

Nursing Services Newsletter for Monroe Carell Jr. Children's Hospital at Vanderbilt

SPRING 2025



Call to Action 4

Pre-op phone calls reduce same-day surgery cancellations



The Nurse's Nurse

6

Get to know our Clinical Education Facilitators



Now Open

(7)

New safer unit debuts on 12C with innovative designs



Nurses Week: Celebrating Excellence in Care

A letter from our Chief Nursing Officer

Dear Monroe Carell Jr. Children's Hospital at Vanderbilt Family,

Welcome to the May 2025 edition of *The Thread*, our newsletter dedicated to celebrating and spotlighting the extraordinary work of our nursing and patient care services teams. As we celebrate Nurses Week, I am thrilled to present an issue brimming with stories that underscore the dedication, innovation, and excellence that define our nursing community.

This edition features an update from Caroline Epps, our Senior Director of Ambulatory Services—Primary Care. We also take a closer look at a day in the life of our Clinical Education Facilitators who work tirelessly to mentor and guide our nursing staff, fostering a culture of continuous learning and professional development. Their efforts are pivotal in maintaining the high standards of care that our hospital is known for.

We are excited to celebrate the opening of our new unit, 12C, specifically designed to support the safety needs of pediatric patients who benefit from unique designs to support increased environmental safety. In this issue, we will also welcome an innovative program focused on supporting children through their hospital stay using a pediatric gaming and technology specialist. This unit and the gaming program embody our commitment to providing safe, personalized care.

Our improvement efforts shine in this issue including the features of our pre-op phone call program that has been a resounding success in reducing same-day surgery cancellations. We will highlight the completion of the My Health Passport research study, a testament to our nurses' commitment to advancing pediatric care through evidence-based research. The findings from this study will undoubtedly enhance our approach to patient-centered care.

Our NICU CLABSI watcher program has been instrumental in reducing central line-associated bloodstream infections, demonstrating our ongoing dedication to patient safety and quality improvement.

This issue also highlights the achievements of our talented nurses, including a feature on a certified nurse and another who has obtained a rank on our VPARE Clinical Ladder. Their accomplishments are a testament to the hard work, dedication, and excellence that are hallmarks of our nursing team.

As we celebrate Nurses Week, I invite each of you to reflect on the incredible contributions of our team. Your unwavering dedication, intellectual curiosity, and commitment to excellence are the threads that weave together the fabric of our hospital's success.

Thank you for your continued support and engagement. Together, we will continue to advance our practice and improve the health and well-being of the children and families we serve. I hope you enjoy reading this edition and take pride in the remarkable work we accomplish together.

Warmest regards,

Natchin

Gretchen K.D. McCullough, MSN, RN, NEA-BC Chief Nursing Officer





As we celebrate Nurses Week, I invite each of you to reflect on the incredible contributions of our team. Your unwavering dedication, intellectual curiosity, and commitment to excellence are the threads that weave together the fabric of our hospital's success.

Pediatric Ambulatory Primary Care

Senior Director of Nursing Update

In November of last year, I rejoined the pediatric ambulatory team as the Senior Director of Nursing for Primary Care. Reflecting on my journey in pediatric primary care, which began over 17 years ago, it is remarkable to witness the growth and evolution from a handful of practices located on the Main Campus to now having 17 locations across Middle Tennessee and Hopkinsville, Kentucky. These locations offer families access to comprehensive pediatric primary care services, including the Vanderbilt Integrated Provider (VIP) and VIP MidSouth practices.

Each of these practices has unique characteristics and serve varied populations, yet they all share a collective commitment to quality care and population health. A key focus is ensuring patients are up to date on their well-care visits, which allows our teams to partner with families to screen for appropriate growth and developmental milestones. To support this, we have robust outreach processes in place to identify patients needing appointments, as well as detailed dashboards that help pinpoint clinic capacity to accommodate these patients. Many of our practices are certified as Patient-Centered Medical Homes (PCMH), a designation that requires adherence to primary care standards and ongoing quality improvement initiatives. Additionally, several locations hold a certification as Rural Health Clinics (RHC), ensuring adherence to guidelines tailored to the care of rural communities.

