



LIFELINE

NEWSLETTER

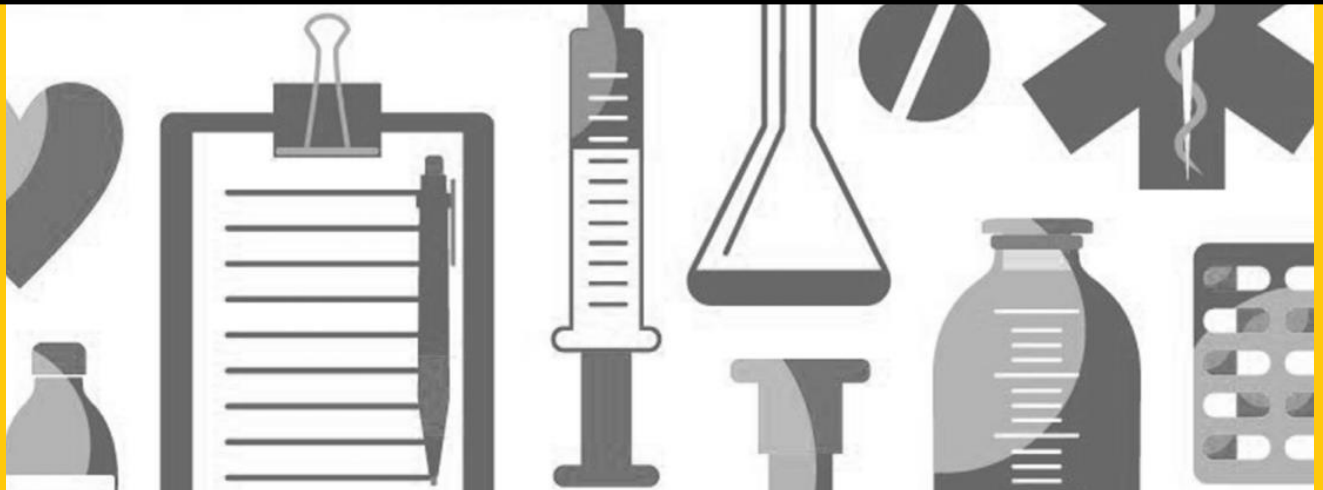


STUDENT NURSES'

ASSOCIATION

AT UNIVERSITY OF CENTRAL FLORIDA

ORLANDO

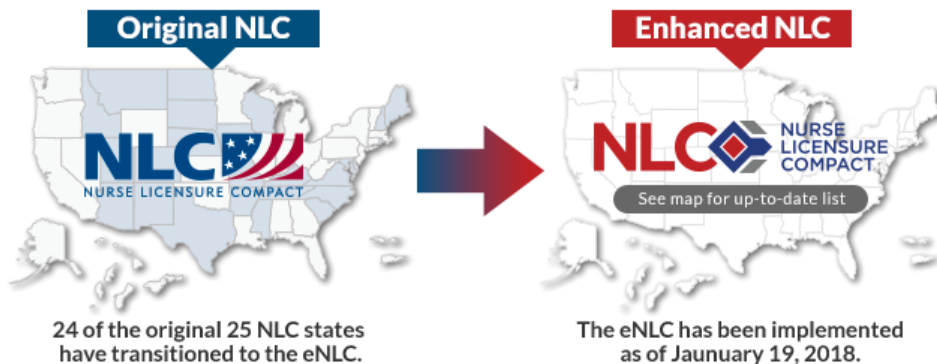


Editor's piece:

Florida's New Multistate License:

By: Alexandra Weinstein, SNA Media Director, Basic BSN'18

There has been increasing talk about Florida's change from a single state license to a multistate licensure (MSL). Some questions going around include; What does this multistate license offer new or existing RNs? How does it work? What are the requirements? What is the application process? The implementation of the enhanced Nurse Licensure Compact (eNLC) began January 19, 2018. So, what does this mean for our current nursing students?



The MSL gives a RN (or LPN) the freedom to practice nursing in multiple states. These states must be a part of the interstate agreement known as the enhanced Nurse Licensure Compact (eNLC). Florida is a member of the eNLC which is the updated version of the original Nurse Licensure Compact (NLC). The NLC is an interstate agreement allowing a RN to have one license to practice in multiple compact states. The NLC has paved the way for the expansion of access to care across state borders, as well as, improving patient safety measures. The original NLC began in 2000. The primary change from the original NLC to the ENLC is to

If I'm Being Honest...

