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Showcasing Clinical Excellence and Community Outreach



Yale Nursing Matters

Yale Nursing Matters is a publication of Yale University School of Nursing and Yale Unive School of Nursing Alumnae/i Association.

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Cover: Assistant Professor Laura Andrews leads the Medical Rapid Response Team at the Hospital of Central Connecticut in New Britain. Article on page 16.

Opposite: Christina Fleming '10 is the first YSN student to co-direct the HAVEN Free Clinic. Article on page 7.

This issue of *Yale Nursing Matters* covers the events that took place from spring 2008 through summer of 2008.



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mat-ter *n*. Something that occupies space and can be perceived by one or more senses; a physical body, a physical substance, or the universe as a whole. A subject of concern, feeling, or action. Something printed or otherwise set down in writing. v. To be of importance or value. Signify.



Making "Better Health Care for All People" a Reality

The impact of Yale nurses can be found across the country, and indeed the world, but nowhere is YSN's mission of "better health care for all people" felt more profoundly than in Yale's own backyard, the city of New Haven. This issue of *Yale Nursing Matters* highlights YSN's extensive involvement in its local community, particularly through the clinical practice of our faculty and students. YSN is unique among top-tier schools of nursing because of our long-term recognition of the importance of faculty practice. Faculty practice provides the basis for students' high-quality education, as well as networks supporting their research and policy endeavors.

We are also proud to report on the continuing success of the HAVEN Free Clinic, a partnership begun in 2005 between Yale University's health professional students and the Fair Haven Community Health Center. For New Haven's large underinsured population, this student-run facility provides critical access to primary care. For students, the clinic provides invaluable real-world experience, not only in the practice of nursing, but also in the everyday challenges of bringing health care to underserved communities.

The New Haven region provides rich opportunities for community involvement. YSN makes an impact through the volunteer efforts of our students, faculty, staff, and alumnae/i. Most exemplary is this year's Community Service Award recipient, student Everol Ennis '09, for his dedication to New Haven's homeless and elderly residents.

Of course, the contributions of YSN's family go far beyond our local area. We describe the extensive relief efforts of alumna Anne Hutchinson '84 in the Gulf Coast region following Hurricane Katrina on page 32, and the ongoing mission work of YSN's Director of Public Affairs, John Powers, in the Dominican Republic on page 11.

Finally, I am grateful to Congresswoman Rosa L. DeLauro for writing the "Truth of the Matter" column. Born and raised in New Haven's Wooster Square area, Ms. DeLauro is now serving her ninth term in Congress and sits on the influential House Appropriations and Budget Committees. As a longtime friend to YSN and to the profession of nursing, she is well known for her efforts to ensure that our communities benefit from accessible health care.

I hope you will join us in our effort to truly make "better health care for all people" a reality. Get involved, stop by and visit when you are in New Haven, and contact me with your ideas.

Margaret Grey

Margaret Grey, DrPH, RN, FANN Dean and Annie Goodrich Professor



Dean Grey Presented with Outstanding Scientist Award by National Nursing Academy

Margaret Grey '76, YSN Dean and Annie Goodrich Professor, was presented with the "Outstanding Nurse Scientist Award" by The Council for Advancement of Nursing Science, the research arm of the American Academy of Nursing. Dean Grey accepted the award on October 2 at the National Congress on the State of the Science in Nursing Research in Washington, D.C. The award is presented every two years to a nurse scientist whose sustained program of research has made a significant impact on knowledge development with recognizable benefit for nursing practice and health care. A portion of Dean Grey's nomination letter documented her "sustained program of research on enhancing adolescents' ability to cope with diabetes. Her research has changed the standards of care in international diabetes programs and improved biobehavioral outcomes for countless young people. A pioneer in building the science of self and family management of chronic illness, Dean Grey has developed the infrastructure to support this work regionally and nationally. She has mentored many young scholars and serves as a role model for intervention research, as well as dissemination and translation. As a result of her tireless mentorship and advocacy, nurses and interdisciplinary scientists will extend this significant body of scholarship and evidence-based practice."

Martha K. Swartz Appointed Editor-in-Chief for the Journal of Pediatric Heath Care

Martha K. Swartz, PhD, APRN, CPNP, Professor and Associate Dean for Clinical and Community Affairs, was recently appointed Editor-in-Chief for the *Journal of Pediatric Heath Care (JPHC)*. Published by Elsevier, the *JPHC* is the official journal of the National Association of Pediatric Nurse Practitioners (NAPNAP). Swartz also recently represented NAPNAP as co-chair for the writing group of *Pediatric Nursing: Scope and Standards of Practice*, published by the American Nurses Association. Read a column from Dr. Swartz on page 6.





Nancy Reynolds Appointed Director of Doctoral Program

Nancy Reynolds, PhD, RN, C-NP, FAAN, has been named Director of Graduate Studies for the PhD Program in Nursing. Reynolds will oversee recruitment of doctoral students, recommend students for admission, mentor and monitor student progress, place doctoral students in research and teaching fellowships, and evaluate the curriculum. She is an experienced educator and expert NIHfunded researcher in the area of HIV medication adherence and clinical trials. "I am honored to be a member of Yale's thriving intellectual community," said Dr. Reynolds. "I look forward to providing leadership to the PhD program in the tradition of YSN's long history of superb graduate education." Yale awarded its first doctor of philosophy degrees in nursing to three graduates this May (see Commencement, page 34).

YSN Faculty Receive Nightingale Awards for Nursing Excellence

Three YSN faculty members received the prestigious 2008 Nightingale Award for Nursing Excellence at a special recognition dinner and awards gala held on May 8 at the Chevrolet Theatre in Wallingford, CT. This year's gala emphasized the need for increasing the ranks of nursing educators. Congratulations to this year's Nightingale Awards recipients: Associate Professor Heather Reynolds '80, MSN, CNM, FACNM; Associate Professor Patricia Ryan-Krause '81, MS, RN, MSN, PNP; and Assistant Professor Linda Pellico '89, APRN, PhD.



Linda Pellico, Patricia Ryan-Krause, and Heather Reynolds.



Patricia Ryan-Krause provided care to children in Managua as part of the ongoing YSN Nicaragua project.

Dean Grey Testifies Before Senate Committee

Patricia Ryan-Krause Named Interim Director of YSN International Center

Patricia Ryan-Krause, Associate Professor of Nursing in the Pediatric Nurse Practitioner Specialty, has been named Interim Director of the YSN Center for International Nursing Scholarship and Education. The Center, formed in 2006, is the hub of YSN's international health activities, providing a range of clinical and research opportunities around the world. Ryan-Krause said upon her appointment, "I look forward to collaboration with faculty and students in furthering the mission of YSN abroad." A long-standing faculty member, Ryan-Krause is a distinguished teacher, practitioner, and clinical scholar. She has been in clinical practice with Children's Medical Group for 18 years, where she is a preceptor for many nursing students. Most recently, Ryan-Krause received both the Nightingale Award and the YSN Annie Goodrich Award for Excellence in Teaching.

Dean Margaret Grey testified on July 16, 2008, before a U.S. Senate subcommittee hearing on childhood obesity, chaired by Connecticut Senator Chris Dodd. "The obesity epidemic has led to an entire generation of youth developing type 2 diabetes in childhood, not in adulthood or old age, as we are more used to seeing," testified Dean Grey. "In addition to the severe physical complications of overweight and obesity, there are complications related to quality of life, depression, and academic achievement. These complications have the potential to reduce the productivity of the next generation in the workforce." Read Dean Grey's full testimony at: http://nursing.yale.edu/News/Features/20/



Senator Chris Dodd and Dean Margaret Grey.



Howard University students with peer mentors and YSN Associate Dean for Academic Affairs Barbara Guthrie.

Yale-Howard Partnership Broadens Reach

Thanks to a grant from the Josiah Macy, Jr. Foundation, the Yale-Howard Partnership expanded to reach students from a wider range of ages and academic disciplines. Since 2000, the summer program has brought students from Howard University, a historically Black private university in Washington, D.C., to Yale for research internships. "This program's goal is to increase the number of ethnic minority scientists and health professionals prepared to address inequities in health care and research," said program director Barbara Guthrie, PhD, RN, FAAN, YSN Associate Professor and Associate Dean for Academic Affairs. Previously available to juniors and seniors, the program added a level for rising sophomores. This expansion broadened the program's academic focus to include other health sciences. Program coordinator Everol Ennis '09 recounts, "To see the growth and progress that takes place over six weeks—they come in asking what is involved in a research project, to the culmination of presenting complex topics in a cogent way...very impressive." Online at http://nursing.yale.edu/Centers/YHP

YSN Faculty Practice: Showcasing Clinical Excellence

BY MARTHA K. SWARTZ PhD, APRN, CPNP, Professor and Associate Dean for Clinical and Community Affairs

The nursing practice in which our faculty engage clearly provides the umbrella for the educational, scholarly, and policy activities that are key components of academic nursing



Martha K. Swartz observes as YSN student Jennifer Pelletier '10 examines a patient.

The concept of faculty or academic nursing practice has long been embraced by Yale University School of Nursing (YSN) as a mechanism for integrating practice, which is so key to nursing as an applied profession, with the educational, research, and policy activities within the school. Historically, YSN faculty have believed that nursing research should be concentrated in clinical practice, and indeed, it is the expectation at YSN that all faculty engage in practice.

The definition of faculty practice is fairly broad, and it may include direct modalities of patient care (such as providing interventions or services for individuals, families, groups, communities, and systems) as well as the more indirect modalities of continuing education, mentoring, and consultation. Overall, any faculty practice should be in service to the school in that it should strengthen clinical scholarship and improve the education of future advanced practice nurses.

Of the various models of faculty practice, the two that are most utilized at YSN are the collaboration or joint appointment model and the private practice model. Within the joint appointment model, approximately 18 YSN faculty hold academic positions as well as clinical appointments at collaborating agencies. These effective contractual arrangements provide faculty access to patient populations for clinical experiences as well as for student education and clinical research. As part of a private practice model, a number of faculty bill directly for their clinical services, especially in labor and delivery settings as well as a number of specialty care sites.

The breadth and depth of clinical activities among YSN faculty are remarkable. Clinical practice settings vary from numerous primary care sites to acute, specialty, and chronic illness care units in which a full range of nursing care approaches are utilized. In the following pages, we are pleased to showcase, in addition to the student-run HAVEN Free Clinic, several of our faculty who have well-established clinical practices in several areas: children's environmental health, nurse-midwifery care, and adult acute care.

The nursing practice in which our faculty engage clearly provides the umbrella for the educational, scholarly, and policy activities that are key components of academic nursing. Moreover, it is in large part because of our faculty practice that YSN is able to meet its mission-stated goal: better health care for all people.



An Entryway into the Health Care System

Student-run HAVEN Clinic helping thousands of New Haven residents in need

BY SIOUX SALOKA

Our quest for community runs deep. But what defines community? Psychiatrist M. Scott Peck calls true community "the process of deep respect and true listening for the needs of the other people ... [which] reflects a deep yearning in every human soul for compassionate understanding from one's fellows." *Continued on page 8*

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Christina Fleming '10 is the first vsN student to co-direct the HAVEN Free Clinic





YSN students currently serving on the Board of Directors of the HAVEN Clinic include Christina Fleming, co-director; Emily Lawson, education; Kirsten Grace, laboratory; Sofia Bur, diversity and advocacy; and Ayelet Amittay, patient services.

America's top nursing and medical schools can be very proud of producing some of the finest clinicians in the world. But even the best health care training will betray itself if it is not firmly rooted in those precepts of compassion and a sense of duty to others.

It is a point of institutional pride that so many students joining Yale's health care community arrive already well equipped with these sterling qualities. Still, as they say, it ain't what you've *got*, it's what you *do* with what you've got that really matters. There will always be people who glance at a problem from afar and mutter, "Something should be done." But then there are those remarkable people who see a problem and run toward it declaring, "I must do something."

And this is where our story begins . . .

Once upon a time in the spring of 2004, a coalition of students from Yale University's Schools of Medicine, Nursing, and Public Health, and the Physician Associate Program, found themselves reflecting on the ethical idea that the pursuit of higher education brings with it a responsibility to apply it to some higher purpose. Forging an unusual bond across their various disciplines, they went in search of a meaningful way to coalesce their respective skills and knowledge so that Yale's medical community could reach out to the neighborhood beyond its labs and lecture halls. The idea was to discover some of the unmet health care needs in New Haven's population. They didn't have to look very far. The students soon uncovered a very real health care crisis; their community was teeming with unseen illness, disease, need, and despair. An alarming number of invisible New Haven residents—an estimated 10,000 to 15,000 low-income, undocumented, mostly Latino, immigrant workers—were living without access to crucial medical care.

It quickly became obvious to the student clinicians that, given the lack of free health care in the area, what this segment of the community urgently needed was a viable yet discrete way to address their basic needs. After drafting a thoughtful, detailed, and professional business plan, the HAVEN Free Clinic was born.

HAVEN's acronymous name prioritizes the clinic's goals and concerns: Healthcare, Advocacy, Volunteerism, Education, and Neighborhood. HAVEN's mantra, "Health care is a right, not a privilege," honors the humanistic battle cry of Dr. David E. Smith, who, in 1967, founded the country's first free medical clinic, San Francisco's Haight Asbury Free Clinic.

In 2005, HAVEN partnered with the Fair Haven Community Health Center (FHCHC), a registered community health center that first opened its doors in 1971. HAVEN shares FHCHC's building and operates under FHCHC's license.

