

My Mission Experience: Through the Eyes of a Child

By Carson Feix with Brooke L. Gildon

In John chapter 9, we read about Jesus walking along the road and passing a blind beggar. Always quick to speak, His disciples blurt out a question in an attempt to understand the man's blindness – "Rabbi, who sinned, this man or his parents, that he was born blind?" (John 9:2, ESV). In biblical times, there was a popular Jewish belief that all suffering was a result of something sinful that the person had done, or perhaps a sin that their parents or ancestors had committed. This was the only explanation the disciples could fathom for lifelong blindness, hence their question to Jesus. Although we have a more scientific understanding of such matters in modern times, humans have always had difficulty coming to terms with disease, sickness, and disability. Jesus delivered a response to the disciples' question that had a much larger, more transcendent focus. He made it clear that this man's blindness was not a result of any sin. He explained that the man was blind "but that the works of God might be displayed in him" (John 9:3, ESV). In this beautifully worded answer, Jesus takes a concept we struggle to understand and uses it to give us a glimpse into the heart of God.

At The Children's Center Rehabilitation Hospital (TCCRH) in Bethany, Oklahoma, we rejoice in the hope of Jesus's words in

to help the orphans of the surrounding area, and so the Oklahoma Orphanage (for more information go to <https://www.miracleshappenhere.org/about-us/our-history/>) was started. Over the years, the name and the mission of the orphanage has changed; but the primary focus on the well-being of children has always followed Mattie's basic principles of faith, hope, and love. Because of her belief in these principles and faithfulness to her calling, Mattie's orphanage evolved in a way that best served the community around her. The Hospital has served as an orphanage, a home for children with polio, and a children's convalescent hospital prior to its current mission as a private non-profit hospital serving children with complex medical and physical disabilities. As an extension of Mattie's passion so many years ago, TCCRH remains dedicated to maximizing the potential of all its children.

Today, TCCRH plays a vital role in the healthcare system by working with pediatric patients to facilitate a transition from hospital to home. Children receive medical treatment, rehabilitation, and education to help them make progress in reaching their personal goals. The complex care unit houses 100 beds with an average stay of 24 months.



John 9 and we seek to play a part in God's work. Our local mission field consists of medically complex pediatric patients. When we come to work, we are always reminded of an exemplary missionary to follow. While passing through Oklahoma City on a train in 1898, Mattie Mallory felt called by God

The pediatric rehabilitation unit is a 20-bed unit that serves the children of Oklahoma and surrounding states whose injuries are more acute than the complex care patients, but require significant rehabilitation that a traditional hospital cannot provide. Lastly, the outpatient services provide

comprehensive treatment ranging from general pediatrics to advanced medical care. In settings throughout TCCRH, a multidisciplinary team approach is used to optimize patient success, and pharmacy is an integral player in this mission.

The history of the pharmacy department within TCCRH is much shorter. Prior to 2014, all medications and pharmacy resources were supplied by an external pharmacy that focused on the long term care industry. However, as the needs of the hospital changed, it was determined that an in-house pharmacy and pharmacy staff were necessary to best serve patients. In April 2014, a state pharmacy license was granted, and approximately six months later the pharmacy was providing most of the patient's medication needs. With a starting staff of two pharmacists and one technician, medication delivery was converted from bingo cards and stock bottles to patient-specific unit dosing.

Within three short years of operation, the pharmacy today has grown to employ five pharmacists, five technicians, and one pharmacy intern; it also serves as a training site for pharmacy students. The pharmacy staff has led a number of patient safety initiatives such as a conversion to bar code medication administration, medication error reduction measures, and the creation of an antimicrobial stewardship program, to name a few. In 2016, the Director of Pharmacy was awarded the Spirit of Improving Patient Safety by the Oklahoma Hospital Association for these endeavors. On average, the pharmacy dispenses 16,000 medication doses per week, with a large number being liquid medications in pre-measured and individually-labeled syringes. The majority of children are unable to swallow a tablet or capsule and many receive their medications through enteral feeding tubes. This leads to significant extemporaneous compounding of liquid medications, which further highlights my mission as a pharmacy intern by leading our compounding process in finding formulations, mixing ingredients, and ensuring proper documentation and compliance. In taking ownership of this, I use compounding to fulfill my mission of sharing the love of Christ through medications and the healing and prayer that goes along with them.

By its nature, compounding requires personal attention to the needs of patients. For example, I have had the opportunity



to compound suspensions of tadalafil for children suffering from pediatric pulmonary hypertension and clonidine suspensions for the tiniest babies to treat neonatal abstinence syndrome. One specific situation is a neonate who was exposed to an addictive, illegal substance from her mother during pregnancy. I had the chance to contribute to methadone and clonidine tapers for this child to slowly decrease the baby's dose over time and prevent withdrawal symptoms. Over a number of weeks, the child was successfully discharged from the hospital without medication requirements. Praise the Lord!

Through my time at TCCRH, my eyes have been opened to a new patient population I had never experienced before. I have been amazed at the joy that fills the hallways of the hospital, even though the children face such difficult circumstances. It is hard to explain that joy to people who have never experienced it for themselves. I have gained so much appreciation for the power and value of the will and the spirit of a person, even when the body is afflicted. It is such an easy temptation to fall back onto self-reliance when things go well for us, yet I am reminded by the children at TCCRH that the most important things in life have nothing to do with physical circumstances.

One of the most difficult lessons for me to learn is that even with the best medicine available, healing is ultimately beyond our control. This struggle leads me to a newfound reliance on prayer and submitting my powerlessness to God. Prayer is an essential foundation of the hospital's mission, and there are countless people praying for the children every day. The staff collectively prays that every child would be physically healed and we work with that goal fully in mind. But even if a child is not fully healed, the staff prays that Christ may be revealed through the care that is provided. This is done by acknowledging the inherent dignity in each child made in the image of God, and by remembering that every soul has a need to experience the eternal Gospel that transcends even the most extreme physical needs.

The heart of God longs for restoration of both body and soul. Through words, prayer, and actions, the pharmacy at TCCRH is dedicated to serving this purpose through the use and stewardship of medicine so that healing may result in lives changed for His glory. I am truly blessed and honored to be part of the pharmacy team at TCCRH.

In the story of the blind man in John 9, we see the power of healing and how an outward sign can lead to an inward conversion. In

his response to being questioned by the authorities, the man simply said, "One thing I do know, that though I was blind, now I see." (John 9:25b). May this be the testimony of the patients at TCCRH. And in the sense of spiritual blindness, may the testimony of the blind man be theirs and ours as well.

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