# **Career Research Interview Project**

Submitted by:

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Communication 1010-044

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# **Document #2: Interview Analysis**

DATE: February 21, 2012 TO: Professor Cullimore FROM: Allison Maxwell

SUBJECT: Interview Project, COMM 1010-044

I was able to interview Rebecca Brown, a nurse who works at TRIA Orthopedic Center in Bloomington, MN. I was referred to her by a friend who thought she would be the perfect subject for this project because she is experienced and always willing to help educate people about nursing.

I am not in the nursing program currently, but I have recently been considering a change of major. I am currently pursuing my degree in Family and Human Studies, with plan to transfer to the University of Utah and get a Bachelor's Degree in Early Childhood Education. I am no longer sure if this degree is right for me; I wanted to explore other options that were still emotionally rewarding, but perhaps a bit more lucrative. When I started this process, I had only a basic understanding of the education required and the daily life of a nurse and I now have a much more comprehensive understanding.

The following summarizes my interview with Rebecca.

## Interview

#### Education

Rebecca chose a career in the medical field because she wanted to work with people. When she was in college, she was actually a Biology major and was quite far into her program before deciding she didn't want to spend her days in a lab. She changed her major, and because she was so far into her Biology degree, she double majored in Biology and Nursing so she has a Bachelor's in Biology and Nursing.

Rebecca has a four year Bachelor's degree. You can also be a nurse with a two year degree. With the two year degree you can do almost everything someone with the four year degree can do except management and those with a two year degree don't get paid as much. Many of the women she works with who are in their 60's have "diplomas", a three year program nurses used to complete but no longer exist. Most places, especially magnet hospitals are starting to want nurses to have their Bachelor's degrees. Many nurses now get their Associate's Degree, being working as a nurse, and continue working on their Bachelor's at the same time.

# A Typical Day

For Rebecca, what she does in a typical day depends on the shift she gets. When she gets to work she always changes into scrubs and then finds out what she will be doing that day. She will either do Pre-Op, PACU, Pre-Op phone calls or recovery phase 2.

She ran me through the typical patient care that goes into each sector.

Pre-Op: She gets patients ready for surgery. She takes their medical history, men and women over 50 need to get EKGs, and she conducts pre-op physicals. She makes sure they have not had anything to eat or drink, makes marks on the limbs where they are getting surgery and administers nerve blocks if needed. She also helps the patient feel better if they are nervous about having surgery and stays when them while they talk to the anesthesiologist. One of the most important parts of this process is making sure all the required computer and paper documentation is in order.

Recovery 2 and PACU- After patients are done with surgery they go to either Recovery 2 or PACU. Those patients who go to PACU have had general or spinal anesthesia. This makes the recovery process more dangerous. They may still have a breathing apparatus in. In both sectors she manages pain control and preps the patient to go home.

Pre-Op phone calls- When Rebecca makes pre-op phone calls she talks to patients who will soon be coming in for surgery. She answers the patient's questions and talks to them about what they need to do to be prepared for surgery.

Rebecca's favorite thing about her job is the variety; she gets to do something different every day. She also likes that her patients are generally healthy, but she still get some critical care in because everyone once in a while, something goes wrong with a patient and she has to use her resuscitation skills. She also gets to teach a lot. She teaches resuscitation, basic life support, pediatric life support and some other classes as a part of ongoing education. I will discuss this in more detail later.

She also talked to me about her schedule. She is the mother of two young sons and after they were born, she cut her hours back to 2-3 days a week. She usually works Thursday, Friday or Saturday and each day she could work a different shift. She likes that she has a lot of great coworkers who are able to trade shifts with her if she needs it. This is something they do quite often.

## Continuing Education and Becoming a Better Nurse

Rebecca says that the way she has progressively become a better nurse is work and experience. She has worked in a lot of different areas, and she thinks that is very important. She has worked

with surgeons, in pediatrics, in the emergency room, pre and post anesthesia, and all those different experiences have helped her become a better, more well-rounded nurse.

To keep your nursing license, there is some continuing education that is required – CE's or CEU's. You have to do 20 credits every two years, although the requirements are different in different states. There is a lot of standard education you have to do as a part of the job and her hospital always offers classes, etc. you can sit in onto help you get your credits. In addition to the basic ongoing education, there is other required education you have to do depending on where you work. Rebecca recommended definitely getting your four year degree and taking as many ongoing education classes as possible. She also talked about continuing on in nursing education by becoming a nurse practitioner or nurse anesthetist. She discussed, once her kids were grown, continuing her own education to become a nurse practitioner.

