

nurse+deck

THE INSIDER'S PERSPECTIVE OF NURSING

Caring.Integrity.Diversity.Excellence

JIWON LEE

MSN, RN

**WHAT NURSING
CAN DO FOR
YOU & THE
COMMUNITY**

NURSE,
EDUCATOR,
INNOVATOR

*"I believe nursing
allowed me to be a
better human
being."*



**Q & A WITH A CLINICAL
RESOURCE NURSE:
ALEXANDER VINCENT
SANTIAGO**

**WHEN SHOULD
PREPARATION FOR THE
NCLEX-RN EXAM BEGIN**

WHAT'S INSIDE...

If you're here for the Insider's Perspective, you've come to the right place. Each week we highlight stories from nurses in the field, bring you tips on leadership, mental health, and more. We also feature a Nurse of the Week - a nurse influencer doing incredible work we can all look up to.



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clinical resource nurse:
Alexander Vincent Santiago



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JIWON LEE

What nursing can do for you & the community

Jiwon Lee has been all over - she grew up in Korea and Canada before pursuing her nursing education and career in the United States. So, what has she discovered? That nursing is pretty much the bomb. Now, she's building a career around community and nursing innovation.



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nurse+social LEADERBOARD



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Our weekly leaderboard shows which ND Social users have been the most active - asking and answering questions, sharing their experiences, and joining groups they want to get involved in. We appreciate each and every one of these nurses for contributing to this growing community. Let's hear it for last week's top 10!

*Join the
community...*

NurseDeck is for everyone. Whether you're a student, new to the field, seasoned scrub or retired - our community involves you.

On ND Social, you can engage, connect and network with like-minded nursing professionals. Discuss current affairs, get advice from seasoned veterans, and earn and redeem social points to support nurse innovators and business owners.

Join in at social.nursedeck.com

nurse+social

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Our community advocates are passionate nurses who share their stories with our community and their followers. There are many opportunities you will have as an advocate:

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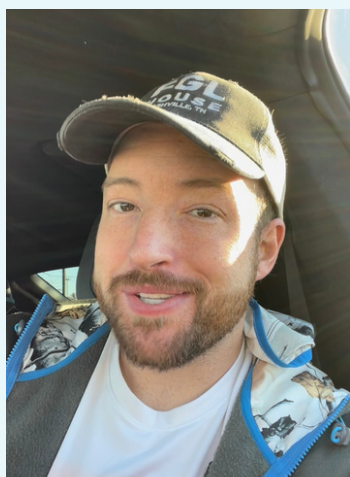
Entry qualifications:

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Richard Darnell (A.K.A. Travel Nurse Rich) is a full-time Travel Nurse and influencer. He graduated from Mercy College with an ASN in 2016 and continued online while working as a full-time RN to finish his Baccalaureate in 2020. Rich loves spending time with his wife Jocelyn and their two young children Levi and Jase when he's not at the bedside. The majority of the travel nurse contracts Rich takes are in the Intensive Care Unit and are through his travel company TNAA. In July of 2021, Rich started a travel nursing TikTok account because he wanted to help share what travel nursing is all about and how anyone can be a travel nurse, just like him.

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Nurses, the last two years have been challenging to say the least but, having our pay capped is the bottom line. If you are thinking about your next steps, you need to read this.

After a 16-year long nursing career, my mental and physical health took a toll on me, I had enough and threw in the towel. But that doesn't mean there isn't another path for you. I'm here to help show you step by step how to start a business and land your first client or shift careers. Imagine being sought after for your skills and expertise to help others. With my help, that is possible. You don't have to feel lost or wonder what to do with all the time, money, and education vested in nursing. I'm excited to announce a new community for nurses who want to supplement their income or replace it through entrepreneurship.

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Q & A

with a

CLINICAL
RESOURCE
NURSE

*Alexander
Vincent
Santiago*



MEET ALEX

Alexander Vincent Santiago, CCRN, CNEcl is a clinical resource nurse at Amana Healthcare in Abu Dhabi, United Arab Emirates. He has a BSN and master's in medical surgical nursing from St. Paul University Iloilo in the Philippines. He also has a master's of science in medical and healthcare education from Anglia Ruskin University. Before moving to the UAE, he worked as a nurse manager and a critical care nurse in the Philippines.

