

FALL 2021

FEATURING:

**REFLECTIONS, FIGHTING THE FLU,
NURSING SCHOOL TIPS & TRICKS,
AND MORE!**

Vital Signs



COVER ART BY NINA IZABEL GO

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What Quarantine Didn't Prepare Me For

BY ANGELINE PAGUIA

Like many others, when I found out my first year of college would be online, I felt a lot of things. Disappointed, scared, nervous.

But then when I found out my second year would be in person, I felt a lot of the same emotions I felt a year prior. Shouldn't I be excited to start my nursing classes? AND on campus? I would finally be able to wear my scrubs, study in the library, and be that nursing student I looked forward to when I graduated high school. But I didn't expect to acclimate so easily to the online environment and everything that came with quarantine.

All of a sudden, I had to figure out commuting, what to pack for lunch every day, how to be around other people again. Most of all, I had to figure out how to start being that nursing student I had waited for. After almost a full semester, here's what I gathered so far.

1. It's up to ME

In quarantine, I was only taking GEs, and I didn't realize at the time how much "easier" it was to handle college classes through a computer. While of course I would've rather been in person, I didn't need to master hands-on skills in the labs, many exams were open book, and I felt no need to contact my professors. The material was more difficult than high school for sure, but I was able to keep straight A's, and I felt confident in myself. What I wasn't ready for, however, was the immense learning curve that comes with not only nursing classes, but nursing classes in person. In just a couple of weeks I was practicing skills on mannequins and even other people in labs, being tested on my understanding of concepts AND my ability to demonstrate those important skills, and much more. I learned very quickly that I needed to step up my game, I wasn't online anymore after all, which meant I needed to practice (aka go to practice lab!), study, and ask questions, because no one is responsible for my success but me.

2. I cannot take care of others if I am not taking care of myself

I'm the type of person to prioritize academics over everything, and with the new learning curve I mentioned before, this semester was no exception. However, this came with a cost: not getting enough sleep, not eating as frequently, not as much time for socializing and not allowing

myself time to decompress. Overall, I was just running on fumes and I felt terrible 24/7, and because of that I wasn't performing as well in class. Every little bit of self-care makes a difference.

3. Have a support system

While my last two points have been more about independence and what I should do as an individual, I could not have made it where I am without the people I keep around me. Whether it's venting to my closest friend, asking a peer if they've started that homework assignment I've been dreading, or reaching out to my professor with questions, being able to offload some of the weight on my shoulders is tremendous. Someone once told me, closed mouths don't get fed. Ask for help when you need it.

4. Grades aren't everything

This one is by far the most difficult to remember and still takes some getting used to. It's hard to shake the competitive mindset I grew up with, and I think it's safe to say that we all know how competitive it is to get into SDSU's School of Nursing. But now that we're here, it's less about getting straight-As and more about becoming a good nurse. While of course, you should strive to do the best you can do, becoming a good nurse comes with struggle and learning new ways to think and see things. No one said nursing school was easy, at least not to me, and a quote shared by one of my professors that I think encapsulates that goes, "Anything worth doing is going to be difficult."

5. Remember my purpose

Above all else, when lessons 1-4 aren't sticking with me, I always try to remember my "why." Why I decided to pursue this career and this pathway, and why going on this journey will be worth doing. It has been my biggest motivator up until this point, and I encourage you to find and remember your why as well.

At the end of the day though, I definitely do not have this all figured out! I realize this is all easier said than done, and I am still learning how to navigate life as a nursing student and unlearning habits that may not necessarily be bad, but just don't work anymore. I'm writing this in hopes

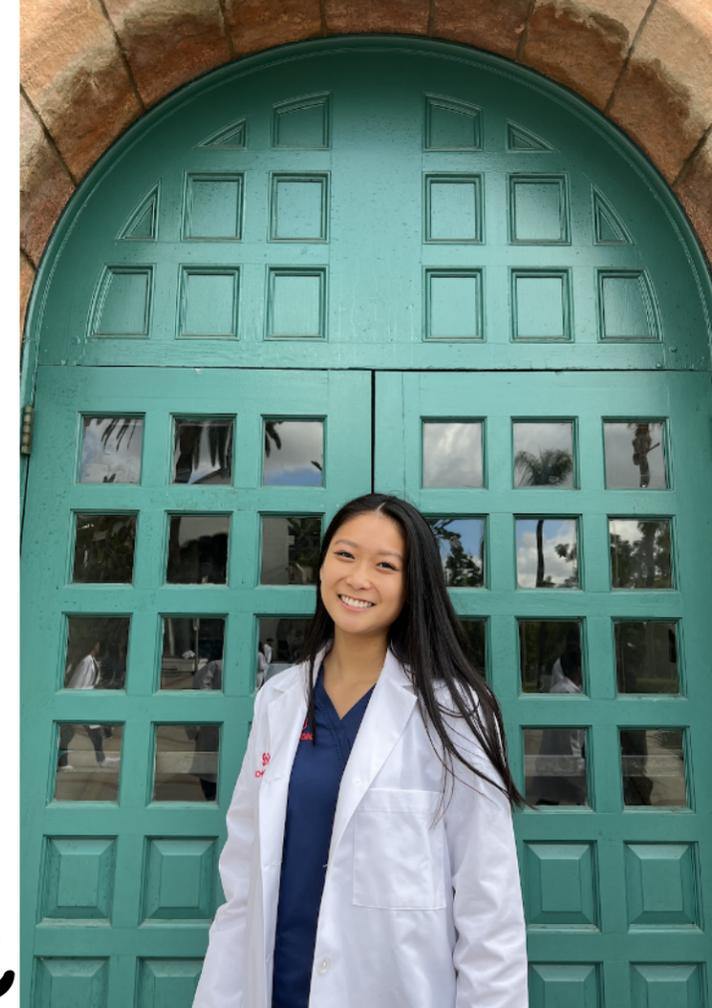




that it may bring comfort to current nursing students who had similar experiences to mine and possibly provide guidance to future nursing students who may not know what to expect. If you've read this far, thank you, and I hope you were able to gain something from it. There is so much to learn and grow from, and you are not alone!