Rebecca also discussed the way critical thinking and other learning strategies help her make better decisions about patient care. Critical thinking is a big deal in nursing. There is a huge emphasis on critical thinking and autonomy. Many people have the image that the doctor comes in and tells the nurse what to do. This is not the case. Although they have some standing orders, the nurses are almost completely autonomous. They are the patient advocates so they need to have a nurse who knows what they are doing. She talked again about experience and how she is a much better nurse now than when she first started. She also talked about the benefit of teaching classes. She is able to keep the information fresh in her mind, while many other people only take the classes every two years. For example, she teaches the protocol for when people have heart attacks and relatively recently she has had two patients have heart attacks and she knew what to do right away. She also talked about the importance of practice. When the nurses in her hospital have slow days, they do mock code exercises, they run over protocols, they draw up meds, always keeping it fresh in their minds.

## **Interview Analysis**

I found this interview very educational and I was inspired by Rebecca's love for her work.

Analysis of Nursing as my Career Choice

This interview gave me a lot to think about when considering nursing as a career choice. I have already been in school for a while, so I would prefer to do something I could use more of my credits towards. I also have reservations about the amount of math and science I would have to do. I think I could do it, but I know it would be a great challenge. It is also hard for me to let go of the idea of doing what I have always wanted to do, but I know I could be happy in a variety of careers. I was inspired by Rebecca's love of nursing and I admired how knowledgeable she was. I was also impressed by the variety of things she got to do each day; I can easily see how she never gets bored. I also liked that it is easy to work part time as a nurse. This is a big consideration for me because I plan on having children in the next few years.

I've been able to gain a lot of clarity by interviewing Rebecca. I didn't realize how much I didn't know until we did our interview. I have seen nurses at work many times, and I know many of them but I learned many things I didn't know about a typical day in their lives.

# Analysis of my Interviewing Process

This was a challenging assignment for me but also rewarding. I am very shy, and I have a lot of difficulty talking to strangers. Just the idea gets my heart racing. I also live in a place that is new to me and where I know almost no one so I had no idea how to even start going about this assignment. That's why I was so glad when a friend had a connection I could use.

For the interview, I brought my questions typed in an outline format on a sheet of paper, with a notebook to record notes and used the recorder on my phone to record the interview. I felt prepared, I had put a lot of time into creating and memorizing the questions, and I had a general idea of what I wanted out of each one. However, if I were to do this again I might spend a little less time on the questions. Rebecca answered each question very thoroughly, so much so that she answered many of my questions before I asked them.

I was glad I brought a recorder to the interview. There was no way I would have been able to get all the specific details without it. I was also able to listen to a few mistakes I made in the interview that I was too nervous to notice at the time. Rebecca did a great job of explaining things to me in layman's terms, but she still used some medical jargon that I think I would have missed without the recorder. I took few notes because I felt like it would interrupt the flow of the interview, but I wrote down quite a few things that she said and thoughts that I had.

My meeting was not as formal as I had intended it to be, especially because of the change of location. I did my best however, and I did not think it was appropriate to demand that we meet at her hospital when it was not convenient for her and she was doing me a favor in the first place. I was much more comfortable than I expected. She was easy to talk to and I was grateful that she seemed so willing to help me, even though there was nothing in it for her. She filled out the evaluation form quickly and even offered to scan it and send it because I did not have a scanner. I forgot to bring the Professor's email address, so I had her send it to me. I hope that did not make her feel obligated to write anything different, just because she thought I might read it.

The first stages of the assignment were difficult for me. I have a very difficult time talking to strangers and asking people for help, but I was very happy with the result. I learned a lot and I have much to consider.

Document #3: Letter of Thanks February, 21 2012 Dear Rebecca, I just wanted to thank you for letting me interview you. I found our interview very interesting and I learned so much! I truly admire your passion for your work and your high level of knowledge about what you do. I was amazed by many different things you have done in your career, and I was impressed by your competence and experience. I enjoyed learning about a typical day in you line of work. I will continue thinking about my future and what line of work I want to get into, and the information you provided will be very helpful. I appreciate you taking time out of your busy schedule to meet with me. I know you are busy, and it meant a lot to me. You helped me so much with this project; I would not have been able to do it without you. I learned so much about what nurses do day to day, and I really appreciate all you hard work! Many Thanks, Allison McGee