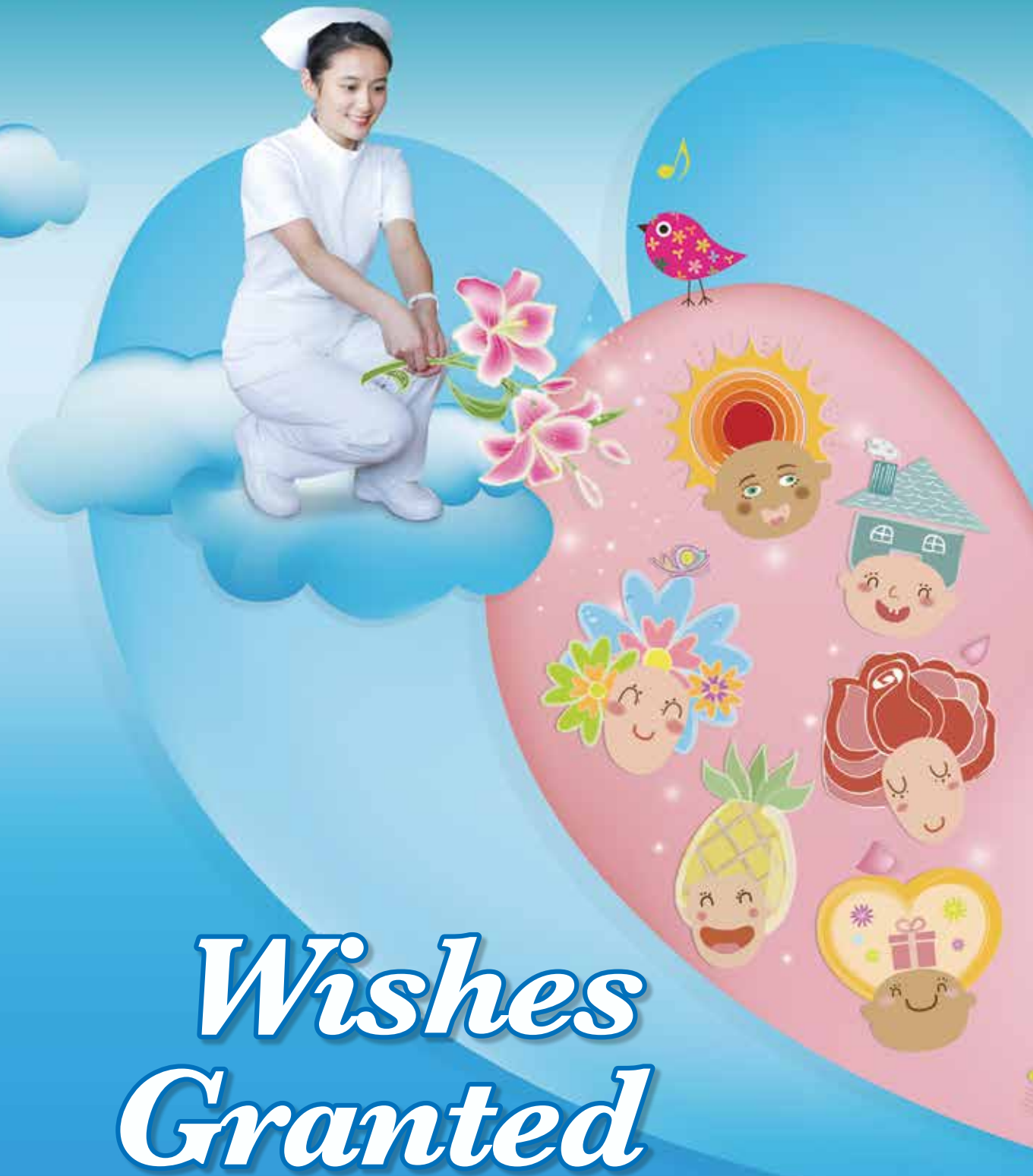


TZU CHI NURSING CARE

*With the Compassion of Bodhisattvas,
Where Ever Sufferings Are, We Are.*





Wishes Granted



Regarding the Cognition and Actions of Clinical Nursing Professionals to Fulfill Wishes for Patients in Taiwan

People always procrastinate on their dreams, until impermanence arrives – diseases. Regardless of how busy they are, nurses always want to fulfil the dreams of the terminally ill patients, big or small, Helping their dreams come true to fulfill their last life journeys...

By Wang Shu-Chen , Vice Director, Nursing Department, Hualien Tzu Chi Hospital

Throughout the life span of growing up, one always makes some wishes - a birthday wish every birthday, a new resolution every new year. In recent years, there are also many movies reminding us to complete our wish list before death. However, as each ordinary day passes, many wishes are not completed as if that is normal. What if “illness” occurs, resulting in hospitalization, then the urgency of completing wishes becomes a rush.

As those who work in the hospital, our mission is to protect life and health. In fact, we often hear or see that in addition to our medical mission, and quite a few nurses voluntarily help to fulfil patients’ last wishes. This motivates us to understand better terminal care process. Therefore, we need to study patients’ expectation and the participation statistics of our staff for death wish fulfilling experiences. Exactly 1,674 copies of electronic questionnaires were collected from six Tzu Chi Hospitals’ nursing staff for the following study.

Increase Understanding of Patient-Oriented Comprehensive Care

The first question to our nursing staff was if they would actively inquire patients’ expectations during their routine care. About 58.5% would and about 28.3% rarely asked and 13.3% did nothing. If based upon this background statistics, minus the outpatient (12.7%) and the operating room (7.6%), the rate of actively inquire patients’ hospitalization expectation should be higher.

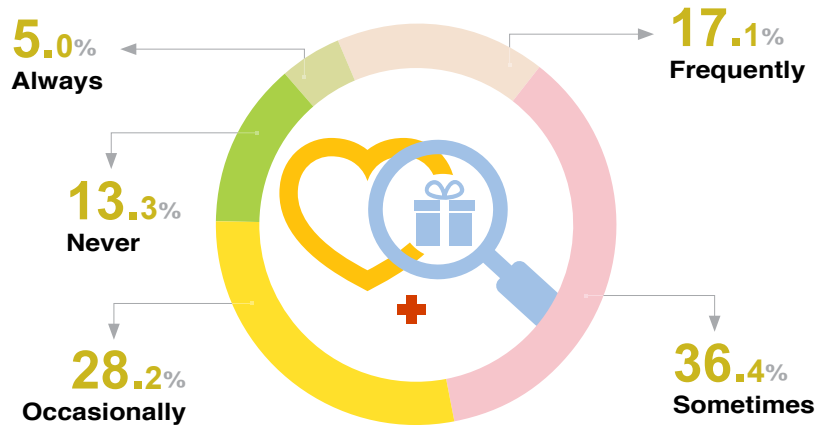
In 2006, Hualien Tzu Chi Hospital started promoting humanoid map whole-person care education, and the other Tzu Chi hospitals follow the education model. Through the preparation of the humanoid map case reports, many nursing staff got to understand

Basic Statistics

Gender	Number of People	%
Female	1,584	94.6
Male	90	5.4
Total	1,674	100.0
Age	Number of People	%
under 20	67	4.0
21~25	641	38.3
26~30	256	15.3
31~35	222	13.3
36~40	240	14.3
above 40	248	14.8
Total	1,674	100.0

Nursing Level	Number of People	%
N	588	35.1
N1	247	14.8
N2	633	37.8
N3	142	8.5
N4	64	3.8
Total	1,674	100.0
Job Title	Number of People	%
Registered nurse/nurse	1,372	82.0
Deputy head nurse	53	3.2
Head nurse	57	3.4
supervisor	18	1.1
Functional unit/case manager	47	2.8
nurse practitioner/senior RN	127	7.6
Total	1,674	100.0
Department	Number of People	%
Internal Medicine	332	19.8
Surgery	257	15.4
Pediatrics	74	4.4
Obstetrics & Gynecology	57	3.4
Intensive Care & ER	346	20.7
Functional Unit	13	0.8
Kidney Dialysis	49	2.9
Operating Room	127	7.6
Outpatient Clinic	212	12.7
Palliative Care	40	2.4
Administration	30	1.8
Psychiatry	56	3.3
Others	81	4.8
Total	1,674	100.0
Hospital Working Experience	Number of People	%
Within 1 year	323	19.3
1~2 years	257	15.4
2~3 years	182	10.9
3~5 years	262	15.7
5 years and above	650	38.8
Total	1,674	100.0

Q1 | Have you actively inquire patients' expectations during routine care? (N = 1,674, single choice)



their patients better. Instead of focusing only on patients' diagnosis, they have better understanding of patients' overall situation including their livelihood with families, their economic condition, mental status, etc. Clinical nurses feedback that most hospitalized patients would "want to go home". However, we don't know their thoughts behind this "wanna go home". After further investigation, we found that he/she wanted to go home earlier to take care of his/her embedded family, or worrying about his/her vegetable garden... Through this thorough whole-person assessment, hospitals can then provide more comprehension care.

