For many years, AHANA and OTE nursing students have been looking for a place to call their own. The Thea Bowman AHANA & Intercultural Center’s Nursing Outreach Program was started by Ms. Joana Maynard, Senior Assistant Director of the Office of BAIC, in 2010 to support nursing students academically and socially by fostering mentorship.

This newsletter gives nursing students the opportunities to read stories and experiences from students just like you! We hope you find it helpful and inspiring!

Lourdes Talavera, CSON ‘16
Nursing Outreach Program Student Coordinator

Fall 2015
This issue includes:

- Student Experiences
- NCLEX Tips
- Resume Tips
- NCLEX Questions

Thank you to everyone who came out to our programs! Make sure to stop by next semester for programs including:

- Alumni Panel
- Mentorship Events
- Study Breaks

For any questions, suggestions, or comments please email Lulu at talaverl@bc.edu
My name is Chiamaka Okorie and I am a junior in CSON. Last summer, I was awarded the **Amanda V Houston Traveling Fellowship** from the **African and African Diaspora Studies Department at Boston College**. It enabled me to have an incredible experience with the **Ghana Health and Education Initiative**, where I spent two weeks volunteering with their **Malaria Prevention Program** and conducting an independent research project, “Perceived Susceptibility to Malaria: An Evaluation of Bed Net Usage of Ghanaian Mothers and Children under Five.”

In Ghana, I helped the organization collect, code, and compile data from over 800 homes so they could collect health indicators, gauge the success of their past interventions, and identify where they could create new interventions. Each morning, my volunteer team and staff would go into a central point of the community and help measure moms, weigh babies, and correct surveys. Because I also focused on my research project, I felt like I simultaneously participated in a grassroots healthcare program and had the opportunity to better understand their **community epidemiologically**. Both the qualitative skills I learned and my quantitative experiences mean the world to me and brought me one step closer to my dream of working in **global health**.

I really encourage all nurses interested in this field to use this college time to travel and intimately experience health or nonprofit work in another country. It will transform your perspective and inspire your nursing dreams!
Exploring Nursing in Thailand

My name is Mikerlyne Castor and I am a senior in CSON. This past August I had an amazing opportunity to travel to Thailand with one of my closest friends, also in nursing Kimberly Bautista. We first decided to participate in this trip because we love traveling, but even more we love learning and caring for different populations. I believe that one thing that can truly make us great nurses is understanding the importance of cultural competence. Taking the time to learn about other cultures will help us in caring for various populations and communities in the future. Before Thailand I had the opportunity to travel to Ecuador Freshman year summer and will be continuing my journey to Haiti this upcoming January with CSON.

While in Thailand, we worked in a small clinic in an elephant village. The first day that we were there we had an overview of what we would most commonly see, ways to take down patient history and vital signs, the pharmacy, and the patient rooms. We traveled every morning to the clinic and had our daily patients who needed wound changes, did assessments with the physician, and assisted in providing appropriate medications for diagnoses.
The majority of my patients were those who needed wound changes. We saw a variety of wound stages while working in the clinic. One challenging aspect of this experience was being able to adjust the procedures of what I was taught in school with what their guidelines were. For example, in terms of their sterile environment, at times I felt that I was contaminating my sterile environment, but with the limited resources available it was the best that could be done. Another aspect of my task was sorting through large quantities of medications and assisting with packaging individual portions for patients. Lastly, we were able to go to a local elementary school and test the blood types of the students so that it could be documented.

I learned a lot throughout my experience in Thailand. I gained knowledge about another culture and their ways of health care. It allowed me to compare and contrast care in the US and helped shape my view of health care from another perspective. The many experiences that I gain in other countries allow me to see another side of nursing; a global perspective view. My takeaway message for all of you would be to take the opportunity and time to learn about your patient, appreciate and respect their culture in relation to their plan of care, and mostly important follow your heart in nursing. There are many different components to nursing, and being a beside nurse is only part of it. If you believe in something and want to make a change, always follow it because you can do whatever you set your mind to.

Mikerlyne Castor
Senior, Class of 2016
Connell School of Nurs-
COMMON NCLEX TRAPS

Don’t ask “Why?”
Choose a therapeutic response.

Don’t leave the patient.
Safety first!

Don’t say “Do not worry!”
Don’t give false assumptions.

Don’t read into the question.
Never assume anything that has not been specifically mentioned

Don’t “do nothing.”
You always have to do something.