From Zoom University to Campus: The Sophomore Year Experience

BY CHERYL SHIN



If you ask anyone about nursing school, he or she will probably tell you that your first year in the program is your make or break year. Having been told that numerous times, I was hesitant going into my first year in the nursing program here at SDSU. My freshman year consisted of Zoom classes, lots of peer isolation, and being 475 miles away from campus. Needless to say, I was extremely excited to finally be back in person and living in San Diego. I thought that moving away from home and having the college experience would serve as a new starting point for me in life.

Going back to my first comment about the first year of nursing school being hard... it definitely is. I didn't realize how difficult of a

transition it was going to be for me. My entire life, I was independent and was able to bounce back easily when situations got tough. However, it felt like as soon as I landed in San Diego, I suddenly lost all of that. It was my first time living without my parents at a school I didn't know my way around and on top of that, as a Northern California native, the San Diego roads simply do not make sense (you know what I mean... the forks?? The junctions??). Nonetheless, I somehow managed to figure out bits and pieces of it and knew that I just needed some time to adapt.

The classes are definitely hard. The first pharmacology quiz hit me like a truck and as someone who typically did well in school, it was a shocker for me. Going from a completely online-based school curriculum to fully in-person nursing classes completely destroyed my confidence in school. In addition, being new to this area, it was a struggle to find a home far away from home with the right people and community to support me. And like any other student, I have other commitments like extracurriculars. So on a typical day, I found myself either studying for pharmacology or pathophysiology, going to class, or memorizing a twenty-two-page tour script. There came a point where I felt a sense of imposter syndrome. I felt like I was so consumed with my work that I barely left time for myself. I also was not completely satisfied with my results either.

There were so many times I felt like giving up because the transition

has been so rough for me. I thought that I made no progress towards my goal and that moving was not as great as I thought it would be. However, I know it's not just me who has ever felt that way. I can say for certain that every other student has shared the same sentiments to some extent during their time in school. My former leadership teacher in high school always used to say, "Everyone is either going through something, just went through something, or is about to go through something." I think that not only applies to our patients as future nurses but ourselves as well. As a perfectionist, it was hard to learn that you'll never have it 100% together and that's okay. I personally think that no one ever gives themselves enough credit, and I admit I don't either.

As the semester approaches its end, there's been a few silver linings from all of the struggles I encountered. I got the hang of my classes and learned how to study for them. I found my network and community through a variety of classes and clubs. I took my oath of professionalism at our white coat ceremony. I passed my certification test and can officially give campus tours (so if you ever see me walking backward on campus, you know what's up). I volunteer at the local hospital and the best part of my job is taking the moms to the NICU where their tiny babies give me a boost of serotonin on any bad day. I even figured out the freeways around here!

It may have taken nearly an entire semester to adjust, but what

matters the most is that I made it through. If I had to tell those going into nursing school something about the program, it is not that your first year is going to be the biggest struggle. It is that although there will be moments of doubt, you aren't alone in feeling that way. Every student struggles with something to some extent and we all have to give ourselves grace for that. We just got out of quarantine-style learning and were thrown back into the traditional curriculum when the world is still nowhere close to normal. However, in the end, we'll get through it. The amount of resiliency we have will not only lead us to graduation but will serve us well when at the bedside. I'm not certain what the future holds but I can't wait to see what's to come for all of us.



Congratulations to all the nursing students who had their in-person White Coat Ceremony on October 23, 2021! The White Coat Ceremony serves as a rite of passage for these nursing students who are beginning their clinical training. At the ceremony, the nursing students took an oath of professionalism that emphasizes the importance of compassionate care and ethical codes of conduct.

If you would like to watch the recording of the ceremony, click [HERE!](#) And please enjoy the following pictures provided by a few nursing students who attended the ceremony:





Why Nursing?

BY
JENNIFER
DAO



Growing up, I NEVER expected I would one day walk on this path towards becoming a registered nurse. None of my family members are in the healthcare field, and I even pictured myself pursuing a field in the arts like creative writing, music, or graphic design up until high school. In fact, I used to hate going to the hospital because I felt vulnerable being sick and often alone in such a foreign environment. It wasn't until my grandpa was hospitalized after multiple falls in 2017 that I began to see the importance of nursing and how caring for others in those vulnerable moments could be rewarding. I didn't know when the switch occurred, but as the dreaded college application deadlines approached in high school, I began to deeply resonate with the idea of providing personalized and sensitive care to hospitalized patients. Although my desire to help people wasn't fully



fleshed out yet, I took a leap of faith and applied for all the nursing and pre-nursing programs in California that I could. To my shock, I was eventually accepted into SDSU's School of Nursing, right in my hometown! SCORE!