Our frontline teams are comprised of various clinical roles that incorporate a teambased care approach. This collaborative model ensures that each patient receives comprehensive and coordinated care, leveraging the distinct expertise of physicians, nurse practitioners, nurses, medical assistants, and other health care professionals. Additionally, the non-clinical roles within our team play an equally vital part in the patient experience and are often the first faces our patients see or the first voices they hear when they call or come to the clinic. There are also invaluable teams outside of our clinics that are partners in the care continuum for patients including Population Health, the Pediatric Appointment Line, and specialty care clinics.

It is exciting to be able to meet patients where they are through the expansion of Monroe Carell Jr. Children's Hospital at Vanderbilt's Primary Care. Whether we are supporting a patient and family through an acute illness, management of complex and chronic conditions, or the care of their well child, we strive to provide the highest quality pediatric primary care, fostering healthier futures for the children, families, and communities we serve.

Take care,

Carolins

Caroline Epps, MSN, RN, CPPS Senior Director of Nursing, Pediatric Ambulatory Primary Care





It is exciting to be able to meet patients where they are through the expansion of Monroe Carell Jr. Children's Hospital at Vanderbilt's Primary Care.

Patient-Centered Research

The "My Health Passport" Study

he "My Health Passport" tool, or MHP for short, was developed to address gaps in care for children admitted for behavioral health concerns. MHP is an "All About Me" style document that children and their caregivers can complete with their nurse or patient safety team member to individualize care and help staff understand the likes, dislikes, triggers, and coping needs of their patients. Until recently, little was known about how patients, families, and staff using MHP felt regarding the tool's benefit to care practice. In October of 2021, a research study led by Jessika Boles, PhD, CCLS, Patti Runyan, DNP, MBA, RN, NEA-BC, EBP-C, and Andrea Hughie, MSN, RN, NEA-BC, sought to evaluate just that!

With help from Delana Vallery, MA, Dorinda Brown, MSEd, and child life graduate students from Vanderbilt University, this team got to work. In total, 100 admitted behavioral health patients, 74 parents/caregivers, and 76 staff members were surveyed on their experience with MHP. Opinions were overwhelmingly positive with almost all participants agreeing that MHP contributed to better care experiences and outcomes! As a result, it was highly recommended that the MHP be integrated into the electronic medical record, with that work currently underway. The team is looking forward to presenting at the 2025 ANCC Magnet Conference in October and already has one manuscript under review and another planned to be submitted for journal publication.

- by Jessika Boles



VPARE SPOTLIGHT

Trust Your Gut: Lindsey's Advice to Nurses

Lindsey Davis, BSN, RN, CPEN, has been a Pediatric Emergency Department (PED) nurse since graduating from the Accelerated BSN program at Belmont University seven years ago. Initially drawn to the PED's fast pace, Lindsey stays because of her incredible colleagues and continuous learning opportunities.

Lindsey pursued her RN4 after realizing her involvement in many unit and hospital initiatives were applicable to the RN4 role. She is especially proud of her work as cochair of the PED Safety "Superheroes" Committee, which focuses on improving patient and staff safety. Lindsey encourages others to trust their gut and seek backup when something feels off. She advises, "when in doubt, if you think you should, you probably should [seek help]."

Lindsey also encourages those considering moving from RN3 to RN4 not to doubt their ability to make a difference and improve their unit and hospital. She says, "if you see a need [for improvement], there probably is a need." - by Ashley Ried



Katie Kaicles, BSN, RN, CPN, and Savannah Bauer, BSN, RN, discuss the patients scheduled for surgery whom they will call to ensure the patient and families have all needed information prior to the day of surgery.

Pre-op Calls: Turning Surgery Stress into Success

he Holding Room (HR) and Post-Anesthesia Care Unit (PACU) play an important role in ensuring our pediatric patients are safe on the day of surgery. In January 2024, Kim Isenberg MSN, APRN, CPNP-PC/AC, NE-BC, Advanced Practice Manager, LeighAnn Chadwell, MSN, RN, NE-BC, Associate Nursing Officer of Pediatric Surgical Services, and Katie Kaicles, BSN, RN, CPN, a Registered Nurse 4 in perioperative services, created a task force to develop a strategy to address significant gaps in pre-operative surgery information given to families that were contributing to a 6-15% rate of same day cancellation across all specialties. Identifying an opportunity for improvement, a process for perioperative pre-surgery calls was created.

