

# We Must Save Her Life

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“Our patient’s son wrote us an appreciation letter and made Bao-Tze (steamed bun) to treat us. He kept on saying, ‘We really appreciate all of you so our family has one more chance of reunion.’...” The head nurse reported this in the ward morning meeting and reminded us that saving precious lives was so important. I was one of the members on that team, thus witnessed this life-saving miracle.

Our 9A ward primarily takes patients with neurological disorders. One day, while on duty with another junior nurse and our head nurse, we had a patient grandma who required blood transfusion because of low red blood cells count and black stool. After we started the transfusion grandma was stable and conscious. We went on to attend others. All of a sudden the junior nurse ran to me asking for help, “Please come and help me with grandma, she looks strange.”

Immediately I dropped everything and ran with her. “Is she the one who was talking with me just a few minutes ago?” Grandma coma index dropped from 15 to 4, and blood pressure was between 50 and 60.

I immediately adjusted grandma’s IV, and told the junior nurse to notify the attending doctor while asking the carer what happened. The junior nurse nervously replied, “She just went to the restroom and then it happened; I don’t know what is going on.” The nurse practitioner came thereafter to support us. Then slowly grandma regained consciousness and her blood pressure was back to normal. The medical team, including us, felt relieved but continued to play detectives searching for the causes. During the process, grandma’s vital signs were unstable. We felt extremely pressured and worried.



Meanwhile, we continued setting-up beds to receive new patients from the emergency room, preparing shift changes while the emergency bells kept ringing constantly. Our shift leader quickly allocated resources to handle the situation. Our head nurse directed us on grandma's follow-up. We coordinated really well and the ward were handled smoothly.

The oldest son of the grandma came to visit and the visiting doctor explained grandma's critical condition while the team kept searching for the cause of her illness. The son expressed that he didn't want his mom to

suffer too much because of her old age. Thus, he signed a “Do not resuscitate” order. Knowing her prolonged unconscious condition, he felt depressed and worried. We comforted him and constantly checked on grandma’s condition hoping to find the causes of her illness.

Grandma was in coma when the night shift began. The junior nurse for the night shift was terrified because this was her first encounter. She seemed to have seen our confusion during day and knew she would be lost. We decided to stay and take care of grandma so the night shift nurse was relieved to attend other priorities. Then when they couldn’t detect the blood pressure, the doctor and family members decided to



place both nasogastric and urinary tubes. When we placed the nasogastric tube into her stomach, fresh blood drained out from the tube. We finally figured the cause, it was her stomach bleeding.

The visiting doctor and us immediately examined her to stop the bleeding. Meanwhile, we worked to stabilize grandma's vital signs. As we continued to find suitable intravenous sites, we encountered more serious problems and challenges.

The blood from grandma's nasogastric tube kept coming out, her stool was bloody, blood pressure was unstable, her arms and legs were getting cold, the color of her legs were changing to marble white, and catheters were hit and miss. Doctor continuously had to swap pumps and medicines. We were busy changing diapers, calculating blood volume, preparing the intravenous, getting the transfusion ready, and adding more blankets to keep her warm. When the catheters failed, we replaced them and checked the medicine, providing medicine, and tried to encourage the family. We were about to give up after an hour's hard work without seeing any signs of improvement, then we heard a loud voice from our head nurse: "We must save grandma!"

Hearing the cheering word we took a deep breath and continued to fight for grandma. It seemed like grandma heard our call; she groaned as if she was fighting and doing her best! Finally, we stabilized grandma's vital signs. Then grandma was able to go through an endoscopy examination and the bleeding spot sutured. After that, she was in ICU for observation and when her condition was stabilized, she was transferred to Gastroenterology ward. After few days, she recovered and was home with family.

When the visiting doctor and nurse practitioner expressed that while grandma was transferred to Gastroenterology ward, the family members kept thanking us for saving grandma. They wrote us a "Thank you letter" with a thousand words. The most impressive words were: "When I saw my mother fighting for her life, I could only sit next to her hopelessly. When the head nurse said 'We must save grandma', I saw the light at the end of the tunnel."

Those words kept circling in my head; I deeply understand its meanings in our profession. Love is invisible, and it builds on trust and hope from patients and family. We do our best to save lives. In nursing, there is only success in a team and no personal heroism.