Christina Fleming '10, the first YSN student to become one of HAVEN's co-directors, describes the clinic's original twofold mission with unbridled enthusiasm: first, to become a sustainable, student-run facility providing underserved, uninsured Fair Haven residents with access to excellent quality, free, comprehensive primary medical care, counseling, referrals, and education. "We're really an entryway into the health care system for people who wouldn't otherwise

> "Service changes people. It refines, purifies, gives a finer perspective and brings out the best in each one of us."

> > -DEREK A. CUTHBERT

"As clinicians, we must seek out our patients rather than expect them to seek us. We should be eager to meet people where they are, within their communities." —ERIN LOSKUTOFF '09

have access to it." Fleming explains, "This community of undocumented immigrants naturally has a huge amount of fear about accessing public resources."

To this end, in addition to providing primary medical care, HAVEN offers a wide range of social services in the form of help with eligibility screening for Title 19 and other federal, state, and medical debt relief. HAVEN provides referrals for domestic violence and financial counseling; connections to other community-based services providing food, housing, and safety; and in-clinic social support groups, like HAVEN's newest initiative—the Women's Health Education Group. Spanish translators are always present to ensure clear twoway communication with the clients.

One of the things HAVEN is proudest of is the fact that they have recently been able to organize two surgeries at no cost to either patient, both of which involved the difficult coordination of 15 different departments, not to mention convincing the hospital to waive or forgive the facilities costs and surgical team fees.

HAVEN's second, and equally important, mission is to offer the clinic's student staff a unique arena for professional development and close interaction with students from Yale's other schools—as well as the chance to experience the real-world challenges of managing patient care with curtailed resources.

Erin Loskutoff '09, a third-year YSN student and former co-coordinator of HAVEN Free Clinic's Social Services department, admits the work at HAVEN can be tough at times. "No one can escape the periodic distress that working with underserved, circumstance-manipulated people in desperate situations can cause. I sometimes feel overwhelming frustration and bewilderment about 'why things are the way they are' for so many people. Yet the deeply grateful clients and my amazing colleagues inspire and encourage me to continue in the struggle—all of us together."

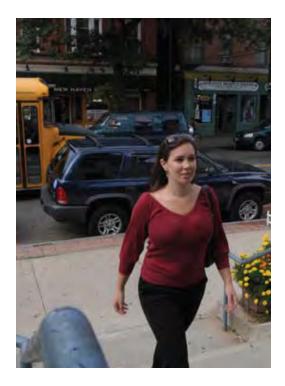
In that same spirit, Fleming says that, despite being immersed in the hard work of running HAVEN, it's important for the staff, as clinicians and administrators, to never become disconnected from the people they serve, and to stay mindful of the individual behind the patient chart. Loskutoff adds, "The struggles our clients have endured before coming to the USA, while en route to the USA, and after arriving in the USA, are absolutely heart-wrenching."

At first glance, it seems only natural that the HAVEN Free Clinic logo bears the image of a broad, flourishing elm tree. After all, New Haven is "The Elm City." But there's more to it than that.

Springing from a rich soil of dedicated, compassionate student administrators, clinicians, volunteers, specialists, and the many other civic-minded contributors, Yale's HAVEN Free Clinic itself stands as a judicious reminder of what every community, medical or otherwise, should endeavor to become—a strong, flexible, deeply rooted, living organism, with outstretched limbs sheltering those in need of a respite, and encouraging every leaf attached to it to grow and thrive.

As the HAVEN Free Clinic has shown, when trained clinicians harness their power, they can transform human lives. After all, what is the point of our knowledge if it is not used to make life less difficult for others?

For more information on how you can support the efforts of the HAVEN Free Clinic, visit http://freeclinic.med.yale.edu.



Providing a Model of Care while Helping the Most Vulnerable

"Women's lives are incredibly complex, and we deal with issues way beyond their physical needs." —TERI STONE-GODENA



Teri Stone-Godena (center) makes prenatal care a family affair.

Teri Stone-Godena's eyes lit up and she sat forward in her seat as she started to talk about being a nurse-midwife. "I never wanted to do anything else with my life!" she

exclaimed with a missionary's zeal.

In her practice at Yale-New Haven Hospital (YNHH) Women's Center and her work as the Interim Director of Yale University School of Nursing's Midwifery Specialty, Teri Stone-Godena, MSN, CNM, shares her love for this field every day. In this vibrant center for women, YSN midwifery students learn from Stone-Godena and her faculty colleagues while providing vital care for patients from vulnerable populations.

"There is never a boring day at the Women's Center," Stone-Godena added. "Women's lives are incredibly complex, and we deal with issues way beyond their physical needs."

Joining Stone-Godena and her fellow YSN faculty at the Women's Center are the 35 midwifery students currently enrolled in the two-year midwifery program at YSN. For the vast majority of these students, working at the Women's Center is their first exposure to this specialty.

"Our faculty work alongside the YSN students at the clinic and provide a great model for how to care for women. This is the highest caliber of evidence-based midwifery practice," Stone-Godena added.

YSN midwifery students find the clinic to be a very special training ground. Christina Martinez '09 has been mentored at the clinic by Nurse-Midwifery Associate Professor Heather Reynolds. Martinez explains how important it is to see real-life examples of a nurse-midwife relating with a patient, something she witnessed Reynolds accomplish on many occasions.

"Heather has a way of connecting with patients when they have a lot of stuff going on in their life. She develops trust and understanding and can reach out to help them," Martinez explained. "I have learned that it is important to be with a female patient in a way that brings out the deeper issues that affect not only her pregnancy but also her health and overall well-being."

A definition of a nurse-midwife is one who delivers infants, provides prenatal and postpartum care, newborn care, and some routine care for women. But according to Stone-Godena, the practice of midwifery goes well beyond that basic definition.

"Every woman has within herself the ability to make healthy choices for herself and her baby," she explained. "It is our job as midwives to help moms be aware of these choices and how to implement them."

The patients in the Women's Center represent a wide variety of vulnerable populations. Between 40 and 50 percent are Spanish speakers, many of whom are undocumented immigrants. In the past several years, there has been a large influx of patients from Africa, Turkey, India, and the Middle East, as well as African Americans and whites. Patients often come in at puberty—as young as 13 years old. "With the patients we see at the clinic, much of the risk with their pregnancies is in their social situations," she said.



YSN student Christina Martinez reviews a patient's chart with Associate Professor Heather Reynolds at the Women's Center at Yale-New Haven Hospital.

Stone-Godena goes on to describe a typical social difficulty affecting one of her patients.

"I have a 30-year-old patient who is an illegal immigrant and came to see us because she was suffering from breast pain," Stone-Godena commented. "This woman is in a horrible living situation, is afraid of her husband, and feels that she has no recourse due to her illegal status. We have worked extensively with this woman and put her in touch with a social worker to help her with counseling, resources, and a safety plan.

"This is a perfect example of the type of problems our patients face that require much more than routine health care," Stone-Godena added.

In addition, nurses in the Women's Center team spend a tremendous amount of time advocating for many young pregnant women who are being treated at the clinic.

"We have many pregnant moms who are 15 or 16 years old and are living in very difficult family situations," she said. "Our job is not only to care for them physically, but to show care and concern and make a social connection."

It is this care and concern for patients given over her 32 years as a nurse-midwife that inspires Stone-Godena as a clinician and instructor of YSN students.

"I simply love the idea of working with women to make healthy decisions, to be present before, during, and after she gives birth," she concluded. "My entire life I have wanted nothing other than to be around women as they go through this amazing process."

A Shared Commitment to Building Healthy Communities



John Powers, YSN's Director of Public Affairs, goes over details with Moises Sifren, Administrator of the Good Samaritan Hospital, while building a school in a sugarcane village near La Romana, Dominican Republic.

John Powers, Director of Public Affairs for the Yale University School of Nursing, has dedicated himself to "better health care for all people" for most of his adult life. In fact, YSN's ambitious motto attracted him to come work for the school that shared this commitment.

"I was so inspired when I read the mission of the school that I knew this was the place for me," Powers commented. This summer marked his 29th trip to the Dominican Republic as a volunteer mission worker.

Since 1990, Powers has traveled regularly to the city of La Romana, leading hundreds of people to build a hospital, schools, and homes for the very poor. During this summer's trip to the island nation, Powers led a group of 68 people who ranged in age from 14 to 85, including two of his children.

Under Powers's leadership, the volunteers have coordinated nurses and doctors in running desperately needed medical clinics in the bateyes, sugarcane villages filled with Haitian workers and families. The teams have also constructed life-saving biosand water filters for thousands of people without access to clean water.

In addition to his annual mission work, Powers serves as the Communications Chair for the Board of Directors of the Good Samaritan Hospital in La Romana. "Eighteen years ago when I first went to the DR, this hospital was just a couple of holes in the ground, and now it treats over 60,000 people each year," he added.

"After many years of working on this building, constructed entirely by volunteers, it is amazing to see this vibrant hospital helping so many. Volunteering in La Romana has been one of the great joys of my life."

Yale Program Reaches Out to Help Families Combat **I.ead Poisonin**



BY DANIEL CHAMPAGNE

Many people never thought about the possibility of lead poisoning affecting their children. Professor Mikki Meadows-Oliver said that attitude is changing.

Left: A concerned parent brings her son to the Yale Lead Program; Opposite left: YSN Professor Mikki Meadows-Oliver examines the child for signs of lead poisoning; Opposite middle: Darin Bershefsky, RN, enters patient notes; Opposite right: Meadows-Oliver consults with YSN student Kate Manuel '09, RN.

" 🇖

eople thought they really weren't at risk," Meadows-Oliver said. "Now, they're realizing that they are." In young children, even small amounts of lead can damage the brain and the nervous system.

Mikki Meadows-Oliver '98, MPH, PhD, RN, an assistant professor at Yale University School of Nursing, is also a nurse practitioner at the Yale Lead Program at Yale-New Haven Hospital.

The program tests children referred by pediatric health care providers for high lead counts. If the count is high, the staff will talk to the parents about where the lead is coming from and what they can do about it. They will also contact the family's landlord, if applicable, to try to rectify the problem.

Pediatric health care providers typically do a finger-stick test on children when they are one or two years old, but since they are not experts in the field of lead poisoning, they often refer the children to the Yale program if the lead count comes back high.

Blood is then drawn at the clinic to confirm the count, and if high, the local health department in that child's city will be contacted for an inspection of the home. Lower levels of lead poisoning can be offset by good diet and hand hygiene, while higher levels sometimes require medication and hospitalization. The Lead Program also sends outreach workers to the home to educate the parents and talk about funds for abating the home or getting rid of the lead. YSN students help in the program by taking the children's diet histories and educating the families about lead.

Beginning in January, a new law will require pediatric health care providers to test all children ages one and two for lead. Currently, tests are conducted based only on answers to preliminary questions, though some practitioners were doing tests on all one- and two-year-olds prior to the law taking effect.

"It's important that kids are tested because there usually aren't any symptoms," Meadows-Oliver explained. She went on to say that at high levels of contamination, children may experience abdominal pain, constipation, and diarrhea, but "these symptoms go along with a variety of illnesses, and lead poisoning is not usually high on the list of things to look for with stomach complaints."

Meadows-Oliver explained that many of the lower-income families she sees already know someone who has had lead poisoning. Carl Baum, MD, associate professor of pediatric emergency medicine at Yale-New Haven Children's Hospital

"Although lead has no place in toys, most children with lead poisoning are exposed via lead paint and lead dust in their homes."

—CARL BAUM







and the director of the Yale Lead Program since 2005, said children, especially from low-income families, "benefit tremendously from the services of the Yale Lead Program."

"These services include case management and treatment for acute and chronic lead poisoning, but also outreach and social work services that provide families and landlords assistance with housing and renovations, which are critical steps that prevent exposure to lead," he said. "Lead poisoning is certainly not limited to children from low-income families."

"Usually, middle-class families don't know about it because they may be in a renovated home, but there may be lead dust in the air," Meadows-Oliver added. "We see a lot of kids from New Haven or Bridgeport because they're in older housing and the landlord just hasn't kept them up." Many paints were lead-based prior to 1978.

Meadows-Oliver said the program sees an average of 140 children per year from around southern Connecticut, mostly under six years old because younger children tend to put their hands in their mouth more. She also said the body starts to absorb less lead as it matures.

The program does see some older children with developmental delays because they have similar behaviors as younger children. It also receives some referrals of internationally adopted children, especially from China and the former Soviet Union, because they may have lived in orphanages near battery plants or played in leaded soil.

In China, many mothers are exposed to lead. Since lead crosses the placenta, some children are born with lead poisoning, and it gets worse due to environmental factors.

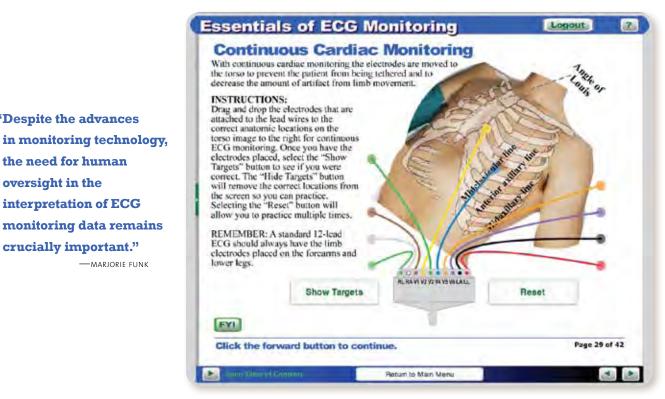
The program sees more patients during the summer months because children play outside, where the soil may be contaminated with lead from paint chips or old leaded gasoline emissions.

