

PITT Nurse



THIS ISSUE: **IN SERVICE TO THE PROFESSION**

ALSO: ALUMNI DAY 2007 | CALL FOR 2007 DISTINGUISHED AND HONORARY ALUMNI NOMINATIONS



About the cover: The lamp Florence Nightingale carried on her rounds among the British soldiers injured in the Crimean War became a symbol of her efforts to improve the practice of nursing. Through the years, the lamp became the symbol of the nursing profession's commitment to the task of assuring continuous progress and improvement of nursing practice. The tradition of "Passing of the Light" was established as part of the University of Pittsburgh School of Nursing's first pinning ceremony in 1943 to symbolize the passing of this commitment from one generation of nurses to the next and an ongoing commitment to improve the nursing profession.

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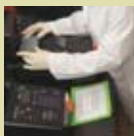
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EXPERTS TALK ABOUT AN IMPENDING CRISIS in healthcare as if the industry was static. But despite the warning of all these professional Cassandras, we remain optimistic about the future of the industry, because we believe nursing is a linchpin of healthcare transformation.

An article by guest author Suzanne Gordon, reprinted with permission from www.medscape.com, compares the historical image of nursing with the roles of nurses in today's changing healthcare environment. Nurses make a real difference in medical outcomes. "Nurses save lives, prevent suffering, and save money," she says.

The oft-reported nursing shortage is only one small part of the impending healthcare crisis. There are shortages of qualified people in all the healthcare professions facing increasing demands for services from a rapidly aging population and institutions already working at or beyond capacity. With more than four times as many RNs in the United States as physicians, nurses constitute the largest single component of hospital staff.

A variety of other converging social and economic forces are driving changes in the healthcare system, including an aging population of patients who are sicker and more savvy healthcare consumers, and the economics of healthcare delivery and reimbursement. At the same time, advances in scientific knowledge, new

technologies, and medical discoveries have improved patient outcomes and changed how healthcare is delivered.

While healthcare institutions work on refining their processes, we are developing highly skilled nurses with the necessary expertise to survive and thrive in this changing healthcare environment and bring their expertise to a wide range of healthcare settings.

With almost 500,000 healthcare establishments across the country, professionals who can fuse human compassion with advancing science and technology are in great demand. More than 2.5 million registered nurses nationwide serve as the primary providers of hospital patient care and deliver most of the nation's long-term care. Recent reports linking improved patient outcomes and safety to nursing education levels make it clear that the nation requires better-educated nurses.

The American Organization of Nurse Executives, the American Association of Colleges of Nursing, and the Global Alliance on Nursing Education concur. Each of these groups has issued a statement in support of baccalaureate education for nurses. These groups all conclude that today's nurses need to be prepared not only with a list of facts, but with the capability to evaluate and synthesize new information, the ability to adapt to an ever-changing environment, and the willingness to continue education as

knowledge expands and delivery systems develop and evolve.

Nursing students make up approximately half of all undergraduate health professions students at the University of Pittsburgh. The School of Nursing's highly acclaimed baccalaureate, master's, and doctoral programs give students a thorough preparation to make not just a contribution, but an immediate impact in a wide range of nursing specialties, while our PhD program prepares faculty to train the next generation of nurses.

In this issue of *Pitt Nurse*, you will learn how the School is responding to today's demands and projected needs for the future with a variety of programs and initiatives that are helping to advance the nursing profession and transform healthcare delivery. With growing research in the areas of healthcare informatics, genetics, technology, and acute and chronic care; educational preparation in evidence-based practice at all levels of study; and new graduate programs for clinical nurse leader and Doctor of Nursing Practice, we are contributing to the dynamics of the healthcare system and long-term transformations that will have a positive impact on the future of healthcare.

A handwritten signature in black ink that reads "Jacqueline Dunbar-Jacob".

JACQUELINE DUNBAR-JACOB, PHD, RN, FAAN
DEAN, UNIVERSITY OF PITTSBURGH
SCHOOL OF NURSING



HEALTHCARE IS ON THE VERGE OF A HUGE TRANSFORMATION. Gail A. Wolf, RN, DNS, FAAN, coordinator of the nursing administration and leadership program in the Department of Acute and Tertiary Care in the University of Pittsburgh School of Nursing, cites five major forces coming together to create what she calls a “perfect storm” in healthcare. A perfect storm is defined as an unlikely and catastrophic concatenation or coming together of singly innocuous events—a coincidental mix of just the right things with just the right timing to create a disastrous outcome.

Our country’s complex healthcare system, pieced together over many years, is under severe stress from environmental, social, and economic forces. Five of the major converging forces pushing the healthcare industry to the verge of chaos are:

- 1. Provider Changes:** The American Organization of Nurse Executives estimates the country will be short 1 million nurses by 2015. But the healthcare crisis is not restricted to a shortage of nurses. There is a national shortage of healthcare providers in every profession, including medical doctors trained in critical care, respiratory care providers, and

A PERFECT STORM IN HEALTHCARE

The nation's complex healthcare system is under severe stress from environmental, social, and economic forces.

pharmacists. There is also a shortage of faculty to enlarge the numbers of graduates. At the same time, new regulations limiting hours for residents have made it more difficult to provide coverage in surgical and critical care units.

- 2. Changes in Medicine:** Genetic discoveries are identifying tailored therapies for some illnesses, while new medicines, advances in radiology, and minimally invasive surgeries all change how healthcare is delivered.
- 3. Economic Changes:** Currently, the healthcare system focuses on intervention rather than more cost-effective prevention. In 2003, national healthcare expenditures in the United States totaled \$1.7 trillion or approximately 15 percent of the gross national product—more per capita than any other country. And, despite the amount of money we spend on healthcare, an estimated 17 percent of Americans younger than 65 do not have health insurance, and about 60 percent of healthcare organizations are operating without a bottom line. The United States and South Africa are the only countries in the developed world that do not provide healthcare for all their citizens. Further, the United States ranks 37th in quality of care, 29th in lifespan, and has the seventh highest infant mortality rate of the 30 most industrialized countries.
- 4. A Change in Patients:** Aging baby boomers ready to crowd the healthcare market are driving changes, not just with their numbers, but also with their level of knowledge and their attitudes about healthcare delivery. Armed with knowledge and data from the Internet, they want to be partners in healthcare—they don't want anyone telling them what to do, they want to have choices, and they want control. Furthermore, when the uninsured 17 percent of those aging baby boomers become eligible for Medicare, they may use

more healthcare resources because of healthcare that was delayed at earlier ages.

- 5. Advances in Technology:** Technology is changing the way patients access healthcare information and impacting the way healthcare professionals practice. The rapid availability of information to the general public, good and bad, on disease and management also has had a major impact.

ARE WE PREPARED?

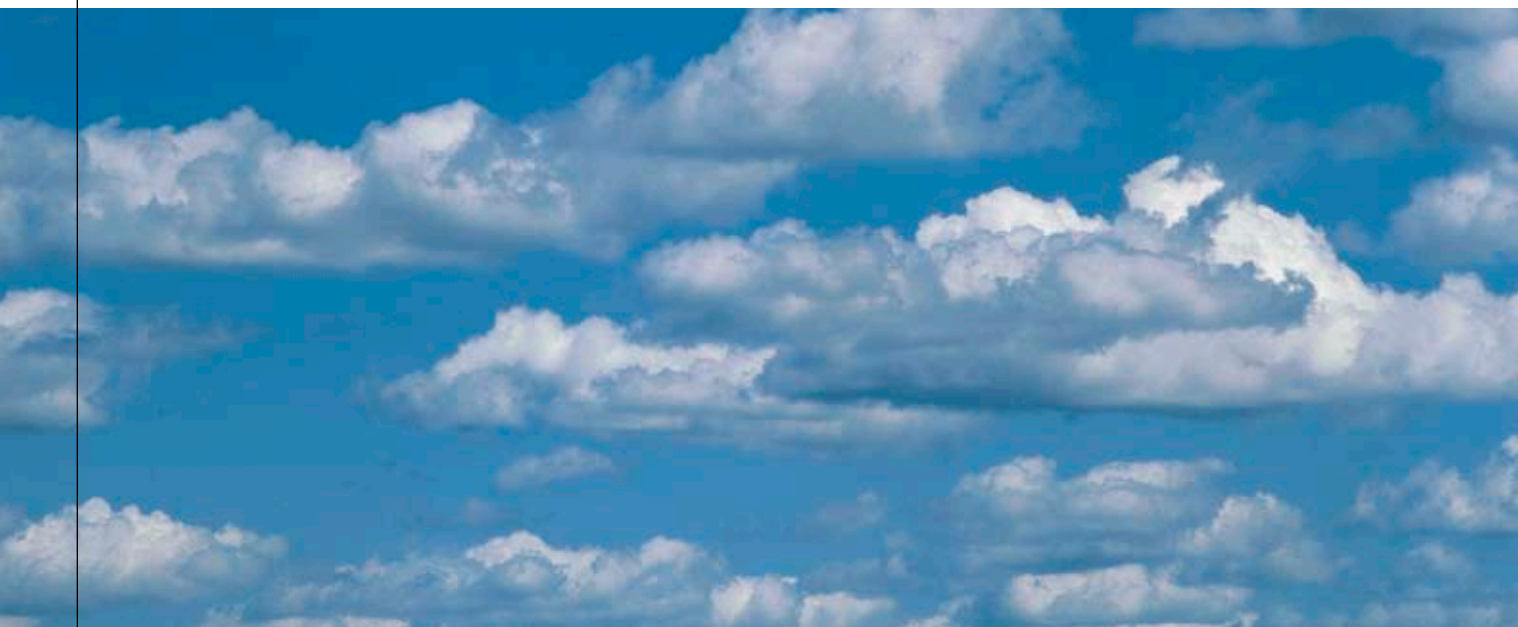
The hypothetical healthcare hurricane can still be averted. Programs and initiatives at the School may contribute to a “butterfly effect,” or any small change in the initial condition of a dynamic system, which causes a chain of events leading to large variations in the long-term behavior of the system.

Technology—along with highly skilled nurses trained in advanced practice specialties, evidence-based practice, healthcare informatics, and leadership—is already making a difference in healthcare delivery and outcomes.

ADVANCED PRACTICE NURSES

As the number of general practice physicians and physicians trained to provide critical care decreases across the country, nurse practitioners increasingly fill the void, caring for patients in a variety of settings, including nurse-managed primary care centers in more than 250 nationwide locations.

“The culture of healthcare has changed,” says Donna Nativio, PhD, CRNP, FAAN, associate professor in the Department of Health Promotion and Development and director of the family/adult and pediatric nurse practitioner



programs at the School of Nursing. “The traditional professional sovereignty of physicians has evolved into interdisciplinary teamwork as a care delivery model.” Part of that change has been the recognition that clinical nurse specialists and advanced practice nurses not only provide effective and safe patient care, but also fill the growing gap between doctors and patients.

Advanced practice nurses offer an extended array of health-care services, including primary and preventive care by nurse practitioners in clinical areas such as pediatrics, family health, women’s health, and gerontological care. Advanced practice nurses also provide care as certified nurse anesthetists and in cardiac, oncology, neonatal, neurological, and obstetric/gynecological nursing as well as other advanced clinical specialties.

In the hospital, advanced practice nurses increasingly make treatment decisions based on data from lab tests and assessments. Nurses determine the course of medication and therapy for their patients. They make critical choices about new technology and how best to use it. Research supports the merit of this changing paradigm. In a study funded by the National Institutes of Health, Leslie A. Hoffman, PhD, RN, FAAN, professor and chair of the Department of Acute and Tertiary Care, showed that outcomes were equivalent between advanced care nurse practitioners and house staff who managed patient care in a medical intensive care unit. And a 2000 study in the *Journal of the American Medical Association* concluded that patients who receive primary care from nurse practitioners have comparable outcomes and satisfaction levels as those treated by doctors.

Clinical nurse specialists also have increased roles. Responsibility for one unit or one patient population has expanded to system issues. These changes have facilitated greater nursing input into system decisions and increased opportunities for clinical nurse specialists to have an impact on patient care outcomes.

“In the future, expert clinicians will share responsibility and deliver healthcare that is appropriate and safe,” Nativio says.

DOCTOR OF NURSING PRACTICE (DNP)

The new Doctor of Nursing Practice (DNP) program will further advance the profession of nursing by providing an educational option for clinical nurses who wish to move ahead, and better reflects the level of responsibility and training for advanced practice nurses. The DNP positions nurse practitioners as highly skilled clinicians who can advocate for healthcare, influence patient care and healthcare delivery as patient advocates, and have an input on policy and ethics. The School of Nursing began accepting full- and part-time students for the DNP program beginning this fall. Pitt’s DNP program is the first to be offered in Pennsylvania.

An alternative to more traditional research-based (PhD) doctoral programs, the University of Pittsburgh’s DNP has a core curriculum that combines a patient and systems knowledge base with evidence-based practice. A 2005 report from the National Academy of Sciences called for nursing to develop a nonresearch clinical doctorate to prepare expert practitioners who also can serve as clinical faculty.



A perfect storm is ... a coming together of singly innocuous events—a coincidental mix of just the right things with just the right timing to create a disastrous outcome.

NURSING LEADERSHIP

Skilled nursing leaders are another force that can help mitigate the impending healthcare crisis by influencing transformational changes. “A transformational leader needs to know how to influence, change, and motivate people,” Wolf says. “Any leader can take people where they want to go, but a transformational leader takes people where they need to be. That’s an art! That’s strategic leadership.”

In order to influence a clinical discipline effectively, a leader needs to understand that discipline. “If we don’t develop nursing leaders to teach the art of leading a clinical discipline, we’ll end up being led by leaders from other disciplines such as accounting or business,” Wolf says. “And if that happens, the role of nursing will begin to be looked at more as a task-oriented, production-line piece by people who do not really understand or appreciate what nurses do—they just see the task work.”

TECHNOLOGY

As information technology and advances in medical technology impact how care is delivered, healthcare providers will be increasingly dependent on technology to achieve safe patient care that is provided with measurable quality. Nurses are the link between technology and touch.

Researchers at the School of Nursing are developing technology solutions to assist caregivers as well as improve outcomes and quality of life for patients. Studies include the use of handheld pocket computers to promote adherence, communication devices for nonspeaking intensive care unit patients, robotic assistance for the elderly, and healthcare informatics and computer training modules to support evidence-based practice.

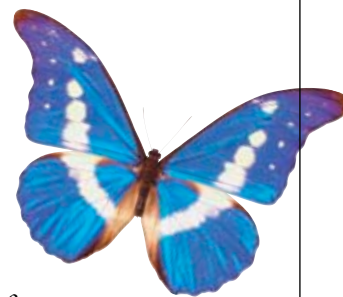
In the classroom, technology is used to enhance the academic goals of the School of Nursing. Using learning and instructional theory, classroom designs and technology solutions are developed to meet the educational needs of both faculty and students. “Not just their stated needs, but educational needs they may not even be aware of,” says Peter Draus, EdD, director of the Learning Resources Center and assistant professor in the Department of Health and Community Systems.

In addition, the School is a leader in simulation training. John O’Donnell, MSN, RN, director and instructor in the nurse anesthesia program, is studying the impact of simulation training in catheter insertion performance, and how skills learned in simulation translate to clinical practice.

THE BUTTERFLY EFFECT

With more than four times as many RNs in the United States as physicians, and an aging population that’s growing faster than at any other time in history, nurses are shaping the future of healthcare in ways that could not have been imagined even a decade ago. As healthcare planners begin to define the work of the future, and the roles needed to do that work, the School of Nursing will continue to add new programs and adapt existing programs to educate nurses to fill those changing roles and effect positive changes in healthcare.

If, as weather forecasters hypothesize, a butterfly flapping its wings in Tokyo, Japan, could cause tornadoes in California, imagine what highly skilled nurses can do to divert a storm—perfect or imperfect—in healthcare.





THE UNIVERSITY OF PITTSBURGH SCHOOL OF NURSING graduates approximately 350 nurses each year, including baccalaureate (BSN), RN to BSN, accelerated second degree, master's, and doctoral students. Additionally, the School's Fast Track Back program enables registered nurses without recent clinical experience to move back into the profession, while continuing education programs at the School help keep practicing nurses current with the latest information and technology.

The School also is addressing the nursing shortages with master's and doctoral programs that prepare nurse educators to teach the next generation of nurses. And, in response to a demand for more nurses with advanced clinical skills, the school has added several programs, including clinical nurse leader, and the Doctor of Nursing Practice, the terminal degree for advanced practice and nursing leadership roles. The School is planning to add neonatal nurse practitioner and acute care pediatric nurse practitioner programs.

SKILLED NURSES: CHANGING THE HEALTHCARE CLIMATE

An effective response to the nursing shortage requires highly skilled nurses and a commitment to nursing education.

But an effective response to the nursing shortage requires more than adding numbers of nurses to the system. It requires highly skilled nurses who are prepared to practice in multidisciplinary teams and in an increasingly complex healthcare environment. Today's nurses require not only high levels of skills and critical thinking; they also need to know how to access, analyze, and apply the latest information as it becomes available.

THE CASE FOR BACCALAUREATE EDUCATION

Readers of this magazine already appreciate the value of BSN education for nurses. A growing body of evidence shows BSN graduates bring unique skills to their work as nursing clinicians and contribute to safe patient care. A study published in the September 24, 2003, issue of the *Journal of the American Medical Association* reports a clear link between higher levels of nursing education and better patient outcomes. The report concludes that increasing the percentage of nurses educated at the baccalaureate level can decrease mortality rates for surgical patients and patients who develop complications.

While advances in scientific knowledge and new technologies have improved patient outcomes, they also have changed how healthcare is delivered. As a result, nursing today is becoming increasingly complex and challenging. Nurses need to be better educated than ever before so they are able to gather, analyze, evaluate, and apply the most current information for

improved patient care and outcomes. In response to these changes and reports linking improved patient outcomes and safety to nursing education levels, the American Organization of Nurse Executives, the American Association of Colleges of Nursing, and the Global Alliance on Nursing Education have all issued statements in support of baccalaureate education.

The groups concur that education has a direct impact on the skills and competencies of a nurse clinician that leads to better care and improved patient safety and outcomes.

WHY A BSN FROM PITT?