Don’t pass the buck.
Always take responsibility for wrongdoings.

nurseslabs
www.nurseslabs.com/exams/
My name is Thien Bui and I am a junior in CSON. Throughout the summer and the fall semester, I had the privilege to conduct research on diabetes prevention and health promotion in Asian Americans alongside Professor Nguyen. In the summer, a group of the undergraduate research fellows (Thuc-Nhi Nguyen and Mary Nguyen, and I) were able to attend local Vietnamese temples in the Boston area to conduct focus group sessions to further Nguyen’s research on examining barriers to the care for and control of high blood pressure and diabetes among Asian Americans. At the temples we were able to record each participant’s body mass index (BMI) and blood glucose level, provide informational modules on diabetes prevention and maintenance depending on their BMI and blood glucose levels. Through this experience I learned the importance of patient teaching in diabetes prevention and the significance of community outreach.

Recently, Nguyen has shifted her attention to furthering the development of Drag N’ Cook, an iPhone application that provides useful and interactive nutrition tools for users who are interested in planning healthy meals. The tool enables you to learn about the nutrition content of essential ingredients in a variety of Asian cuisines, and also provides a nutrition analysis of your recipes. Under the supervision of Nguyen and the researchers at the Joslin Diabetes Center, fellows under the UGRF’s program including Mary Nguyen and Lourdes Talavera and I were able to provided nutritional information for 30 ingredients commonly used in Vietnamese cuisines to further the development of the Drag N’ Cook iPhone application. As the application expands we are looking to add even more ingredients and their nutritional contents.
RN RESUME

Pay attention to the presentation and appearance - it is important to look professional

Include your goals and objectives - your goals should match with the employer's goals

Highlight your qualifications - focus on achievements

Define your areas of expertise - employer should know what to expect from you

Add relevant experiences only - not only professional but life experiences also matter for a nurse

Relate your top performance - That's what impresses your employer
Resume Tips from the Career Center

**Resumes are read in 10 to 30 seconds.**
- Most Important information at top, to the left
- Limited use of boldface
- Good spacing (not crowded)
- Descriptive categories can help—ex. “Other Health Care Experience” or “Experience with Children”

**PAR Statements**
- Project
- Action
- Results
Use detailed language, numbers, and action verbs to convey your skills.

**BEFORE**
- Oversaw office operations of study abroad office.

**AFTER**
- Supervised and trained staff of four students to courteously and efficiently handle incoming calls.
- Researched potential new overseas program sites and sponsoring international institutions; wrote in-depth summaries (5-12 pages) used by faculty steering committee to choose new programs.

**Education**
- School, degree, location, graduation date
- Study Abroad
- GPA if above 3.0

**Clinicals**
- Name of hospital City, State, Date
- Name of clinical rotation/ floor
- Verb phrases that highlight skills
- Don’t forget about compassion, education, dealing with families, assessment

**Potential Other Sections**
- Work Experience (“Professional Nursing Experience”)
- Volunteer Experience
- Related Work/ Experience
- Activities
- Skills
- Interests

**Talk to the Career Center!**
Contact them:
617-552-3430
carctr@bc.edu
My name is Sydney Orlando and I am a Junior in CSON. On campus, I am involved with **Camp Kesem Chestnut Hill** which is an organization that provides a free week long camp for children ages 6-16 who have or have had a parent with cancer. This opportunity allowed me to help children by providing them an opportunity to put the stressors of cancer aside and to help them feel understood.

During the year we raise funds to provide financial support for these children to attend the camp. This summer was our first summer camp held at Camp Hayden-Marks in New York. We served 27 children from the Massachusetts and New York areas. We are excited that we will be able to provide an additional 30 children with this opportunity this summer. Our support and the friendships made during our camp, extends far after the summer camp. We try our best to continue to be a life long support for these children and their families.

As a nurse, **compassion** is so important for our patient care. This opportunity and my own personal experience have really allowed me to see how an illness can affect the whole family. We must think about our patient’s and family’s quality of life and support networks.
Surgical Intensive Care Unit

My name is Kimberly Bautista and I am a Senior in CSON. I have had wonderful rotations at Beth Israel Deaconess, Brigham and Women’s hospital, Newton Wellesley, Boston Children’s Hospital, and Metro West Medical Center. These hospitals have been amazing and have provided me with unique experiences. However, I wanted to become more familiar with trauma. I was looking to care for more critical patients, needing more acute care. Once I had heard that Boston Medical Center (BMC) was the #1 trauma hospital in Boston, I was inclined to apply. The job required only one clinical rotation, so I applied. Even after 3 clinical rotations I thought I would not be prepared and I did not think I would hear back from them so soon and I would be working even sooner. I applied for a certified nursing assistant position (CNA) in the surgical intensive care unit (SICU). I never thought I would enjoy a job so much. The job has provided me with a better sense of identity. It is the type of work that truly gives meaning. I have worked with people from all walks of life, from middle age to very old of different cultures, backgrounds and economic status.

