

Name of Student
Professor's Name
Subject/Course
Date of Submission

PA School Application Essay

As a small child, I had the desire and passion to work in the vicinity of ER as PA. At some point when I was in the second grade, I could wear my father white shirt under the pretext that it was a white lab coat. Occasionally, during my high school years, when we had assignments and opportunities to write, I would write about health issues having read them from my mother's nursing journals. The developments and events that proceeded in my life only confirmed my interest in the medical profession. I must mention that the moment I started working with Brad Cantley as a PA in the ER, I experienced a mental and perceptual change regarding the work. It is during this time that I learned to appreciate the challenged and the diversities that work at the ER as PA brings about. In practice, it was a learning experience where I got to learn the different life spectrums and aspects that allowed me to strengthen my skill capacity to appreciate the technicalities and situational conditions involved in the life and work of a PA as an ER. As such, I began to appreciate the work that PAs do in their line of work and profession. Specifically, I appreciated the diverse nature of work that was paramount and critical in the medical profession.

One considerable event that has left a profound smudge in my heart and has strengthened my pursuit in the medical profession was a young mother who was brought in by her husband who carried a small baby about a week old, to the health facility. From my recollection, she was suffering from respiratory distress, and her speech was disabled. However, her eyes had some spark of anxiety and fear. I could tell the physical and emotional turmoil that she was undergoing and as such I felt the strong urge to assist her in whatever capacity that I could. As it is the norm, some tests were conducted on her to determine the extent of her ailment. We found that her blood count because she had HELLP syndrome and she had difficulty breathing. It is practice and norm to put such patients on an oxygen mask and a tube inserted through her throat. Conventionally, such medical operations may be emotionally disturbing to family members to experience first-hand. As such, I politely asked the husband to wait in the visitor's bay as the operation went by. This provided an opportune moment for me to inquire about the medical history of the patient so as to get the most critical information that would assist us to obtain the necessary remedial procedures.

So an oxygen tube was put in her. Almost immediately she coded, and we had to perform numerous resuscitation sessions to ensure that we got her back on medication. All this time, we, as the medical attendants took turns to counseling the husband and helped him hold the baby for him due to the emotional strain that he was experiencing. In the waiting bay or room, I got the opportunity to inquire from the husband the events that led to the prevailing condition of the wife being in the ER as an emergency patient. The husband explained that she had delivered about a week ago and had developed difficulty in sleeping and was somewhat restless. Thus, the husband assumed that it was pain and strain during delivery and opted to take the time to nurse the baby during that time. On that fateful morning, he said that he tried to wake her up but she could not move, and so he tried to shake her to no success, and that was what prompted him to bring her to the health facility. I then left him in the waiting bay and went to join the other medical attendants although I felt guilty leaving him there alone. However, I had to share the information with the doctor for the relevant action.

Unfortunately, we lost the patient after we had done all that we could. To be truthful, that was one of the saddest moments in my life, because of the gap that the young mother had left in her family and the emotional strain that we experienced. I remember thinking about the gap that the thirty-year-old mother of the week old baby had left, and a cloud of grief engulfed my thoughts. Instinctively, the sadness was shared by the all medical attendants and doctors who had tried to assist the patient during her last moments here on earth.

However, after that painful ordeal, we embarked on our work to assist other patients in the ER regardless of the sadness and pain that we had experienced. Shockingly, the husband came back to thank me for the work we had done to try to revive and treat his wife. I was deeply humbled and honored by that gesture because I felt as though we had failed because the patient died. Instead, the husband noticed the resilience and zeal that we put forth and appreciated us for it. From that day, I rededicated my zeal and determination to medicine and assisting other people to go through the hardships that such transitions bring. Also, there is a great deal of reward and fulfillment in knowing that one is helping another person.

As such, it is always an inspiration to assist families to deal with the sadness and eventualities of transitions of life. In theory, it may be easy to counsel or support a family to adjust to the medical situations such as a paralyzed person or helping them to come to terms with the eventualities of such occurrences.

Specifically, during the sad ordeal above, I felt that I would have done more if there was something better that I could have known to offer to the patient and the whole family. The only way I can learn about such skills is by furthering my skills and expertise in the medical fraternity with a skewed focus and interest in PA and ER extensionally. I must also express satisfaction and feeling of pride that I enjoyed when the husband of the patient came to thank me for the efforts and work I had done. It was reassuring to appreciate that the work that we did was not in vain regardless of the outcome. Intuitively, there are other patients who would require my assistance or medical attendance. Thus, regardless of the outcome, I am strengthened to continue with my zeal and determination as a PA so as to offer assistance to the patients and their families by extension.