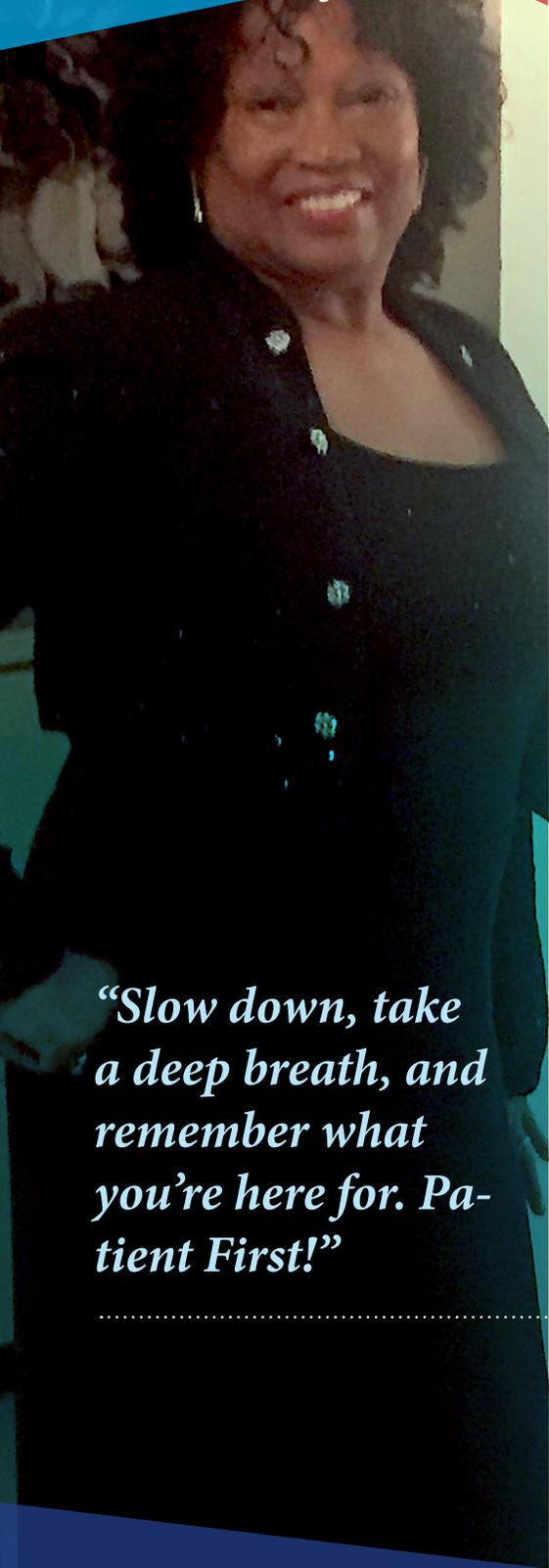


## Unmasked: Profiles in Humanity & Resiliency



*“Slow down, take a deep breath, and remember what you’re here for. Patient First!”*

## Marilyn Johnson, Th.D., MEd. BSN, RN Houston, TX

By Kiara C. Jones

After 43 years in the operating room, Marilyn Johnson can count the number of patient deaths she’s experienced on one hand. When she began as an LVN in Texarkana, Texas, in 1973, she was the only Black nurse in the hospital for three years. Trained by a seasoned white nurse who taught her how to balance the needs of her surgeons and the needs of her patients, Marilyn fell in love with clinical nursing. She has stayed on the floor with her patients even after earning her master’s degree and Doctorate in Theology. At the staff level, Marilyn feels her presence makes a difference. “Without even knowing my education or experience, my African American patients see me, someone who looks like them, talks like them, and there is a trust.”