By: Christony Dobson, BTN Director, Basic BSN'18

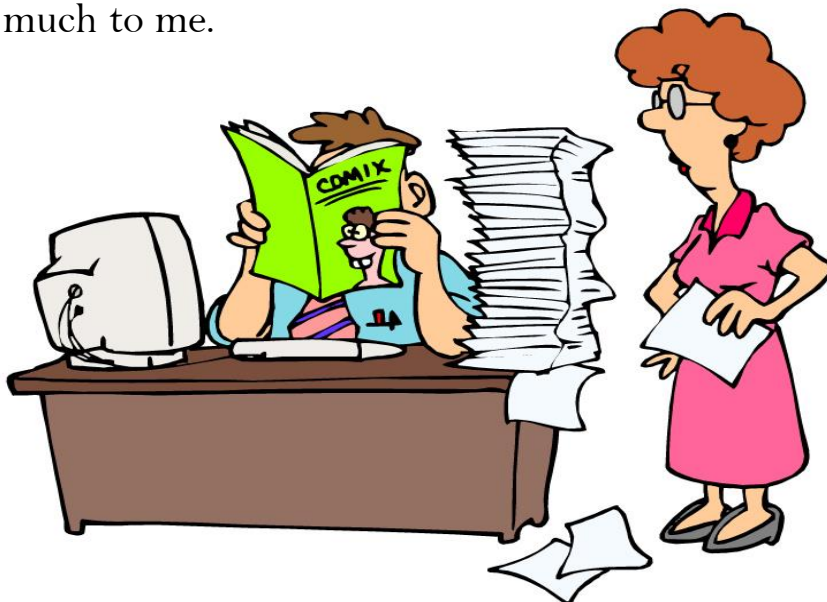
I never knew I wanted to be a nurse. When I was younger, I didn't know what I wanted to be "when I grew up." Family members, family friends, and anyone else you could think of always asked what I wanted to be, what was my plan. I thought about several different careers I might like, classes I could be interested in but nothing stuck. I would make it up on the spot, "I want to be a... (fill in the blank)." Senior year of high school came around and no matter how much I thought about



it, nothing, a blank space. It was go time and I had no idea what interested me enough to spend the money and put in the time for. I was a dance teacher and lifeguard throughout high school and enjoyed both. I couldn't picture myself as a dance teacher or a lifeguard, at a local waterpark, as a career for good part of my life. I loved interacting with the students I taught and even the dance moms, crazy as they may have been. I enjoyed the first aid training I received as a lifeguard, the adrenaline of saving a guest from drowning or, knowing what do in an instant no matter the situation I was in. I was oblivious to nursing, didn't even cross my mind. Everyone always says, 'mother knows best,' and I guess they are right. It was my mom, who, very bluntly, said "I think nursing would be a good fit." I thought about it for a good long while, researched nursing, and nursing schools and figured I should give it a try... I didn't have any other ideas. I started at UCF and began all the prerequisites. Very unexpectedly, I started to get excited about



applying and, for lack a better term, freaking out about whether I would get in or not. The email finally came March of 2016. I was at work and nearly cried, I got in! I was thrilled and instantly overwhelmed with excitement, fear, and eagerness to start right then and there. I went to orientation and bought my scrubs. I immediately tried them on when I got home and spent probably two or three hours just roaming around the house and sending snaps, grinning ear to ear. Fall semester came around and took off, 0-100 in an instant. Crazy schedule, stress, and test after test but I wouldn't have changed a thing. It was overwhelming and if I'm being honest, I cried from time to time. We were getting so much information and practicing many new skills that we would need as future nurse. Clinical has been the most amazing part of nursing school. I'm not going to lie; nursing school is tough and beyond stressful. You are always tired, always studying, and always thinking about the next test. It's worth it! Each clinical day is long and tiring, some busy and some slow, but always provided new experiences and things to learn. Sometimes I learned the most from the patients I cared for. Every day is different, every patient is different and there is always something to learn. Now, a senior, every day I am closer and closer to calling myself a nurse, earning the "RN" behind my name. Just two letters that mean so much to me.



VALOR PROGRAM

By: Hannah Stought, Basic BSN'18

Hey everyone! My name is Hannah Stought, and I am in the Veterans Affairs Learning Opportunity Residency (VALOR) Program at the Orlando VA Medical Center. The VALOR program is essentially like 800 hours of paid practicum all over the VA. The requirements are to complete the first 400 hours on the inpatient units over the summer and the second 400 hours in several of the outpatient clinics by the time we graduate. We are allowed to do everything a nurse can do as long as our preceptor is with us. The one thing we cannot do is give IV push medications (Seriously, I'll know I'm a nurse after I give my first IV push medication and I'll probably celebrate in some way or another. It's the little things :P). My first 400 hours on the inpatient units were fantastic. I got to give many insulin and Lovenox shots, collect blood cultures, draw labs, place foleys, perform dressing changes, hang tons of IV antibiotics, take out IVs, and put in IVs.

