

vanderbiltnurse

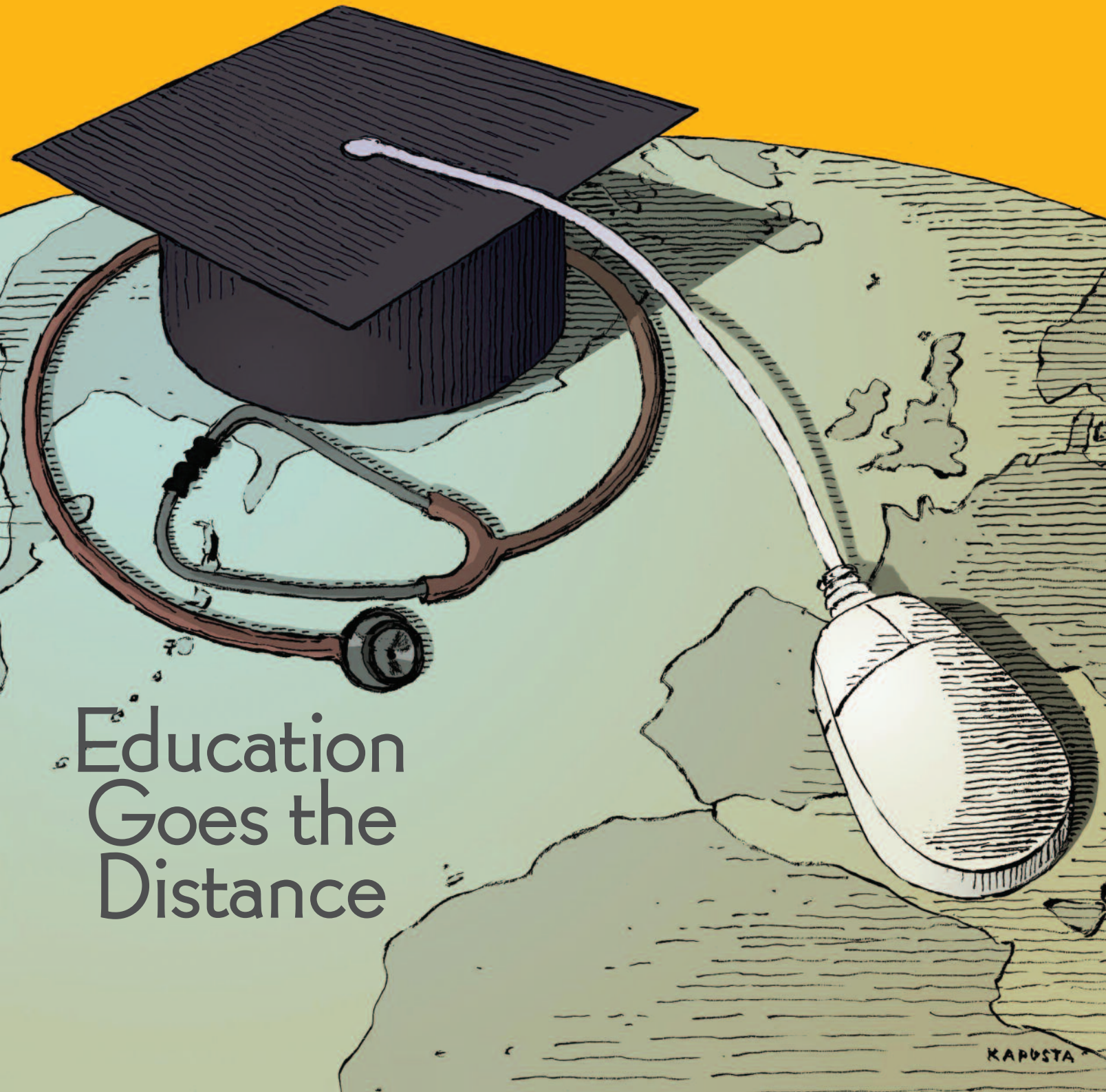
SPRING 2008

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Education
Goes the
Distance

KAPUSTA



dean's note

It has been a wonderful several months that have merged the past with the future. We have been researching our illustrious 100 years of educating nurses and are preparing for a yearlong celebration. At the same time, we have received approval to offer a Doctor of Nursing Practice degree via “blended” distance learning starting this fall and are delighted at the opportunities this will give clinicians and managers/administrators. We also completed the self study and site visit portion of our NLNAC accreditation and anticipate eight more years of accreditation.

Things are busier than ever. Our enrollments within the M.S.N. program continue to grow. We are also looking at opportunities for future collaborations with the University of Botswana School of Nursing. The Middle Tennessee Medical Reserve Corps, sponsored by VUSN, was deployed in February in the aftermath of the tornadoes that struck Middle Tennessee, and our faculty and students continue to be an important face of Vanderbilt throughout the community. We also began admitting Ph.D. students annually, beginning fall ‘07, instead of biannually.

In this issue of *Vanderbilt Nurse*, we show you exactly how far and wide the School of Nursing reaches. Learn how a partnership with Vanderbilt is helping a Sioux Falls, S.D., medical center educate neonatal nurse practitioners and changing lives in the process. Enjoy meeting several of our current students who have opted for our blended format for their education. Col. Kelly Wolgast and Col. Diana Ruzicka are two of our alums, dedicated soldiers and nurse leaders in charge of the biggest Army hospital in the Colorado Rockies; they share their insights on their careers and their commitment to take care of our troops. See how Laura Beth Brown is a shining example of a nurse who has grown in the political process to become an effective advocate for nurses throughout Tennessee and beyond.

There are also many updates about our Centennial Celebration, with a closer look at our speaker's bureau that will run throughout the year.

I hope you enjoy this issue and let me know any comments you have on this or future magazines. Please look for updates about the School and our Centennial in the mail, via e-mail and on the Web.

Sincerely,

Colleen Conway-Welch, Ph.D., C.N.M., F.A.A.N., F.A.C.N.M.
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MISSION AND VALUES
STATEMENT

We value excellence and innovation in preserving and advancing the art and science of nursing in the scholarly domains of education, research and practice. These values are pursued through the integration of information technology and faculty-student interactions and transactions, while embracing cultural and academic diversity.



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Vanderbilt Launches D.N.P. Program

Increased health care complexity, technology and knowledge growth, patient safety issues in the national arena, and quality improvement call for fundamental changes in health care education. That's why the Vanderbilt University School of Nursing has been working for two years to develop a Doctor of Nursing Practice (D.N.P.) program. The School's newest offering received final approval by the University Board of Trust and Medical Center Board. The program plans to enroll students in Aug. 2008. School administrators are hopeful they will be able to enroll candidates this fall.

"Practice doctorates have been in place for many health care disciplines for years," said Linda Norman, D.S.N., R.N., senior associate dean for Academics. "But nothing like this terminal degree has existed for advanced practice nurses before, and we are very excited about moving forward."

In 2004, the D.N.P. was initiated by Dean Mary Munding at Columbia

University and endorsed by the American Association of Colleges of Nursing (AACN) and by the National Organization of Nurse Practitioner Faculties (NONPF). In 2006, the work of developing the Vanderbilt program began.

"Doctoral programs in nursing have traditionally been research-focused," said Donna McArthur, Ph.D., R.N., program director. "The D.N.P. program is different because it is practice-focused, following in the trajectory of other well-established practice doctorates like psychologists, medical doctors and dentists."

The Vanderbilt D.N.P. student will use evidence-based practice and management methods within clinical settings throughout the program. The curriculum was designed around the competencies outlined in The Essentials of Doctoral Education for Advanced Practice Nursing (AACN, 2006) and will encompass five semesters (part-time) that blend onsite mentored immersion experiences at the beginning of each semester with online synchronous and asynchronous course delivery methods – reaching out to advanced practice nurses who want to

work while advancing their education in both direct and indirect care. The format is conducive to those in rural areas where relocation and full-time study is frequently impossible for local and advanced practice nurses.

D.N.P. program graduates will be leaders in developing practice innovations, and working as expert clinicians with diverse populations in community and academic settings, thus impacting both nursing and faculty shortages.

"We appreciate the support of the university and the faculty in launching this program," said Norman. "We have received hundreds of unsolicited inquiries about the availability of a program like this and know our curriculum will meet an important need."

Initially, the entry level to the D.N.P. program will be post-master's. McArthur anticipates 30 candidates enrolling this fall with the program growing to 50-plus students by year five.

– KATHY RIVERS

For more information on this program, please visit www.nursing.vanderbilt.edu.

VANDERBILT SCHOOL OF NURSING PARTNERSHIPS WITH LIPSCOMB AND FISK FLOURISH



KRISTI JONES

Vanderbilt-educated Lipscomb students await the beginning of the December graduation ceremony. (left to right) Melissa Lowe, Ali Martin, Leslie McCarty and Patricia Paez.



KRISTI JONES

Elisabeth Riley, graduate, and Geri Reeves, director of the Lipscomb/Vanderbilt Nursing Partnership, pose during the ceremony.



DANIEL DUBOIS

HONORING ETHERINGTON

More than 200 people came to honor Vanderbilt University Distinguished Alumna of 2007 Carol Etherington, M.S.N., left, assistant professor at the School of Nursing, who has focused her career on helping people around the world in the aftermath of trauma for more than 30 years. With Etherington is Karen Fesmire, president of the Vanderbilt University Alumni Association.



GOING POSTAL

Look for the Centennial stamps on any items you receive from the School of Nursing. We have created our own U.S. postage stamps as part of our yearlong celebration and hope you enjoy them.



The Fisk / Vanderbilt Partnership celebrated new students joining the program with a stethoscope ceremony. Pictured (left to right) Musiliat Bankole, Folasade Bamgbelu, Yetunde Ogunnaike, Cherise Carpenter, Beatrice Adewoye, Khadijah Razzak, Leann Maxwell and Jeannetta Jackson.



NEIL BRAKE

HOBEEKA PURSUES DUAL DEGREE

Mary Hobeika is pursuing her M.S.N. and M.B.A. in a dual degree program offered by the School of Nursing and the Owen Graduate School of Management.

She is a wife, mother of two young children and an intensive care unit nurse. Hobeika earned her baccalaureate in 1995 and has been a registered nurse for 12 years, most recently at The Vanderbilt Clinic. She thinks the combination of clinical and business education will help her make a difference in health care.

"I went into nursing because I thought it was the best way to make an impact on more people," said Hobeika. "Now I want to take that holistic approach and combine it with a business education so I can be a part of fixing some of the things that are not working in health care."

She is committed to focusing on the human component of health care and dealing with accessibility and cost issues associated with providing quality care to those in greatest need. She hopes to become a hospital administrator and, perhaps one day, a chief nursing officer.

- KATHY RIVERS

"HOT OFF THE PRESS" THIS SPRING . . .

The School of Nursing Centennial "coffee table" book is at the printer. The book covers the 100-year history of the School through pictures and text including personal recollections from Luther Christman, Sara Archer and Colleen Conway-Welch in addition to the stories from alumni, faculty and friends of the School. The book is dedicated to Emeritus Faculty member Lou Donaldson, who died in 2007 and was the author of the book chronicling the first 75 years of the School's history. Information on how to purchase your copy will be posted on the Centennial Web site later this spring.



SCHOOL PLANS FRIST HALL EXPANSION

As the School continues to enroll record breaking class sizes and grow its infrastructure, plans are under way to expand Frist Hall with two new floors to the existing structure. The 14,796-square-foot addition will house additional faculty offices and simulation labs. Construction is scheduled to begin in early 2009.

100 YEARS - 100 LEADERS

Vanderbilt University School of Nursing alumni have begun to celebrate this extraordinary century by submitting nominations for the 100 Years - 100 Leaders honorees – School alumni or faculty who have made a significant and exceptional contribution to nursing, health care or leadership. These individuals will be honored at the Centennial Gala and recognized in the program.

SAVE THE DATE

As we mark the Centennial milestone, help us celebrate the tremendous impact Vanderbilt School of Nursing has had on the advancement of nurses, the prestige of the University and the health of millions of people.

Join us on Thursday, Oct. 23 (Reunion Weekend), for a Gala honoring the School of Nursing's Centennial.

Place: Loews Vanderbilt Plaza, Nashville, Tenn.

Time: Reception at 6 p.m.
Dinner at 7 p.m.

Visit the Centennial Web site, www.vusn100.vanderbilt.edu, for details on the evening.



If you haven't received our Centennial post card updates with important information about upcoming dates and activities, please contact Betsey Usher, Centennial coordinator, at betsey.usher@vanderbilt.edu or (615) 322-4836. Also, if you can identify any of the six nurses in the lead, please let us know.

Announcing the Vanderbilt School of Nursing Centennial Lecture Series Presented by the family of Ann Schuh Taylor (B.S.N. 51)

The Centennial lecture series kicks off this fall with the following list of speakers scheduled to participate. Dates, times and locations are being confirmed. Please check the Centennial Web site at www.vusn100.vanderbilt.edu for the latest information.