Frankly, I didn't know what I was getting myself into! I expected nursing school to be rigorous, but I didn't realize how much work and studying I had to do to maintain my grades. Not to mention, learning how to balance my social life with important responsibilities with my own health on top of everything was, and still is, a battle I'm learning. Sometimes, in the middle of cramming for my next midterm, or filling out yet another patient care worksheet, or hitting snooze three times on my 5:00 AM alarm, I've wondered whether nursing was right for me. Even as a senior, I've struggled wondering where I should apply for new graduate jobs, or what specialty to pursue, or if I was even competent or qualified to be a future registered nurse. But, as I've been learning, the little moments of satisfaction I felt whenever I connected with my patients made the struggle worth it. Whenever a patient shared their struggles with me while I held their hand, or laughed with me during lulls in the day, or even little moments where I changed someone's sheets or washed their hair, moments of humanness like these made me realize why I wanted to pursue nursing and why I wanted to continue even when I considered quitting. So ultimately, why did I choose nursing? Simply put, I love helping and connecting to others!

The Hardest Things are Those we Cannot Control: A Clinical Story

BY CAMERON HARRIS

In all honesty, I was loathing clinical this particular week. I had so much going on outside of school and little to no ambition for clinical following two fairly lackluster weeks on the unit. However, this week would leave an impact on me that will shape the nurse I will become for my entire career. I began taking reports with my nurse on all of our patients, most of whom were asleep. However, one special patient was ready for us, sitting up on the side of her bed, ready to accomplish her goals for the day. She was a middle aged woman on the unit following a total hysterectomy for cancer treatment, with a thick Eastern Europe accent, and huge curly hair from swimming out in the sun every day of her life. I told her my name and that I was a nursing student, and her face lit up. She was actually excited for a student? This is not very common as many choose to run in the opposite direction of us bright-eyed students for fear of incompetence. However, she was so fascinated with why I

chose nursing as my career when it is such a heart wrenching and difficult occupation. In reply, I told her that I have always wanted to help those who need it most and so I could meet people like her. She smiled with much joy at my response and thanked me for choosing what she thinks of as such a noble profession.

She had very clear goals for the first day, she wanted to get moving and do it with no narcotics for the pain. So after refusing all of her morning pain medications, including a simple Tylenol, she got up and started walking lap after lap around the unit. In my free time, I joined her and talked about her life and her family. I would also often tell her about myself and my own family. She was such a wonderful and pleasant person to speak with that I found myself doing lap after lap with her while my other patients were off in procedures.

After accomplishing her goals of walking on the first day, I left in the afternoon and returned early the following morning to continue taking care of her. She was just as motivated and just as persistent about not receiving pain medications. I told her she was extremely brave for this since it is such a painful procedure. She replied that in her home country, she gave birth to both of her kids without any pain medication and that resolved all of my worries. This woman was the real deal, and she was going to do everything to get healthy again.

Her goals for the second day were just as clear as the first: she

wanted her catheter removed, and she wanted to start using the bathroom herself. So after speaking with the doctor, we removed her catheter and started the six hour test of time to see if she could use the bathroom on her own. Without shock, she reported that after just three hours, she had been able to use the bathroom. I was filled with such joy for her, and she was just as happy. She had been doing everything right: she was drinking plenty of fluids and remaining active. However, I then came into her room and noticed she had only been able to produce a small amount of urine. It clearly did not match the amount of fluid she had been drinking. So, I took out the bladder scanner. And sure enough, I scanned her and my heart dropped. She was still holding onto a lot of fluid, and she failed her first test.

She began crying at the thought of having another catheter placed and having to stay in the hospital any longer. I sat with her in this sorrow for many minutes trying to comfort her and explain this was not her fault. She asked over and over again what she should be doing to make her bladder wake up, but there was nothing. She was doing everything right. She was young and healthy and had been doing everything she should have while in the hospital. It simply was a matter of her bladder not cooperating after surgery.

This was the first real time where I felt so deeply for a patient's sorrow. I had so much hope for her in accomplishing such a simple

sounding task: going to the bathroom. However, there was nothing I could do, there was nothing she could do, and there was no one else that could do anything. It felt hopeless, frustrating, and downright depressing. It took me a long time to accept this fact. And I learned that these are the hardest things in life and in health. The things we cannot control.

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How to Build Confidence as a Student Nurse

BY ROSMIL MANALANSAN

Why do student nurses struggle with confidence?

Student nurses face several challenges while in school, but confidence is one of the most important challenges that carry on even as a new grad. As students, we struggle with confidence in the clinical setting due to many factors such as: lack of experience, fear of making mistakes, and feeling incompetent around educators and other healthcare professionals. Many times we experience a phenomenon called nurse imposter syndrome. This is when we feel inadequate, not good enough, and feel as if we didn't earn where we are. We end up questioning our abilities and doubting ourselves. Don't worry, many of us feel this way! Here are ways to help build confidence.

