

Mercedes Gonzales

Unsung Heroes of the ER

[Mercedes]: Whether it was the multiple outbreaks of yellow fever in the 1800s or the loss of nearly 100 physicians to the aid of the attack on Pearl Harbor in the 1900s, Corpus Christi has had its fair share of conflicts in the medical world. Around 1961, it was no question that more medical facilities were needed. This realization created hospitals such as Parkview General Hospital and many others, just in time for Hurricane Carla. The field was once spread out too thin but now is nearing a beautiful network of jobs that rely heavily on one another. Each is as important as the next. Before you get evaluated by a doctor, you're getting triaged by a nurse, and vitals done by a Patient Care Technician. If it is more serious, you probably get to work with Radiology, Lab, and other departments. Because housekeeping deep cleans the rooms after each use, you probably don't have to think about that previous patient. Although, there are a world of other possibilities and interesting stories that could have happened before you got there. My name is Mercedes Gonzales, and I am one of the many security guards for HCA's (Hospital Corporation of America) facilities. Because of this, I am able to see the hospital as a world all its own rather than a rigid place of business. I want to take you into that world, starting off with a brief description of a few jobs and scenarios here at Doctors Regional on South Alameda Street in Corpus Christi, Texas.

[Harry]: I always think back of, like, um, the time when my grandma was in the hospital. She used to spend a lot of time because she had a heart condition.¹

[Harry]: I like the idea of helping other people that might be in that situation, that same situation. I could be helping somebody else's grandma or, uh, helping a patient who maybe having the same problems that my grandma was having.

[Mercedes]: That is Harry Falcon. His job as an Environmental Service Technician, otherwise known as housekeeping, has him working all across the hospital, having the very rare opportunity to have access to multiple areas and see their workload.

[Harry]: I go around the hospital, checking all the restrooms, checking all the breakrooms, making sure it looks nice for the nurses and the patients that are here overnight. So, the hospital is—it closes at 9 [PM] and opens at 5 [AM], and I'm here from 11 [PM] to 7 in the morning.

Harry]: We have certain types of beds, specialty beds. So, if somebody needs a specialty bed, they call me, and I go give it to them. And, uh, if there's, uh, another Checkout or somebody leaves the hospital, of course I go do that and make sure it gets ready for the next patient.

[Harry]: Sometimes whe—when, um, I'm walking down the halls and I see people crying. Like, it reminds me of when I lost my grandma and, uh—the—I'm, like, crying in the waiting room with my family and it's just sad to see that—somebody else going through that.

¹ Harry Falcon, interviewed by Mercedes Gonzales, Texas, September 26, 2022.

[Mercedes]: Many of our Radiology personnel work in our Catheterization laboratory, which focuses on heart scans. He was only a few classes away from finishing his Computer Science degree but has since focused on Radiology, now knowing it was an option that only requires an associate degree. His experience has made me want to raise awareness of these professions not only because they are vital and I want people to treat the personnel kindly, but also because not many people are aware of how attainable these jobs are, and how abundant they are. The best way to do that is to talk about Code Teams.

[Mercedes]: Before rooms get to housekeeping, unless it is a normal check out, the hospital most likely had to deal with an event like a Code Blue, Code Stemi, or Rapid Response. There are many other codes, but these are the major ones. These codes usually mean that someone's life is at risk. For now, we can just focus on a Code Blue. A Code Blue means someone's heart has already stopped. One way or the other, the patient is unresponsive. A loud siren plays, and everyone has to talk over the noise until the code is cleared. Imagine trying to hear lifesaving instructions from a doctor while this is going on (Code Blue alarm rings). Nurses are not the only ones who respond to these codes. Pharmacy, Respiratory, Security, Radiology, and Laboratory personnel can all be present, and usually have to be. Security has to bring over a replacement crash cart because the one on the patient's floor should have been opened and used at the start of the code. A crash cart is usually a container that holds medications, like Epinephrine and Sodium Bicarbonate, that will hopefully get the patient through the code successfully. The team takes turns giving CPR and injecting the appropriate medications. Security and Radiology usually wait outside the room until it's time to call the time of death or clear the area. Usually, Radiology will go in after and access the bones possibly damaged due to the CPR, and other methods done. A Code Stemi is usually pretty similar in terms of personnel. The Code is called when the patient exhibits heart attack symptoms. However, it sometimes ends with the patient going to the catheterization lab. Further cardiac tests and procedures will be done there, if needed. Everyone else is usually dismissed from there.