88.5% Had Participated in Patients' Wish-Fulfilling, Nurses Wouldn't Mind to Spend Extra Time

A second follow-up question asked if additional care outside of regular medical routine was provided to complete patients' wishes. 67.6% responded, "Yes, I have provided additional care." Of the 67.6%, 24.8% responded "always" or "often." 20.9% responded "Rarely" but they have also expressed that they have done extra care before as well. In total, 88.5% responded that they have done extra services outside of medical routine care to complete patients' wishes. 11.5% (193 people) selected "never", which ended the survey.

With more than 20 years of clinical experiences, I have known nurses that often go extra miles to help complete patients' wishes, for example, some terminal-ill patients want to attend family wedding parties or graduation ceremonies. Some patients are inconvenienced by hospitalization because hospital is not their home. They wanted to eat their favorite

foods or maybe just read daily newspapers. During hospitalization, patients' wants may be big, difficult, or just a small desire. For example, once a patient wanted to take a look at the Qixingtan, the beautiful eastern Taiwan beach. The wish may be simple but because of the patient's condition, a group of medical staff is required to first prepare the equipment: wheelchair, oxygen supply, medication, etc. Furthermore, another group of people is required for transportation and logistics. A simple wish needs everyone to contribute.

Of the 1,481 samples, we asked if the six Tzu Chi Hospitals nursing staff have used extra time to help patients fulfilling their wishes. Only 10.8% of the people did not use their personal time. 89.2% of the nursing staff have had this experience. Although 38.1% chose "Occasionally", those that chose "Always", "Frequently", and "Sometimes" combined equals to 51.0%, indicating that half of the people used their time to help patients with their wishes.

Variety of Wishes Fulfilled with Peace of Mind

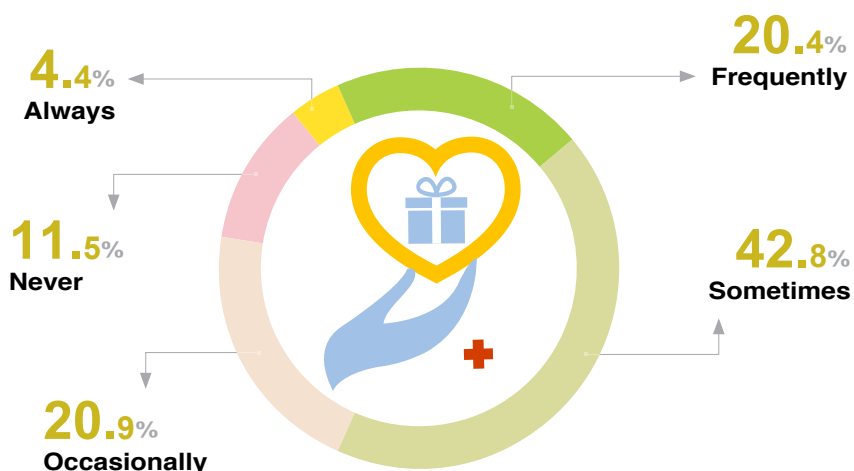
We asked nursing staff to select the activity they have participated in completing a patient's wish?

Based upon our experience, we provided a list of 10 choices in this question. The highest percentage was 45.4% of "Contact his/her family or friends", 37.2% of "Help to bring/buy food", 12.8% of "hold a birthday party", and 9.1% was "Body donation". Meanwhile the other choices were not as popular. Of the 23.1% that chose "other", six Tzuchi Hospitals' staff have helped to complete a variety of wishes: whether it was to take

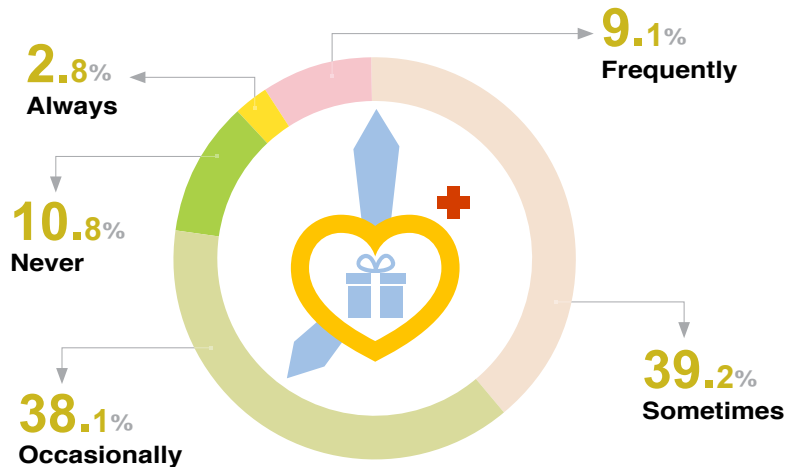
Q2

Other than routine medical care, have you ever provided patients extra help to fulfill their wishes?

(N = 1,674, single choice)



Q3 | Have you spent extra time to help fulfill patients' wishes? (N = 1,481, single choice)



family portraits, accompanying them on vacation, completing commemorative albums, going to concerts, making overseas phone calls, or bring them newspapers and magazines... Most people may think that these should be the nurses in the palliative care wards would do since patients are preparing for their end of life. In fact, all the other department nurses had also participated in these activities. As far as I know, even an outpatient nurse would attend a patient's wedding. An operating room nurse had assisted a patient to make phone calls to the family to resolve homesickness...

A nursing staff once asked me, "Are these extra tasks required in addition to the daily clinical work?" I'm already so busy." In addition, intensive care unit nursing staff commented that their patients are rarely awake so there is no chance for them to complete patients' wishes. However, from time to time, we've heard that some nurses from some departments assist patients for their final wishes.

A patient's wish may sometimes need to be facilitated by the administrative department. For example, a patient of Hualien Tzu Chi Hospital's Heart Lotus Palliative Care Ward's dying wish was to meet the governor and another patient in the pediatric ward wanting to meet a basketball player. In such scenarios, other departments would be needed to help.

In the pediatric ward, patients are mostly students. Once they are admitted, their studies interrupted. Therefore, "continuing schooling" may be their wishes. The pediatric ward of Hualien Tzu Chi Hospital has created diplomas for patients who have finished chemotherapy. Nursing staff with education experience may volunteer to help tutoring. Furthermore, most of the patients in the respiratory care center cannot speak, nurses use

paper and pencil or gestures to communicate. One patient wanted to listen to concert, so nurses listened to music with the headphones with the patient...

Of course, if the patient's "unreasonable" requests, rather than the wishes for the progress of the disease, nursing staff need to have the ability to refuse. How to decide, it is another effort.

Seizing the Moment with Love Is the Best Care

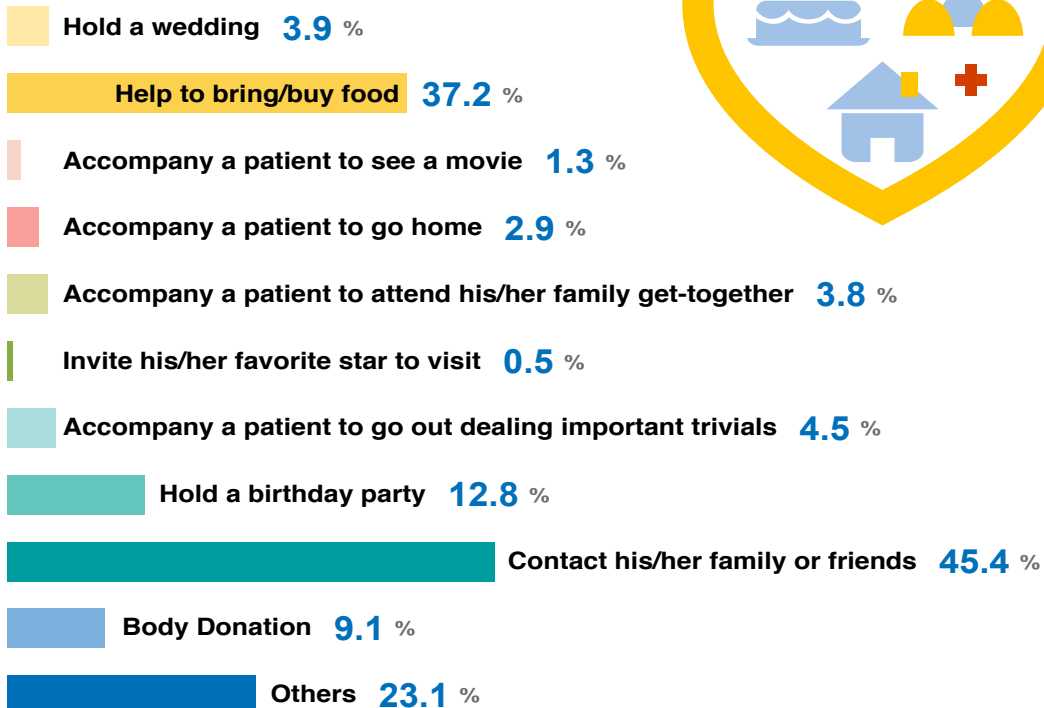
According to Maslow's theory of hierarchy, one must satisfy the low-level physiological and security needs before achieving higher satisfaction, and the highest level is self-realization. Many patient wishes are actually carried out in the course of nursing work. More importantly, many patients believe that when nursing staff care for them, they also provide spiritual care as well. Therefore, spiritual care does not necessarily mean a ritual of language or religion but rather "Seizing the moment with love is the best care."

