



Critical Care: A New Nurse Faces Death, Life, and Everything in Between

Theresa Brown

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Critical Care is the powerful and absorbing memoir of Theresa Brown—a regular contributor to the *New York Times* blog “Well”—about her experiences during the first year on the job as an oncology nurse; in the process, Brown sheds brilliant light on issues of mortality and meaning in our lives.

Critical Care: A New Nurse Faces Death, Life, and Everything in Between Details

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From Reader Review Critical Care: A New Nurse Faces Death, Life, and Everything in Between for online ebook

Jean says

This is one important read about what it is that nurse's really do. I admire all nurses, I always have, for all that they do. One could argue that there is stress in many different kinds of jobs, but when life and death depend on just what you do and how you do it, it puts nursing on a whole different level. I've complained in the past about the stressful times I've had at work, because it was like holiday shopping time, and it lasts for a short time, but boy is it ever crazy when you are going through it. This story details times like this on the oncology floor where Theresa Brown works, only the "holiday phase" can take place at any moment in time. I just take my hat off to all nurses. To give the level of care that she does and to take into consideration that there is a human on the other side and to CARE about their feelings in all of this is a wonderfully loving trait. Theresa's ability to write well is a plus in telling this story. I will recommend this book to all of my friends.

Matthew Gatheringwater says

Having only just graduated from nursing school myself, I can vouch for the accuracy of Brown's observations. I have enjoyed Brown's articles for the NY Times but, whereas those are more issue-oriented, the stories in the book were more personal. In some of her anecdotes, she seemed to court trouble. I came away from the book with the sense I'd rather read about Brown's career than find myself working with her.

Haley says

Eh. Yawn

Amy Meyer says

Publisher: At my job, people die," writes Theresa Brown, capturing both the burden and the singular importance of her profession. CRITICAL CARE chronicles Brown, a former English Professor at Tufts University, on her first year as an RN in medical oncology and the emotional ups and downs she encounters in caring for strangers. In contrast to other medical memoirs that highlight the work of doctors, this book focuses on the critical role played by nurses as health care providers.

Brown walks readers through the rigors of chemotherapy, reveals the odd things that can happen to people's bodies in hospitals, and throws in some humor with her chapter titled, "Doctors Don't Do Poop." During her first year on the hospital floor, Brown is seriously injured but her recovery allows her to take a new perspective on the health care system, giving her a better understanding of the challenges faced by her patients.

Ultimately, Critical Care conveys the message of learning to embrace life in times of health and sickness. "The antidote to death," Brown says, "is life." Brown writes powerfully and honestly about her experiences, shedding light on the issues of mortality and meaning in our lives.

My review: People repeatedly ask Theresa Brown why she left her career as an English Professor at a prestigious University to become a nurse. The simple, concise answer is she wants to help people. To take care of them. She felt strongly about this right after her children were born. Brown knew she wanted to care for people the way midwives had cared for her during the birth of her daughter. That's what a nurse does but a good nurse, one who likes her job and truly cares about the people she comes in contact with, does much more than take care of a patient as Brown learns in her first year in the medical oncology ward where death is normal.

I was extremely interested in reading this book as soon as I saw it in the Shelf Awareness newsletter. I have spent a lot of time in hospitals and been cared for by a lot of nurses. Thirty-six surgeries and numerous other hospitalizations for various health concerns means a lot of nursing care. Some nurses are fantastic, some are awful, most fall somewhere in between. It matters enormously for the patient's comfort, peace of mind, and more. Trust me. I've wanted to read a memoir by a nurse for a very long time because I always thought it would be interesting to see things from their perspective. Until now, I haven't been able to find one. Hence my extreme interest in Critical Care.

I admire Brown's dedication to her second career choice. It took her six years to get her bachelor's degree in nursing because she had to switch schools when her husband changed jobs and the family moved. Despite how long it took to earn her degree, Brown never wavered in her decision to change careers. And she displayed this same dedication when she finally started working in a hospital her first year as an R.N.

Doctors enter a patient's room in a hospital, examine them, ask some questions, scribble notes on their chart, hand it to the nurse and leave. Nurses attend to almost all the rest of the patient's needs and wants from helping them to use the bathroom, inserting an IV line and/or dispensing the patients medication. As Brown quickly discovered, a nurse's work is never done or, at least, that's what it felt like. During her first year, Brown seldom finished her work by the end of her shift and usually ended up staying late at the hospital.

