



By Cathy Cassata

fter working in primary care for four years, in 2019 Grace Barnes Chavous, CMA (AAMA), felt a calling to work in oncology. "At the time, my fiancé was deployed, and I was living at home with my parents, and I knew that when he came back, we'd get our own place. I was ready for a new start," she says.

For years, she aspired to work at Augusta University in Georgia, so she visited their career website. Happy to see an opening for a medical assistant in oncology, she immediately applied. "Within 24 hours, I had the job," says Barnes Chavous. "I feel like it was a godsend."

She worked in the infusion suite, taking care of patients who received chemotherapy by drawing blood and monitoring for adverse reactions to treatment. "I would see some patients a few times a week and became close to them. Some felt like family," she says.

She connected with many patients and recalls one woman who left a lasting impression. While receiving treatment, the patient became unconscious. Barnes Chavous called over the attending nurse who gave the woman a sternal rub. However, when that failed, the nurse told Barnes Chavous that CPR was necessary. As a Basic Life Support instructor, Barnes Chavous did not hesitate.

"I jumped into action, and it was chaos around me, but I drowned everything out and focused on the patient and kept saying 'Not today; not on my watch,' " she remembers. After administering a couple cycles of CPR and compressions, the woman responded right before the ambulance arrived. "I was so happy she got to live another day," says Barnes Chavous.

Today, Barnes Chavous spends her days on the practice side of the oncology clinic taking patients' vital signs, preparing them to see the physician, and patient screening. She also assists with procedures in various specialties of the clinic, including Papanicolaou tests (i.e., Pap smears), biopsies, bladder scans, cyst scopes, and administering ECGs.

While she keeps a positive perspective,

she has experienced many difficult and sad days working in oncology, such as when she sees patients pass away, their treatments fail, or on the practice side, receive a terminal diagnosis or prognosis. "It's heartbreaking hearing the emotional side of how patients process it all," says Barnes Chavous.

However, witnessing patients ring the bell—which signifies the completion of their cancer treatment—recenters her and brings her hope. "It's so rewarding to see them finish their chemo or when they come back for a follow-up and they're cancer-free," she says. "It reminds me that my purpose is to come to work every day and help patients during this difficult time."

Reassuring feedback from patients confirms that she is successfully living out her purpose. "I have a lot of patients tell me that my personality and compassion make them feel good and is a bright spot during their storm of fighting for their life," she says.

Even when she is going through a tough time herself, she pushes herself to stay uplifting for patients. "I know what they're going through is often the most difficult thing they've ever faced," she says. "If I can be a light in their dark day, then I'm doing my job."