1) PRACTICE:

Practice makes perfect! Repetition helps you solidify those skills and become more confident. Whether that be priming a primary line, hanging a piggyback, flushing an IV, or something as simple as taking vital signs,

you want to be confident in those skills. You want your patients to feel safe in your care in order for them to trust you. If an opportunity on the floor presents itself, take the initiative to practice! Prior to the start of my shift, I usually ask the charge nurse if there are any procedures being done on the floor that I can possibly observe or even perform. One time, a nurse pulled me to the side and asked if I wanted to perform a central venous catheter dressing change and I eagerly said yes! I hadn't performed one before but I immediately took the opportunity to watch a Youtube video, write down the steps, and practice for the first time. Another nerve wracking task for me was giving a hand-off report. That used to be the scariest part of a shift because I was afraid the oncoming nurse would think I was incompetent. But after doing it every shift, I no longer get nervous and can give a decent report. The more you put yourself out there to practice, the easier it gets and the more confident you will become.

2) BUILD YOUR KNOWLEDGE:

Have you heard the saying "Knowledge is power?" The more knowledge you obtain, the more you will feel confident in your abilities. In nursing school, we take all the required classes we need to graduate, but we can also supplement that education with outside resources. Nursing Youtube videos, practice tests, and study sessions with upperclassmen/mentors can help elevate our knowledge. I decided to build my knowledge by always asking questions and asking my preceptor for critiques. For

example, I didn't know what a transcatheter aortic valve replacement (TAVR) was when I started externing on a cardiac surgery unit. I then asked my preceptor and she thoroughly explained the procedure to me by watching a Youtube video and looking at diagrams. If I didn't ask, she would have assumed I knew what it was, so don't hesitate to ask your preceptor, instructor, or other healthcare professional questions. They are here to help build your knowledge and confidence.

3) DON'T COMPARE:

Comparison is the thief of joy! It took me a while to realize that comparison is different than inspiration. If others around you are doing different things to boost their careers, it doesn't mean you have to do the same thing. Instead, find something that works best for you. See their success as inspiration to continue on and better yourself, not beat yourself down. If you continue to improve your nursing skills and dive into self-improvement, you will not compare. Instead, you will build more confidence. Don't look down on yourself because your classmates are progressing at a different pace, instead reflect on your journey and write down positive things that have gotten you to this point. I write down special moments with patients that I remember from my shift and remember that's unique to me and that patient, which makes me feel confident in my experiences! Find ways to be proud of yourself even for the small things. Talking to my patients about their life and connecting

with them are special moments for me because it shows that they can trust me, which builds my confidence. Lastly, be proud of yourself for all the success you are achieving and find opportunities for improvement and work towards those steps! These will help build your confidence!



Fighting the Flu

BY KATELYNN LE

PHOTO CREDITS TO PROFESSOR ANDERSON, MICHELLE ANGGONO, GABBY DECANO, GRANT GOODWIN, THALIA LOI, KRISTEN LOY, ROSMIL MANALANSAN, NATALIE NGUYEN, JESSICA OATIS, PROFESSOR PARR, KAJAL PATEL, TINA TRAN, AND MADISON UY

During the month of October, SDSU nursing students volunteered their time to help vaccinate the SDSU community. We were stationed at Cuicalli walkway, the Student Union, and in front of Hepner Hall to administer flu vaccines as part of SDSU's "Boo to the Flu" event. Besides contributing to the overall health and well-being of our community, most of us had our first experiences (outside of skills lab) with intramuscular (IM) injections and drawing from multi-dose vials. Although some of us were nervous at first, I think we can collectively agree that this was definitely a fun and memorable learning experience. We also soon learned that we were able to give out more than 1,300 flu vaccines during our pop-up flu shot clinics, which was the most that were ever given compared to previous years! So proud of everyone!

Special thanks to Dr. Gates, Professor Parr, Professor Anderson, and Student Health Services for organizing this event, providing us with this amazing opportunity, and volunteering their time to support us!



Preventing Burnout

BY TATIANA PANAGUITON

Though I have yet to experience it, I understand that burnout in the nursing profession is common. I know that one day, I might wake up and want to walk out of the metaphorical door of nursing for good. Maybe I'll take some deep breaths, remember the reason I came into this profession, and come out stronger than before. Burnout is normal. But it shouldn't have to be normal. While the following poster can be helpful in the short term, the real work in reducing burnout will require a systemic overhaul that is long overdue in the healthcare industry. The perpetual toxicity of the healthcare industry that focuses solely on generating profits is crumbling under itself, giving way to the ugly truth that as a society, we have failed to care for the people who are supposed to care for us. Changes can include more manageable hours, appropriate staff-to-patient ratios, and effective leaders who care for the well-being of healthcare staff just as much as the patients. Until then, remember that feeling burnout does not make you a broken person, it is part of a broken system.

PREVENTING BURNOUT

REMEMBER: YOU ARE NOT A BROKEN PERSON, IT IS PART OF A BROKEN SYSTEM

RECOGNIZE THE SIGNS

Burnout/compassion fatigue can manifest differently among various people

- avoidance/dread of working with certain patients
- headaches
- insomnia
- mood swings
- excessive use of substances (alcohol, drugs, etc.)

THINGS YOU CAN DO

- 1) Focus on self-care
 - psychological, relationships, finances
 - exercise, sleep, create a pre-shift routine
- 2) Increase your resiliency
 - accept that change is constant and inevitable
 - keep things in perspective
- 3) Speak up and be open
 - ask for help when unsure
- 4) Get Boundaries
 - 30 minutes of a break can make all the difference
- 5) Join a support group
 - talking to friends or family can count as support

THE 4 A'S

ASK

Am I feeling distressed?

AFFIRM

Say, "Yes, I am feeling distressed and this is what I will do about it"

ASSESS

What is your ability to change?