Is it a meaningful job to fulfill wishes for the patient? 80.4% of people agree, of which

Q4

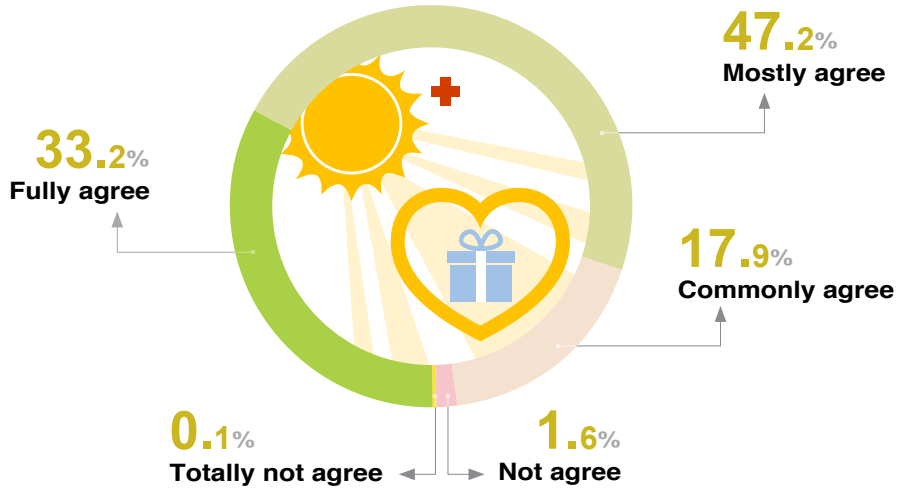
Please choose the activities you had done for your patients for their wish-fulfilling?

(N = 1,481, single choice)



Q5

Do you think it's meaningful to help patients fulfilling their wishes? (N = 1,481, single choice)



33.2% fully agrees. A few that does not agree was only 1.7%.

I have encountered a terminal patient who repeatedly expressed wanting to die early for fear of dragging down the family. After consultation with the Heart Lotus Palliative Care Ward team, this patient offered to take the team members to visit his hometown. After surveying his rice field, patient showed a satisfied smile and said that his heart was fulfilled. In the process, his family members participated together and had good memories.

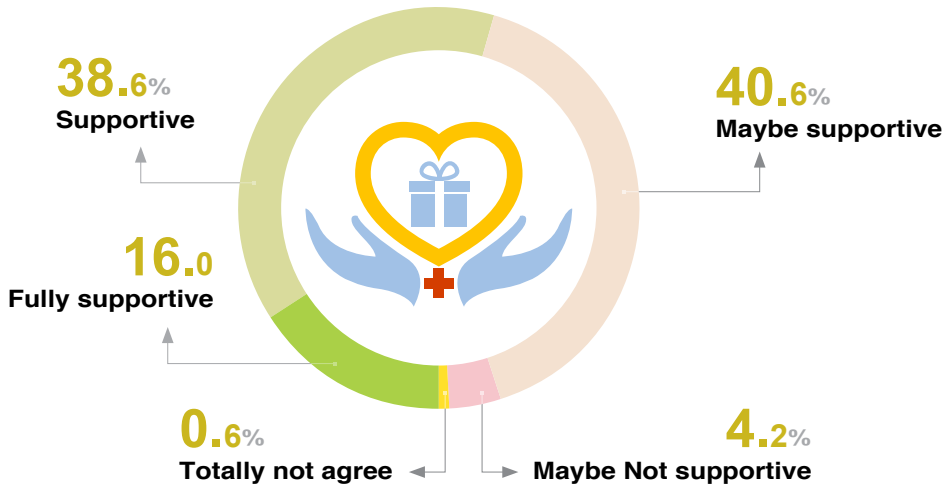
Peace of Mind for Family and Comfort for the Caring Team

A final question was how supportive the team feels to complete patients' wishes. Response was less than 5% negative; the team that felt definitely supportive was 54.6%. In fact, most of the activities required to complete a patient's wish required many people to participate. Take our Heart Lotus ward as an example. A patient said to a nurse that he had never been to the Taroko Gorge and that he heard from friends that it is beautiful and wanted to visit. However, the patient was frail and had breathing issues. In order to accompany him to the mountain at high level, many preparations were required. As a result, the team mobilized a team of four nurses, a doctor, and a psychologist on board. They prepared a rehab bus, planning the routes, and emergency preparation, etc. For those nursing staff that could not come along, they prepared sushi and miso soup at home to assist the trip. Upon returning to the ward, the patient said that it was very satisfying, and the family expressed that it was an unforgettable moment.

Sometimes a patient's wish was hidden behind words or expressions, and the team needed to investigate to find ways to have the patient open up. In addition, sometimes

Q6

When you propose an act to help fulfill patients' wishes, how supportive is your medical team? (N = 1,481, single choice)



“finding” a wish for the patient can also stimulate the will to survive. Neurosurgical Ward Head Nurse Yu Chia-Lun shared that a young father with a brain stem injury was awakened in the intensive care unit and found that he could not move his limbs below his neck. He attempted to commit suicide by biting his tongue. Once in a regular ward, a nurse accompanied the patient on wheelchair with his respirator down the corridor. When he looked out outside the window, he mentioned that he usually go to work with a cup of coffee. The nurses made a promise with him, “As long as he can breathe on his own; they can go to have coffee together.” This patient took her words to proceed with rehabilitation. The nursing director said, “When we went to the rehabilitation ward, we made a promise to go have coffee together and sing a song.” This promise is about to come true since he can lift his hands and feet. He just needs to strengthen his voice, and practice singing...

It must be mentioned that for everyone in Taiwan, the plan of life should include an “advanced directive”. The patient’s rights law became effective on January 6, 2019, it reminded everyone of us to consider make our medical care plan in advance. Through pre-established “Advanced Care Planning” counseling clinic, family members and medical staff can understand the patient’s medical wishes. This is an important method allowing an individual to complete one’s final wish. People always think about the “future” and procrastinate, and they are used to delaying their wishes. When the impermanence of disease arrives, plans for life may need to be reorganized and even rely on others for help. For the nursing staff, we are willing to fulfill patients’ wishes and for their families. Because, when we voluntarily help patients fulfilling their wishes, we are actually realizing the value of our nursing profession and the value of our life.

The Courage and Strength of Life for Pediatric Patients

Everyone has dream that brings hope. We work hard to have the dream comes true. However, some dreams seem easy to accomplish while others are hard to overcome. Therefore, the support of the medical team is needed for the extra push to have the dream comes true.

The Call Inside His Heart Helps Rekindle Enthusiasm of Life

I still remember this 5-year-old patient named Kaikai diagnosed with Malignant Neuroblastoma. The side effects of chemotherapy made him felt extremely sick, with broken skin inside his mouth, sustained nausea and vomiting. No matter how his father or the hospital prepared delicious foods for him, he had no appetite, and just relied on intravenous injection with life-sustaining nutrition, which made his father felt really overwhelmed and worried. Once when I was talking with Kaikai's father, he mentioned donuts as Kaikai favorite. One day when I got off my work I remembered the conversation with Kaikai's father, so I bought some donuts for Kaikai, although I was not sure that if he wanted to eat donuts. Surprisingly, the moment when Kaikai

**Cheng Ya-Chun, Supervisor,
Nursing Department,
Hualien Tzu Chi Hospital**

saw donuts, he showed me a big smile that had never shown for a long time, and gave donuts a bite excitedly, at that time his father thanked me repeatedly. After that, when the day that Kaikai left us to be an angel in the heaven came, his father hugged me, crying and saying “Thank you! Thank you!” He still remembered what I’ve done for Kaikai, he said: “Since Kaikai was diagnosed with the serious disease, my wife and I restricted him on almost everything including his favorite donuts...” Since I accidentally bought Kaikai donuts he was able to satisfy his little wish. Thus, even though Kaikai is gone, the father will not have to regret about his decision.



