How can I promote healing outside of my clinical setting for patients in need of a transplantation?

Adrienne Schleisman, BSN, RN, is a staff nurse at the Children’s Hospital and Medical Center in Omaha, NE. The author takes full responsibility for this content and did not receive honoraria or disclose any relevant financial relationships. Schleisman can be reached at asmacchietto@gmail.com, with copy to CJONEditor@ons.org.

Nurses are individuals called to both care for patients and families and facilitate the healing process. Our profession fills a unique role in health care as oncology nurses combine medical science with the art of interpersonal relationships to provide both physical and emotional support for patients. Promoting healing and facilitating adjustment draws individuals to become exceptional nurses and is an innate quality of oncology nurses (American Nurses Association, 2016). It is a characteristic not easily separated from one’s personality. Often, nurses become frustrated in their inability to do more for a patient or the family members. This feeling becomes particularly prevalent in life-limiting or life-threatening conditions, most notably cancer.

I, like most oncology nurses, have struggled to accept that there are limits to my healing abilities. I can successfully administer the best-known drug therapy, manage and mitigate the side effects of chemotherapy, and lend a supportive ear to patients and their families. However, I cannot always erase the disease that causes my patients so much physical and emotional pain. In the midst of my daily challenges as an oncology nurse, I reaffirmed my interest and updated my contact information for Be The Match®, a national bone marrow registry, which I had joined as a junior in college. At that time, I was motivated to join the program because a nursing school classmate was diagnosed with acute lymphoblastic leukemia and received a bone marrow transplantation. When she returned to school, she was a champion for national bone marrow registries, and my classmates and I flocked to sign up. When I reaffirmed my willingness, I did it because I was working first-hand with pediatric patients with cancer and realized I could do more to help the fight against cancer outside of my scheduled shifts.

In February, I received an unexpected email. Be The Match notified me that I was a preliminary match for a patient needing a bone marrow transplantation. I immediately contacted the organization. I was asked if I still was willing to donate my bone marrow, and my interviewer seemed shocked by my answer. The interviewer informed me of the possible procedures, the risks, and the requirements as a donor. I was also warned that accepting this responsibility early on in the process and backing out later may have devastating consequences for the patient and the patient’s family members. Again, my answer was a definite yes. I informed the interviewer that, if selected, I would do whatever was required of me to ensure a successful donation for transplantation. In my work as an oncology nurse with pediatric transplantation patients, I have seen the consequences of an uncommitted donor.

As an oncology nurse, I am blessed with the ability to help save lives. Most nights, when I go to bed, I realize that I have made some aspect of the oncology diagnosis a little better for patients and their family members. Unfortunately, I am unable to completely eradicate every patient’s malignancy. It is a harsh reality; however, I have the ability to give a second chance at life for one patient. It is a humbling and powerful realization.

REFERENCE

KEYWORDS
bone marrow transplantation; blood cancers; acute lymphoblastic leukemia; donor registries

DIGITAL OBJECT IDENTIFIER
10.1188/17.CJON.389