A tear falls down his left cheek as he recalls times of athleticism and strength. A mind fine tuned with operatic music and best selling novels. He smiles as you grasp his right hand and squeeze it. "How are you Mr. Frankle? Do you have any pain?"

The cancer has physically weakened his body, even beyond his own recognition. He examines his own extremities, his eyes glancing at his small, fragile arms. He smiles again and says, "I’m fine, thank you." You smile also.

He takes his left hand and runs it through his hair, thinned by chemotherapy. The port-a-cath placed on his right anterior chest wall infuses a continuous IV fluid bag of D5W 0.45% normal saline at the rate of 100 ml per hour. You check the bag and rate of the smart pump to ensure accuracy. You smile again and, turning out of the room, you ask if he needs anything else.

He reaches for your hand. His eyes focused on your eyes, he says, "Do you believe in God, nurse?"

In the fast pace of a nursing shift, you see life and death constantly. The patient pauses, making eye contact with you. "You should believe in God," he said. "I didn’t, but my body, ill and slowed down, leaves me few options. It is God’s presence that gives me peace over a disease I have no control over."

You nod your head in silence. Your rapid steps slowed for the remainder of the shift. You notice more smiles than complaints in your work environment after the interaction.

For the validation of the brevity of life in your patient’s eyes and spoken words have imparted wisdom; you have been changed.

The Knowledge Patients Impart

Cheryl Ann Green, RN, LCSW, MSN, FAPA, CNL, PhD

Heart of Oncology Nursing

Deborah K. Mayer, PhD, RN, AOCN®, FAAN—Editor

Cheryl Ann Green, RN, LCSW, MSN, FAPA, CNL, PhD is an adjunct faculty member in the department of nursing at Southern Connecticut State University in New Haven and a nurse educator at Bridgeport Hospital School of Nursing, both in Connecticut. The author takes full responsibility for the content of the article. The author did not receive honoraria for this work. No financial relationships relevant to the content of this article have been disclosed by the author or editorial staff. Green can be reached at ncgree@bphosp.org, with copy to editor at CJONEditor@ons.org.

Key words: knowledge; death; patients

Digital Object Identifier: 10.1188/14.CJON.250