Both Meadows-Oliver and Baum agreed that people have become more aware of lead poisoning lately, mainly due to a rash of toys made in China being recalled for containing lead.

"There is more awareness about lead poisoning, but much of the media attention has focused on lead in toys," Baum said. "Although lead has no place in toys, most children with lead poisoning are exposed via lead paint and lead dust in their homes. Homeowners and tenants may not always be aware of the dangers of lead, which is not visible to the eye, but is almost certainly present in any pre-1978 housing."

"For years, there's been lead coming in from products made in China," Meadows-Oliver said. "Now, people are just becoming more aware of it."

ECG Monitoring: Nurses Have Their Finger on the PULSE



The PULSE online education program features animations, such as this interactive screen that asks the nurse to drag and drop ECG electrodes onto their correct anatomic locations.

Imagine: You are preparing for work in the morning when you feel some discomfort in your chest. You call 911, an ambulance brings you to the emergency department, and you are admitted to the cardiac intensive care unit (ICU) for a possible heart attack. So far, initial tests for heart damage show nothing abnormal, but as you wait for more information, you think about your risk factors. You have mild diabetes, you take medication for elevated blood pressure and cholesterol, and your family physician has warned that you are a bit overweight and don't exercise as much as you should. Just when you're really starting to worry, you find out that you are in good hands.

It turns out your ICU nurse is up to date on the latest Practice Standards for Electrocardiographic (ECG or EKG) Monitoring. Knowing what the equipment can do, she sets up the optional software to detect cardiac ischemia, or lack of blood and oxygen supply to the heart muscle. In fact, the ECG monitor will detect signs of trouble even before you do, which is good news, since approximately 80% of patients do not experience chest pain or other symptoms during a cardiac episode. While you are napping, the monitor alarm sounds. Your nurse checks the monitor and sees evidence of ischemia in the ST segment of your electrocardiogram. She

arranges to rush you to the cardiac catheterization lab for an emergency procedure to open your blocked coronary artery.

You have just averted a massive heart attack, thanks in part to a nurse who had the skills and knowledge to make full use of ECG monitoring software. You were fortunate that your ICU nurse had this expertise-it may have saved your life! Although ischemia monitoring technology has been available since the 1980s, many nurses do not use it because they find the software too difficult and the potential false alarms too bothersome. A new line of research is working to change that trend.

Yale University School of Nursing Professor Marjorie Funk PhD, '84 MSN, RN, FAHA, FAAN, was recently awarded a \$3.9 million research grant-the largest ever awarded to a YSN researcher-to test the effect of implementing practice standards for ECG monitoring.

This funding from the National Heart, Lung, and Blood Institute of the National Institutes of Health will enable Funk and her co-investigator, Professor Barbara Drew of the University of California-San Francisco School of Nursing, to evaluate whether educating nurses on the latest advances in ECG monitoring will improve the quality of care and outcomes for patients.

"Despite the advances

the need for human

interpretation of ECG

crucially important."

monitoring data remains

—MARJORIE FUNK

oversight in the



Research Associate Jeanine May Ramonas and Principal Investigator Marjorie Funk examine a patient's ECG tracings.

Over the next five years, the PULSE (Practical Use of the Latest Standards in Electrocardiography) trial will include 15 hospitals across the United States, one in Canada, and one in China, with advanced practice nurses at each hospital serving as site investigators. PULSE will provide an interactive online ECG monitoring education program for nurses developed by Professors Funk and Drew, along with Kimberly Scheibly and Jim Duber from California, based on the practice standards. Site investigators will appoint "champions" on each unit to answer questions and to support what the nurses have learned online. "For instance, champions will look at where the electrodes are placed on a patient's chest and reinforce the way it should be done," said Funk.

ECG technology has changed dramatically since it was first introduced on hospital units 45 years ago. Its uses have expanded from tracking heart rate and the basic heart rhythm, to the diagnosis of complex arrhythmias and the detection of cardiac ischemia. Today, the technology allows access to a wealth of diagnostic information obtained in a noninvasive and inexpensive way, and it is used routinely in hospitals to guide clinical decision making.

"Despite the advances in monitoring technology, the need for human oversight in the interpretation of ECG monitoring data remains crucially important," Funk said. "Modern ECG monitoring equipment is complex and has the capacity to do so much that often nurses do not take full advantage of all the features."



Jeanine May Ramonas collects ECG monitoring data in the Cardiac ICU at Yale-New Haven Hospital with the help of staff nurse Betsy Hine.

In hospitals, it is nurses who are responsible for ECG monitoring. They place the ECG electrodes in precise positions on the patient's chest, determine the goals of monitoring based on the patient's diagnosis and risk factors, and select the leads to be displayed on the monitor. They select alarm parameters, choose whether to employ the ischemia monitoring option, watch the monitor, and evaluate alarms. Nurses also administer anti-arrhythmic drugs and evaluate the effectiveness of treatment. "Errors and omissions can occur at any step in this process," Funk said. "Nurses need sufficient expertise to carry out all these responsibilities."

Currently, the investigators are collecting baseline data on nurses' knowledge, quality of care, and patient outcomes. In May 2009 the study will randomly assign hospitals to either an experimental or a control group. Nurses at hospitals in the experimental group will receive the online education, which the champions will reinforce. The investigators will then look for improvements in the experimental group. Nurses in the control group will get the intervention at a later point in the study.

Funk said that most nurses are very knowledgeable and skilled in ECG monitoring, but it's tough for even the most dedicated to keep up with the explosion of information and research, adding, "We expect that improved ECG monitoring will result in more accurate diagnosis and more timely treatment, which may lead to better outcomes for patients."



The PULSE Research Team: Back row (left to right): Chelsea Hoffman, Jeanine May Ramonas, Kris Fennie, Kim Stephens, Elisabeth Hurley, Front row: Marjorie Funk and Barbara Drew.



Aultman Hospital, Canton, Ohio Baylor University Medical Center, Dallas, Texas Baystate Medical Center, Springfield, Massachusetts

Eastern Maine Medical Center, Bangor, Maine Erie County Medical Center, Buffalo, New York Hospital of the University of Pennsylvania, Philadelphia Hong Kong Sanatorium and Hospital Long Beach Memorial Medical Center, Long Beach,

California Maine Medical Center, Portland, Maine Renown Health, Reno, Nevada Seton Medical Center, Austin, Texas

Thomas Jefferson Hospital, Philadelphia United Hospital, St. Paul, Minnesota University of California Medical Center, San Francisco University of North Carolina Hospitals, Chapel Hill University of Ottawa Heart Institute, Canada Yale-New Haven Hospital

PARTICIPATING YSN ALUMNAE/I AND STUDENTS:

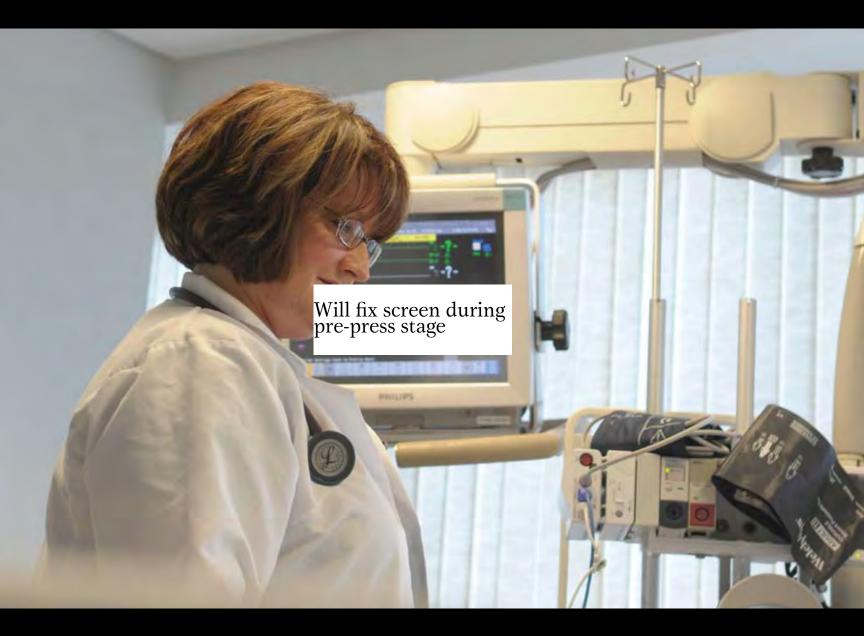
Marjorie Funk, MSN '84–Principal Investigator Jeanine May Ramonas, MSN 2005– Research Associate

Janet Parkosewich, MSN '85, DNSc 2008– Site Investigator, Yale-New Haven Hospital Rebecca Henry, MSN '94–Site Investigator,

Eastern Maine Medical Center Stephanie Sherman Calcasola, MSN '95–Site Investigator, Baystate Medical Center Chelsea Hoffmann, current MSN student Elisabeth Hurley, current MSN student Meghan Fashjian, current MSN student Julie Gaither, current PhD student

Medical Rapid Response Team Decreases Cardiac Arrests

BY RYAN DROZD



"Our goal was to reduce the number of cardiac arrests in the hospital by 50 percent. According to the statistics we have now, cardiac arrests in the hospital have decreased by 62 percent." —LAURA KIEROL ANDREWS

Cardiac arrest can occur quickly and may be difficult to detect, even in a hospital setting. It takes specially trained medical staff to recognize changes in patients that cannot be seen on a chart. Laura Kierol Andrews, PhD, APRN, ACNP, Assistant Professor of Adult Advanced Practice Nursing at Yale University School of Nursing and a Senior Acute Care Nurse Practitioner at the Hospital of Central Connecticut in New Britain, was asked to start a Medical Rapid Response Team (MRRT) that seeks to reduce the number of cardiac arrests in the hospital.

Before this program was implemented, it was difficult to ensure correct treatment for all patients at risk for cardiac arrest. Now, with the combined knowledge of the floor staff and Andrews's team, therapy is provided earlier for patients in need. "Our goal was to reduce the number of cardiac arrests in the hospital by 50 percent," Andrews stated. "According to the statistics we have now, cardiac arrests in the hospital have decreased by 62 percent."

The rapid response team concept was formed in response to national data showing that 70 percent of cardiac arrest patients showed signs in the eight hours prior to their episode that were not recognized by or communicated to medical staff. The program was set up to address this so-called "failure to rescue" phenomenon.

"Two and a half years ago, I was asked to establish and manage this program, as well as formulate the team, set up logistics, and make sure everything runs smoothly. I have my PhD and am an experienced acute care nurse practitioner, and being a nursing professor helps me to be a better clinician," Andrews added.

Each MRRT is composed of three different health care professionals: a critical care nurse, a respiratory therapist, and an acute care practitioner. Each member of the team has different health care experience, and each person's expertise is valuable in order to recognize which patients require immediate assistance.

Unlike the floor staff, the MRRT is called in whenever necessary, instead of following a normal routine; this means members are on call 24/7. Normally, the team works with the critical care unit, but their responsibilities vary from day to day. Team members are called in by nurses or doctors on the floor if they have patients suffering from chest pain, shortness of breath, or worsening respiratory function. There are always three different responders (critical care nurse, respiratory therapist, acute care practitioner) on hand in the hospital at any given time. Andrews believes that the variety within the team makes it more effective.

With every scenario the team encounters, each member contributes by utilizing his or her individual skill sets. First, the critical care nurse provides an assessment and draws blood if needed, while the team leader looks over the patient's charts. Critical care nurses also administer therapy or medication and transport the patient to the Emergency Room or Intensive Care Unit. "Those with critical care experience really make a difference because of their education and background. They are able to recognize patients instantly



Laura Kierol Andrews (seated at computer), Assistant Professor at YSN and Senior Acute Care Nurse Practitioner, leads the Medical Rapid Response Team at the Hospital of Central Connecticut in New Britain.



Laura Kierol Andrews consults with Michael McNamee, MD, Director of Pulmonary and Critical Care Medicine, in the Critical Care Unit of the Hospital of Central Connecticut in New Britain.

that are deteriorating by their behavior. Critical care nurses serve as role models for the floor staff, because they can quickly assess a patient's status," Andrews said.

Next, the respiratory therapist provides oxygen therapy, draws arterial blood gases, assists the anesthesiologist, and checks to see if the patient needs to be intubated.

The acute care practitioner is the final member of the team and serves as the team leader. Acute care practitioners communicate between the team and nursing staff on the floor in order to decide which course of action is best for the patient. They have prescriptive authority, meaning that they decide which medications and tests to give the patient, such as a chest x-ray or electrocardiogram. Lastly, they interpret the completed tests, prescribe emergency medications, and decide where the patient needs to be transported.

There are many different causes for cardiac arrest, but the team commonly sees patients before they go into septic shock. When patients begin to "go septic" from inflammation of an infection, they are one step away from experiencing septic shock, which leads to multiple organ failure, including cardiac arrest. Patients need to be diagnosed quickly while they are still septic so they can receive proper care.

"The team often identifies septic patients by their behavior," Andrews continued. "Before going into septic shock, patients can become feverish, confused, and have an increased respiratory rate."