How did you get your start in nursing?

The biggest factor or influence that got me into nursing was my mom. Mom knows best, right? She wanted one of her children to become a nurse, and I was the youngest of us. I became a nurse because it was my mom's wish, and unfortunately my siblings pursued other careers so it was up to me to. It's one of the best decisions I've made - following my mom and becoming a nurse.

What does a clinical resource nurse do?

A clinical resource nurse is basically a resource person. The basic responsibility is to be in the wards and help, especially, the new joiners transition into their role as a staff nurse in a specialized facility. I teach them the clinical workflow, the routines, but I also have administrative responsibilities, like writing reports. It can also be a refresher for older employees, if there are updates with COVID, if they have to liaise with our infection control unit, etc. As an educator, it's important to tell people that you don't know everything. But if it's

something that needs a specialized area, we get people to help them. So we can be a middleman as well, helping them get the right resources.

Tell us a little bit about your advocacy work as a nurse educator.

I have two things I'm passionate about as a nurse educator: the first one is lifelong learning. I'm big on encouraging basically everyone to better themselves by learning or by pursuing a postgraduate activity. It could be a formal training to be professional, a certification, it's all for professional development. I think being in a lifelong learning activity is a way to to be a better person and to be the best version of yourself. Every day there is something new.

What significant changes or challenges in clinical education have you seen during the pandemic that still need to be addressed or were challenging to address at the time?

I think most educators would agree that the shift from the traditional face-to-face learning being carried over to the virtual platform was the biggest challenge for us. So, how do

we make the experience reflect how it is being done in a clinical board? It's really different. In the past month, the restrictions have become more lenient, but there's always a new variant. Hopefully we'll go back to normal soon.

What are the most significant differences you've seen or made during the pandemic?

That is a tough question. I'll start with the point of view of a nurse educator. So I am actually currently a facility-based educator, and during the peak of the pandemic our facility was very short of nurses - really, really short. Though, it wasn't just us, it was the whole world. We're a specialized facility, and when we take care of chronically ill patients we call them residents. We pull them out of the ICUs and the acute facilities, and we move them over to our facility. Basically, we take care of chronically ventilated patients, so the nurses we usually hire should be trained or have a background in critical care. However, given the pandemic, it was a struggle to get people recruited. It was even difficult to get any nurses because every hospital needed nurses. So, we hired a few but they were not specialized in taking care of ventilated patients, so me and my team came up with rapid upscaling cards to help them transition into providing that care. I think that's the most significant thing I did during the pandemic, right, but more or less every nurse or anybody who took part in helping mitigate the pandemic, in their own little ways, is significant. Significance doesn't need a parameter. Helping to immunize or vaccinate somebody, getting that person back on the job, it's all something to be proud of.

Do you think the way society views nurses has changed during the pandemic, or as a result of the pandemic?

I think society has always seen nurses as an integral part of the whole community, but during the pandemic we were highlighted. I think our voices are heard better. We have a lot of issues - not just in the U.S. but worldwide. There are nurses struggling with nurse-patient ratios, and even equitable pay. With the work that you've done during the pandemic, we have been emphasized - the spotlight was focused on us. We've been here as heroes for the longest time, but it's just recently we've become their superhero.

What are some changes still needed in healthcare right now?

I think they should allocate more resources to health care, more budget, more opportunities for healthcare professionals to be recognized, to further develop themselves. So basically, addressing all the old issues.

Can you talk about what long term quality health care and patient safety mean to you?

Let's bring it back to the educators perspective. I'm big on lifelong learning - it can be correlated to research and current trends. So, quality healthcare boils down to offering our patients, their families, and the community at large the best practices, with the most literature available. It's doing what's best for our patients.

As an educator, do you have any tips for current school of nursing curriculum?