Clayton Christensen, D.B.A., is the Robert and Jane Cizik

Professor of Business Administration at the Harvard Business School, with a joint appointment in the Technology and Operations Management and the General Management faculty groups. His research and teaching interests center on the management issues regarding development and commercialization of technological and business model innovation. Specific areas of focus include developing organizational capabilities and finding new markets for new technologies.

Christensen is the author of the bestselling books "The Innovator's Dilemma" (1997), which received the Global Business Book Award for the best business book published that year, "The Innovator's

Solution" (2003), and "Seeing What's Next" (2004). Most importantly, he sees advanced practice nurses as disruptive technology.



Donald Berwick, M.D., M.P.P., is president and chief executive officer

of the Institute for Healthcare Improvement, a not-for-profit organization leading the improvement of health care throughout the world and cultivating innovative concepts for improving patient care and putting those ideas into action. He is Clinical Professor of Pediatrics and Health Care Policy in the Department of Pediatrics at the Harvard Medical School and Professor of Health Policy and Management at the Harvard School of Public Health. Berwick has published more than 130 scientific articles in professional journals on subjects relating to health care policy, decision analysis, technology assessment and health care quality management. Berwick has been a friend to nursing for many years.



U.S. Rep. Jim Cooper, J.D., has been an attorney and investment banker and is currently serving his third

term as U.S. Congressman for the 5th District of Tennessee. Cooper, who represented Tennessee's 4th Congressional District from 1983-1995, teaches health policy at the Vanderbilt Owen Graduate School of Management. A leading voice in Washington on fiscal policy, health policy and government accountability, he serves on the Armed Services Committee, the Budget Committee and the Oversight and Government Reform Committee. He is chairman of the Armed Services Committee Roles and Missions Panel and has always supported nurses as an integral part of solving the nation's health care challenge.



Martha Hill, Ph.D., R.N., F.A.A.N., is Dean of the School of Nursing

and Professor of Nursing, Medicine and Public Health at Johns Hopkins University. She served as the president of the American Heart Association from 1997-1998 – the only non-physician to serve in that role. She is a Fellow of the American Academy of Nursing and a member of the Institute of Medicine (IOM) of the National Academy of Sciences. Currently she serves on the IOM Health Board on Health Sciences Policy and served as the liaison

to the Committee on the Review and Assessment of the NIH's Strategic Research Plan to Reduce and Ultimately Eliminate Health Disparities. Hill is internationally known for her work and research in preventing and treating hypertension and its complications, particularly among urban African-American men.



Lt. General Russel Honoré

has served in a variety of command

and staff positions focusing on Defense Support to Civil Authorities and Homeland Defense. Perhaps best known for his role as commander of Joint Task Force-Katrina, Honoré led the Department of Defense response to Hurricanes Katrina and Rita in Alabama, Mississippi and Louisiana, where he recognized the contributions of nurses to the aftermath of the tragedies. He also planned and supported the United States military response to the devastating flooding which swept Venezuela 1999 and Mozambique in 2000. He also oversaw the military response to the Space Shuttle Columbia Tragedy and the Washington, D.C. Sniper Shootings.

Be sure to check the Web site as speakers continue to be added.

For more information, go to www.vusn100.vanderbilt.edu.

Beverly Cosley, manager of BCBS Health Foundation Tennessee Connections for Better Birth Outcomes, visits the NICU at the Monroe Carell Jr. Children's Hospital at Vanderbilt. Left: William Walsh, M.D., left, Pat Temple, M.D., Kevin Churchwell, M.D., CEO of the hospital and Cosley visit a patient room. Right: Cosley, left, Melanie Lutenbacher, Ph.D., and Walsh discuss the program's progress.

NEIL BRAKE



NEIL BRAKE



A Step Toward Preventing Premature Births

Babies born very early, like those struggling in the Neonatal Intensive Care Unit, can start life with severe disadvantages, including serious medical problems and difficulty learning, seeing and hearing.

A Vanderbilt University Medical Center research project, Tennessee Connections to Better Birth Outcomes (BBO), is one of many initiatives that incorporates prenatal care – and in this case the extension of the care of children to even before conception – into the mission of the Monroe Carell Jr. Children's Hospital at Vanderbilt.

Patricia Temple, M.D., professor of Pediatrics, and Melanie Lutenbacher, Ph.D., A.P.R.N., associate professor at Vanderbilt University School of Nursing, are currently supervising the enrollment of 300 women in the four-year BBO project, funded by a \$2.48 million grant from BlueCross BlueShield of Tennessee Health Foundation.

Women are randomized into two groups – half into the System of Care (SOC) group and half who don't receive SOC, but are given routine prenatal care and interviewed 13 times over 20-24 months.

The SOC is based on the best evidence available, combining medical and biobehavioral interventions expected to

reduce premature births and delay subsequent pregnancies in women with a history of preterm births.

Women in the SOC group benefit from usual prenatal care in the clinic alternating with home visits from a nurse-midwife, Lynn Wilkening, C.N.M. The women in this group also benefit from the postpartum component of the project. The Tennessee Nurses for Newborns organization, a home nurse-visiting agency, will follow the mother and her infant for the first 18 months of life. Temple is the medical director of Nurses for Newborns.

Mothers who can enroll in this project have had at least one premature baby, the group at highest risk for a recurrence.

Premature babies are those born prior to 37 weeks. Nationally, Tennessee ranks 48th in infant mortality and 47th in preterm births. In 2003 there were 8,900 births in Davidson County. Of those, 1,000 were premature.

The challenges and costs of caring for a premature baby can be overwhelming. On average, premature infants stay in Vanderbilt's Neonatal Intensive Care Unit (NICU) 20 days, incurring charges of \$94,000 per infant. Stays can range from a few days for closer-to-term infants to several months for more preterm infants.

"I see babies in the Peds clinic for a visit – they've been in the NICU for three

months, they're coming in with an oxygen tank, barely functioning at a 1-month-old level, and they're starting out life with so many disadvantages...we feel like we have an evidence-based strategy that can prevent this," Temple said.

Lutenbacher said the goal is to help women enrolled in the SOC group to have both a healthier delivery and a better outcome after the pregnancy.

"It's a two-pronged approach: dealing with the current pregnancy, but also trying to help the woman in a larger global way, helping her with her plan for the future."

Temple said one of the contributors of a premature birth is the mother's health before she gets pregnant. "Anemia, diabetes, hypertension, infections – these all underlie why moms have premature births."

Lutenbacher said the home visits are beneficial for another reason – giving the provider a birds-eye view of the expectant mother's home situation. "When you see a patient at the clinic, she is putting her best face forward, and you don't always know what their home environment is like."

Temple said she and Lutenbacher believe the project should help relieve some of the financial strain on the health care system since prenatal home visits can mean fewer preterm infants, fewer prenatal hospitalizations and fewer infant hospitalizations.

When the study is complete, the SOC group will be compared with the group who received no intervention.

"Our expectation is that we'll see a difference in the groups, and that those in the SOC group will have better outcomes," Lutenbacher said. "At that point, we would have a prototype for a program that can be replicated."

– NANCY HUMPHREY

Updates from School of Nursing Post Doctorates

Stewart Bond, Ph.D., R.N., A.O.C.N., is a research associate and John A. Hartford Foundation Claire M. Fagin Fellow. Collaborating with Vanderbilt-Ingram Cancer Center investigators, his research focuses on neurocognitive functioning in adults undergoing cancer treatment. He led a study launched in October 2007 to learn more about how cancer and cancer treatment affect neurocognitive functioning in adults with cancers of the head and neck, lung and esophagus.

Patients with newly diagnosed cancers of the head and neck, lung, or esophagus are recruited at Vanderbilt-Ingram. After providing consent, participants complete interviews before starting cancer treatment, at scheduled treatment visits, and three months after finishing cancer treatment. Each interview consists of a series of questions that evaluate neurocognitive functioning, physical functioning, symptom prevalence and distress, and mood states. Bond and his research team will enroll 100 participants over the next year.

Bond's study will determine the extent of neurocognitive problems before, during and after treatment, and identify if there are certain patient groups who are most adversely affected. It will also begin to

explore contributing factors and associated outcomes, and provide a foundation for future epidemiological and intervention studies in this area.

Bond was awarded a two-year, \$120,000 Claire M. Fagin Fellowship from the John A. Hartford Foundation to support his research and postdoctoral training.

Anne Miller, Ph.D., B.A., R.N., has completed two research studies focusing on communications in clinical settings. The first is a preliminary study on inter hospital patient transfers, focusing on the transfer process itself. The study describes the process and support technology used to transfer neonatal intensive care patients from metropolitan and rural hospitals to the Monroe Carell Jr. Children's Hospital at Vanderbilt. The data shows that patient transfers are complex, highly choreographed processes involving three leaders and multiple modes of technology and suggests future research into this area.

Her second study focuses on communication in a trauma intensive care unit and illustrates important principles of complex clinical communication. It is based on observational and interview data from a bedside nurse, charge nurse, resident and a fellow during a 12-hour period in a Vanderbilt University Medical Center's trauma unit.

– KATHY RIVERS

SCHOOL SPONSORS THE "BUSINESS OF BEING BORN"

Nearly 400 people attended the Nashville screening of Ricki Lake's "The Business of Being Born," a documentary that examines and questions the way American women have babies. The special showing was sponsored by the Vanderbilt University School of Nursing and was free to the public.

"A big part of what we do as nurse midwives is about education," said Michelle Collins, M.S.N., C.N.M., midwifery instructor at the School of Nursing. "Childbirth is not one-size-fits-all. There are a wide variety of birthing options available, and learning about other experiences, as in this film, helps empower women to make their own birthing decisions."

The 84-minute film followed the director, Abby Epstein, through her pregnancy and delivery. The film included intimate birth stories with surprising historical, political and scientific insights and shocking statistics about the current maternity care system. The overriding question the film brought to the forefront was whether births should be viewed as a natural life process or treated as a potentially catastrophic medical emergency. For more information about this film, log on to TheBusinessofBeingBorn.com.

– KATHY RIVERS

Colleen Conway-Welch meets with Naomi Seboni.



NEIL BRAKE

SCHOOLS OF NURSING COLLABORATE

Botswana is a country about the size of Texas and has great interest in educating nurses as the country addresses high HIV, malnutrition and tuberculosis rates.

Vanderbilt School of Nursing Dean Conway-Welch, Ph.D., C.N.M., and Senior Associate Dean for Informatics Betsy Weiner recently invited Naomi Seboni, Ph.D., R.N., head of Nursing Education for the University of Botswana, to Nashville for further discussions on possible collaborations between the two educational institutions.

Seboni and her faculty are faced with educating approximately 900 students each year and are looking at ways to expand the delivery of education as the country's health care needs continue to grow. The schools of Nursing are teaming up to develop and implement a comprehensive plan to ensure qualified and competent nursing care.

Discussion ideas included exploring faculty exchanges, determining mutual family nurse practitioner interests, collaborating on curriculum and sharing the Vanderbilt School of Nursing's expertise in blended distance learning formats.

– KATHY RIVERS

Helping Women Step Through the Next Door

Women leaving prison are receiving behavioral health and addiction recovery services as a result of a partnership between the Vanderbilt University School of Nursing and The Next Door residential recovery program. During the last three years, more than 400 formerly incarcerated women have participated in the six-month program focusing on recovery from co-occurring disorders to help them successfully transition back into society.

“These women come out of prison and are struggling with their newfound freedom, getting a job with a living wage and everyday challenges,” said Cindy Sneed, LPC-MHSP, chief clinical officer for The Next Door, Inc. “We provide wrap-around services ranging from case management and counseling to life skills that help them beat the odds of relapsing.”

One key to addressing those complex behavioral health issues is Susie Adams, Ph.D., R.N., program director for the School of Nursing’s Psychiatric-Mental Health nurse practitioner program. Adams and Sneed collaborated to develop this agency as a clinical placement site. As a result of client needs, the partnership also grew into on-site medical management.

“They get real-world experience and are treated as professional members of the overall health care team,” said Adams. “And with that comes responsibility, greater investment in this program and more rewarding educational experiences.”

New participants receive a thorough psychiatric evaluation by a group that includes psychiatrist Reid Finlayson, M.D., and School of Nursing alums Eydie Cloyd and Adrienne Hollis. New residents also receive intensive orientation and group counseling to help find and hold a job, develop life skills and move toward independence.

Every Tuesday starting at 5:30 p.m., the behavioral health care team comes to the facility and sets up an in-house clinic. The practitioners, paired with School of



Top: Lisa Cash, left, a former participant who became an employee for The Next Door, and VUSN’s Susie Adams.

Bottom: Support and communication are important parts of The Next Door’s wrap-around services. (Left to right): Program resident Sherron Beard talks with nursing students Kersten Schmidt, Mary Carter under the supervision of Eydie Cloyd, psychiatric mental health nurse practitioner.

Nursing students, typically see eight to 10 patients an evening for psychiatric evaluations and medication management.

“We are seeing great success treating disorders together,” said Sneed. “Sometimes it’s hard to separate depression from alcoholism or work through the challenges of everyday life sober when you are used to medicating yourself with substances.”