However, these signs aren't always present; the floor

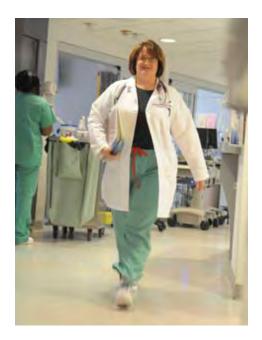
nurses and doctors have been educated to recognize subtle differences in patients that may be overlooked. "The floor staff will say they look different than they did yesterday. One of the nurses from the team will say, 'I'm not sure what's wrong, but he or she is different," Andrews added.

The program created a mechanism for doctors and nurses to then activate the MRRT. Increased communication like this between the staff has made identifying these patients a simpler task. "These nurses know how to quickly assess patients on the floor and will transport them to either the ICU or ER if necessary. Patients that get that sick need a lot of nursing care, and if the floor nurses have five or six patients each, they aren't going to be able to effectively care for them," Andrews articulated.

Common physiological areas her team examines include heart rate, blood pressure, respiratory rate, and urine output, but the mental status of a patient is equally important. Mental status tends to be subjective, which makes critical care nurses invaluable because of their experience.

The success of the Hospital of Central Connecticut's MRRT program in reducing cardiac arrests by 62 percent is an example of using research data to improve patient treatment. Andrews is now analyzing data to see how this dramatic reduction in cardiac arrests impacts patient outcomes such as length of hospital stay and mortality.

"If the Medical Rapid Response Team program continues to show improved outcomes," Andrews continued, "the program will become a national standard of care, just as cardiac arrest teams are [standard] in acute care hospitals."





Rosa DeLauro represents the 3rd Congressional District of Connecticut. She serves as the chairwoman of the House Appropriations Subcommittee on Agriculture, Rural Development, Food and Drug Administration, and Related Agencies, as well as the vice-chair of the House Budget Committee.

Making Sure No One Slips Through the Cracks

All Americans must have access to quality, affordable health care. But today, surging costs are eating away at coverage, and more people are uninsured than ever before. There are no easy answers when it comes to making our health care system work for everyone—but we can begin by making sure our network of health care professionals is second to none.

Nurses are the backbone of our health care system. No one is more dedicated. No one works harder. And anyone who has spent time in any hospital knows the high quality of care they provide.

For nearly 18 years in Congress, I have been proud to represent Yale University School of Nursing, a remarkable institution whose top priority is educating great nurses at the master's- and doctoral-degree levels. In the process, the school harnesses the talent and compassion of the faculty and students to continually redefine the field and improve patient care.

As our population ages and medical costs rise, we are going to have to call on that innovative spirit to face the major health care challenges that lie ahead. And as these trends continue, we will have to attract many more dedicated nurses to join the effort. Nationwide, our nursing workforce is already the largest group of health care providers in the world. Yet, we will still need 1.2 million new and replacement nurses by 2014. In 2005 Connecticut faced a 20 percent shortage of registered nurses. By 2010 this shortage is projected to increase to 33 percent, and by 2020 the shortage is expected to reach 57 percent.

Of course, underserved communities feel the impact most immediately. That is why programs like Yale University's HAVEN Free Clinic are so important. Its mission is so simple yet vital at its core: ensuring that our communities have a health care system that makes certain all people are cared for. As a member of Congress, I share that goal.

Places like the HAVEN Free Clinic have shown what is possible when we work to make quality, consistent health care available at the community level. But, to bring initiatives like this to scale across the nation, our government must reaffirm its commitment to those nurses who stand on the front lines of any effort to reach patients as humans, not consumers. Government has a role to play—it is part of a larger obligation to make sure no one slips through the cracks.

And that begins with adequate resources. From my seat on the House Appropriations Labor Health and Human Services Subcommittee, I am fighting for the programs we know can make a big difference. With our 2009 funding bill we would provide \$174 million a 12 percent increase over last year—to address the nursing shortage through nurse education programs.

For nursing students committed to serving in the neediest facilities, we must provide the resources for them to pay for their education—scholarships, loan repayment, and institutional support. To make that possible we would reject the President's proposed cuts and boost funding by another \$69 million to continue the important work of nurses in underserved areas for disadvantaged populations.

At the same time, wherever nurses are working, we must ensure they are supported in their work. In hospitals, that means adequate staffing levels to ensure quality patient care. And while this administration has ruled against nurses recently in the Kentucky River Case, we must push back. I have co-sponsored the RESPECT Act, which would correct the unfair classification of nurses as "supervisors." This would ensure that skilled and experienced workers who sometimes instruct their co-workers do not lose collective bargaining rights.

I believe that in the year ahead, the time will finally come when our nation can truly make a national commitment to ensuring that every American has access to quality, affordable health care. We can get there with the leadership and guidance of America's nurses, who we will be counting on to lead the way as innovators, mentors, and teachers to us all.



Together, we are building Nursing Tomorrow today



From increasing financial aid and research support, to new programs and clinical initiatives, your support is having a dramatic effect at YSN and beyond. There is still much more to accomplish if we are to fulfill our promise to the next generation of Yale Nurses. Thank you for your ongoing commitment to Nursing Tomorrow.

NURSING **>>** tomorrow

Nursing.yale.edu/Development

\$20,000,000

Funds raised as of October 1, 2008 \$16,509,098.



Ruth Benedict, YSN 48, and Howard Benedict, Yale 45w

"We consider YSN a part of our family"

For Ruth Benedict '48, giving back to Yale has proved to be a lifelong pursuit. "Yale has played a key role in our lives ever since Howard and I met at YSN's old Nathan Smith dormitory more than 62 years ago. We were married in Dwight Chapel in 1947 with many of our classmates in attendance," Ruth remembers. Howard Benedict entered Yale with the class of '45W, and interrupted his undergraduate years to serve in the Navy in the Pacific theater during World War II, graduating in 1946. Ruth continues, "I graduated from YSN in 1948. Ever since then Howard and I have tried to 'give back' to Yale in a variety of ways."

Ruth's alumni efforts began in 1957. "One day, I was home with four small boys when the phone rang. I remember distinctly that I was changing a diaper at the time. It was Dean Bixler. Since I lived in the area, she asked if I would organize the first Alumnae/i College. I agreed, and it was a great success for its time, but only a small beginning of what has grown to become an impressive series of programs at YSN." That was the first of many "firsts" for Ruth.

In 1969 Yale President Kingman Brewster sought to forge closer relationships with alumni and formed the Founding Board of the Association of Yale Alumni (AYA). The only woman on the 24-member Board, Ruth served as first chair of the Nominating Committee and the Accreditation and Election Committee. Later, she went on to hold a number of key leadership positions on the AYA Board, including chairing the Committee on the Graduate and Professional Schools, which dramatically increased their visibility at the University.

"Most of my fellow Board members didn't even know that Yale had a graduate-level School of Nursing. It was an exciting time, and YSN was absolutely instrumental in the creation of the AYA." Ruth was recognized in 1974 for her outstanding commitment and volunteer efforts on behalf of the University with the Yale Medal, Yale's highest honor.

But it didn't stop there.

Ruth served on the Board of Directors and Executive Committee of the Yale Alumni Fund, the first woman on the Board of Directors in the 82-year history of the Fund at that time. She also served as National Chairman for YSN's part of The Campaign for Yale in 1977, leading YSN to meet its goal ahead of all the other schools. In 1979 during the first energy crisis, with Yale's energy costs going off the charts, President Bart Giamatti asked Ruth to be Yale's first Director of Energy Conservation. She mobilized students, faculty, and staff, saved over \$4 million in electricity that year alone, and was awarded a \$13 million federal grant for retrofitting Yale's college buildings.

In 2003 Ruth was asked by YSN to serve on the School's External Advisory Board, which was created to reach out to new constituencies, broaden the School's friends network, and advise the Dean on matters of strategic importance. Ruth served as the Board's first co-chair.

"Yale was preparing for a capital campaign, and I knew YSN would need to set some aggressive fundraising goals to meet the needs of students and fulfill the vision Dean Grey set forth for the School. I wanted to help," Ruth added.

Recently, Ruth and Howard attended a Yale event in Tucson, Arizona, near their home in Green Valley. At the meeting, Eileen Donahue from the Planned Giving office described ways to make a gift to Yale by leveraging assets and maximizing tax credits. The Benedicts have designated YSN as a \$1,000,000 beneficiary in the future sale of select real estate holdings.

"We both have benefited from our Yale educations and we always knew we wanted to give back in a way that will have a significant impact," Howard said. "We hoped our gift to YSN would make a difference and would be an example to others. Being married to a Yale Nurse definitely helped focus my attention on YSN's pioneering work worldwide."



Ruth and Howard posing in front of the medical school shortly after they met in 1946. Ruth was a student at YSN and Howard was finishing his senior year at Yale College a month after he was released from active military duty.

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Scahill, L. D., Oesterheld, J. & Martin, A. (in press). Pediatric psychopharmacology II: General principles, specific drug treatments and clinical practice. In A. Martin, F.R. Volkmar (Ed.), *Lewis textbook of child and adolescent psychiatry:* A comprehensive approach (4th ed.).

Poncin, Y., Sukhodolsky, D. G., McGuire, J. & Scahill, L. D. (in press). Drug and non-drug treatments of children with ADHD and tic disorders. *European Child & Adolescent Psychiatry*.

Sukhodolsky, D. G., Leckman, J. F., Rothenberger, A. & Scahill, L. D. (in press). The role of abnormal neural oscillations in the pathophysiology of co-occurring tourette syndrome and attentiondeficit/hyperactivity disorder. *European Child & Adolescent Psychiatry*.

Williams, S. K., Koenig, K. & Scahill, L. D. (in press). Toward the development of effective social skills intervention in children with autism specturm disorders. *Journal of Autism & Developmental Disorders*.

Williams, S. K., Scahill, L. D., Klin, A., Koenig, K. & Volkmar, F. R. (in press). Educational placements and service use patterns of individuals with autism spectrum disorders. *Journal of Autism & Developmental Disorders*.

Scahill, L. D., Kim, Y. S. & Lettinga, J. (in press). The science and ethics of using placebo in pediatric psychopharmacology. *Ethics and Behavior*.

Scahill, L. D., Kim, Y. S. & Lettinga, J. (in press). Assessment and pharmacological treatment of children with obsessive-compulsive disorder. *Journal* of Clinical Psychopharmacology. Sukhodolsky, D. G., Scahill, L. D., Gadow, K. D., Arnold, L. E., Aman, M. G., McDougle, C. J., et al. (in press). Parent-rated anxiety symptoms in children with pervasive developmental disorders: Frequency and association with core autism symptoms and cognitive functioning. *Journal of Abnormal Psychology*.

Scahill, L. D. (in press). Research units on pediatric psychopharmacology autism network: A pilot study of parent management training in children with pervasive developmental disorder. *Behavioral Interventions*.

Vitiello, B., Arman, M. G., Scahill, L. D., McCracken, J. T., McDougle, C. J., Tierney, E., et al. (in press). Research knowledge among parents of children participating in a randomized clinical trial. Journal of the American Academy of Child & Adolescent Psychiatry.

Scahill, L. D., McDougle, C. J., Williams, S. K., Dimitropoulos, A., Aman, M. G., McCracken, J. T., et al. (in press). The children's Yale-Brown obsessive compulsive scales modified for pervasive developmental disorders. *Journal of the American Academy of Child & Adolescent Psychiatry*.

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Scahill, L. D., Hamrin, V., Pachler, M. & Deering, C. G. (2008). Care of children and adolescents with psychiatric disorders. In M.A. Boyd (Ed.), *Psychiatric nursing: Contemporary practice (4th ed.*, pp 633-672). Philadelphia: Lippincott.

Deering, C. G. & Scahill, L. D. (2008). Mental health promotion with children and adolescents. In M. A. Boyd (Ed.), *Psychiatric nursing: Contemporary practice* (4th ed., pp. 617-632). Philadelphia: Lippincott.

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Dena Schulman-Green

Schulman-Green, D., Bradley, E. H., Beckman Pace, K., Cherlin, E., Hennesey, M., Johnson-Hurzeler, R., et al. (in press). Testing a standardized symptom assessment tool: Experiences from the NAHC QAPI Collaborative. *Caring*.

McCorkle, R., Dowd, M., Ercolano, E., Schulman-Green, D., Williams, A. L., Siefert, M., et al. (2007). Effects of a nursing intervention on quality of life outcomes in post-surgical women with gynecological cancers. *Psycho-Oncology*, 10, 1002-1012.

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Juliette Shellman

Shellman, J., Lacey, J. & Clemmens, D. (in press). CARELINK: Partners in caring model, a cardiac self-management program for homebound older adults. *Home Healthcare Nurse*.

Shellman, J. & Mokel, M. (2007). Keeping the bully out: Understanding older African-Americans perceptions of depression. *Journal of the American Psychiatric Nurses Association*, 13(4), 230-236.

Marianne Terisa Stone-Godena

Stone-Godena, M. T. (in press). High-risk pregnancy. In I. M. Alexander, K. Hood, V. Johnson-Mallard & E. Kostas-Polston (Eds.). *Comprehensive women's health care*. St. Louis: Elsevier.

Stone-Godena, M. T. (in press). Vulvar conditions. In T. King, & M. Brucker (Eds.), *Principles and practice of pharmacology in women's health*. New York: Elsevier.

Martha K. Swartz

Swartz, M. & Joslin, S. (in press). Newborn nutrition. In I. M. Alexander, K. Hood, V. Johnson-Mallard & E. Kostas-Polston (Eds.). *Comprehensive women's health care*. St. Louis: Elsevier.