The School of Nursing is meeting the challenges of nursing head on, preparing students to face the demands required of them: to provide care and comfort to patients, make decisions based on data from lab tests and monitor technology, collaborate with other healthcare professionals, and teach patients and their families how to take care of themselves and maintain their health. Pitt nurses are valued for their critical thinking, leadership, collaboration, case management, and health promotion skills across a variety of healthcare settings.

Simulation training and evidence-based practice (EBP) are incorporated at all levels of the curriculum to prepare students with the necessary knowledge and skills to support best practice. Both of these programs were featured in the summer '05 issue of *Pitt Nurse*.

Healthcare informatics and nursing research are introduced in the freshman year to support EBP, provide students with the tools and skills they need to access and evaluate the latest research literature, and then apply that information wisely and systematically.

Baccalaureate training at the School of Nursing prepares nurses with the necessary skills and knowledge to meet the demands of a changing healthcare environment. Pitt nurses are prepared not only with a list of facts, but with the capability to evaluate and synthesize new information, the ability to adapt to an ever-changing environment, and the willingness to continue education as knowledge expands and delivery systems develop and evolve.

RN OPTIONS

RN to BSN and RN to MSN options at the School provide registered nurses who have a degree or a diploma from a two-year program a convenient and affordable way to earn a BSN and/or master's (MSN) degree from one of the nation's outstanding schools of nursing. The RN to MSN program is a bridge curriculum to graduate school.

The result of both RN Options programs is a high-quality, personalized educational experience for the students and more highly trained nurses in the workforce in less time.

THE SECOND DEGREE ACCELERATED PROGRAM MOVES MORE NURSES INTO PRACTICE

Individuals who already have an undergraduate degree in a discipline other than nursing can switch to a career in nursing through the School's Accelerated Second Degree BSN program. This intensive, fast-paced program builds on a student's previous education and science prerequisites to offer the nursing content necessary to enable students to earn a BSN degree within three terms of full-time study. Within one (very intense) year, the students function as nurses—Pitt nurses!

The School's first class of accelerated second degree students graduated in August 2005 and had a 100 percent first-time pass rate on the National Council Licensure Examination. Current students entered this program from a variety of fields, including psychology, biology, business, anthropology, music, engineering, and sports medicine—and some have master's and PhD degrees in other disciplines. Their ages range from 20s to 50s. "Their reasons for pursuing a BSN are personal and as varied as their backgrounds," says Eileen Chasens, DSN, RN, assistant professor in the Department of Health and Community Systems and coordinator of the Accelerated Second Degree BSN program. "The broad knowledge and expertise they bring to the program adds to their depth."

The Accelerated Second Degree BSN program puts more Pitt nurses in the workforce.

FAST TRACK BACK GETS NURSES BACK IN THE WORKFORCE

The Fast Track Back: Re-entry to Practice for Registered Nurse program helps move more, better prepared nurses back into the workforce. Directed to registered nurses without recent clinical experience, this intense five-week program is offered to registered nurses at the Oakland and Johnstown campuses. Lectures are given at the Oakland campus and simultaneously videoconferenced to the Johnstown campus, so nurses on the Johnstown campus receive the same classroom content at the same time as students on the Oakland campus. Johnstown nurses are only required to come to Oakland twice, for human simulation learning experiences at the Peter M. Winter Institute for Simulation, Education, and Research.

Clinical hours and time in the simulation lab help students refresh their physical assessment skills, but the program is much more than a skills refresher course! Nurses also are updated on HIPAA regulations, pharmacology, ethics, nursing theory, and best practice. They also learn how to delegate and work in an interdisciplinary team. At the conclusion of the program, nurses are prepared to begin their hospital orientation and resume their nursing careers.

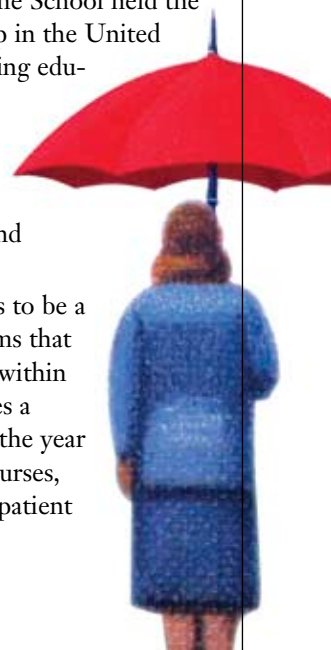
The next Fast Track Back program begins on October 4, 2006.

CONTINUING EDUCATION

Continuing education programs at the School help keep practicing nurses current with the latest information and technology.

The School has been a pioneer in continuing education. Two years after it was established in 1939, the School held the first nursing continuing education workshop in the United States. The 1941 summer workshop in nursing education provided teachers and supervisors in nursing schools individual and group work in curriculum construction, evaluation, guidance and methods in nursing sciences, nursing arts, mental hygiene, and medical and surgical nursing.

Today, the School of Nursing continues to be a leader in continuing education with programs that anticipate and address contemporary issues within healthcare and nursing. The School provides a variety of educational offerings throughout the year to enhance and advance the knowledge of nurses, enabling them to put the latest advances in patient care into practice.



Pennsylvania is in the process of enacting a bill mandating continuing education for nurses. The bill will take effect one year after it is signed by the governor. Currently, 27 other states have mandatory continuing education, and nursing is the only health profession in Pennsylvania that does not already mandate some sort of continuing education.

“Nursing knowledge doesn’t stop at graduation,” says Rosemary Hoffmann, PhD, MSN, RN, instructor in the Department of Acute and Tertiary Care. “The nursing profession changes daily, so you need to continue to learn.”

EDUCATING MASTER’S PREPARED NURSES

Ranked among the top 10 programs in the country, the School of Nursing master’s (MSN) program features a wide variety of options to prepare students for advanced practice nursing or advanced specialty roles. Approximately 300 students are enrolled in the School’s master’s programs on a full- or part-time basis. Areas of study range from a clinical focus, including nurse anesthesia, nurse practitioners, and clinical specialists, to concentrations in informatics, clinical research, education, and administration. Students also can choose from a variety of dual majors, minors, and post-master’s certificate options.

Each of the programs focuses on developing the skill sets that increase the expertise and marketability of advanced practice nurses, and much of the course work can be completed online or through distance learning. The program is flexible enough to keep pace with the changing demands of the nursing profession and healthcare systems as well as the needs of the students.

Graduates serve the profession in a broad array of institutional, community, and business settings, including clinical practice, information systems, clinical

EVIDENCE-BASED PRACTICE

As the knowledge base for healthcare expands, nurses need to access, analyze/evaluate, and apply the latest information as it becomes available. In response to these challenges, the University of Pittsburgh School of Nursing has increased its emphasis on the skills and knowledge necessary to engage in evidence-based practice (EBP). EBP is a process by which nurses make clinical decisions using the best available research evidence and their clinical expertise as well as the preferences and values of the patient and family. Research has shown that clinical decisions based on best evidence can improve the quality of care and the patient’s quality of life.

Teaching EBP is much more than simply bringing evidence into the classroom. Students learn EBP as a total process, beginning with identifying which clinical questions to ask. Then, students learn how to find, evaluate, and apply current evidence. Finally, students learn to evaluate the effectiveness of care and continue to improve the process. The EBP process is integrated throughout the curriculum beginning in the freshman year and continuing through the graduate program offerings to ensure that graduates apply new information wisely and systematically throughout their careers.

Additionally, all students in the School of Nursing are prepared in healthcare informatics beginning in the spring term of the freshman year. Students learn about information technology applications that manage clinical information systems, support patient care, and examine how healthcare data are transformed to nursing knowledge. Informatics applications support EBP by helping students access and evaluate current research.

EBP requires practitioners to judiciously access and evaluate current best evidence in making decisions about the care of individual patients. In order to apply EBP, nurses must be able to build a patient, intervention, comparison, and outcome (PICO) outline and develop an answerable clinical question for the particular problem or case presented. Assessing and Accessing the Evidence (AAE) is a new online learning tool designed to help faculty teach the fundamentals of EBP. The AAE learning tool helps faculty and students build a PICO outline, practice developing an answerable clinical question from each problem case presented, and demonstrates how to find evidence in the research literature to answer the question. The program was conceived and created through the efforts of a multidisciplinary EBP working group at the School and the Health Sciences Library that set about to develop creative methods for learning through the adaptation of technology.

STUDENTS MAKE A DIFFERENCE

Like many of the clinical faculty, Marie Fioravanti, MSN, RN, instructor in the Department of Acute and Tertiary Care at the University of Pittsburgh School of Nursing, maintains an active clinical practice. Working on the floor is one of the ways she gives back to the profession and makes a difference. Students also benefit from faculty who stay current with nursing practice and maintain their clinical skills.

Each term, Fioravanti assigns her students a project: “I tell the students to ask the head nurse and the staff members about a question they’ve always had but never had time to look up,” she says. For example, Fioravanti noticed the staff on

her unit sometimes used clean technique and sometimes sterile technique when doing a dressing change. “I was taught to always use a sterile technique when doing a dressing change, so one student was assigned to research current best practices in the literature, then give a PowerPoint presentation on the findings to the class, and a paper to the head nurse.”

The student’s research revealed that while the sterile technique is still required in some situations, the clean technique is appropriate in others. As a result, Fioravanti changed her practice based on current best practice. Incorporating evidence-based practice into their clinical experience is another way our students make a difference.

RESPONDING TO THE NURSING SHORTAGE



Marie Fioravanti, MSN, RN, instructor in the Department of Acute and Tertiary Care at the University of Pittsburgh School of Nursing, maintains an active clinical practice. Working on the floor is one of the ways she gives back to the profession and makes a difference.

research, and hospital administration where they work in patient management, apply research to practice, develop practice protocols and procedures, and educate patients and other professionals.

Refer to the article on page 22, “From Students to Leaders,” for a more in-depth review of each of the School’s master’s programs.

EDUCATING NURSE LEADERS

The School offers several nursing leadership programs to prepare nurses for management positions.

The School of Nursing introduced a new advanced specialty master’s degree program for nurses who do not wish to leave the bedside but would still like to take on an expanded role within their organizations. The Clinical Nurse Leader (CNL) master’s program is designed for nurses who want to make a difference in the clinical setting. It is not a management position. While the nurse manager role is largely administrative, the CNL brings a high level of clinical competence and knowledge to the point of nursing care and serves as a resource for the nursing team. The role of the CNL can impact patient outcomes and make healthcare delivery more efficient

and effective by coordinating, delegating, and supervising the care provided by the entire healthcare team.

Leadership training also is offered at the doctoral level in the School’s new Doctor of Nursing Practice (DNP) program.

Nurses prepared as skilled leaders will influence strategic change in the healthcare environment.

DOCTORAL PROGRAMS

DOCTOR OF NURSING PRACTICE (DNP)

Another new educational opportunity is available at the School to help leaders in the nursing field meet the evolving expectations and demands of the modern healthcare system. The Doctor of Nursing Practice (DNP) at the School of Nursing is the first to be offered in Pennsylvania.

The DNP is designed for nurses seeking a doctorate in advanced nursing practice or in nursing leadership, and offers an alternative to research-focused doctoral (PhD) programs. While existing practice disciplines focus on research, education, or practice, the DNP combines all three for advanced patient care and leadership. Nurses graduating from this program will be prepared with a blend of clinical, organizational,

economic, and leadership skills. A 2005 report from the National Academy of Sciences called for nursing to develop a nonresearch clinical doctorate to prepare expert practitioners who also can serve as clinical faculty.

The DNP moves nursing in the direction of other health professions: medicine (MD), dentistry (DDS), pharmacy (PharmD), psychology (PsyD), occupational therapy (OTD), physical therapy (PTD), and audiology (AudD) all offer practice doctorates. The American Association of Colleges of Nursing intends the DNP to be the terminal degree for all advanced practice nurses by 2015. Master’s-level nursing will continue, but this practice-focused program gives advanced practice nurses the opportunity to extend their existing master’s-level preparation to the doctoral level. “The DNP brings the education of advanced practice nurses to a new level of state-of-the-art and science expertise that is commensurate with the scope of practice required by the discipline and profession,” says Jacqueline Dunbar-Jacob, dean of the School of Nursing. The School is currently offering two different DNP tracks, one in nursing administration and one for the clinical nurse specialist role, including adult medical surgical and psychiatric mental

health. Additional tracks will be added pending state and practice approvals.

Current research has established a clear link between higher levels of nursing education and improved patient outcomes. “The DNP degree reflects the level of scientific knowledge and practice expertise required for nurses in these roles to assure high-quality patient outcomes,” Dunbar-Jacob says.

RESEARCH-FOCUSED DOCTORAL (PHD) PROGRAMS

The PhD program at the School opened in 1954. At the time, Pitt was one of the first three schools of nursing in the nation to offer doctoral preparation in nursing. Today, the School of Nursing is ranked among the top 10 graduate programs in the country.

The University of Pittsburgh is recognized as a major nursing research center and has attracted national, state, and local recognition for its commitment to high quality, innovative research, and its multidisciplinary, collaborative process. With more than \$10 million in research funding, the School is ranked fifth in the amount of funding received from the National Institutes of Health and has been designated a research-intensive environment by the National Institute of Nursing Research. Faculty at the School engage in clinical and basic science research, with the goal of improving care for individuals across the life span.

Students benefit from the School’s affiliation with the University of Pittsburgh Medical Center (UPMC), which is distinguished by ongoing research and medical innovations. But the doctoral program at the School is particularly distinguished by its mentoring system. Emulating the behaviors of faculty models, students are prepared to serve the profession by assuming multiple roles. In addition to teaching instructional theory and research skills,

continued on page 15

TRAINING STAFF NURSES IN AN ENVIRONMENT OF CHANGE

Advances in scientific knowledge and new technologies have improved patient outcomes and changed how healthcare is delivered. More procedures are done on an outpatient basis, and even inpatients are now sent home sooner, and frequently sicker, than patients were in the past. As a result, hospital inpatients today tend to be sicker, and they frequently suffer comorbidities. At the same time, workforce efficiencies have led to fewer nurses providing a greater level of care to more patients.

“Patients are sicker now,” says Marie Fioravanti, MSN, RN, instructor in the Department of Acute and Tertiary Care at Pitt’s School of Nursing. “And, like the rest of life, everything is more rushed.”

“Today’s nurses are expected to know a lot more than they used to,” Fioravanti says. Patients with comorbidities may require complex medication regimens. In order to appreciate how all the

different medications interact and how they impact a patient’s outcome, students need to have a good understanding of what is going on with the patient—physically and psychologically. “I don’t know if I can teach compassion, but I do teach students to treat each patient as though they were taking care of their own family.”

Fioravanti enjoys seeing students grow and mature in their roles as nurses. “Students on clinical rounds for the first time are often frightened to enter patients’ rooms, but eventually, they are offering care for patients with ease,” she says.

As a clinical instructor, Fioravanti guides students in critical thinking exercises and interdisciplinary collaboration, and ensures they are competent in providing evidence-based healthcare and therapeutic interventions to manage a variety of patients across a continuum of healthcare settings. In short, she makes sure that, from whichever program they graduate, her students are qualified to be called Pitt nurses!

TRANSITION IN NURSING EXCELLENCE AWARDS

“The nurse is the center of patient care,” says Rosemary Hoffmann, PhD, MSN, RN, instructor in the Department of Acute and Tertiary Care at the University of Pittsburgh School of Nursing. “But the nurse’s role is much more than direct patient care.” Because they are with the patient 24 hours and have access to all the healthcare delivery teams, nurses must serve as patient advocates and educators, and they must supervise the patient’s care plan. In addition, nurses are responsible for quality assurance. They must monitor effects of medication, and they need to know current policies and trends in healthcare. “Nursing is more than tasks!” Hoffmann says.

Hoffmann teaches Advanced Clinical Problem Solving/Transition into Professional Nursing Practice (Transitions) to senior nursing students. The transitions course helps students move into professional practice through preceptorships with registered nurses in a variety of settings.

Transitions students spend 270 clinical hours with a professional staff nurse. “We also encourage students to spend time with a unit director or nurse practitioner, a charge nurse, and an interdisciplinary care team to give them exposure

to leadership and other aspects of the nursing role,” Hoffmann says. The transitions experiences enable students to synthesize the knowledge they have accrued about the professional nursing role through their didactic and clinical classes, and increase their responsibility and accountability for patient care.

Twice a term, a Transition in Nursing Excellence Award is presented to a student who has made a significant contribution to professional nursing. The award is based on best practice areas, including:

- Prevention of harm: What did the student do to prevent harm to patients, families, or staff?
- Education: What creative or innovative teaching method did the student use to educate patients and their significant others about their healthcare need?
- Patient advocacy: What legal or ethical issues did the student implement to become a patient advocate?
- Leadership: What leadership role did the student develop to promote professional nursing?

“The award is for more than doing a good thing,” Hoffmann says. “We encourage and recognize students who make a difference.”



Yvette Conley, PhD, assistant professor in the Department of Health Promotion and Development, teaches in the School of Nursing's genetics laboratory. The School is the first school of nursing in the nation to develop active genomics laboratories in house.

NURSING RESEARCH

RESEARCH IN TECHNOLOGY, GENETICS, AND CHRONIC AND CRITICAL ILLNESS IMPACT PATIENT CARE AND ADVANCE THE SCIENCE AND PRACTICE OF NURSING.

FOUR RECENT STUDIES at the University of Pittsburgh School of Nursing in the fields of technology, genetics, and critical care have been funded by the National Institutes of Health (NIH) with the goal of impacting patient care through translational research. The most important characteristic of translational research is the clinical interface: bi-directional in nature, it works from the laboratory to the clinic, and from the clinic back to the laboratory. Translational research is inherently collaborative and interdisciplinary, with the objective of moving research toward effective therapies.

TRAINING THE FUTURE NURSE RESEARCHER

The School of Nursing recently received two training grants from the National Institute of Nursing Research (NINR) to train research nurses in two areas: technology and genetics. The nurse researcher of the future needs to be able to design, apply, and evaluate relevant technology; examine the acceptability of high-tech solutions to patients; and collaborate with bioengineers to refine existing or develop new technologies that have the potential to assist/augment the delivery of interventions and improve biobehavioral outcomes. Both of these fields are rapidly developing, and both impact nursing practice.

