



Special Rookie Nurse during COVID-19

By Hsieh Yi-Wen, Ambulance Special Nurse, Kuanshan Tzu Chi Hospital



COVID-19 spread swiftly over the whole world in 2020. However, in Taiwan, under the great efforts of the entire population, we maintained the excellent result of zero indigenous infection. The first case of indigenous infection was detected in May of 2021. Ever since that time, the scenes of the pandemic that were only seen in the news before became a reality in our daily life.

I graduated from Tzu Chi University in 2019, majored Nursing. After my graduation, I worked in Hualien Tzu Chi Hospital as a Medical Intensive Care Unit nurse (ICU). After about a year and a half, a job opening was available in Kuanshan Tzu Chi Hospital. Kuanshan is closer to my home town. For that reason, I applied for a transfer in March 2021 and became an Ambulance Special Nurse.

The experience I gained from my services in the ICU was a big plus for my new job in the ambulance. Other than the skills to care for the severe illness, in ICU, I also learned how to interact with all types of people. Under the highly pressurized environment of the ICU, one often has the expression of “Dead Eyes”.

Hsieh Yi-Wen (right) was transferred to Kuanshan Tzu Chi Hospital as an ambulance special nurse. Not long after she took the new job, COVID-19 threatened, protective equipment were required on the job.



Working in the Intensive Care Unit of Hualien Tzu Chi Hospital. Exhausted at the end of the shift. Hsieh Yi-Wen's "Dead Eye" was captured by a colleague.

But the knowledge one gained from there not only help you to face different kinds of crisis. It also helps building up confidence in the nursing career. Even though there were no real COVID-19 cases while I was in Hualien Tzu Chi Hospital, the administration provided simulations for staff training. All medical personnel must seriously handle the simulated cases as real patients. That included the handling of protective gears and contact and treatment of patients.

In those drillings, we would following the procedures and put on all the protective equipment outside of the classroom. After the simulation, we would then step out of the classroom and removed the protective gears. Even though we were not very familiar with the procedures and proceeded with the drilling



slowly at the beginning, we all followed the instructions step-by-step. After all the protective equipment were removed, we would step toward an instructor, holding an purple flash light to search for residual “virus” that were carried out from the classroom. The “viruses” were corn flour with fluorescent agent that was spread all over the simulation room. If our protective gears were not put on carefully, those tiny corn flour were be carried out of the room by our clothing and easily detected by the purple flash light. From these drillings we learned how to prevent the virus to spread, absolutely.

Not too long after I transferred to Kuanshan Tzu Chi Hospital, indigenous infection exploded in Taiwan. The event deepened the difficulty of my new job.

Special nurses are always on 24 hours alert. Every time, when a hospital transfer notice arrives, the first thing we do will be to put on all the isolation equipment. This requires a certain amount of time to do. Even though the ambulances are equipped with air conditioners, but with the heavy protective gears on, we still suffer under the heat. In addition, the movement of the vehicle becomes a burden in carry out our nursing care tasks. For example, the task of intubation for sputum, it is a normal task in a hospital ward. But inside an



ambulance, one needs to first turn on the power of the suction machine to avoid over consumption of electricity in the car, the machine is usually turned off. The poser is turned on only needed. Then one needs to connect the surgical tube with the sputum suction machine. We also have to put on the special gloves and remove the inner tube of the suction machine. All these details need to be performed in a moving vehicle, before the actual task of sputum suction can be performed. Inserting the suction tube under the moving ambulance is a major challenge. The first time I took such an assignment, I just could not control my own hands. In other words, the tube just behaved like a disobeying dancing dragon. Sometimes, it took a long time just to locate my target, and, many other times because of the traffic condition (sudden brake of the car) my target just jumped away after I have carefully aimed it. In all these occasions, the sterilized tube would be contaminated and all the preparations needed to be repeated.

In the case of hospital transfer, even though the patient has no related symptom and with clean record of contact (TOCC, travel history, occupation, contact history and group gathering), we still need to wait for COVID-19 quick screening test results to arrange for a transfer. To transfer to another hospital





the on duty special nurse need to confirm the negative test result before leaving the vehicle. Usually, if the patient can talk, I would conduct a detail discussion of his (her) medical history before transferring him to another hospital. During the pandemic oral communication is often hindered by the face mask and/or the transparent face shield.

Seize This Mount, Express Your Appreciation

Once I was helping to transfer a senior patient with pneumonia. His screening test result was negative. For safety reasons, I put on all my protective gears before boarding the ambulance. The patient was an old male and not accompanied by any family members. He looked at me and curiously asked me, “How am I? Am I infected with the strange disease?”

I understood what the old gentleman meant by strange disease. He learned COVID-19 from the TV news broadcast. Even though his test result was negative and he has no contact history, his case should be simply pneumonia. But there were cases when negative turned positive. In addition, for hospital transfer, we could not rule out the possibility of exposing to positive patients in the other hospital. So, we needed to be careful all the time. I told my patient that his x-ray results look like he just infected with ordinary pneumonia. But the old gentleman was still very worried and said, “If I am going to die, don’t perform any life-saving aids.”

The number of confirmed cases and deaths were announced daily in the news. Even in the county of Taitung, people watched the news constantly. Mentally, my patient was affected by the news. I tried to comfort the old man and told him not to worry too much, we will transfer him to the hospital in town for more careful check. The doctors in the hospital will then evaluate his conditions and discuss the details with him. I tried to talk authoritatively in order to calm down the old patient before me. However, my face shield seemed too distant from him. I therefore reached him with my hands. Even with my gloves and all the protective equipment between us, the old gentleman seemed to feel my warmth.

When our ambulance arrived safely at the designated hospital, usually the patients and their family members would greet us with thanks. Even though the words were simple, “Thanks for your careful accompany on the way,” I was moved by their sincerity.

Quiet often, the family members were accompanying the patient. In those



Seeing the medical personnel with protective gears, the patients were confused. The special nurse not only has to pay attention to the patient's vital numbers, she also needed to calm down the patient's mind.



occasions, I would tell the patient that their companions deserve more thanks.

Whether it is in the ambulance or in the hospital ward, in our profession, details of interaction between people are revealed in front of our eyes. I think people tend to hide their feelings in front of others. Also in the nursing profession, we realize that unexpected things can occur at any instant. Therefore, we should not hesitate to express your feelings clearly to our love ones. Bless the world, bless Taiwan, let all people be safe, be healthy and distant from the pandemic.