

## NOTES

In her heartwarming short story based on true accounts, author Kate Gieschen introduces us to a dedicated nurse who has the arduous task of caring for her patients while working the night shift during the wee hours at an urban hospital. This first-person confessional should be performed by a female and be entered in either Prose Interpretation or Dramatic Interpretation. Play the character with 100% honesty. Remember, a well-placed pause can say volumes about the difficulties, and, at times, frustrations felt by a conscientious nurse who desperately wants to save as many lives as possible, while easing the pain of others. If used in Prose Interpretation, the drama mask icons simply serve as suggestions for when to turn the pages of the manuscript.

So, you want to be a night nurse in the Neonatal Intensive-Care Unit, huh? That's good! There's nothing like it! But it takes more out of you than you'd think. It's an immense responsibility to dedicate your life to a place that demands so much of you; after all, this place never closes. I remember the first time I decided that I was never leaving. Now, it's different for everyone. For some, it's the first breath a baby takes or the smile on a mother's face after delivery, but for me it wasn't a joyous moment. Some people can't handle it—the job, and the hours, but I love it. There simply isn't anything else you can compare it to.



7 p.m. Walking into the unit, the first thing you do is grab your chart. You're not even a second inside, and there's already a list of things to do.

Grace Zoe Schaeffer, born at twenty six weeks, delivered just after eleven last night. She was a preemie, of course. One pound, five ounces. She's on a ventilator, cardiac monitor, pulse oximeter, temp probe, and an umbilical venous catheter. She's like a little Darth Vader. I'm pretty sure that for all the wisdom *What To Expect When You're Expecting* has to offer, they never put a section in the book about the NICU, and why would they? Babies are supposed to come home.

I introduced myself to her parents and wrote my name under the word 'nurse' on the whiteboard. I then began charting her vitals as they appeared on the

screen, and they watched. Their white knuckles holding silent prayers; their cordial hellos holding a private pleading. These brand new parents can't figure out how they got here. Nobody can.



8 p.m. Don't get too attached. A good nurse doesn't get too attached. Be objective, and keep your distance. I assure you that whoever wrote that in my nursing school textbook was not looking at a newborn.

Grace stirred in her sleep a little, and I got a glimpse of these huge blue eyes. It was hard not to touch her, but I knew better than to jostle her tiny body. I reminded myself: If you get emotionally invested or get distracted, you make a mistake.



9 p.m. I was worried. I called the neonatologist over. It wasn't good. It was her heart. This is where your mind begins running, adrenaline and emotion are all mixed in and you have to focus. It's sickening to know that even with the most skilled doctors, the newest equipment, and the best intentions, sometimes there's literally nothing you can do. This is ridiculous! So, I've always been a little competitive—I know, it's not the time or the place, but I'd never lost a patient. I'd seen other nurses lose theirs... Trust me. It's not something you get used to. It's not something I want to get used to.



11 p.m. Grace's mother and father were taking a break. I didn't envy the doctor having to tell them that this was a waiting game. It's confusing, frustrating, even unsettling, to see someone lying there looking so perfect. Tiny—but perfect. And then knowing that inside, things aren't perfect.



Midnight. Now, only Grace's dad was here, while her mom rested. I switched out her IV bag. I counted each of her toes, ten of them. I thought there was a point where you get used to the miracles you spend each shift with. Thank God there isn't. I watched this father looking at his little girl, and I was in awe