COVID-19 is not the first public health crisis Marilyn has seen, but it’s by far the worst. “Psychologically, COVID is grueling. It’s so questionable. It’s lasting so long and it’s affecting everyone.” Marilyn says the necessary control of the operating room provides her team a protective barrier from the chaos of COVID-19. The operating room is a fully controlled environment. From the moment a patient enters the OR, the surgeon, doctors, and nurses are in complete control. They continuously manage and monitor the patients’ vital signs and physical state, holding patients’ lives in their hands. Most of Marilyn’s patients’ procedures are planned surgeries, but even in a trauma situation, controlling the vitals of the patient is key to the OR process. “The first thing we do in surgical is get control of the patient and assess if they are stable enough to survive the surgery. If a patient presents any medical issues, they become ineligible for surgery.”

The outbreak of coronavirus across Texas stopped Marilyn’s patients from having elective surgeries, such as knee or hip replacements. When the virus saturated Texas in July, Governor Greg Abbott banned any nonessential procedures in hopes to free resources to combat the virus. As an elective surgery center, Memorial Hermann, where Marilyn is staffed, was forced to close for two months. Marilyn relished the break, taking some much-needed time to recharge. When the ban was lifted, Marilyn was happy to get back to her patients. Things were much slower. The PPE wasn’t a huge issue because nurses in the operating room are used to heavy protection, but the patients



were uneasy. “Our patients were expressing how nervous they really were about COVID, and they were also stressed about not having their loved ones right there with them in the facility. Patients were restricted from having family members escorting them to their procedure and had to be dropped off at the hospital entrance.” She discovered her patients were failing to disclose symptoms or exposure to the coronavirus so that they would remain eligible for elective surgery. “It became investigative nursing.”

A lot of people were losing their jobs in Houston. Patients were rushing to surgery before their insurance expired. Extra probing kept her patients safe. “I don’t see that many deaths in the operating room. You’re either well enough to have surgery or you’re not. I have to remind my patients to answer the pre-op questions honestly because the answers could save their lives.” Marilyn listens to her patients’ stories as she does her head-to-toe assessment. She stresses that nurse-patient rapport is key to providing patients ethical and appropriate care.

Marilyn has had an evolutionary career in nursing, even serving as an Officer in the Army Medical Corps for 28 years. She opted not to retire last year to help train new nurses entering the field. Baby boomer nurses are retiring, and many hospitals are hiring less clinically experienced nurses straight out of college due to COVID. “I’m seeing nurses in the OR who had to take their labs and exams virtually and have never put in a Foley catheter.” She’s staying to help teach them practical skills and bedside care. “I want to nurture my younger nurses the way I was nurtured. I tell them to slow down, take a deep breath, remember what you’re here for. PATIENT FIRST”

Marilyn stresses the importance of stepping away from the hospital and breaking free from her daily routine. She recently planned herself a “staycation.” It was her 66th birthday, so she took three days off. “I was happy to be home and just breathe and relax, but my husband Cedric had other plans.” He made her a big seafood boil with lobster tails, shrimp, potatoes, and corn. “He had it all planned out; all I had to do was sit back and enjoy.” Marilyn notices many of the nurses she works with feeling overwhelmed and suggests reaching out to people closest to you. “Ask for help! Take some time for you.” It’s a tough request when nurses are so conditioned to take care of everyone else, but it’s imperative to speak your needs out loud during these tough times.



The pandemic made Marilyn recommit to staying on to encourage new nurses and patients. “A lot of people need help and training, especially the underserved communities.” She’s particularly concerned about the homeless community. “I’m not hearing the media talking about the homeless. Are they getting tested? Are they getting the vaccine? Do they have masks? Is that population being tended to?” Marilyn is taking her concerns to the streets. In her free time, she volunteers at a COVID-19 vaccination station and is helping construct mobile units to go out to Houston neighborhoods. She encourages people to get vaccinated and has already taken both doses of the vaccine herself. “I did have some symptoms after the shots - headaches, body aches - but it was nothing compared to the freedom of feeling safe.” With every available precaution in place, Marilyn won’t be leaving nursing anytime soon. “I love being a nurse in the operating room, and I love taking care of my people even more.”