This process enables a dedicated HR/ PACU nurse to make phone calls one week prior to a patient's scheduled surgery. During this call, the nurse reviews arrival times, eating/drinking guidelines, medication records, recent illnesses, custody agreements, and answers any questions the family has prior to the day of surgery. The Preoperative Assessment and Teaching for Children's Hospital (PATCH) advanced practice providers are available to provide support to the nurses making the phone calls.

Kim presented this pilot at The Health Management Academy's Nursing Manager Idea Labs program in Washington, D.C. in March 2024. She then presented this project to hospital leadership where it was received with overwhelming support. Meg Rush, MD, MMHC, president, and Gretchen K.D. McCullough, MSN, RN, NEA-BC, chief nursing officer, approved a nursing fulltime equivalent (FTE) position dedicated to perioperative phone calls Monday-Friday.

In May 2024, Urology was the first specialty to go live using this new process. Same day cancellations for Urology decreased from 13% to 6% in eight weeks. Since then, Plastic Surgery has also gone live. The goal is to provide all specialties with this service. There are currently 11 HR/PACU nurses trained to perform phone calls with plans to train more as this service is expanded. - by Danelle Bradley



[]



Graden Knapp is the new gaming and technology specialist for Monroe Carell Jr. Children's Hospital at Vanderbilt. Graden attended specialized training and received required certification to become our pediatric gaming and technology specialist.

PHOTO ERIN O. SMITH



Graden Knapp, a gaming and technology specialist, plays Mario Kart with Ellie Jones, 9, on the Butterfly Garden Stage at Monroe Carell Jr. Children's Hospital at Vanderbilt.

A Day in the Life

of a Gaming Specialist!

Hospitals can be an overwhelming environment for patients, filled with unfamiliar sights, sounds, and procedures. Graden Knapp, the new Gaming and Technology Specialist at Monroe Carell Jr. Children's Hospital at Vanderbilt, helps ease the experience by using gaming to support, educate, and connect with patients.

As part of the Patient-and Family-Centered Care team, Graden's role is dynamic and evolves alongside emerging technology. No two days are identical, but a typical day includes program development and patient care. Graden's mornings, starting around 10 a.m., often involve meetings focused on collaboration, patient care, and upcoming initiatives. On days without meetings, Graden focuses on managing and inventorying gaming devices. From 3 p.m. to 6:30 p.m., he sees two to three patients.

Graden spends 45–90 minutes with each patient, tailoring his approach to their individual needs. He begins by introducing himself and his role, often meeting patients through referrals from child life specialists, who help facilitate the introductions. Graden then builds rapport with the patient, determining how best to support them. Sometimes, this involves simply talking about gaming, while other times, it's actually gaming together. At times, the conversation flows easily: other times, Graden gives patients space, allowing them room to 'breathe.' One of his favorite things about gaming is that "it can be used as a medium to express and share stories." Graden helps patients connect with familiar narratives and characters, which can then open the door for processing harder emotions.

After the workday, Graden spends time learning on his own-investigating new gaming devices, familiarizing himself with hospital protocols, and expanding his knowledge of the patient population.

By blending his passion for gaming with compassionate patient care, Graden fosters meaningful connections and supports the healing process. Through this innovative role, Graden is redefining how patients experience, adapt to, and cope with the unique stressors of the hospital environment, making him an invaluable part of the team. – by Lia Herrera



Members of Clinical Education Facilitator Team - Pictured left to right: Emily Lockwood, BSN, RN, CCRN, Ellis Daugherty, MSN, RN, CCRN, Zeydi Zambrano, BSN, RN, CCRN, Natalie Johnson, MSN, RN, CPHON, Amanda Lampley, BSN, RN, CCRN, and Erin Shook, BSN, RN, CPN

The Nurse's Nurse: Who are the Clinical Education Facilitators?

t Monroe Carell Jr. Children's Hospital at Vanderbilt, clinical staff consistently deliver exceptional bedside care. As patient acuity increases, staff may find themselves stretched, making it challenging to seek assistance with new or complex procedures that require clinical decision-making support.

The Clinical Education Facilitators (CEF) program was initially developed to support clinical staff on night shift, where fewer resources were available. Marissa Lemley Brown, MSN, RN, NE-BC, NPD-BC, CPN, director of clinical education, reflects, "Initiating and supporting this program has been one of the highlights of my career. The program's goal is to provide staff with clinical decision-making support at the bedside, ensuring Monroe Carell is an emotionally safe environment where staff can ask questions and seek clarification on new or complex skills."

