

# The NSA Cityscape

September 2019

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## Meet Your Professor: An Interview with Rhonna Porch



Inspired by her grandmother, who became a nurse at age 50, Professor Rhonna Porch started her medical career as a CNA. She then went on to become an LVN, and later an R.N., beginning her long nursing career at Scripps, where she recently retired after 41 years of service. Professor Porch teaches Psychiatric Nursing for second year students, rounding out a long and full career as a psychiatric nurse.

### **What motivated you to continue your education to become an RN?**

I was an LVN for about 15 years and working in the hospital setting, I began to realize that there were a lot of differences in the

roles of an LVN and RN and that the changes were significant. I just felt like it was time to become an RN, so I did. And I came here to San Diego City College. After I earned my RN, I went back to school to get my BSN and then later my masters.

### **You didn't start as a psych nurse- What led you down that path?**

My first job as an LVN was on an acute surgical floor at Scripps. Then, it was team nursing, where even though the patient load was larger, you were able to delegate more work amongst each other and it was really a wonderful experience. One day I was in the cafeteria with a coworker, when a nurse manager offered her a position as a nurse in the psych unit, right in front of me. My coworker said "No way!", but I said "I will!" The manager set me up with an interview in the unit and I was just mesmerized and I fell in love with the different roles of the people that worked there- social work, recreation therapy, music therapy, and psychiatrists. The patient population was so interesting and fascinating.

**Do you feel there has been a change in psych nursing from when you started until now?**

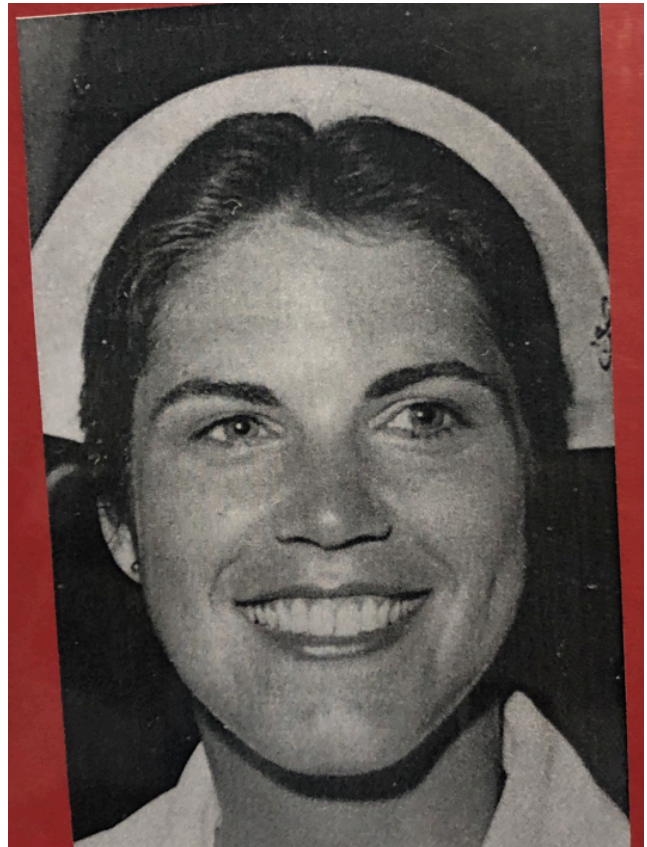
Absolutely. With the patient ratio changes and not having LVNs, it has made a distinct change. RNs are doing more and with less help. We lost a lot of ancillary staff, causing RNs to have to pass a lot of medications without having a lot of time to facilitate groups. However, that was at my hospital. With my experience at Mesa Vista, the RNs are able to participate a lot more with patient care.

**What made you get into teaching?**

I remained in touch with my former City College gerontology professor, Debbie Berg, throughout the years and was able to work alongside her when she brought her clinical students to my unit. When I was getting my master's degree in Nursing Education, I contacted Dean Rossitto of SDCC to see if there was anyone who could mentor me so that I was able to complete my clinical hours here at City College. Shortly after that, Dean Rossitto passed and Debbie became the dean and brought me on board. Everything just fell into

place. I have always loved to teach, and enjoyed teaching patients, families and coworkers, so when everything fell into place, I was able to come home to City College.

Thank you, Professor Porch!