I also became really familiar with the charting system which is great because I want to work at the VA after I graduate. I am currently working in surgery, specifically pre-op. These patients come straight from their homes instead of through the ED, so I have many opportunities to start IVs! For every full day in surgery, we are supposed to follow at least one patient from pre-op all the way to discharge which is really cool because I get to see surgery from the patient's perspective. After I finish in surgery, I will be going to the mental health, infusion, and urology clinics. It has really been a great experience so far and has made me a lot more prepared to work in the nursing field. I highly recommend it.

Through The Eyes Of A Patient...Err Nurse?

By: Lauren Penton, Basic BSN'18

So maybe you've seen me around the College of Nursing (CON). The girl who always asks fifty questions during Adult II lecture. No? Okay how about the girl who had a soft arm cast for like two and a half weeks back in October? Yep, and I bet you're wondering how that happened. Well, what I like to tell people is I fought a shark or wrestled an alligator because, let's be honest, those are way cooler stories than what actually happened. Let's get to the nitty gritty; I was washing the inside of a glass cup when it broke in my hand cutting my right thumb leaving a huge laceration. I know, it's so anti-climactic. How does that even happen? Either I am extremely strong and do not know my own strength or there was a crack in the glass my cousin failed to tell me about (I'll let you guess which option is more realistic).

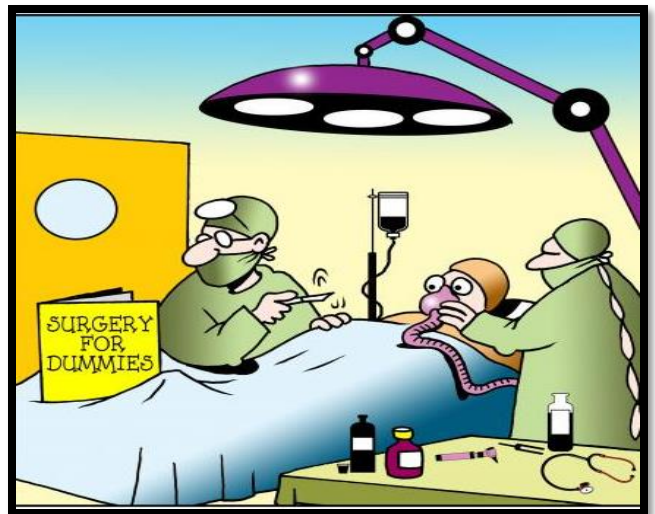


In an instant, blood is gushing out of my hand and I'm hit with a wave of panic. "Quickly! Nursing 101, what do I need to do when a patient is bleeding!?" I thought to myself while praying to God my nursing instincts take over. After a few minutes of trying to regain control of the situation and trailing blood along the house, I was off to the emergency room to get this laceration repaired.

Here I am in pajamas, morning breath, my grandmother's linen towel wrapped around my hand, and trying to comprehend what just happened, I arrive at FH East. I get triaged and taken back to my room almost immediately. Two (one?) thumbs up to ED nursing! As I am sitting here

waiting to see my provider, it occurs to me... I am a PATIENT. No longer am I providing the service of healing, but I am in need of it. It was interesting how I started to see the hospital experience from a patient's viewpoint now. I was suddenly more hungry, cold and tired of waiting and wondering where my PA was. Finally, he comes in to assess me, sticks a needle in my wound to numb it (which hurts like crazy!) suddenly more hungry, cold and tired of waiting and wondering where my PA was. Finally, he comes in to assess me, sticks a needle in my wound to numb it (which hurts like crazy!) and drops a bomb on me (not literally of course). "You severed about 80-90% of your tendon, I am going to have to transfer and admit you for orthopedic surgery."

"Um, excuse me? Wrong patient guy, I just came here for some stitches and then I am out there's no way I need to have surgery, this is my first accident in 22 years", is pretty much what ran through my mind. After he left, my nurse brings in an IV kit and starts antibiotics. That was a shocker to me, "I don't get IVs! I give IVs!"