Sometimes, our ward will become a mini live concert. Once when I was patrolling ward, I heard a pleasing sound played by guitar came from corridor. Listening carefully, I recognized it was a Japanese song. Along the pleasing music I found and walked into the ward, it was Zhijian, a 19-year-old boy who was playing the guitar. Zhijian loves playing guitar so much that he hopes one day he can play it on the concert and show his voice to everyone. However, since he accepted Autologous Stem Cell transplantation for twice, his recovery became much slower than our anticipation, and his physical strength weaken sharply, which made Zhijian couldn’t play guitar as usual. One day morning when I passed by his bed, I saw him took his guitar and gazed it, I asked him: “what do you want to do most right now?” He just said a few words: “I don’t know if I have any chance to play my guitar and sing a song in the future...” On that afternoon, took advantage of Zhijian’s better strength, me and a group of medical team worker came to the ward, invited him to play the guitar and sing songs. Seeing his white slim fingers playing on the guitar, with long hair around his shoulder, Zhijian seemed extremely like a singer on television! Then we sang few songs and Zhijian accompanied with guitar, in the narrow ward, everyone cheered to him: “Idol! Idol! Please give me a signature!” We had enjoyed a noisy but funny afternoon. From then on, Zhijian seemed to found his stimulus and enthusiasm back, we could hear pleasing music from his ward again.



Wenwen: “I just want to come back to my classroom and have lessons.”

Serving in pediatric ward, if we knew kids have any dreams, we will try our best to help satisfying their wishes immediately.

Wenwen is living in Guangfu Township, Hualien County. She was unfortunately diagnosed with Malignant Osteosarcoma, and she came back to our ward again because of her cancer recurrence, along with transferring cancer cells throughout her many other organs. Although 11-year-old Wenwen accepted suffering therapy in the hospital, she never gave up her schoolwork, accepting beside teaching during the hospitalization. We always saw she was writing examination paper carefully when her physical condition became better. Wenwen told her parents that her best wish was come back to school and have lessons with her classmates. Her parents told us, asking if we could satisfy her dream. After being

assessed by attending physician and discussed by medical team members, they found Make-A-Wish, a foundation that helps children under 18-year-old to accomplish their dreams, to help Wenwen. When that day came, in the morning, Wenwen and me (I was responsible for her nursing care during discharge time) followed social worker and staffs from the foundation, we took train to Guangfu Elementary School. Principal, teachers and her classmates also participated in the dream-accomplish-action plan. When Wenwen arrived in the classroom, she caught up the last lesson in the morning, math. She sat on her seat, listening the lesson carefully. After class, all people gather in the classroom to hold a party for her. Teachers and classmates came to Wenwen and sent her blessing cards. They had a great time with eating and playing. Wenwen put on her favorite scorpion wig, she was so happy that although she had to put on mask all the time, through her smiling eye, we could feel her hard to conceal her excitement. Her mother also told us that Wenwen said her feet didn't feel pain on that day.

Actually, from the plan started to finished, because of her instability physical condition, we had to change the content of the plan constantly. During the planning, she felt extremely pain of her bone, and she couldn't leave the sickbed. Seeing these, we almost gave up, trying to hold the party in the hospital instead of the original plan. Fortunately, her condition was relieved under the medicine control, though it was slight but we seized the opportunity and set up the plan. Finally, Wenwen contentedly came back to the hospital to accept palliative treatment, after her dream came true.

Taking Sasaya to the Baseball Field to Play

It was a sad story that a five-year-old boy Sasaya was diagnosed with Chronic Myelogenous Leukemia



For Sasaya to accept treatment attentively, pediatric nursing team of Hualien Tzu Chi Hospital together with social worker help him accomplish baseball dream, and paint a poster to encourage him.

when he was only one year old. This disease is mostly found in adults, but unfortunately happened in Sasaya. His condition was controlled well because he took chemotherapy, however the cancer reappeared out of our prediction, turning into Acute Myeloid Leukemia with high malignancy. He had to accepted bone marrow transplantation surgery immediately, but since he could hardly make a pair with non-relative donor, doctors had to discuss with his parents and operated him with parent-child semi-matched bone marrow transplantation surgery. Thus, he is the first case in Hualien Tzu Chi hospital, accepting parent-child transplantation surgery.

Before the transplantation surgery begun, his parents told us that he loves playing baseball, each time when he saw his brother competing with peers, he shouted to them that he also wanted to play baseball and became a pitcher in the future. Thus, during the surgery time, we especially prepared a pair of baseball glove and a bat for him, hoping he could successfully get through the surgery. After transferring out of the transplantation ward, Sasaya's physical condition became worse than before, he always shouted for his painful feet, he spent most of his time laying on the bed. Although he could hardly leave his bed, he still kept his baseball glove and bat on his desk, telling his parents not to pack it up, or he couldn't see it at any time. Seeing his suffering, my team and I felt extremely sympathy for him. Fortunately, under social worker's assistance we contacted with Make-A-Wish foundation again, asked for a cooperation. We together assessed Sasaya's condition and communicated with another organization for many times, finally we successfully contacted with a baseball coach and principal, both from Chung Zhen Primary School, and we made an agreement that we would choose a day to satisfy his dream, together with medical team from the hospital and baseball team from the primary school.

When that day came, I helped him put on his exclusive jersey, socks and shoes. With the best-looking suit on his body, Sasaya's lovely face showed us a smile that had not appeared for a long time. He seemed to forget any painful he was suffering, enjoying the moment on the playground, pitching and swinging. When they get home, Sasaya's mother called me and said: "He's so excited that he doesn't want to take off his suit!" Through the telephone, Sasaya told me: "Miss nursing director, would you like to come to my house? It's really funny!" This was the first time he took off his alert and invited us, and from that moment on, as long as he had to get an injection and blood draw, he always designated me



to help him finished it. Although still scared to cry, he could hold back painful and wait until the process ended.

For helping patients to accomplish their dreams, all the team members, wherever they come from, they have to support and throw themselves into the planning. Before the plan implement, the preparation work includes vehicles and dream place arrangement. Beside evaluate patients' physical conditions, medical team members also need to discuss any unpredictable situation, preparing medical machines such as absorption, surgical dressing, blood-pressure meter, thermometer and so on, to made provision against emergencies. Also, patients' families and other staffs must understand the whole process and attentions of the plan. Everyone must know, all the complicated preparations have the same goal: to help the dream-accomplishment plan finish with smooth and safety.

According to several times of dream-accomplishment plans' participation, we appreciate all the workers from Make-A-Wish foundation, thank you for your generous investment for cancer children. We also feel appreciate for those kids' parents, they listen and respect their kids' wishes, which give us a chance to know what these children thinking and how we can help them accomplish it. Of course, we express our most appreciation for these brave angels, from their willing to make a sound for themselves and make great efforts to chase dreams, we learn the courage and strength of life for them.

One Last Wish to Attend His Daughter's Wedding

Early morning, inside the Heart Lotus Ward, family members and nursing staff were busy preparing for Mr. Ma's temporary leave from the ward so he could attend his youngest daughter's wedding engagement ceremony. His oldest daughter and I helped him dressed. The most important step was to hide his urinal bag so no one could tell he is a patient. We needed to switch to a smaller portable bag from the regular size so it can hide inside his clothing. Next, the in-charge nurse briefed me and reminded me to watch his condition. We also discussed his medication with his physicians. We were now ready to accompany his journey home.

Mr. Ma is a patient under palliative care. I have been taking care of him for about a year. Ma is independent in his daily routine. He was admitted into Hematology for pain management. As soon as the pain was under control, Ma was anxious to go home because he missed farming, raising chickens and growing vegetables. His oldest daughter said her dad wanted to manage his health through organic diet. Ma nodded and said, "It's better

**By Lin Hsiao-Chun, Heart Lotus
Ward Palliative Shared-Care RN,
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Translator: Doris Shieh**

to eat the vegetables you grow yourself.” The nursing staff heard his wish and did their best to control his pain so that he could be discharged as early as possible.

Unfortunately, a week after his discharge, Mr. Ma's pain returned and he also showed signs of edema with weight loss. When he was hospitalized again, his primary care physician admitted him to the Palliative Heart Lotus Ward for hospice care and treatment.

Once arrived at the Heart Lotus Ward, Ma asked, “Can I take the targeted therapy? I can pay out of pocket if needed.” It turned out that he wanted to be able to attend his youngest daughter's wedding. Because of his deteriorating



Hualien Tzu Chi Hospital Heart Lotus Palliative Care team accompanies Mr. Ma's journey home by changing into Indigenous (Buno Tribe) gown to attend his daughter's engagement ceremony.

health, his family obliged to the medical care team's recommendation to move up the wedding engagement schedule.

After some consideration, the oldest daughter decided to have the engagement party at home and the wedding ceremony a week after at a nearby church. The most worrisome task was Ma unpredictable pain condition. When Ma heard of all the trouble his family and the medical care team had to accommodate for the ceremony, he said with reservation, "It's okay if I don't participate. Let's see later." We all knew how bad he wanted to attend his youngest daughter's ceremony. His oldest daughter even had his traditional indigenous Buno tribal outfit tailor-made so he could wear it at the party.

To make his wish come true, our palliative medical team decided to accompany him home.