Technology and its use in patient care delivery are becoming increasingly pervasive. One way to decrease the public health burden of chronic and critical illness may be through technology-supported interventions that have the potential to improve biobehavioral outcomes. Thus, developing a critical mass of nurse researchers who can examine the vital role of technology in therapeutic interventions within an interdisciplinary context is critically important.

“Technology: Research in Chronic and Critical Illness” is directed by Judith Erlen, PhD, RN, FAAN, professor in the Department of Health Promotion and Development and doctoral program

coordinator, and codirected by Leslie Hoffman, PhD, RN, FAAN, professor and chair of the Department of Acute and Tertiary Care. The goal of this training program is to provide rigorous research training centering on technology-supported interventions to improve biobehavioral patient outcomes.

The second training grant awarded by the NINR is “Targeted Research and Academic Training for Nurses in Genomics,” directed by Janice Dorman, PhD, professor in the Department of Health Promotion and Development and associate dean for scientific and international affairs, and Yvette Conley, PhD, assistant professor in the Department of Health Promotion and Development.

With the completion of the Human Genome Project, genetic testing for disease susceptibility, diagnosis, treatment, and prognosis has the potential to become part of mainstream medical care and, consequently, impact patient outcomes of interest to nursing. These advancements were made, and continue to be made, because of innovations in high throughput genomics technology, bioinformatics, and genomics research.

As the largest and most trusted group of professional healthcare providers, nurses are in an excellent position to bridge the gap between genomics research and clinical practice. They interact with patients at all stages of life, in all aspects of health and wellness, and in all clinical arenas.

And, as the first school of nursing in the nation to develop active genomics laboratories in house, the School of Nursing is an ideal environment to develop such a training program. Directed by our own research faculty with formal training in the field of genomics, the lab houses extensive internationally based biological specimen banks with linkages to clinical databases that are available for trainees’ research projects. These unique resources continue to expand and increase in size and diversity as our research portfolio continues to grow. This training program prepares pre- and post-doctoral nurse scientists in genomics.

DEVELOPING AN INFRASTRUCTURE FOR THE CHRONICALLY ILL

Lung transplant recipients have more complications and higher mortality rates than recipients of other organs, yet strategies to maximize recipient involvement in improving health outcomes have received little attention. Annette DeVito Dabbs, PhD, RN, assistant professor in the Department of Acute and Tertiary Care, received funding from the NINR to test whether providing lung recipients with a pocket computer and custom programs to monitor their conditions, take medications, and communicate with the transplant team will help prevent



and detect the acute complications that interfere with the quality of survival after lung transplantation. The work has relevance for promoting self-care activities for patients with a variety of chronic conditions. This plan proposes a novel intervention using a hand-held, interactive technology to promote self-care agency and self-care behaviors in lung recipients, thus maximizing the contribution of recipients themselves in preventing and detecting post-transplant complications.

A recent recipient of the Lucie Young Kelly Faculty Leadership Award, DeVito Dabbs plans to establish a lung transplant symptom registry at the School of Nursing to provide a formal mechanism for multicenter collaboration and build a central repository of symptom data collected from participating lung transplant centers worldwide. Lucie Young Kelly, PhD, RN, FAAN, is recognized nationally and internationally as a leader in the field of nursing. Her work as an author, professor, administrator,

lecturer, and consultant has produced a distinguished record of accomplishments and awards, and her contributions are both a source of inspiration and pride to the nursing profession. The Lucie Young Kelly Faculty Leadership Award is given every three years to an outstanding faculty member who is recognized by his or her peers and the School's administration as having demonstrated outstanding leadership qualities within the discipline of nursing.

DeVito Dabbs' plan for a lung transplant registry will assist nursing researchers, as well as researchers for other disciplines, in following trends and patterns of lung transplant recipients in more diverse populations and changing the way health professionals approach symptom management with their patients.

HELP FOR THE CRITICALLY ILL

Mary Beth Happ, PhD, RN, associate professor in the Department of Acute and Tertiary Care, also is researching how health professionals—in particular, critical care nurses—approach the critically ill. Happ's early findings of a five-year, NIH-funded study titled "Improving Communication with Nonspeaking ICU Patients" shows how speech-generating devices (SGDs) can help patients with respiratory tract intubation communicate with others.

Critically ill patients are often unable to speak as a result of respiratory tract intubation for airway management and mechanical ventilation, which can be a traumatic life event that is frightening, reduces patient participation in care and decision making, and impairs pain and symptom assessment. No large-scale communication intervention studies have been conducted in the intensive care unit (ICU) setting. Happ has discovered that although writing and making gestures were the most common communication methods among these patients, SGDs may be an appropriate assistive communication strategy for postoperative patients with head and neck cancer. Nurses can facilitate effective patient communication with SGDs by cuing patients on device options and positioning SGDs within easy reach.

IMPACTING NURSING PRACTICE

Researchers at the School of Nursing work with interdisciplinary faculty throughout the University on a wide variety of programs that position trainees to conduct innovative, state-of-the-art, translational research that advances the science and practice of nursing—now, and in the future.

SKILLED NURSES *continued from page 11*

mentors encourage students to actively participate in professional organizations and to serve as practicing clinicians, researchers, leaders, and teachers. “Early mentoring is important to help students through difficult times and situations,” says Judith A. Erlen, PhD, RN, FAAN, professor in the Department of Health Promotion and Development, PhD program coordinator, and associate director of the Center for Research in Chronic Disorders. “A person isn’t finished when he or she graduates!”

80 PERCENT OF THE SCHOOL'S PHD GRADUATES ASSUME FACULTY POSITIONS

Educating the next generation of nurses is essential to address the nursing shortage. And to accomplish that, the profession needs more qualified nurse educators—in the classroom and in the clinical setting. “Good clinical faculty and good clinical facilities are important to give students meaningful experiences as part of their nursing education,” Erlen says. “We are fortunate to have partnerships with some of the most outstanding clinical facilities in the country.” UPMC offers high-tech, cutting-edge experiences in academic health center hospitals as well as community care.



“The PhD program prepares students to assume more than one role—people who can do research and teach, and lead, and who actively participate in national organizations to advance the practice of nursing,” Erlen says. “There are parallels between teaching and research skills. Both disciplines require the ability to establish objectives and communicate information in a clear, organized, articulate manner. You have to know your audience, and you need to be able to think on your feet and be a good storyteller in order to demonstrate and sell your ideas.”

More than 90 percent of the School of Nursing’s doctoral students seek a position in academia upon graduation. “You can’t change the world by yourself,” Erlen says. “But, as a nursing educator I have been able to build an army by educating people to feel the way I do. And, with an army who shares the same values, maybe we can win the war.”

ADVANCING THE PRACTICE OF NURSING

More than 11,000 graduates from the School of Nursing’s baccalaureate, master’s, RN Options, accelerated second degree, and doctoral programs are having an impact on the profession as top-notch clinicians, educators, researchers, and administrators all across the country and around the world, including six deans of schools of nursing, a former college president, and the chief executive officer of the Oncology Nursing Society. In addition, faculty and alumni serve on the boards of state, national, and international professional organizations. As graduates from the School of Nursing educate the next generation of nurses, Erlen’s army continues to grow and influence the practice of nursing and healthcare.

“Good clinical faculty and good clinical facilities are important to give students meaningful experiences as part of their nursing education.”

NATIONAL RESEARCH COUNCIL

The National Research Council (NRC), part of the National Academies, has recognized PhD nursing programs as research doctorate programs in the life sciences. The NRC collects comparable data about doctoral programs as part of its mission to further knowledge and advise the federal government. The collected data also can be useful to doctoral students; provide potential students and the public with accessible, readily available information on doctoral programs nationwide; help universities improve the quality of their doctoral programs through benchmarking; and enhance the nation’s overall research capacity.



ACTIVE GRANTS LIST JULY 2006

Professional Nurse Traineeship;
Albrecht, S.

Agency: Health Resources and Services Administration (HRSA)

CSF Ca++ APOE Protein and Genotype and CV After TBI;

Alexander, S.

Agency: CRDF

Symptom Clusters in Patients with Chronic Disorders and Cancer as a Comorbidity; **Bender, C.**

Agency: Oncology Nursing Society (ONS)

A Pilot Study of a Double-Blind, Placebo-Controlled Clinical Trial of Mirtazapine for the Prevention of Depression Associated with High-Dose Interferon Therapy in Patients with Melanoma; **Bender, C.**

Agency: Organon

Cumulative Interferon Dose in Patients with Melanoma Receiving Pretreatment with the Antidepressant Mirtazapine vs. Placebo; **Bender, C.**

Agency: Schering Corporation

Cognitive Impairment Related to Anastrozole Use in Women; **Bender, C.**

Agency: National Institutes of Health (NIH)/National Cancer Institute (NCI)

Grant Code: R01

Substance Users, HIV Infection, and Adherence;

Broyles, L. (Erlen)

Agency: NIH/National Institute of Nursing Research (NINR)

Grant Code: F31

Treatment Preference and Vegetarian Diet in Weight Loss; **Burke, L.**

Agency: NIH/National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)

Grant Code: R01

Improving Self-Monitoring in Weight Loss with Technology; **Burke, L.**

Agency: NIH/National Heart, Lung, and Blood Institute (NHLBI)

Grant Code: R01

American Heart Association Conference Support; **Burke, L.**

Agency: American Heart Association/NIH/NHLBI

Enhancing Adherence in Type 2 Diabetics; **Burke, L., Sereika, S. (Sevick)**

Agency: NIH/NINR

Grant Code: R01

Genetic Basis of Diabetic Retinopathy; **Charles, B. (Conley)**

Agency: NIH/NINR

Grant Code: F31

Reproductive Health Program for Teen Girls with Diabetes:

An Intervention Study; **Charron-Prochownik, D.**

Agency: American Diabetes Association

New Improved Technology to Improve Prediction and Prevention of Type 1 Diabetes; **Charron-Prochownik, D. (Trucco/CHP)**

Agency: DOD

Daytime Sleepiness and Physical Activity in Adults with Obstructive Sleep Apnea; **Chasens, E.**

Agency: CRDF

Comparison of Exhaled and Serum Nitric Oxide Levels; **Choi, J. (Hoffman)**

Agency: NIH/NINR

Grant Code: F31

Psychometric Evaluation of the Cholesterol Lowering Diet Self-Efficacy Scale-Short Form; **Choo, J. (Burke)**

Agency: Sigma Theta Tau (STT), Eta Chapter

Menopause and Meditation for Breast Cancer Survivors; **Cohen, S.**

Agency: NIH/NCI

Grant Code: R21

Dopamine Genetic Variants Modulating Recovery after TBI; **Conley, Y. (Wagner)**

Agency: NIH/National Institute of Child Health and Human Development (NICHD)

Grant Code: R01

The Genetic Basis of a Disease-Free Model of Aging; **Conley, Y.**

Agency: NIH/National Institute on Aging (NIA)

Grant Code: R21



Genetics of Age-Related Maculopathy; **Conley, Y. (Gorin)**

Agency: NIH/National Eye Institute

Grant Code: R01

Mitochondrial Genetics of Recovery after Brain Injury; **Conley, Y.**

Agency: NIH/NINR

Grant Code: R01

The Experience of Neutropenia for Elders Who Have Completed Treatment for Non-Hodgkin's Lymphoma; **Crighton, M.**

Agency: American Academy of Nursing/Hartford Foundation

Customized Hand-Held Computer Applications for Lung Transplant Recipients; **DeVito Dabbs, A.**

Agency: University of Pittsburgh/CRDF

Promoting Self-Care After Lung Transplantation; **DeVito Dabbs, A.**

Agency: NIH/NINR

Grant Code: K01

Internet-Based Cancer Symptom Management: WRITE Symptoms; **Donovan, H.**

Agency: NIH/NINR

Grant Code: R21

Symptom Clusters Experienced by Women Across the Ovarian Cancer Disease Trajectory; **Donovan, H.**

Agency: ONS

Targeted Research and Academic Training for Nurses in Genomics; **Dorman, J.**

Agency: NIH/NINR

Grant Code: T32

A Randomized Controlled Trial of the NIA Intervention; **Doswell, W.**

Agency: NIH/NICHD

Grant Code: R01

NIA Girls' Group Community Program for Daughters and Their Mothers; **Doswell, W.**

Agency: FISA Foundation

Endocrine Changes and Treatment of Conduct Problems; **Dunbar-Jacob, J.**

Agency: Cincinnati Children's Hospital Medical Center/NIH/NINR

Grant Code: R01

G. Fred Dibona Jr. Grant Program; **Dunbar-Jacob, J.**

Agency: Pennsylvania Higher Education Foundation (PHEF)

Graduate Nurse Education Grant Program; **Dunbar-Jacob, J.**

Agency: PHEF

Nursing Education Grant; **Dunbar-Jacob, J.**

Agency: PHEF

Nursing Scholarship for Low-Income Individuals Program; **Dunbar-Jacob, J.**

Agency: PHEF

Delivery and Utilization of Colorectal Cancer Screening; **Dunbar-Jacob, J. (Ling)**

Agency: NIH/NCI

Grant Code: K07

Improving Medication Adherence in Comorbid Conditions; **Dunbar-Jacob, J.**

Agency: NIH/NIDDK

Grant Code: R01

Undergraduate Nursing Scholarship—Johnson & Johnson; **Dunbar-Jacob, J.**

Agency: PHEF

Center for Research in Chronic Disorders; **Dunbar-Jacob, J.**

Agency: NIH/NINR

Grant Code: P30

Efficacy of Acupuncture in Treating Urinary Incontinence; **Engberg, S.**

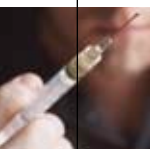
Agency: NIH/National Center for Complementary and Alternative Medicine (NCCAM)

Grant Code: R01

Psychological Stress and Immune Response to Vaccination; **Engberg, S. (Marsland)**

Agency: NIH/NCCAM

Grant Code: R01



Improving Adherence to Antiretroviral Therapy; **Erlen, J.**

Agency: NIH/NINR
Grant Code: R01

Technology: Research in Chronic and Critical Illness; **Erlen, J.**

Agency: NIH/NINR
Grant Code: T32

Prevention of Psychiatric Morbidity in AD Caregivers; **Garand, L.**

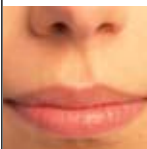
Agency: NIH/National Institute of Mental Health (NIMH)
Grant Code: K23

Living with Predictive Genetic Testing; **Hamilton, R.**

Agency: STT International

Decision Making in Young Women at Risk for HBOC; **Hamilton, R.**

Agency: NIH/NINR
Grant Code: R03



Improving Communication with Nonspeaking ICU Patients; **Happ, M.**

Agency: NIH/NICHHD

Grant Code: R01

Menstrual Attitude and Self-Perception of Girls with Sickle Cell Disorders; **Hawthorne-Burdine, D.**

Agency: University of Pittsburgh Women's Studies Program Faculty Research Fund

The Association Between Mu-receptor Genotypes and Postoperative Pain Response; **Henker, R.**

Agency: American Association of Nurse Anesthetists Foundation

Advanced Nurse Training: Trauma/Emergency Preparedness; **Hoffman, L.**

Agency: HRSA/AENP
Grant Code: D09

Role of 20-HETE on Vasospasm-Induced Ischemia after SAH; **Hoffman, L.**

Agency: NIH/NINR
Grant Code: R01

Weaning from Prolonged Mechanical Ventilation; **Hoffman, L. (Jubran)**

Agency: Loyola University/NIH/National Institute of Neurological Disorders and Stroke
Grant Code: R01

The Effects of Health-Related Quality of Life and Compliance in Adult Asthmatic Patients Who Are Followed in an Urban Community Healthcare Facility; **Hoffmann, R.**

Agency: STT, Eta Chapter

Racial Disparities in Health Outcomes Following CABG; **Hravnak, M.**

Agency: NIH/NINR
Grant Code: K01

Myocardial Ischemia and Vasospasm in Aneurysmal SAH; **Hravnak, M. (Horowitz)**

Agency: NIH/NHLBI
Grant Code: R01

Developmental Differences in Adherence to the ABCD Program for Pediatric Weight Management; **Kaufmann, J.**

Agency: CRDF

Children with Special Healthcare Needs Project Evaluation; **Kaufmann, J.**

Agency: Highmark Caring Foundation

Modeling of Health-Related Quality of Life After SAH; **Kim, Y.**

Agency: CRDF

Internet Resource for Caregivers of Children with Cancer; **Lewis, D.**

Agency: NIH/NINR
Grant Code: R21

Assessment of Novel Robotic Walker Functions: A Pilot Study; **Matthews, J.**

Agency: Pepper Center Pilot Program

Caregiver Intervention for Caregivers of SCI Patients; **Matthews, J. (Schultz)**

Agency: NIA
Grant Code: R01

Robotic Assistance with Ambulation Among Older Adults; **Matthews, J.**

Agency: NIH/NINR
Grant Code: R03

Navigation Assistant for a Wheeled Walker; **Matthews, J. (LoPresti)**

Agency: NIH/NICHHD
Grant Code: R43

Nurse Anesthetist Traineeship; **O'Donnell, J.**

Agency: HRSA
Grant Code: A22

Integrated Medical Information Technology Systems; **O'Donnell, J.**

Agency: University of Pittsburgh Medical Center

Anger Assessment and Intervention in Rural Youth; **Puskar, K.**

Agency: NIH/NINR
Grant Code: R01

Medication Adherence in Young Adults with Schizophrenia Using Relational Agent Technology; **Puskar, K.**

Agency: Eli Lilly and Company

Disparate MBC Symptom Severity and Management Barriers;

Rosenzweig, M.

Agency: NIH/NCI
Grant Code: K07

NEW: The ACT Intervention to Reduce Breast Cancer Treatment Disparity; **Rosenzweig, M.**

Agency: Susan G. Komen Foundation

Pittsburgh Older Americans Independence Center; **Schlenk, E. (Studenski)**

Agency: NIH/NIA
Grant Code: P30

The Effect of Biophosphonate on Bone Mass, Bone Turnover, and Bone Mineral Metabolism in Premenopausal and Newly Postmenopausal Women with Breast Cancer Following Chemotherapy; **Sereika, S. (Greenspan)**

Agency: Proctor and Gamble Pharmaceuticals Inc.

