



# WELS Nursing Today

## Opportunities to Grow in Faith

By Sue Bolha RN, PN

One of the primary purposes of our **WELS Parish Nurse** organization is to provide our nurses with opportunities to grow in faith as we support others with the hope we have in Christ Jesus. Most nurses can handle taking a blood pressure or doing some health education or making a referral to a community agency. We can assess a situation, establish a plan of care, and make recommendations without any trouble.

But the thought of providing spiritual support to the people we meet can make even the brightest and best among us a little weak in the knees. When I attended nursing school in the mid-seventies spiritual care consisted of notifying the patient's pastor of their member's admission or contacting the hospital chaplain to administer the Sacrament of the Sick to a terminally ill person of the Catholic faith. These things are appropriate for a nurse to do, but if that is all we do, we have missed opportunities to comfort those as we ourselves have been comforted.

Who of us can't relate story after story of a patient or client who was looking for meaning in their suffering and asked questions in the middle of the night when unable to sleep or at the kitchen table during a home visit or at the bedside in the local nursing home? Can we respond to such questions? Gently—yes!

Respectfully—yes. We can tell them about the hope that we ourselves have in Christ Jesus. For those of us functioning as a WELS Parish Nurse our opportunities become even more numerous!

This fall the WELS Parish Nurse Council is planning a gathering with the theme of "WELS nurses and congregations supporting our Military and Families." It takes place on October 20 at Christ Lutheran Church in Pewaukee, Wis. Not only will we learn about post traumatic stress disorder and traumatic brain injury from two of our WELS military nurses (see the article on page 2), but also James Behringer will speak to us about how WELS Military Services and nurses might provide comfort to the people we meet from God's Word and to grow in faith!

Go to [www.welsnurses.net](http://www.welsnurses.net) for more information and to register. Any and all WELS nurses are welcome to join us! We will provide the morning session on the Web site for those who cannot attend.

More "*opportunities to grow in faith*" can be found under **News & Notes** on the back page.

## Clothe Yourselves with Compassion

By Carlo Piraino RN, BSN, MSN

On October 7, 2001, America went to war in Afghanistan with 10,000 troops as a response to the attacks on September 11, 2001. In March 2003, 148,000 military men and women went to war in Iraq. This attack was to further fight the war on terror. Since the beginning of these two wars, 6,300 military deaths have been reported—many in the notorious Helmand and Kandahar regions of Afghanistan and in and around Baghdad, Iraq. We mourn the brave men and women who paid the ultimate sacrifice. We thank our Lord and their families for their service. We pray that God would protect and bless the families left behind.

Many survived, but 42,000 suffered serious injuries and some of the most horrific war injuries ever. 1,300 lost limbs—dozens lost three and four limbs. Many suffered injuries to their genitals and lost one or both testicles. The “signature” disabilities of these wars have been the lingering effects of post-traumatic stress disorder and traumatic brain injuries. Thousands of veterans have returned home without a diagnosis of one or both of these disabling illnesses.

We honor the 42,000 who suffered injuries and came home. Is it easy for us to recognize these heroes? Some come home in wheelchairs or with prosthetic devices that are amazing. But do we recognize all of our injured veterans? Do we understand the hidden injuries that may or may not have been diagnosed? Today’s veterans have suffered injuries that for years have been difficult to diagnose and treat. Post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) are injuries we can’t see, and often leave the veteran feeling lonely, confused, different, and isolated. Often these symptoms mimic mental health diseases, which drive the veterans away from seeking treatment. This only isolates them further and prevents them from seeking treatment. They are afraid of being labeled “crazy.”

The injuries mentioned above are not new. TBI has been around since humans could walk (and fall). Chances are that many who read this article may have suffered a mild traumatic brain injury called a concussion.



The difference, of course, is the amount of force associated with a concussion versus an explosion from an improvised explosive device (IED). The larger the blast and the lesser the protection, the higher the rate of injury. The symptoms of TBI are due to the swelling associated with the trauma, as well as to the shearing of brain matter caused by the force of the blast.

A typical sequella of war-related injuries starts with an explosion caused by an improvised explosive device (IED). The blast often causes concussive-like symptoms to include loss of consciousness, possible tympanic membrane damage, and trauma caused by the shrapnel. The blast will cause a shift in brain matter with either a closed or open head wound. There may be the presence of foreign objects in the brain, as a result of the IED.

The concussive symptoms will linger for days to weeks or months depending on the individual’s response and the amount swelling and shearing that may have occurred. Additional symptoms seen as a result of brain injuries include suicide ideation, depression, headaches, blurry vision, impulsive behavior, risk-taking behavior, decreased self worth and dissatisfaction with life, loss of faith, inability to sleep a full night, night terrors, and PTSD.

Post-Traumatic Stress is a reaction caused by being witness to or involved in horrific scenes such as long, drawn-out battles where the military men and women see their friends die or become seriously wounded. Their own horrific scenes involving blasts, bombings, maltreatment as a prisoner of war and/or the continued stress of being in combat—any or all of these may also cause PTSD.

The telltale signs of PTSD are withdrawal from life’s activities, frequent refusal to participate in crowded events, trouble sleeping, tinnitus, and night terrors. Often the veteran is in denial and tries to control the symptoms his/her own way. They may turn to drugs or

alcohol to quiet the noises they hear or to assist them in sleeping. The veteran may take up “hobbies” and take them to isolated areas for long periods of time. Relationships are hard to maintain, and without assistance, are lost.