National Association of Pediatric Nurse Practitioners and Society of Pediatric Nurses. (2008). [Writing group cochair]. *Pediatric Nursing: Scope and Standards of Practice*. Silver Spring, MD: American Nurses Association.

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Swartz, M. (2008). Take a look at www. jpedhc.org! *Journal of Pediatric Health Care*, *22*, 209-210. Swartz, M. (2008). Choose to write. Journal of Pediatric Health Care, 22, 145.

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Swartz, M. (2008). A new year. Journal of Pediatric Health Care, 22, 1-2.

Deshefy-Longhi, T., Swartz, M., & Grey, M. (2008). Characterizing nurse practitioner practice by sampling patient encounters: An APRNet Study. *Journal of the American Academy of Nurse Practitioners*, 20, 281-287.

Sandra Lee Talley

Wolfe, B. E., Talley, S. L. & Smith, A. (2008). Psychopharmacologic first-line strategies in the treatment of major depression and psychosis: A survey of APNs. *Journal of the American Psychiatric Nurses Association*, 14(2), 144-151.

Simmons-Alling, S. & Talley, S. L. (2007). Bipolar disorder and weight gain: A multifactorial assessment. *Journal of American Psychiatric Nurses Association*, 13(6), 345-352.

Diane Claudette Viens

Viens, D. (in press). Headaches. In J. M. Krebs & B. Hackley (Eds.), *Primary care for midwives*. Sudbury, MA: Jones & Bartlett.

Meredith Wallace

Wallace, M., Grossman, S., Robert, T., Shea, J. & Lange, J. (in press). Integration of end of life care content in undergraduate nursing curricula: Student knowledge and perceptions. *Journal of Professional Nursing*.

Wallace, M. (in press). Elderly persons in the community. In F. Maurer & C. Smith (Eds.), *Community health nursing practice: Concepts for families and populations* (3rd ed.). St. Louis: Elsevier Publishing.

Carroll, P. R., Dall'Era, M. A., Cooperberg, M. R., Chan, J., Davies, B. J., Albersten, P. C., et al. (in press). Measuring uncertainty in older men undergoing active surveillance (AS) for prostate cancerrational or risky? A multi-institutional and multidisciplinary review and assessment. Journal of Clinical Oncology.

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Wallace, M., Shea, J., O'Shea, E., Lange, J., Campbell, S., Grossman, S., et al. (2008). Integration of spirituality into undergraduate nursing curricula. *International Journal of Nursing Education Scholarship*, 5(1), 10.

Wallace, M. (2008). How to try this: Sexuality assessment. *American Journal* of Nursing, 108(7).

SCHOLARSHIP YSN FACULTY PUBLICATIONS

Dall'Era, M. A., Cooperberg, M. R., Chan, J., Davies, B. J., Albersten, P. C., Klotz, L. H., et al. (2008). Active surveillance for early-stage prostate cancer: Review of the current literature. *Cancer*, 112(8), 1650-1659.

Wallace, M. & Shelkey, M. (2008). How to try this: Katz activities of daily living inventory. *American Journal of Nursing*, 108(3).

Arena, J. M. & Wallace, M. (2008). Issues regarding sexuality. In E. Capezuti, D. Zwicker, M. Mezey & T. Fulmer (Eds.), *Evidence-based geriatric nursing protocols for best practice* (3rd ed., pp. 629-647). New York: Springer Publishing.

Wallace, M. & Fitzpatrick, J. (2008). Foundation funding for healthcare. In H. Feldman (Ed.). *The encyclopedia of nursing leadership*. New York: Springer.

Wallace, M. (2007). Altered disease presentation in the elderly. *ADVANCE for Nurses*, 2007, 61.

Wallace, M. & Storms, S. (2007). The needs of men with prostate cancer. *Applied Nursing Research*, 20(4), 181-187.

Wallace, M., Murphy, K., Cooney, A. & O'Shea, E. O. (2007). A profile of Irish and U.S. nursing homes: Evidence for change. *Applied Nursing Research*, 20(3), 158-161.

Hegarty, J., Wallace, M. & Comer, H. (2007). Uncertainty and quality of life among men undergoing watchful waiting for prostate cancer: An international comparison study. *Journal* of Men's Health, 5, 303-309. Wallace, M. & O'Shea, E. (2007). Perceptions of spirituality and spiritual care among older nursing home residents at end of life. *Holistic Nursing Practice*, *21*(6), 285-289.

Bailey, D., Wallace, M. & Mishel, M. (2007). Watchful waiting and uncertainty in prostate cancer. *Journal* of *Clinical Nursing*, 16, 731-741.

Lovanio, K. & Wallace, M. (2007). Promoting spiritual knowledge and attitudes: A student nurse education project. *Holistic Nursing Practice*, 21, 42-47.

Hegarty, J., Beime, P., Comber, H. & Wallace, M. (2007). Watchful waiting versus prostatectomy for prostate cancer [Protocol]. *Cochrane Database* of Systematic Reviews, 2007(3), 1-7.

Bailey, D. E. & Wallace, M. (2007). Critical review: Is watchful waiting a viable management option for older men with prostate caner? *Journal of Men's Health*, 1, 18-28.

Robin Whittemore

Grey, M., Jaser, S., Whittemore, R., Ambrosino, J. (in press). Coping and psychosocial adjustment in mothers of young children with type 1 diabetes. *Journal of Behavioral and Developmental Psychology.*

Whittemore, R. & Melkus, G. (2008). Designing a research study. *The Diabetes Educator*, *34*, 201-216.

Whittemore, R. & Dixon, J. (2008). Chronic illness: The process of integration. *Journal of Clinical Nursing*, 17, 177-187. Jaser, S., Whittemore, R., Lindemann, E. & Grey, M. (2008). Mediators of depressive symptoms in children with type 1 diabetes and their parents. *Journal of Pediatric Psychology*, 33, 509-519.

Ambrosino, J. M., Fennie, K. P., Whittemore, R., Jaser, S. & Grey, M. (2008). Short-term effects of coping skills training in school age children with type 1 diabetes. *Pediatric Diabetes*, *9*, 74-82.

Grey, M., Jaser, S., Whittemore, R. & Lindemann, E. (2008). Coping skills training intervention for parents of children with type 1 diabetes: 12-month follow up. *Annals of Behavioral Medicine*, 35, B170.

Whittemore, R., Melkus, G., Wagner, J., Northrup, V., Dzureia, J., & Grey, M. (2008). A lifestyle program to prevent type 2 diabetes. *Annals of Behavioral Medicine*, 35, C028.

Hatcher, E. & Whittemore, R. (2007). Hispanic adults' beliefs about type 2 diabetes: Clinical implications. Journal of the American Academy of Nurse Practitioners, 19, 536-545.

Whittemore, R. (2007). Culturally competent interventions for adults with type 2 diabetes: An integrative review. *Journal of Transcultural Nursing*, *18*, 157-166.

Whittemore, R. (2007). Top ten tips in developing a program of research. *Research in Nursing and Health, 30,* 235-237.

Ann B. Williams

Womack, J., Richman, S., Tien, P. C., Grey, M. & Williams, A. (in press). Hormonal contraception and women living with HIV: Metabolic concerns and management strategies. *Journal of Midwifery & Women's Health*.

Tangredi, L., Danvers, K., Maloney, S. & Williams, A. (in press). New CDC recommendations for HIV testing: Implications for older adults. *Nurse Practitioner*.

Wang, H., He, G., Li, X., Yang, A., Chen, X., Fennie, K. P., et al. (2008). Self-reported adherence to antiretroviral treatment among HIV-infected people in central China. *AIDS Patient Care and STDs*, 22(1), 71-80.

Williams, A. (2007). Enhancing adherence in the HIV clinic. *The AIDS Reader*, 17(4), S17-S23.

Walter Zawalich

Johnson, D., Yamazaki, H., Ward, K., Schmidt, A., Lebel, W., Treadway, J., et al. (in press). Inhibitory effects of antipsychotics on carbachol-enhanced insulin secretion from perifused rat islets. *Diabetes*.

Zawalich, W. S. & Zawalich, K. C. (2008). Enhanced activation of phospholipase C and insulin secretion from islets incubated in fatty acid-free bovine serum albumin. *Metabolism Clinical & Experimental*, 57(2), 290-298.

Zawalich, W. S., Yamazaki, H. & Zawalich, K. C. (2008). Biphasic insulin secretion from freshly isolated or cultured, perifused rodent islets: Comparative studies with rats and mice. *Metabolism Clinical & Experimental*, *57*(1), 30-39.

SCHOLARSHIP FACULTY PRESENTATIONS

Ivy Marie Alexander

Alexander, I. M. (2008, June). *Dysfunctional uterine bleeding in women over 40.* (Paper presentation). Nurse Practitioner Associates for Continuing Education (NPACE) New England Women's Health and Older Adult Conference, North Falmouth, MA.

Alexander, I. M. (2008, May). *Mid-life women's health issues*. (Paper presentation). Women's Wellness Weekend, Camp Hazen YMCA and Valley Shore YMCA, Chester, CT.

Alexander, I. M. (2008, February). *Premenstrual dysphoric disorder: Addressing the emotional and physiological manifestations*. (Paper presentation). Nurse Practitioner Associates for Continuing Education (NPACE) Mental Health & Addictions Conference, Ledyard, CT. Alexander, I. M. (2008, January). *Midlife women's health issues*. (Paper presentation). Deep River Public Library, Deep River, CT.

Alexander, I. M. (2007, October). *Guidelines for nurse practitioners in gynecologic settings*. (Paper presentation). New York: Springer, www.springerpub.com

Alexander, I. M. (2007, October). Strategies in osteoporosis prevention, identification and treatment. (Paper presentation). APRN Continuing Education Retreat, Veterans Administration of Connecticut, Wallingford, CT.

Alexander, I. M. (2007, October). Exploring options in premenstrual dysphoric disorder management (PMDD): An interactive workshop. (Table moderator). National Association of Nurse Practitioners in Women's Health (NPWH) Annual National Conference, Women's Healthcare in the New Millennium, Philadelphia, PA.

Patricia Jackson Allen

Allen, P. J. (2008, April). Evidenced-based management of community-associated methicillin resistant streptococcus aureus (CA-MRSA). (Paper presentation). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Allen, P. J. & Duderstadt, K. (2008, April). *Climate change: Health implications of global warming*. (Paper presentation). National Association of Pediatric Nurse Associates and Practitioners, Nashville, TN.

Allen, P. J. (2008, April) *Establishing a school-based clinic in Nicaragua*. (Paper presentation). National Organization of Nurse Practitioner Faculties, Louisville, KY. Duderstadt, K. & Allen, P. J. (2007, October). Integrating environmental health information into pediatric practice. (Paper presentation). Contemporary Forums: Clinical Issues in Pediatrics, Las Vegas, NV.

Cole, M., Sanzo, M., Visinski, K. & Allen, P. J. (2007, September). *Keeping kids healthy in a polluted world*. (Paper presentation). Connecticut Children's Medical Center, Hartford, CT.

Allen, P. J. (2007, July). Employment characteristics and role functions of recent family nurse practitioner graduates: A multi-site survey and update. (Paper presentation). Royal College of Nursing: Beyond the Borders: International Nursing Education in the 21st Century, Brighton, England.

Allen, P. J. (2007, July). Avian influenza (H5N1). (Paper presentation). Beyond the Borders: International Nursing Education in the 21st Century, Brighton, England.

SCHOLARSHIP FACULTY PRESENTATIONS

Allen, P. J. (2007, July). *I mplications of the WHO International classification of functioning, disability and health.* (Invited participant). Oxford Brookes University, Researching Children's Health, Oxford, England.

Angelo Alonzo

Alonzo A. A. (2007, August). *Stigma and HIV/AIDS*. (Paper presentation). American Sociological Association Annual Meeting, New York, NY.

Nancy Cantey Banasiak

Banasiak, N. C., Codish, S. & Shiffman, R. (2008, April). *Decision support system to improve the care of children with asthma*. (Poster presentation). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Banasiak, N. C. (2008, April). *Asthma update 2008*. (Paper presentation). Connecticut National Association of Pediatric Nurse Practitioners, Middletown, CT.

Meadows-Oliver, M. & Banasiak, N. C. (2007, September). *Accuracy of health information regarding asthma on unsponsored websites*. (Poster presentation). Connecticut Children's Medical Center, Hartford, CT.

Banasiak, N. C. & Meadows-Oliver, M. (2007, September). Asthma update and accuracy of health information regarding asthma: When to use the web. (Paper presentation). Connecticut Children's Medical Center, Hartford, CT.

Angelina Chambers

Chambers, A. (2008, April). *Midwifery research*. (Invited speaker). New England Midwifery Education Consortium, Yale University School of Nursing, New Haven, CT.

Chambers, A. (2008, April). Cultural/ religious and ethnic norms in parental attachment and bonding. (Panelist). March of Dimes Visiting Professorship in Nursing "Optimal Bonding: A Comprehensive Perinatal Perspective," The University of Texas Health Science Center at Houston School of Nursing, Houston, TX.

Chambers, A. (2008, April). Maternalinfant bonding and attachment experiences of incarcerated postpartum women and NICU mothers. (Invited speaker). March of Dimes 13th Annual Visiting Professorship in Nursing "Optimal Bonding: A Comprehensive Perinatal Perspective," University of Texas Health Science Center at Houston School of Nursing, Houston, TX.

Chambers, A. (2007, August). *Maternalinfant bonding and attachment experiences of incarcerated postpartum women*. (Invited speaker) . Faculty Recruitment, Yale University School of Nursing, New Haven, CT.