Age/Sex Effects on the Central Serotonin System; **Sereika, S. (Meltzer)**

Agency: NIH/NIMH
Grant Code: R01

Pathophysiology of PTH-related Protein (1-36) in Humans; **Sereika, S. (Stewart)**

Agency: NIH/NIDDK
Grant Code: R01

Fish Oil, Inflammation, Psychological Distress, and Heart Disease; **Sereika, S. (Muldoon)**

Agency: NIH/NHLBI
Grant Code: R21

Pittsburgh Older Americans Independence Center; **Sereika, S. (Studenski)**

Agency: NIH/NIA
Grant Code: P30

Biobehavioral Interactions in Neuro-oncology Caregivers; **Sherwood, P.**

Agency: ONS
Self-Efficacy and Self-Care Management of Persons with Heart Failure; **Simms, S. (Schlenk)**

Agency: AACN

Program to Improve Communication About End-of-Life Care Among African American Patients with End-Stage Renal Disease; **Song, M.**

Agency: CRDF
Matilda Theiss Health Center New Access Point for Public Housing Residents; **Stebler, K. (Conti)**

Agency: HRSA



Uncertainty in Children and Adolescents with Cancer; **Stewart, J.**

Agency: CRDF

Adherence and Health Outcomes after Liver Transplantation; **Stille, C.**

Agency: NIH/NINR
Grant Code: R01

Weight Loss Maintenance: Exploring Racial Differences; **Warziski, M. (Burke)**

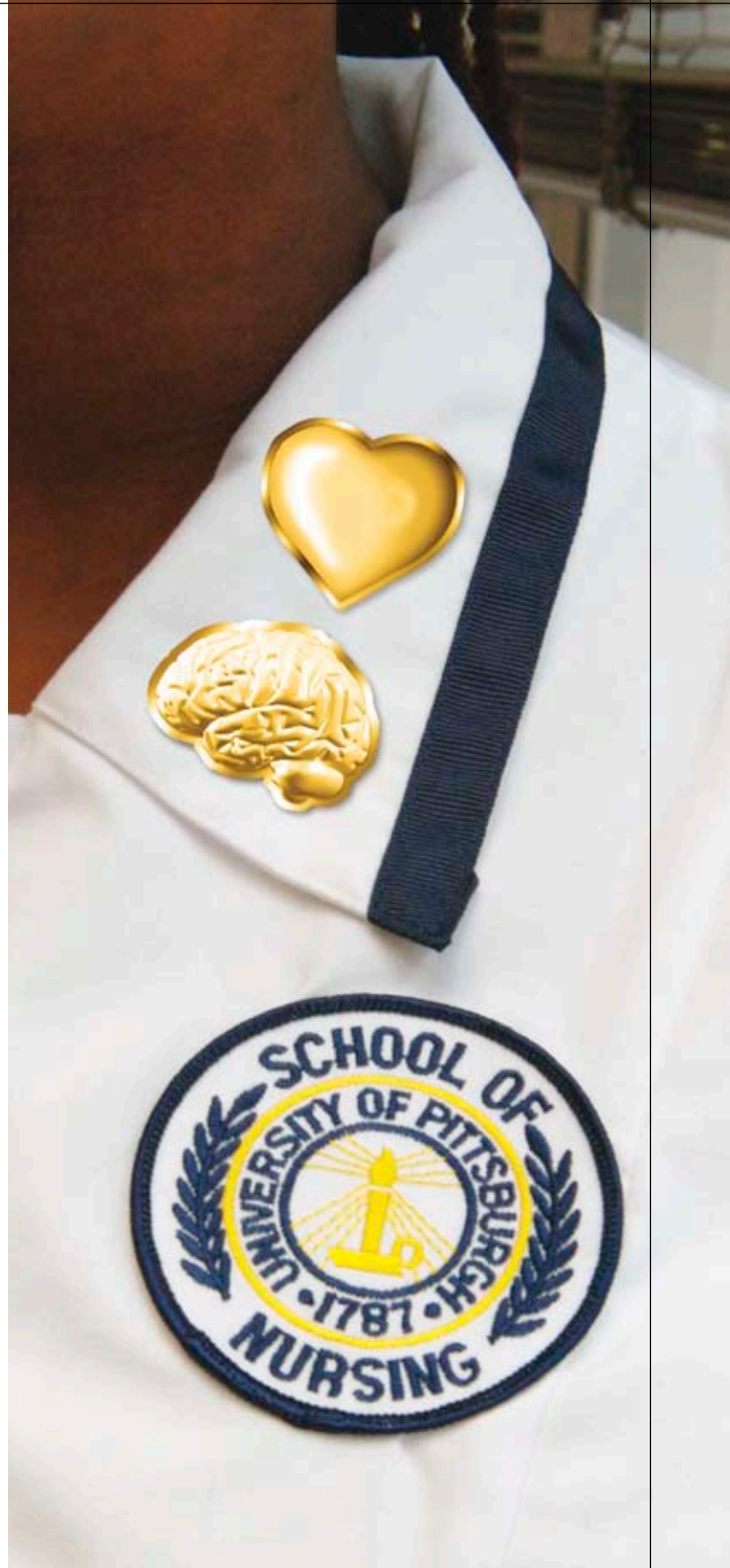
Agency: NIH/NINR
Grant Code: F31

WHAT DO NURSES REALLY DO?

A VOW OF SILENCE?

SEVERAL WEEKS AGO, I was invited to speak to a group of undergraduate students who had been asked to read my new book, *Nursing Against the Odds*, for their history of science class at Harvard University. During the hour-and-a-half discussion, one question that kept popping up was: “What do nurses really do?” As I left the room, I pondered, as I often do, why the public has so little understanding of the consequential nature of nursing practice. Clearly, it’s because of traditional stereotypes about nursing. But it’s also because nurses have been socialized to be silent about their work or to talk about it in ways that fail to reverse these traditional stereotypes.

When I ask nurses to describe their work, many respond: “Oh it’s too hard to talk about. It’s too diffuse, too vague, too indefinable.” But I have written thousands of pages about nursing and I am not a writer of fiction. I’ve been able to write about nursing because I’ve observed nurses at work and asked them a lot of questions about their practice.



If nurses wear not only their hearts but also their brains on their sleeves, perhaps the public ... will finally understand what nurses know and do.

WHAT NURSES DO

Here is what I think nurses do. Using their considerable knowledge, they protect patients from the risks and consequences of illness, disability, and infirmity, as well as from the risks and consequences of the treatment of illness. They also protect patients from the risks that occur when illness and vulnerability make it difficult, impossible, or even lethal for patients to perform the activities of daily living—ordinary acts like breathing, turning, going to the toilet, coughing, or swallowing.

Even the most emotional work nurses do is a form of rescue. When nurses construct a relationship with patients or their families, they are rescuing patients from social isolation, terror, or the stigma of illness or helping family members cope with their loved ones' illnesses.

What do nurses do? They save lives, prevent complications, prevent suffering, and save money.

Why do nurses have a hard time explaining such compelling facts and acts? As Sioban Nelson and I have argued in a recent article in the *American Journal of Nursing*,¹ it's because they've been educated and socialized to focus on their virtues rather than their knowledge and their concrete everyday practice. They've been taught to wear their hearts and not their brains on their sleeves as they memorize and then rehearse the virtue script of modern nursing.

If you analyze the words and images of campaigns used to recruit nurses into the profession or listen carefully to the stories nurses tell about their work, nurses may not use the available research to fully explain why what they do is so critical to patient outcomes. Although many studies, conducted by nursing, medical, and public health researchers, have documented the links between nursing care and lower rates of nosocomial infections, falls, pressure ulcers, deep vein thrombosis, pulmonary embolism, and deaths, most promotional campaigns and many stories nurses themselves tell about their work ignore these data.

Instead, nurses focus on their honesty and trustworthiness, their holism and humanism, their compassion, and their caring. The problem is that when they focus on caring, they often sentimentalize and trivialize the complex skills they must acquire through education and experience. They often fail to explain that caring is a learned skill and not simply a result of hormones or individual inclination. After all, knowing when to talk to a patient about a difficult issue, when to provide sensitive information, when to move in close to hold a hand or move away at a respectful distance all are complex decisions a nurse makes. To make these decisions, nurses use equally complex skills and knowledge they have mastered. But all too often nurses make these skills and knowledge invisible or describe nursing practice in terms that are far too limited.



People don't know, however, that nurses have medical knowledge, participate in medical cures, and have technological know-how.

Nurses are still talking about themselves—or allowing themselves to be talked about—in the most highly gendered, almost religious terms and allowing themselves to be portrayed with the most highly gendered, almost religious images. Indeed, as Nelson and I argue, with the best intentions in the world, many modern nursing organizations and nurses reproduce and reinforce traditional images of nursing as self-sacrificing, devotional, altruistic, anonymous, and silent work.¹ Just think of one of the jingles in the recent Johnson & Johnson image campaign:

*You're always there when someone needs you
You work your magic quietly
You're not in it for the glory
The care you give comes naturally.*

HISTORICAL IMAGES OF NURSING AND NURSES

Unfortunately, like those above, many of the images and words nurses mobilize reflect the religious origins of the profession. Nurses in religious orders were socialized to sacrifice every shred of their individual identity, to be obedient members of an anonymous mass. Religious

nurses were taught not to claim credit for their work and accomplishments but were instead supposed to view themselves as divine instruments who willingly assigned the credit for their accomplishments to God, the bishop, the abbot, or the Mother Superior.

Most importantly, these images reflect a time when nurses were taught to “say little and do much” because to talk about a good deed was to turn it into a bad one—to exhibit the sin of pride. What nurses could accept were compliments for their deferential behavior and angelic virtues. What they could talk about was self-sacrifice and devotion and the outside agents they served.

If you look closely at the history of the problem of nursing visibility, you see that this religious depiction of nursing was not only a relic of the origins of nursing in Christian penitential practice but was also a legacy of the 19th-century movement to professionalize nursing. In the 19th century, religious and social reformers like Florence Nightingale adapted the religious template to help women who wanted and/or needed to work outside of the home find purposeful paid work. In a society where gender roles were very rigid and people prized

modesty and innocence, reformers needed to make it safe for female nurses to work in public spaces with strangers—mostly strange men.

Nurse reformers helped respectable women affect this passage by borrowing religious images, costumes, language, and metaphors. The nun's cornette was transformed into the nurse's cap. In English-speaking countries, nurses were called “sisters.”

Nurse reformers tried to desexualize nurses just as nuns (women who weren't really women) had been desexualized before them. Nursing students wore ugly uniforms, were not allowed to marry, and were sheltered in cloister-like dormitories in or near the hospital. Nurses were said to be self-sacrificing and morally superior and would thus create order out of the chaos of the 19th-century hospital.

Focusing on nurses' virtues also helped nurses in their long battle with medicine for what became, in the 19th century, the highly contested terrain of the hospital. Before the 19th century, very few doctors had ever set foot in a hospital. In the 19th century, scientifically oriented doctors were moving into the hospital in greater numbers and wanted to control the hospital. They



were not pleased to see a group of women who wanted authority and education competing for a sphere of influence (even a separate female sphere) inside the hospital.

Doctors were happy to have trained nurses, but only if they were their servants. They wanted nurses to know what to do and how to do it but not why they were doing it. They didn't want anyone to know if a nurse had acquired scientific, medical, or technical mastery. Because nursing at this time was feminized, women with no political, legal, economic, or social power had to make a deal with medicine, and the deal was that nurses could have virtues but not knowledge.

In the 19th century, nursing was thus constructed as self-sacrificing, anonymous, devotional, altruistic work. While this was a functional bargain to make over a century ago, this template reigns today in spite of the fact that things have changed dramatically for women—*which is why it's time for a change.*

NOW IS THE TIME FOR CHANGE

I believe the public knows that nurses are kind, caring, and compassionate and that they provide patients with more information than doctors do. People don't know, however, that nurses have medical knowledge, participate in medical cures, and have technological know-how. I believe nurses can advance knowledge of their profession if they amplify their caring stories and include anecdotes that help us understand that doctors don't do all the curing.

The public needs to know that nurses—regular, ordinary bedside nurses, not just nurse practitioners or advanced practice nurses—are constantly participating in the act of medical diagnosis, prescription, and treatment and thus make a real difference in medical outcomes. Nurses can help the public understand that nursing is a package of medical, technical, caring, nursing know-how—that nurses save lives, prevent suffering, and save money. If nurses wear not only their hearts but also their brains on their sleeves, perhaps the public, like those students at Harvard, will finally understand what nurses know and do.

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FROM STUDENTS TO LEADERS

Master's Programs That Advance the Practice of Nursing

BASED ON THE RESULTS of peer assessment surveys sent to deans, administrators, and faculty at other accredited schools of nursing, *U.S. News & World Report* ranked the University of Pittsburgh School of Nursing among the top 10 schools of nursing in the country overall in the last two issues (2004–06 and 2007–09) on “America’s Best Graduate Schools.” The magazine also ranked several of the School’s graduate programs individually during the same period, including the ninth-ranked psychiatric/mental health nursing and sixth-ranked nursing anesthesia.

As well, the pass rate for many programs that require certification has been 100 percent for the past two years, and 100 percent for the past five years for graduates of the nurse anesthesia program.

The School offers a wide range of master’s-level programs that prepare graduates for advanced practice nursing or a variety of advanced specialty roles. Areas of concentration include advanced specialty roles in administration, education, clinical research, and informatics as well as clinical areas such as clinical nurse specialist, nurse anesthesia, and nurse practitioner. This year two new nursing

leadership programs are being offered: the Doctor of Nursing Practice and the clinical nurse leader.

Students may supplement the knowledge and skills gained in any of these comprehensive programs by adding a minor in a second skill set, including administration, education, informatics, and research. Postbaccalaureate certificate programs are also available in clinical and specialty roles.

Pitt nursing students at all levels benefit from the School’s close relationship with the University of Pittsburgh Medical Center (UPMC), one of the largest healthcare systems in the United States. Students learn and practice alongside some of the nation’s finest healthcare practitioners in a dynamic environment where world-renowned research and organ transplantations are conducted, and where new treatments and technologies are developed.

There is no substitute for good clinical experiences. Students have access to all specialty and subspecialty clinical and research experiences at the adjacent medical center and a wide variety of private practices in urban, suburban, and rural communities as well as federally qualified health centers and rural clinics.

In addition, the School’s innovative graduate programs are distinguished by an outstanding faculty. Many of our highly acclaimed faculty have received awards for excellence in teaching, research, or service, and many hold positions of leadership in state, national, and multidisciplinary organizations. A summary of faculty leadership positions was listed in the summer 2005 issue of *Pitt Nurse*. For more information about the School’s master’s programs and faculty accomplishments, check our Web site at www.nursing.pitt.edu.

ADVANCED SPECIALTY ROLES

Advanced specialty master’s programs prepare nurses who want to assume a leadership role within the profession of nursing and the healthcare system. Areas of concentration include nursing administration, education, informatics, and research as well as the new Doctor of Nursing Practice and clinical nurse leader programs.

NURSING ADMINISTRATION AND LEADERSHIP

Gail A. Wolf, RN, DNS, FAAN, leads a faculty that includes nursing executives with current or recent leadership

U.S. News & World Report ranked the University of Pittsburgh School of Nursing among the **top 10 schools of nursing in the country overall.**

experience. The nursing administration concentration includes subspecialties in organizational and clinical leadership. Drawing on more than 20 years of experience in nursing leadership, including nine years of service as chief nursing officer at UPMC, Wolf incorporates the latest research and evidence-based management practices into the program. Students are given a “virtual hospital” and learn to solve real-life problems that confront leaders on a daily basis.

DOCTOR OF NURSING PRACTICE

Students can continue their education under the leadership track and earn a Doctor of Nursing Practice (DNP). The first DNP in nursing leadership to be offered in Pennsylvania, the program is designed to enable students to lead complex systems effectively. The interdisciplinary curriculum will include courses at the University of Pittsburgh Graduate School of Public Health and the Joseph M. Katz Graduate School of Business and features an Executive in Residence mentoring program that enables students to interact with existing senior-level healthcare executives.

CLINICAL NURSE LEADER

The School of Nursing offers the only clinical nurse leader (CNL) program in Western Pennsylvania. Led by Bernadette M. Jordan, PhD, CRNP, FHCE, associate professor in the Department of Acute and Tertiary Care, the CNL includes the Executive in Residence component to enhance relationships with the practice arena. In addition, Socrates luncheons bring outside experts to share food, fellowship, and expertise with the students. This program prepares generalists who can cross populations and settings. A MSN is awarded.

EDUCATION

The education program is led by Scott Weber, EdD, RN, FACHE, FHIMSS, assistant professor in the Department of Health and Community Systems and coordinator of the nursing education graduate program.

The nursing education program has a large and outstanding international enrollment, including students from Thailand, Saudi Arabia, China, and South Korea. This diverse enrollment enriches the learning environment for all students.

Twenty percent of the education graduate students currently plan to pursue doctoral education, positioning them to become national leaders and researchers in the field of nursing education.

INFORMATICS

A combination of nursing science and information science, nursing informatics supports, and is supported by, evidence-based practice. The School's informatics program is distinguished by a faculty with a research focus on consumer informatics, including education, health literacy, and usability. Led by Karen L. Courtney, PhD, RN, assistant professor in the Department of Health and Community Systems, faculty members include Gilan El Saadawi, MD, PhD, MS, and Elizabeth La Rue, MLS, AHIP.

The informatics program prepares nurses to develop, analyze, evaluate, and implement information systems that support evidence-based nursing practice, and enhance and manage patient care. Most informatics graduates are employed as systems analysts within healthcare systems, while some have been recruited as project managers.



Although certification for the nursing informatics specialty is not required for practice, the program curriculum meets the eligibility requirements for the certification exam so graduates may pursue certification if they wish.

RESEARCH

Led by Elizabeth A. Schlenk, PhD, RN, assistant professor in the Department of Health and Community Systems, the School's nursing research advanced specialty role is one of the few master's programs in the country that prepares students for the roles of clinical research coordinator or clinical research associate. Leaders from across the University of Pittsburgh are invited to speak to students about issues relating to regulations, human subjects, data safety and monitoring, and budgets.

Although certification is not required for practice, graduates with two years of experience may take the Association of Clinical Research Professionals certification examinations to earn certified clinical research coordinator (CCRC) or certified clinical research associate (CCRA) certification if they wish.