Most of the clients have difficult histories prior to entering prison. A majority have been physically and /or sexually abused from a young age. The health care team sees many cases of post-traumatic stress disorder, depression or bipolar disorder, but relatively few cases of psychosis.

“These are women who are not typically embraced by society, but when you work with them you see they are trying hard to live clean, healthy and independent lives,” said Adams.

Second-year psych/mental health nurse practitioner student Mary Carter has gained much from her experience working at The Next Door.

“At first I would drive home overwhelmed by feelings that I need to solve all their problems,” said Carter. “Now I realize these women are incredibly strong. They have lived through things like prostitution and incest.

“My job isn’t to save them, it’s to help them see for themselves how strong they really are.”

The Next Door, Inc. opened a second residential facility this summer, specifically designed for women with children who also have co-occurring disorders. Adams recently earned her Ph.D. for research she conducted in collaboration with women in the program.

– KATHY RIVERS

Vine Hill Earns Federal Status

The Vine Hill Community Clinic and its four satellite sites have achieved status as a Federally Qualified Health Center (FQHC) by the U.S. Department of Health and Human Services.

The clinic was the flagship of the University Community Health Services (UCHS), a network of eight area health clinics, and the \$650,000-a-year, three-year grant will go toward expanding services at Vine Hill and funding other health outreach efforts.

“Achieving this designation opens many doors for our nurse practitioner and nurse midwife faculty to provide more services to more patients,” said Colleen Conway-Welch, Ph.D., dean of Vanderbilt University School of Nursing. “Bonnie (Pilon) and her team have worked with dogged persistence to achieve this status, and we are excited about what this means for the scope of care for patients at Vine Hill and other clinics.”

For the past 16 years Vine Hill Community Clinic has been largely funded by the School of Nursing as part of the school’s faculty practice and community outreach. With the advent of the FQHC funding, Vine Hill has officially severed all financial and business ties with the School of Nursing and operates solely as a UCHS clinic. School of Nursing faculty will continue to fill many of the primary care and specialty roles at the clinic under a professional services contract.

Bonnie Pilon, D.S.N., senior associate dean for Faculty Practice and chief operating officer of UCHS, and her team have been working toward FQHC status for nearly four years.



“We had to be a completely community-based organization, so part of the journey in pulling together the application was having the support of all Vanderbilt entities to let go of their official connections to Vine Hill,” said Pilon. “We also had to provide extensive documentation about the population we serve.”

Pilon cites support and expertise from the Tennessee Primary Care Association and other community health centers in Tennessee as a big reason the funding was ultimately awarded.

The grant will go to expand services at Vine Hill as well as throughout the UCHS system.

“Everything we have done has been strategic,” said Pilon. “This is exactly where we wanted to be. We have been so in debt that decisions like whether to update our weathered Vine Hill Community Clinic sign took a back seat to any funds that could go to patient care. We will continue to stretch our dollars, but those issues are a little easier to address now.”

– KATHY RIVERS

THE EXPANDED SERVICES INCLUDE:

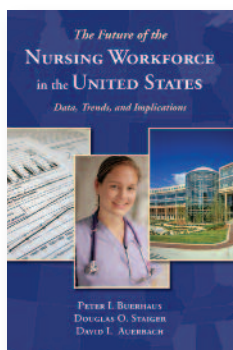
Vine Hill Community Clinic will offer dental services, additional mental health support, some podiatry care (for patients with diabetes) and offer office hours six days a week.

The Parthenon Towers site will expand operations to four days of primary care and one day of mental health care a week.

The Fall-Hamilton School will receive a full-time nurse practitioner.

The VandyCalls program, involving house calls by nurse practitioners in senior living areas, will add mental health services.

Obstetrical services, which were expanded under a state grant, will continue under the federal grant.



“The Future of the Nursing Workforce in the United States: Data, Trends and Implications,” co-authored by the Vanderbilt School of Nursing’s Peter Buerhaus, Ph.D., provides a timely, comprehensive and integrated body of data supported by rich discussion of the forces shaping the nursing workforce in the U.S. The book identifies and describes the key changes in the current nursing workforce and provides insights about what is likely to develop in the future.



OASIS CENTER

Each year, the Oasis Center and Vanderbilt School of Nursing unite to offer “Your Story Continues,” a monthlong program for foreign-born high school students. More than 70 students have participated in the program that includes three days focusing on nursing issues with tours of the Medical Center, health and wellness programs and hands-on exposure in the School’s simulation lab. This program has also spawned 14 high school students who continued their education to become nurses.

ISTOCKPHOTO



Writing and Surviving

Researchers are hoping to identify an effective, no-cost treatment for lymphedema patients. Thanks to a three-year grant by the American Cancer Society, Sheila Ridner, Ph.D., R.N., assistant professor of Nursing at the Vanderbilt University School of Nursing, and Ingrid Mayer, M.D., assistant Professor of Medicine at the Vanderbilt-Ingram Cancer Center and co-investigator, are testing expressive writing as a way to help alleviate some physical and psychological consequences of Stage Two lymphedema in breast cancer survivors.

“This is an important problem, and it’s not going away,” said Ridner. “We have a higher percentage of survivors, which means this is an issue we need to address.”

Lymphedema can also be a serious problem for survivors of prostate cancer, ovarian cancer and melanomas. Hallmarks of Stage Two in breast cancer survivors include constant swelling, physical changes in the limb and often a harder and larger affected area. Despite massage therapy designed to temporarily move fluid through the lymph system, this is a chronic condition that causes discomfort and emotional distress. Typical treatment does not involve psychological interventions.

Ridner and her team are studying, in a randomized clinical trial, the impact of expressive writing, an activity that she’s quick to point out is very different

than journaling. Expressive writing is dose-limited to 20-minute sessions, four times during a two-week period. A majority of the subjects participate from home using their own computers, but a few have opted to use traditional pen and paper. Participants share their personal experiences or detail living with lymphedema.

Participants receive an initial physical exam of the arm, symptom assessment, and a volume measurement of their arm. Assessments are repeated after one, three and six months to gauge any changes.

“Our goal is to give these patients a voice,” said Ridner. “Losing function in an arm or a leg is not acceptable, particularly among young people, and we want to change attitudes among health care professionals so that just surviving is no longer a good enough outcome.”

The study has recruited 48 of its needed 90 participants so far, and word is spreading. Despite having a requirement that subjects live within a 90-mile radius, the research team has had calls from interested survivors from Georgia, Florida, Ohio, Colorado and Indiana. Those involved in the study receive incremental compensation. They either visit Vanderbilt or are seen in their homes for their initial meeting and complete the remainder of the study from their homes.

– KATHY RIVERS

For more information on this study, visit www.lymphstudy.com.

Helping in the Aftermath of the Tennessee Tornadoes

Working with the Nashville chapter of the American Red Cross, Metro Nashville Office of Emergency Management and the Tennessee Emergency Management Agency, the Middle Tennessee Medical Reserve Corps (MTMRC) was deployed in Macon County, Tenn., in the aftermath of severe tornadic destruction of the Lafayette community in February.

“The physical damage was obvious,” said Colleen Conway-Welch, Ph.D., C.N.M., dean of the Vanderbilt University School of Nursing. “It’s what we can’t see that the network of MTMRC volunteers and partners addressed and the very thing that will help put the spirit of the community back together.”

The MTMRC’s medical response and chaplain sub Corps were deployed in several different capacities. Working with a community-based partner,

Centerstone Community Mental Health Center, the MTMRC is also assisted with mental health counseling in two shelters, churches and attending to first responder needs.

“People truly don’t think things like this are going to happen to them,” said Becky Stoll, director of crisis services for Centerstone. “I think it’s going to take a long time for these communities to heal from this trauma.”

The Centerstone/MTMRC relationship was established in preparation for unforeseen crises. Stoll believes the process has gone much more smoothly because of the partnership. She notes that at first they saw many victims who needed behavioral health services and a few days later saw more first responders who were coming out of operations mode and dealing with their response to the gravity of the situation.

The MTMRC chaplain corps was also dispatched to Macon County churches to help with grief counseling. At the

CORBIS



request of the Red Cross, the MTMRC and Centerstone provided nursing and behavioral health assistance – on premises and 24 hours a day.

The MTMRC is a volunteer organization housed in the National Center for Emergency Preparedness (NCEP) at Vanderbilt University Medical Center and the School of Nursing. It is comprised of more than 1,300 volunteers and organized in several different specialty corps under its umbrella. The purpose of the organization is matching expertise with need in times of natural or manmade crisis.

– KATHY RIVERS

DANA JOHNSON



A certified nurse midwife at Vine Hill measures and scopes a pregnant patient.

Centering Pregnancy Reaches Across Cultures

Pregnant Somalian and Hispanic clients at Vine Hill Community Clinic will soon have a new resource for prenatal care. The Vanderbilt University School of Nursing Nurse-Midwifery Faculty Practice was recently awarded a grant from the Tennessee Chapter of the March of Dimes to launch a Centering Pregnancy program, a model of care that brings women out of exam rooms and into a group setting with women of similar gestational age.

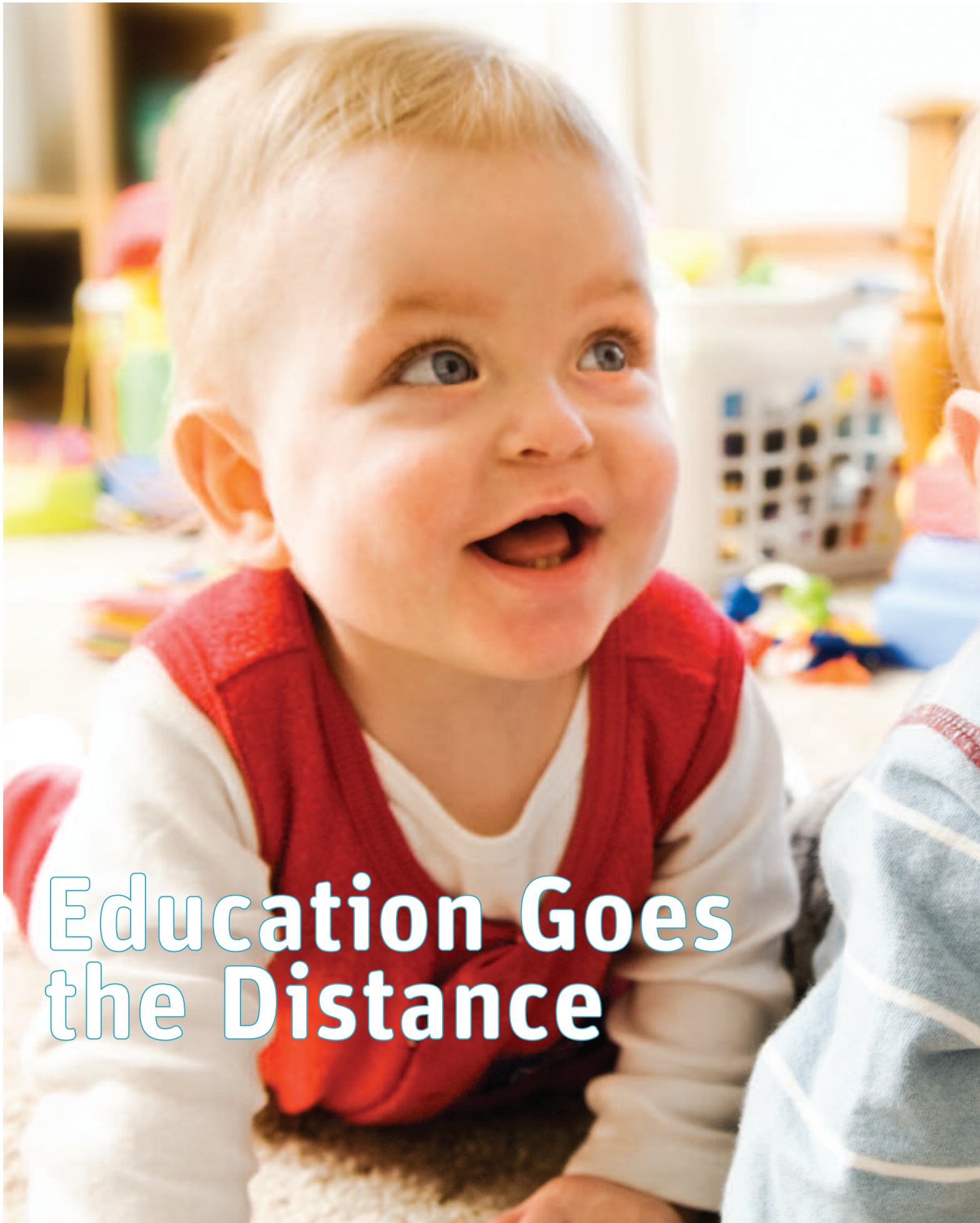
This educational model of care has been shown to reduce preterm birth rates and increase compliance with prenatal care. The School of Nursing’s nurse-midwifery practice at West End Women’s Health Center has offered the Centering Pregnancy model for several years, with both providers and clients highly satisfied with the group approach.