Sally Cohen

Cohen, S. (2007, August). *Panel on health policy.* (Invited discussant). American Political Science Association Annual Meeting, Chicago, IL.

Cohen, S. & Bishop-Josef, S. & O'Neill, M. (2007, August). An interdisciplinary analysis of children's rights: Is reframing necessary to effect policy change in the US? (Paper presentation). American Political Science Association Annual Meeting, Chicago, IL.

Cynthia A Connolly

Connolly, C. A. (2008, June). International Nursing History Conference. (Invited speaker). International Nursing History Conference, Toronto, Canada.

Connolly, C. A. (2008, March). More harm than good? Lillian Wald and Emma Goldman in early 20th century America. (Sigerist society panel). American Association for the History of Medicine, Rochester, NY.

Connolly, C. A. (2007, October). *History as evidence*. (Plenary speaker). Connecticut Nursing Research Alliance Evidence-Based Nursing Conference, Hartford, CT.

Jessica Coviello

Shank-Coviello, J. (2007, July). *Creation of a heart failure web site for VNAA*. (Paper presentation). VNAA corporate office expert panel, Boston, MA.

Shank-Coviello, J. (2007, July). *Heart failure: Pathophysiology to management*. (Web-based lecture series). Homecare Information Network: Boston, MA.

Angela Crowley

Crowley, A. A., Alkon, A., Lucarelli, P. (2008, April). Promoting the health of children in early care and education settings: Models of practice in California, Connecticut, and New Jersey. (Paper presentation). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Alkon, A, Crowley A., & Cole, A. (2007, October). *Health and safety assessments in early care and education programs in three states*. (Poster presentation). American Academy of Pediatrics National Conference and Exhibition, San Francisco, CA.

Rosenthal, M., Crowley, A., & Curry, L. (2007, October). *Promoting child development and behavioral health: Family child care providers' perspectives.* (Poster presentation). American Academy of Pediatrics NCE, San Francisco, CA.

Jane Karpe Dixon

Funk, M., Drew, B., Scheibly, T., Schindler, D., Winkler, C. & Dixon, J. K. (2008, March). Novel web-based education for ECG monitoring improves nurses' knowledge. (Paper presentation). Eastern Nursing Research Society, Philadelphia, PA.

Deshefy-Longhi, T., Dixon, J. K. & LaFrance, M. (2008, March). Assessing nonverbal communication between couples living with moderate to advanced Parkinson disease. (Paper presentation). Eastern Nursing Research Society, Philadelphia, PA.

Deshefy-Longhi, T., Dixon, J. K. & LaFrance, M. (2007, November). Assessing nonverbal communication between couples living with moderate to advanced Parkinson disease. (Poster presentation). American Academy of Nursing Annual Meeting, Washington, DC.

Knafl, K., Deatrick, J., Gallo, A., Dixon, J. K., Grey, M., Knafl, G. & O'Malley, J. (2007, November). Assessment of a new measure of family management of childhood chronic conditions. (Poster presentation). American Academy of Nursing Annual Meeting, Washington, DC.

Dixon, J., Dixon, J. K., Hendrickson, K., Ercolano, E. & Jenerette, C. (2007, November). *What people must believe before they will take action against pollution*. (Poster presentation). American Public Health Association, Washington, DC.

Whittemore, R. & Dixon, J. K. (2007, July). *Integration in chronic illness*. (Poster presentation). International Institute for Qualitative Methodology, University of Edmonton, Alberta, Canada.

Kris Paul Fennie

Wang, H., He, G., Zhou, J., Li, X., Fennie, K. P. & Williams, A. (2008, March). *Consistent ART adherence improves outcomes in central China*. (Paper presentation). 3rd International Conference on HIV Treatment Adherence, Jersey City, NJ.

Knafl, G., Fennie, K. P., Bova, C., Friedland, G., O'Malley, J., Dieckhaus, K., et al. (2008, March). *Dependence of longitudinal HIV viral load on adherence controlling for initial CD4 count*. (Poster presentation). 3rd International Conference on HIV Treatment Adherence, Jersey City, NJ.

Knafl, G., O'Malley, J., Fennie, K. P., Bova, C., Dieckhaus, K., Friedland, G., et al. (2007, November). *Adaptive modeling of longitudinal HIV viral load data*. (Paper presentation). American Public Health Association, Washington, DC.

Williams, A., Le, S. T., Wu, C., Burgess, J. D., Duong, H. T., Fennie, K. P., et al. (2007, July). *Evaluation of an HIV/AIDS training program for Vietnamese nurses*. (Poster presentation). International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention, Sydney, Australia. Wang, H., He, G., Li, X., Chen, X., Yang, A., Fennie, K. P., et al. (2007, July). *Self-reported ART adherence in Central China.* (Poster presentation). International AIDS Society Conference on HIV Pathogenesis, Treatment, Sydney, Australia.

Sarabeth F. Friedman

Friedman, S. F. (2008, April). *Introducing* students to global health. (Paper presentation). Unite for Sight International Health Conference, Yale University, New Haven, CT.

Friedman, S. F. (2007, November). A good match makes a great fire: Selection of clinical placements and preceptors for nurse-midwifery students. (Paper presentation). British Columbia Academic Health Council Conference, Practice Makes Perfect, Vancouver, British Columbia, Canada.

Marjorie Funk

Funk, M. (2008, March). Novel web-based education for ECG monitoring improves nurses' knowledge. (Paper presentation). Eastern Nursing Research Society, Philadelphia, PA

Funk, M. (2008, March). Yale-Howard Partnership Center on Health Disparities. (Paper presentation). Health Equity Conference, Howard University, Washington, DC.

Funk, M. (2007, August). *Improving Practice in ECG Monitoring*. (Keynote). GE Healthcare User Summit, Boston, MA.

Meredith Goff

Goff, M. (2008, April). Labor interventions and breastfeeding. (Paper presentation). La Leche League of Connecticut, Southbury, CT.

Margaret Grey

Womack, J., Grey, M., Williams, A., Cole, S. R., Schneider, M. F., Minkoff, H., Anastos, K., Cohen, M. & Tien, P. C. (2008, March). *Combined hormonal contraception and metabolic outcomes in women with and at risk for HIV disease.* (Paper presentation). Eastern Nursing Research Society Conference, Philadelphia, PA.

Grey, M. (2008, March). Intervention fidelity. Seminar, Center for Health Trajectory Research. (Paper presentation). University of Minnesota, Minneapolis, MN.

Grey, M. (2008, February). A CBT approach to improving care for youth with type 1 diabetes. (Paper presentation). Grand Rounds, Child Study Center, Yale University, New Haven, CT.

Grey, M. (2008, January). *Getting ready to do multi-site clinical trials*. (Research visiting professor). Arizona State University, Phoenix, AZ. Grey, M. (2008, January). *Roles of schools of nursing in CTSAs*. (Paper presentation). American Association of Colleges of Nursing Doctoral Conference, Captiva, FL.

Grey, M. (2007, December). *Improving* self-management of people with chronic conditions. (Paper presentation). Grand Rounds, Yale Health Plan, New Haven, CT.

Knafl, K., Deatrick, J., Gallo, A., Dixon, J. K., Grey, M., Knafl, G. & O'Malley, J. (2007, November). Assessment of a new measure of family management of childhood chronic conditions. (Poster presentation). American Academy of Nursing, Annual Meeting, Washington, DC.

Grey, M. (2007, October). *Multi-site clinical trials: Ready or not?*. (Invited presentation). National Congress on the State of the Science in Nursing Research, Washington, DC.

Grey, M. (2007, October). The obesity epidemic: An impending public health crisis. (Keynote). China Conference, Changsha, China.

Grey, M. (2007, October). Creating evidence for practice: A nurse researcher's perspective. (Paper presentation). Hong Kong Polytechnic University, Hong Kong and Xiangsha University, Changsha, China.

Grey, M. (2007, September). *The obesity epidemic: A call to action*. (Keynote). Robert Wood Johnson Foundation Summit on Obesity, San Diego, CA.

Barbara J. Guthrie

Guthrie, B. J. (2007, September). Restorative health: An evidence-based model for ensuring quality health care for youth within juvenile justice system. (Keynote). Blueprint Commission on Juvenile Justice, Florida Department of Juvenile Justice, Jacksonville, FL.

Barbara Hackley

Hackley, B., Sharma, C., Sreenivasan S. (2008 May). *Incorporating effective counseling strategies for mental health conditions into midwifery practice*. (Paper presentation). American Colleges of Nurse-Midwives, Annual Meeting, Boston, MA.

Hackley, B., Kedzior, A., Sharma, C., Sreenivasan, S. (2008, May). Medication management of common mental health conditions seen in primary care. (Paper presentation). American Colleges of Nurse-Midwives, Annual Meeting, Boston, MA.

Arevalo, S., Goldsmith, S., Larkin, M., Hackley, B., Sarmiento, A., Machuca, H., et al. (2008, March). *A multidisciplinary approach to obesity in an urban NYC community.* (Poster presentation). National Initiative for Children's Healthcare Quality Annual Forum for Improving Children's Healthcare, Miami, FL.

Vanya Hamrin

Hamrin, V. (2008, April). Assessment and evidence-based treatment of oppositional defiant disorder and conduct disorder. (Invited speaker). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Hamrin, V. (2007, August). Assessment and evidence-based treatment approaches for child mental health disorders.

(Keynote). University of Kaumoto, Japan. Joanne DeSanto lennaco

lennaco, J. D. (2007, September). *Effects* of externally rated job demand and control on depression claims in an industrial cohort. (Poster presentation). Worklife initiative: Protecting and Promoting Worker Health A National Symposium, National Institute for Occupational Safety and Health, Bethesda, MD.

Clair L. Kaplan

Kaplan, C. (2008, June). *Nursing Update: Contraceptive Review 2008*. (Nursing staff in-service). Community Health Centers of Connecticut [presented to multiple sites by satellite], Meriden, CT.

Kaplan, C. (2008, April). Contemporary issues in psychiatric nursing, women's health update: A review for the nurse and other healthcare providers working with clients and substance abuse and mental health disorders. (Invited presentation). Institute of Living, Hartford Hospital, Hartford, CT.

Kaplan, C. & Denino, V. (2008, March). Invisible barriers, underserved populations: Providing accessible healthcare for GLBT clients. (Paper presentation). Professional Best Practices Workshop, True Colors Conference, University of Connecticut, Storrs, CT.

Kaplan, C. (2008, March). Addressing prevention/reducing risk: Gay men and rectal health. (Paper presentation). Professional Best Practices Workshop, True Colors Conference, University of Connecticut, Storrs, CT.

Kaplan, C. (2008, February). Update on women's health with a focus on enhancing recovery. (Paper presentation). Grand Rounds, Women's and Children's Agency, Norwalk, CT.

Kaplan, C. (2008, January). *Recovery and women's health issues*. (Paper presentation). Connecticut Valley Hospital, STAR Program (Sisters Together Achieving Recovery), Middletown, CT.

Kaplan, C. (2007, December). *Women's medical care update 2007*. (Paper presentation). Morris Foundation -Women and Children's Program, Community Health Centers of Connecticut, Meriden, CT. Kaplan, C. (2007, December). *Contraceptive update 2007.* (Paper presentation). Nurse Practitioner Residency Program, Community Health Centers of Connecticut, Meriden, CT.

Kaplan, C. & Sylla, L. (2007, November). *Microbicides: New hope for addressing women's global risk of HIV/AIDS.* (Paper presentation). Yale University Women's Center, Reproductive Rights Action League, New Haven, CT.

Kaplan, C. (2007, November). Enhancing recovery: Women's health issues for women with substance abuse disorders. (Keynote). Connecticut Department of Mental Health and Addiction Services/ Women's Services Practice Improvement Collaborative, Quarterly Meeting, Hartford, CT.

Kaplan, C. (2007, November). *Microbicides: What nurses need to know to advocate and prepare for new HIV prevention options for women*. (Paper presentation). Association of Nurses in AIDS Care, Orlando, FL.

M. Tish Knobf

Knobf, M. T. (2008, May). Psychosocial responses of women with breast cancer. (Paper presentation). Yale Cancer Center Survivorship Symposium, New Haven, CT.

Knobf, M. T. (2008, May). Emotional response of women with breast cancer. (Paper presentation). Oncology Nursing Society Annual Congress, Philadelphia, PA.

Knobf, M. T. (2008, March). An exercise intervention for breast cancer survivors: Effects on symptoms, function and quality of life. (Paper presentation). American Psychosocial Oncology Conference, Irvine, CA.

Knobf, M. T. (2008, February). *Life after breast cancer treatment: Resources to promote recovery.* (Paper presentation). Annual Conference for Young Women with Breast Cancer, Jacksonville, FL.

Knobf, M. T. (2007, November). *Cognitive changes in women with breast cancer.* (Paper presentation). Oncology Grand Rounds, Bridgeport Hospital, Bridgeport, CT.

Knobf, M. T. (2007, November). *Transition* from treatment to survivorship for women with breast cancer. (Paper presentation). New Perspectives in Oncology Conference, New York, NY.

Knobf, M. T. (2007, November). *Lifestyle changes in women with breast cancer.* (Paper presentation). Breast Cancer Symposium, New Haven, CT.

Knobf, M. T. (2007, September). *Cognitive changes in women with breast cancer.* (Paper presentation). Oncology Nursing Conference, Yale New Haven Oncology Nursing Council, New Haven, CT. Knobf, M. T. (2007, August). Cancer treatment induced menopause: Quality of life outcomes in young women. (Paper presentation). Perspective in Oncology Supportive Care, Washington, DC.

