Capturing the World With ‘Epic’ Photography

By Candace Pearson

Justin Lee, BSN, RN, will do almost anything to get a great photograph—like dangling his feet over the edge of a steep cliff with a vast canyon beneath him, or trying his best to stay dry beside a crashing waterfall.

“The risk is worth it if you get the shot,” says Lee, an operating room nurse at Children’s Hospital Los Angeles since 2015.

Lee took up photography a few years ago when he and his best friend went exploring in Joshua Tree’s stunning desert landscape. Immediately hooked on capturing what he saw, Lee decided to purchase his first high-end camera. He started following and studying the work of professional adventure photographers on Instagram.

Since then, Lee has scheduled at least one photographic trip every month to such iconic locations as the Grand Canyon, Utah’s Zion National Park, Yosemite National Park and other California sites like Big Sur, the Sierras and Mount Shasta. He’s even taken his camera overseas to photograph fjords in Norway and birch forests and castles in Japan.

“The more adventures I’ve gone on, the more I appreciate the world around us—the epic landscapes we don’t get to see on a daily basis,” says Lee.

Lee, who calls himself “a full-time adventure seeker” on his Instagram feed (@justinfocus_), feels both “exhilarated and humbled” by the immense scenes he likes to photograph. This April, he fulfilled a childhood dream by going to New Zealand. “The land of Tolkien,” he says, “and a big check off my bucket list.” The souvenirs he brought back: panoramic photos of mountain peaks, gorges and lakes.

With more travel ahead, Lee says photography holds another important benefit for him. “As nurses, we are very aware of the need to take care of ourselves. Photography is definitely my self-care; being around such grandeur is a huge de-stressor.”

Nurses Help Make Walk and Play L.A. a ‘Feel-Good Day’

By Candace Pearson

Left to right: Float Team nurses Nida Kan-Ari, BSN, RN, PHN, CPN, and Kelsey Wong, MSN, RN, CPN, at the 2018 Walk and Play L.A.

For Mallory Fossa, MSN, CPN, Comfort and Palliative Care Division, participating in the annual Walk and Play L.A. event hosted by Children’s Hospital Los Angeles yields multiple benefits.

“Seeing how excited and happy people are refills your cup,” says Fossa, who raised money for Palliative Care’s Quality of Life Fund at the 2017 and 2018 events and plans to return this year. “You can support CHLA and step outside how you typically interact with patients and families.”

CHLA will host the third annual Walk and Play L.A. on Saturday, June 22, at the Los Angeles Memorial Coliseum, from 8 to 11:30 a.m. The event includes a 3-kilometer (1.86-mile) walk, plus a Family Festival with live music, games, interactive booths from CHLA programs and sports clinics for ages 4 - 12 hosted by pro athletes.

Participants can sign up as an individual, a team or a virtual walker. In 2018, about 1,500 employees, patients and their families, and community members joined the fun. Phyllis D’Ambra, MPA, RN, Orthopaedics, virtual walked last year on behalf of CHLA’s Institute for Nursing and Interprofessional Research (INIR). “I’m passionate about this cause,” says D’Ambra, one of 2018’s top individual fundraisers.

INIR Research Nurse Scientist Jessica Ward, PhD, MPH, CPNP, RN, who co-captained INIR’s 2018 team, Journey to Research, calls the free event “very high energy, with a lot of camaraderie.”

When Walk and Play L.A. debuted in 2017 at Griffith Park, four Float Team members were there to walk for the Paws for A Cause team, which benefits the Amerman Family Foundation Dog Therapy Program: Theresa Burgess, BS, RN, CPN; Kim Hodge, RN, CPN; Nida Kan-Ari, BSN, RN, PHN, CPN; and Kelsey Wong, MSN, RN, CPN.

“The dog therapy program goes all over the hospital, as do we, so it felt like we had a commonality,” says Kan-Ari. And, adds Wong, “It’s a real feel-good day.”

To register, visit WalkandPlayLA.org.
The rainy weather is behind us, the days are long and the sun is out. That can only mean one thing—it's time for (name of your favorite team) baseball!

America’s pastime is perking up everywhere, including at Children’s Hospital Los Angeles, where there’s no shortage of baseball fans or recreational players. While most nurses and staff members are happy to cheer on their favorite teams from the sidelines, a select few want to take a more active role on the field and play ball—against each other.

