

## My Versatile & **Devoted ER Nurses**

By Lai Pei-Fang, Director of Emergency Medicine Dept., Hualien Tzu Chi Hospital



Surgeons and physicians each have traits that are easily identifiable. Physicians tend to be introverted and considerate: and surgeons tend to be extroverted and fast-paced, and prefer to take matters into their own hands. Emergency physicians, on the other hand, require traits that allow them to operate responsively and resourcefully under tremendous stress. The interesting thing is that this "who goes where" phenomenon is also evident in nurses. For whatever reasons, there are many graduates in the recent years are interested in ER, hoping to work in emergency medicine after starting clinical practice. ER nursing however is not just about playing tug-of-war with death. Working in ER means you are exposed to unknown risks, be it highly contagious emerging virus or emotionally unstable drunkards with violent tendencies. Whether your personality is congruent with high stress environments like ER can only be answered after diving right in. I have worked for many years in the ER team with many nursing staffs on saving lives. We always learn from each other, support one another. It is easy to build a strong rapport without the interference of office politics.

## **Working as Equals** Regardless of Ranks

Hualien Tzu Chi Hospital is constantly filled with passionate volunteers in all corners. Brothers and sisters from around Taiwan working in shifts in our ER, assisting with the operation of the hectic clinical work. Resident volunteers are familiar with our names, personalities, and



The ER of Hualien Tzu Chi Hospital is the fortress of acute trauma care in eastern Taiwan. Every patient poses a unique challenge to the team, making flawless teamwork an essentiality. The photo depicts ER nurses treating a hiker's wound.

our model of collaboration in ER. They are practically a part of us. However, there was an incident where the newly arrived volunteers reported our ER nurses for been disrespectful towards our emergency physicians by not address them by their titles.

I could not help but laugh when I heard the news. Our interactions in the ER, which is different from the interactions in other divisions, has been misunderstood by the volunteers. Physicians and nurses, after all, are not so different. The only relevant difference is that the physician does the diagnosis and examination, and the nurses carry out the orders. On the surface it appears that the physicians are the commanders and that make them superior. The truth is that everyone is a member of a team, in charge of different assignments at different stages. Physicians cannot complete their diagnosis and treatments without nurses present, for physicians are not as



proficient as nurses in injections, blood tests, and wound dressing! For a group of individuals with different set of skills and expertise working as a team, it requires flawless teamwork. When a glance from you and the nurse understands what to prepare, what apparatus to hand over, and what information to deliver; when we work flawlessly in sync in saving a

precious life from the hands of death, that satisfaction is unparalleled.

Working in ER, we are constantly faced with patients who conditions are constantly changing. It is vital for us to cover for each other. There are no labels on tasks. Even Professor Hu of emergency medicine once scooped feces from a patient. Bystanders watch us shouting at



Director Lai Pei-Fang speaks up for the ER nurses, revealing that they are meek on the inside.

each other, when in fact we are warning each other to take caution, confirming our approach, or discussing a solution. There may be times when we are at odds or misunderstand each other, but none of it are taken personally. We habitually call each other by their nicknames after years of working together, and perhaps that is the reason why people who do not understand tend to criticize our nurses as being rude and disrespectful!

## A Loud Voice with a Tender Heart

The circumstances of ER does not allow orderliness like other divisions do. It is not well compartmentalized like other wards. The ER is open and crowded.



Right after the Feb 6 Hualien earthquake in 2018, Hualien Tzu Chi Hospital immediately initiated mass casualty incident response.



When compounded with a variety of emergencies, not only do the space seems significantly noisy and congested, we who work in this tiny space often need to shout at the top of our lungs to find our patients, and that makes ER even more like a farmers' market. I know our working environment lacks elegance. I once jokingly asked our nursing staff to speak softly at work, and they replied, " you won't be able to find your patients this way!" They were right. ER patients are not your guests in a beauty salon waiting gracefully for a manicure, solving their health crisis matters above all else. Watching our nurses taking huge bites into their cold lunches (but double in portion), I thought to myself, shouting constantly does consume a lot of energy. It is such a shame that they are mistakenly criticized for doing their job. The habit developed from working in ER over a long period of time, coupled with straightforward personality and loud voices, tend to be equated with rudeness and harshness. They are, in fact, gentlehearted souls. An old farmer who stayed in the ER for two days was insisting on leave because he had harvested produce sitting at home. Our nurses solved his problem by dividing his produce among the unit, so I ended up coming to work and doing grocery shopping at the same time. A kid who was selling ginger sugar for his mother sent a thank-you letter to

