

2020 Hope Babette Tang Humanism in Healthcare Essay Contest

Third Place Nursing Student Essay: Mia

Sonia Max

Pancreatic enzymes, a host of respiratory medications, two different antibiotics, a steroid, an appetite stimulant and to top it off, a surprisingly high dose of anti-depressants ...

“Far more medications than a 17-year-old should be taking,” I think as I scan through the chart of my first pediatric patient, Mia.

Upper respiratory infection, history of cystic fibrosis complicated by malnutrition, 6th percentile for weight, regular marijuana use ...

I log off. Following the cues of the sign posted on Mia’s door, I gown up and pull on my gloves and mask. I pause, then knock.

“Come in,” I hear.

I walk into Mia’s room. She is wearing a nasal canula, lying on her side, and watching a video on her phone. She is small, very skinny, with a jet-black bun tossed on top of her head, and looks more like 13 than 17.

“Hey Mia! I’m Sonia, I’m going to be your student nurse today,” I say cheerfully.

“Hi,” she says, without looking up.

I feel a blatant nurse-patient divide as I, in my isolation garb, nervously approach a pajama-wearing Mia to perform my assessment. When she sits up, I notice her shoulders are arched forward into a kyphotic position, something I have seen only in the elderly. I fiddle with the pulse oximeter, trying to attach the cords and get an oxygen reading.

She takes the cords into her hands and clicks them into place.

“Oh, thanks!” I say, embarrassed that I am already making a fool out of myself.

Please see the end of this article for information about the author.

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“Are you nervous?” Mia asks, sizing me up with a coy smile at the corner of her mouth.

“No, not really,” I lie, trying to sound nonchalant.

After gathering vital signs, I listen to Mia breathe. I hear her lungs crackle, and see the outlines of her central line port and ribcage through her white camisole. I document my assessment findings, and Mia reverts back to staring at her phone. When I’m done, I walk to the window and look out.

“You’ve got a really nice view here,” I say.

“Yeah, I like the rooms on this section of the unit because I can see the Domino Sugar sign there lit up at night,” she says, pointing. She comes over to join me. We kneel side by side on the window seat, and she orients me to the city of Baltimore below, my new home as a

nursing student. She tells me about her parents, her dad’s girlfriend, her younger half-siblings, and her bulldog. She says she is pretty sure her brother’s friend gave her the infection.

Over the next hour, Mia gets visits from a dietician who tells her she needs to eat more, and from a respiratory therapist who straps her into a vibrating vest that helps her cough up thick secretions.

Later in the morning I bring in cans of formula for Mia’s tube feeding. As I prepare to administer the feeding, Mia picks up a can and pours it into her syringe attached to her gastric tube, watching the fluid disappear into her body. This is her everyday reality; she doesn’t need my help.

When she is done, I ask if she wants to take a walk.

“Uh ... okay,” she says.

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The Arnold P. Gold Foundation holds an annual essay contest to encourage medical and nursing students to reflect on their experiences and engage in narrative writing. The contest began in 1999 focused on medical students and expanded to include nursing students in 2018. Students are asked to respond to a specific prompt in a 1,000-word essay.

For the 2020 contest, students were asked to use the following quote as inspiration to reflect on when they’ve experienced or observed, as an individual or as a team (doctors, nurses, therapists, etc.), the impact of human connection:

“Medicine cannot heal in a vacuum. It requires connection.” —*In Shock*, by Dr. Rana Awdish

More than 200 essays were submitted. A distinguished panel of judges, ranging from esteemed medical professionals to notable authors, reviewed the submissions. Three winning essays from medical students and three winning essays from nursing students were selected, along with 10 honorable mentions. The winning essays will be published in consecutive issues of *Academic Medicine* and the *Journal of Professional Nursing* in the fall/winter of 2020.

The contest is named for Hope Babette Tang-Goodwin, MD, who was an assistant professor of pediatrics. Her approach to medicine combined a boundless enthusiasm for her work, intellectual rigor, and deep compassion for her patients. She was an exemplar of humanism in medicine.

The Arnold P. Gold Foundation infuses the human connection into health care. The nonprofit organization engages schools, health systems, companies, and individual clinicians in the joy and meaning of humanistic health care, so that they have the strength and knowledge to ensure patients and families are partners in collaborative, compassionate, and scientifically excellent care.

“Great!” I say. I like to get my patients up and moving.

We assemble her cords and IV tubing and make our way out of the room. She pulls the IV pole alongside her as we walk laps around the unit and chat about her many stays here. She tells me that when she feels well enough, she likes to venture off the unit to buy candy at the hospital gift shop just past the Jesus.

“Past the what?”

“You know, that huge statue of Jesus on the first floor?” she prompts.

“I must have missed it,” I say.

“Well that’s an achievement,” she laughs. “You have to work hard to miss it. I’ll take you there in the afternoon,” she says.

“Deal,” I say.

We return to the room and I head to lunch. When I get back, I notice that Mia has changed her outfit, let down her hair, and put on makeup. She is peering into a small mirror, finishing the last touches of eye shadow.

“Wow, you look nice!” I say.

“Thanks!” she says.

Moments later, a young male resident comes into the room to talk to Mia about her plan of care. Once he rounds the corner, Mia turns to me with bright eyes and says, “could he be any more attractive?!”

I laugh and nod in agreement.

“So that’s why you put on all that makeup!” I joke.

“Yep, he comes around in the afternoons,” she explains, blushing.

A classmate pokes her head in the room to inform me it’s time for our clinical group to convene to discuss the day’s events.

Genuine melancholy comes over me as I collect my things for the day knowing that I will most likely not see Mia again.

“See you Mia, it was good to hang out with you today.”

“Yeah, you too,” Mia says. “If I’m still here next week, we can go see Jesus.”

“Sounds good,” I say, smiling.

In class, we learn medications, diagnoses, and technical aspects of nursing. In clinicals, we are challenged to apply all this knowledge but in a way that is specific to the patient. When my day began, Mia was a list of information in a medical record. And to her, I might have been just another person in a revolving door of strangers who were only there to poke, prod, and monitor her for changes. By overcoming the nurse-patient divide, we both grew far beyond our initial impressions of each other and I got to watch her spirits be lifted as she chatted, walked, and tried to impress a boy. Healing comes from genuine interpersonal connection, and I will take this lesson to heart as I enter my career as a nurse.

Editor’s Note: The patient’s name and other details have been changed to protect patient privacy.

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