CLINICAL NURSE SPECIALIST

The clinical nurse specialist (CNS) program prepares clinical experts who provide organizational leadership in patient care and consultation, care coordination and monitoring, problem solving and program design, and application of research evidence to clinical practice and teaching. Specialty foci include adult medical/surgical and psychiatric/mental health nursing.

ADULT MEDICAL/SURGICAL NURSING

Led by Patricia Tuite, RN, MSN, instructor in the Department of Acute and Tertiary Care, the adult medical/surgical nursing program includes training in finance and healthcare outcomes as well as all the core information from the advanced practice nursing program. Guest lecturers include Leslie Hoffman, PhD, RN, FAAN, department chair and professor in the Department of Acute and Tertiary Care, and Richard Henker, PhD, RN, associate professor and vice chair of the Department of Acute and Tertiary Care.

Students can choose a clinical emphasis in cardiopulmonary, critical care, oncology, trauma and emergency

preparedness, or a directed (self-designed) emphasis. The directed emphasis enables students to design a clinical emphasis in a particular area of interest, such as internal medicine, surgery, or orthopedics.

The program includes approximately 16 hours of simulation training in addition to 540 hours of precepted time with a CNS. Scripted simulation scenarios enable students to practice skills on a variety of acute care events, including some unusual events they may not encounter during their clinicals. Simulation provides a role-play environment where students can practice making decisions as advanced practice nurses in a nonthreatening manner. During debriefing sessions, faculty and students are able to discuss the best way to handle the situation.

Although certification is not required for practice, the CNS program meets the eligibility requirements for the certification exam so graduates may pursue certification if they wish. Program graduates take positions as clinical nurse specialists and educators. Some have taken academic appointments.

The School of Nursing's nurse anesthesia program was ranked sixth in the nation by *U.S. News & World Report* in the 2004–06 and 2007–09 issues on "America's Best Graduate Schools."

PSYCHIATRIC/MENTAL HEALTH NURSING

The School's clinical nurse specialist psychiatric/mental health nursing program was ranked ninth in the country in the 2004–06 and 2007–09 issues on *U.S. News & World Report's* "America's Best Graduate Schools."

Led by Kathryn Puskar, DrPH, FAAN, professor in the Department of Health and Community Systems, the master's program in CNS psychiatric nursing combines neuroscience with psychotherapy and focuses on the latest trends in the neurobiology of mental disorders. Graduates are employed as clinical nurse managers, outpatient therapists, educators, consultants, and administrators in mental health settings.

The distinguished faculty includes the past president of the American Psychiatric Nurses Association along with highly competent preceptors and renowned psychiatrists.

Although certification is not required for practice, clinical nurse specialists in psychiatric mental health may attain national certification from the American Nurses Credentialing Center. Graduates also may be eligible for other certification relevant to an individual clinical emphasis, such as addictions or forensics. The pass rate for those seeking certification was 100 percent in 2005.

NURSE ANESTHESIA

The School of Nursing's nurse anesthesia program was ranked sixth in the nation by *U.S. News & World Report* in the 2004–06 and 2007–09 issues on

"America's Best Graduate Schools."

The nurse anesthesia program (NAP) is renowned for its use of advanced technology in education, for integrating simulation education throughout the curriculum, and for offering unique clinical opportunities that help develop highly qualified clinicians.

With a 12-year history of high-fidelity human simulation education, the NAP faculty members have developed unique ways of integrating this versatile technology to improve student learning and focus on provider safety. In addition, the entire NAP curriculum has been Web-supported since 1998 and is currently pioneering the Typhoon case entry and tracking system. The sophisticated use of a variety of educational software programs puts the NAP at the cutting edge of nurse anesthesia education. In 2005 the NAP received the prestigious Crystal Apple Award, the highest national-level program award, in recognition of an innovative mentoring program designed to assist student transition to the certified registered nurse anesthetist role.

Led by John O'Donnell, MSN, RN, instructor in the Department of Acute and Tertiary Care and assistant director for nursing education at the Peter M. Winter Institute for Simulation, Education, and Research, the NAP faculty members have been acknowledged locally and nationally for their expertise, innovative teaching methods, and their contributions to education and practice, scholarly productivity, and research. The faculty includes Henker; Laura Palmer, MNEd, CRNA, instructor in

the Department of Acute and Tertiary Care and assistant director of the NAP; Bettina Dixon, MSN, CRNA; and Sandra Sell, MSN, CRNA.

The program's success is reflected in a 100 percent overall certification pass rate over the past five years with a five-year first-time pass rate of 99.3 percent. Over the same five-year period, 51 percent of the NAP students scored the maximum possible scaled score of 600 on the examination.

NURSE PRACTITIONER

The nurse practitioner program prepares nurses to be the principal providers of healthcare in five areas of concentration: acute care; adult, family, and pediatric; and psychiatric primary care.

ACUTE CARE

Led by Kathy S. Magdic, MSN, CRNP, instructor in the Department of Acute and Tertiary Care, the acute care faculty includes Michael Beach, MSN, CRNP, APRN-CE, instructor; Marilyn Hravnak, PhD, RN, CRNP, assistant professor; and Margaret Q. Rosenzweig, PhD, RN, APN, AOCNP, assistant professor.

The acute care program incorporates intelligent technologies including simulation and distance education to prepare nurses with the knowledge and skills required to identify health risks, promote wellness, diagnose and manage illness, prescribe medications and other treatments, and mobilize needed resources for patients. Program graduates work in specialty practices such as oncology,

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Technology is a tool

THE ACADEMIC GOALS of the University of Pittsburgh School of Nursing are supported by a variety of technologies. Working directly with individual faculty members, professionals in the School's Learning Resources Center consider learning and instructional theory to develop classroom designs and technology solutions that meet the educational needs of both faculty and students. "Technology is a tool," says Peter Draus, EdD, director of the Learning Resources Center and assistant professor in the Department of Health and Community Systems. "That tool is planned, modified, and integrated to meet the educational needs of our faculty and our students—all our students."

Assessing and Accessing the Evidence, a new online learning tool designed to help faculty teach the fundamentals of evidence-based practice, is one example of how technology is thought out and planned to meet the unique educational needs at the School. The new Ellen Chaffee Anatomy and Physiology Laboratory is another example of technology at the School that has been modified and integrated to meet educational needs.

When Peter Draus does his job right, no one notices—and that's just the way it should be!

Computer screens mounted on movable arms at each lab bench enable students to access software that gathers data and does a physiological analysis. Video from the microscope, from a hand-held camera when the instructor is demonstrating or working on a cadaver, or from a multitude of other sources, including online resources, can be simultaneously projected on a big screen at the front of the room and transmitted to the individual computer stations. In a normal lab setting, sight lines are very important; students often strain to see what the instructor is pointing out. But technology in the School's anatomy and physiology lab gives everyone the same clear view right at their desks. Students don't have to keep turning their heads to look back and forth between a large screen and the instructor. They can simply line up the computer screen on their desks to watch the instructor for the gross movements while simultaneously following along for detail on the screen just by shifting their eyes. It's all within the same sight line. Mounting computer screens on movable arms allows students of all shapes and sizes to set up sight lines wherever, and for whatever, the instructor is demonstrating. The students and the instructor can forget about the interface and the technology and focus on the information. "Students can be anywhere and still see well—no matter how tall they are," Draus says. "It isn't set up to be neat—although it is—it's well thought out and planned."

The same video feed can be transmitted to other classrooms in the School and to distance education sites across the country and around the world, so students can participate in the anatomy and physiology lab virtually anywhere! The School's distance education program is one of the oldest and largest in the University. "We have students currently in our doctoral program who started in the distance education program, so we know it's effective," Draus says. Technology decisions are made at individual locations, and based on content level, so multiple technologies may be used over the course of the whole program. "We change and match the technology as the course content and the needs of the students and instructors change throughout the term."

The same process is used in the classrooms. "We evaluate what they're doing in each program and design the most effective technology solutions for both the instructor and the correct educational background theory for the students as well—not just to make it the best learning experience, but also to make it disappear," Draus says. "There are a thousand variables to consider, and they all matter—but if we do our job right, no one is aware of the technology."

Technology solutions in the classroom focus more on the needs of the instructors. Whether they want to use paper, PowerPoint, or 3-D models, the technology is there to support the way they want to teach—it doesn't drive it. Electromagnetic panels allow the instructor to annotate on the screen, then save it

to distribute to the students. A video visualizer lets the instructor put down acetates, papers, books, or models, then zoom in or use a wide angle so students can actually see what they are talking about and view details. The instructor can record it or take freeze frames. Inputs allow instructors to pre-program a series of freeze frames or integrate their own technology. "We've spent a lot of time and effort designing the instructors' stations for optimal functionality and effectiveness. As a result, we have the best classrooms on campus," Draus says. "And the best technology on faculty's desks. Hands down!"

The same focus on integrating technology will be applied as the Ellen Chaffee Nursing Skills Lab is upgraded. The best technology, and the best way of mounting that technology, will be considered and evaluated to meet both faculty and student needs. "Not just their stated needs, but educational needs they may not even be aware of," Draus says. "We'll probably use a distributed workstation model like the one in the anatomy and physiology lab, but the workstations in the skills lab may be set up as an exam room so students can be at a bedside and see the instructor demonstrate a procedure without straining for a sight line." This will give students the ability to have hands-on practice while the instructor demonstrates, if they choose. "Some students will want to hold a piece of tubing to see what it feels like when it flexes, and some students will want to just listen and follow along—it is their choice," Draus says. "Technology gives us that flexibility."

In Honor of Mom...

FAMILY TRADITION INSPIRES GIFT

THE PITT NURSING TRADITION is a family tradition for Elizabeth Bayer Baxter (BSN '56). Not only are Baxter's sisters, Patricia Bayer Colonna (BSN '54, MLitt '60), Rita Bayer Leyn (BSN '61, MNEd '66), and sister-in-law Billie Gruber Bayer (BSN '55) School of Nursing alumnae, but her daughter, Nancy Baxter Kravitz, is an alumna from the Class of 1981.

With nursing roots that deep, it seemed most appropriate that when Kravitz and her siblings wanted to do something to honor their mother and her work as a nurse, they would establish a resource fund in her name at the University of Pittsburgh School of Nursing. Thus, the Elizabeth Bayer Baxter Student Resource Fund was created.

The fund's announcement came as a complete surprise to Baxter, who was marking a 50th reunion with her Class of 1956 classmates at the Alumni Day luncheon this past May at the Twentieth Century Club in Oakland. Kravitz, who also was celebrating a class reunion—her 25th, gave a moving tribute to her mother during the event's formal program that concluded with the naming of the fund to benefit students in the School of Nursing's graduate program.

"Because Mom never earned a master's degree—she was busy raising seven children—this fund will assist those students seeking graduate education," Kravitz says.

Baxter, Class of '56 Keeper of the Light, worked at Allegheny Valley Hospital and McKeesport Hospital. She taught pediatric clinical nursing for years at the Community College of Allegheny County's south campus and did volunteer work with special needs children. Baxter and her husband currently reside not far from Pitt's campus in Carnegie, Pa.



Elizabeth Bayer Baxter (BSN '56)



Nancy Baxter Kravitz (BSN '81)

THE ELIZABETH BAYER BAXTER STUDENT RESOURCE FUND

The recently established Elizabeth Bayer Baxter Student Resource Fund provides financial assistance to students in the graduate program at the School of Nursing. Donations to this worthy initiative may be mailed to:

University of Pittsburgh
School of Nursing
Room 218 Victoria Building
3500 Victoria Street
Pittsburgh, PA 15261

Checks may be made payable to "University of Pittsburgh." Please put "Elizabeth Bayer Baxter Student Resource Fund" on the memo line.

The School of Nursing is proud of its alumni for advancing the nursing profession through their practice and for supporting nursing's future through their generous support.



The Baxter family

ALUMNI NEWS + NOTES

Nursing Alumni Society President's Message

I hope the summer season offered opportunities for fun times, relaxation, and new experiences. Fall term means the resumption of busy routines.

The University of Pittsburgh School of Nursing Alumni Society executive committee is re-energized and remains committed to cultivating a strong alumni culture. Our efforts will focus on promoting Pitt nursing pride among students, our future alumni. Being part of the Pitt nurse tradition is indeed a privilege, and we believe our students must be made aware of this while they are on campus. When they graduate, we want the pride they take with them to grow stronger with each passing year.

Many of our alumni have demonstrated their commitment to the School and to nursing education by generously giving back of their time as volunteers, their talent as mentors, and treasure as scholarship and gift donors.

The Alumni Society needs your help to ensure Pitt nurse alumni pride prospers. There is so much we can do if we work together! Contact the School's alumni office at 412-624-2404 to learn how you can make a difference.

Joan P. Byers (MSN '87)

President

P.S.: Mark your calendars for Alumni Day 2007 on Saturday, May 19, 2007. Watch for more details at www.nursing.pitt.edu.

HOMEcoming 2006

Join in the fun of University of Pittsburgh Homecoming 2006 activities October 19–22!

School of Nursing alumni are encouraged to kick off homecoming weekend by becoming an alumni volunteer for the fourth annual Pathway to Professions:

A Career Networking Event:

Thursday, October 19, 2006

6–8 p.m.

Connolly Ballroom, Alumni Hall

The event is free, and attire is business casual.

Alumni volunteers will meet informally with Pitt students and job-seeking alumni who are interested in learning about careers and professional experiences. For more information or to register as a volunteer, visit www.alumni.pitt.edu or contact Alyson Wallach at alyson1@pitt.edu or 412-624-8482.

Nursing alumni also are invited to visit the alumni hospitality tent at Heinz Field prior to kickoff of the Pitt vs. Rutgers homecoming football game on Saturday, October 21. The School of Nursing will host a table in the tent. Please stop by to say hello!

For more information or to volunteer as a homecoming alumni host, contact Joan Nock at 412-624-2404 or jno100@pitt.edu.

CLASS OF 1946 COMPOSITE UNVEILED

The six members of the Class of 1946 (Bette Callahan Acker, Ann L. Burkhardt, Jean Brethauer Christie, Alice Robinson Evans, Mary Dillie Feathers, and Ruth Perilstein Reifman) who gathered at Alumni Day on Saturday, May 20, 2006, to mark their 60th class reunion received an unexpected surprise—the unveiling of a class composite print for the alumni wall at the University of Pittsburgh School of Nursing. Through the efforts of Peg Chakan, the daughter of Acker, and the wonders of computers, the print was created and framed. The composite will take its place among the other class photos that hang in the Victoria Building on the third and fourth floors.



SCHOOL OF NURSING TO SURVEY GRADUATES OF ITS BSN 2000 AND 2005 CLASSES

Alumni may provide valuable data to address shortages in the nursing workforce. Statistics show that nurses who are five years postgraduation often leave their jobs, and two to three nurses must be prepared for entry-level positions to replace each one who leaves.

A survey is being compiled to gather information from the Classes of 2000 and 2005 that will assist the University of Pittsburgh School of Nursing in developing a strategy to combat the current trend.

1940S

Mary Alice Dillie Feathers (BSN '46) not only marked a 60th nursing class reunion this spring, but also celebrated the graduation of her granddaughter, Nerissa Lindenfesler, an environmental geology major and member of the University of Pittsburgh Class of 2006.

1950S

Phyllis Sawhill Janocha (BSN '51) is a volunteer with the American Red Cross. Recognized by the International Red Cross with its Florence Nightingale Award (2001), she spent two months last fall working with the Red Cross to assist victims of Hurricanes Katrina and Wilma.

Jacqueline Kruman (MLitt '56, BSNEd '52) retired in 1987 after a long professional career that included positions as director of nursing, vice president of nursing, and as an educator at Pitt, Kent State University, and Akron University. She held office in a number of professional organizations, including Pennsylvania State Nurses Association District #6, the Children's League for Nursing, and the Nursing Society of Hospital Nursing Services Administrators. As a founding member of the Deaf Community Services in Stark County, Ohio, she was honored with the President's Award. She also received the Dr. Omar Elazar Award for service to Stark County's Community Mental Health Board in Canton, Ohio. A music lover, she plays the piano, organ, and cello.

1960S

Joanne Greedan (BSN '65) is director of quality management at the Gulf Coast Medical Center in Panama City, Fla.

Mary Ann Zakutney (BSN '67), MD, PhD, is currently a second-year resident at the Mayo Clinic Family Medicine Residency Program in Scottsdale, Ariz. She earned a PhD at the University of Utah.

Janice Selekman (BSN '69), a professor at the University of Delaware School of Nursing, was named the 2006 Pediatric Nursing Educator of the Year by the Society of Pediatric Nurses. Her *School Nursing: A Comprehensive Text* has been published by F.A. Davis and sponsored by the National Association of School Nurses.

1970S

Margaret Grey (BSN '70) became dean of the Yale School of Nursing in September 2005 and was elected to membership in the Institute of Medicine in October 2005.

Linda Conway Stotts (BSN '70) is a staff nurse in the medical intensive care unit at the VA Medical Center, Pittsburgh. She has worked at the VA Hospital for the past 40 years, 36 of those years as a critical care nurse.

Terri E. Weaver (BSN '73), associate professor and chair, biobehavioral and health sciences at the University of Pennsylvania School of Nursing, was named chair of the national Board of Directors of the American Lung Association in May 2006.

The late Corinne A. Barnes (PhD '74, MN '64, BSN '60) has been selected for induction into the McKeesport High School Hall of Fame. A Class of '46 alumna of the high school, she is one of seven McKeesport alumni to be honored in 2006.

Andrea J. Sloan (BSN '76) an attorney in the McLean, Va., area, has a private practice focusing on guardianships, end-of-life care, and bioethics. A board member of the American Association of Nurse Attorneys Foundation, she earned a JD at Georgetown University Law Center. She and her husband have three sons and love to cruise.

1980S

Lara V. Marel (BSN '81) is a senior applications analyst, information services, at Allegheny General Hospital, West Penn Allegheny Health System, Pittsburgh.

Tamra Merryman (MSN '85, BSN '84), vice president of the Center for Quality Improvement and Innovation at the University of Pittsburgh Medical Center (UPMC), was a plenary speaker at the Institute for Healthcare Improvement's Second Annual International Summit on Redesigning Hospital Care in Atlanta, Ga., this past June. She was formerly vice president of patient care services at UPMC Shadyside.

Louise C. Waszak (PhD '87, MN '78), assistant professor in the University of Pittsburgh School of Nursing's Department of Health Promotion and Development's pediatric nurse practitioner program, is in Seattle, Wash., filling in for a pediatrician who has been deployed overseas.

