will help alertness during the last half of the night and during the drive home," Rogers said.

- To get good sleep at home, "wear dark sunglasses on the drive home, use dark shades in the room where you sleep and turn off your electronics, including the phone," Rogers said. "There's no alternative to getting enough sleep, she said."

- In addition to creating a comfortable sleep environment, "keeping a normal weight will help a night-shift worker since those who are overweight or obese have more disrupted sleep whether they're working nights or not, and avoiding obesity will also

ALL NIGHT

Tips to help adjust to



"Although people often assume that night shift is quieter and less busy, it may not be, especially for nurses working in the intensive care unit or other high-acuity areas."

ANN E. ROGERS

reduce someone's risk of developing obstructive sleep apnea," she said.

- Maintaining a healthy work-life balance is difficult for many people, but night-shift workers have more to contend with. "Many shift workers shift back to days on their days off, thus allowing them to participate in family and community activities," Rogers said. "Night-shift workers should not be expected to keep an eye on their children during the day when they should be sleeping." It's a common strategy for parents to work opposite shifts to reduce child-care costs, she said.

- If you have to rotate a shift, "it's best to rotate

forward days to evenings (if the hospital has evening shifts — most don't), then evenings to nights," Rogers said. "It's easier for most people to stay up longer and very difficult to force yourself to go to sleep earlier if you rotate backwards nights to evenings to days."

- While some hospitals pay an hourly shift differential, not all places pay extra on nights, Rogers said. "Although people often assume that night shift is quieter and less busy, it may not be, especially for nurses working in the intensive care unit or other high-acuity areas," she said.

- Some night owls like working at night, but others can have an extremely difficult time. "They have what's called shift work sleep disorder," Rogers said. "When they are working days, they are awake and alert during the days and sleep well at night. However, when working nights, they have an extremely difficult time sleeping during the day and staying alert at night. Sleep specialists recommend that they do not work night shifts but, if that is impossible, may prescribe medication to help them remain awake and alert on the job."

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HAPPY NATIONAL NURSES WEEK

Thank You

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but it's a start!

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