We have emphasized in the past years the importance of clinical skills. I think the current nursing school curriculum should focus more on nursing research. I know it's included in most nursing programs, but I think more emphasis should be given on nursing research - current literature and research as it correlates to quality health care. Most of our

books and resources are updated regularly, but I think the most important thing is for nursing students to get into their research culture, they should be interested in finding out what could be improved and what could be better. I think it's the research culture I want to inculcate with future nurses, and it's something that should start during nursing school. It's also a specialization that can be introduced to our future nurses.

How are your fellow nurses dealing with burnout and compassion fatigue?

My colleagues are very resilient, they've been through a lot. They cope with the pandemic in their own ways. The facility has offered support, but coping with such a global pandemic - it's an individualized approach, one copes differently to another. I think burnout can be addressed by just giving nurses time and rest, so they can cope or adapt or adjust it in the ways that will be effective to them, like a warm bath or Netflix marathon, anything you love or enjoy.

Do you think there are adequate resources out there for nurses right now?

Adequate? I don't think so. In our local setting, we don't have platforms like this, like local platforms. What NurseDeck does is very valuable. I am really happy that there's such a thing as NurseDeck. I think the world needs more people like this, more organizations, creating awareness, starting meaningful conversation - it means something. It's making a significant difference. It's really different when you share the same sentiments with the same people who understand you.

Do you belong to any professional organizations, and what value do



they provide for you?

I am a member of Sigma Theta Tau and certified with CCR and CNECL. I am also affiliated with the American Association of Critical Care Nurses and the National League of Nursing. These are good organizations, they offer good resources, like what's the newest thing about critical care? How can we improve patient care? The best practices on how to instruct people to educate others, etc. I can also connect with my fellow educators or fellow critical care nurses, and share stories, platforms, and resources. We can get expert advice - worldwide. To foreigners, I want to share that nursing can be tough, it can be challenging, but you're not alone. Our fellow nurses support us. We have organizations that can help, and it's always better to seek resources than face adversity by yourself.

WHEN

should preparation for the

NCLEX-



EXAM *begin?*



You accomplished your goal!! You survived the grueling program called nursing school. So, what comes next? During nursing school you spend countless hours studying, studying, and more studying!

You studied for exams and spent long hours in clinicals to ensure you received that passing grade. As if you didn't already do enough, now you have to take the NCLEX-RN exam in order to obtain your nursing license. Another test? Yes, your correct!

What Is the NCLEX?

NCLEX stands for National Council Licensure Examination. This nationwide exam will assess your knowledge and skills to ensure you meet the necessary requirements to become a Registered Nurse in your state. This test is completed on the computer and is made up of

multiple-choice, drag-and-drop test questions, and fill-in-the-blank.

The NCLEX is a pass or fail type of exam. You can expect to see anywhere from 75 to 265 questions. After 75 questions, the exam will end once you demonstrate enough competence to become a nurse.

When Should You Take The NCLEX?

Once you graduate nursing school, the next step is taking the NCLEX exam. One common question students have is when to take the exam.

After graduation, you will receive paperwork containing a predetermined date and all the information needed to apply for the exam. This national exam will evaluate your knowledge and skills to ensure that you meet the standards to become a Registered Nurse in your state. Students can learn how to apply for the exam by visiting their website, www.nclex.com.

According to their website, students usually start taking the exam 45 days after graduation.

Nursing school can be extremely rigorous and stressful. Take time after graduation to relax and celebrate!

You made it through a very difficult program and deserve to take time off and congratulate yourself. Spend a couple weeks doing what you love and catching up with missed family and friends.

After 2 weeks of relaxation, the test taker should start the process of getting organized for the NCLEX exam. Schedule your test and make a plan. Start to familiarize yourself with the style of testing.

Once you've determined whatever study method is most beneficial for you, you'll need to pick where and when you'll use it.



Do you prefer to study in a library, a coffee shop, or at home? Are you more likely to study before, during, or after a meal? Will you study in a group setting or on your own?

Use different resources such as the internet, books, and your nursing school to help organize and prepare for the exam. Some nursing schools offer an NCLEX prep class after graduation. Take every opportunity to prepare yourself. Setting up a solid study schedule for specific areas of the test will make it easier.

