

# Radiation crisis chemical crisis



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## **Radiation crisis/chemical crisis**

Radiation crisis/chemical crisis Part A Among new graduate nurses working during radiation and chemical crisis, there is a need for them to go through a thorough training process in radiation crisis. In the first place, these new nurses must first be treated like ordinary citizens and not be allowed to be involved in the management of the crisis. If they are to have any roles in the management of the crisis at all, they need to go through the proper training in radiation crisis management first. If it be inevitable that they have to assist in radiation crisis, they need to be partnered with other nurses who have had adequate training in radiation crisis management (Buchsel and Yarbro, 2005). These new nurses have to be trained alongside other health practitioners who are set to undergo cancer care; they also need to be involved in primary and secondary prevention of health risks among their patients; and to adequately establish how to handle radioactive material for cancer care before, during, and after radiation or chemotherapy sessions (Macavoy, 2003). Part B In nursing leadership, there is a need therefore to review the different models of care, especially in the management of crisis and the use of health technologies. Health technologies have a major impact on the different models of care because it prompts adjustments to such models of care in terms of teaching new interventions and in caring for more people with prolonged life spans. These health technologies would imply a need for practitioners to adjust their care practices towards palliative care and towards the use of new technologies (Kaiser Family Foundation, 2007). There may also be changes in these care models – like removal of certain responsibilities from nurses and transferring these to computers and

machines as in the case of medicine dispensation, OR functions, and vital signs monitoring. In radiation crisis, new nurses have to learn these new technologies and to apply these in the clinical setting. In the end, these nurses are easily able to assimilate new information about radiation crisis management as compared to older nurses. For leaders, these new technologies mean that they have to schedule their nurses to undergo training in the use of new technologies, including radiation crisis management. New nurses especially, have to undergo these trainings and classes in order to ensure that they would be effective nurses in the use of these technologies. New nurses are also future leaders, and their involvement in the clinical practice can help them acquire skills which would help them be better leaders and better nurses. These new nurses also have to master the legal and policy procedures which apply to radiation and chemical crisis management in order to ensure that they know what they are doing to contain and to manage the crisis (Clainberg and Dirschel, 2009). By applying such legal and policy standards in the practice, the new nurses can avoid litigation and prevent the occurrence of health issues.

Works Cited

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