ACT

Take personal responsibility and implement the changes



In a 2021 ICN survey, 76% of healthcare reported exhaustion and burnout

ANA CODE OF ETHICS PROVISION 5

"The nurse owes the same duties to self as to others..."



Who can do tai chi?

Tai chi is a low-impact exercise, making it suitable for all ages and fitness levels. It puts minimal stress on the muscles and joints, which is safe for older adults who may not be active. The beauty of tai chi is that it is free of cost, requires no special equipment, and can be done anywhere.

References

<https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/tai-chi/art-20045184>

<https://www.nccih.nih.gov/health/tai-chi-and-qi-gong-in-depth>

Tai Chi

Fight your stress gracefully

YSABELLE SIAZON



Meditation in motion.

What is Tai Chi?

Tai chi is an ancient practice of exercise that involves a series of slow, gentle movements with mental focus, deep breathing, and relaxation.

This Chinese traditional art originated as a form of self-defense, but has evolved over the centuries to help reduce stress and anxiety, and improve flexibility and balance.

When practicing tai chi, each posture flows into the next without pause, keeping the body in constant motion.

The BENEFITS

FALLING & BALANCE

Tai chi, with its unique exercise style, improves balance, stability, and agility. It also improves muscle strength and definition, reducing the risk for falls in older people and Parkinson's disease..

PAIN

Research has shown that practicing tai chi can help manage pain secondary to knee osteoarthritis and fibromyalgia, as well as chronic neck pain and back pain. Tai chi achieves this by improving aerobic capacity and increasing energy and stamina, thereby helping people cope with the pain associated with these conditions.

MENTAL HEALTH & COGNITIVE FUNCTION

In addition to stress, tai chi reduces depression and anxiety by promoting serenity through the gentle, flowing movements. It also improves mood and self-esteem. Tai chi may boost brain function and reasoning ability in older people.

QUALITY OF LIFE

As a form of physical exercise, tai chi enhances quality of life. Tai chi has been recommended to reduce illness-related fatigue and inflammation in adults with different types of cancer. Practicing tai chi regularly can also serve as an option for cardiac rehabilitation for those with a heart disease, like chronic heart failure or a heart attack.

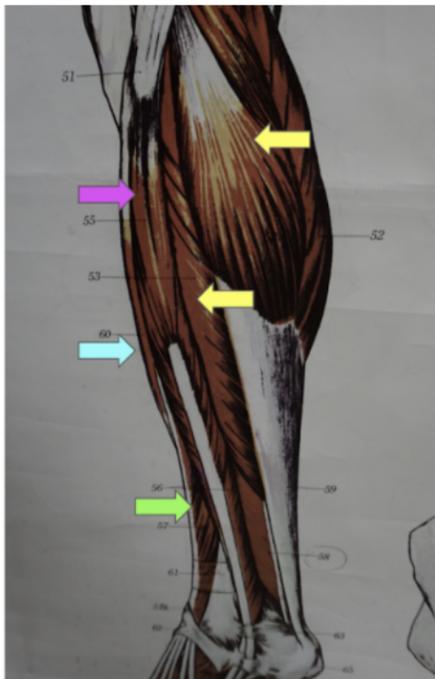
Sara's Top 3 Tips for Crushing Anatomy Exams!

BY SARA HERMANN

1) Make Google Slides with pictures of the charts and models:

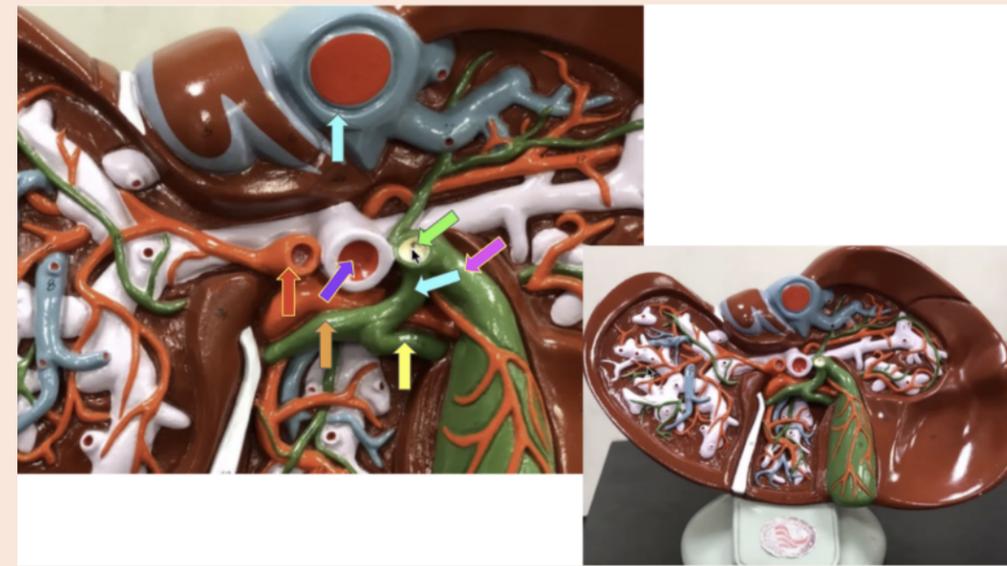
For each picture, have one unlabeled slide followed by a labeled slide. This allows you to quiz yourself as you go through the slides. Simply the process of making these slides helped me learn the information, and it made studying for exams really easy because I had all the information in one place!