Once home, Ma was so excited to see his grandchildren. He gave them big hugs and placed them on his lap. At this moment, we saw a content and peaceful smile lit up on his face. Everyone in the tribe used their native language to pray for Ma's health and gave him blessings. After the engagement ceremony, Ma wanted to spend the night at his home and sleep on his own bed to feel free and at ease again. We taught his daughters how to care for their father at home and how to administer injections. With our presence, the family was more comfortable and confident in their care for him to fulfill his wish.

On the journey of palliative care, we often accompany patients during the last mile. We try our best to ensure patients can have their dreams come true so they can leave the world without regrets. Of course, through hospice care, we also grow to appreciate life from a broader perspective.



Lin Hsiao-Chun said that working as a palliative nurse gives her a broader perspective towards life.

When to Work on “Advance Care Planning”?

**By Chang Heng-Chia,
Vice Superintendent,
Taipei Tzu Chi Hospital**

Patient Autonomy Act is a patient-centered medical law and the first legal act in Asia that ensures legal protection to patients' right to autonomous decision and termination of life-sustaining treatments. The act is legislated to “respect the patients' autonomy when receiving medical treatments, to protect their right to good death, and maintain a harmonious relationship between the medical officers and the patients.”

The impermanence of life is constant, and hence the reservation for a good death. So when is a good time for advance care planning (ACP)? Impermanence of life is what makes personal health management a critical issue. The majority of people tends to be hesitant or careless in managing their health particularly when they are in good physical conditions. With the wave of aging and changing in family structure sweeping near, engaging in advance care planning and signing an advance decision (AD) becomes a very important issue. No one knows when impermanence hits. When it hits, no one is prepared.

When is a good time to engage in ACP?

We recommend you to initiate ACP when you have one of the following 5 Ds.

The first D stands for decade. When you hits 50, 60, 70, 80, or 90 years of age, in addition to celebrating your birthday, it may be an excellent chance to take the time and think about your future plan, which, of course, should include advance decision!

The second D stands for diagnosis. When your doctor diagnosed you with a several disease, you may feel depressed, angered, panicked, or agonized. By engaging in advance decision, you can calm yourself and begin planning one of the most important arrangements in life.

The third D stands for decline. When you discover that your eye sight, hearing, vitality and memory deteriorates, or that your joints are stiff and in pain, and your hands tremble uncontrollably, furthermore tasks you used to handle easily are now challenging and time-consuming, and you begin to feel weak and shortness of breath; and that your doctor confirms that your illness has deteriorated and your health has degenerated, aside from medication, surgery, rehabilitation, walking cane, walker, wheelchair, rehabilitation bus, day care, elderly home and other arrangements to accommodate your current needs, you should also consider what to do when your conditions decline further. Advance decision is therefore crucial. Take your time to discuss it with your family members. Make your own decision for your final moments.

The fourth D stands for discharge. Congratulation on your recent discharge. However, if you are hospitalized because of some acute diseases, hospitalization may bring you out of danger, and you may be discharged once your condition has stabilized, the onset of your acute diseases have led to the deterioration of your vital organs (including heart, lung, kidney, liver, and brain) and your self-care ability. It is terminal. Do not fear the ultimate ending that is unavoidable to all. Please draft your advance decision now!

The fifth D stands for divorce (divorce or widowhood). Your spouse is your closest companion in life, and in most cases your spouse is your representative in the advance decision. Divorce or widowhood are consequently one of the greatest challenges we face. Many vital documents must be revised, financial management replanned, social interactions readjusted, and many other arrangements that would require your attention. Advance decision is one of them. According to clinical data, people's health tends to deteriorate drastically a year after a divorce



Taipei Tzu Chi Hospital held a trial run by Vice Supt. Chang Heng-Chia (right) for advance care planning clinic, promoting patient autonomy on medical decisions. Chang You-Kang on the left.

or widowhood, and the risk of death increases exponentially. It is important to plan your life after the loss of your significant other, and to include advance decision in your planning.

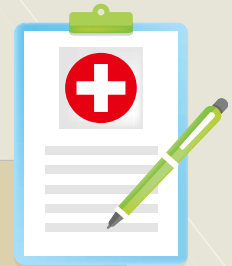
Life is filled with surprises, and among them is impermanence. When you face one of the 5 Ds, discuss ACP with your family and your physician. Timely preparation and planning will make your life a whole lot easier. I would like to remind you again, “drafting an AD does not mean you are giving up on life. It is the opposite. After signing your AD, you should seize every moment and live your life to the fullest before the inevitable arrive.”

Patient Autonomy Act

The declarant, at least one relative of first or second degree of affinity, and the health care agent shall participate in the advance care planning set forth in Subparagraph 1 of the preceding paragraph. Relatives who have obtained consent from the declarant may also participate.

To complete advance decision and for it to take effect, the act requires the declarant in person, at least one relative of first or second degree of affinity, and the health care agent who can make decisions on behalf of the declarant to participate in a consultation with an advance care planning clinic in a hospital designated by the Ministry of Health and Welfare, draft an advance decision in writing after a in-depth discussion with the medical team, and be notarized by a notary public or witnessed by two or more persons with full disposing capacity before the advance decision is registered in the declarant's National Health Insurance IC Card. When the declarant meet one of the five specific clinical conditions, after diagnosed by two physicians in relevant specialties and confirmed through at least two consultations convened by the palliative care team, the medical institution or physician may, in accordance with the advance decision, partially or fully terminate, withdraw, or withhold life-sustaining treatments, artificial nutrition and hydration.





☆ **What is Advance Care Planning (ACP)?**

The process of communication between the patient and medical service providers, relatives, and other related parties regarding the proper care that shall be offered to the patient and the options he or she has to receive or refuse life-preserving treatments and artificial nutrition and hydration when the patient is in specific clinical conditions, unconscious or unable to clearly express his or her wishes.

☆ **What is Advance Decision (AD)?**

A prior written and signed statement expressing the willingness of a person to accept or refuse life-sustaining treatment, artificial nutrition and hydration, or other types of medical care and a good death when he/she is in specific clinical conditions.

The five specific clinical conditions:

1. The patient is terminally ill.
2. The patient is in an irreversible coma.
3. The patient is in permanent vegetative state.
4. The patient is suffering from severe dementia.
5. Other disease conditions, announced by the central competent authority, that shall meet all of the following requirements that the conditions or sufferings are unbearable, that the disease is incurable and that there are no other appropriate treatment options available given the medical standards at the time of the disease's occurrence.

Life-sustaining treatment: necessary medical measures that can prolong the lives of patients, such as cardiopulmonary resuscitation, mechanical life-support system, blood products, special treatments for specific diseases, and antibiotics against severe infections etc..

2. Artificial nutrition and hydration: Provision of food or fluids via tubes or other invasive means.

Note: The current do-not-resuscitate consent and organ donation consent can be signed by the declarant and be registered in his or her National Health Insurance IC Card. But according to the Patient Autonomy Act, advance decision can only be signed after consultation at advance care planning clinic. Advance decision does not have to be signed at the advance care planning clinic. It can be signed or modified at a later date.



No Matter How Far, My Life Path Would Never Change

By Yang Ting-Yu, RN, Yuli Tzu Chi Hospital Translator: Doris Shieh



Since I joined the Tzu Chi family, “Nursing” became the center of my universe and “volunteering” turned into an irreplaceable side job. In the “virtuous” environment of domestic to international Tzu Chi activities, I experienced the suffering of the underprivileged and learned to appreciate what I already have. Those who are less fortunate also inspire me by their kind acts benefiting others. I am grateful for many benefactors along the way. I am also thankful to be serving as goodwill ambassador of Tzu Chi University of Science and Technology under the guidance of Humanity Director Hsieh Li Hua. She



made me realized that building a career and volunteering could be in tandem and it is possible to have passion, happiness and positive energy as you give your best. How can you give up this under such wonderful circumstances!

Every passing second working in the society is a treasure. Confronted with a lack of resources and three-shifts per day schedule, I appreciated the countless support from Head Nurse Ni Chun-Lin from the Yuli Tzu Chi Hospital. She made it possible for me to volunteer in Tzu Chi activities: medical, culinary, recycling, family visits, prayer services, sign language, foreign and domestic free clinic, and social work teams to practice my attentiveness and to energize my body, heart and soul while warming other souls.

Starting at the community recycling station, I learned from veteran Tzu Chi volunteers, who may look older but still youthful in the heart, that we must learn to bow and focus our mind in order to appreciate people and things from a different perspective. Master Cheng Yen's purifying the heart is about practical living, cultivate



humanity and be able to instill emotions when interacting with patients or their families. During home visits, I felt the suffering of the disadvantaged and less fortunate families. Many developed drinking habit endangering their health. The elderly who suffered from chronic diseases were living under filthy conditions because of their inability to care for themselves. Under the guidance of Tzu Chi veteran volunteers, many care recipients experienced loving care - “good people do good work and good deeds are being done by good people.” Everyone can turn their palms downward and be the givers. When I am back at the ward, I would share my volunteering experiences with patients or their families. Volunteering is about practicing what you say, be it a simple smile, a calming word, a peaceful expression or a considerate gesture.