Bess Greevy, C.N.M., who joined the School of Nursing faculty practice in May 2007 and serves as a National Health Service Corps Scholar, spearheaded the grant effort.

“Centering Pregnancy provides a forum for prenatal care that incorporates culture and social group support, issues that can be difficult for immigrant families to maintain in the United States,” said Greevy. “We want to encourage women to be active participants in their prenatal care and empower them to better care for themselves and their families.”

The March of Dimes grant will fund additional staff, training and equipment purchases.

– KATHY RIVERS



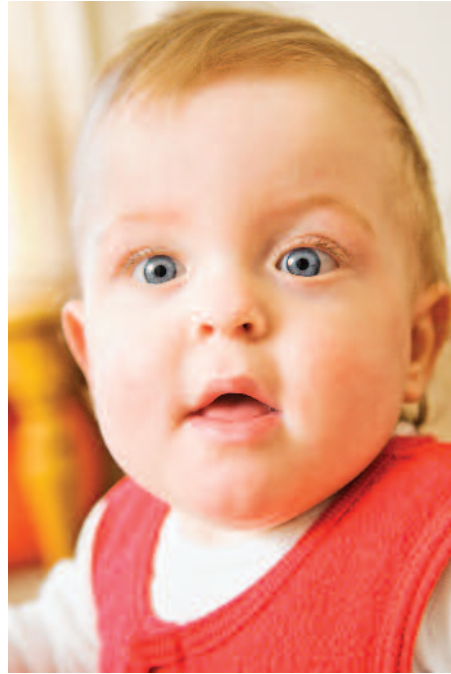
Education Goes the Distance



IT'S
NOT
SUPPOSED
TO
HAPPEN
LIKE
THIS.

All babies are supposed to go full term. Parents should leave the hospital with their new baby in their arms. No one should have to plan a funeral for their newborn. At least Bree and Scott Anderson thought that way until one Sunday in November 2006.

STORY BY KATHY RIVERS
PHOTOS BY JOE TRELEVEN



Logan, left, is very healthy and Carter, right, continues to fight respiratory issues. Both boys are active, curious and flourishing with the support from health care providers, friends, neighbors and family.

BREE AND HER HUSBAND WERE EXPECTING TWIN BOYS.

As the result of *in vitro* fertilization, they were put into a high-risk category despite their excellent health and being in their mid-20s. At the time, Bree was a busy elementary school teacher enjoying her pregnancy, imagining life with twins and preparing for their March 10, 2007, due date. She had just read about how 24 weeks marked the point where babies can be born and still have a fighting chance at survival. Early the next morning she woke up at 3 a.m. because she was leaking fluid. The couple called their doctor and

soon made the 100-mile trip in record speed from their home in southern Minnesota to their medical team's home base of Sanford Medical Center in Sioux Falls, S.D. By doing so, they entered a world of doctors, nurses, risks and decisions that they never expected.

Dennis Stevens, M.D., a neonatologist, explained Bree was leaking from her amniotic sack but if the babies were delivered that day, they would be very sick. Bree remained under the watchful eye of the perinatology staff along with the

NICU physicians and nurses and began receiving steroid shots to develop the boys' lungs. On Nov. 21, after a fitful night of contractions, Carter Anderson was born breech at 24 weeks gestation, weighing 1 pound, 5 ounces. Bree was expecting to deliver baby No. 2 but the perinatologist gave her medicine to stop the contractions and to close her cervix for what they told her could be a few hours, or at most a few days – precious time, building up his lungs in particular. Brother Logan was born on Dec. 5, exactly two weeks after his brother and weighed 1 pound, 14 ounces. Bree remembers that Logan looked plump compared to Carter.

NICU Nurse Kara Mergen remembers the Andersons well. As with other families, Mergen spent a lot of time with them, caring for the boys and listening to mom and dad's concerns and fears. But, she wanted to do more. Mergen wanted to gain the knowledge required to make more decisions and learn how to perform more procedures. Soon after meeting the Andersons, she decided to become a neonatal nurse practitioner (NNP) by enrolling in the Vanderbilt University School of Nursing's blended distance format program – one of eight nurses at Sanford Medical Center who have gained crucial advanced education from Vanderbilt's program.

The Sanford Model

Unfortunately, the Andersons are not alone in dealing with very premature or very sick babies. This same situation is played out hundreds of times in NICUs throughout the country every day, fueling the growing demand and national shortage of neonatal nurse practitioners.

“I CAN WATCH LECTURES AT THE BEST TIME FOR ME, AND IF THERE IS SOMETHING I DON’T GET THE FIRST TIME, I CAN STOP AND GO BACK TO IT.”

(Left to right): Students Holly Wiswall, Tige Bjornson and Kara Mergen share coffee in the lobby of Godchaux Hall much as they do while studying in Sioux Falls at Oscar's Coffee Shop.

The neonatal nurse practitioner (NNP) combines nursing and medical knowledge and is chiefly responsible for clinical management of the high-risk infants. NNPs are expert clinicians who fill an important role on health care team by obtaining histories, performing physical assessments, formulating diagnoses, and developing and implementing treatment plans.

Many studies have shown that the NNP role is cost-effective and has a positive impact on the infant’s well being. As a result, hospitals with large NICU units are often looking for neonatal nurse practitioners. Today, there are more than 600 neonatal nurse practitioner vacancies throughout the country, according to ENSEARCH Management Consultants which matches NNPs with vacancies.

A few years ago, Neonatal Nurse Practitioner Manager Kathy Schweitzer, M.S., C.N.P., realized that her home institution of Sanford Medical Center in Sioux Falls was facing a significant neonatal nurse practitioner shortage. The NICU serves the state of South Dakota as well as parts of Minnesota, Iowa, North Dakota and Nebraska. First, she tried recruiting from outside the area, which proved unsuccessful, since at the time there were six NNP vacancies nationally for every licensed NNP for hire.

So she developed a business plan to essentially grow Sanford’s own nurse practitioners. The idea was to take



NEIL BRAKE

registered nurses who were already committed to the NICU and Sioux Falls community and offer them a professional growth opportunity.

The result was she developed a NNP Loan Forgiveness Program at Sanford, where approved registered nurse candidates could earn their current salary plus receive tuition and books reimbursement while going to school full-time to earn their master’s in the NNP specialty. In return, the student would “pay back” the financial investment by agreeing to work at Sanford as a neonatal nurse practitioner for five years.

“When I first pitched the idea to the nursing staff, they were a little leery of it,” said Schweitzer. “Currently, our biggest advocates for the loan reimbursement program to become NNPs are the students who have utilized it and are now working as neonatal nurse

practitioners in the NICU. It has definitely been a success.”

Building a Partnership

When developing the business plan, Schweitzer looked at a number of distance learning programs throughout the country, but felt Vanderbilt University School of Nursing’s program was the best fit. She learned that the schedule, called “modified block,” meant that students could do a large portion of their work through lectures and presentations online in their home state mixed with three to four trips to Nashville each semester for intensive classroom work. Full-time students earn 39 semester hours in only 12 months (three semesters), versus the two-year traditional master’s programs with the same number of credit hours.

Once the students complete the program at Vanderbilt School of Nursing,

VANDERBILT OFFERS FLEXIBLE FORMATS

Vanderbilt School of Nursing offers M.S.N. programs in modified learning (block) formats through courses offered in concentrated blocks of time on campus, online conferencing and digital video course delivery.

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Adult Nurse Practitioner/
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Clinical Management

Forensic Nursing

Neonatal Nurse Practitioner

Nursing Informatics

Pediatric Nurse Practitioner –
Acute Care

Pediatric Nurse Practitioner –
Primary Care

Psychiatric Mental Health
Nurse Practitioner

M.S.N. Program for B.S.N.
Certificate-Prepared Women’s
Health Nurse Practitioners who
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**For more information, log on to:
www.vanderbilt.edu/nursing.**

they start a 12-plus month internship period back at Sanford to transition into their new roles. New graduates become licensed and certified as neonatal nurse practitioners within a few months and then start out becoming comfortable managing eight to 12 infants a day, on day shifts, followed by working nights independently, and then eventually orienting to a neonatal nurse practitioner transport role as part of a regional service. The internship provides opportunities for in-depth discussions and opportunities to spend time with the neonatologists as well as the other pediatric subspecialists within the hospital.

And the program has caught on at Sanford in a big way -- eight Sanford nurses have made or are making the transition to neonatal nurse practitioner through the Vanderbilt program.

Sanford currently has three students at Vanderbilt School of Nursing in the neonatal nurse practitioner program directed by Karen D’Apolito, Ph.D., A.P.R.N., C.N.S., N.N.P. Kara Mergen, who helped so much during the Anderson twins’ stay, Tige Bjornson (married to Kerri Bjornson, a 2006 Vanderbilt NNP graduate), and Holly Wiswall are thrilled to be earning their master’s in this way.

“I started in adults for a couple years, then I realized I wasn’t happy, so I considered moving to the PICU, but found my niche in the NICU,” said Bjornson. “The structure of the program allows me to still be a good husband and father while I’m a student.”

Even though he was a bit hesitant about learning online, he admits, “Now that I’ve been doing it, I love it.”

Wiswall feels she gets more out of the lectures because they are online or CD-ROM. “I can watch lectures at the best time for me, and if there is something I don’t get the first time, I can stop and go back to it.”

The three spend a lot of time together with other classmates conversing online as well as traveling from Sioux Falls to Nashville for block weekends. They have

frequent test preparation sessions that start at 9 a.m. sharp in their favorite booth at Oscar’s Coffee Shop in Sioux Falls. Wiswall makes the flash cards; and the group bounces questions off each other for four or five hours. They typically have a pile of empty coffee cups when they disperse to take their tests.

They all agree that their Vanderbilt education is teaching them to become critical thinkers, because it has taught them more of the science and methodology behind the decisions they will soon be making. “If you have a better understanding of why, then you have a better understanding of how,” said Wiswall.

Collaborative Care in the NICU

Mergen stays in touch with the Anderson family and thinks of them often as she continues her classes at Vanderbilt.

It was 143 days before Carter and Logan Anderson were both home from the hospital, and through it all, the staff, particularly the nurses in the Sanford NICU, made all the difference to the Anderson family.

“We loved all the nurses,” said Bree Anderson. “We loved Kara Mergen from the first time we met her because she was always so bubbly and positive. I remember many times when the doctors would come in and tell us something, and I would turn to Kara, Michelle or another nurse with us and ask, ‘OK, what did he just say?’”

Anderson recalls those scary days. Logan was doing well, but Carter had serious issues with his bowels and breathing. Through it all, the nurses tried to help the family, even moving bedridden Bree into the boys’ rooms in order to participate in their baptism. The nurse practitioners kept the Andersons informed of the plan of care and progress with their sons.

“It’s hard for parents to be part of the care and bonding,” said Bree. “We couldn’t hold them in our arms. Their skin was see-through and their eyes were fused shut, but the nurses taught us to gently

Bree plays with her boys.



press down on their arms with two fingers so they would know we were there.”

Carter ended up needing two surgeries where most of his bowel was removed. The physician told the Andersons that Carter might not survive the second operation, so while Carter was in the operating room, they prayed and started planning his funeral. They were thrilled when they learned he made it through surgery and was going to recover.

A Bright Future

Thanks to their excellent medical care and the strength of their parents and family, the Anderson twins are doing well. Logan and Carter had a memorable first birthday party and recently visited the Sanford NICU for an emotional homecoming. Logan has been very healthy and Carter has continued to fight. He has

been plagued with respiratory issues, and will use a feeding tube until he's age 3.

And thanks to blended distance learning opportunities from the Vanderbilt School of Nursing, the number of neonatal nurse practitioners available to take of the increasing numbers of sick infants at Sanford has increased. Bjornson, Mergen and Wiswall will soon join the ranks of their predecessors who have made the transition from neonatal nurse to neonatal nurse practitioner through the Vanderbilt program. Timing was crucial since the Sanford NICU has expanded to 58 beds, with 130 nurses, 20

neonatal nurse practitioners and seven neonatologists. In the last year, the new NICU has experienced a dramatic increase in admissions. The demand will continue to grow as they add a freestanding children's hospital in 2009. She is fielding applications from her staff to begin another cycle in the successful partnership between Sanford and Vanderbilt.

“The quality of students coming out of this program has been very high, the students are well-prepared as neonatal nurse practitioners, and we have developed a strong relationship with the Vanderbilt NNP program,” said Schweitzer. **VUSN**

THANKS TO THEIR EXCELLENT MEDICAL CARE AND THE STRENGTH OF THEIR PARENTS AND FAMILY, THE ANDERSON TWINS ARE DOING WELL.

connecting students with learning

PHOTOS BY NEIL BRAKE



{ AMY CASSIDY, R.N., VUMC TRAUMA }

Part-time acute care nurse practitioner
Home: Nashville Age: 27

Amy Cassidy knew from a young age that she wanted to be a nurse, just like her grandmother. While attending undergraduate classes at Grand Canyon University in Phoenix, her goal was to someday earn an advanced practice degree in nursing. After a move to Nashville for her husband's career, she joined Vanderbilt University Medical Center as a trauma unit nurse and soon learned about the convenience and efficiency of the School of Nursing's distance program.