The average student may study for 2-3 months prior to taking the NCLEX exam. Some may need more. Some may need less.

Just keep in mind you don't put it off for too long. Waiting a significant amount of time may cause you to lose motivation and focus.

Start out slow. Don't overdo it. Cramming all the information in as quickly as possible will not benefit you in any way. Take your time and stick to your plan.

Concentrate hard a few weeks before the exam. This is your time to really focus on the necessary material.

A day before your exam, relax and do something you enjoy. Don't try and fit more information onto your final day! Going into the exam with a clear rested mind will help you succeed. ■

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INTERVIEW HOST



BREANNA KINNEY-ORR, RN
NURSEDECK AMBASSADOR &
INTERVIEW HOST

Nurse Breanna hosts interviews for NurseDeck to share stories, resources & guides to help inspire and motivate the NurseDeck community.

Breanna has been a Registered Nurse for 15 years. She specializes in creating communities where nurses are supported, focusing on amplifying nurses' voices across the healthcare community. She also specializes in content creation, editing, and copywriting, with an emphasis on medical, health, and wellness topics.

I love hearing about startups. With NurseDeck we have our little patch of dirt at work time, to spruce up and help the nurses' community base. I love that there are people like NurseDeck trying to shake things up because we desperately need it.

WANT TO HOST AN INTERVIEW?

NurseDeck is a community built by real nurses and for real nurses. Our interview hosts know what to ask our featured nurses because they've been in their shoes, and so have you!

NurseDeck is where nurses share stories, resources, and guides to help inspire and motivate other nurses, and inform the rest of the world about the nursing profession.

If that's something you want to be a part of, email julia@nursedeck.com.

A close-up portrait of Jiwon Lee, a young woman with long dark hair, smiling warmly. She is wearing a pearl earring. The background is a textured blue.

JIWON

LEE

MSN, RN

What **nursing** can do for **YOU** & the *community*

an exclusive interview

By nursedeck

Jiwon Lee is a registered nurse with experience in several fields of nursing. She earned a master's of science in nursing, health leadership, and nursing education from the University of Pennsylvania, and has since taught as an adjunct professor at Helene Fuld College of Nursing in New York. Jiwon is passionate about innovation and entrepreneurship, and recently participated in the NurseHack4Health. She also authors a blog in Korean for nurses in Korea considering a career in the United States.

NurseDeck (ND): Welcome, we're so excited to chat with you today, Jiwon. Thank you for being here!

Jiwon Lee (JL): Thank you for inviting me, it's exciting!

ND: Thank you! So, we always like to start at the beginning. Tell us about how you got into nursing. What inspired you to go down this path?

JL: I am originally from South Korea, and I went to high school in a suburb of Toronto, Canada. While I was deciding where to apply for college, I thought I wanted to be a clinical psychologist because I really enjoyed sharing those vulnerable moments with my family and friends. My mom used to be a nurse, and knowing who I am, my mom recommended that I go into nursing school and then go into psychiatric nursing. So, I applied for colleges in the U.S. because that's where I wanted to go to school, and I was lucky I got into Boston College. So that's how I got into nursing in the first place.



ND: Awesome. Do you feel like you chose the right path for yourself? Or do you ever think of those big, comfy, overstuffed chairs you could be sitting in helping people sift through their problems?

JL: Of course, there are a myriad of times I questioned whether nursing was the right path for me. I sobbed many times at work, but I believe nursing allowed me to be a better human being, not only a better nurse because you encounter so many different people. Whether it's your team, your patients, or their families. So I really think it taught me to be a better person, which I really appreciate.

ND: That's a great perspective to have. I'm curious, how did you end up from Korea to Canada for high school? Did your whole family move?

If you don't know something, it's okay to ask questions. It shows other people you are willing to learn and improve as a nurse and advocate for your patients.

JL: My dad stayed in Korea because he had a business to take care of, so it was my mom and my brother who moved to Canada. How I moved there was - I played ice hockey growing up, and a lot of my friends went to Canada to play because ice hockey in Canada is like football in the states. So that's how it started, I wanted to go and learn English and learn different cultures, but without knowing what it entailed. It was hard to make friends because I didn't speak English, but I got through it and I'm here!

