

Compassionate Actions

Leaving a Lasting Impression

Gloria Zylstra, RN

We all want to be remembered when we are gone from this life, and we all want to leave a legacy to those who survive us. Most of us also would like to bless our descendents with the legacy we leave behind. The following story is about two patients with cancer who did just that. Their names may have been changed for this writing, but their legacies continue to transform the lives of everyone with whom they came in contact with.

Sally and Karen were both young mothers (at least from my point of view as a grandmother myself). One was 50 years old, a mother of middle school- and high school-aged daughters. The other was a 30-year-old mom to elementary- and preschool-aged kids. Both women had breast cancer and both had been through numerous surgeries, radiation, and treatments. The toughest blow of all was that both of them had cancer that continued to grow.

However, neither of them let cancer control their lives. During their treatments, they refused the privacy mandated by the Health Insurance Portability and Accountability Act because they wanted to sit side by side, each with a drip running into their veins, so that they could discuss what ball games they were going to see and trips they were going to take next. They made plans to go off together and get new wigs because they knew that, as long as they were on treatment, their hair simply was not coming back in.

Sally loved to bake and pretty much everyone who knew her was the recipient of her baked goods. And she always remembered her oncology nurses, whom she often treated with homemade cookies

baked fresh from the oven on the morning of her treatments. She would bring in her recipes so we could try to make our own but, somehow, they never turned out quite as delicious as her creations. Thankfully, she did make sure to pass on her secret talents to her daughters who now make chocolate chip cookies just like their mother's.

Karen would sit in her chemotherapy chair, patiently writing out recipes that her own young children enjoyed. Sure, her arm didn't work the way it should have, but she insisted that her legacy would be a handwritten recipe for each of her children. She knew she was not going to be there to see her children graduate from school or eventually get married, and she knew it would be a whole lot easier for her simply to leave a computer file of recipes for her kids to use in the future. But that was not the legacy she wanted. Her children would receive their mother's recipes in her own handwriting because, Karen insisted, that's the way I can leave some of myself and my own love with them.

Never did either of the two young mothers complain. For caregivers, families, and friends alike, they left us a legacy of quiet patience and calm acceptance of the circumstances we are in. Both have now gone on to their eternal home, but their legacies continue to enrich those of us who remain and we remember them with fondness and love.

Gloria Zylstra, RN, is a staff nurse in the oncology outpatient clinic at Orange City Area Health System in Iowa. Zylstra can be reached at zylstracq@yahoo.com, with copy to editor at CJONeditor@ons.org.

Elemental Support

Ann Marie M. Lee, RN, MPH, OCN®, CHES, and Sandra Jarr, RN, MSN

Visitors and staff who walk the halls of the University of North Carolina (UNC) Hospitals have a quick and clear vision of the support and presence that is being provided to families in need of comfort at the end of life. Compassion carts, as they are aptly named, stand in front of the rooms of patients nearing the end of life and offer nourishment and information on grief support services to the families so they can remain at the bedsides with their loved ones. The carts also offer additional support to families, such as lowering stress levels, while the nursing staff is focused on the patient. The compassion cart program came about when several nurses from UNC attended a presentation on comfort care at an annual Planetree Hospital meeting. The idea was then explained to the bereavement support services staff and to Angelo Mojica, director of nutrition and food services at UNC. Mojica said that his department would be very interested in partnering with nursing and



Photograph courtesy of University of North Carolina Hospitals. From left, Sandra Jarr, nurse consultant for the comprehensive cancer support program, Angelo Mojica, director of food services and nutrition, and Jacci Harden, nurse manager of the coronary care unit, all at the University of North Carolina Hospitals in Chapel Hill, prepare a compassion cart for delivery to a patient's room.