Mikki Meadows-Oliver

Meadows-Oliver, M. (2008, June). PNP students' perceptions of policy issues that affect care. (Poster presentation). American Academy of Nurse Practitioners, National Harbor, MD.

Meadows-Oliver, M. (2008, April). *PNP students' experiences of delivering cultural care*. (Poster presentation). National Association of Pediatric Nurse Practitioners Annual Conference, Nashville, TN.

Meadows-Oliver, M. (2007, September). Asthma information: When to use the web. (Paper presentation). Connecticut Children's Medical Center, Hartford, CT.

Meadows-Oliver, M. (2007, July). Foster mothers' transition to motherhood. (Paper presentation). International Nursing Research Congress, Vienna, Austria.

Sheila Molony

Molony, S. L. & Chou, J. (2008, May). *Creating experiences of home in the nursing home*. (Poster presentation). Sigma Theta Tau Annual Meeting and Induction Ceremony, Branford, CT.

Molony, S. L. (2007, April). A metaethnographic synthesis of the experience of home. (Paper presentation). Eastern Nursing Research Society, Providence, RI.

Alison L. Moriarty Daley

Moriarty Daley, A. L. (2008, June). Overview of HPV: Scope of the problem. (Invited presentation). American Academy of Nurse Practitioners, National Harbor, MD.

Moriarty Daley, A. L. (2008, June). *Role* of the NP in preventing HPV: Patientfriendly care. (Invited presentation). American Academy of Nurse Practitioners, National Harbor, MD.

Moriarty Daley, A. L., Mays, R. & Mahoney, M. (2008, June). *HPV vaccination: commitment leads to prevention*. (Panel chair). American Academy of Nurse Practitioners, National Harbor, MD.

Moriarty Daley, A. L. (2008, March). Shall we play a game? Using games to enhance the presentation of classroom content. (Poster presentation). Technological Innovations in Nursing Education: Best Practices in Informatics and Simulation Conference, Hilton Head, SC.

Moriarty Daley, A. L. (2007, October). *This is YSN!* (Invited presentation). Yale University School of Nursing Alumnae/i Weekend, New Haven, CT. Moriarty Daley, A. L. (2007, September). HPV: Addressing the questions and concerns of patients and parents. (Invited presentation). Connecticut Children's Medical Center, Hartford, CT.

Moriarty Daley, A. L. (2007, September). *Clinical pearls for assisting teens to choose a contraceptive method.* (Invited presentation). Connecticut Children's Medical Center, Hartford, CT.

Moriarty Daley, A. L. (2007, September). Memories: A clinical education intervention to address the needs of teens who have experienced a loss. (Poster presentation). Connecticut Children's Medical Center, Hartford, CT.

Moriarty Daley, A. L. (2007, September). Educating and counseling patients and their families about HPV: Discerning fact from fiction. (Invited presentation). HPV Vaccine Continuing Education CD ROM Program.

Leslie Neal-Boylan

Neal-Boylan, L. J. (2008, June). *RNs with physical disabilities*. (Paper presentation). Annual Research Symposium, New York University, New York, NY.

Neal-Boylan, L. J. (2008, April). *Registered nurses with physical disabilities.* (Paper presentation). Connecticut Chapters of Sigma Theta Tau International, Western Connecticut State University, Danbury, CT.

Neal-Boylan, L. J. (2007, October). RNs with physical disabilities in the workplace. (Paper presentation). Association of Rehabilitation Nurses, Washington, DC.

Linda Honan Pellico

Pellico, L. H. (2008, April). *The use of art to improve diagnostic seeing*. (Paper presentation). Connecticut Chapters of Sigma Theta Tau International, Western Connecticut State University, Danbury, CT.

Pellico, L. H. (2008, March). Do you see what I see? Enhancing observational skills through art work. (Poster presentation). Eastern Nursing Research Society, Philadelphia, PA.

Pellico, L. H. (2008, March). Looking is not seeing: Using art to refine observational skills. (Paper presentation). Southern Connecticut School of Nursing, New Haven, CT.

Pellico, L. H. (2008, January). *Lessons learned teaching non-nurse college graduates: Year 19.* (Keynote). Simmons College, Boston, MA.

Pellico, L. H. (2008, March). *Have bones will travel: Introducing children to the wonders of the human body.* (Paper presentation). Connecticut Chapters of Sigma Theta Tau International, Western Connecticut State University, Danbury, CT. Pellico, L. H. (2007, October). Educating the "millenials:" Lessons learned, insights earned. (Keynote). Yale University School of Nursing Alumni Weekend, New Haven, CT.

Pellico, L. H. & Friedlaender, L. (2007, October). Do you see what I see? Observational skills can be enhanced with the use of art work and the experience translates into deeper seeing that results in enhanced diagnostic skill. (Paper presentation). Yale University School of Nursing Alumni Weekend, New Haven, CT.

Pellico, L. H. (2007, July). *Do you see what I see? Enhancing observational skills through art work*. (Paper presentation). Museum of Modern Art, Hadassah's National Convention, New York, NY.

Nancy S. Redeker

Redeker, N. S. (2008, May). Measuring symptoms across the trajectory of chronic illness. (Keynote). Center for Research on Symptoms, Symptom Interactions and Health Outcomes (NINRP20 Center). Nell Hodgson Woodruff School of Nursing, Emory University, Atlanta, GA.

Redeker, N. S. (2008, May). Sleep in the acute care setting: Priority or after thought? (Keynote). Munn Center for Nursing Research, Massachusetts General Hospital, Boston, MA.

Redeker, N. S. (2007, November). *Psychosocial and quality of life concerns related to sleep problems in cardiac patients*. (Invited speaker). American Heart Association Scientific Sessions, Orlando, FL.

Redeker, N. S. (2007, November). Promoting sleep in the hospitalized cardiac patient. (Invited speaker). American Heart Association, Scientific Sessions, Orlando, FL.

Heather Dawn Reynolds

Reynolds, H. D. (2008, May). *Learning to value contraception: Communicating with patients about contraception and the true risk of pregnancy.* (Invited speaker). American College of Nurse-Midwives Convention, Boston, MA.

Reynolds, H. D. (2007, November). Group prenatal care's impact on perinatal outcomes. Results from a two-site randomized controlled trial. (Paper presentation). University of Dublin/ Trinity College School of Nursing and Midwifery Conference, Dublin, Ireland.

Reynolds, H. D. (2007, October). Centering–A group prenatal care models reduces preterm births: Results from a two-site randomized controlled trial. (Invited speaker). Oklahoma State of the Science on Prematurity and LBW Conference, Oklahoma City, OK.

Nancy Reynolds

Reynolds, N. R., Alonzo, A. A., Nagaraja, H. (2008, March). A promising approach for optimizing the measurement of antiretroviral adherence with the AIDS clinical trials group adherence questionnaire. (Paper presentation). International Conference on HIV Treatment Adherence, Jersey City, NJ.

Reynolds, N. R. (2007, October). Smoking and illness representations of persons living with HIV: A promising link for intervention. (Paper presentation). Current issues in cigarette smoking and HIV/AIDS Workshop, Natcher Conference Center, NIH, Bethesda, MD.

Patricia Ryan-Krause

Ryan-Krause, P. (2008, June). *Childhood obesity*. (Invited speaker). McNeil Pediatrics, New Haven, CT.

Ryan-Krause, P. (2008, April). ADHD in children and adolescents: Closing diagnostic, communication and treatment gaps. (Invited panel participant). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Ryan-Krause, P. (2008, April). *Children's drawings: A valuable assessment tool across cultures.* (Poster presentation). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Ryan-Krause, P. (2008, April). *A-B-C's of school readiness*. (Invited speaker). Yale-New Haven Shoreline Medical Center, Guilford, CT.

Ryan-Krause, P. (2008, February). *Children's drawings: A valuable assessment tool across cultures.* (Poster presentation). Yale University School of Nursing Conference: International Nursing Collaboration: Opportunities and Challenges, New Haven, CT.

Ryan-Krause, P. (2007, October). Educating the Next Generation of Yale Nurses. (Invited speaker). Yale University School of Nursing Alumnae/i Reunion Weekend, New Haven, CT.

Ryan-Krause, P. (2008, October). Genetics in the curriculum. (Invited speaker). Yale University School of Nursing Alumnae/i Reunion Weekend, New Haven, CT.

Ryan-Krause, P. (2007, October). *Think* aloud method for teaching advanced management skills. (Invited speaker). Yale University School of Nursing Alumnae/i Reunion Weekend, New Haven, CT.

Ryan-Krause, P. (2007, September). Family history: An important tool in developmental assessment. (Poster presentation). Connecticut Children's Medical Center, Hartford, CT.

Ryan-Krause, P. (2008, September). Active or hyperactive? ADHD in the preschooler. (Paper presentation). Connecticut Children's Medical Center, Hartford, CT.

Lawrence D. Scahill

Scahill, L. D. (2008, May). *Psychopharmacology in autism: Update and new directions*. (Invited speaker). The Center for Autism Research Distinguished Lecture Series, Philadelphia, PA.

Scahill, L. D. (2008, May). *Psychopharmacology in autism: What every mother should know.* (Invited speaker). The Center for Autism Research Distinguished Lecture Series, Philadelphia, PA.

Scahill, L. D. (2008, April). *Cognitive behavioral therapy for disruptive behavior in Tourette syndrome*. (Invited speaker). Tourette Syndrome Association, 2008 National Conference, Alexandria, VA.

Scahill, L. D. (2008, April). *Behavioral Sciences Consortium: A TSA success story.* (Keynote). Tourette Syndrome Association, 2008 National Conference, Alexandria, VA.

Scahill, L. D. (2008, January). Acute and maintenance psychopharmacological treatment of autism: clinical applications. (Invited speaker). American Academy of Child and Adolescent Psychiatry, Psychopharmacology Update Institute, New York, NY.

Scahill, L. D. (2008, January). What every mother should know. (Invited speaker). Vanderbilt University, Department of Psychiatry Grand Rounds, Nashville, TN.

Scahill, L. D. (2007, December). *The place of pilot studies in drug development*. (Invited speaker). Autism Speaks, Satellite Symposium for American College of Neuropsychopharmacology, New York, NY.

Scahill, L. D. (2007, October). *Preschool psychopharmacology in children with pervasive developmental disabilities.* (Invited speaker). American Academy of Child and Adolescent Psychiatry, Boston, MA.

Scahill, L. D. (2007, October). ADHD: Pharmacologic and behavioral therapies. (Invited speaker). Yale School of Medicine, Department of Pediatrics, New Haven, CT.

Scahill, L. D. (2007, October). Treatment of Tourette's, tics, OCD, and other comorbid conditions in autistic patients: A psychopharmacological approach. (Invited speaker). Camp Venture, Annual Rockland County Autism Symposium, Suffern, NY.

Scahill, L. D. (2007, October). *The psychopharmacology of autism in children and adolescents*. (Invited speaker). Conference at Sheppard Pratt Health System, Autism Through the Lifespan, Towson, MD.

Scahill, L. D. (2007, August). *Meet the expert*. (Invited seminar). European Society for Child and Adolescent Psychiatry, International Congress, Florence, Italy. Scahill, L. D. (2007, August). *Definition* and epidemiology of psychopharmacologic treatments of tics and ADHD. *TS new directions in behavioral interventions*. (Invited workshop). European Society for Child and Adolescent Psychiatry, International Congress, Florence, Italy.

Scahill, L. D. (2007, July). *Diagnosis and treatment of tourette syndrome*. (Invited speaker). Iowa School Nurses Association, Annual Meeting, Des Moines, IA.

Scahill, L. D. (2007, July). *Psychopharmacology of autism: What really works*. (Invited speaker). Autism Speaks, National Meeting on Autism, Mexico City, Mexico.

Dena Schulman-Green

Schulman-Green, D. (2008, April). *Measuring Quality of Care in Hospice and Palliative Care Programs*. (Symposium). National Association for Hospice and Home Care March on Washington and Legal Symposium, Washington, DC.

Schulman-Green, D. (2007, November). Compared experiences of care management and care transitions between women with advanced breast cancer and ovarian cancer. (Poster presentation). 6oth Annual Meeting of the Gerontological Society of America, San Francisco, CA.

Juliette Shellman

Shellman, J. & Ennis, E. (2008, May). The meaning, patterns, and functions of reminiscence in older African-Americans. (Poster presentation). Yale Clinical Center for Investigation Scholars Research Conference, New Haven, CT.

Loskutoff, E., Ennis, E., Turkman, Y. & Shellman, J. (2008, April). *Approaching advance directives through the use of reminiscence*. (Poster presentation). 20th Annual Eastern Nursing Research Conference, Philadelphia, PA.

Shellman, J., Mokel, M., & Wright, B. (2007, November). *The effects of a reminiscence program on depression in older African-Americans*. (Paper presentation). 60th Annual Scientific Meeting of the Gerontological Society of America, San Francisco, CA.

Shellman, J. & Barringer, S. (2007, October). Increasing cultural sensitivity and community health skills in nursing students, partners in caring model. (Poster presentation). International Conference for Community Health Nursing Research, The Andalusia Institute of Public Health, Grenada, Spain.

Marianne Terisa Stone-Godena

Stone-Godena, M. T. (2008, May). Urinary tract infections in the nonpregnant woman. (Paper presentation). American College of Nurse-Midwives, Annual Educational Conference, Boston, MA.