So here I am wrestling with myself the fact that I am a patient now, and not a nurse, and there is nothing I can do about it. Denial is a real thing. Eventually, my transfer arrives and I arrive at FH South (via ambulance nonetheless!) where I am admitted to the orthopedic floor. Let me tell you, being a patient is not "enjoyable" like sometimes we as nurses may assume. Maybe we get caught up thinking patients have it made where they can press a button and have things done for them. Not at all. The bed was uncomfortable, the room was warm, my remote didn't work for the

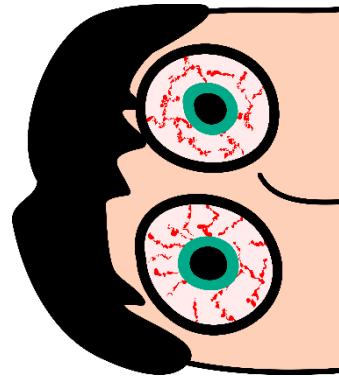


TV, and I am supposed to get SURGERY in the morning. Also, you get terrible sleep at the hospital. From the nurse and techs coming in and out of the room multiple times during the night, being NPO at midnight (I started craving chocolate cake once the clock hit 12:00am) and the doctor coming in to meet me for the first time in the middle of my sleeping... needless to say, I was

exhausted after one night, imagine multiple nights in a row like countless other patients have to experience. And it is not just the fact that I must sleepover in a strange place, but now the stress of I can't use my hand and I have never had surgery before. I mean, I never even had to go to emergency room before in my life, and here I am awaiting to be cut open in a few hours. Guilt, because now my parents (mostly) have yet another financial burden on top of what they already have going on, and anxiety over "what if I can't finish clinical this semester and I can't graduate on time", or "what if I never get full recovery from this injury?" Those are just naming a few of the many stresses I (the patient) felt. Being a patient is not fun.

Fast forward to the morning and alas, I survived my first night ever as a patient, and it was time to fix this heroic wound I obtained fighting a shark. I wake up to find numerous blankets on me and my right arm immobile with a cast. To make this long story short, I did not die under the knife (hooray!) and was able to get home that night.

All this to say, my experience as a future nurse forced into the role of patient was both a blessing and a curse. Being a student nurse, I knew too much. As the saying goes, "ignorance is bliss," and because of this special "status," I felt both anxious and confident in the process.



Frankly, not being able to use your thumb sucks. It's amazing how we take such a small body part for granted after we cannot use it! I have become frustrated numerous times because I can't open a simple bottle of water or cut my dinner for myself, I am forced to rely on others help. Being a patient is not fun. In many ways, it becomes discouraging because you feel a loss of independence. Sometimes we as nurses lose sight of what the patient may be feeling. I encourage all nurses to take a step back when they get frustrated with their patients, and try to view the experience from the patient's eyes. There are so many things you can't see that the patient is going through and thinking about. Countless stressors that make being a patient tiresome and frustrating. They are not enjoying being dependent on you just as much as you're not enjoying cleaning up after their accidents. I strongly believe if we tried to view the hospital experience from a patient's point of view, it will most definitely make us better nurses. We are not called to treat the physical symptoms, but the mental ones too. And being aware that the patient is not out to take advantage of you can really make a world of difference in how they cope with an illness and their hospitalization in general.

Before Vs. After



And there you have it, the patient experience through the eyes of a (future) nurse. I finally finished therapy, I am getting my range of motion back, and I made it through clinicals successfully!

Huge thanks to all my friends and professors who wished me well during this freak accident and Alexandra Weinstein aka Ms. Media Director, for bringing me goodies and staying with me during my experience!



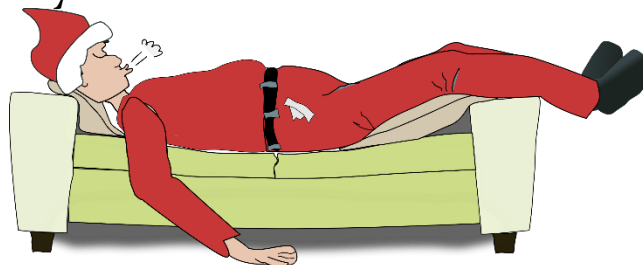
Holiday Loss

By: Lisette Shanhai, MSN, RN, AHN-BC

Illness and death don't take holidays and for many this holiday season, it's a challenging reality. During the Christmas and New Year holidays, hospitals will be full of people requiring medical attention and health care professionals will be at their posts; heeding the call of those in most need.