On June 22, CHLA will hold its first hospital-wide softball tournament comprising eight teams representing Hematology-Oncology, 5 East, Float Team, 6 West, the Steven & Alexandra Cohen Foundation Newborn and Infant Critical Care Unit (NICCU), Endocrinology, the Maurice Marciano Family Foundation Emergency Department and Trauma Center (ED) and the Margie and Robert E. Petersen Foundation Rehabilitation Center. Nurses, physicians, respiratory therapists and others have signed up to engage in a friendly competition and earn bragging rights—and a trophy—for the top team.

The idea for the co-ed tournament came from ED technicians Fred Hopkins and Josh Martinez, who raised it with their department’s Recruitment and Retention (R&R) Chair, Sheah King, RN Lead, BSN, CPEN.

For the past several years, the ED has had softball games with the PICU [Pediatric Intensive Care Unit]. Last year, we played the CTICU [Cardiothoracic Intensive Care Unit] and everyone said how much fun they had,“ says King, ED’s co-team mom. “So, when Fred and Josh came to me with the idea of a tournament, I shared it with the house-wide R&R committee. There was a lot of interest from all areas of the hospital, and Fred and Josh ran with it.”

Hopkins and Martinez developed rules and guidelines: 15 players maximum per team, slow pitch, seven pitches maximum per at bat, no walks, 40-minute games or seven innings, no leading off base or stealing, team names optional, tournament style—winner moves on, etc. They secured fields, collected fees, handed out fliers on every floor to encourage team participation and more.

“There was more interest than we expected,” says Hopkins, noting four teams had to be turned away due to lack of available fields.

Martinez adds, “We saw this as a good way to have fun, work off stress, and get to know co-workers and other units. When I go to the floors, I see the other teams are having fun with it.”

Martha Salmon, BSN, RN, CPN, is playing for 6 West, whose team name is “We’ve Got the Runs”—pun intended since gastrointestinal ailments are among the unit’s specialties. “We have matching uniforms in light blue with our team name in brown and matching socks with poop emojis. We also have a bat that says ‘6 West’ on a roll of toilet paper,” she says with a laugh.

“We’re really excited to see a bunch of people outside of work having fun and doing something activity-wise,” says Salmon, who shares team-mom duties with King. “As a hospital, it shows we have way more in common than we think. We really are one big family at CHLA and it’s great to bring everyone together.”

Clara McNulty, RN, a softball player since age 10, was excited to learn about the tournament and recruited players for the NICCU team. “I didn’t care if they played before,” she says. “I thought it would be a fun day and something cool to do outside of work. I got one of my closest friends [Bianca Gutierrez, RN] to join the team, even though she has never played before.”

As team captain, McNulty has organized throwing and batting cage practices, ordered matching T-shirts and allayed fears about athletic ability. “Some people are nervous because they never played before, but I’m getting them excited about the tournament.”

Three years ago, Donna Quiroz, BSN, CPON, Hematology-Oncology and Bone Marrow Transplant, started playing on a co-ed softball team with other coworkers from the unit. She and three teammates signed up for the CHLA softball tournament as part of the “Homerun Hem-Oncers” team, which has a mix of novices and experienced players.

“I’m not sure what to expect, but I think it’ll be a ton of fun with different units playing against each other,” says Quiroz, who plays right field and catcher. “This will be my first softball tournament and I’m excited to see how the day goes.”
Best life advice: Always be ready to be someone’s friend.

Guilty pleasure: Reading fanfiction and eating Hot Cheetos.

Tell us something that would surprise your coworkers:
When I was in the sixth grade, I sang the national anthem at Dodger Stadium in front of 35,000 people. Thankfully I wasn’t alone, as the other graduating members of the school choir were with me.

Favorite book: My bookshelves are full-to-overflowing, but if I had to pick one, it’d be “Daddy-Long-Legs.”

Favorite movie: The BBC version of “Pride and Prejudice.”

Favorite day-off spot: Curled up in my bed or on my couch with a book to read.

Who influenced you to become a nurse?
My mom and four of my aunts are nurses. Growing up I played “nurse” with my sisters and used my mom’s student-nurse name pin and a homemade nursing cap.

What makes working at CHLA special?
While I was growing up, my sister had surgery here and my mom and one of my aunts attended a nursing conference here. I always knew that Children’s Hospital was a great place. 5 West is like an extended part of my family.

Favorite part of your job:
Taking care of the kiddos.

If you weren’t a nurse, what would you be?
Probably doing something with computers like my dad and grandpa.

