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Teaching the Teachers

Incorporating experiences of transplant patients in nursing education

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Patients who receive heart and lung transplants go through multiple psychological and physiological changes during all of the phases of the transplant process. Transplant patients also have a whirlwind of emotions during the pre-transplant, intra-transplant, and post-transplant phases. Patients must be active participants in their care with a reliable support system. An interdisciplinary team is responsible for all aspects of their care. These providers include physicians, advanced practice providers, physical therapists, occupational therapists, speech therapists, dietitians, pharmacists, social workers, and nurses. Nurses play a unique role in the acute care of transplant patients since not only are they responsible for the patients' direct care, but also prepare these patients for life after transplant.

Nurses care for patients at all phases of transplant care. As a patient waits for a heart or set of lungs, nurses manage symptoms as well as patients' fears. Nurses witness the first beats of the newly transplanted heart and the first breaths of newly transplanted lungs. Nurses are responsible for seeing these patients through the twists, turns and successes of surgery and recovery. Along that path, nurses are responsible for arming patients with the tools they need for life after discharge. How do you adequately prepare nurses so that they can prepare patients for life after transplant? In the Cardiovascular Center, the Cardiac Boot Camp series is a set of courses that train nurses for caring for cardiovascular patients.

The Clinical Nurse Specialist team has incorporated former transplant patients as guest speakers in classes that are part of the core curriculum for new cardiovascular nurses. The exchange of teaching and learning between patients and nurses has been transformative and valuable for both parties.

The guest speakers have an impact on nurses when they tell their story in Cardiac Boot Camp. As former heart transplant patient Scott Cannady recalls, "What was important to me was living... In the hospital you go from point A to point B to get to feeling well medically. But it was C and D and E all the way to Z that really mattered for me as I figured out how to get back to normalcy in my life." Mr. Cannady appreciated the teaching



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points that nurses provided, which helped him function independently when he got home. He fondly described a nurse that spent 30 minutes with him on a dressing change, because his skin was so sensitive. "In that time, she showed me how to do it so I don't get an infection. I knew that it usually didn't take this long but she spent the time to show me," Mr. Cannady said.

The other role that the transplant recipients play is to prepare other potential transplant patients for their journey. In this case, certain post-

transplant patients feel the need to give back due to their new organ and lease on life. John McNamara, a lung transplant recipient, states, “to whom much is given, much is expected.” Mr. McNamara and Ken Young, another post-lung transplant recipient, want to help pre-lung transplant patients prepare for their journey. They can provide a unique insight into the process. Mr. McNamara and Mr. Young provide a truthful representation. The goal is to



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be honest with people so that they have realistic expectations. This will ensure that patients are prepared for active participation in their own care.

Post-transplant recipients are an important part of the care team. The post-transplant volunteers not only coach patients during the difficult times in their journey, but also provide guidance to the nurses on how to provide care to these unique patients. Ted Dean, a post-heart transplant recipient mentioned that as a patient, you are coming to terms with how to merge “life



UCSD Heart Transplant Recipients Scott Cannady & Ted Dean

before transplant” with “life after transplant.” He coaches the nurses during his time at Cardiac Boot Camp to be mindful of how ready patients are to begin to receive any education. He recalls a time when the nurse delivered a very full cup of medications and he spent hours just thinking he just was not ready to take them. He tells nurses to “get to know the patient. Respect the patient’s side. Emotions can be tough as a patient.” He mentions that when the nurse acknowledges these roadblocks, it allows patients to begin the process of healing.

Mr. McNamara recalls a situation when he was in the ICU and a nurse was experiencing some moral distress regarding patient selection for transplant. As a member of the care team, he provided the nurse with insight; “for every one patient that you see [struggling in the hospital], there are ten patients [who are thriving] that you don’t see.” Mr. McNamara is part of the care team due to his unique perspective and ability to convey his experiences to both patients and nurses.

Mr. Cannady and Mr. Young were both inspired by Mr. McNamara

and Mr. Dean to become volunteers for the heart transplant and lung transplant teams. Mr. Young decided to proceed with lung transplantation after listening to a presentation by Mr. McNamara. After his journey, Mr. Young wants to convey to other prospective lung transplant patients to, “manage their expectations and do not expect their experience to be a smooth road.”

These four volunteers are proud to be “complimentary to the professional staff,” as Mr. Young describes his role. Their role is crucial to allow nurses to understand the pathway of the transplant patient and the difference that nurses can make along the way. Incorporating these volunteers into the curriculum at Cardiac Boot Camp has been a rewarding experience. Acute care nurses do not always get to witness the fruits of their labor while they care for these patients in the hospital, which is only a portion of the journey. It is very valuable for nurses to see these former patients living complete lives post-transplant and their ability to guide nurses to provide patient- and family-centered nursing care for transplant patients.