The thing that most distinguishes a nurse from a doctor, who tends to treat a specific ailment or part of the patient's body, is that a nurse, at least one who is good at their job, treats and cares for "the whole person". In reading the stories about Brown's experiences with various patients its obvious that she quickly understood that her job isn't to just take care of the person on the physical level, but to communicate with them, understand what's troubling them mentally, to allay their fears and make them comfortable as possible in all ways. Brown displays a remarkable understanding of people as patients and their different attitudes and personalities. Rather than take personally a teenager's obnoxious quips or the cranky mutterings of an elderly woman, Brown puts herself in the patient's shoes and thinks about how they must feel being admitted to the hospital for the 6th time in 3 months or entering the hospital for a minor procedure only to learn they have an aggressive form of cancer. Brown empathizes with her patients, understands them and tries to interact with them in a positive way hoping to reduce, rather than exacerbate, their stress.

Critical Care is filled with stories about the patients Brown cared for and the nurses, doctors, technicians, visitors and others she met during her first year as a nurse working in a hospital. Each chapter is pretty intense and filled with graphic realities about health, life and death, as well as hospital politics and the bureaucracy one is often up against. Brown has written the chapters as if each is an individual essay relating an aspect of her nursing career instead of providing us with a long narrative. In writing her memoirs in such a way, Brown has made it more interesting and enjoyable because she's provided us the opportunity to digest the information in each chapter before moving on to the next.. I found it much easier to read 7-10 pages, put the book down, think about and absorb what I read and return to the book when ready.

As mentioned earlier, Brown spent her first year in the medical oncology ward. The result is that she saw

many of her patients die. She learned a lot about death and dying, passing much of it on to her readers through stories about the different patients she cared for during that year. Some of these stories involve some graphic imagery and aren't for the feint of heart. Some are extremely sad. Caring for the dying and in comforting their families Brown learned the value of life and not to wait for tomorrow because it may not come. Through her memoir she reminds her readers how important it is to live our lives and to tell our loved ones how important they are to us before it's too late.

This is clearly a book for anyone who's wondered what it's like and what it takes to be a nurse, as well as for those who, at one time or another, have needed a nurse, which is almost all of us or our loved ones I'd imagine! Critical Care is an honest, well-written account of Theresa Brown's first year as a nurse written with a mixture of empathy, humor, poignancy and compassion that speaks to anyone who cares and who's willing to listen.

I received this book from the Publisher, HarperStudio through Shelf Awareness.

[Atom](#) [All Comments](#)

Katie says

This references some sections of the book. Can a book like this have spoilers? Haha. I'll hide the review, just in case!

As a "new-ish" RN who has less than 1.5 years of experience - all of it in the intensive care unit setting - I looked forward to relating to Brown's critical care stories. Her book, however, is an account of her first year of experience in the wards; more specifically, an oncology unit. I found it misleading that the book was titled 'Critical Care' since the title typically denotes the emergency room or ICU setting. Her stories were relatable, though, for all nurses.

Apart from this disappointing aspect, I found Brown's voice nearly child-like. She mentions a few times that nurses "eat their young," which I've found to be true in some cases, but since I'm about one year in (like her), I'd say we have comparable experience and we're both still "young".

There is one instance where Brown calls the lab asking for a draw on an angry patient. Everyone in the lab refused the draw, saying the patient is angry and yelled at them. Brown, in a way, accepted that answer. What? I've had a patient kick me, spit on me, and threaten to kill me, but my job is keeping them safe, treating them, and averting crisis. Lab's job is drawing labs - it's hard to imagine the entire group refusing for such a frequently occurring situation. Strange.

There is another time where Brown is frustrated as she's trying to advocate for a patient whose surgery has been postponed due to poor communication and treatment delay. When she is talking about transporting the patient, she mentions (with great annoyance) that the transporter is "...slightly mentally retarded."

Irrelevant, and a poor manner to describe her anger.

Brown also begins to stress when patients' oxygenation saturation goes to 90 (this is nearly a good saturation in critical care), when they need a few liters of oxygen, and calls codes when rapid responses are more appropriate. This, to me, seemed like an account of a terrified student nurse, and gosh, I've definitely been there.

Lastly, she wrote a chapter on her own experience as a patient with a knee injury that seemed very out of place.

Maybe she wrote the book in such basic terms to appeal to those with no experience in nursing. (And I bet those people would love this book, because she is a good storyteller). No disrespect to the author, at all, though I do wish she would have chosen a different title.