ND: That's cool! I see you have a ton of volunteering experience. Can you speak a little bit about what motivates you to volunteer and how it has lent itself to your career now?

JL: So, volunteering, for me, was initially a way for me to build a resume. Whenever I went back home to Korea in college, in the summer and winter, I volunteered at different facilities with different populations, from an international clinic to translate for patients, to elderly people living alone to be their friend, or at a community health center to aid with music therapy for children with autism. It really gave me an opportunity to see where people are in terms of medical and nursing needs in the community. There can be a lot of downtime in volunteering, and it's amazing how much you can learn by just building connections and asking questions and talking to somebody, whether it's your colleagues, volunteers, or the people you volunteer for. That exposure really helped me become a nurse and worked as a nurse, whether it's your floor or at CCRM or as an adjunct faculty, because you have been in that situation talking to a variety of people on different topics and subjects.

ND: That's amazing. Nurses

sometimes get so specialized in our careers, so volunteering is such an awesome way to dabble in different things. So talk to us a little bit about healthcare entrepreneurship, I see that's a big interest of yours. Why do you think that's important for healthcare?

JL: I actually got interested in entrepreneurship this summer. I have my master's in health leadership and education. While I was on the path to get my master's, I had CEOs of Johnson & Johnson or nurse entrepreneurs come and speak. I was never interested in that concept, but now I see there is so much improvement nurses can bring. I recently learned the concept of intrapreneurship, which is entrepreneurship in a large organization. You don't have to have the title of CEO or CFO to be an innovator or entrepreneur. Nurses at bedside - whether it's improving the way you pass medication or how you communicate with the members of





this smarter disciplinary team - can make workflow better, and I think that's a form of innovation. We do it every day, we just don't label it that way. So that's how I see nurses' role: improve or expand on.

ND: That's such a good point because it can be an intimidating word or concept for nurses that maybe are feeling like they're over the bedside and want to do something else, but aren't ready to take on like a whole new program of study. With your background in being an educator, is there anything that you'd like to share with nurses right now? It's been a challenging 18-20 months to be a nursing student, so what have you seen in your experience with nursing students?

JL: One big thing I mentioned to them every week was that it's not about the skill sets or whether you can pass oral medications or hang an IV bag, it's about your open mindedness. Be proactive and learn. You may know how to do certain things, and you may have been exposed to it working as a PCA or LPN, but there's always something you can learn more. It doesn't matter

if you have 20-30 plus years of experience - and I have tremendous respect for those who do - there's something you can always learn. If you don't know something, it's okay to ask questions. It shows other people you are willing to learn and improve as a nurse and advocate for your patients. I always emphasize to them, it's how you see your role as an advocate for your patients, so don't be complacent.

ND: That's such a good point. I feel like the seasoned and veteran nurses are relieved to see the next generation of nurses come in, and the influx of new blood and new energy coming in, because they're exhausted. How do you think the next generations are going to be prepared for practice? Do you think they're bringing anything different to the table?

JL: Yes, because they're more used to technology. I participated in NurseHack4Health, and my team built a system helpful for nursing documentation. We're still in the process of gathering information about pain points in nursing documentation. One thing we learned

was that veteran nurses are not as comfortable in documenting and typing, and it takes them a longer period of time, whereas for the new nurses it's very day-to-day technique or skills they use. Technology has a huge role in healthcare nowadays, especially documentation, it's tremendously important in the nursing field. New nurses can also introduce new science data to the nurses currently practicing, as maybe they're not as tuned into those studies.

ND: Yeah, that would probably be a steep learning curve to delicately flex with some older nurses, but I feel like the more we talk to nurses in the field right now, it seems like that tide is shifting, so hopefully more seasoned nurses are receptive to learning. If we ever get to a post-COVID world, what will nursing look like?