Patricia Drogos O'Donoghue (PhD '88, MN '73) stepped down as the ninth president of Mount Mary College in Milwaukee, Wis., on June 30, 2006.

Sharon Myers Falk (BSN '89) is a civilian instructor in the Army practical nurse program at the U.S. Army Medical Department Center and School, Department of Nursing Science, in Fort Sam Houston, Texas.

1990S

Scott Rhoades (BSN '95) did a recent graduate practicum at the Challenger Center for Space Education site at Wheeling Jesuit University in Wheeling, W.Va. He is a consultant there and is working on innovative learning experiences for teachers and students to advance understanding on how the body reacts to space flight. Rhoades' article, "Space: A Nursing Frontier," originally published in the November 2005 issue of *Advance for Nurses*, was selected by Merion Publications for its 2005 *Reflections* edition.

Courtney Bethea (BSN '96) is a critical care nurse in the Belcamp, Md., area. She especially likes the flexibility nursing allows so she can enjoy her favorite pastime, traveling.

Janet Turkovich Peterson (BSN '96) is a CRNP in pulmonary sleep medicine at the Comprehensive Lung Clinic at Falk Clinic, Pittsburgh. In her leisure time, she enjoys her black Lab, swimming, hiking, camping, biking, and traveling.

Captain Allan Long (BSN '98) earned a Master of Science in nurse anesthesia from the U.S. Army graduate program in anesthesia nursing. Upon completion of the program, he was stationed at Walter Reed Army Medical Center in Washington, D.C. He is currently preparing to deploy in support of Operation Enduring Freedom.

Donna Levitt (MSN '99, BSN '96), a resident of Aiken, S.C., is course coordinator for Life Span IV: Nursing Care of the Mature Family, the gerontology class offered to junior nursing students at the Medical College of Georgia School of Nursing.

2000S

Mildred Jones (PhD '00, MSN '90)

was honored by the Pittsburgh Black Nurses in Action at their annual scholarship luncheon on June 17. Jones was recognized as one of only 10 African American nurses in Allegheny County holding a PhD in nursing. She was recognized as a role model, beacon of inspiration, trailblazer, and researcher. An associate professor at Carlow University, Jones presented a symposium at the University of the West Indies Faculty of Medical Sciences and the School of Nursing in Kingston, Jamaica, for the International Nursing Research Conference and Mary Seivwright Day.

Carolyn Whittock Ewald

(BSN '01) works as an RN in the medical intensive care unit at Abington Memorial Hospital and was recognized with the Nursing Excellence Award in 2005. She and her husband, Thomas, are expecting their first child.

Kelly Bilbo Perry (BSN '01) is a CCRN and began a CRNA program in August at the Gooding Institute in Panama City, Fla. She moved to Florida with her husband, who is in the Navy, but misses the North.

SCHOOL OF NURSING FRESHMAN HONORED AS A STUDENT LEADER

JESSICA MARITTO SELECTED TO JOIN THE UNIVERSITY OF PITTSBURGH'S BLUE AND GOLD SOCIETY

Freshman nursing student Jessica Maritto was inducted into the University of Pittsburgh's prestigious Blue and Gold Society, recognized as one of the most outstanding student organizations on campus.

Composed of exceptional undergraduate student leaders University-wide who act as liaisons between the Pitt Alumni Association and the University's student community, the Blue and Gold Society maintains an extremely selective recruiting process. A screening committee of 10 University officials selects a third of the Blue and Gold membership every spring based on demonstrated leadership in other organizations, strong academic responsibility, charismatic demeanor, and especially Pitt

pride. The mission of the Blue and Gold Society is to promote the University of Pittsburgh, its interests, and its goals among future and current students, alumni, and its friends and to instill in them the value of a lifelong relationship with the University.

Maritto, who transferred from the School of Arts and Sciences, is completing her freshman year at the School of Nursing with a 4.0 grade point average. In addition to the Blue and Gold Society, Maritto is a member of the Red Cross Club, Nursing Student Association, Emerging Leaders program, National Society of Collegiate Scholars, and Sigma Alpha Lambda honor and leadership society. She also serves as a freshman studies undergraduate teaching assistant, and volunteers at UPMC Presbyterian and the Peter M. Winter Institute for Simulation, Education, and Research.

Maritto joined other members of the Blue and Gold Society Class of 2006 for a formal induction ceremony and reception in University of Pittsburgh Chancellor Mark Nordenberg's office on April 19, 2006.

SCHOOL LOSES A FRIEND

The University of Pittsburgh School of Nursing was saddened by the passing of Dolores "Dee" Wilden on March 6, 2006. Longtime friend of late School of Nursing Professor Emerita and alumna Corinne Barnes, Wilden enjoyed a 14-year career at Blue Cross of Western Pennsylvania, retiring in 1994 as vice president of community affairs. She was dedicated to the well-being of others and spearheaded the development of the nation's first primary healthcare benefits designed exclusively for children, the Blue Cross Blue Shield Caring Program for Children.

Along with Barnes, Wilden campaigned to raise funds for the School of Nursing's Corinne M. Barnes Doctoral Scholarship, which has awarded 14 scholarships since 1994 to support students whose research focuses on the nursing care of children. Wilden was named an Honorary Alumnus of the School of Nursing in 2001 and served on its volunteer advisory committee for the University's capital campaign.

In Memoriam

Ruth Wilkens Emerson '43

July 1, 2006

Barbara Doyle Hogg '51

April 2, 2004

Gladys Cowden Buckwalter '52

January 2, 2006

Floyce Reid McCauley '56

December 18, 2005

Hattie Hickman-Turk '56

September 8, 2005

Irene L. Dittmore '58, '78

June 15, 2006

Judith Delisi Mihealsick '72

July 1, 2006

If you wish to express condolences to a classmate's family, the School's alumni office will forward your message, as long as a contact address is available. Associate Director of Alumni Relations Joan Nock can be reached at jno100@pitt.edu or at 412-624-2404. Mail may be directed to University of Pittsburgh, School of Nursing, Office of Advancement and External Relations, Attention: Joan Nock, 218 Victoria Building, Pittsburgh, PA 15261.

THE NEW UPJ NURSING ALUMNI STUDENT AWARD

In honor of the 25th anniversary of the RN-BSN program at the University of Pittsburgh at Johnstown (UPJ), a new UPJ Nursing Alumni Student Award has been established.

In the past 25 years, more than 500 nurses have earned their bachelor's degree through the RN-BSN program at UPJ. Many of the RNs who return to complete degrees at UPJ work full time, and many are spouses and/or parents. Scholarship opportunities help many of these nurses complete their degree by relieving a major strain on finances. Scholarship money can help nursing students pay for books, fuel costs, tuition, and student loans.



The UPJ nursing program began because nursing leaders in the Johnstown area believed it was urgent that nurses be able to obtain a BSN degree while remaining in this area to provide care to our residents. The program is still benefiting nurses and the community 25 years later and will continue to benefit the community well into the future.

This award will be funded by those who have completed the program at UPJ and perhaps those who remember what it was like to need financial assistance. It will live on at UPJ in the name of all the nurses who have completed the program. We hope your name will join others on the list!

If you wish to contribute to the award, please send your check, payable to "University of Pittsburgh at Johnstown," to:

University of Pittsburgh at Johnstown
Nursing Program
141 Biddle Hall
Johnstown, PA 15904



Pittsburgh Black Nurses in Action Annual Scholarship Luncheon

The Pittsburgh Black Nurses in Action (PBNIA) honored 10 African American nurses who have earned doctoral degrees at their annual scholarship luncheon on June 17 at East Liberty Presbyterian Church. Those honored were Betty Braxter (PhD '03), Willa Doswell, Nadine Frye (BSN '47, MLitt '51), Dorothy Hawthorne-Burdine, Janice Holmes (BSN '76, MNEd '79), Beryl Jackson (MN '72, PhD '82), Mildred Jones (MSN '90, PhD '00), Luevonue Lincoln (MN '78, PhD '82), Rachel Poole (BSN '47, MLitt '52), and Shirley Smith (BSN '59, MNEd '79). All are alumni, current faculty, and/or former faculty of the University of Pittsburgh School of Nursing.

Keynote speaker Doswell addressed the event's theme, "Education + Experience = Empowerment," and scholarship awards were presented to doctoral students Kathy Mayle (BSN '77, MNEd '80) and Claudia Kreggs-Byers.

PBNIA is a chapter of the National Black Nurses Association, Inc.

PROJECT EXPORT

Betty Braxter (PhD '03), research/postdoctoral associate in the Department of Health Promotion and Development at the University of Pittsburgh School of Nursing, has been named a 2006 EXPORT Summer Research Career Development Institute (SRCDI) fellow and participated with a group of 30 minority scientists from across the country committed to research in minority health disparities June 17–20 on the University of Pittsburgh campus.

Project EXPORT (Centers of Excellence in Partnerships for Community Outreach, Research on Health Disparities, and Training) is a program

created by the National Center for Minority Health and Health Disparities. Its purpose is to increase the number of investigators doing research in minority health disparities, with special emphasis on developing minority investigators in this field. Participants learn how to write proposals (i.e. "K" awards and National Research Service Award applications), how to interact with agency program officers, and how to identify a mentor for research career mobility.

More than 60 applicants submitted curriculum vitae, statements of research, and letters of support from faculty mentors to the selection

committee, which included Chip Reynolds, Ed Ricci, and Stephen Thomas.

School of Nursing faculty member Willa Doswell, associate professor in the Department of Health Promotion and Development, participated at the SRCDI as a facilitator/mentor, along with Janice Dorman, associate dean for scientific and international affairs, who presented on grant writing.

Jackson State University in Mississippi is an academic partner with the University of Pittsburgh in Project EXPORT.

UPJ NURSING PROGRAM CELEBRATES 25 YEARS

The nursing program at the University of Pittsburgh at Johnstown (UPJ) marked its 25th anniversary with a celebration on Thursday, March 30. The event featured a reception and dinner at the UPJ Living/Learning Center and welcomed more than 100 alumni and guests.

UPJ President Albert Etheridge, along with Jerry Samples, vice president of academic and student affairs at UPJ, and Jacqueline Dunbar-Jacob, dean of the University of Pittsburgh School of Nursing, paid tribute to the program and its accomplishments.

Since 1980, more than 500 graduates have earned bachelor's degrees and more than 90 registered nurses have earned certification to work as school nurses in Pennsylvania since the Pennsylvania Department of Education approved the UPJ school nurse certificate program in 1996. The first five UPJ master's students earned MSN degrees in April 1999.

Nancy Grove (BSNEd '68), director of the UPJ nursing program since 1980, was instrumental in planning the event, which featured Tim Rigby, WJAC-TV sports announcer, as master of ceremonies and illusionist John Robertson.

Additionally, the new UPJ Nursing Alumni Student Award was established in honor of the program's 25th anniversary. Alumni and friends are urged to support this award to ease the financial burden of students, tomorrow's nurse leaders. Checks may be made payable to "University of Pittsburgh at Johnstown" and mailed to: University of Pittsburgh at Johnstown Nursing Program
141 Biddle Hall
Johnstown, PA 15904

Please write "New UPJ Nursing Alumni Student Award" on the check's memo line.



Ellen Feeley (right), first director of the UPJ nursing program, with Barbara Duryea (BSN '84) and Paula Thomas (BSN '84), two of the first UPJ program graduates



Nancy Grove talking with Master of Ceremonies Tim Rigby, WJAC-TV sports announcer



Pam Bosis, secretary; Nancy Grove, director of UPJ's nursing program; and Becky Sease, instructor

UPJ NURSING PROGRAM DIRECTOR RETIRES

Nancy Grove (BSNEd '68), PhD, RN, director of the nursing program at the University of Pittsburgh at Johnstown (UPJ) since 1990, has retired. Her career at UPJ began in 1972 when she was an adjunct associate professor of natural sciences, while teaching at the Conemaugh School of Nursing and the Greater Johnstown Area Vocational-Technical School. In 1990, Grove was named successor to the UPJ nursing program's first coordinator, Ellen Feeley.



Nancy Grove, department director and associate professor of nursing at UPJ

Grove's many accomplishments at UPJ include the development of two collaborative critical care courses and the creation of the school nurse certificate program in 1995. She also helped pioneer graduate education via distance-learning techniques at UPJ, which continues to be a leader in distance education. This spring, Grove coordinated the UPJ nursing program's 25th anniversary celebration.

HAVE YOU JOINED THE PITT CAREER NETWORK?

THOUSANDS OF PITT ALUMNI HAVE!

The Pitt Career Network (PCN) is an online directory and includes information about alumni careers and professional experiences. This free service for alumni and students seeking career-related contacts, insight, and advice is not an employment service or job board. Instead, the PCN offers opportunities to network with the University's diverse and talented alumni base.

Visit www.alumni.pitt.edu/networking for details. PCN and you—a link to the future!

CALL FOR 2007 NOMINATIONS

The University of Pittsburgh School of Nursing Alumni Society is accepting nominations for its 2007 Distinguished Alumni and Honorary Alumni Awards. Our alumni represent the University of Pittsburgh locally, nationally, and internationally through their work as nursing professionals. The School takes pride in the prestigious accomplishments of its alumni but needs assistance in identifying those individuals who meet the following award criteria.

2007 DISTINGUISHED ALUMNI AWARD

Nominees for the 2007 Distinguished Alumni Award(s) must be University of Pittsburgh School of Nursing program graduates and will be considered on the basis of leadership, achievement, and contribution in areas similar to the following: academia, administration, clinical practice, research, and service [professional and community.]

When submitting 2007 Distinguished Alumni Award nominations, please indicate in which area the nominee should be considered.

2007 HONORARY ALUMNI AWARD

This award recognizes an individual who is not a graduate of the University of Pittsburgh School of Nursing but who has demonstrated extraordinary service and support to and for the School's mission. When submitting nominations for Distinguished and Honorary Alumni, please include any materials (such as curriculum vitae or resume) and information that supports that nomination (i.e. letters of support, pertinent materials.)

All 2007 Distinguished and Honorary Alumni nominations should be submitted no later than **January 31, 2007**, to the University of Pittsburgh, School of Nursing, Alumni Office, 218 Victoria Building, 3500 Victoria Street, Pittsburgh, PA 15261. For more information, please contact the nursing alumni office at 412-624-2404.

SIGMA THETA TAU

Sigma Theta Tau, Eta Chapter, held its annual induction ceremony on April 5 at the Twentieth Century Club in Oakland. President Linda Snyder (BSN '75, MSN '86) introduced Eileen O'Toole (MSN '89, '96), CRNP, as guest speaker and welcomed new members for induction at the community leader, graduate, and undergraduate levels.

2006 Distinguished Alumni

The University of Pittsburgh School of Nursing Alumni Society proudly congratulates its 2006 Distinguished and Honorary Alumni awardees honored at Alumni Day 2006: Building New Traditions, on Saturday, May 20, at the Twentieth Century Club in Oakland.



Bernadette M. Melnyk (MSN '83), PhD, RN, CPNP/NPP, FAAN, FNAP

Dean and Distinguished Foundation Professor in Nursing, Arizona State University College of Nursing

Bernadette Melnyk has demonstrated leadership in research, education, and practice and has dedicated her professional career to improving the health of children and parents. She developed the dual pediatric nurse practitioner/psychiatric nurse practitioner program at the University of Rochester—the first of its kind in the nation—and established a similar program at Arizona State University. Melnyk coedited and contributed to the writing of *Evidence-Based Practice in Nursing and Health Care: A Guide to Best Practice*.



John M. O'Donnell (MSN '91), CRNA

Director/Instructor, Nurse Anesthesia Program, University of Pittsburgh School of Nursing

An extraordinary clinician, nurse educator, and mentor, John O'Donnell has provided expert leadership for more than 11 years as director of the School's anesthesia program, consistently ranked among the top 10 programs in the country. His academic contributions have expanded the use of human simulation within the undergraduate and graduate programs, and he is the assistant director of the University of Pittsburgh's Peter M. Winter Institute for Simulation, Education, and Research. O'Donnell possesses an unparalleled wealth of knowledge that inspires colleagues and students alike.



Victoria L. Rich (MSN '84, PhD '91), RN

Chief Nursing Officer, Hospital of the University of Pennsylvania (HUP), Assistant Dean of Clinical Practice, Penn School of Nursing

Victoria Rich is considered a pioneer in establishing patient safety systems and initiatives—recognition she has earned by developing a viable and innovative framework for creating and sustaining a culture of safety that has become a model in the United States. She is also an outstanding policy leader who is committed to finding a solution for the nursing shortage and recruitment crisis. An advocate for cultural diversity awareness, Rich designed the Global Ambassador program to enhance cultural diversity at HUP.

2006 HONORARY ALUMNUS



Jason J. Dechant, MA

Instructor, Department of Health Promotion and Development, University of Pittsburgh School of Nursing

Jason (Jake) Dechant, though not an alumnus of the University of Pittsburgh School of Nursing, has worked tirelessly to advance its mission. Instructor of anatomy and physiology, he has inspired nursing students for nine years in a positive learning environment, continually blending relevant nursing topics into his curriculum. Dechant honors ongoing requests to showcase the anatomy and physiology lab during events for alumni, prospective students, and guests and has patiently provided cadaver education to School of Nursing staff. The School is indeed a better place because of him!



The Class of 1956 came together to celebrate a 50-year class reunion.



Six alumni from the Class of 1946 gathered to mark a milestone 60th reunion (*left to right standing*): Mary Dillie Feathers and Jean Brethauer Christie, (*left to right seated*): Bette Callahan Acker, Alice Robinson Evans, Ruth Perilstein Reifman, and Ann Louise Burkhardt.



Striking a pose before lunch at the Twentieth Century Club are Class of 1986 alumni (*left to right*): Cheryl Draszkievicz Schlamb, Sandy Farrell Shein, Janet Palamone, and Suzanne Welch Janitor.



The Class of 1981, marking a 25th reunion, had the largest number of returning alumni in attendance.



Sarah Zangle (*center*), BSN Class of 2006, receives congratulations from Nursing Alumni Society executive committee members Beth Killmeyer (BSN '99) (*left*) and (*right*) Kris Keefer Wolff (BSN '93, MSN '00) upon being named the Nursing Alumni Society 2006 Senior Student Awardee.