Overlooking cross borders, we have visited Malaysia, Singapore, Indonesia, Australia, and Cambodia. I saw how people cherish their limited resources. They have “nothing” yet their lives are simple and natural. They possess the most genuine smiles that come from their unpretentious souls. They value every drop of water, every lamp, every pair of shoes and every medical treatment. Through them, whom we only encounter once in our lifetime, we discovered ourselves the true meaning of giving because we benefit the most. Love is the best anecdote for hopelessness and depression and our hearts are our best assets.

I am whole-heartily grateful for what my parents bestowed upon me. We continue on our journey of virtuous deeds. The spread of happiness to others, even if there is only one beneficiary, we must be perseverance and grateful for the opportunity.

Think about setting sail with love, as stated by Master Cheng Yen, “If it is the right thing to do, then just do it.” When the seeds of love is planted in your heart, love will sprout and spread to every corner in need. Let the volunteers start the rippling effect when they spread love and kindness. The journey of volunteering can start at any time. I hope the power of love can light up our lives!



Walk out of Hospital to Help Cure the Needy

Kuo Jui-Min,

Nurse Practitioner, Orthopedics Dept., Dalin Tzu Chi Hospital

By Hsieh Ming-Fang



“It’s a blessing that I can go to work when I get up every morning,” is not a surprise according to Kuo Jui-Min. What is keeping her going for twenty some years of nursing career even though nursing was not her first choice? What was her motivation and energy to stay in the nursing field?

Good Daughter and Appreciative with Companion

In Dounan, Yunlin County, there was a family with two boys and two girls. Among them, there was a girl named Kuo Jui-Min who was very introversive. Because of her introversion, her uncle guessed she would be either a teacher or a nurse when she grew up.

When she was in Junior High school, she felt she didn’t study hard enough and didn’t do well in math. She wasn’t interested in business or vocational school, thus, nursing became her choice. “I didn’t do well for the entrance examination for high school. Thus I told my mom, I would go to a nursing school.” Prior to that, there were alumni who came to school to recruit and introduce Min-Hwei Nursing School (now Min-Hwei College of Health Care Management). Therefore, she thought it was good that she could learn nursing and have a job after graduation. So she was persuaded by the nursing career opportunity.

After admittance into Min-Hwei Nursing School, she and four classmates from Junior High packed and went to school. For three years, they lived in the dormitory, studied together, rented a house together, and finished school. Then a filial Jui-Min went straight to work at a small hospital in Douliu after spending a lot of her parents’ money for college.

After four years, she felt she needed to advance her academic knowledge; therefore, she went to Taichung and worked during the day and went to school after work to get a two-year college degree. Right after graduation, she chose to work in Dalin Tzu Chi Hospital in 2002 that wasn’t far from her house and just opened for two years. Then, in early 2003, SARS broke out in Taiwan and everyone had to protect himself or herself to be insulated from infection, especially those who worked in hospitals. She was also very careful to protect herself from infection and safely avoided the SARS storm.

The job as a nurse requires working three shifts. Sometimes, there is no time to drink water. In 2004, Orthopedics Department was recruiting a nurse practitioner (NP). Jui-Min wanted to give herself a chance, so she switched her career path and became an NP. At that same time, she registered for on-job study for a two-year university degree.



Journey to Disaster Relief and Free Clinics

In 2007, Jui-Min got her university degree, and, she began her unusual yet critical year of self-development.

One day, her head nurse received information about Tzu Chi's winter relief activity and asked if she would like to participate. She felt it was an unusual opportunity and wanted to give it a try. As expected, her kind heart was touched. "We were at Guizhou, deep inside the mountains in Mainland China and exhausted after a long journey. The children there struggled with no money to go to school. With Tzu Chi's help, they now can go to school."

After seeing others in hardship, she realized how lucky and wealthy she was in Taiwan upon her return. She shared what she saw with her colleagues. In 2010, She grabbed the opportunity to attend Tzu Chi's first free clinic in Suzhou with her colleagues.

Since then, she also started to participate in Taiwan's free clinics held by Tzu Chi International Medical Association (TIMA). "Most of the time I work in the hospital with patients come to seek help. To participate in free clinics, we can help those who can't leave their homes."



Because her hometown is in Yunlin County, she primarily participates in the events held by TIMA's Yunlin Branch and follow up patients' condition monthly. There was an elderly whose arms and legs were amputated due to necrosis was being cared for by his wife. Whenever he had to leave the house, his wife needed to lift him from wheelchair and ordered a car, it is very tiring for both of them. "So we visit them every month, we are like friends to show our caring for them and to encourage them. The patient can share his feelings with us. We chat like friends." For her, it is not like visiting patients, but to visit old friends.

Spot the Most Beautiful Smile on Earth

From Da Ai television, we could see the free clinics being held globally and supported by TIMA from all over the world. TIMA's spirits of helping the world touched Jui-Min. She wanted to have the experience working with other countries' medical staff herself.

In November of 2013, super Typhoon Haiyan severely damaged the Philippines, her name appeared on the dispatch team list. When she arrived in the Philippines, she experienced life vicissitudes. No one knows if tomorrow or impermanence comes first.

"When typhoon comes, it destroys the entire home. Therefore, when I open my eyes every morning, I feel contentment. I can come to work is a blessing." She could not forget the experience of disaster relief. "Previously, we were able to stay in hotels,



no matter how rundown, when we went to disaster area; there were always beds available. However, in Philippines, we did not have any beds. We stayed in the classrooms with mosquitos nets and slept on the floor.”

“When I looked around, I reminded myself this: ‘ Not too far from here, there were people who had no place to stay, even the necessities like water or food. I had a place to stay is a blessing.’” After returning to Taiwan, her colleagues asked her how she could sleep in that harsh environment. Her answer astonished her colleagues “Not at all, we were so much luckier than those victims.”

Whenever there are free clinics locally, she would assist surgeons to clean the wounds. She would inject anesthetic to help patients ease the pain. She felt sad seeing patients enduring pain. She said, “Patients usually endure pain but still smile to thank us. The most beautiful smile is the smile from the patient.”

Another beautiful scene that she saw was the teamwork led by Dr. Robert Sy from the Philippines’ medical team to remove patients’ tumors.

Spending the International Nurse’s Day in Buddha Country, Nepal

In April of 2015, Nepal had a big earthquake. Jui-Min joined the Tzu Chi’s third relief tier. On May 9, she accompanied doctors to visit a local resident’s tent to care for a 32-year-old who had Hydrocephalus but looked like a very young girl.

When she saw the young woman had many wounds, she felt so bad. “She must had been bedridden for many years and undergoing treatment from hospital for a while. There are seven big wounds on her head, hand, hips, and buttocks. We can see five areas were eroded exposing the bones. Some tissues were dead. Dr. Yeh Tian-Hao cleansed and treated the wounds while we assisted. It took nearly an hour to complete the tasks while the flies were roaming nearby.”

During the dressing change, rainwater sipped into the tent so everyone helped to raise the girl’s bed. Every time, when she changed dressing, Jui-Min felt sad just like that heavy rain. “Her condition is so bad that she should have operations for new skins. I felt that she didn’t have appetite and she is so skinny.”

On May 12, Kuo Jui-Min and Hualien Tzu Chi Hospital RN Chueh Na-Yao visited a grandma and her family. It was already noon. She was about to eat banana and apple that she brought back from the hotel, and to prepare materials for the afternoon’s visit. After that, she was going to help the change dressing for patients at the clinic. Suddenly, she heard roaming noises from the ground and the birds were flying everywhere, then an earthquake happened.

The earthquake was big. Jui-Min was so scared she dropped down to hide. Then a resident came and said a house had fallen and there might be more victims



coming to the free clinic. Dalin Tzu Chi Hospital Vice Superintendent Lai Jun-Liang and Hualien Tzu Chi Hospital's Deputy Head Nurse Tu Ping-Hsu immediately started preparing the system to accommodate the flooding victims.

Jui-Min and colleagues immediately packed the equipment and medical supplies and rushed to scenes that needed help.

It was her first trip to Nepal and she experienced a big earthquake while halfway through her stay. This experience deeply affected Jui-Min's heart.

Doctors Save Life, Attributable Half Credit to Nurses

From being a nurse to becoming an experienced nurse practitioner, Jui-Min felt her experience made her grow-up. "I am now not only taking care of patients, but I now care more about other factors affecting patients." For example, she sometimes visit patients' home to check-on the living environment, figuring out other factors affecting health.

Every month Orthopedics Dept. NP take turns to accompany primary doctors to take care of patients. However, Dr. Chien Rui-Teng's patients seemed to follow Jui-Min. For example, Wang Kuo-Chen from Penghu was under her care for two months already.

"The main caregiver is Jui-Min who always reminded me the needs of patients," said Dr. Chien who described himself as not a detail-oriented person. He is happy to cure patients, realizing that the nurses pay more details and attention to the needs of the patients. The contact between nurses and patients as well as the family are much deeper so they could see the stories behind the patients.