CEFs also support professional practice transitions and offer microlearning opportunities in the clinical area. Over the past three months, the program has expanded its support to day shift, with the team now comprised of seven highly trained nurses from various clinical backgrounds, including acute care, oncology, cardiac care, intensive care, float pool, and emergency services.

Upon joining the CEF role, nurses undergo comprehensive training in unfamiliar areas and receive additional instruction in teaching essential nursing skills. During their shifts, CEFs round in inpatient units, respond to RRT/STATs, provide bedside educational support, and round on all clinical orientees, regardless of their roles.

The CEF Team works closely with quality and leadership teams to deliver educational initiatives to bedside staff on critical topics such as tracheostomy care, external ventricular drains, central line management, and, most recently, the operation of the Zoll AED/defibrillators. These microlearning initiatives are tailored to address educational needs while incorporating realistic simulations and hands-on interaction. This fiscal year, the CEF Team has made 1,708 educational touchpoints and responded to 2,305 requests for assistance and orientation rounds for staff.

When discussing their favorite aspects of the role, Jordan Lewis, BSN, RN, CPN, expressed his passion for working with nurse residents, Emily Lockwood, BSN, RN, CCRN, highlighted the importance of supporting new staff during skill acquisition and clinical decision-making, and Amanda Lampley, BSN, RN, CCRN, emphasized that new nurses often benefit from someone who listens and guides them during their transition from nursing students to professionals. The CEF role inspires growth, supports staff, and shapes the future of patient care every day. It is a dynamic role that blends education, collaboration, and advocacy to enhance patient care and foster professional development. - by Ellis Daugherty

12C: A Safer Unit

ith patient safety at the center of everything we do at Monroe Carell Jr. Children's Hospital at Vanderbilt, a new and more safely designed 12C opened its doors in February.

The 12C nurse manager Cristina Loaiza, MSN, RN, NE-BC, shared the benefits of this space: "For years we've had a very distinct need to provide a different level of care for our behavioral health population; having a safer unit with rooms that are better equipped to ensure our patients are physically safe can only have a positive impact in the care that we provide."

The new rooms were designed with that level of care in mind. Patient safety team senior program manager, Delana Vallery, MA, noted that previously, environmental safety sometimes required plant ops to fully break down a room. These rooms were designed to not only eliminate that need, but to also feel fun and inviting while maintaining the flexibility to accommodate acute care medical patients as needed.

Delana notes that she's already seen positive impacts: "There has been more intentionality around a patient-centered and trauma-informed approach to the patients we serve." Cristina shared that this unit is "something to be proud of and celebrate, truly the culmination of years of work." *- by Vanessa Rivera*



Julie McLamb, MSN, APRN, CPNP-AC, Sierra Ward, Elizabeth Cravens, BSN, RN, CPN, and Brady Hancock, BSN, RN, CPN, tour one of the new patient rooms on 12C.

NICU CLABSI Watcher Program

Quality Spotlight: Identifying High-Risk Patients in the Neonatal ICU

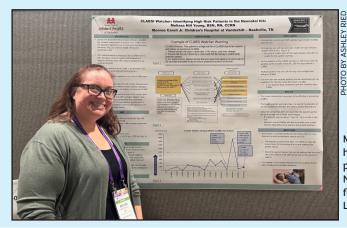
After hearing a nurse state that no one was surprised that her patient had gotten a central line-associated blood stream infection (CLABSI), Melissa Hill Young, BSN, RN, CCRN, Neonatal ICU Quality Improvement Analyst and Vascular Access Team Member got to work! "If we can prevent an infection from making [NICU patients] sicker, then we should be able to do that for them," says Melissa. She found that the most common cause for NICU CLABSI was from GI flora, and certain patient characteristics also increase that risk.

To start, Melissa added a patient awareness warning message in a routinely used area of the patient chart. The message highlights the patient's elevated CLABSI risk, including patient-specific factors, and explains how to mitigate these risk factors. After implementing this warning system, the NICU did not see another CLABSI from GI flora for 425 calendar days and over 17,000 patient line days. Prior to the warning, the average line days between infections was 2,000.

