

Manifest Destiny

Bernadette Mercado BS RRT

“However, I believe in destiny, and my fate is to be a Respiratory Therapist. Furthermore, with that destiny comes responsibility, commitment to my patients, and passion for giving back to my profession.”

What is there for me beyond being a Respiratory Therapist? This question visited me as I was driving to work one day, and I did not have an answer. Then it revisited me; on my way home after a long 12-hour shift attending to back-to-back deliveries of pre-term babies in the NICU, I felt physical tiredness. However, my body still has some leftover adrenaline rush, and the passion for my job as an RT surpassed all the physical exhaustion. I know I have done my duty to save a life, stabilize a baby, and be part of a NICU care team’s goal to hand off a stable baby to the parent’s arms. When Covid hit, it was challenging physically and mentally. The more days I drive home, I question myself about what is next for me after Respiratory Therapy. I realized my question to myself was incorrect. I found the answer to what I can do NOW while I am an RT. The love for my profession was not a love at first sight; never in my childhood memories did I say I wanted to be a Respiratory Therapist when I grew up. I stumbled into Respiratory Program out of desperation to stay in school because there was a 2-year waiting list for the Nursing program in my Junior College. However, I believe in destiny, and my fate is to be a Respiratory Therapist. Furthermore, with that destiny comes responsibility, commitment to my patients, and passion for giving back to my profession.

Education is limitless, and I believe that education makes this world a better place. This is one reason why I joined the Academy of Neonatal Care (AONC), a not-for-profit educational platform. While giving back, I had to give more of myself which encouraged me to pursue a bachelor’s degree in Respiratory. A great way of giving back to my profession is to start by educating myself. Finishing a Bachelor of Science in Respiratory was my tool to get deeper into education. Now the real work begins. ANOC has conducted numerous NICU courses during and after covid, from online to live courses and from California to Utah for the last two years. AONC’s passion is to reach more people, look outside California and further down the Pacific to the Philippines and other countries to extend our mission of educating RT, RN, MDs, and

families.

Our education becomes a mission. According to an article published by WHO (<https://www.who.int/philippines/news/feature-stories/detail/doh-philhealth-who-and-unicef-join-forces-for-premature-and-small-babies-survival-in-national-summit>), in the Philippines, almost half of the children who die before their fifth birthday are newborns. (1) Of those babies who die, 60 percent succumb to complications brought about by prematurity and low birth weight.

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The most recent key fact found on the World Health Organization (WHO) website (<https://www.who.int/news-room/fact-sheets/detail/levels-and-trends-in-child-mortality-report-2021>) mentioned the following: (2)

- The first month of life is the most vulnerable period for child survival, with 2.4 million newborns dying in 2020.
- In 2020, nearly half (47%) of all under five deaths occurred in the newborn period (the first 28 days of life), an increase from 1990 (40%), because the global level of under-5 mortality is declining faster than that of neonatal mortality.
- Sub-Saharan Africa has the highest neonatal mortality rate in the world (27 deaths per 1000 live births), with 43% of global newborn deaths, followed by central and southern Asia (23 deaths per 1000 live births), with 36% of global newborn deaths.
- Preterm birth, intrapartum-related complications (birth as-

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phyxia or inability to breathe at birth), infections, and birth defects are the leading causes of most neonatal deaths.

- Children who die within the first 28 days of birth suffer from conditions and diseases associated with a lack of quality care immediately after birth and in the first days of life.
- COVID-19 infections among children and adolescents typically cause less severe illness and fewer deaths than in adults. Moreover, the youngest children are the least vulnerable, with less than 0.1% of global deaths (1902) occurring in children under five.

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There are so many avenues that AONC can pursue in the future, from training in transporting babies from rural areas to facilities that could provide a higher level of care—providing and training the use of low-cost, effective ventilators. With our passion for educating comes dedication, hard work, and support from companies that align with our advocacy. Our mission will never be completed. Instead, it will evolve with the new technology; we must learn, teach and adapt to the changing world. There are so many opportunities for training in Respiratory and Neonatology. Saving lives is a broad spectrum that we entertain every opportunity to expand our service and give back to future healthcare workers.

“One day we can salute ourselves and the professionals who took the step to be educated and trained and give back to the community they served. We do not stop learning and teaching. We only pass the torch to future healthcare workers, and our daunting task continues.”

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References:

1. Doh, P, WHO and UNICEF Join Forces for Premature and Small Babies’ Survival in National Summit.” World Health Organization, World Health Organization, <https://www.who.int/philippines/news/feature-stories/detail/doh-philhealth-who-and-unicef-join-forces-for-premature-and-small-babies-survival-in-national-summit>.
2. Newborn Mortality. World Health Organization, World Health Organization, <https://www.who.int/news-room/fact-sheets/detail/levels-and-trends-in-child-mortality-report-2021>.

Disclosures: The author has no conflicts noted.

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