Your personal motto:
Be kind, tenderhearted and forgiving.

Favorite comfort food:
My mom’s homemade bread.

What do you love to do when not working?
Read, travel to visit friends and family around the globe, photography and make birthday and anniversary cards.

What sets your heart on fire?
Listening to my almost 3-year-old nephew sing Sunday school songs and quote Bible verses from memory.

What would you tell your high school self?
Don’t be so concerned with what others think of you. Most of them don’t matter in the long run and those that do love you for who you are already.
Guiding Patients and Staff Post-Anesthesia  

By Vicki Cho Estrada

When Deanna Wofford, BSN, RN, CAPA, went through the Post Anesthesia Care Unit (PACU) rotation in nursing school, she was intrigued by the patient recovery process.

“I was fascinated with all things having to do with the recovery of patients who received anesthesia for surgeries or other procedures,” she says. “No one reacted the same to anesthesia. I enjoyed the critical care setting and the wide variety of patients.”

After receiving her nursing degree, Wofford worked for two years in the PACU at a Texas hospital before joining the PACU at CHLA in 2016. Her responsibilities included monitoring and recording patients’ vital signs, addressing medical emergencies and helping patients stay calm as they come out of anesthesia, which can often leave them feeling confused or disoriented.

“We are their first stop after they get out of the OR. Either they go home or they are admitted. We want to make sure they wake up safely from anesthesia, are comfortable after the procedure and aren’t having any adverse effects,” she adds.

While perianesthesia nurses don’t spend a lot of time with patients—ranging anywhere from 30 minutes to six hours—they do form bonds, according to Wofford. “Our patients have a special appreciation for us because they’re in a vulnerable state, and we help them deal with anxieties that are heightened. We’re able to bond with them, especially if they come back for multiple surgeries or procedures.”

Last year, she was named Clinical Educator for Surgical Admitting and the PACU. Her duties include developing education goals and objectives; assisting with education, orientation and development of new staff; conducting practice drills on the unit; and holding an annual education symposium for 65 nurses across both units.

With continuing education a large component of her job, Wofford decided to pursue accreditation as a Certified Ambulatory Perianesthesia (CAPA) nurse from the American Board of Perianesthesia Nursing Certification.

“I wanted to prove to myself and the staff that I know what I’m doing … that I’m knowledgeable in the field of perianesthesia and capable of guiding others through their careers,” says Wofford. In May 2018, she became the first CHLA nurse to receive CAPA certification.

“I became a nurse to help patients,” Wofford says. “I’m still able to help patients by making sure their nurses have been trained, proven competent and can give their full attention to patients.”
Medical professionals often go into pediatric oncology with the feeling that they want to make a difference. For Kasey Rangan, MSN, CPNP, Neuro-Oncology, “it turned into a kind of calling.”

Initially, Rangan worked in adult nursing. When she moved to Los Angeles in 1996 because her husband was in residency at Children’s Hospital Los Angeles, he suggested she look at CHLA. She found her passion as a bedside nurse on 4 East.

A few years later, she was reading a journal article about pediatric brain tumor survivors, and something clicked. “These children have a special place in my heart,” she explains, “because their challenges are so great after their treatment.”

The Neuro-Oncology Program in the Children’s Center for Cancer and Blood Diseases—one of the largest pediatric oncology programs in the country—treats children with brain tumors and spinal cord tumors, which are the second-most common types of pediatric tumors.

After earning her Master of Science in nursing and pediatric nurse practitioner (PNP) degree, she became PNP for pediatric brain tumor patients in CHLA’s LIFE (Long-term Information, Follow-up and Evaluation) Cancer Survivorship and Transition Service. She spent 12 years there, honing her skills in helping patients enjoy a better quality of life post-cancer treatment.

Four years ago, she transitioned back to working with children who are still undergoing active treatment. She collaborates with physicians, other oncology nurses, psychologists, social workers and school specialists. “We identify what resources each family requires and who on the team can help,” she says.

Working with families whose children have brain cancer is often “getting to know someone in their darkest hours,” says Rangan. The skill comes in “knowing where you need to be with each family—in front of them, behind or by their side.”

Rangan compares excellence in nursing to the butterfly effect—the idea that even a slight change can result in a significantly different outcome. “No matter how small the action you take, if you’re trying to do your best for your families,” she says, “you never know what impact that will have.”

Bedside’s Best

Small Actions Add Up to Big Outcomes

By Candace Pearson