Wellness can be achieved when a full multidiscipline, team approach is started in a timely manner and includes psychologists, psychiatrist, internists, surgeons, nursing, social workers, dieticians, and a full complement of therapy staff. The sooner the intervention, the shorter the symptomatology lasts. Of course not every veteran with a TBI will return to a normal life. Many have suffered permanent brain damage.

### Community Support

We can support these men and women in a variety of ways:

1. Be their friend. Greet them and include them in all activities. Understand that they may not attend but want to feel loved and a part of something.

2. If they are single, cook or bring them a meal. Many vets joined the service immediately out of high school and never had to learn to cook. They live off of fast food and frozen dinners.
3. Do not crowd them. Give them space and time: Many veterans suffer undiagnosed PTSD and when feeling “crowded” react negatively.
4. Never approach a combat veteran from behind unannounced. If they have their back turned, announce your arrival 10 feet or more away. NEVER touch a veteran from behind without them knowing you are there. It can trigger a PTSD reaction that could include a defensive reaction.
5. Encourage education, and other endeavors that can lead to a more productive life.
6. Consider hiring a veteran . . . they are hard workers with a good work ethic. Chances are they have done a harder job and worked longer hours.



### Deaf and Hard of Hearing Convention

WELS Mission for the Deaf and Hard of Hearing (MDHH), part of the Commission on Special Ministries, held a

national convention in Shakopee, Minn., to discuss how congregations can better serve the hard of hearing. The convention theme was “Undiscovered souls: reaching out and spreading the Word of God to all.”

Mr. Dean Weigand, chairman of MDHH, says, “With hearing impaired, it’s hard to see the needs.” Weigand, whose brother is deaf, and his wife have been involved with MDHH for more than 30 years between them. His wife is also a sign language interpreter at Mt. Calvary, Waukesha, Wis.

In addition to reviewing the various technologies that can aid a hard of hearing person during a worship service, such as FM systems, looping, and captioning, a panel of four people with varying degrees of hearing loss discussed how congregations can reach out to the

hearing impaired—mainly by being sensitive to their special needs and prepared to respond to them. Weigand explained that another component of the convention was to encourage those who are hard of hearing, not to just ask for help within their congregations, but to share God’s Word with all: “You can proclaim Jesus to others. You are qualified to proclaim Jesus to others.”

Special Ministries Director Carl Ziemer says: “From beginning to end, this convention was all about staying connected to our Savior and to fellow believers. Our mission is to proclaim God’s love in Christ to all—including the deaf and hard of hearing. We show that we truly care about the deaf and hard of hearing when we provide ways for them to “hear” God’s Word and to participate in congregational life—and they appreciate it!”

Nearly 60 people attended the convention. The Deaf and Hard of Hearing Convention is held about every three years. To learn more about MDHH and Special Ministries, visit [www.wels.net/special-ministries](http://www.wels.net/special-ministries).



Special Ministries  
2929 N Mayfair Road  
Milwaukee, WI 53222-4398

To subscribe to future issues of WELS Nursing Today go to [www.wels.net/subscribe](http://www.wels.net/subscribe)

• News and Notes •

**WELS Nurses and Congregations Supporting Military and Families**

This workshop is being offered by WELS Parish Nurse Council October 20 at Christ Lutheran Church in Pewaukee, Wis., James Behringer from Special Ministries WELS Military Services, and two WELS military RN's from Texas, on PTSD and TBI. All WELSNA nurses are welcome to join us for a morning of education, networking, and spiritual growth. For more information or to register go to [www.welsnurses.net](http://www.welsnurses.net).

**Clinical Instructor Needed**

Wisconsin Lutheran College School of Nursing is looking for a clinical instructor for Mental Health for the spring of 2013. Contact Rebekah Carey, MSN, APNP, chair of the School of Nursing at 414-443-8666 or [www.wlc.edu/nursing](http://www.wlc.edu/nursing).

**OWLS Convention October 9-11, 2012**

WELSNA is making plans to attend the annual OWLS Convention in North Mankato, Minn. October 9-11. Nurses from Minnesota will offer a blood pressure screening along with a table display

LIKE us on Facebook at [www.facebook.com/WELS NursesAssociation](http://www.facebook.com/WELS NursesAssociation)

**"Meet & Greet" Toolkit**

This toolkit is being developed for WELS nurses around the country wanting to host a gathering of their own. Education, networking, fellowship, and spiritual growth are all possible outcomes to an evening with other WELS nurses. Watch for the toolkit on the website and consider the possibility for your area. We can help you get started!

**Have you checked out the recently updated Parish Nurse Section of the WELSNA Web site?**

New resources are available for those considering starting a Parish Nurse Ministry in their congregation! The Blood Pressure Ministry guidebook or Suggested Guidelines for Parish Nurse Ministry is a great place to start. Several new programs have begun and these resources have been helpful.

**2012 National Christian Life Resources Convention—  
A life-issues training and education event for the veteran, beginner, or curious**

Join Christian Life Resources on Saturday, Nov. 3, 2012 at St. Paul Lutheran Church, in Slinger, Wis., for a day of education and training to start, strengthen, or surpass your pro-life involvement! Event is only \$25 per person and includes materials, lunch, and snacks. Go online to [www.welsnurses.net](http://www.welsnurses.net) to register today!