JL: I believe nursing will never die. Because there's so much emotion involved in it, it's not something that can be replaced by robots. I was recently reading a *New York Times* article about ICU nurses in Arizona, how they were the ones holding the

*I believe
nursing
will never
die.*

patient's hands when they were dying, because the families couldn't come in. I think nurses will always be that group of people. Pre and post, and during COVID, we were there, and even after COVID we will be there. I'm sad COVID burned a lot of nurses out, but more people saw the importance of healthcare providers and how we care for patients.

ND: Absolutely, I agree. There's never going to be a replacement for that, no matter what it looks like decades from now. What would you say are the major challenges that nurses face today?

JL: I think it's burnout. When I moved to New York in October last year during COVID, I started in the emergency room and I'd moved from Nebraska, so it was a culture change. I was able to work there for six months, and I felt like a failure because I was like, "why can't I do this?" I was really burnt out though, now that I think about it. It was just not healthy for me emotionally and physically, so that's why I decided to move on. It's not only me, but also my colleagues, the more I talk to them - we're all on the same page. It's very difficult to go to work and take care of a lot of patients. I think that's why community is so important, and that's what I respect about NurseDeck: you create the community to try to educate people. It can be very enlightening and broaden your perspective, and it lets people know that the situation you're in right now might not be the only option you have, and there are people out there who are in the same shoes as you.

ND: We're huge about that - just getting everybody in the same room and then the magic happens. I'm curious about the hackathon, were you seeing some trends people are

trying to work on? Big changes necessary for healthcare right now?

JL: I'm an advocate for nursing mental health. New and seasoned nurses all need support. It's really helpful for our mental health to talk to each other about certain things because we understand each other. The article I was talking about - they didn't want to talk to their family members about what they're going through, seeing death every day, because they were feeling that they're transferring those emotions to their loved ones. Nurses get it. I think that's certainly an area we can focus on, and it's always going to be something we will need.

ND: I agree. We've talked a little bit about community and spaces like NurseDeck. Are you involved with any other nursing organizations or groups? What are your thoughts on communities for nurses?

JL: I was part of the New England Korean Nurses Association when I was in Boston during undergrad. That was a great way for me to meet other Korean nurses, and I was able to meet nurse practitioners and professors to learn what they do. Having that role model, who has done it before you, that's something that can also help a nursing community. Right now, I write nursing blogs in Korean so people who want to come to the States to practice nursing can learn what kind of challenges we have, the different facilities or nursing fields we can practice in, what you can do with your nursing degree. I always thought that when I become a nurse, I'll work at the bedside, but that's the only option. I write about that and what my students go through.

ND: That's amazing. It's so true, because a lot of nurses see these

different roles out there, but they can't envision themselves there or they don't know how to connect the dots to get there. Well, thank you so much for being here! Is there anything else you want to share? Or resources for nurses you think would be helpful?

JL: I wanted to mention one thing: I see the nursing role in different definitions. I think a nurse has to be a good communicator, a good negotiator, and a good team player. I think many of us go to work and come back and don't really see they're performing so many roles, so I want to tell them they're doing so much and affecting so many people's lives. I really want my students and colleagues and co-workers to tell themselves they're doing really well. I'm guilty of this, too: When I was working in the ER, I always beat myself up for what I did wrong, but there are so many things you're doing to help that patient, whether it's mentally, emotionally, physically, or socially. So, I want nurses to tell themselves they're doing really well, pat themselves on the shoulder, and empower themselves. We need to lift ourselves up. ■



*Connect with Jiwon on LinkedIn:
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Janet Celli, RN BSN	CPR Associates of America	cprassociates.org
Tilda Shalof, RN, BScN, CNCC	"A Nurse's Story"	www.nursetilda.com/books
Diane Cannon, DNP, MHA, RN	Xapimed (competency tracking app)	xapimed.com
Lauren Harback, LPN	Built Bar ambassador (CODE: laurenh for discount)	built.com



**A COMMUNITY OF RESOURCES
BUILT FOR REAL NURSES.**

Where nurses share stories, resources
& guides to help inspire and motivate.

*“When you’re a
nurse, you know
that every day
you will touch a
life or a life will
touch yours.”
—Unknown*

MEET THE NURSEDECK TEAM

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GABRIELLE DIDATO

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