Luevonue Lincoln (MN '78, PhD '82) (*left*) and Shirley Smith (BSN '59, MNEd '79) (*right*) present the 2006 African American Nursing Alumni Scholarship Award to Kimberly Fortson.

ALUMNI DAY 2006: A MILESTONE OCCASION

The University of Pittsburgh School of Nursing marked Alumni Day 2006: Building New Traditions on Saturday, May 20. The Nursing Alumni Society executive committee, along with Dean Jacqueline Dunbar-Jacob, welcomed alumni guests and friends.

The day began at the School of Nursing with a continental breakfast, self-guided tour, and the presentation "From Fever to Fame: A Psychiatric Evaluation of Florence Nightingale," by Katherine Wisner and Judy Zarra. Alumni guests then moved to the Twentieth Century Club for lunch and a program.

Highlights of the program included remarks by the 2006 Distinguished and Honorary Alumni, recognition of milestone reunion classes and student scholars, the unveiling of the Class of 1946 composite photo (thanks to Peg Chakan, daughter of Bette Callahan Acker, BSN '46), and the announcement of the Elizabeth Bayer Baxter Student Resource Fund, established on behalf of Elizabeth Bayer Baxter (BSN '56) by her family.

Special thanks to the milestone reunion classes who raised more than \$1,100 as part of the class gift program. The funds will be directed to the development of a historical space in the Victoria Building.

ALUMNI PANEL REFLECTS CAREER OPTIONS

An interesting panel assembled in Rosemary Hoffmann's Transitions into Professional Nursing Practice class this past April. Composed of six University of Pittsburgh School of Nursing alumni who have earned an advanced degree in another discipline(s) at Pitt, the panel offered senior nursing students a look at how nursing knowledge

can be applied in a variety of professional roles.

Members of the panel included Rose H. Delaney (BSN '83), DrPH, MBA, research associate; Kim Fedor (BSN '83), MBA, director of community affairs for UPMC Braddock; Maryanne Fello (BSN '72), MEd, director of Forbes Hospice; Chad Rittle (BSN '00), MPH, community health nurse for the Pennsylvania Department of Health, Butler County; Maureen Kroll (BSN '76,

MN '80), JD, president of a professional corporation for the practice of law, licensed in Pennsylvania and Florida; and Kristine K. Wolff (BSN '93, MSN '00), case manager at UPMC.

Panel participants gave overviews of their professional roles, and questions were entertained from students. Due to the panel's success, a similar discussion is planned for fall 2006 with another group of nursing alumni.

Where there's a will...

Philanthropist: Someone who makes charitable donations intended to increase human well-being.

Bequest: A gift of personal property by will; legacy.

Will: A legal document that declares a person's intent with regard to the disposition of his or her property after death; testament.

Legacy: A reminder of a person or event; a celebration of somebody's life and work.

The unique thing about a will is that it does not become legally binding until the maker of the document dies. Thus, the maker of a will does not part with any assets until after death. Why is this worth a second thought?

A lot of people today are concerned about whether they will have sufficient means to care for themselves should they live to a very advanced age. After all, the over-100s now constitute the fastest growing age group in this country.

On the other hand, many of these same people are charitably inclined and have a deep and abiding concern for the future...for their families and

their community. They would like to be philanthropists.

That is where a well-planned will could be of great assistance. A will has many functions, including controlling who receives one's assets after death, naming one's own personal representative, naming guardians for minor children, controlling when assets will be distributed, minimizing death taxes, and making gifts to charities.

Including charitable donations in your will can have a lasting and beneficial effect: perpetuating your existing charitable giving, even after your death. Americans are very generous. They contribute many millions of dollars each year to charitable organizations. However, people often overlook just how much their annual gifts will be missed by those charities they have supported for so long when they are no longer there.

The failure to include favorite charities in one's estate plan generally will have two unfavorable results: a substantial loss of funds to the charities, and the loss of potentially valuable inheritance and estate tax charitable deductions. Perhaps even more importantly, by not

including charities in your will, you miss the opportunity to leave a legacy for the future.

Please give it some thought. If you have been a longtime supporter of the University of Pittsburgh School of Nursing, your gifts will be greatly missed when they are no longer available. If you have not been a frequent contributor but you would like to support the School, a charitable bequest in your will could be the perfect way for you to accomplish this. Did you know that an endowed gift of \$24,000 would be enough to replace or provide an annual gift of \$1,000 to the School of Nursing every year...in perpetuity?

NOW THERE'S A LEGACY TO BE PROUD OF!

If you would like information about making a gift to the School of Nursing, please contact Mary Rodgers Schubert at 412-624-7541 or mschuber@pitt.edu. If you have already remembered the School in your will or estate plan, please contact Schubert to let her know so that you can begin to receive the benefits of membership in the 1787 Society.

HOW COULD THE NEW PENSION PROTECTION ACT OF 2006 ASSIST OWNERS OF INDIVIDUAL RETIREMENT ACCOUNTS (IRAS) IN MAKING CHARITABLE GIFTS?

The long-awaited passage of this act is good news for qualified donors. First, though, it is important to understand that the IRA charitable rollover provision applies only to outright lifetime transfers to qualified charities—not to future gifts, charitable gift annuities, or charitable trusts. Also, the new rules will only apply to transfers made during 2006 and 2007. In brief, the new law provides an exclusion from gross income for oth-

erwise taxable IRA distributions of up to \$100,000 per year from traditional IRAs and Roth IRAs for qualified charitable distributions, when the distribution is made directly to the designated charity by the plan. The plan owner must have attained at least age 70½ on the date of the distribution to the charity. (Note that a "qualified charitable deduction" specifically excludes distributions to donor-advised funds or supporting organizations.)

To learn more about this unique giving opportunity, please contact Kathleen Helling at 412-647-4220 or hkathleen@pmhsf.org.



THE SCHOOL OF NURSING EXCEEDS ITS CAPITAL CAMPAIGN GOAL!

In late April, the University of Pittsburgh School of Nursing surpassed its \$8.5 million capital campaign goal—over a year ahead of the June 2007 official close of an aggressive \$1 billion University-wide capital campaign launched in 1997.

The School's development effort has been led by Dean Jacqueline Dunbar-Jacob and J. Roger Glunt, chair of the School's volunteer advisory committee. Strong philanthropic support from nursing alumni and friends has resulted in the creation of 27 new endowments, bringing the number of endowed funds at the School to 48 with a combined market value of nearly \$8 million. This is an impressive 129 percent increase! These funds generate more than \$280,000 annually, most of which is directed to academic support. The School of Nursing is extremely grateful for the generosity demonstrated by its donors throughout the current capital campaign.

Recognized as a leader in education, clinical practice, and research, the School of Nursing is committed to advancing the profession through research that translates newfound knowledge into innovative and quality healthcare. As we look to the future, the School will focus its development efforts on scholarship, enhancement of the skills lab and support of the Center for Research in Chronic Disorders, and named professorships.

Scholarship dollars are necessary to attract highly qualified students to our classrooms. Our second-degree and University Honors College programs are expected to grow, as well as the numbers of out-of-state students. Adequate financial assistance

will aid with recruitment and is critical to grooming nurse professionals at the master's and doctoral levels. The new clinical nurse leader and Doctor of Nursing Practice programs, designed to meet the challenges of healthcare's future, will prosper if scholarship funding is available for students who wish to earn an advanced degree.

The School of Nursing is dedicated to sustaining and enhancing cutting-edge educational technology within its programs. Ongoing financial support is necessary to bring the latest in simulation, tele-health, and virtual reality segments to the student experience.

Research in the areas of adherence and quality of life has significantly impacted clinical practice and patient outcomes. Donor support directed to the Center for Research in Chronic Disorders will enable nurse scientists dedicated to these issues to continue their work to improve healthcare for those with chronic afflictions.

Support for faculty in the form of named professorships will attract experts in chronic disorders, critical care, genetics, and informatics/technology to the School. These top-notch educators will enhance the educational, clinical practice, and research agendas of the School of Nursing.

The School's future is bright, and with your involvement, it will shine with a brilliance of unbridled promise. We invite you to become a part of this exciting new phase of development at the University of Pittsburgh School of Nursing. To learn how you can make a difference, contact the development office at 412-624-0856.

BOARD OF VISITORS MEETING JUNE 2006

At the 2006 Board of Visitors meeting, held in June, University of Pittsburgh School of Nursing Dean Jacqueline Dunbar-Jacob reported on the School's increased research grants and dollars, increased faculty diversity, enhanced technology in education, embedded evidence-based practice throughout the programs, the newly opened clinical nurse leader program, design and approval of the Doctor of Nursing Practice program, and raised student qualifications.

The Board of Visitors meets annually to conduct an independent appraisal of the School of Nursing's educational and research programs and provide valuable insight and advice for maintaining and improving the quality of those programs. "The University of Pittsburgh School of Nursing is fortunate to have the current Board of Visitors," says J. Roger Glunt, chair. "These distinguished men and women give very freely of their knowledge, experience, and passion to better the education of nurses." Findings of the board are provided to the chancellor of the University and the senior vice chancellor for the health sciences.

"The feedback from the meeting was very positive," Dunbar-Jacob says. "The report to the provost and associate vice chancellor indicated that the School of Nursing is successful, cutting edge, innovative, and a leader in the profession." At the conclusion of the meeting, the provost thanked the board for its contributions and support, while the vice chancellor noted how proud the University was of the School of Nursing. All in all, it was a very successful and productive meeting.

UPCOMING EVENTS

HOMECOMING 2006 October 19–22, 2006

PATHWAY TO PROFESSIONS: A CAREER NETWORKING EVENT

October 19, 2006
Connolly Ballroom,
Alumni Hall
6–8 p.m.

ALUMNI HOSPITALITY TENT

October 21, 2006
Heinz Field
Three hours prior to kickoff

HOMECOMING FOOTBALL GAME

October 21, 2006
Pitt vs. Rutgers
Heinz Field

FRESHMAN FAMILY WEEKEND SCHOOL OF NURSING BREAKFAST

October 21, 2006
First Floor, Victoria Building
8:30 a.m.

ALUMNI SOCIETY POINSETTIA SALE November 1–21, 2006

ALUMNI SOCIETY POINSETTIA PICKUP December 5, 2006

First Floor, Victoria Building

PINNING CEREMONY April 27, 2007

Soldiers & Sailors
Memorial Hall
7 p.m.

COMMENCEMENT April 29, 2007

Petersen Events Center
1 p.m.

GRADUATE STUDENT RECOGNITION DINNER April 29, 2007

Pittsburgh Athletic
Association
4 p.m.

STUDENT NEWS

Bridget Coyne, RN, graduate student researcher in the Department of Acute and Tertiary Care, received an award for her proposal, “Tai Chi in Metastatic Breast Cancer, Effect on Cancer-Related Fatigue” (8/1/06–7/31/08).

Susan Simms received an award from the American Association of Critical Care Nurses for her proposal, “Self-Efficacy and Self-Care Management of Persons with Heart Failure” (4/1/06–3/31/07).

Nicole Zangrilli Hoh, RN, teaching assistant in the Department of Health Promotion and Development, received an award for her proposal, “BCL-2 Genotypes and Outcomes after Severe Traumatic Brain Injury” (8/1/06–5/30/07).

The first class of accelerated second degree students, which graduated in August 2005, had a 100 percent first-time pass rate on the National Council Licensure Examination.

In the News

TROOPS TO NURSE TEACHERS LEGISLATION INTRODUCED

Following a three-year lobbying effort led by the American Association of Colleges of Nursing, U.S. Senator Dick Durbin (D-IL) introduced new legislation last month to address the nation’s shortage of nurse faculty. On July 15, the Senate passed an amendment by voice vote creating the Troops to Nurse Teachers (TNT) program. Offered by Durbin to the fiscal year 2007 Department of Defense authorization bill (S.2766), the TNT program encourages retiring or separating military nurses to become nurse faculty. The legislation would provide scholarships or transitional assistance, so these nurses may teach in schools of nursing.

The amendment is the first step in the authorizing process, since the House Defense Authorization bill (H.R. 5122), which passed on May 11, did not contain a similar provision. The TNT program must be retained in the House-Senate conference committee to complete the process. Simultaneously, funding must be included in the final fiscal year 2007 defense appropriations bill to pay for the program. Then the regulatory process will begin to implement the program. Other cosponsors included Senators Susan Collins (R-ME), James Inhofe (R-OK), Daniel Inouye (D-HI), Robert Menendez (D-NJ), Barbara Mikulski (D-MD), Lisa Murkowski (R-AK), Barack Obama (D-IL), and Jack Reed (D-RI).

See <http://durbin.senate.gov/record.cfm?id=258371&&>.

Continuing Education

The University of Pittsburgh School of Nursing’s continuing education program is committed to providing a broad range of on-site and online activities tailored to nurses in clinical practice. To meet the new legislative requirements for annual continuing education, we are launching our online education programs. To learn more about our educational programming, please visit www.nursing.pitt.edu.

14TH ANNUAL NURSING HORIZONS CONFERENCE

EVIDENCE-BASED PRACTICE: PROCESS AND OUTCOMES

MAY 18, 2007

First-Floor Lobby, Victoria Building

The focus for Horizons is the application of evidence-based practice in clinical settings, such as hospitals, health departments, and other health-related agencies. Clinical nurses are encouraged to submit abstracts for poster and oral presentations on completed and in-progress projects. Abstract submission information will be posted online.

2007 PHARMACOLOGY UPDATE

AUGUST 2007

First-Floor Lobby, Victoria Building

For more details about our upcoming programs, please call 412-624-3156, e-mail contedu@pitt.edu, or view information online at www.pitt.edu/~nursing/continuingedu/index.html.

Awards

Susan Albrecht, PhD, RN, FAAN, associate dean for student and alumni services, development, and public relations; and associate professor in the Department of Health and Community Systems, received an award for her proposal "Scholarships for Disadvantaged Students" (7/1/05–6/30/06). In addition, Albrecht was elected to the American Nurses Association (ANA) Congress on Nursing Practice and Economics by the ANA House of Delegates, was elected to the Association of Women's Health Obstetrics and Neonatal Nursing, received the Distinguished Nurse Award from the Pennsylvania State Nurses Association, and was named a Paul Harris fellow by the Rotary Foundation of Rotary International.

Catherine M. Bender, PhD, RN, was promoted to associate professor in the Department of Health and Community Systems and conferred with tenure.

Lisa Bernardo, PhD, MPH, RN, HFI, associate professor in the Department of Health and Community Systems, was presented with the Distinguished Clinical Scholar Award and, along with **Mary Beth Happ, PhD, RN**, associate professor in the Department of Acute and Tertiary Care, was selected as the new BSN committee chair for the School of Nursing.

Helen Burns, PhD, RN, associate dean for clinical education and associate professor in the Department of Health and Community Systems, was appointed to the National Advisory Council on Nurse Education and Practice.

Lora E. Burke, PhD, MPH, RN, professor in the Department of Health and Community Systems, was conferred with tenure and will be named a fellow of the American Academy of Nursing at the awards ceremony and induction banquet on November 11.

Susan Cohen, DSN, APRN, associate professor in the Department of Health Promotion and Development, was conferred with tenure and will be named a fellow of the American Academy of Nursing at the awards ceremony and induction banquet on November 11.

Yvette Conley, PhD, assistant professor in the Department of Health Promotion and Development, was appointed as a member of the American Society of Human Genetics information and education committee. Conley also received a 2006 Chancellor's Distinguished Award.

Joanne Connelly, MSN, CRNP, instructor in the Department of Health and Community Systems, and **Richard Henker, RN, PhD**, associate professor and vice chair of the Department of Acute and Tertiary Care, were selected as the new MSN committee chairs for the School of Nursing. As coordinator of the School's psychiatric primary care nurse practitioner program,



Catherine M. Bender



Helen Burns



Heidi Donovan



Willa Doswell



Jacqueline Dunbar-Jacob



Judith Erlen



Mary Beth Happ

Connelly hosted the American Nurses Association Psychiatric Nurse Practitioner Review Seminar June 2–3 at the School of Nursing. The review helps prepare those who plan to take the national psychiatric nurse practitioner exam for licensure and prescription authority.

Heidi Donovan, PhD, RN, assistant professor in the Department of Acute and Tertiary Care, received an award for her proposal "Symptom Clusters Experienced by Women Across the Ovarian Cancer Disease Trajectory" (1/1/06–6/30/07).

Janice Dorman, PhD, MS, associate dean for scientific and international affairs, and **Yvette Conley, PhD**, assistant professor in the Department of Health Promotion and Development, received a T32 grant for their proposal, "Targeted Research and Academic Training of Nurses in Genomics" (6/1/06–5/31/11).

Willa Doswell, PhD, RN, FAAN, associate professor in the Department of Health Promotion and Development, received an award for her proposal, "The NIA Girls' Group—A Community-Based Program in the Greater Pittsburgh Communities" (2/1/06–1/31/07). Doswell was also appointed as a magnet hospital status reviewer.

Jacqueline Dunbar-Jacob, PhD, RN, FAAN, dean of the School of Nursing; professor of nursing, epidemiology, and occupational therapy; and director of the Center for Research in Chronic Disorders, received an award for her proposal "Graduate Nurse Education Grant Program" (1/1/06–6/30/06); from the Jewish Healthcare Foundation for her proposal "The Nurse Navigator Fellowship" (7/1/06–6/30/07); and the Pennsylvania Higher Education Foundation for her proposal "Nurse Education Grant" (7/1/06–6/30/07). Dunbar-Jacob also was recently elected to the American Academy of Nursing Board of Directors.

Judith Erlen, PhD, RN, FAAN, professor and doctoral program coordinator, was named as president-elect of the Eastern Nursing Research Society (ENRS). She will serve as president of ENRS for the next four years.

Gilan El Saadawi, PhD, MD, MS, assistant professor in the Department of Health and Community Systems, received an award for her proposal, "A Standard-Based Tool for Clinical Trials Protocol Authoring" (7/1/06–6/30/07).

Rebekah Hamilton, PhD, MSN, assistant professor in the Department of Health Promotion and Development, received an award for her proposal, "Healthcare Provider Interactions With and Recommendations for Young Women at Risk for Hereditary Breast and Ovarian Cancer" (7/31/06–6/30/08).