Even though she lives just 15 miles away and works two blocks from the nursing campus, Cassidy chose the blended program that would allow her to keep working while earning her M.S.N. in two years. By doing so, she could also take advantage of the tuition reimbursement program that covers a majority of the cost of her education.

"They say you can do your online work in your pajamas, and I often do," said Cassidy. "I also like to watch portions of lectures and re-watch lectures because it helps my study habits and suits my learning style."

Cassidy's is part of a triumvirate that includes Beth Potts and Laurie Ford who also work at the VUMC trauma unit and are on the same educational track.

"Beth makes sure all of our assignments are done on time; Laurie makes sure we know all the facts, and I help keep the pace," said Cassidy. "At work, we can print out syllabus or class handouts for the next day, call out facts to each other or practice things like ophthalmic examinations on our trauma patients."

Cassidy believes the most important part of her education is becoming a critical thinker. "Now it is my full responsibility to know everything about 'what' and everything about 'why.'"

After she finishes, Cassidy plans on exploring her many options in critical care as a nurse practitioner and looks forward to what she considers a crowning moment – writing her first official prescription.



{ ALEX SARGSYAN, R.N. }

Adult Nurse Practitioner Program
Home: Asheville, N.C. Age: 37

Alex Sargsyan likes change. He earned his master's in chemistry in Armenia and was working at Fine Organic Chemistry Research Institute in Yerevan, Armenia. When he came to America in his 20s, he was drawn to nursing as a second career. He started working at a nursing and rehabilitation facility, earned his associate degree, followed by his baccalaureate (summa cum laude from Western Carolina University).

He worked in cardiac care for a hospital for three years as a registered nurse and was looking to combine his interests with people and technology in an advanced practice nursing role. Vanderbilt School of Nursing was the solution. With one intensive year of education, he will earn his advanced practice degree while maintaining his life in Asheville.

Ironically, Sargsyan is both student and teacher this year as he pursues his master's at Vanderbilt while also teaching pharmacology, anatomy and physiology, and medical terminology at South College in Asheville.

"It's very interesting to be at Vanderbilt and learn from my instructors by interacting – for me it's enhanced because I can see how others behave and what I can incorporate as a teacher in my own courses," said Sargsyan.

He likes the Vanderbilt approach that combines the convenience of online learning with the intensity of didactic courses during block weekends. He feels his instructors are readily available and responsive via e-mail and that the communications and IT systems between the instructors and students create a cohesive community for learning.

"Distance learning is great," said Sargsyan. "We are not depleted of anything. Instead we have the flexibility to work because our course work fits our schedules and can also implement what we are learning directly into our work lives."

In addition to teaching, he is on staff at Pardee Hospital and particularly enjoys opportunities to serve as a preceptor. He would like to parlay his advanced practice degree into a position in a private cardiology practice where he could enjoy the partnership of critical thinking skills and understanding of technology to improve patient care, or perhaps into additional teaching opportunities. He likes change.



{ ALEXIS CHETTIAR, R.N. }
Acute care nurse practitioner
Home: Oakland, Calif. Age: 30

Alexis Chettiar has solo-cycled across South America, Chile, Argentina, Japan, Iceland, Thailand, throughout Europe, Mexico and Canada, so she knows herself and she knows people. In 2000 as an associate degree-prepared nurse, she enrolled in the Vanderbilt School of Nursing distance program from her home in Northern California.

She completed the first year and then cycled across Malaysia, surprised when the U.S. forces started bombing Iraq. In this Muslim country and in the middle of harm, she wanted to do something more meaningful by volunteering. She got off track on her formal education, came back to the States, got married and had her first child. She resumed her education in August 2006.

"When I started the program, it was really new and not fully developed," said Chettiar. "When I came back, I was amazed at how they have it wired – resources are really accessible and there are a variety of different formats."

She admits she doesn't know what she would do without lectures available on the MP3 format. "I go running and grocery shopping with my iPod on and hear Professor Larry Lancaster lecturing on physiology, which really helps me learn the information."

Always ready for an adventure, Chettiar opted to camp at Percy Priest Lake equipped with her tent and flashlight during the warm weather months instead of staying at area hotels. She would use her time on campus wisely and study at the library until it closed. Some of her Nashville-based classmates opened their homes to her during the winter and she has come to really enjoy the time with her classmates and friends during the block weekends.

Chettiar is working in an emergency department in Oakland, but has not ruled out eventually exploring other inpatient-focused areas.

"By continuing my education at Vanderbilt, I come out way ahead," said Chettiar. "If you are going to invest two years in some sort of pursuit, nothing will give you a better return on your investment. It's miraculous."



{ KIM BAKER, R.N. }
Psych/Mental Health Program
Home: Seward, Neb. (20 miles outside of Lincoln) Age: 48

Nebraska native Kim Baker loves to learn. She has continued her nursing education through earning her women's health certificate in addition to her years of experience gained from various nursing positions. About two years ago she started investigating online advanced practice nursing degree options, despite being located relatively close to the University of Nebraska's Lincoln and Omaha campuses. Baker believes she found a good fit with Vanderbilt School of Nursing's program that allows her to learn in a blended distance format and complete the intensive program in one year.

A wife, mother and adult learner, Baker spends approximately 35 hours a week listening to online lectures and doing school work along with doing a preceptorship at a private practice in Lincoln two days a week.

"There is a lot of camaraderie among my classmates when we are on campus for block weekends and online," said Baker. "The combination of students and professors has created a wonderful personal touch."

Baker most recently worked at a community mental health facility and was on the medication management side. She knew that 15-minute medicine checkups with patients were important, but not a comprehensive approach.

Through her interest and Vanderbilt education, Baker believes she has become even more aware of a great need for patients to have a counseling component, "I think touching base and helping someone at a pivotal moment of depression, anxiety or crisis is crucial."

"The greatest thing we've been given is relationships so we can talk to someone and share concerns," she added.

Baker credits professors, fellow classmates and her family for making it possible for her to complete the one-year program. She admits that having a husband who is a private pilot helps as well.

Baker is scheduled to complete the program in August 2008 and hopes to join a private practice in Nebraska.

nursesoldiers

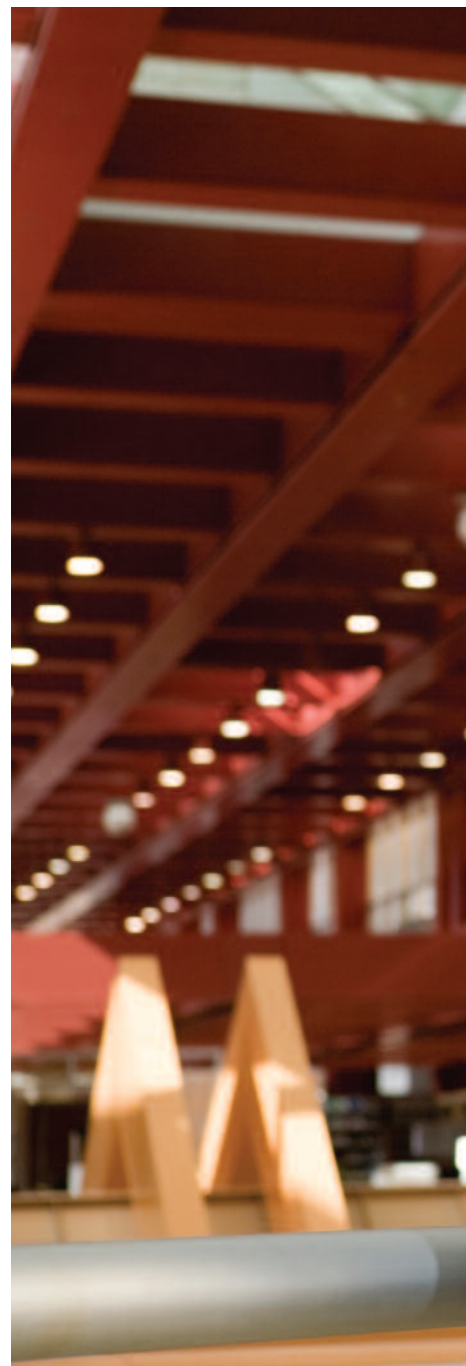
When Kelly Ambrosi Wolgast was a teenager, her mother, a nurse who worked in a nursing home, told her: “Nursing is the hardest job you will ever love.”

But, Wolgast’s mother probably never imagined her daughter would become the first female and first nurse commander for Fort Carson’s Evans Army Community Hospital in Colorado Springs, Colo.

Wolgast’s colleague, Diana Ruzicka, Deputy Commander for Health Services and Nursing, was also encouraged to join the world of nursing by a strong role model – her grandmother. As she climbs the leadership ranks in the military, she hasn’t forgotten the basic nursing skills from her first job, also in a nursing home.

Every day, more than 50,000 servicemen, servicewomen and their families depend on the decisions of these two former Vanderbilt University School of Nursing classmates, who have both achieved the rank of colonel in the U.S. Army. They ensure soldiers and their families serving at the historic Fort Carson Army Post are getting the best medical care possible.

STORY BY KATHY RIVERS
PHOTOGRAPHY BY BARRY STAVER





Col. Kelly Wolgast, left, and Col. Diana Ruzicka outside the Evans Army Community Hospital's command center offices.



Wolgast and Ruzicka have been effective nursing leaders and ambassadors for the Army across the world.

Top: Wolgast, center, with two senior nurses from the Afghanistan National Army who also trained with her at the U.S. Hospital in Bagram.

Middle: Ruzicka, left, with Abudullah Rabeeah, M.D., CEO of Saudi Arabia health system and members of the nursing assessment team.

Bottom: Ruzicka holding flag at Change of Command Ceremony in Suttgart Army Health Clinic in Germany.



Rockies. Playgrounds dot the landscape and homemade signs – worded in red, white and blue – are waiting to greet loved ones returning from war.

The 158,000-square-foot hospital sits on top of a small hill and serves as a focal point. The facility opened in 1986 and includes inpatient facilities, delivery suites, a nursery, emergency room and outpatient clinics. The base is a long way from Vanderbilt.

Leadership Training

Wolgast and Ruzicka’s careers have followed similar paths; each earned a baccalaureate degree and jumped on leadership tracks in the military, and each decided to pursue more education in health systems administration.

“I was a young captain with a nursing degree, but even I didn’t know where I was going to end up,” said Wolgast.

“Bonnie Pilon (senior associate dean for Faculty Practice) and the faculty helped me get there.”

The colonels believe Vanderbilt’s focus on the scientific methods and the global perspective of health care gave them a strong footing for advancement in Army nursing. The two were classmates from 1991 to 1993 and stayed in touch through e-mails, but their careers took them to different parts of the country and the world until their paths crossed again at Fort Carson.

Running an Army Hospital

As commander, Wolgast is responsible for over 2,000 hospital employees. She is

Nestled in the foothills of the Rockies, Fort Carson was built during World War II and has expanded and condensed capacity as needed throughout the years. Once inside the heavily guarded security gates, the base itself looks more like a small town than a military installation.

The sprawling landscape includes town houses and single family homes, some of which are under construction. The mirrored glass elementary and middle schools reflect images of the nearby

responsible for strategic planning within a not-for-profit arena that is ultimately part of Congressional funding. She understands that the Army hospital, alone, cannot take care of all the health care needs of her soldiers, so she works closely with the greater Colorado Springs/Denver network of civilian hospitals.

“I don’t build my business plan in a vacuum,” said Wolgast. “We are very much part of the community’s health care network, and I must rely on my civilian colleagues downtown, just like they rely on me to do my business at this installation.”

The Army hospital has a full scope of services, much like a community hospital, including inpatient services, delivery suites and a nursery that is trying to keep up with the recent baby boom of nearly 170 births each month. Fort Carson is experiencing significant growth as the base prepares for an influx of 3,000 troops in the next three to five years, and the hospital has an expansion plan to meet additional needs. A visitor gets the feeling that hunting for a parking space or waiting in line in the cafeteria is a routine occurrence.

Just as in the civilian world, staffing is a constant challenge.

“In times of peace, resources are plenty, while in time of war, resources are more focused,” said Wolgast.

About 20 percent of the hospital’s employees are military personnel, and the remaining 80 percent are civilians recruited from throughout the area. Fatigues and scrubs mingle in the hallways as the staff bustles about its business. The number of military personnel fluctuates due to the demand for medical expertise on the front lines. Wolgast and Ruzicka both feel strongly that one of their key missions is to mentor the junior medical officers and make sure they are well-prepared for combat duty where the margins for error are slim.

“We have to run a hospital and it’s challenging when you turn around and lose another staff member to deployment,” said Wolgast. “We do our wartime

mission all the time, and there is no rest for what we do in health care.”

Warrior Transition

Wolgast and Ruzicka are especially proud of Fort Carson’s Warrior Transition Battalion (WTB), which connects soldiers with services when they return home. Many have been deployed as many as four times and the consequences of multiple deployments are reflected in increased health care needs.