[Harry]: I see the room and all the machines they use. They're in a rush, trying to save someone's life. So, they just throw packages on the floor, and I pick them up and I look at them and it's just a bunch of medicines. I don't even know what they—what they're for. It's like (laughs) I can't even read the words on the labels, but I see all the vials and stuff they use and I'm just—it makes me curious, and I want to help.

[Harry]: I'm pretty sure they broke his ribs trying to save him but—but they had to try and get his heart beating again and so they had to do what they had to do

[Mercedes]: The hospital has non-medical codes too, like a Code Bert or Code Green.

[Harry]: But there's also been times in the ER where a psych patient from the—that the officers [Corpus Christi Police Department] drop off and, sometimes, they're a little unruly and we have to work around them, and it gets a little uncomfortable when you turn your back to them. You don't want them to get too close sometimes because you don't know what they're going to do and just that uncanny feeling while working isn't necessarily something you get from other jobs.

[Mercedes]: A Code Bert usually includes a visitor or patient getting rowdy, a Code Green is when they get physical. Because they're probably less known, I think it would be beneficial to state what Sitters and Patient Care Technicians do in these situations. Sitters and Patient Care Technicians are usually the first to witness these codes take place. Among many other things, they watch Behavioral Health, or Psychiatric, patients. A Behavioral Health patient is a type of patient that is usually at the hospital because they said or did something that made the police department think they were a danger to themselves or others. These patients usually have to be put under a 48 to 72-hour hold. Code Berts are very common over the weekend because the timer on these holds do not start until the weekday, and the police department likes for the Sitters and Patient Care Technicians to be the messengers of that. Sitters and Patient Care Technicians are the ones that have to find a safe way to notify Security. These positions can be fun, scary, and even gross. As the overnight guard for the hospital, I can say these positions are very trying but they're also rewarding. They are with certain patients their whole shift and the patient can change from day to day. Constantly, they are making connections and hearing fascinating stories. I get to hear a lot of these stories as I make my rounds around the hospital. This leads me to the next position I would like to highlight, my position.

[Mercedes]: Hardly anyone ever thinks "let me be a security guard". They especially don't think it when they're my height, 5'1. However, I can say wholeheartedly that this is the most fun and interesting job I've had, and I've had a lot. Ever since I was young, I strived to be a doctor. I wanted to thank my mom for all the work she's done getting us out of a rough place. Of course, she's only been able to do so much but we are well enough now for other family members to be able to look towards us when they need help. Because of my job, I even have my own house, mortgage, and all. On the average day, I clock in around 8PM and leave at 8AM. Yes, it is a 12-hour shift but when you pair that with some online classes, or study material, the day will go by fast. I am not saying there is not any work to be done but, on most days, there is a lot of free time. While I am working, I walk around the hospital every hour for 20 to 30 minutes. In between or after my walks I could get a call to search a Behavioral Health patient or to unlock a door for someone. I also have cameras around the hospital to ensure I have full visibility of the hospital when I am not walking around. Around 9 PM I have to lock the front doors. I do occasionally get some visitors who are very mad about having to walk in from the ER, which is in the back. It is another story when they come in from the ER and all the way to the front just to yell at me, but their main concern is their family, usually. So, it has not been anything I couldn't deal with for a few moments.

[Mercedes]: There are so many more jobs that I, unlike Harry, have not been able to witness enough to try and give a description. Hopefully, this intrigues the right people enough to look into hospital work. Even if it's not directly medical, we make a difference. Sitters, Patient Care Technicians, Security, and Housekeeping all have the chance to have direct contact with patients and their visitors more than the doctors would². Whether it is describing policy or

² See Jors et al. (2016), for more information on cleaners impact on patients

trying to reassure someone, our tones matter. Our position matters, and our activeness matters. If Housekeeping did their job only halfway, a lot more people would struggle to recover because of the remaining germs³. If Sitters and Patient Care Technicians did not care about who they were watching, the patient could get injured or injure someone. And of course, you want to be able to trust Security with your sick family member or friend's items. Not for so much as stealing, but you want Security to care for them like it's their own property. HCA is not the only hospital company out there and it is not the only one I want people to look into. It is just the one I have experience with. The beauty in the growth of Corpus Christi's medical world is that there are several clinics and hospitals to choose from now, and inside each facility is a network of occupations. This was a brief explanation of ours, and we hope you can see a bit into our nice little world on your next visit.

³ See Hegge (2013), for more information on cleaners direct impact on health

Bibliography

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