Melissa has presented her work, CLABSI Watcher: Identifying High-Risk Patients in the Neonatal ICU, both locally at the Tennessee Initiative for Perinatal Quality Care (TIPQC) conference in 2024 and nationally at the ANCC Magnet Conference in late 2024.

According to Melissa, this project is proof that improvements do not always have to be a huge project or a complex intervention. Sometimes a simple change can make a significant difference.

- By Casie Smith



Melissa Hill Young presents her quality improvement poster at the 2024 ANCC National Magnet Conference in New Orleans, Louisiana.



Hunter Reed, a registered nurse 2 on the Pediatric Hematology and Oncology Unit, states that perseverance was the key to earning her specialty certification.

Certification Spotlight: Hunter Reed

ediatric Hematology and Oncology nurse, Hunter Reed, BSN, RN, CPHON, recently achieved her Certified Pediatric Hematology Oncology Nurse (CPHON) certification. For her, the process was one of perseverance. Although she is very knowledgeable and has six years of Pediatric Hem/Onc nursing experience, she didn't pass the exam on her first try. Understandably, this deflated her confidence. Hunter explained that not passing the test made her question her abilities and even her career path.

Ultimately, Hunter decided that not passing the exam did not mean that she is a bad nurse or that she does not know what she's doing when caring for her patients, it just meant she didn't pass the test. Drawing on this can-do attitude and encouragement from her manager, Courtney Williamson, MSN, RN, PNP-AC, she took the test a second time and passed!

Hunter's advice for anyone who has a similar setback is to, "set aside that failure and think of it as a fresh start." Her advice for anyone who has a similar setback is to, "set aside that failure and think of it as a fresh start." She explained that to build her confidence for the second test, she reminded herself that she was starting with a clean slate and kept in mind that, "the test doesn't know that I've taken it before." In addition to lots of study practice, Hunter counted on pep talks from her best friend who reminded her that she could do it.

Hunter described passing the certification test the second time as "even sweeter and more rewarding" saying, "I would have been proud of myself for passing the first time, but I'm so much prouder of myself for having not just passed the test but also pushing through the anxiety of possibly not passing again. It was very meaningful, and I felt very proud of myself."

- by Lauren Sevier







Mary Lee Lemley, MSN, RN, RN-CCE, disease specialty manager, was honored by the Tennessee Ambulance Service Association (TASA) as the recipient of the John Fitzgerald EMS Advocate of the Year Award. This prestigious award was presented at the annual TASA conference Awards Banquet on February 19, 2025.



Patti Runyan, DNP, MBA, RN, NEA-BC, EBP-C, senior director, Nursing Professional Practice, was selected as an abstract reviewer for the 2025 ANA Research Symposium.

appointments and advancements



Shelly Bledsoe, MSN, RN, NE-BC, has been named the senior nursing projects manager for Nursing Operations.



Becki Caldwell, BSN, RN, has been named the assistant nurse manager of Case Management.



Jessica Grzywa, MSN, RN, CPN, joined Monroe Carell Jr. Children's Hospital at Vanderbilt as the Children's Surgery program director.



Kristi Long, MHA, BSN, RN, joined Monroe Carell Jr. Children's Hospital at Vanderbilt as the nurse manager of the 11th floor NICU.

appointments and advancements



Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC, Magnet program director, has been appointed a Magnet Appraiser Candidate by the American Nurses Credentialing Center (ANCC).



Cory Smeltzer, BSN, RN, CCRN, has been named the nurse manager for the Holding Room, PACU, and Radiology Recovery.



Erin Tucker, BSN, RN, CCRN, has been named the assistant nurse manager of Case Management.

RN4 Advancements: Temitope Akinsola, Alison Condra, Jordan King, Victoria Mier, Kortney Schardt

RN3 Advancements: Megan Abatto, Kyra Alstott, Marissa Badia, Randi Baumgardner, Cameron Bell, Addison Bennett, Anna Burress, Abby Collier, Shanaya Cross, Greer Crumpton, Alyssa DeLeon, Dixie Errico, Jacob Fender, Stephanie Fuller, Kylie Glass, Diamond Haley, Brady Hancock, Julia Herboldt, Taylor Leach, Pegah Marbury, Kelly Mathis, Veronika Mcklean, Chelsea McMillen, Kaelyn Miller, Morgan Newberry, Emily Osborne, Stephanie Otte, Shannon Pagotan, Olivia Riggs, Molly Anderson Rudloff, Brooke Schiedemeyer, Lauren Smith, Netra Suy, Camden Uhl, Brittany Winston LPN3 Advancements: Crystal Breeding, Tiffany Geerdes

