Andrew Worthey

Registered Nurse

Andrew Worthey
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To:
Professor Hollman
580 West Lincoln Avenue
Charleston, Illinois 61920
September 19, 2021

Dear Professor Hollman,

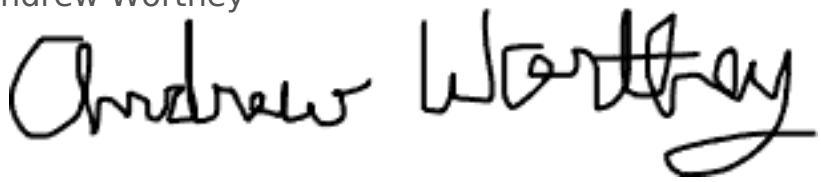
I am pleased to write to you today regarding my application for the 4-Medical registered nurse position advertised on the Sarah Bush Lincoln website. I believe my qualifications make me an ideal candidate for this position, and I am in the process of gaining experience through four clinical experiences this semester. My clinical experience has been on the medical surgical floor at Sarah Bush Lincoln and I believe the skills I have learned over the last 14 months and the bedside manner I possess make me a suitable candidate for the position on 4-Medical.

I am a nursing student about to graduate with a bachelor's degree in December 2021. I have four semesters of clinical experience at Sarah Bush, and I work well with the preceptors who work with me at the hospital. I have maintained a 3.4-grade point average as I work very hard to study for my tests. I also speak up about performing every nursing skill I can accomplish during my clinical experiences to be the best nurse I can be at this moment. I realize that I will constantly be improving, but I can work towards being the best nurse. I am also very involved as a parliamentarian in the student government association as we work towards improving the school through discussion and fundraisers.

I am compassionate, empathetic, patient, open-minded, detail-oriented, an excellent critical thinker, a good listener, accountable, a lifelong and quick learner.

In conclusion, I believe I am a good candidate for this job because of my drive to gain experience and skills in my clinical, my willingness to fail and continue to learn from those mistakes, my empathetic personality, my passion for providing care and creating a healthy community, and my work ethic within the school.

Sincerely,
Andrew Worthey



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Objective

Passionate and caring certified nursing assistant seeking a position at Carle Health. Utilizing excellent communication and active listening skills, adaptability, and growth-mindedness to ensure the patient's health and safety is of the highest priority.

Education

Lakeview College of Nursing - Charleston, Illinois
Bachelor of Science – Nursing – 08/2020-Now -- GPA/Grade: 3.4
Southern Illinois University - Carbondale - Carbondale, Illinois
Bachelor of Science - Exercise Science – 08/2014-05/2018 -- GPA/Grade: 3.8

Certifications

Certified Nurse Assistant – Illinois issued on 02/19/2021
Basic Life Support Certification issued on 02/28/2021

Work Experience

Lakeview College of Nursing, Clinical Nursing Student -- 08/2020-Now

- Observe and record patient behavior
- Perform physical examinations
- Collect patient health history
- Administer medication, change wound dressings, and care for other treatment options under the supervision of a registered nurse

Southern Illinois University Recreation Center, Personal Trainer – 09/2014-05/2018

- Assessed the client’s goals, assessed their overall health, and created programs based on those individual needs
- Maintained a professional attitude by showing up to my client’s sessions early, and focusing on the clients throughout the whole session
- Continued to educate myself by reading books, reading blog posts, listening to podcasts, and talking to successful trainers
- Used empathy to help understand the struggles behind why the client had not met their goals before hiring a personal trainer
- Ensured a clean and safe facility by practicing safe protocols and procedures

References

Eleni Key - Professor/Clinical Instructor

217-709-0788
Lakeview College of Nursing
ekey@lakeviewcol.edu

Rita Wallace - Professor
217-822-8400
Lakeview College of Nursing
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Ashley Hurt - Professor
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Lakeview College of Nursing
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Behavioral Questions

1. **Tell me about a time a patient or their family was dissatisfied with the care they were receiving. How did you manage it?**

There was a patient who had multiple surgeries and so she was in a lot of pain. She tried multiple pain medications, but morphine seemed to be the only medication that was recently working. While the patient continued to receive morphine, her blood pressure and respirations had decreased, while she also began to look very sleepy all the time. Since these vital signs were occurring, the nurse would not give the patient more morphine. The patient became dissatisfied with the nurse care and the hospital as she was not receiving the morphine. The patient began to threaten the hospital, the nurse, and to leave the hospital. As I arrived to the clinical site, the patient was assigned to my nurse and I. While the patient was distressed and angry, I asked her if I could sit down and talk to her. I acknowledged how strongly she felt about the situation, how upset she was, and asked her if I could improve the situation. She continued to tell me how the hospital was not advocating for her. At first, I actively listened to her and I explained to her the possible consequences if she were to continue receiving further morphine. After the explanation, I printed out the adverse effects of morphine and read through the possible effects if she were to continue receiving the morphine based on her condition. I asked if we could try alternative pain management techniques, such as deep breathing, massage, and acetaminophen. The patient agreed to these alternative modalities and her mood began to change, her vital signs improved, and she did not need further morphine during my clinical.

2. **Tell me about a time you went above and beyond for a patient or their family.**

   A time I went above and beyond for a patient was when I was assigned a patient with syncope during my clinical. She had many labs and diagnostics performed, but all of the labs were normal besides a slightly elevated glucose. Her computed tomography scan showed “possible multiple sclerosis”, so the doctor prescribed her multiple medications for this disease. The nurse began to give the patient the prescriptions, but nobody had explained to her the diagnosis. As this disease may be traumatic to hear, I printed her off important information from the multiple sclerosis website, a community therapy group for the condition, and a therapist for the condition if she were to need these resources. I printed off how to take the medications, the possible side effects, and how the medications can prevent further exacerbations, along with lifestyle changes she may involve in her routine to prevent symptoms of the disorder. She received the news harshly and began to produce tears, so I sat with her patiently and told her I was not going anywhere. I helped her sign up for the group therapy and highlighted important information from the multiple sclerosis website. The patient seemed more relaxed and her mood began to feel relieved after signing up for the group therapy class.

3. **You and your preceptor are going to insert an indwelling urinary catheter on a client with urinary retention. You observe your preceptor breaking sterile technique when they are preparing to insert the catheter. What do you do?**

   I would tell the preceptor that she is breaking sterile field before she inserts the catheter, why I think she is breaking the sterile field, and why I think we should get a new urinary

catheter kit. The preceptor may have broken sterile technique by touching the sterile field with bare, non-sterile hands or by touching the sterile field with a stethoscope or clothes. The catheter may have been contaminated if the labia closed over the catheter if the patient is a female or the catheter tip touched the testicles before being inserted into the urethra if the patient were a male. The sterile technique may also be reached if the sterile gloved hand is used to clean the genitalia without tongs and then that same hand is used to insert the catheter or the nurse's glove is ripped and he/she does not obtain new gloves.

With two nurses observing an indwelling urinary catheter procedure, this has a greater chance of preventing catheter-associated urinary tract infections as the nurses are kept accountable and there are more eyes to watch for breaking the sterile technique. With two nurses, there are more hands to prevent breaking the sterile field as one nurse can be the clean nurse while the other nurse keeps sterility.