Chien saw Jui-Min a warm-hearted caring person attentive to details. "Our cooperation is like fishes needing water and water needing fishes. I often have many activities to attend. When I cannot find anyone to go, she would never decline my invitation."

Jui-Min sincerely devoted herself to free clinics, rescue missions, and disaster relief. "She is in Orthopedics for many years, not only is she enthusiastic with humanity activities, she also helps the relief effort without hesitation. All of these are because of her kind heart." Chien observed her as a practitioner, not only is she a follower and now an activist. She motivates others to participate in these activities and to become Tzu Chi Commissioners. "She participated at almost all the international reliefs. I went with her many times with other Taiwan's medical association to free clinics like Suzhou, relief mission in Nepal...."

"Medical staff shouldn't always stay in the air-conditioned room waiting for patients to come, what we can see in this situation will be limited," said Chien. He



emphasized to walk out of the examination room, and leave the air-conditioned room to go in the real world. Visit disaster areas and patients' home will show the real concern for patient-centered medicine.

Asking for Nothing, But Receiving More in Return

"Tzu Chi provided us many good opportunities to help the world, especially those medical personnel who always are at the front line for rescue mission; they show concerns for patients accompanied by the Tzu Chi volunteers. To a certain degree, one can't differentiate between a medical or charity issue." Chien felt that medicine and charity are side by side. Medical personnel not only have special knowledge on medicine and also have the kind heart. Mercy plus wisdom is a double blessing just like Jui-Min devotion without asking for anything in return.

"I really appreciate this blessing!" That is what Jui-Min felt after she came back from Nepal earthquake relief.

These days, she keeps telling herself, "Always look at my own life and appreciate what I have and remind myself if I have helped others." The next winter relief, she would like to be in Yunan because it is much harsher environment than Guizhou in China.

"Welcome to the relief mission!" is Jui-Min self-discipline and everyone's expectation. Kuo Jui-Min wants to use every opportunity to help others.



Hospital Staff as Taiwan Tulip Movement Disorder Association Volunteers

By: Wang Wan-Hsiang, Supervisor, Nursing Department, Hualien Tzu Chi Hospital

Photo by: Tulip Movement Disorder Association

Flash of an Idea, Becoming of a Volunteer

There is a group of people working in the deep mountains. They take care of their patients while on the job. They take care of their patients while off-duty. To the ordinary people, it is a burden, but to this group of people it is joyful. The group is expanding by the day. The group started because in 2007 a doctor full of love attended the first World Parkinson Congress. From the meeting, this doctor came back with the idea that people in the health-care business should not just provide medical care to their patients. They should also provide care and resources for the patients' living, work, and mental status. This doctor is a professor of Neurosurgery, Chen Hsin-Yuan. Dr. Chen is the director of a medical department as well as the neurological department of the Hualien Tzu Chi Hospital. With the kind heart of Dr. Chen, a group of volunteers came together about ten years ago to organize this Tulip Movement Disorder Association in the back mountains (behind Hualien). Dr. Chen and his team of medical professionals share the idea of treating patients as friends. In this way, their patients feel like they are members of a medical team. Tzu Chi volunteers also encourage themselves to learn from their patients and called them "Park Friends", or "Friends".

Encourage Their Patients to Participate in a Multitude of Activities


The Association offers medical lectures routinely. It also sponsors many stress relief workshops, such as yoga, tai chi as well as making of butterfly art. These varieties of activities are welcome with enthusiasm for participants. The Association also encourages patients to form small groups with special interests. These small groups have their own schedule of activities. As a result, a northern group likes to sing, to play tai chi, while a southern group loves to hike and bike, and an eastern group gets together to dance. With these activities, our patients clearly show that they can overcome their physical difficulties with strong mental wills.





Volunteers of the Hualien Tzu Chi Hospital Tulip Movement Disorder Association, from left: Supervisor of Neurology Dr. Lin Sheng-Huang, Secretary of Tulip Movement Disorder Association Yang I-Fung, Neurosurgeon Dr. Tsai Sheng-Chung, Head Nurse Yu Chai-Lung, Parkinson Researcher Ho Tien-Wen, Associate Head Nurse Kung Fan-Chun, Liao Hsin-Yao (wife of Dr.Chen Hsin-Yuan), Specialist Lee Chih-Wei, Director Dr. Chen Hsin-Yuan, Parkinson Researcher Lo I-Hsin, Assistant Researcher Chen Yu-Yu, Personal Assistant Lin Yu-Ting, Personal Assistant Chen Yu-Chen, Supervisor Wang Wan-Hsiang.

In order to educate the public about the Parkinson diseases, the Tulip Movement Disorder Association encourages all patients to step into the open world. In 2014, the Association sponsored an annual memorial concert, at or around the World Parkinson



Day. Our first concert invited many established singers to perform. Gradually, we included our Friends to perform on stage. This way, our Friends not only can enjoy the performance, they actually become part of it. Through these kinds of activities, we showed the public the courage of our Friends to fight their diseases and their determination to overcome obstacles. Through these concerts, we attracted more and more new volunteers and new Friends.

The day before our 2017 concert, we encouraged our Friends to make posters to illustrate their battles with the diseases. The posters were made with professional quality comparing with those in medical conferences.

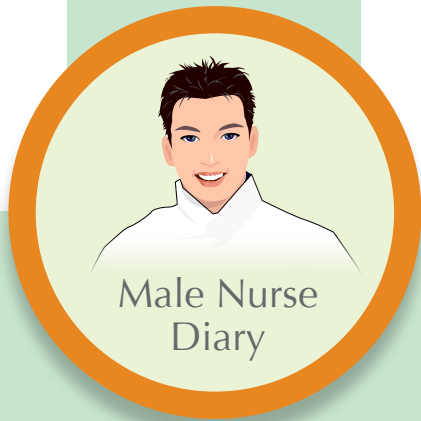
On the day before our 2018 concert, we invited members of Hong Kong Parkinson Diseases Organization to participate in a road walk. These handicapped patients were inspired, that they all bravely run/walk without giving up.

Hand-in-Hand, They Walked

A very special activity organized by the Association is our spring and autumn trips. Our Friends now have travelled all over Taiwan in recent years. Because of the difficulties of physical movement with Parkinson disease, care of our Friends during the trip is a great concern for patients as well as families. However, our volunteers are all healthcare professionals; this earned their trust and relieved their concerns. Therefore, every time we sponsored a trip we had at least two busloads of participants. The volunteers were so moved every time when witnessing the Friends overcoming their handicaps and walked out to the open world. On the other hand, the selfless accompanying of the Friends' families was highly admired by the volunteers.

Often times, patient's family would share their difficulties in caring for their loved ones. However, the answer is always that with love they always can figure out the best way. The objective of the Association appears to be taking care of our Parkinson patients and their families by our volunteers. However, taking a deeper look into our activities we realized that the experience not only improves our work skill but also beautifies our lives.

Since the forming of our Association ten years ago, our activities never stop. As the organization grows, our volunteers also grow with it. We learn to help each other selflessly and to learn from each other. From our Friends, we also learn to be brave, to walk out of the clouds and to live with the illness.



Show My Confidence and Pride as a Male Nurse

By Lin Liu Wen-Bin,
RN, Ward 6B, Dalin Tzu
Chi Hospital

I was born in Hualien County, eastern Taiwan, and grew up in an Amis ethnic family. I graduated from the Junior College of Tzu Chi University of Science and Technology as a hospital subsidized student. Why I chose a nursing career? It started from the death of my aunt who died from breast cancer. She was so close to me just like my second mom. I decided that I had to take care of my family.

Because I was Tzu Chi Foundation subsidized, I was assigned to Dalin Tzu Chi Hospital in Chiayi County, western Taiwan, after graduation. I started my nursing career in the intensive care unit of internal medicine. In the past, we often heard from school seniors that male nurses are highly protected in the workplace, and female seniors treat male nurses well, etc. However, I realized later that senior nurses (mostly female) treated all freshmen the same after I joined the workplace. In addition to the pressure from the ICU, different diseases, and the use of equipment I needed to learn from the beginning, I started to have the thought of quitting many times. However, because of the head nurse and senior sister's encouragement, I gradually survived from the tough environment.

Clinically, we appeared "inattentive", "absent-minded", or not suitable for giving care to female patients. In practice, I have never experienced the unequal treatment for being a male. Everyone is doing the same kind of work whether it is urine bag or bathing female patients, we are practicing the same expertise. As a male, our advantage is the strength. Not only can we handle the movement of medical





equipment and materials, but also dealing with overweight patients, for instance, the tasks of turning over patients and dealing with hot tempers. Gradually, I started to gain grounds in the ICU. However, because I wanted to try to challenge myself in different environment, I transferred to the chest medicine and infection ward to continue my nursing career after a year in the ICU.