RT4 Advancements: Mandi Britt, Britni Davis, Christal Deloach, Matt Norton, Kaytlin Ray

RT3 Advancements: Joslyn Berry

CP3 Advancements: LaTonya Beechum, Savanna Cook, Lisa Damme, Amanda Mason, Kristina Miller, Shelea Monroe, Renee Odom, Kathy Pine, Amber Richards, Lyanne Sosa, Grace Smith, Brittney Weese, Jessica Wilson



Marron, Alonso; Totapally, Abhinav; Weatherly, Allison; De, Subhendu; **Barber (Cason), Madeline: Lifsey, Allyson;** Boyle, Katharine. (2025) Pediatric Health Assessment Tracker: A Quality Improvement Initiative to Obtain Weights Consistently and Appropriately in a Tertiary Pediatric Intensive Care Unit. Pediatric Quality and Safety 10(1):p e791, January/February 2025. | DOI: 10.1097/ pq9.000000000000791

Crawford, Jeremy (2025, March 3O-April 2) Enhancing Nursing Workforce by Supporting Male Nurses [Group discussion]. American Organization for Nursing Leadership (AONL) Conference, Boston, MA. Hardison, Daphne; Sigler, Kelly (2025, March 2-5) ECMO and the Advanced Therapies for Respiratory and Cardiac Failure [Conference session]. 41st Annual Children's National Symposium: ECMO and the Advanced Therapies for Cardiovascular and Respiratory Failure, Keystone, CO.



Chief Nursing Officer Monroe Carell Jr. Children's Hospital at Vanderbilt Gretchen McCullough, MSN, RN, NEA-BC

Editorial Advisors

Christina Echegaray Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC

> **Content Manager** Shelly Bledsoe, MSN, RN, NE-BC

Editors

Shelly Bledsoe, MSN, RN, NE-BC Ellis Daugherty, MSN, RN, CCRN Debbie Poloway, RN Maggie Rabatin, DNP, APRN, FNP-BC Casie Smith, BS, RRT-NPS Leslie Speer, MSN, RN, CNL, CPN

Design and Art Direction Brittany Brown

Diana Duren Christina Echegaray Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC

Photography

Shelly Bledsoe, MSN, RN, NE-BC Danelle Bradley, BSN, RN Donn Jones Maggie Rabatin, DNP, APRN, FNP-BC Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC Erin O. Smith Susan Urmy

Editorial Board Members

Shelly Bledsoe, MSN, RN, NE-BC Marissa Lemley Brown, MSN, RN, NE-BC, NPDA-BC, CPN Jessika Boles, PhD, CCLS Danelle Bradley, BSN, RN Christina Echegaray Ellis Daugherty, MSN, RN, CCRN Lia Herrera, BSN, RN Debbie Poloway, RN Maggie Rabatin, DNP, APRN, FNP-BC Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC Vanessa Rivera BSN, RN, CCRN Lauran Sevier, MEd Ericka Simon, MBA, BSN, RN Casie Smith, BS, RRT-NPS Leslie Speer, MSN, RN, CNL, CPN

A Nurse's Work is Never Done

a poem for Nurses Week

Working hard is what nurses do, each task undertaken and reviewed Nurses strive each day to do their best, sometimes there is no time to rest First thing to do is introduce, make a connection that will produce Trust is something you want to win, once that's done the real work begins Things going crazy, time running short, soon it will be time to give report Have all patients been assessed, testing, lab work, and medications addressed Have you charted everything you've done, intake, output, and vital signs for one Has tubing been changed, dressings secured, is everything done, are you assured At end of shift you've done your best, it's time for patients to get their rest Even though you'll go home, work sometimes finds you alone You'll question if you could've done better, but you need to de-stress and not be a fretter A nurse's work is never done, it continues forever once it's begun So, work and do your very best, lead, love, learn, and often reset Take pride in what you do each day. go above and beyond in every way It'll all work together, you will see, just be the nurse you were meant to be!



Poem contributed by (Eva) Denise Todd, RN, registered nurse 3, DOT 4 Urology Clinic.