As a nursing student, I never reflected upon how I may one day work during the holiday time, let alone the many patients and families who would be at the hospital. Meeting Mrs. S would change that for me. With manicured nails and salon hair, Mrs. S told me she would be home in time to bake her famous Italian Christmas cookies for her family and friends. She was especially looking forward to seeing her two grandchildren and eagerly showed me two photos she had tucked away in a book on her bedside table.

Whenever I asked her how she was doing, she responded with a quick, "I'll be out in no time!" But she wasn't improving as quickly as we hoped. When I told her she needed to spend Christmas in the hospital, she began to cry, "I just wanted to see my girls," she sobbed, embarrassed. I sat there, my own heart heavy and at a loss for words until she finished crying. Not knowing how to comfort Mrs. S that day, I went home and celebrated Christmas with family and friends, more mindful that not everyone would be.



Six months after graduating from nursing school, I worked for a large local hospital on a kidney transplant unit. It was my first Christmas spent working, and I wasn't prepared for how challenging it would be. While many communities and businesses seem to close until after the new year, hospitals become busier than ever. Our unit was full and several of the patients died during the month of December.

My nursing colleagues and I spent Christmas Day managing insulin drips and packed red blood cells, checking blood pressures, calling families, and sending patients to dialysis. I felt a solidarity with my patients, the families we called, and my nursing colleagues.



On Christmas day I also spent time with Mr. F and his dying mother. Mr. F spent hours in the hospital, silently holding his mother's hand.

His mother had decided she was no longer going to her dialysis treatments. She had had enough. The nursing team supported her decision and her only son had been notified. She peacefully passed away as he sat by her bedside. I was glad we could give Mr. F and his mother the gift of time together. He later shared with me how grateful he was that I was there and helped his mother pass with dignity.



Loss is difficult, especially during times of cultural celebrations. Nurses are especially vulnerable, as we are challenged to attend to patients and their loved ones during their own vulnerable experiences. While challenging, nurses need to be mindful in acknowledging their own suffering in order to be more readily able to empathize fully with patients and their loved ones. We become an open vessel to accept what is and come together to heal and to help, to accept the kindness of our colleagues and to support new nurses.

This year, because of a new role as a VA nurse, I was able to spend Christmas with my family and friends, but I hold in my heart the stories I have just shared and all of the patients, families and friends we have chosen to serve. I also hope that you, as do I, value the nurses who work during the holidays and answer the call, every day.



Update from Daytona!

By: Glory Pierre, SNA Historian, Daytona BSN'18

SNA Daytona partners with 4OCEAN, OUTSIDERS, and PERSIMMON HOLLOW BREWING to make the beach a safer place for both humans and animals. Our SNA had a marvelous time cleaning up Daytona Beach today! Over 1000 pounds of trash was collected with the aid of our SNA members along with many other members of the community. The weather couldn't hold us back from contributing to the health and safety of the Daytona community. We would like to give a BIG thanks to our community health director Megan Matthews for seeking out this opportunity for our chapter! Keep up the incredible work



President's Corner

By: Carolyn Hair, President, Basic BSN'18

Seniors. This is it. The final stretch.

As I reflect on the journey that began the day we all received the email stating that we had been accepted in the College of Nursing, I can't believe how far we've come. To name some of the highlights, do you remember...?

- The struggle of picking what color stethoscope you wanted
- The excitement of first trying on your scrubs and wanting to wear them EVERYWHERE because it meant that you were that much closer to becoming a nurse
- Getting your nurse packs and exploring all the equipment you'd soon learn to use
- When learning how to take a blood pressure was our biggest concern (LOL)
- Practicing on each other for skills lab
- The terror of checkoffs
- Meeting that one friend(s) that got you through first semester and will forever be your best friend
- Essentials pop quizzes.....

When I look back at where I was starting nursing school to where I am now, I can't believe how much I have changed and how much I've learned. Nursing school teaches you to think and see differently. You can't help but to assess everyone that walks by and make guesses about what possible conditions someone coughing might have. By this point, you may have also noticed some strange habits that have developed over the past year and a half, like washing your hands before and after you use the restroom or not allowing your work shoes to enter the house (because they probably have CDIFF or Ebola on them). You might have also noticed that you compliment people much differently now. Instead of praising someone for how they look, you now find yourself saying, "WOW, you have great veins!"

I am so thankful to have survived this growing process with each one of you. We have a few more milestones to get through before we get to add those two letters after our name. Enjoy the last few months of your college career and make sure to finish strong. Now we must link arms and walk through the finish line together, we are almost there!!!

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