While working in the ward, I have seen all kinds of patients, responding to the emergency calls, turning on the air-conditioning, TV, helping to get water, logging into hospital Wi-Fi, etc. In addition, because I am the only male nurse in the ward, it is easy to be doubtful in the mind of patient's families. However, I have accumulated a fair amount of expertise and self-confidence; I do not care about the family's questioning and the distrustful attitude.

I remember once helping a patient with an intravenous injection; a family member asked rudely, "You must be a new comer! Should we get a senior nurse? My mom is very afraid of needles." However, I answered him very calmly, "I am the best one of injecting needles in the whole ward. You are welcome to ask others to do it, but I cannot guarantee you how many pokes your mom might get." At the time, the family watched me placing the needles with disdainful face. Of course, one poke was all that needed, as usual.

Being looked down as untrustworthy needlessly, I believe that as long as I am providing good care to patients, it does not bother me. I also learned a motto: "If it is right thing, just do it."

The work in the ICU and currently the chest and infection ward, I have seen the life cycle of birth, aging, illness, and death. Many times pressure made me want to quit. My encountering with unreasonable patients and families was the bad part of the job. Looking back, these incidents did not dampen my enthusiasm for nursing. In this high-pressure environment, it only helped me grow. It made me to do well with my expertise in every minute and second and taking good care of my patients.

I am a male nurse. I am proud of my job.



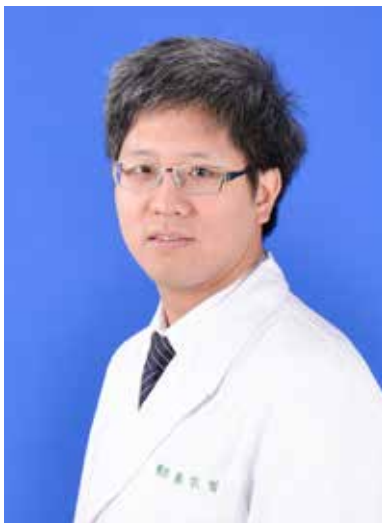
As a Nursing Records Reading Lover Chief

**By: Dr. Hsiao Tsung-Hsien, Vice Director of Medical Quality Center & Director of Ward 12B,
Taipei Tzu Chi Hospital Translator: Wesley Tsai**

During my morning rounds, I sit in front of a computer and start reading patients' records: doctor's instructions and orders, the first thing to check is the patient's vital signs. Comparing vital sign changes with the previous day records and the frequency of defecation, I/O, blood sugar, and pain statistics. This routine has been developed over the years. These numerous nursing records and data help doctors in their daily rounds. It makes it more accurate to diagnose a prognosis and make corresponding decisions.

The nurses in Ward 12B all know that I like to read nursing records. As I said earlier, I believe nursing records determine the important basis for changes in a patient's diagnostic. Even judges handling court cases know what to read when it comes to nursing records. I always focus on some written numbers or texts so I can communicate with the nursing director or nurses. (I think I probably bothered them too often that is why I am the ward director).

In fact, we all know many errors or safety concerns are often due to poor or miscommunication during shift





changes. Looking back, honestly, doctors and nurses really do not communicate when working in the ward where opportunity for exchange is becoming less. Reviewing the scenes: when patrolling the ward in the morning, nurses are making shift changes so they cannot come along with the doctors. Even if they do, in most case doctors arrive the same time, making it difficult to attend to the nurses. In addition, if a doctor's orders look weird, nurses want to ask but is afraid to bother us. Instead, they ask a specialist who might not be helpful. They turn to the senior nurses who often do not know the answer. Wat do they do? When the doctor checked the ward, a patient complained black stool so an endoscope was ordered, but nurses said it was because of stomach pain. The doctor and specialist said that the patient is expected to be discharged tomorrow, today the intravenous injection stops, then DC. Before the patient got discharged early morning next day, night shift people also changed the patient's IV cath – these conditions or problems often miss one sentence or a shift; however, sometimes this simple and natural thing is the hardest to achieve.



Starting from August 2018, every week there is a fixed day where I meet with the ward nurses before handing over the shifts. I try to emulate the doctors' morning meeting, choosing one or two ward cases to discuss every time. My idea is, if the nurses have a better knowledge of the disease and course of the treatment, understand the thinking logic of physicians', they will be more aware of what they are doing when performing instructions and reduce the chance of errors. In addition, I also hope the nurses share their thoughts; I will be the doctors' and nurses' medium and solve the problems during work in the ward. At the beginning everyone was quite polite, mostly I sing a one-man show; after several times, my colleagues start expressing opinions and ask questions willingly, even the Nurse Director and Ward Supervisor gave feedback. It seems that my colleagues' responses are good so far. I will continue doing it and hoping to have a positive impact on the ward.

Doing medical casework for more than a year, I deeply felt the nurses' efforts and contributions. Take this hospital for example; there were 1,050 reported medical cases in 2017. Amongst them, nurses reported 782 cases, accounting for 74.5% of the total if you add more reported from physicians. Many of the cases, like falling, tubes, medicine, etc., are all reported and reviewed automatically. This is a great thing. On the other hand, the performance of doctors participating in this area is a bit unsatisfactory. As a physician, I understand the clinical work and stress is heavy, causing them to avoid administration and process reviewing. However, when one is capable does not guarantee the success of the team. Such as, LeBron James cannot lead the Cavaliers to win in the NBA. No nurses and other medical staff, not even doctors can complete medical work just by themselves. Therefore, any person and any problem are common problem of the team. It needs every team member to face the problem together.

Communication and cooperation has never been unilateral, it needs each other to take a step back and move forward. Taking a step back to discard some of your own prejudice and move forward to accept other's opinions and consider others. Currently the hospital's various units are developing a TRM (Team Resource Management), hoping through team spirit and some ways of communication and mutual aid, we can break through some long-term dilemmas with the promotion of illness and culture. Amongst all, I think the nursing staff should play a pivotal role and hope to share their spirit and experiences with other members of the team.

I want to thank all the nursing staff. Their perseverance and giving is a solid backup for the work of medical care.

Thank Nephrology Nurses for Always Being Kind to Patients

By Dr. Chen Yi-Hsin, Director of Nephrology Dept., Taichung Tzu Chi Hospital

“Director, 2087-1 Wang Hsiao-May only weighs 42.5 kilograms, breathes heavily, blood pressure at 188/96. How do we do the dialysis today?” “Director, yesterday my father said he was very weak. Can he only do two dialyses this time?” As soon as I walked into the hemodialysis room, there was always a bunch of people surrounding me for questions.

Hemodialysis and Peritoneal dialysis are for patients with final stage of kidney diseases. The inconvenience of the living with the dialyses, have created a painful experience for patients and their families. Therefore, patients always ask for the less painful alternative (one or two times or one time per month). I always ask my great assistants, the nurses, to help in this situation.

The interactions of nurses with patients are close, they look solemn but their behaviors are lovable. All strangers will think they are close relatives. Thus for those patients who want less hemodialysis or peritoneal dialyses, I ask the nurses to handle the situations. Even though patients do not want to go through dialysis, nurses always have a way to convince them. As a doctor, I only need to do the approval with nodding. One can see the mutual understanding and trust between nurses and patients.



For doctors, the most frequent interacting persons are nurses in the professional field. Everyone has his/her specialty. The softness and patience of the nurses, and the patients' trust upon them, are the motivation for following nurses' advices.



Every month, when patients are due back for a return checkup, we can always see the nurses busy helping patients, observing their tube placement, and telephoning those who have in-home services. They also observe patients and family members for their concerns regarding the dialysis. To the doctors, the best support is to understand patients' condition and explain the most effective approach. All these unwritten communication between doctors and nurses serve as great understanding between us. Nurses always play different roles in helping patients, sometimes like mothers when caring their patients. One can see that they are very happy when patients get well and when patients in pain they do not shy to comfort them. Those are very touching moments.

I remember an instance when a peritoneal dialysis patient was hungry with low blood sugar but was embarrassed to say anything. A nurse observed the problem and offered her own breakfast to the patient. Few months later, the patient still appreciated her kind deed that saved his life and was thankful to be able to come to this hospital.

Sometimes, the nurses for peritoneal dialysis visit patients' home. Only when they are in the patients' home, can they uncover many important health problem to help them manage efficiently. Sometimes, patients demand or complain, but nurses respond with kindness and firm. Because of their belief in helping people, they can understand patients and earn their trust.

During these years at the Taichung Tzu Chi Hospital, we especially appreciate the nurses from Hemodialysis and Peritoneal dialysis. Because of their attentiveness, diligence, and considerate manners, we as doctors can focus on the medical care and treatment. It is understandable that there will always be some conflicts because of different opinions, or some misunderstandings, and even small arguments when it comes to the treatment of patients. Because of their tolerance and good communication skills, we are able to resolve these differences and provide the best care for patients. Thanks to all the medical personnel, they are the most important assets for the hospital and deserve our respect and appreciation.