the nurses for helping them selling their product, and our nurses, so moved by the letter, ended up purchasing a huge bag of sliced gingers. A coffee farmer in Shoufeng Township sent a letter informing us his progress to recovery, and how he was grateful to everyone who helped him selling his coffees while he was hospitalized. His handwriting and choice of words were equally elegant. I asked the nurse who sold me the coffee, "is this is poor coffee farmer you told me about?" She replied with a shy smile, "I thought he was poor and has no means of selling his coffee beans. I did not know he was a retired manager!" There are only few of the examples. In a place like ER that is often associated with intensity, fear, and heartbreaks, these small tales of love and care are what lights up our work everyday.

## Tough on the Outside, Meek on the Inside

On the eve of Feb 6, 2018, the night of the earthquake, everyone in the hospital was mobilized, and together we made it through that harsh, bitter night. In the short two-hour span, we treated over 100 patients. Most of the patients we treated returned home before dawn. We ourselves returned home after dawn, exhausted and burned out. That was when our fear of the earthquake began to surface. Many of us were afraid to go home because of the



On the eve of Feb 6, the ER of Hualien Tzu Chi Hospital treated over 100 patients in a two-hour span, fortunately most were minor injuries. The triage was done primarily by the emergency nurses.

constant aftershocks, so we contacted the temporary shelters provided by the hospital, arranged a stay over, and constantly checking in on each other. The demand at the hospital gradually decreased, but we were still needed in the medical stations by the disaster zone. All of the nurses worked together to come up with a shift schedule. Working in the medical station right by the collapsed building, however, can be stressful and uneasy. With the aftershocks that simply refused to end and the chance of facing the severely wounded or even the deceased, the medical team was clearly perturbed. I tried to persuade the nurses









Aside from the usual working hours, the ER nurses volunteer at the medical stations after work.

who were visibly shaken to stay at the shelter and let rest of us handle the task, but the members of our ER team were simply too passionate about saving lives and helping the team that they could not stay away, in spite of the immense fear. I knew, though, many of them did not sleep well. This bunch of nurses who are tough on the outside but meek on the inside are, in fact, admirable.

I think that the passion of these ER nurses have towards patients comes from their inherent altruistic compassion for others who are suffering, which makes it easy for them to contribute their time and energy for the disadvantaged. Although that same passion can blind them, which is evident in these two examples. In the pediatric ward, a little boy was lying on the bed with a bruise on his head, and his mother, sitting by the bed, also had a band-aid on her forehead. Our ER nurses were suspecting whether this was a case of domestic abuse but were too embarrassed to ask if they needed any help. They hid in a corner talking back and forth, and finally devised a plan. They convinced the mother to follow them with an excuse, then, once in the corridor, they confronted her, "what is wrong with that band-aid on your forehead? You know we can help." The mother responded snappily, "I have a pimple on my forehead!" How awkward! There was another time, one Sunday morning, a young male arrived at

the ER because his arm was caught in a rolling door, and the injury was so severe that it required debridement. The assisting nurse asked him about the cause of his injury. The young man replied that he came from a humble background and both of his parents were deceased, so he had to work early in the morning every single day, and today he accidentally injured himself while opening the factory door. That nurse, thinking this hardworking young man must be so distraught and helpless, offered her hands to him, "If you are scared, you can hold my hands. I'll be here for you!" Not knowing that few hours later, we realized that he was a thief injured in the act of crime. The young male ran away from the ER, leaving our compassionate nurse in distraught.

This is ER. It is a high-stress working environment with all sorts of medical or non-medical emergencies complicated by the complexity of diseases and people. Our ER nurses, nevertheless, continues to embrace these complexities and emergencies with a passionate and simple heart. Every day we are met with new excitements. Although negative emotions are inevitable, we have plenty of heartwarming stories that drive us forward. I am genuinely grateful for the excellent group of passionate nurses trained by our department of nursing to assist with the missions of the emergency medicine.