Lateral View of Left Leg



Lateral View of Left Leg (top down)

- Gastrocnemius (52)
- Fibularis longus (55)
- Soleus (53)
- Tibialis anterior (60)
- Extensor digitorum longus (57)



UNLABELED SLIDE

LABELED SLIDE

Liver

- IVC
- Hepatic portal vein
- Hepatic artery
- Common bile duct
- Cystic duct
- Common hepatic duct
- Right hepatic duct (closer to gallbladder)
- Left hepatic duct

2) When studying for OIAs (origins, insertions, and actions of muscles), try to involve as many senses as possible:

This means that as you're studying the OIAs, say them OUT LOUD, not just in your head. As you say them, POINT to the origins and insertions on your body with your finger. When you say a muscle's action, PERFORM the action itself (so if it's flexion for biceps brachii, flex your arm as you say "flexion" out loud). The more senses you involve in your studying, the easier it will be for you to retain the information. It may look like you're having a mini aerobics class as you study the OIAs, but I promise you it totally works!

3) Come up with silly mnemonic devices to help you remember things:

Anatomy involves A LOT of memorization, so coming up with little sayings and strategies to help you remember things can be helpful! Here are some examples of mnemonics I used:

I. How to distinguish between the lunate and scaphoid bones of the wrist:

Notice that lunate bone is closer to the pinky than the scaphoid bone. In the song "24k Magic" by Bruno Mars, there's a verse that says, "Put yo' pinky rings up to the moon". Also note that the moon is associated with the term "lunar" in astronomy, which is very similar to the word "lunate". And voila! You now have a strategy for remembering which bone is the lunate and which is the scaphoid!

II. How to remember the sensory and motor functions of the vagus nerve:

Firstly, here are the functions of the vagus nerve that the lab manual listed

- A. Sensory: general sensations from thoracic and abdominal viscera
- B. Motor (somatic): larynx and swallowing muscles
- C. Motor (visceral): thoracic and abdominal viscera

To remember these functions, I came up with this statement: "When people go to Las Vegas, they drink a lot of alcohol, which makes them throw up."

The "la" in "Las" helped me remember "larynx". Drinking involves swallowing, so that's how I remembered swallowing muscles. The "th" in "throw up" helped me remember thoracic viscera. When we throw up, we throw up our stomach contents, which is located in the abdomen, and this helped me remember abdominal viscera.

Teaching Beginner Nursing Students How to Think About Medication Administration

BY BROOKE HAMMER, AUDREY HANANO, KARLA LOPEZ GOMEZ, KRISTEN LOY, TATHYAA PATEL, SYDNEY MARTIN, AND DR. LISA CONCILIO

Dr. Concilio and her NURS206 TA's created this teaching/learning strategy to help beginner nursing students deal with the complexities of medication administration at their own pace.

Using a medication administration map (MAP), they discuss how to create a critical-thinking strategy.

Scan the QR code to view the presentation or click [HERE](#).



When you get to the presentation, click on the 3 dots to the right of the "view" button to watch the embedded videos!

The Intersection of Nursing and Advocacy

BY GILLIAN WEROLIN

As nursing students, we are taught from the beginning of our education that one of our main roles as a nurse is to be an advocate for our patients. To be a nurse is to be a patient advocate. We must be able to look at our patients as a whole person, understand the context of the health within the lens of their life and experiences, and then translate that into patient-centered care that meets their needs. We frequently practice this within the hospital as a bedside nurse, but how can we carry the practice of advocacy into the rest of our lives? In order to truly fill the role as advocates for our patients, we must be prepared to do so both inside and outside of the hospital.

The American healthcare system has many flaws, many of which impact our patients and lead to poor health outcomes that could otherwise be avoided. Is it not our role as patient advocates to try to change this system to better support our patients and their health? This means getting involved in advocacy through methods other than those used at the bedside. Rather than calling a healthcare provider to advocate for a patient,

we must engage in advocacy on a legislative level. Things that we now see as commonplace in our healthcare system were only achieved through healthcare workers demanding more from their system.

One of the best examples of this could be California's staffing ratios. In 1999, California became the first state to create minimum RN-patient staffing ratios. These staffing ratios are now considered the "norm" in California, but these were only achieved through a grassroots campaign put on by RNs in California. These staffing ratios have been directly tied to better patient outcomes in California when compared to other states without minimum staffing ratios (National Nurses United, 2021). California's success with the advocacy for safe staffing ratios shows the power that nurses have when they come together to work towards a better healthcare system for their patients.

I strongly urge all future healthcare workers to stay informed about the political climate surrounding the legislation of healthcare. We see firsthand how our healthcare system impacts our patients, and it is our responsibility to work towards building a better one. Whether that means focusing on federal staffing ratios, creating accessible healthcare, or ending the systemic issues that create health inequities, all healthcare workers should find an area that they're passionate about advocating on. Get involved in your community and grassroots organizations to campaign for the changes that you think your community needs.

As future nurses, it is our responsibility to advocate for our patients to receive adequate healthcare. This means being involved in advocacy both at the bedside and outside of the hospital. Healthcare workers have the privilege of understanding the facets of the American healthcare system in a way that much of the public does not get to see. We must use this knowledge and privilege to work towards creating a healthcare system that better supports our patients and communities.