Flannery says

I also happen to love medical memoirs and, once again, this one was a letdown. I can't even put my finger on why. Her framing and description of events just rubbed me the wrong way. I really wanted to like this one but it dragged at parts. Mostly the parts where she was talking about how amazing she was to go from being an English professor to a nurse. For a much better medical memoir, read *Better: A Surgeon's Notes on Performance* by Atul Gawande.

Cynthia says

Interesting book about nursing in an oncology ward. Fairly short chapters that were informative without needing a Merck Manual. Tended to jump around a bit but overall a decent read.

Caitlin says

The author of this memoir used to be an English professor, but she chuckles all that to become a nurse. The memoir is about her first year as a nurse on a medical oncology ward. The book is well-written, but ultimately there's just nothing special about it. It's essentially a series of stories about caring for patients with cancer - there's value in that, but it doesn't really stand out for any reason.

I would have liked the author to be more self-reflective. It's a big change from Professor to first year nurse - tell me about that. Tell me how the books you've read and studied contribute to your understanding of our job as a nurse. She just never manages to really do that. Instead she tells stories of patients and spends a large chunk of the book talking about her challenges with some supervisors at her work - a section of the book that actually made me squirm because it felt so inappropriate. I would have been moderately alright with her slagging her co-workers (it's something we all do) had she been able to analyze her own part in the conflict, but instead it's heroic Theresa against the evil nursing supervisors who eat their young and it makes her very unsympathetic. Add to that the typical nurse's awe of doctors/attendings which is presented as a completely rational set of behaviors without any context to explain them and chunks of this just weren't worth reading.

In the end, it's obvious Ms. Brown cares about her patients, I just wish she wrote about them better. What could have been a really good book ended up being just okay.

Thanks to the publisher for sending me an advance reading copy of this book.

Megan says

Just not as good as it could have been. Compare this book to *Complications: A Surgeon's Notes on an Imperfect Science*: that's good thoughtful medical writing, there. *Critical Care* is almost there. As it is now, it's a collection of stories, with bits about Theresa Brown's family and her change of career thrown in. All of the patients blend together, especially since they all have cancer. It felt like it had so much promise, but fell flat in the execution.

Rebecca says

The story of how an English professor from Tufts choose to become a nurse. I felt like I should like this book more, but I didn't. I didn't feel like the author was someone I would want I hang out with. Her anecdotes about nursing and patients were powerful, but the book lacked something indescribable which would have allowed me to lose myself in the story.

Jill Meyer says

Theresa Brown's book "Critical Care" has been excerpted in the New York Times Health and Wellness section, which is where I first read about the book. Brown, a college-English-professor-turned-oncology-nurse, combines her two areas of expertise in a book about her first year as a nurse. She's an excellent writer with an interesting story to tell.

As another reviewer here noted, nurses are the unsung heroes of the medical world. They do the grunt work, the unceasing care of patients, and are often the first, and last, contact a patient has with a hospital. Brown, because she works in the oncology department at a Pittsburgh-area hospital, has seen, and participated in, the ups and downs of cancer treatment. What doesn't kill cancer patients often ends up saving them, or at least putting them into remission, but the effects of chemotherapy are often as bad as the disease itself. How many cancer patients ask themselves in the midst of horrifying treatment if the possible cure is worth the agonies of the treatment?

Brown does not make any statements about the worthiness of treatment, she assumes her readers would be able enough to make a decision if faced with a cancer diagnosis.

Brown also writes about the personal toll cancer treatment and possible death of patients have on the nursing/doctor staff. Some medical staff are able to distance themselves from the pain they see around them, while others can't. Brown writes that identifying with her patients - showing her "human side" - was a good method she chose to use when dealing with treating cancer patients.

Theresa Brown's book seems to be an honest appraisal of her first year in nursing. She's a very good writer

and her story, while often offering a discouraging look at cancer treatment and care, is well worth reading.

Ann says

Picked this up in the D.C. train station and read it straight through (almost) on the way back to Philadelphia. A fast and interesting look at learning to be a nurse after leaving English professor-dom. Brown nurses in the oncology ward and her account of patients as they go through the process of dealing with cancer is moving, her accounts of unexpected patient deaths (condition As) is stunning and helped me understand a lot of what goes on in hospitals. I particularly liked the chapter "Doctors Don't Do Poop," about why nurses do do poop and its significance in patient care. She's a good writer, and this was extremely interesting.