During one shift I was doing my normal rounds helping the nurses rotate patients and wash them up, when I went into one lady’s room who was in severe pain. I helped the nurse wash her up and give her medication. I would go in every hour and ask her if she needed anything, I offered her comfort measures like hot/cold packs, blankets pillows, and water. I did not do anything out of the ordinary but the next day when I went in she gave me a lovely bouquet of flowers to say thank you. She told me that she truly felt my sincerity and compassion for caring for her. This truly made me feel like I was able to make her experience at the hospital just a little better. This is exactly what I want to do for the rest of my life.

Kimberly Bautista
Senior, Class of 2016
Connell School of Nursing
A client diagnosed with a heart failure who suddenly experiences severe dyspnea and suspected that pulmonary edema has developed is cared by the nurse. What is the nurse’s immediate action?

1. Insert a Foley catheter
2. Place the client in high-Fowler’s position
3. Obtain a vial of furosemide (Lasix) and a syringe
4. Obtain a dose of morphine sulfate from the opioid medication drawer

**Rationale:** Heart failure is an inability of the heart to maintain adequate circulation to meet the metabolic needs of the body because of an impaired pumping ability. Heart failure can progress to pulmonary edema, a condition in which fluid accumulates in lung tissue. This is a medical emergency. If this occurs the immediate action of the nurse is to place the client in an upright (high-Fowler’s) position.

A nurse prepares to administer medication to a client and notes that the prescribed dose is higher than the recommended dosage. The health care provider was called by the nurse to clarify the prescription and the health care provider instructs the nurse to administer the dose as prescribed. Which action should the nurse take?

1. Call the pharmacy
2. Contact the nursing supervisor.
3. Call the medical director on call.
4. Administer the dose as prescribed.

**Rationale:** If the health care provider writes a prescription that requires clarification, it is the nurse’s responsibility to contact the health care provider for clarification. If there is no resolution regarding the prescription because the prescription remains as it was written after talking with the health care provider, or because the health care provider cannot be located, the nurse should then contact the nurse manager or supervisor for further clarification as to what the next step should be.

The parents of a newborn infant diagnosed with esophageal atresia ask the nurse what the diagnosis is all about. What statement should the nurse tell the parents regarding the condition?

1. Gastric contents regurgitate back into the esophagus
2. The esophagus terminates before it reaches the stomach
3. A portion of the stomach protrudes through part of the diaphragm
4. Abdominal contents herniate through an opening of the diaphragm

**Rationale:** Esophageal atresia and tracheoesophageal fistula (TEF) are congenital malformations in which the esophagus terminates before it reaches the stomach and/or a fistula is present that forms an unnatural connection with the trachea.
An admission interview with a depressed client who has suicidal ideation is being performed by the mental health nurse. Which nursing intervention should be carried out first following the interview?

1. Develop a plan of activities for the client.
2. Provide the client with diversional activities.
3. Isolate the client from other clients in the nursing unit.
4. Communicate the client's risk for suicide to all team members.

**Rationale:** The first priority intervention for the suicidal individual is to communicate the risk for suicide to all team members.

The nurse at the emergency department suspects that a female is a physical abuse victim. Which appropriate statement should the nurse make to the client?

1. “If your boyfriend is physically abusing you, you can get a restraining order.”
2. “That bruise looks very sore. I do not know how a man can do that to a woman.”
3. “You have a huge bruise on your back. How often does your boyfriend hit you?”
4. “I sometimes see women who have been hurt by their boyfriends. Did anyone hit you?”

**Rationale:** Women must be asked in a caring and nonthreatening manner about violence in their lives.

The nurse prepares to assist in the delivery of the placenta immediately following the delivery of a newborn infant. What is the correct action to deliver the placenta?

1. Pull on the umbilical cord.
2. Instruct the mother to push during a uterine contraction.
3. Place traction on the umbilical cord and pull on the placenta as it enters the vaginal canal.
4. Separate the placenta from the uterine wall using the forceps, and then allow the placenta to deliver spontaneously.

**Rationale:** After the placenta separates, the mother is instructed to push during a uterine contraction.

A patient’s medication is available for injection in an ampule. When drawing up this medication, which action should the nurse take?

1. Shake the ampule gently to mix the contents.
2. Snap the top of the ampule so that it opens toward the nurse.
3. Wipe the neck of the ampule with gauze after snapping it open.
4. Place an alcohol wipe around the neck of the ampule before snapping it open.

**Rationale:** Basic procedure for drawing up medication from an ampule involves tapping the top chamber until the medication lies in the lower area, placing an alcohol wipe around the neck of the ampule, snapping the top so that it opens away from the nurse, and withdrawing the medication without injecting air into the ampule.