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My Perspective on Diversity and Inclusivity in Nursing

BY GAMIEL ORTIGOZA

Growing up Filipino-American, I faced many instances of discrimination in my community that separated me from my cultural identity. While I understood almost everything my immigrant parents were saying in their native tongue, I never had the opportunities to practice speaking since they wanted me to speak English to conform to American culture since it would give me the best opportunities of surviving. I remember growing up and being in predominantly white classes despite our school being located in a diverse section of my hometown. Being surrounded by individuals from a different culture than me really prevented me from truly experiencing what it meant to be Filipino-American since every chance I took to express my cultural identity was shot down by my peers. I remember one moment in fifth grade when I was so excited to share homemade chicken adobo with my friends, but they reacted with disgust related to the odd smells of soy sauce and vinegar emanating from my

lunchbox. I felt ashamed and told myself that I would always resort to buying school lunch, even up to the end of high school, just so that I can be like everyone else.

Moving to San Diego State University (SDSU) really opened up my perspective on how diverse a community can actually be. I can see it everywhere I go on campus and it's so nice to be in classes where everyone stems from different cultures and identities. I'm a part of Andres Bonifacio (AB) Samahan, one of the many cultural organizations here on campus, where I get to interact with so many Filipino-Americans from so many different, unique backgrounds. I feel that this organization allows me to discover more about my own cultural identity in a welcoming and safe environment. I never really felt welcomed being Filipino-American growing up, but being a part of AB Samahan allows me to enrich myself with the historical context of my identity and helps me be more confident expressing who I am to others.

Let's connect this concept to nursing now. For context, I'm a second-year nursing major here at SDSU and upon writing this entry, I have yet to experience any type of in-person clinical rotation. Out of the nursing classes I've been in, one that really stood out to me was N206: Fundamentals of Nursing Practice. Yeah, it was really awesome learning the fundamentals of being a nurse, but one specific chapter that I had immense interest in was about holistic nursing where we were taught to

treat the patient as a person rather than a disease. I enjoyed learning about this method of patient care since it would allow me to offer my patients selfless care that prioritizes their interests first, establishing a welcoming environment where they can be listened to and involved in. One important lesson surrounding patient-centered care was when we were taught to keep our prejudices and biases aside when interacting with our patients to ensure they have the safest environment during their admission. Growing up as a social minority in my community, I never felt welcomed in many places often due to racial prejudices my community experienced. My search for social acceptance and welcoming is why I wanted to become a nurse in the first place since it was an occupation that would allow me to offer my patients something I never received. As a nurse, I'm expected to be able to provide care to my patient regardless of their cultural background, and I love that since I would be establishing an environment free of judgment and discrimination.

I feel that attending a university and living in a city where I get to interact with so many people from different cultural backgrounds helps me broaden my perspective on the world. I learned to understand that while we may share the same ethnic identities, we all have distinct, individual histories and backgrounds that help us stand out from the crowd. I love this since it allows me to think twice before assuming information about a person before actually getting to know them. I understand that I have zero

clinical experience when it comes to interacting with patients in person. However, I'm excited to begin clinicals next semester and listen to all the different patient stories so that I can get to know who my patients really are beyond the reason for their admission.



A Senior Reflection

BY ALYSSA LASKE
SNA President

If you told me freshman year where I would be today, I wouldn't have believed a word of it. I want to be vulnerable and share my experiences with you all, and I hope it resonates, motivates or inspires you.

To give you all a bit of background, my first three semesters were tough. Moving away from home and starting college were hard, but the least of my worries. I let toxic relationships get in my way, and they caused me to turn down a lot of opportunities. My only involvement was SNA, which was my saving grace that gave me friendships, opportunities, and so much support. Over winter break sophomore year, I cut out everything toxic and decided to finally put myself first. I came back in Spring 2020 and joined new student organizations, relaxed my course load, and increased my social

life. I started some of the best months of my college experience feeling refreshed, only to be suddenly sent home by a worldwide pandemic.

I felt shorted by life as my foundational nursing courses were cut off, and I was forced to stay home just as my college life was taking off. I started clinicals in the fall with five days of OB, six of psych, and almost zero idea of how to be a nurse. But today, I've excelled in clinical, held leadership positions, completed an externship, and am one semester away from graduation. I am so proud of how far I have come.

I remember my second day of clinical ever: I was in postpartum, and my nurse that day asked me to prime a line for her. I never made it that far in fundamentals, I was online before we got there, and I was mortified to say I didn't know how. My nurse kindly showed me, and I continued to grow in each clinical day. Only months later in med/surge, I was starting IVs, priming lines, and having to cut doctors off to find my nurse when they started giving me orders. Just a few weeks ago, a clinical professor from another school mistook me for a nurse at Rady's and asked me to take a student! Even though we're all in scrubs and it's an easy mistake, I felt proud to know I looked like I belonged there.

I remember attending Freshman Orientation, feeling confused, overwhelmed, and honestly lost. I then spent my junior year as one of Student Nurses Association's (SNA's) Membership & Mentorship

Directors where my biggest priorities were making freshmen feel welcome and increasing their participation. And this year, as SNA President, I planned the event myself. I love interacting with younger students, we were all new at one point, and I love making everyone feel welcome.

I remember walking into nursing classes and sitting in a different seat every day because I didn't know anybody. Now, this nursing program is my family. I've met so many people, made so many friends, and found so much love and support here. I wouldn't have made it without you all, and you all will make it with the care of each other.