“We screen 100 percent of soldiers before they go out to the combat zone and when they come home for physical injuries as well as the unseen injury,” said Wolgast. “We have assessments and treatments for every condition that comes home. There is no cookie-cutter approach to this.”

Soldiers are encouraged to bring their spouse or friends to appointments so health care professionals can get a full perspective about the soldier-patient and develop a thorough treatment plan. The WTB employs registered nurse case managers at a ratio of one nurse to 36 soldiers.

“The organization already saw the value of case managers and had employed two in each of our four family medicine clinics, in OB, pediatrics, active duty inpatient and assisting the elderly,” said Ruzicka. “In the WTB, we now employ their skills to help soldiers through the healing process.”

Soldiers get help through the extended network of military and civilian services. Many transition back into active duty while others go into civilian life.

Serving Down Range

The two colonels are no strangers to tours of duty in foreign lands themselves. Colonel Wolgast recently served in Afghanistan and Ruzicka in Germany, Honduras, Saudi Arabia and Korea during critical times in past 20 years.

“When you go down range, you don’t forget what you’ve learned,” said Wolgast.

As deputy commander and chief nurse for the hospital at Bagram Airfield in Afghanistan, Wolgast saw American, coalition and Afghan forces who were wounded by the Taliban and Al Qaeda. Her main goal was to ensure the nursing staff was clinically ready for the most traumatic situations.

Wolgast and her team also reached out to the Afghan medical system, setting up a training structure for military and civilian doctors, nurses and pharmacists to share best practices. She admits that there were culture barriers at first, particularly as a woman in a Muslim country.

“I was a senior nurse, and I was female,” said Wolgast. “They needed to get over that, and they did. It was much more about helping them understand that it’s OK for us to work together for the growth of their country and it’s not something we’re trying to take from them.”

Wolgast and her team helped educate physicians and nurses about CPR, basic medicine and nursing practice, sanitation procedures and overall military support care. The Army team would visit the hospital in Kabul under armed convoy and the Afghan medical teams came to the base to observe the Army’s model of care.

ARMY OATH OF OFFICE

I do solemnly swear that I will support and defend the Constitution of The United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office upon which I am about to enter. So help me God.



The two colonels believe Vanderbilt's focus on the scientific methods and the global perspective of health care gave them a strong footing for advancement in Army nursing.

“In Afghanistan, everything is treated as a combat mission,” said Wolgast. “Whenever possible, the chief physician would come with me and we would try to bring some nurse volunteers so they could see what it was like, but it was always a risk.”

These days she measures time in terms of before Afghanistan and after Afghanistan.

“I will never forget the soldiers who were lost, the beautiful Afghanistan countryside and the look on my kids’ faces when I came home,” said Wolgast.

She brought home one more thing from her service in Afghanistan – a Bronze Star.

Ruzicka remembers serving in Europe toward the end of the Cold War. “Back in the early 1980s, when I was called to the hospital at 0500 and told to report in full battle dress uniform on any given day, I did not know if the communists were coming through the border or not,” said Ruzicka.

Last February, Ruzicka led a team of nurses, requested by the CEO of the Saudi Arabia National Guard Health Affairs (NGHA) system, to evaluate nursing care and education in the NGHA.

“We found they had a western standard health care system employing mostly expatriate nurses and transitioning to a Saudi nursing workforce with an excellent growing baccalaureate nursing education programs across their system.”

Family Life

In addition to their military titles, Ruzicka and Wolgast take the term “working mom” to a new extreme.

Like most working moms, Ruzicka deals with some intermittent guilt about working outside – sometimes way outside – the home. But she balances any hint of regret with memories of the day her oldest daughter confessed Ruzicka was the girl’s idol.

“She told me that she hated when I expressed guilt about not being a stay-at-home mom,” said Ruzicka. “She said ‘I turned out just fine and besides, you’re

my idol and I'm not going to tell you that again." Ruzicka's 23-year old daughter Katherine is now an aerospace engineer.

Ruzicka's husband was an Army pilot who recently retired and settled in Huntsville, Ala. Their son was born between semesters at the School of Nursing. A devoted wife and mother of three, Ruzicka's career has taken her on several international tours of duty. Except for a six-month tour in Honduras, the family always relocated together.

"Our children have grown up in the Army, they've traveled the world and all three of them are amazingly resilient and independent," she said.

Wolgast's children got their first taste of a home without mom when she was deployed to New Orleans in the aftermath of Hurricane Katrina. Wolgast sat down with her children and explained that they were helping the residents of New Orleans, too, because they were allowing her to do her duty.

During her 12 months in Afghanistan, Wolgast's husband and sister took care of the children. The colonel/mom communicated via an e-mail journal, sent photos, and participated in an occasional teleconference. Her children also attended a deployed parent support group sponsored by their schools.

Moving Forward

"The hardest job you will ever love."

Looking back, both think the motherly advice was right on target. The big question is: With strong role models like Wolgast and Ruzicka, what will their children grow up to be?

Wolgast is developing a five-year strategic plan for the hospital that will likely involve expanded facilities and services. She will serve as commander of the hospital until the summer of 2009 as she continues her career in the Army.

Ruzicka will retire this summer after nearly 26 years of duty and join her family in Alabama. She hopes to help soldiers returning from war chronicle their experiences. **VUSN**

A LETTER FROM IRAQ

Lynn Pope, part-time informatics student and 17-year veteran of the Army Reserve Nurse Corps was deployed to Iraq last fall. Until September, she serves at the Air Force Theater Hospital Balad, with the busiest Level 1 Trauma Center in the country. Pope wanted to continue her education while deployed. Faculty and staff made it possible. To keep up to date with Lynn, visit her blog at <http://watchpocket.blogspot.com>.

We are committed to our mission of taking care of patients 24/7. The hospital nursing staff works four 12-hour shifts on-duty then one day off followed by four more 12-hour workdays with one on-call day. Your on-call day is just the luck of the draw. My first day of work the bad guys were stirring up trouble, and we had one trauma call after another. By the time the night shift arrived, we were still running all rooms and had cases to go. The day shift stayed until nearly 11 p.m. in order to take care of our patients then reported back at 6:30 a.m. the next morning for more of the same.

The nurses, physicians and ancillary staff are all ready to pitch in and get the work done. We provide patient care in much the same way as it is provided to patients in trauma centers in the U.S. The biggest difference is the high level of security. We have armed, trained Special Forces outside. I wear a 9mm weapon and body armor. Though I haven't fired the weapon since I was given ammo, I am comfortable with it and could fire it if needed. Just wearing the body armor is exercise, but it didn't take long for the

weapon to feel fairly comfortable. It's like wearing your stethoscope around your neck. Before long, you forget it's there.

Our patient population is mostly Iraqi security and civilian men, women and children. The U.S. and Coalition Forces are helped here as needed and then sent out of theater for more definitive care or returned to their duty site. Taking care of the badly wounded is always sad, but even more so when the injured is one of our own or a child.

I have learned one big lesson — the less you have, the easier it is to get. Simply put, we have two OR packs — not 20. We have basic sets of instruments, so the doctors and nurses have become very creative in using supplies in effective ways.

Everyone knows each other and are very friendly. We have the USO to offer diversions to keep our spirits up. Games, books, dance, and music are all offered for us to enjoy during our off time. Movies and iPods are very popular. The friends and family of soldiers stationed here are very generous in



sending care packages from home and we get pleasure sharing the treats or movies.

I find time for school by trading off those chores that I am normally responsible for at home. For instance, the military provides meals and laundry service, so I don't cook or wash clothes. I live in a small room which is easy to clean.

The ravages of war could hardly be called adventurous, but when Iraq called, I answered. I am proud to take care of the children, men and women suffering the injuries of warfare. I am here to provide the kind of care I hope my son would have if he were injured in Iraq. When I leave, I hope those who come after me will care for those injured with skill and compassion. Until then, I pray for a resolution to this war and for the safe return home of every mother's child supporting Operation Iraqi Freedom.



The Making of a Policy-savvy Nurse

As the U.S. presidential campaign shines a light on the political process, *Vanderbilt Nurse* takes a closer look at the policy nurse, someone who impacts public policy. Laura Beth Brown, president of Vanderbilt Home Health Care and current president of the Tennessee Nurses Association, is a great example of a nurse advocate navigating the political process. Brown has worked as a staff nurse and a charge nurse at Vanderbilt and served in management and marketing of a home-infusion company before coming back to the Vanderbilt University School of Nursing to earn her M.S.N. in 2004. For the past several years, she has played a crucial role in the growth of the home care division. She tells us about finding her own voice in the political process and in doing so, enriching her career.



STORY BY KATHY RIVERS
PHOTOGRAPHY BY ANNE RAYNER



How did you get involved in nursing? Fortunately I was exposed to health care at an early age since my father worked as a radiology/lab manager of the Tennessee Valley Authority's Medical Unit in the 1970s, and I saw how TVA took care of their own employees. I had the fortunate experience of being exposed to nurse practitioners when people didn't even know what nurse practitioners really were. In eighth grade, I won a state science fair with my dad's help. I studied the effect of radiation on germinating seeds. Things like that made me think about health care. There wasn't much discussion about what I was going to do when I got older. My mom and dad encouraged

me to go into nursing because they simply said, "You will always have a job."

Tell us about your involvement with TNA. I have been an active member for 14 years. As a student you learn about the student nurses association, and then my Vanderbilt colleagues encouraged me to become involved. One person suggested it was my professional obligation, and I thought a lot about that. I have had great role models, I saw my parents get involved in their professions and give back, so I wanted to as well. I'm a big believer in "you only get out of it what you put into it." Once you get involved, you really see the value of

the organization and understand your role is part of a global perspective.

What is your definition of activism? Activism can be something as simple as making sure to get out and vote in elections. In the current presidential election each candidate has an approach to restructure health care in some way so your participation is really a minimal expectation. Recognize what the plans are and form an opinion.

What are the hot button issues in nursing throughout the country? The biggest one is that we need to play a role in restructuring the nation's health care system. I know that

sounds big, but nursing needs to be involved. It can be restructuring at a local level or all the way to the international level, but nursing needs to be at the table. The key is access. Nurse practitioners have done a great job of going to where the need is. The Vine Hill Community Clinic is a great example of nursing getting it right. Retail clinics are another example of the importance of access and taking the care to the needy.

What are some other important issues? The American Nurses Association's Center for American Nurses plays an important role in nursing advocacy regarding issues such as patient safety. Vanderbilt's

I saw my parents get involved in their professions and give back, so I wanted to as well. I'm a big believer in "you only get out of it what you put into it."



DANA JOHNSON



Smooth Moves patient handling system is a great example of when an institution takes what the ANA had to say and makes it happen. Other areas of focus include improving practice environments and promoting excellence in patient care.

What issues are important to Tennessee nurses? In Tennessee, we have an obligation to continue our work with Gov. Bredesen to ensure the graduate loan forgiveness program makes it in the budget this year. We also have obligations to work with the governor and legislators to pass ANA minimum students to nurse ratios. Right now in Tennessee, it's one for every 3,000, and the ANA standard is one to 750. Even if we don't introduce legislation this year related to faculty challenges, we need to evaluate the position of faculty salaries because we know the nursing shortage can be addressed if we look at it in a comprehensive way. It's not just about getting more students; it's about addressing faculty challenges.

What is the biggest challenge about your role as president of the TNA?

Overnight there were 70,000 passionate people with passionate ideas that thought I needed to know what should happen and how it should be handled. In my workplace, I have clear accountability and

Vanderbilt is playing a role in helping voters across the country understand the health care proposals being offered by the candidates. The Health Care Solutions Group is a non-partisan, health policy institute that Vanderbilt started two years ago through a partnership with the Nashville Health Care Council. This group recently launched PresidentialRX.com to explain each of the presidential candidates' proposals.

PresidentialRX.com is built around four key questions on the minds of voters:

- What is the status of the health care system?
- Why is the health care debate critical for me?
- Who are the candidates and what do they propose to do?
- How can I get more information about health care and this election?

Answers to each of these questions include definitions of common health care terms linked directly to the content on the Web site. Summaries of each candidate's plan reflect a comprehensive review of information made available to the public at candidate Web sites, through speeches and in the media. This site is updated daily and does not endorse the health proposals of any of the candidates; rather it summarizes and explains the candidates' plans and proposals.

responsibility, but being president of an association, the guidance comes from many people. My challenge is to balance ideas and all the passion to make the best decisions for the organization overall and not just one interest.

Is it significant that your experience is in home health? Home health has given me a wide perspective. We don't just see Vanderbilt

patients. Our 300-person staff sees more than 500 clients on a daily basis from all over the community. It forces me to have exposure throughout the community and has helped me see what is happening outside of the four walls of our institution.

Why do you think advocacy is worth the extra time and energy? Decisions that affect nursing are made legislatively and some of those decisions

I chose to get involved because I believe if you sit back and let it happen to you then you deserve what you get.

are good while others are challenging. When you recognize the influence that policy plays on your profession, you either choose to get involved or not. I chose to get involved because I believe if you sit back and let it happen to you then you deserve what you get. However, if you get out and make an effort to influence some of the most important things for the profession, then you can reap those benefits and enjoy it with everyone else.

