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## A Career of “Why?” and “Why Not?”

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*2011 Distinguished Researcher Award*

I am deeply honored by the Oncology Nursing Society's Distinguished Research Award. To my nominators and supporters, saying *thank you* seems woefully inadequate. Without my involvement with the Society, I certainly would not have been able to become the researcher I am today.

I would like to dedicate this article to Ellen DeBondt, my former oncology nurse colleague at the Seattle Cancer Care Alliance. At seven o'clock in the morning on March 6, 2011, as Ellen was going to do her excellent work as a nurse, a drunk driver crossed the line and smashed right into her car, taking Ellen's life. She and I had worked together clinically and on her literature review and poster presentations for Congress regarding use of medical marijuana. A second dedication is to Lloyd Kitchens, Jr., MD. He sparked my fledgling interest in medical treatment of cancer and was the first oncologist with whom I established a strong working partnership. Sadly, he passed away in 2001. Finally, to my mother, who passed away when I was three. She wanted to be a nurse and because of restrictive rules in schools of nursing at the time regarding married students, she did not achieve her dream. When I first began to talk, my mother transcribed my first words in my baby book, “What's that?” My destiny as an investigator unfolded from that point on.

**T**o get through college, I had to work full-time; as a pharmacy clerk, I started asking many “why” questions. The pharmacists I worked with were thrilled to have a clerk in front of them that was interested in the medications we dispensed. Finally, I was able to care for hospitalized patients in the summer between my junior and senior year, and I was asking, “Why is adriamycin red, and why do you have to give it that way?” Dr. Kitchens would take me on his late rounds as he gave all the IV push chemotherapy—in those days, nurses did not give IV push chemotherapy in the hospital. I would say, “Why do you do it like that,

and how does that work?” And as we rounded on each patient, he would fill my head with answers to my questions.

After I graduated in 1978 with my BSN, I stayed on at Baylor University Medical Center in Dallas. The next year, we opened the first oncology unit. One of my biggest questions was regarding chemotherapy-induced nausea and vomiting. Our brand new, beautiful oncology unit was designed with a hub and spokes layout and it was a really long way to the end of that hall. So many call buttons were ringing and our patients telling us, “I'm really sick.” We would grab our syringes and we would run down the hall, give the Phenergan® (promethazine) and it didn't help. I'm thinking, “Why are we waiting until they are calling us to say they are so sick? Why are we waiting? Why not prevent that nausea and vomiting instead of treating it after it happens?” And so I'd sit in the nurses' station with the oncologists and I'd say, “Why aren't we doing this differently?” And they'd say, “OK, Donna; the order is ‘as needed to prevent or manage nausea’ and you can give it.” And then they said, “Donna, go to graduate school.” Maybe they were getting tired of me asking them all the questions, and they said, “We don't have the answers. The research-based answer doesn't exist. You need to go to graduate school, and then you can ask these questions.”

So, I went to the University of Texas Health Sciences Center in Houston. I was very bright-eyed, and I was asking a lot of “why” questions. I met Karen Heusinkveld, who became my thesis chairperson. I said to Karen, “Why not do a randomized clinical trial for my thesis? Doesn't everyone do that?” And then while I'm at it, why not do a double major? So, not only was I an oncology clinical nurse specialist major, I was a nursing education major at the same time. Why not? But then I was thinking, why am I lonely? There's something missing. Why not have a baby? And then, what is that Oncology Nursing Society (ONS) all about? Those were my