You never know when the rug is going to be swept out from under you, and as cheesy as it sounds, you only get this college experience once. Nursing school is hard, and you are accomplishing it amid a worldwide pandemic. I want to remind each one of you to say yes to opportunities, and to say yes to yourself. Take that surfing class, take days off, run for that leadership position and make lots and lots of memories. You've got each other and you've all got this.



The Definitive One Step to Leaving SDSU with Your BSN

BY KIMBERLY SANCHEZ

1. Yourself (I apologize for its corniness, but please continue reading)

Nursing school is taxing. Whether you experience the joys of entering our profession now or later on, it is almost inevitable to feel the effects that nursing school has on you. To have entered this program, you must be incredibly gifted. It is easy to let impostor syndrome creep in the back of your mind, but that is the time when it is 100% warranted to stop and watch Disney's Luca, and tell that voice, "Silenzio Bruno!" Regardless of your current or past circumstances that have brought you to our program, you must believe that you are capable of getting through your next quiz, your next exam, your next semester, or even the rest of the program if that is what you need to push for. It must be annoying to hear this empty encouragement with no understanding of who you are from those around

you, and I may not know you all personally, but a personal relationship with you is not needed in order for you to read the following:

However scared you are of this program, you are already here. It does not matter whether you think you have earned or deserved your spot here. Your job is to make the most of what you have, and in the times you doubt yourself and question if you have what it takes to be successful in this program or this profession, you must remember that: Even if a form of natural academic intelligence passed over you and is bestowed among others, that a good work ethic is not intrinsic. By this, I mean that not everyone is born with being naturally smart, but it does not take natural intelligence to thrive in this environment. As nurses, we are a team, and this teamwork begins in our education as nursing students. We can work together to find our best study habits and enhance our understanding, and we can work together to support our mental health when we are caught in the tidal wave called midterms.

With this being said, it may come almost naturally to feel that our success translates to our worth as people: these feelings also warrant watching Luca. Before we are nurses, we are people. To expect ourselves to disrespect our bodies by putting your studying over eating a full three meals a day, or sleeping in for however long you need to function, or to deprive ourselves of sunlight for a full week is not okay, to say the least. It is important to study, but your health takes precedence. Our professors

care for us deeply, but it goes without saying that their job is to teach us the information we need, and that the pace of their course is sometimes necessary. We cannot expect our instructors to work completely around us. But, we can reach out for help to better understand how to excel in their courses rather than blame them for the way the course is set up. Simply put, as annoying as their courses may be, their job is to prepare us for nursing and the NCLEX, regardless of how tough it might be for us. We cannot endure their pacing without caring for ourselves first. We have to take care of ourselves so that we can keep up; please take the time to feed yourselves, rest, and see the outside world. Again, this is easier said than done, but this is where the one-step comes in again.

We are always told to believe in ourselves, but oftentimes, when we are challenged, our faith in ourselves goes out the window. Doubting yourself is easy and it is natural and that is okay. Feel those feelings. Feel sad, feel disappointed, but take a step back and remember that you have had hardships before, and every time you have survived. For some people, they believe that a higher power has brought them to the present time: possibly a God, or the power of the stars and universe, manifestation, or even karma. However, when you look at all these different forms of faith, they have one commonality: they involve calling for what you hope for, in the belief that it may come to you. And of course, when you call for what you desire, you work towards it. We may never know who or what launched us onto Earth, but we are gifted with free will. We may not be

the almighty controllers who can grant ours or others' wishes. But as we call for what we crave, we actively work towards our goal. Sometimes what we wish for comes true, but even as we wish, we work. All we can control is how we work, and sometimes having faith in something bigger also involves having faith in yourself. Even when we believe we are putting our faith in something else, we still place our faith with ourselves. So, when you have no faith in yourself, put it in something else. Combine that with work, and your efforts will translate to success in due time. WE are the ones who can control our lives, and above anything you might believe in, it is one of the best and greatest things in your life when you can believe in yourself.

To summarize, you are capable regardless of those intrusive thoughts. Take care of the vessel that physically lives your life, and you will find yourself at the end of your time at SDSU with high regard for what you can achieve when you believe in yourself.

Substance Dependence; TW: Addiction

We crave escape. This is understandable, and even necessary at the end of a hard week. "Work hard, play hard": this is often the case. However, escaping in a way that requires a drink or another substance can be very dangerous.

My previous article referred to self-care and its importance, and while that is true, sometimes people believe self-care can take the form of alcohol

or other substances. Although no comment will be made on the approval of such forms of self-care, I must assert the importance of moderation. Access to alcohol or drugs might always be possible, and enforcing the public to abstain from these is impossible, so self-discipline comes into play. Many of us have experience with family members or acquaintances who have struggled with addiction. We may have even witnessed someone slipping from a drink or two each weekend, to four to five each day. When we are struggling with our lives, it is easy for this to become our personal reality.

Although this article is not written to berate you for use of substances, it is meant to make you aware of how often you use it. When we place our happiness in something that requires intake or a high or not feeling sober, we risk our bodies and our natural happiness. We risk feeling that reality is not good enough, and this is when we are at greatest risk for addiction. We might begin to feel defensive when we realize how often we use substance to unwind, but it is important to be aware.

Please be aware of how often you are trying to escape reality, and begin to find ways to cope with stress that do not involve holding something to your lips. Work hard and play hard, but there is no work or play to be done when we live our lives trying to avoid sobriety.



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