(Above Photo) Professor Rhonna Porch in her nursing uniform of that time.

# Community Health Outreach

## Students at the Ovarian Cancer Walk



## Upcoming Events

### **Sharp Mary Birch NICU Little Grad Reunion**

October 12th, 2019 1030-4pm

@ Liberty Station

### **Flu Shot Administrations**

October 26th, 2019 11am-3pm

@Kearny Mesa Health Fair



## **Advice From a Second Year Interview with Claudia**

### **Cardenas**

#### **How would you describe your first year as a nursing student at SDCC?**

Ah yes, my first year. Happy it happened and even happier it's over.

My hardest struggle was adapting to the high volume of information that was expected out of me while only being in lecture twice a week. I work best in a classroom setting and am an auditory learner. It was difficult going home and "teaching myself". I soon learned that I needed extra book resources, youtube videos, and clinical instructors to tie my knowledge together. Once I learned that trick, it all clicked.

My advice, keep trying different methods until you find what gets you the best grade on that test!

#### **What was your first clinical experience like?**

First clinical: Scripps Mercy

Hospital with Professor Hecker and Professor Johnson.

It was full of great moments and learning experiences.

I experienced my first Code, learned to use the hospital software, and gave my first injections.

I made some great friends in this clinical rotation.

You'll never forget your first clinical.

My advice is to set a goal each clinical and achieve it! Ask anyone on the floor if they need help because each moment is a learning experience. Don't be shy and ask if you can participate or watch any procedure. The worst they can say is no, so I encourage you to get out of your comfort zone and start learning!

#### **What moment was most memorable?**

My most memorable moment was when I had the opportunity to see and help with a real birth! Unlike many of my friends in my cohort, labor and delivery was a unit I wanted to avoid.

Going into our OB/Peds rotation second semester really surprised me. I ended up loving the labor and delivery and pediatric rotation. I was able to care for a first time mother and was with her throughout the entire labor process. Watching her give birth was a beautiful experience filled with joy and awe. Her baby was perfect and I was even able to practice my newborn assessment on him.

My advice is, don't knock it 'til you've tried it. Never turn down an opportunity and always keep an open mind.

**Is there anything that you wish you could go back and do differently?**

I wish I would not have worried as much as I did. Sometimes worrying is good, but sometimes too much worrying is bad. If your intentions are in the right place and you give it your best, just trust in the process and let go of the worries.

**Do you have any advice that you want to share with the new cohort?**

Nursing school can be traumatic.

I thought it was a joke at first, but no, this program is very challenging.

My advice is just keep learning, strive to be the best nurse on the floor, advocate for your patient, and make sure you stay organized and positive. Try not to stress. Exercise when you can and make time for fun. But make more time to study.

You get out of nursing school what you put in, so make it worthwhile.

You decide what kind of nurse you are at the end of the day, so make sure you're a good one.

Thank you Claudia!

## A Patient's Perspective

Written By: Bridget Tye

I was born with a genetic heart condition known as Hypertrophic Cardiomyopathy. Growing up knowing how to pronounce that mouth full of a diagnosis was just as normal as the annual EKG's and echocardiograms. It wasn't until I got older that I found myself getting hospitalized and spending large stents of time in the ICU. During one visit, they had put me to sleep, and did a cardio-inversion. When I woke up I was in the ICU, my heart was in a normal rhythm, and my son was still okay in utero. Within two hours of the inversion therapy, i went back into a-fib, then my heart rate shot up to 200, 202, 204, 208. This was happening due to a rapid ventricular response (RVR). By the time my heart rate was hitting 200, my nurse was already advocating for me. She screamed down the hall for the doctors, all my family was pushed out of the room, and the room was filled with staff. I couldn't breathe, they laid my head down, and I had never

been more scared in my life.

I heard my nurse mention they had diltiazem in a bag on the IV pole and she pushed some through. My nurse stroked the sides of my head, and tried the best she could to keep me calm and breathing while my heart was beating out of my chest! She was the calm in my storm. She was the reason I got such a quick response from all the doctors on the floor. She thought quickly and utilized the diltiazem to lower my heart rate. If I could tell future nursing students any advice from a patient's perspective, it would be to never under value yourselves, you have the power to help people both physically and mentally every day you step on the floor.



