Entering maternity this semester, I wasn't sure how much of an impact I would be able to have on pregnant women going into labor. The fact that I am a male and have no children of my own made me think it would be especially challenging for me to build a trusting relationship with my patients.

Then I met a first time mother who was to undergo a routine C-section. I could tell she just needed someone to talk to about her concerns and to dispel her worries. She asked many questions about the procedure itself and the drugs she would be given, so I spoke with the sisters (that's what nurses are called) if I did not know the question to make sure she got answers. When the time came for her C-section, she seemed even more frightened. They had not told her when she would be taken to the theatre, so she was surprised when it was time. She asked the doctor for 5 minutes to pray, which he denied. I was able to intervene and asked the doctor to allow her time to pray before surgery. Although I could tell he was not happy with my request, he respected it and gave her 5 minutes. (Don’t worry; it wasn’t an emergency C-section!) It allowed the patient time to pray and prepare herself for what was to come, and when she was done, she stepped out on to the gurney, appearing much more relaxed. She called me over and told me she really appreciated me standing up for her and allowing her those few minutes. She told me that faith was very important, and she was impressed that I was able to understand how important it was to her. She headed off to the theatre in a much more relaxed state and delivered a healthy baby girl a half hour later.

This experience, to me, was the very essence of what PRAXIS (Professionalism, Respect, Accountability, eXcellence and Integrity and Service) is all about. This encounter made me realize that PRAXIS is not just a word, but something that can be incorporated into all nursing care. In this encounter, I feel that I was a professional. I met all the patient’s needs and answered questions in a professional, honest manner. I also feel that I was respectful of what the patient wanted and of her religious beliefs.

“ I knew that standing up to the doctor was somewhat risky and that no matter what the outcome was, I had to be accountable ...”

Accountability was huge in this encounter as well. I knew that “standing up” to the doctor was somewhat risky and that no matter what the outcome was, I had to be accountable for what I said and did.
While I feel that excellence is something all nurses should strive for, I don't consider myself to be "excellent" yet.

When it comes to integrity, I feel that I was able to build a relationship with the patient in which she was able to trust me due to my ability to deliver honest answers to her questions and my desire to ask someone if I did not know the answer. Finally, when it comes to service, I feel that it is the nurse's responsibility to advocate for their patient, especially when it may lead to a better patient outcome, as I believe it did in this case.

Overall, I feel that this experience defined what nursing is to me. I believe that nursing is doing everything you can to improve a patient's outcome, whether it is by hanging an IV bag, administering an injection, comforting someone who is scared, or simply listening. An important way I was able to accomplish a positive outcome in this situation was to advocate for her desire to pray when the doctor wanted to rush her into surgery. In this way I was able to improve her feelings about the situation while providing the anesthesiologist a calmer, better informed patient. From this incident I gained the confidence to trust my nursing instincts and challenge doctors and other providers when I feel that it will lead to a better patient outcome. - Jeffrey

Senior Paul Banach’s “melting pot” blog entry during his San Juan, Puerto Rico semester ...

As we enter our sixth week in Puerto Rico, I remain in a state of disbelief that I am a resident (although temporary) of San Juan, Puerto Rico. UConn Nursing here is an incredible (and rare) opportunity for nursing students to have a learning experience beyond the mechanism of amlodipine, the wonders of the islets of Langerhans, and the everlasting anxiety that maybe, just maybe, four minutes of vigorous scrubbing was not enough to remove that one sneaky C-Dif spore lingering among your fingers. Completing our Med-Surg and Psychiatric rotation in San Juan provides for the unique human experience of cultural immersion - understanding and relating to a specific group of people and way of life distinct from our own.

Living in another country (or commonwealth) is a potent lesson in the common threads of human nature. Remember when you were six and a half years old and adults seemed like an entirely different species? They had a different way of life, a different way of thinking, a different – if you will – culture. And then you grew up a bit and were forced to interact with them, and even worse, become one. Suddenly, you realize that your second grade teacher wasn't the all-powerful omniscient and slightly terrifying idol that you remember her as. She was a person, just like you. The more you learned about adulthood, the more you understood it, and the more you related to it.

Unfortunately, we are not all forced into a process of broadened cultural understanding as we are with the phenomenon of understanding adulthood. Yet, whether you realize it or not, you have more in common with a native Puerto Rican, or South African, or Indonesian, or an Icelander than you think. Sometimes you just don't realize it until you meet the son of your Spanish-only speaking patient in room 402 who is coming to visit his dad in the hospital after an aortic valve replacement, is studying biology at the local university, and is struggling to learn English just as much as you’re struggling to speak Spanish. We may speak different languages, eat different types of food, and listen to different types of music, but we all have parents, we all get sick, and we are all humans living the best we know how to on this rock called Earth.

This is one of the most valuable lessons ever to be learned – one that cannot be taught in a classroom. Yet this is a lesson that can make all the difference in patient care, especially in the melting pot we call our home where we will be serving patients from all over the globe. It is my hope that the fourteen of us will return to Connecticut with a greater understanding and empathy for all people, prompting us to become leaders in culturally competent care among significant health disparities. - Paul