Barb says

Interesting book and truly an accurate representation of Nursing on a busy hospital unit. I am an RN who works with new nurses and I found this book helpful in reminding me what it is like to be experiencing patient care and the complexities with it in the hospital setting for a new nurse. I love the Nursing profession and was hopeful that I could give this book 5 stars when I started reading it, but I could not. Altho the book was interesting, it was not a compelling read and the story line was pretty much flat - altho a different patient in each chapter, the relaying of the tale did not change. Also, I was concerned with how much time Ms. Brown spent on the the concept of "nurses eating their young." If I were reading this book to get an idea what Nursing may be like before choosing it as a career path, the belaboring of the negativity with her first Nursing unit could work as a deterrent. While it may be true that orienting as a new nurse may not be easy with some seasoned veterans, it is much better and the comaradship of fellow nurses is priceless.

Dee Cherry says

A seasoned co-worker gave me this book to read. I thought it was a good read as the author recalled her first months as a new nurse. While it was a bit overwhelming for her, there were plenty of relatable situations as she cared for cancer patients. I'm looking forward to reading other books by this author

Alyssa says

Being a very recent nursing school graduate and preparing for my career as a nurse, I found this book very inspiring and helpful. I've had encounters with death that have made me very uncomfortable at work (at a workout center) and reading this book has helped me "systematically desensitize" in being able to cope with it. I felt peace in that after seeking counseling after one of my deaths which was incredibly gruesome, that Theresa had felt a sense of depression after her sudden deaths. Thank you Theresa for writing a book that can speak to us nursing school grads/first year nurses. It was a pleasure to hear about your experiences.

Becky Everhart says

I enjoyed this book quite a bit. It surprised me, pleasantly, in many ways. It let me down only in that it ended too soon.

When I first picked up this book, I expected the author to merely parade grisly experiences before me, making me thankful for my civilian life and giving me a new-found awe for those who can handle this most difficult profession. I wasn't really expecting much in the way of wording or decorum. When I read that brown is a former professor who taught at prestigious Tufts University, I assumed she left because she couldn't hack it. Instead, I saw how a natural, easy talent for words created an aura around the narrative, giving the book a shimmer of sophisticated prose. The words rarely got in the way of the story-telling, except in instances of her penchant for overusing certain words (savvy is a major offender). In a way, I think her teaching didn't serve as much a a previous life before she chose nursing as much as a primer to share her story and transcending messages. She knits stories together through time into a storyline more than merely a timeline. She shares her lessons but does not preach. These are the earmarks of genuinely good storytelling. The details she chooses are meaningful, interesting.

Just as important as what she tells and how is what she has omitted. I admired her strength while reading about her accident and return to duty, afraid the accident would cost her the dream. I would have been disappointed to see the book turn selfishly to cover the minutiae of her recovery, the physical therapy sessions, the grim expressions on her doctors' faces when they tell her of the severity of her accident like a cheap TV movie. I was also glad to see her home life stayed in the background, giving patients and work their rightful amount of spotlight.

In my personal life, I seek experiences to write about to relay to others. This book showed me how to do that the proper way to approach this. For that reason, this was a valuable read.

Annie says

Disclosure: I'm a nursing student, and I've been working as a nurse tech for about two years now in a variety of health care settings. There's always more to learn, but I pretty much get the basic ins and outs of health care at this point. There was just a lot of little things that I read that didn't endear me to the author. Okay, so for example: the way she acted around that doctor when she injured herself. He wore black scrubs and she immediately made some snap judgments about his personality from that. I was like, really? At a hospital I work at, the techs wear black. When my mother, who is an ICU nurse, heard that she told me she was jealous because black scrubs are easy to clean. She just seems like she has this chip on her shoulder about other health care workers. Like, she felt the need to tell EVERYONE she was a nurse because then they would give her better care or something. Does she really not trust her coworkers (in other departments, albeit) that much? It honestly just sounds like the hospital she works at kinda sucks. Why do they do taped reports, for example?

Like another reviewer mentions, she doesn't work on a critical care floor. It's progressive. I work on a progressive floor, I would know. The book wasn't well-named, and when I bought it, I was expecting more....well, critical care. Honestly, I wouldn't really recommend this to anyone I know in health care.

Eva Leger says

I'd recommend this for anyone looking to get a glimpse into what it takes to be a R.N., especially in an oncology unit. This was interesting for me because I have an on-line friend going through chemo right now and never having had any personal experience with this treatment I had no idea really what is happening to her. There is so much I don't know still but I know more now than before.

There's a nice amount of stories about Brown's patients and to me that's always a plus. Brown seems to be an honest author also which always goes a long way. She comes across as someone you'd want for your own nurse if you had the bad luck to have to be in the hospital in the first place.

