Inprint Healthcare Provider Writing Workshops: Improving Health and Caregiving

Healing Arts Houston: Innovations in Arts and Health Conference
September 29, 2022
Plenary session – 2:20-3 pm



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Rich Levy, Inprint Executive Director, Moderator Krupa Parikh, Inprint Associate Director, Coordinator













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Sara Ali



"I realized I had just been doing my day to day job like a zombie. The class helped me appreciate the small moments and the small interactions that make the work worthwhile."

Inprint writing workshop participant
Texas Children's Pediatrics
Winter 2022

"The workshop encouraged me to become a better observer of things around me. If I am a better observer of my patients, my families, and my coworkers, I feel this will help me be a better physician."

Inprint writing workshop participant
Texas Children's Pediatrics
Winter 2022

"It definitely improved my mood and outlook going into work. I feel that it has reminded me to be more thoughtful about the patient and helped me to improve my written communications."

Inprint writing workshop participant
Houston Methodist
Fall 2021

"This class has improved my ability to focus and clearly articulate items in my writing both at work and the writing I do for pleasure."

Inprint writing workshop participant
Houston Methodist
Fall 2021

FEATURING:

CHRISTINE GIBBONS ATTAR

GULCHIN ERGUN

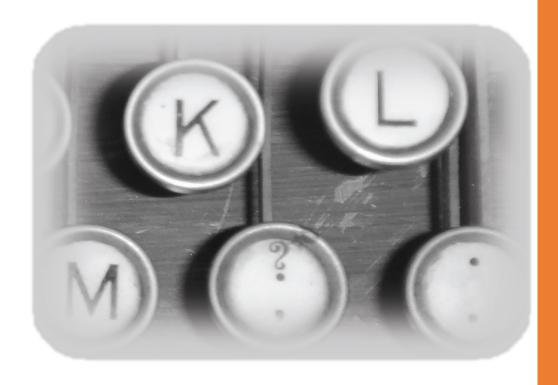
SUSAN M. MILLER

REGINA LUANNE NOVAK

VIVIAN ROSE

BOB SMITH

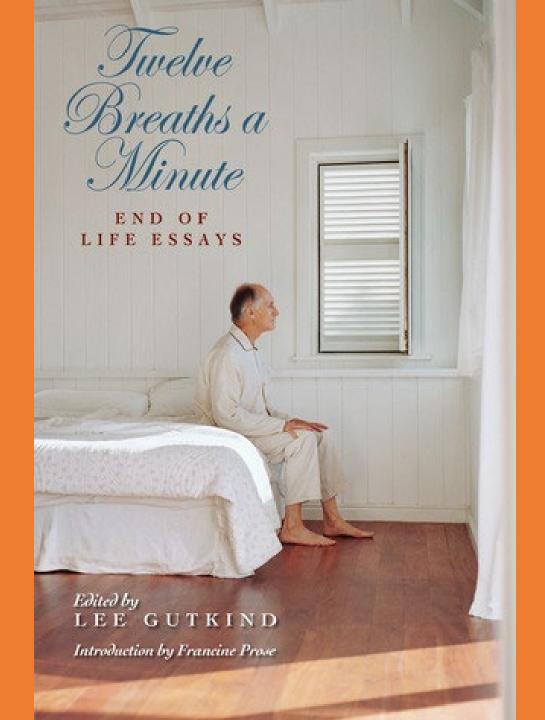
RON TINTNER



CRAIN GARDEN REVIEW

CGR VOLUME 5: FALL 2013/SPRING 2014

VOLUME 5: FALL 2013/SPRING 2014





With You in Time



Orlando Garner, MD Houston, TX

The ICU is busy as always, but you're making your way through the cacophony of the place. The first room you enter is filled with the hum of the ventilator and the Pacman-like bleeping of monitors. Out of the corner of your eye, you spot the nurse click-clacking away on the keyboard of her COW (computer on wheels).

"Has he woken up?" you ask hurriedly.

"Not really. Sedation has been off since last night and not a peep out of him," she replies absentmindedly, eyes glued to her screen.

Click-clack, beep-beep-beep, tsshhh.

You move on with your exam; rounds are around the corner, and you need to be efficient. You look at the pumps and make notes of what's running through them.

Propofol off.

Fentanyl off.

Norepinephrine 2 µg/kg/min.

Empty plastic bags of antibiotics and electrolytes still hang.

Your neck oscillates to the monitor next, and you start to memorize what you see.

Saturation 100%, good waveform.

Normal sinus rhythm, slightly on the higher side.

Dicrotic notch on a-line tracing, borderline MAP (mean arterial pressure).

Breathing 20 per minute.

AFFILIATIONS: From Baylor College of Medicine, Department of Medicine, Division of Pulmonary, Critical Care and Sleep Medicine. FINANCIAL/NONFINANCIAL DISCLOSURES: None declared.

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Temp 37°C.

Now your view darts to the vent, and the scalars dance rhythmically on the screen. A rapid, rushed breath into the lungs followed by a slow, elegant release.

Now you look at the man lying on the bed; he has salt and pepper hair, eyes taped shut, endotracheal tube sitting underneath a bushy moustache, and a central line sutured to the neck with some dry blood where it was inserted.

You feel your brow furrow as you dig your knuckles deep into his chest.

"OPEN YOUR EYES!", you yell into his ear, and then you make that small pause you always make when you switch to Spanish, "¡ABRE LOS OJOS!."

Click-clack, beep-beep-beep, tsshhh, but no humanity.

"Is this bad?" a small, elderly voice asks from the corner of the room. The tiny woman sits on a plastic chair, clutching a pink rosary between her arthritic fingers, thumbing each bead as if life depends on it.

"It's still too early to tell, we might need to get special x-rays of his head. We are concerned that his brain was without oxygen for a long time which might have caused some damage. Usually, we wait 72 hours after we bring them back to a normal temperature before we can know what's going to happen." You answer as you stumble through your words to avoid sounding like another machine and making sure the complex English forming in your head is distilled to plain Spanish. You feel the nurse's eyes fixed on the small of your neck, her attention fully focused on what was going on in the room.

30-minute PEA code.

Pupils fixed and dilated on arrival.

No corneals.

No cough.

No gag.

No urine.

You knew all these things before coming to this man's room; you had all these hard facts to say confidently that his chances are not good. Yet, you coyly avoided telling

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