Conversation between two nurses:

Gary: Oh, hello Brad. I didn’t know you were working a morning shift today too.

Brad: Hi Gary, yes, I’ve just finished, and I am glad the work’s over. It’s been rather a tough day in my ward. How was it in yours?

G: Same. But we can’t expect it to be easy, can we?

B: You’ve got a point there. So what did you do today?

G: Well I arrived earlier than usually and the nurses from night shift were still filling out the reports, so I waited at the reception and chatted to Jackie, do you know her?

B: She’s new, isn’t she? I haven’t met her yet as last week I attended a 3-day workshop on pharmacology and I think she started then.

G: Oh yes, the workshop. Anyway, when my shift began, I had to provide some hands-on care to the older patients in my ward. You know, some of them have problems washing and dressing.

B: I know what you mean, I do it from time to time only as there are fewer elder patients in my ward than in yours. Our boss always says we should proceed in such a way so as to keep their dignity intact.

G: That’s indeed very important to make them feel safe and comfortable. Afterwards, I dressed some minor wounds of a patient after a traffic accident and later on had to provide pre-operation care to another patient who was about to undergo appendectomy. It was also my task to obtain informed consent from her regarding anaesthesia, which I found rather challenging as I had difficulties in developing rapport with this particular lady.

B: Were successful with the consent?

G: Yes, I was, and the patient has already undergone surgery. If there are no complications she will be discharged in two days.

B: Do you have any special procedures regarding the convalescents in your ward?

G: Hmm, let me think. Oh yes, we need to instruct them how to self-administer medications after they return home. Moreover the supervisor of our ward pays special attention to the provision of emotional support, especially in cases when recovery is going to require patient’s determination and may be painful.

B: Right. What was the second half of your day like?
G: Well, it was much less busy I must say. There was just one more patient who had reported to the A&E department himself but was later transferred to our ward. I only needed to evaluate his symptoms and devise a sound treatment plan. Finally I filled in some documents as we have to keep records about every patient’s condition. Ok, enough about me! How was your working day?

B: Well, my day was completely different than yours, as instead of working with patients, I had to do some work which is more technical than medical.

G: Technical? What exactly do you mean?

B: Well, the supervisory nurse ordered me to carry out routine maintenance of the equipment in our ward.

G: Maintenance? What kind of maintenance can you do on a stethoscope?

B: Ha ha ha, very funny. Try carrying out maintenance on a pump or a drainage system and then we will talk. It’s absolutely essential to do it in order to ensure smooth operation of the equipment and I am sure it is also routinely done in your ward. Anyway, it took me almost three hours to complete. Afterwards I went through our inventory and realized we were about to run out of some supplies for example bandage, disinfectant and such, so I placed an order at a wholesaler.

G: Well, that doesn’t sound too bad! Anyway, it was really nice meeting you Brad. Have a good evening and see you tomorrow.

B: Yes, see you!

**Discussion Questions**

What key tasks do nurses do in their jobs?

What are the challenges that nurses may face in their jobs?

In what way can the job of a nurse be rewarding?