Who are your role models?

It starts with my parents and becomes a very long list with names on it like Adrienne Ames, Susan Cooper, Virginia Trotter Betts, Marilyn Dubree and many, many others. I was walking down the hall of Vanderbilt Hospital one day and passed a patient who looked just like my third grade teacher. It turned out that it was her. We have seen each other and e-mailed since, but the point is that it's amazing that one per-

son like Cindy Dew made such an impression on me that I remembered her after more than 30 years. People like her, too many to mention by name, have made an impression at so many different times in my life.

How can people get involved in the political process?

First, register to vote and be an active participant in elections. People don't realize how decisions are made and that they can have a voice. Next, join

your professional association. There are people who say they don't want to get involved because the American Nurses Association, for instance, supported a different political candidate. I believe that's all the more reason to get involved, so you can influence change. Finally, people need to become active by volunteering on committees. One of the best things I have done as part of the TNA while in graduate school was to volunteer for the Gore campaign. It was not so much about the political party affiliation as much as I realized the opportunity and importance of having a presidential campaign in my own backyard. I learned about policy, campaigns, phone banks, you name it, and I am better for having the experience.



ISTOCKPHOTO

Register to vote, report a name change or report a change of address by logging on to the U.S. Election Assistance Commission at www.eac.gov/voter/Register.

how to get involved



Does writing or calling your elected official make any difference? Yes, make an appointment with your legislator and his or her staff person. It's not all about donating money. It's about building a relationship and offering yourself as a source on nursing. Believe me, the elected officials remember who they can call when nursing issues are being debated. Every effort we make as nurses should focus on helping them become more nurse friendly.

Can you give us an example where nursing groups have changed policy? There are many. The fact that we have nurse practitioners with the ability to diagnose, treat and write prescriptions is something we lobbied for, got and protect every day. With the Tennessee faculty loan program, Gov. Bredesen challenged us to raise half of the funds and said he would match us. Thanks to the hard work by nurse advocates, we have raised the matching funds.

What do you want everyone to know? I hope everyone recognizes my efforts are out of the love of the profession. My desire is to make nursing better for every nurse and patient. **vusn**

There are three nurses who are elected officials in the Tennessee General Assembly

Sen. Rosalind Kurita, R.N. (D)

e-mail: sen.rosalind.kurita@legislature.state.tn.us

Sen. Diane Black, R.N. (R)

e-mail: sen.diane.black@legislature.state.tn.us

Rep. JoAnne Favors, R.N. (D)

e-mail: rep.joanne.favors@legislature.state.tn.us

To find representatives from the Tennessee General Assembly, log on to www.tennessee.gov.

UNITED STATES SENATORS FOR TENNESSEE

Lamar Alexander (R)

www.alexander.senate.gov

Bob Corker (R)

www.corker.senate.gov

For more information on U.S. Senators in other states, visit www.senate.gov.

UNITED STATES CONGRESSIONAL REPRESENTATIVES FOR TENNESSEE

Marsha Blackburn, (R), Tennessee, 7th – www.blackburn.house.gov

Steve Cohen, (D), Tennessee, 9th – www.cohen.house.gov

Jim Cooper, (D), Tennessee, 5th – www.cooper.house.gov

David Davis, (R), Tennessee, 1st – www.daviddavis.house.gov

Lincoln Davis, (D), Tennessee, 4th – www.house.gov/lincolndavis

Jon J. Duncan Jr., (R), Tennessee, 2nd – www.house.gov/duncan

Bart Gordon, (D), Tennessee, 6th – www.gordon.house.gov

John Tanner, (D), Tennessee, 8th – www.house.gov/tanner

Zach Wamp, (R), Tennessee, 3rd – www.house.gov/wamp

For more information on U.S. Senators in other states, visit www.house.gov.



FACULTY NEWS



Susie Adams, Ph.D., A.P.R.N., associate professor of Nursing, and **Ann Vanderhoef**, M.S.N., R.N.,

(pictured) lecturer in Nursing, presented "Innovative On-line Technology: Enhancement to PMHNP Education" at the annual conference of the American Psychiatric Nurses Association in Florida. Adams also presented "Retention of Previously Incarcerated Women in a Community-Based Residential Treatment Program" at the Sigma Theta Tau International 39th Biennial Convention in Baltimore.



Thomas L. Christenbery, Ph.D., R.N., assistant professor of Nursing, co-authored an article with

Michelle Miller (M.S.N. '08) titled "A Strategy for Learning

Principles and Elements of Informed Consent" in the March/April issue of *Nurse Educator*.

Michelle R. Collins, R.N., C.N.M., instructor in Clinical Nursing, and Soheyl B. Asadsangabi (M.S.N. '04) were invited to present at the Babies and You program at Vanderbilt in April. Asadsangabi discussed "Labor and Delivery" and Collins talked about "Facing the Challenges of Pregnancy."



Karen D'Apolito, Ph.D., R.N., assistant professor of Nursing, presented at grand rounds for physi-

cians and nurse administrators of the Johnson City Medical Center in October. She also spoke to 85 staff nurses regarding neonatal abstinence. She consults with the Medical Center on the issue of drug abuse in the community.



Terri A. Donaldson, M.S.N., R.N., instructor in Nursing, and Elizabeth "Beth" Towery Davidson

(M.S.N. '91), each earned a Doctor of Nursing Practice (D.N.P.) degree at the University of Tennessee Health Sciences Center, Memphis, in December. They also had an abstract titled, "Heart Transplantation: Pearls and Pitfalls," accepted for presentation in May at the American Association of Critical-Care Nurses National Teaching Institute and Critical Care Exposition in Chicago.

Mary Jo Gilmer, Ph.D., R.N., associate professor of Nursing, presented at the Sigma Theta Tau Annual Research Congress in Vienna, Austria; the World Congress of Children's Hospice International in Singapore; The Forum in Minneapolis, Minn.; and for The Monroe Carell Jr. Children's Hospital at Vanderbilt in Akron, Ohio. She and Terrah Foster (M.S.N. '01, Ph.D.'08) presented "Continuing Bonds with Children Who Have Died from Cancer" at Vanderbilt Medical Center Nursing Research in Nashville.



Becky Keck, M.S.N., R.N., was named assistant dean for Administration for the Vanderbilt University School

of Nursing. She has served as a faculty member for the Health Systems Management specialty in the Masters in Nursing program as well as the Clinical Director for geriatric services for University Community Health Services. Prior to that, she served for nine years as

Assistant Hospital Director, Nursing Finance and Operations for Vanderbilt University Medical Center.



Lecturer **Betsy Kennedy**, M.S.N., R.N., has authored a textbook, "Intrapartum Modules, 2nd

Edition." Instructor **Suzanne McMurtry Baird**, M.S.N., R.N., contributed two chapters.



Jennifer Kim, M.S.N., R.N., assistant professor of Nursing, published "Nutritional Assessment in

Elderly Clients" in the November/December issue of *The Journal for Nurse Practitioners*. Last summer, Kim helped found the Gerontological Advanced Practice Nurses of Middle Tennessee (GAPNMT).



Jana Lauderdale, Ph.D., R.N., associate professor of Nursing, contributed a chapter on

"Transcultural Perspectives in Childbearing" in the book "Transcultural Concepts in Nursing Care."



Susan Newbold, Ph.D., R.N.-B.C., instructor in Nursing, contributed a chapter on technol-

ogy developments applied to health care and nursing in "Nursing Informatics 2020: Towards Defining Our Future."

don't forget

REUNION and HOMECOMING 2008 DATES TO REMEMBER

Thursday, Oct. 23

11:30 a.m. – 1 p.m.

Quinq Luncheon with the Dean – Godchaux Hall Living Room

Thursday, Oct. 23

Starting at 6 p.m.

School of Nursing Centennial Gala – Loews Vanderbilt Plaza

Friday, Oct. 24

8 – 9 a.m.

Alumni Coffee Hour - Godchaux Hall Living Room and Atrium

Saturday, Oct. 25

9 a.m. – noon

Reunion Brunch – University Club Cumberland Room Gallery, Lobby, Courtyard

She presented her dissertation research in Brisbane, Australia, in August.



Linda Norman, D.S.N., R.N., senior associate dean for Academics, was selected as an Executive

Committee Member (2007-2010) for the Nurse Educator Workforce Development Advisory Council (NEWDAC) of the National League for Nursing. The purpose of NEWDAC is to provide the leadership that advances the lifelong learning goals of nurses whose primary role is education in academic, practice, or other service settings, nationally and internationally.

Freida Hopkins Outlaw, Ph.D., R.N., former faculty member and Chief Nurse and Assistant Commissioner of Special Populations and Minority Services at the Tennessee Department of Mental Health and Developmental Disabilities, was recently inducted as a Fellow into the American Academy of Nursing.



Debra J. Partee, M.S.N., R.N., clinical assistant professor of Nursing, presented "Screening for Domestic

Violence" at the Tennessee Association of Physicians Assistants Fall Conference in Gatlinburg, Tenn., in October. She and Patricia Michael are the nurse practitioners and co-founders of Bridges of Williamson County, an on-site clinic for women and children.



VUSN DEAN CONWAY-WELCH NAMED TO NIH BOARD

The National Institutes of Health (NIH) recently announced that Vanderbilt University School of Nursing Dean **Colleen Conway-Welch**, Ph.D., C.N.M., F.A.A.N., F.A.C.N.M., was selected to join the Advisory Committee to the Director (ACD). Conway-Welch is one of five new members to the 15-member group.

The ACD advises the NIH Director on policy and planning issues important to the NIH mission of conducting and supporting biomedical and behavioral research, research training, and translating research results for the public.

"These five esteemed new members to the NIH Advisory Committee to the Director will bring an even greater depth and range of expertise to this dedicated team of advisers," said NIH Director Elias A. Zerhouni, M.D.

Conway-Welch has served as professor and dean of Vanderbilt University School of Nursing since 1984 and has been active in nursing practice and education for more than four decades. She has published extensively and is a member of several national boards. In 2006, she was named by President Bush and confirmed by the U.S. Senate as a member of the Board of Regents of the Uniformed Services University of the Health Sciences, a training program for military health care providers.

The Office of the Director is the central office at NIH, responsible for setting policy for NIH's 27 Institutes and Centers. This involves planning, managing and coordinating the programs and activities of all NIH components. Please e-mail any comments you may have about NIH-related issues to Dean Conway-Welch at colleen.conway-welch@vanderbilt.edu and she will take them with her to the advisory meetings.



Randy Rasch, Ph.D., R.N., professor of Nursing, published "Evaluation of the Patient

with Hand Pain and Numbness: Carpal Tunnel Syndrome" in the October issue of *The Journal for Nurse Practitioners*.



Julie Rosof-Williams, M.S.N., A.P.R.N., assistant in Pediatrics, adjunct/clinical faculty member,

and **Phyllis Thompson**, M.S.S.W., presented a four-hour seminar entitled "The Our Kids Medical Evaluation: A Multidisciplinary Approach to Child Sexual Abuse" at the International Association

of Forensic Nurses Scientific Assembly in Salt Lake City.

Clare Sullivan, M.S.N., R.N., instructor in Clinical Nursing, has returned to practice after working with the state Safety Net program. She is the nurse practitioner at Fall Hamilton School in Nashville.



Betsy Weiner, Ph.D., R.N., F.A.A.N., senior associate dean for Informatics, received the Information

Technology Award from Sigma Theta Tau International at the honor society's biennial convention in November. The award recognizes individuals or groups who have promoted innovative and creative approaches of knowledge building, synthesis, utilization and dissemination

through advanced technology to further the nursing profession and the health of the public in either practice or education. Weiner shares her Computer-Based Professional Education Award with Meg Irwin, R.N., N.D., project director of the International Nursing Coalition for Mass Casualty Education, and Little Planet Learning, Inc.



Jennifer Wilbeck, M.S.N., R.N., instructor in Nursing, and husband, Chris, welcomed Owen

Christopher into the world on Jan. 23.



Ally Thweatt Brown, a psychiatric mental health nurse practitioner graduate from 2002, and her husband, Jarrod, founded Mission Lazarus in the mountains of Southern Honduras. The organization helps provide

health care services, such as physicals, vaccinations and vitamins to this underserved area that is home to more than 2,000 people. For more information, visit: www.missionlazarus.org.

CLASS NOTES

Anna Ragsdale Gentile (B.S.N. '47) and **Nancy Ragsdale Gilien** (B.S.N. '47) received the Lucille Westbrook local history prize awarded by the Arkansas Historical Association for their paper "The Introduction of Public Health Nursing to Pope County, Arkansas: the Pioneering Work of Celeste Campbell, Red Cross Public Health Nurse." The sisters explored how American Red Cross leaders and volunteers tried to establish universal health care services in communities throughout the country during the first part of the 20th century.

Elizabeth W. "Bess" Isaacs (B.S.N. '47) was recently selected as New Mexico's 2007 Outstanding Older Worker. She regularly works 50 hours a week as a bookkeeper, secretary and salesperson for R.W. Isaacs Hardware in Clayton, N.M.