* NURSEBEAT

Mary Beth Happ, PhD, RN, associate professor in the Department of Acute and Tertiary Care, and **Lisa Bernardo, PhD, MPH, RN, HFI**, associate professor in the Department of Health and Community Systems, were selected as BSN committee chairs for the School of Nursing.

Dorothy Hawthorne-Burdine, PhD, RN, assistant professor in the Department of Health Promotion and Development, received awards for her proposals, "Menstrual Attitude and Self-Perception of Girls with Sickle Cell Disorders" (1/1/06–12/31/06) and "Genetic Variants and Delayed Menarche" (7/31/06–6/30/08).

Marilyn Hravnak, RN, PhD, CRNP-CS, CCRN, FCCM, assistant professor and coordinator of the acute care nurse practitioner program in the Department of Acute and Tertiary Care, will be named a fellow of the American Academy of Nursing at the awards ceremony and induction banquet on November 11.

Richard Henker, RN, PhD, associate professor and vice chair of the Department of Acute and Tertiary Care, was selected as the American Association of Nurse Anesthetists Foundation 2005 Research Scholar. Henker also was chosen for a 2006 Chancellor's Distinguished Teaching Award.

Leslie Hoffman, PhD, RN, FAAN, professor and chair of the Department of Acute and Tertiary Care, received an invitation to be a member of the editorial board of *Chest*, the journal of the American College of Chest Physicians.

Rosemary Hoffmann, PhD, RN, instructor in the Department of Acute and Tertiary Care, successfully defended her dissertation, "The Effects of Barriers on Health-Related Quality of Life and Compliance in Adult Asthmatic Patients Who Are Followed in an Urban Community Healthcare Facility."

Judith Kaufmann, DrPH, CRNP, assistant professor in the Department of Health Promotion and Development, received an award for her proposal, "The ABCD-iet Program: Intervening with Minority Youth" (7/1/06–6/30/09).

Rachel (Shelly) Libman, MSN, RN, instructor in the Department of Health Promotion and Development, was chosen as the first Cameos of Caring Nurse Educator Awardee to represent the University of Pittsburgh School of Nursing.

Kathy Magdic, MSN, RN, APRN, BC, coordinator of the acute care nurse practitioner program and instructor in the Department of Acute and Tertiary Care, received the Leadership in Nursing Award from Sigma Theta Tau.

Judith Matthews, PhD, MPH, RN, assistant professor in the Department of Health and Community Systems, coordinated the Technology for Life and Living conference, sponsored by the University of Pittsburgh and Carnegie Mellon University.



Richard Henker



Rosemary Hoffmann



Judith Kaufmann



Judith Matthews



Margaret Rosenzweig



Mi-Kyung Song



Mary Rodgers Schubert

Ann Mitchell, PhD, RN, CCRC, AHN-BC, assistant professor of nursing and psychiatry in the Department of Health and Community Systems, received an award for her proposal, "Caregiver Burden in St. Kitts: Implications for Health Service Delivery." Mitchell also received the Richard S. Caliguiri Community Action Award from the Pennsylvania State Nurses Association.

John O'Donnell, MSN, RN, instructor in the Department of Acute and Tertiary Care and director of the nurse anesthesia program, received an award from the Health Resources and Services Administration for his proposal, "Nurse Anesthetist Traineeships" (7/1/06–6/30/07). O'Donnell also was named program director of the year by the American Association of Nurse Anesthetists.

Kathryn Puskar, DrPH, FAAN, professor in the Department of Health and Community Systems, has been appointed to the Global Adherence Advisory Board of Eli Lilly Corporation.

Margaret Rosenzweig, PhD, assistant professor in the Department of Acute and Tertiary Care, received an award for her proposal, "The ACT Intervention to Reduce Breast Cancer Treatment Disparity" (5/1/06–4/30/09). Rosenzweig was invited to speak at the Pennsylvania State Nurses Association general membership meeting.

Paula Sherwood, PhD, RN, research assistant professor in the Department of Acute and Tertiary Care, received an award for her proposal, "Biobehavioral Interactions in Neuro-oncology Caregivers" (3/15/06–3/15/07).

Mi-Kyung Song, PhD, RN, assistant professor in the Department of Acute and Tertiary Care, received a grant from the National Institutes of Health for her proposal, "Improving End-of Life Communication with ESRD African American Patients" (7/1/06–6/30/08)

Carol Stilley, PhD, RN, assistant professor in the Department of Health and Community Systems, received an RO1 grant for her proposal, "Adherence and Health Outcomes after Liver Transplantation" (3/2/06–12/31/10).

Valerie Swigart, PhD, RN, CRNP, assistant professor in the Department of Health Promotion and Development, received the School of Nursing Excellence in Teaching and Technology Award for the development of an innovative Web-based ethics module. Swigart also received a University Advisory Council on Instructional Excellence award for her proposal "Teaching Ethics in the Era of Globalization."

Kyeongra Yang, PhD, RN, assistant professor in the Department of Health and Community Systems, received an award for her proposal, "Effects of Yoga Intervention for Adults at High Risk for Type 2 Diabetes: A Pilot Study" (7/31/06–6/30/08).

Transitions

Donna Caruthers, PhD, moved from a postdoctoral associate position in the Department of Health Promotion and Development to a regular faculty position in the Department of Health and Community Systems as a full-time assistant professor in the tenure stream.

Karen L. Courtney, PhD, RN, joined the Department of Health and Community Systems as a full-time assistant professor, not in the tenure stream.

Marilyn Davies, PhD, RN, joined the Department of Health and Community Systems as a full-time assistant professor, in the tenure stream.

Jennifer Keeley, MSN, RN, joined the Department of Acute and Tertiary Care as a full-time instructor, not in the tenure stream.

Beatrice Joan McDowell, PhD, joined the Department of Health Promotion and Development as a part-time associate professor, out of the tenure stream.

Mary Rodgers Schubert, MPM, RN, accepted a new role as full-time associate director of recruitment in the Office of Student Services. Prior to this appointment, Schubert served as director of development at the School since 2000.

THREE FACULTY MEMBERS GET TENURE

Susan M. Cohen, DSN, RN, associate professor in the Department of Health Promotion and Development, and **Lora E. Burke, PhD, MPH, RN**, associate professor in the Department of Health and Community Systems, received tenure status.

Catherine M. Bender, PhD, RN, was promoted to associate professor in the Department of Health and Community Systems and was conferred with tenure.

KEEPERS OF THE LIGHT TEA

Keepers of the Light alumni gathered for a traditional tea at the Pittsburgh Athletic Association on Friday, May 19. Keeper of the Light designation is given to the student(s) who hold(s) the highest quality point average in their graduating class. Representing the 1940s–2000s, these alumni received a warm welcome from Dean Jacqueline Dunbar-Jacob and learned about genetics research at the School from Yvette Conley, assistant professor in the Department of Health Promotion and Development.

Crystal Teichert (left), the 2006 Keeper of the Light, with Dorothy Hornick Glasson, Keeper of the Light for the School's second graduating class in 1944, the earliest class represented at the 2006 Keepers of the Light tea.



THE FIRST ANNUAL NANCY GLUNT HOFFMAN MEMORIAL GOLF OUTING

The University of Pittsburgh School of Nursing hosted the First Annual Nancy Glunt Hoffman Memorial Golf Outing at the Longue Vue Club in Verona, Pa., on July 21. Nearly 100 golfers supported this effort to benefit the Oncology Nursing Chair Fund. Participants enjoyed a pre-golf session presented by Scott Lephart, PhD, ATC, chair and associate professor, Department of Sports Medicine and Nutrition at the University of Pittsburgh School of Health and Rehabilitation Sciences. Presiding as mistress of ceremonies during dinner was former KDKA-TV anchor Jennifer Antkowiak. Proceeds from the outing helped raise \$24,000 for the oncology chair fund. Save the date for the 2007 outing—Friday, July 20, 2007!



Roger Glunt leaving the registration table

SCHOOL OF NURSING ALUMNAE FLAME-BEARERS KINDLE THE LIGHT OF LEARNING AT THE 86TH ANNUAL LANTERN CEREMONY

The Lantern Night ceremony, begun in 1920, is one of the longest standing traditions at the University of Pittsburgh. On August 27, 2006, five School of Nursing alumnae helped welcome approximately 400 freshman and first-year transfer women to the University as they begin their quest for knowledge and truth in today's world. During the 86th annual Lantern Night ceremony, flame-bearers Johnie R. Champ (MSN '82), Teresa A. Fry (MSN '05), Maria Hunt (BSN '80), Jo Ann Kaminski Moorhead (BSN '76), and Susan Yeager Swope (BSN '83) passed the light of learning to the next generation of Pitt women.

RETIRED FACULTY LUNCHEON

The Pittsburgh Golf Club was the setting for the University of Pittsburgh School of Nursing's annual retired faculty luncheon on Friday, May 12. Guests were treated to a research update presented by Janice Dorman, associate dean for scientific and international affairs.

PITT NURSING ACCESSORIES

PITT NURSING BRACELET'S POPULARITY CONTINUES!

Join the many alumni, students, and friends of the University of Pittsburgh School of Nursing who are proudly showing off Pitt nurse pride each time they wear this lovely bracelet, created exclusively for the Nursing Alumni Society. Made of sterling silver beads and Swarovski crystals, the bracelet features blue and khaki crystals. Each piece is handcrafted and strung on 49-strand stainless steel nylon-coated wire. Bracelets, available in 7-inch, 7½-inch, or 8-inch lengths, can be ordered in two styles: one features more crystal, while the other features more sterling silver beads. The bracelet comes with a nursing cap charm, and customers may choose between a lobster claw or toggle clasp. Bracelets sell for \$50 each.

When ordering, please make sure to specify length, style, and clasp. Use the order form provided or download an order form from the School of Nursing's Web site at www.nursing.pitt.edu; click on "Alumni & Friends." Any questions can be directed to the School of Nursing alumni office at 412-624-2404. Proceeds benefit student activities and scholarship.

QTY.	SIZE	STYLE	CLASP	PRICE	TOTAL
	Small — 7" Approx. wrist size 6"			\$50	
	Medium — 7½" Approx. wrist size 6½"			\$50	
	Large — 8" Approx. wrist size 7"			\$50	
SHIPPING/HANDLING					\$ 3
ORDER TOTAL					\$

Name: _____ Phone: _____

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Make checks payable to **"University of Pittsburgh,"** and write "Pitt Nursing Bracelet" on the memo line. Mail check and order form to: **University of Pittsburgh, School of Nursing, Alumni Office, 218 Victoria Building, Pittsburgh, PA 15261.**



PITT NURSING TOTE BAGS

A great way to carry just about anything, these navy blue canvas totes are durable, bear the School of Nursing seal, and are a real bargain at \$10!

I would like to order _____ tote bag(s) at \$10 each.

Total enclosed: \$ _____

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Thank you for your support of the Nursing Alumni Society and School of Nursing students!

Order forms also can be downloaded from the School of Nursing Web site at www.nursing.pitt.edu; then click on "Alumni & Friends."

MASTER'S PROGRAMS

FROM STUDENTS TO LEADERS

continued from page 25

cardiology, pulmonary, intensive care units, surgery, and internal medicine, and in emergency departments from rural to urban settings.

ADULT, FAMILY, AND PEDIATRIC

Donna Nativio, PhD, CRNP, FAAN, associate professor in the Department of Health Promotion and Development, is director of the School's adult, family, and pediatric nurse practitioner programs. Nativio leads a nationally recognized faculty of doctorally prepared, practicing nurse practitioners, including Sandra J. Engberg, PhD, RN, CRNP, assistant professor and chair of the Department of Health Promotion and Development; Denise Charron-Prochownik, PhD, CRNP, associate professor; Mary M. Cothran, PhD, CRNP, assistant professor; Donna Falsetti, DrPH, CRNP, assistant professor; Judith Kaufmann, DrPH, CRNP, assistant professor; and Louise C. Waszak, PhD, CRNP, APRN, BC, assistant professor.

The School's family nurse practitioner (FNP) program pioneered master-level nurse practitioner programs in this area and the nation. Ranked 10th in the nation by *U.S. News & World Report* in the 2004–06 and 2007–09 issues of "America's Best Graduate Schools," the School's FNP program has been a model for many programs, and our faculty have acted as consultants and shared curricula for succeeding programs at other schools of nursing.

There is no substitute for good clinical experiences. Through a network of community alliances developed with primary care facilities, nurse practitioner students have access to all specialty and subspecialty clinical and research experiences at a wide variety of private practices in urban, suburban, and rural communities as well as federally qualified health centers and rural clinics.

Evidence-based practice is the foundation of the adult, family, and pediatric nurse practitioner programs. The three programs are a model for sharing resources and efficient use of resources. Graduates consistently have a 100 percent pass rate on the national certification examinations for all three programs.

Most of our students find positions prior to graduation in a wide variety of sites and roles such as school and college health; specialty services including cardiology, endocrinology, neurology, sleep labs, and child psychiatry; private pediatric physician practices; family health; and internal medicine. Other graduates take faculty positions, work in community clinics, or work in administrative positions such as practice manager or lead nurse practitioner. Many of our graduates return to school to pursue doctoral study and research careers.

Nativio is leading the effort to develop a new neonatal nurse practitioner (NNP) program. A subspecialty of the pediatric nurse practitioner program, the NNP will meet a documented need for care of critically ill neonates at our two local level 3 nurseries at Magee-Womens Hospital of UPMC and Children's Hospital of Pittsburgh of UPMC. Students will be admitted into the new NNP program in the next year.

PSYCHIATRIC PRIMARY CARE

The psychiatric primary care nurse practitioner program is a unique program that combines both psychiatric and medical areas of study. Clinical experiences prepare graduates to provide comprehensive management of patients and the ability to synthesize and integrate concepts from primary healthcare and their psychiatric knowledge base. Graduates are prepared to diagnose and medically manage not only commonly occurring medical problems but also complex psychiatric problems.

Joanne Connelly, MSN, CRNP, instructor in the Department of Health and Community Systems, leads a distinguished faculty who have been recognized for their comprehensive and varied clinical expertise. Faculty members have served on advisory boards for colleges, made television and radio appearances, contributed articles to and been published in various publications, and have extensive teaching experience at both colleges and universities. They also have been honored with awards of excellence in their practice as psychiatric primary care nurse practitioners.

The national certification pass rates for the past two years are 100 percent. Graduates work in a variety of settings including inpatient and outpatient settings, community health centers, and private practice groups.

MINORS AND CERTIFICATE OPTIONS

Many students choose a major from one of the above programs, and supplement the knowledge and skills gained in that comprehensive program by adding a minor or certificate in a second skill set.

Minors are available in administration, education, informatics, and research. A variety of postbaccalaureate certificates are available, and those credits may be applied to a master's degree program in the future. Post-master's certificate programs also are available in clinical programs and in specialty role programs.

Graduate programs at the School of Nursing are preparing students to make contributions as nurse scientists who will develop advances in many areas of healthcare and health promotion, and as nurse leaders who will impact national and global healthcare issues. Additional information about the School's master's programs and faculty accomplishments is available at www.nursing.pitt.edu.

Can you identify the year and the faces?



IF SO, CONTACT JOAN NOCK AT 412-624-2404 OR JN0100@PITT.EDU. WE WILL PUBLISH YOUR ANSWER IN THE NEXT ISSUE OF *PITT NURSE*.

Want to share your memories with fellow alumni? Just send us your favorite photo of yesteryear, and we'll run it in an upcoming issue. Submit your pics to: University of Pittsburgh, School of Nursing, 218 Victoria Building, 3500 Victoria Street, Pittsburgh, PA 15261. All pictures will be returned.



REMEMBER WHEN PHOTO FROM WINTER 2006 ISSUE

A flurry of calls and e-mails from alumni— Ellen Proeller Dennis (BSN '74), Monica Kraynek (BSN '74), Barbara Lynch Miller (BSN '73), Mary Blichfeldt O'Brien (BSN '74), Amy Colella Pollard (BSN '74), Anna M. Rongaus (BSN '74, MN '80, MSN '95), Sharon Lucas Rydbom (BSN '74), Nancy Rishel Rymut (BSN '74), and Susan Griffith Zitello (BSN '74) — helped identify the Remember When photo from the winter 2006 issue. The photo was taken at the April 1974 pinning ceremony at Soldiers and Sailors Hall, Oakland, and features Nancy Maloney (left) and Kirsti Hetager.

Thanks for enjoying this feature, and thanks to all who contacted the School of Nursing!

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For information on University equal opportunity and affirmative action programs and complaint/grievance procedures, please contact the University of Pittsburgh, Office of Affirmative Action, William A. Savage, Assistant to the Chancellor and Director of Affirmative Action (and Title IX and 504, ADA Coordinator), 901 William Pitt Union, Pittsburgh, PA 15260; 412-648-7860. UMC23678-0906 14M

What's Happening?

Please send us information about your career advancements, papers presented, honors received, appointments, and further education. We'll include your news in the Alumni News + Notes section as space allows. Indicate names, dates, and locations. Photos are welcome! Please print clearly.

NAME:

DEGREE AND YEAR OF GRADUATION:

HOME ADDRESS: IS THIS A NEW HOME ADDRESS? YES NO

HOME TELEPHONE:

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School of Nursing

Pitt Nurse

Joan F. Nock

Associate Director of Alumni Relations

218 Victoria Building

3500 Victoria Street

Pittsburgh, PA 15261

E-mail: jno100@pitt.edu

ALUMNI DAY 2007

SAVE THE DATE...

ALUMNI DAY 2007
SATURDAY, MAY 19, 2007

All University of Pittsburgh School of Nursing alumni are invited to attend. Alumni from classes ending in 2 and 7 will mark milestone reunions.

Reconnect and reminisce—it won't be the same without you!

Look for more Alumni Day 2007 details online: www.nursing.pitt.edu or contact Joan Nock in the alumni office at 412-624-2404.

DISTINGUISHED AND HONORARY ALUMNI

Call for 2007 Nominations

The University of Pittsburgh School of Nursing Alumni Society is accepting nominations for its 2007 Distinguished Alumni and Honorary Alumni Awards. Our alumni represent the University of Pittsburgh locally, nationally, and internationally through their work as nursing professionals. The School of Nursing takes pride in the prestigious accomplishments of its alumni but needs assistance in identifying qualified individuals.

Nominations Are Due by January 31, 2007

For more information, please contact the nursing alumni office at 412-624-2404.



University of Pittsburgh

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