I don't know if it's just me but she tended to make everything seem real easy. She stressed things she had no time for, things needed to be rushed, etc. but at the end of the day it didn't seem to be a full days work by nurse to me. I know and have seen R.N.'s at work and I think their days are far more hectic than what comes across here.

The medical terminology is all explained.

Two things I didn't like: one was that a few times Brown tried to look too far into things. One man has to wear an adult diaper because of incontinence and when he makes a joke about knowing how a baby feels she "understands" that he was feeling "infantilized" and that he "acted out the feeling of infantilization into a joke". How about he wanted to joke for a second? This is a real pet peeve of mine so luckily it didn't happen more than a few times here or I'd have maybe not finished. Why everyone has to find some sort of hidden meaning in everything these days is beyond me.

"It's interesting, though, that even doctors can be squeamish about shit."

Is that supposed to be quirky? It's just bothersome IMO.

The second thing was the ending of most of the chapters. The rest of the chapters were fine but the endings, most of them, had to be "enlightening" or "heartwarming". And it felt fake.

Talking about finding a Bible for a patient, which really isn't up to a R.N. but which Brown took very seriously, she concludes by saying that doctors probably don't do Bibles (meaning taking the time to find one for a patient) and that's okay.

"But nurses have to get to the heart of the matter, whatever that may be."

That's not even a good example really, it's one I pulled out fast. It's gets a little more silly than that.

Brown seems honest, like I said, she definitely does not talk down to her readers, and seems to be an all around likable person.

I do have to mention this. The author photo on the back page, with the glasses, is nice.

The photo on the inside back cover is not. Her lower mascara is smudged all over, it looks like she was crying and only cleaned up one eye and she looks like there's a foal smell to the air there. It's a close-up of her, with a blurry forest behind her, and she's looking up and off. Why? Is there something stinky out there that only she can see? Is that why she was crying?

If that were me I'd personally go around the world and make every person give me their copy of the book.

Jenny says

My favorite passage:

Florence Nightingale called nursing "one of the Fine Arts" and described it in terms of artistic production: "Nursing is an art: ad, if it is to be made an art, it requires an exclusive devotion, as hard as a preparation,

as any painter's or sculptor's work." These two forms of visual art are an interesting choice. She could have compared nursing to farming, religious service, the care of animals, or even medicine, but she chose painting and sculpture, art forms that require inspiration and vision combined with a high degree of technical ability.

At some point, though, sooner than any of us would wish, our artistic mettle will be tested. A patient will be in great distress, and it will be the nurse's job to help her. Colors and brush ends will fly, and metal will strike stone, chipping off chunks more or less artfully. In the end the product will not resemble the Mona Lisa or Rodin's The Thinker, but a real person in less distress, physical or emotional, than she was before the nurse came into the room. My masterpieces are all internal: ease given to the suffering human heart.

I eagerly read this in one afternoon/night, I've been waiting for it to hit my library and it finally did. Having spent a dramatic stay at the hospital myself once, I was a little disappointed to find that this book did not touch on the urgent moments of death exactly like I expected, but it was certainly addressed and in a pretty fascinating way. I wasn't grossed out too much and I didn't shed any tears, but the insider feeling on her perspective was a page turner. The author mentions how she is not religious, and maybe you would assume this changes the perspective on what death means to someone who may not believe in an afterlife, but what is the same for everyone is that when it comes, it can be expected or sudden, but the urgency of the situation is the same. And once you experience this, you are never the same.

Petra X says

I read this book in 2015 and liked it so much I read the author's other book, The Shift: One Nurse, Twelve Hours, Four Patients' Lives. I rated and reviewed both books. This week I discovered that this book, Critical Care was no longer on my bookshelves, rating and review gone. How does this happen?

I always think it must be the Librarians and their combining and renaming of authors. I am a librarian and I only correct errors for books on my shelves and it's the same librarian names come up time and again. Why do they come up? Because some of them really don't care about accuracy, only getting to the of the 'best librarian' list' possibly, who knows? I don't even know if it is librarian error or something else but cannot think what else it could be.

Goodreads always wants details sent to Support who never have any reasons for why the book has disappeared, nor any way to fix it. I gave up writing on the Feedback thread because the Staff Mods get all wide-eyed and pretend this is the first time this has ever, ever happened and please contact Support.

This is the third book this week. I mind losing the reviews and comments very much.

Anyway the book was fantastic, a non-romantic view of what starting off as a nurse is really like, and, as they say, it ain't always pretty.