Carol A. Komara (B.S.N. '62) has been appointed to the National Council of State Boards of Nursing committee to develop a regulatory model for transitioning new graduates. She is the representative from the Kentucky Board of Nursing.



Virginia Trotter Betts, (M.S.N. '71) Commissioner of the Tennessee Department of Mental Health & Developmental

Disabilities, was recently named president of the National Association of State Mental Health Program Directors. The organization reflects and advocates for the collective interests of state mental health authorities at the national level.

Suzanne McMurtry Baird (B.S.N. '84, M.S.N. '95) served on a task for the Association of Women's Health, Obstetrics and Neonatal Nurses.

Laura Logsdon Hayes (B.S.N. '84) has completed her master's degree in Business Administration from Middle Tennessee State University.

Susan Germann Yackzan (B.S.N. '86) is working as the Oncology Clinical Nurse Specialist at Central Baptist Hospital in Lexington, Ky. She is married to **Joseph Yackzan** (B.E. '86) and is the busy mother of three boys. She recently published two chapters in the 2007 Oncology Nursing Society book "Site-Specific Cancer Series: Breast Cancer." In

addition, Susan is a contributor and faculty member for the newly launched Oncology Nursing Society Breast Cancer Online Course.

Sharon Hendrix (M.S.N. '91) presented a paper at the Kappa Theta Chapter's annual Nursing Research Day in November. She is the ARNP at the newest University Community Health Services clinic at Harman Becker Automotive Systems in Franklin, Ky. Her work, "A Healthy Workforce is Cheaper and Happier," focused on the wellness program at Sumitomo Electric Wiring in Bowling Green, Ky., and was published in the Kentucky Chamber of Commerce Newsletter. The program was selected as one of two models for the Governor's cabinet level Partnership for a Fit Kentucky.

Donna Herrin (M.S.N. '91), senior vice president and chief nurse executive at Methodist Le Bonheur Healthcare, has been elected president-elect of the American Organization of Nurse Executives (AONE). A registered nurse for more than 30 years, Herrin has served as president of the Alabama Organization of Nurse Executives and secretary of the Tennessee Organization of Nurse Executives.

Frances E. Likis (M.S.N. '94) was named editor in chief of the *Journal of Midwifery & Women's Health (JMWH)* for the American College of Nurse-Midwives. Likis has been deputy editor of *JMWH* since the beginning of 2007 and has been a member of the journal's editorial board since 2002. She is also the Coordinator of Graduate Education at the Frontier School of Midwifery and Family Nursing and is a sexual assault examiner

in Nashville. Likis has been active in ACNM and received the "Best Book of the Year" award in 2006 for her book, "Women's Gynecologic Health."

Margot Harris (M.S.N. '00) is an International Board Certified Lactation Consultant. She works as a women's health nurse practitioner for Mercy Health System in Janesville, Wis.

Melenie Meyers (M.S.N. '00) is working as a psychiatric mental health nurse practitioner in Kansas City, Mo., and is on faculty at Kansas University. Meyers was recently featured in News-Line for the work of PMHNPs caring for children and adolescents.



Terrah Foster (M.S.N. '01, Ph.D. '08) received a Dissertation Enhancement Grant from the

Vanderbilt Graduate School and the School of Nursing. Her dissertation is titled "Continuing Bonds: Maintaining Connections After the Death of a Child."



Caroline Portis Jenkins (M.S.N. '02) and Aaron Jenkins welcomed Margaret "Margo" Mae Jenkins to their family on Aug. 5, 2007. They live in Nashville.

Julie Lindsay (M.S.N. '05), a clinical instructor in the School of Nursing at the University of Texas Medical Branch at Galveston, developed the

"Pediatric Critical Care — End-of-Life Lecture" seminar that incorporates a realistic simulation exposing students to the impact of a child's death.

An abstract for **Melissa "Missi" Ann Willmarth** (M.S.N. '05) on Methicillin-Resistant Staphylococcus Aureus (MRSA) was accepted for American College of Nurse-Midwives in Boston 2008. She will be presenting on MRSA in pregnancy and in labor and delivery settings. Willmarth is currently a clinical instructor of Nursing at the University of Cincinnati College of Nursing.

Lisa Nicole Hockersmith (M.S.N. '06) is a mental health provider for the Primary Care and Women's Health Faculty Practices. She provides services at Parthenon Towers, Hadley Park Towers, Trevecca Towers and Vine Hill Community Clinic, all located in Nashville.

Sara Brumeloe (M.S.N. '07) was featured in the January issue of *SHAPE Magazine* in a story about how she lost 160 lbs.

Amy Clark (M.S.N. '07) spoke of her experiences as a volunteer with Project Hope to the School of Nursing in August. She shared insights from her medical humanitarian mission in collaboration with a U.S. Navy Health Care Team.

John "Keith" Evans (M.S.N. '08) recently set off on his fourth deployment to the Middle East. He has been stationed in both Iraq and Afghanistan, and works at Vanderbilt as a flight nurse. He is in his last year of the ACNP nursing program, which he has been attending part time.

Donna Kenerson (Ph.D. '08) completed her qualifying examination. Her topic was "Cultural Competence and Prostate Screening Practices of African-American Men."

Stefanie Kingsley (M.S.N. '08) had an article published in the CARING newsletter in 2007. She reported on the Joint Healthcare Information and Management Systems Society-Tennessee and CARING meeting in Nashville.

Panarut Wisawatapnimit (Ph.D. '08) has been designated as a 2007 Martha E. Brill, R.N. Scholar. She received \$10,000 to cover her dissertation research.

Latisha Lochabay (M.S.N. '97) is back in Saipan, Marianna Islands, after working as a reproductive health coordinator in the American Refugee Committee's endeavors at Thai-Burma refugee camps in Thailand. Latisha is credited with opening the first nurse-midwifery practice in Saipan.

IN MEMORIAM



Mary Louise "Lou" Donaldson (B.S.N. '54, M.S.N. '61, Ph.D. '74) professor of Nursing Emeriti died Sept. 11, 2007. She was in the first class of the School of Nursing's four-year B.S.N. program and joined the School's faculty after receiving her M.S.N. and Ph.D. Prior to her retirement in 1992, she made many contributions to the School including developing a media center and enhancing the curriculum. She served as the School's historian and published a book titled "A History of the Vanderbilt



School Alums have come together to form a walking team for the 2008 Music City Marathon. The group started training this winter during the weekends and is looking forward to this year's event on April 26. If you are participating in this year's marathon and want to join the group, please e-mail whitneysimmons2003@yahoo.com.

Pictured on a January training day (left to right): Jennifer Scroggie (M.S.N. '97), Traci Boswell (M.S.N. '03), Bo Boswell (husband of Traci Boswell, M.S.N. '03), Betsy Perky (M.S.N. '04) and Whitney Simmons (M.S.N. '03).

University School of Nursing" which chronicled the School's first 75 years.



Dorothy "Dot" Kent (B.S.N. '59, M.S.N. '68) died Oct. 17, 2007, after a long illness. She was a pioneer in the field of mental health nursing and a former assistant professor at the School of Nursing. In addition, she also worked full time, including every weekend, with patients at the Middle Tennessee Mental Health Institute. Miss Kent considered the School as her home and her family, and served as a role model, teacher and clinical nurse, training thousands of physicians and nurses in the Nashville community. Students, colleagues and patients knew her as kind and firm when she had to be. Her influence enabled the students she mentored to accomplish the impossible. At the time of her retirement from the School of

Nursing, the Dorothy Kent Lectureship on Mental Health was established in her honor.

Carl Kimmel Kirkpatrick III, son of **Donna Townsend Maddox** (B.S.N. '61) and spouse of **Kitty L. Wadlinger** (M.S.N. '03), died Aug. 7, 2007. A skilled pilot, Mr. Kirkpatrick flew for U.S. Air and other corporations. He and Kitty married in December 2006, and he was instrumental in encouraging her to attend the School of Nursing.

Cathrine Collinsworth Harris (B.S.N. '80) died Sept. 2, 2007, of colon cancer. She is survived by her husband, Robert, and two sons, Brian and Andrew. Her loving and caring qualities were quite evident in her nursing roles at Vanderbilt Hospital, Green Hills Pediatrics and Heritage Medical. In addition to her devotion to nursing, she enjoyed being involved in her son's schools. She was a chairperson for the Annual Fund Drive at St. Paul Christian Academy and was

president of the Mothers' Club at Montgomery Bell Academy.

Mary Joyce Wittgan Pina-Garza (M.S.N. '93), died on Aug. 25, 2007, following a car accident in San Antonio while traveling to visit family. She was a gifted adult learner, an active listener, an avid runner, a world traveler and a voracious reader. She worked as a medical missionary in Central America and as a local nurse practitioner at shelters for women and the homeless. Her work in epilepsy research will continue to help children with seizures for years to come. She married Eric Pina-Garza, M.D., in the mid 1990s, a neurologist at Vanderbilt University Medical Center.

Mollie Megan Driscoll (M.S.N. '00) died Dec. 28, 2007. While a student, she raised funds to travel to the annual American College of Nurse-Midwives meeting. During her specialty year she did clinical at Fort Campbell, Ky.'s Blanchfield Army Community Hospital and was admired by her preceptors, nurses and staff; among the earliest students to demonstrate that pre-specialty students without labor and delivery experience could be successful in the busy Fort Campbell environment. She worked in several positions as a CNM in California and, most recently, providing prenatal care at Planned Parenthood.

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VANDERBILT UNIVERSITY SCHOOL OF NURSING ALUMNI AWARDS

During Reunion Week in October 2007, the School honored the following people for their many distinguished contributions to nursing:

Sue Anderson Morgan, Ph.D. – B.S.N. '71, M.S.N. '72, Ph.D. '87
(Higher Education Administration)

Alumni Award for Excellence in Nursing

As a clinical nurse specialist at Huntsville Hospital in Alabama, Morgan has professional teaching responsibilities in several areas including family practice, diabetes, internal medicine, general medicine, nephrology and dialysis. Morgan consults with patients and families and is a consultant/resource nurse for the Nurse Managers and staff. She is also a CPR instructor and is certified in Crisis Prevention/Intervention.

Beth Towery Davidson – M.S.N. '91, D.N.P. '08

Alumni Award for Clinical Achievement in Nursing

Davidson has been active in clinical practice for the past 10 years and has focused on the complex care of patients experiencing heart failure and heart transplantation. In 1997, she joined the staff of Vanderbilt University Medical Center as an acute care nurse practitioner in the Heart Failure and Heart Transplant Program. The focus of Davidson's recent doctoral project was the development of a combined heart failure-device clinic.

Susan Roberts Cooper – B.S.N. '79, M.S.N. '94

President's Award of Distinction

Tennessee Health Commissioner Susan Cooper is responsible for facilities in 95 counties as well as 21 health-related regulatory boards and nine committees. She was an assistant dean at the Vanderbilt School of Nursing for more than 10 years and has been a health adviser to state government since September 2005. She has been instrumental in developing Tennessee's Health Care Safety Net and helped lead other statewide initiatives such as Project Diabetes and GetFitTN.

Louise Browning

Friend of Nursing

Browning served as executive director of the Tennessee Nurses Association from 1983 to 2004, which included leading the association's Government Relations Program and serving as the consistent voice and face of professional nursing with the executive and legislative branches of state government. Since her retirement, she has co-authored "A 100 Year History of the Tennessee Nurses Association."

Alan L. Graber, M.D.

Friend of Nursing

Graber was also one of the first preceptors of Vanderbilt's Nurse Practitioner program. He pioneered the team concept of diabetic care and championed the use of Nurse Practitioners in improving the care for people with diabetes, a practice that eventually became the standard for the American Nurses' Association Nurse Practitioner subspecialty certification in Advanced Diabetes Management.

James (Jim) Carell

Friend of Nursing

In 2005, Carell and his wife, Jan, established the James and Janet Carell/Tina Marie McIntosh M.S.N., C.P.N.P. Scholarship for Nurses to benefit nursing students demonstrating merit and financial need. During the recent renovation of the School of Nursing, when the nursing students needed a building to hold classes, Carell generously provided one of his own buildings for the students.

Vicky Gregg

Honorary Alumna Award

Gregg is the President and Chief Executive Officer of Chattanooga-based BlueCross BlueShield of Tennessee (BCBST) – the largest health care provider in the state, with more than \$16 billion in claims paid annually. Her customer-oriented approach is a key factor in helping BlueCross BlueShield excel as a not-for-profit company while setting a high standard for corporate and community responsibility.

reunion 2007



1. Members of the class of 1977

2. Sue Anderson Morgan

3. Kim Parham, left, and Marilyn Davis of the School's Alumni Board

4. Colleen Conway-Welch, left, and Steve McMillen

5. Susan Cooper, left, and Judy Sweeney

PHOTOS BY LEIGH HOSEK

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*Joyce Laben, J.D., M.S., B.S.N., R.N.
Vanderbilt Professor of Nursing, Emerita*

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