Martha K. Swartz

Swartz, M. (2008, April). *Professional issues certification forum*. (Paper Presentation). National Association of Pediatric Nurse Practitioners, Nashville, TN.

Swartz, M. (2008, April). Publish your practice: Professional writing for the PNP. (Workshop). National Association of Pediatric Nurse Practitioners, Nashville. TN.

Swartz, M. (2007, August). *Scopes and standards of pediatric nursing practice: A unified voice*. (Paper presentation). International Congress on Pediatric Nursing, Athens, Greece.

Sandra Lee Talley

Talley, S. L., Hamera, E., Connelly, P. & Price, H. (2007, October). 'Essential' curriculum guidelines for baccalaureate education for psychiatric nursing. (Educational council report). American Psychiatric Nurse Association, Orlando, FL.

Meredith Wallace

Wallace, M. (2008, April). End-of-life care graduate core curriculum: Implications for NP student knowledge and practice. (Paper presentation). National Organization of Nurse Practitioner Faculties, Denver, CO.

Wallace, M. (2008, March). *Measuring illness uncertainty in men undergoing active surveillance (AS) for prostate Cancer.* (Paper presentation). Eastern Nursing Research Society Regional Conference, Philadelphia, PA.

Wallace, M. (2008, March). *Gerontologial nurse education and certification program.* (Poster presentation). Eastern Nursing Research Society Regional Conference, Philadelphia, PA.

Wallace, M. (2007, November). *Palliative care nursing research with older adults.* (Symposium presentation). Sigma Theta Tau Conference, Baltimore, MD.

Wallace, M. (2007, November). *Leveraging a VA partnership to craft a clinical nurse leader (CNL) program*. (Paper presentation). Sigma Theta Tau Conference, Baltimore, MD.

Wallace, M. (2007, October). Adapting the uncertainty management intervention for older men undergoing the watchful waiting management approach to prostate cancer. (Invited presentation). University of California, San Francisco, School of Medicine, Active Surveillance for Early Stage Prostate Cancer.

Robin Whittemore

Whittemore, R., Melkus, G., Wagner, J., Alexander, N., Zibel, S., Visone, L., et al. (2008, June). A *lifestyle program to prevent type 2 diabetes*. (Poster presentation). American Association of Nurse Practitioners, Annual Conference. Baltimore MD

Whittemore, R., Melkus, G., Wagner, J., & Grey, M. (2008, May). Implementation of a lifestyle change program to prevent type 2 diabetes delivered by nurse practitioners in primary care. (Paper presentation). Centers for Disease Control Diabetes Translation Conference. Orlando. FL.

Whittemore, R. & Lindemann, E. (2008, April). *An art and writing program for adults with type 2 diabetes*. (Poster presentation). Integrative Medicine, New Haven, CT.

Whittemore, R. (2007, September). Intervention development research. (Invited speaker). McGill University and University of Montreal, Canada.

Whittemore, R. & Dixon, J. (2007, July). Integration in chronic illness. (Poster presentation). International Institute for Qualitative Methodology, University of Edmonton, Alberta, Canada.

Ann B. Williams

Wang, H., He, G., Zhou, J., Li, X., Fennie, K. P. & Williams, A. (2008, March). *Consistent ART adherence improves outcomes in Central China*. (Paper presentation). 3rd International Conference on HIV Treatment Adherence, Jersey City, NJ.

Li, X., Wang, H., Williams, A. & He, G. (2008, March). *Self-reported stigma among people living with HIV/AIDS in South Central China*. (Paper presentation). International Conference on HIV Treatment Adherence, Jersey City, NJ.

Knafl, G., Fennie, K. P., Bova, C., Friedland, G., O'Malley, J., Dieckhaus, K. & Williams, A. (2008, March). *Dependence of longitudinal HIV viral load on adherence controlling for initial CD4 count*. (Paper presentation). 3rd International Conference on HIV Treatment Adherence, Jersey City, NJ.

Womack, J., Grey, M., Williams, A., Cole, S. R., Schneider, M. F., Minkoff, H., Anastos, K., Cohen, M. & Tien, P. C. (2008, March). *Combined hormonal contraception and metabolic outcomes in women with and at risk for HIV disease.* (Paper presentation). Eastern Nursing Research Society Conference, Philadelphia, PA. Knafl, G., O'Malley, J., Fennie, K. P., Bova, C., Dieckhaus, K., Friedland, G. & Williams, A. (2007, November). Adaptive modeling of longitudinal HIV viral load data. (Paper presentation). American Public Health Association, Washington, DC.

Womack, J., Grey, M., Williams, A., Cole, S. R., Schneider, M. F., Minkoff, H., Anastos, K., Cohen, M. & Tien, P. C. (2007, August). *Progestin-only contraception and metabolic outcomes in women with and at risk for HIV.* (Paper presentation). International AIDS Society Conference, Mexico City, Mexico.

Williams, A., Le, S. T., Wu, C., Burgess, J. D., Duong, H. T., Fennie, K. P., Colby, D. & Libman, H. (2007, July). *Evaluation* of an HIV/AIDS training program for Vietnamese nurses. (Paper presentation). International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention, Sydney, Australia.

Wang, H., He, G., Li, X., Chen, X., Yang, A., Fennie, K. P. & Williams, A. (2007, July). *Self-reported ART adherence in Central China*. (Paper presentation). International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention, Sydney, Australia.

Walter Zawalich

Mamillapalli, R., VanHouten, J., Zawalich, W. S. & Wysolmerski, J. (2008, June). *OR21-5: the calcium-sensing receptor* (*CaR*) differentially regulates cAMP and PTHrP secretion in normal vs. transformed breast epithelial cells. (Paper presentation). Chevy Chase, MD.

As we go to press for this second issue of Yale Nurse, we are invigorated by Reunion 2008 at YSN! Reunion welcomes back all alumnae/i every fall, and this year was no different. The Reunion Weekend's theme, Yale Nurses and Leadership: From Vision to Voice. resonated with all who attended. Programs ranged from discussions of social consciousness to adventures in advanced risk-taking. Look for photos and a recap of Reunion on page 38.

This issue of Yale Nursina Matters is devoted to community service. Who better to talk about community service than Yale Nurses? "I Am a Yale Nurse" features Anne Hutchinson '84, who served in the New Orleans area after Katrina and continues to organize volunteers to help with rebuilding houses and lives. YSN students get a wonderful foundation in serving others. Why not send us some news about how you serve the community in your area?

YSN's 82nd commencement may have occurred several months ago, but you'll find some great photos of the new class of Yale Nurses wearing caps, gowns, smiles, and maybe a few looks of relief!

The YUSNAA Board is working hard for you. Read about what they've been doing to improve communication among alums, students, and faculty. The Class News section is getting bigger and better. And given this year's Reunion theme, we want to hear your voice, too!

Yale Nurse is about you, your classmates, and fellow alums. One alum said, "I'm so glad it's back! It's a great way to hear about my own class and the younger classes as well." Another said that she wrote to her classmates and encouraged them to read YNM from cover to cover: "Finding the return of Yale Nurse was a real bonus for us."

So please send your photos and news-personal or professional, serious or lighthearted. We look forward to hearing from you!

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ValeNurse

AN ALUMNAE/I PUBLICATION OF YALE UNIVERSITY SCHOOL OF NURSING



Anne Hutchinson '84 at the front door of an almost rebuilt double shotgun home in mid-city New Orleans.

I AM A YALE NURSE

BY KARLA A. KNIGHT '77

Anne Hutchinson '84

It wasn't just any magazine that caught Anne Hutchinson's attention in 1980: It was a copy of Yale Nurse that belonged to her mother, Elizabeth "Betty" Hutchinson '45. In her personal life, Anne Hutchinson '84 had been impressed with the nurse-midwife who taught her childbirth classes and then really appreciated the pediatric nurse practitioner who cared for her daughter, Jenefer, as a baby and toddler. So when Hutchinson came home for a visit, she read Yale Nurse, which featured the Pediatric Nurse Practitioner (PNP) program, and she was sold. This from a woman who was determined never to become

a nurse.

Hutchinson graduated from Connecticut College and spent three years with the Peace Corps in Ghana, an experience that spawned her interest in international health. After earning a master's degree in oceanography from Oregon State University, Hutchinson spent a third of her time on a ship, a third with a microscope, and a third on a computer; she enjoyed the research science but missed working with people.

Suddenly inspired by the Yale Nurse article on PNPs, Hutchinson applied to YSN, was accepted, and began her Yale studies with the intent of becoming a nurse-midwife. Donna Diers '64, then Dean of the School, encouraged her to follow in the footsteps of another real-life Anne Hutchinson, this one from the 1600s. The older Hutchinson was one of the earliest feminists, who also attended many births. But present-day Hutchinson was drawn more to pediatrics. Her thesis was based on a summer in Tanzania, where she studied development in babies who lived in orphanages. Children under the age of two were left isolated in cribs every day, all day, and the effects on their development were, of course, enormous and devastating.

After beginning a career as a PNP in two private practices in Pittsfield, Massachusetts, Hutchinson still wanted to study international health. After her three children went off to college, she graduated from Tulane University in 2003 with her third master's degree, this time in public health. She studied tropical medicine, economies of third-world nations, and business management. All of her classmates were from or had worked in developing countries. After her graduation, Hutchinson took a three-month position in Ethiopia as a surveillance officer

for a Centers for Disease Control and Prevention (CDC) polio project in partnership with the World Health Organization. She spent her winters teaching in a national park in Suriname, where she reached her destination by tiny plane or a dugout canoe.

But when Hurricane Katrina hit New Orleans and the Gulf Coast in 2005, Hutchinson brought her skills as a nurse and her experiences in public health back home to America. Because of other commitments, including another trip to Suriname, she didn't make it to New Orleans until the week of Mardi Gras in February of 2006. For two weeks, Hutchinson witnessed and worked among the devastation caused by Katrina. This was not the place she knew while studying at Tulane; it was, however, the scene predicted in her disaster management class for the flooding in New Orleans in the presence of a Category 5 hurricane. Though Katrina was "downgraded" to a Category 3 at landfall, the predictions for casualties and infrastructure destruction were dead on. Describing New Orleans even in the best of times as "third-world America," Hutchinson says that the hurricane caused even greater suffering because there was no plan in place to evacuate the 40% of the population who did not have private transportation. Also, there was no shelter equipped to provide services in the event of flooding, and in addition, many buildings were in poor condition, full of dry rot and termites, making it easy for the water to destroy them.

That February, in her role as a volunteer nurse with the U.S. Public Health Service, Hutchinson worked in Plaquemines Parish south of New Orleans with people whose lives remained totally interrupted six months after the storm. There was still no access to regular health care. Months without even basic medications, unending stress, and processed foods caused skyrocketing blood pressures among survivors. All referral services, from eyeglasses to psychiatric care, were difficult to come by, and Hutchinson spent many phone hours trying to arrange appropriate care. And everyone needed someone to listen to their stories.

Her final weekend there was spent caring for a fellow volunteer nurse who developed a lung empyema with a very high fever. The ill nurse and Hutchinson had a chance to experience firsthand the shortage of hospital beds when they went to the emergency "room" at the New Orleans Convention Center, where military-style tents had been erected for outpatient emergency services. The colleague was transferred to the just-opened emergency department (ED) at Tulane University Hospital. The ED was overflowing as there were no inpatient beds available. Because of the severe shortage of nurses, Hutchinson had to provide the nursing care for her friend. People were dying

on either side of her. After thoracentesis and with intervention by her U.S. senators, the nurse was flown by air ambulance back to her home hospital in Oregon, where she made a complete recovery.

Realizing that the greatest need was housing (nurses could not staff hospitals if they had nowhere to live), Hutchinson learned that her church's national organization was working on repairing homes. Two weeks later she was back in New Orleans with the first of five volunteer building teams that she had organized. One of those volunteers was another Yale Nurse, Sylvia Metzler '84, a family nurse practitioner who was Hutchinson's housemate at Yale.

While volunteering in New Orleans, when they are not building houses, the volunteers are talking to the grateful owners. Hutchinson says that the woman whose home they are currently rebuilding has become much healthier, not by just losing some weight and getting her diabetes under control, but by having people listen to her. "At YSN, I learned how to ask questions, listen, and be flexible," says Hutchinson.

When Hutchinson is not working as a PNP or traveling to Louisiana, she continues to wear her community health hat by organizing a soup kitchen in her hometown. With her husband, Eugene Kalish (Yale Drama MFA '73, DFA '76), and nephew, Bryan, a high school junior, she makes her home in Great Barrington, Massachusetts. Hutchinson's family of nurses has come full circle, too. Her daughter Jenefer has also chosen to enter the nursing profession, following the tradition of her mother and grandmother.







Top: Sylvia Metzler '84 cutting trim for a New Orleans home.

Middle: Sylvia and homeowner Otha Charles in her New Orleans neighborhood. Otha hopes to be back in her home by Thanksgiving.

Bottom: YSN family affair: Jenefer Lewis, Betty Hutchinson '45w, Jayna Lewis, and Anne Hutchinson '84.

Commencement 2008

On May 26, 2008, eighty-three graduates celebrated the 82nd commencement of Yale University School of Nursing

Margaret Grey, Dean and Annie Goodrich Professor, presided over the ceremony at the historic Shubert Theater in New Haven.

Graduate **Leila Forman** displayed pride in her Nurse-Midwifery specialty.





Following the diploma ceremony, graduates, including **Deanna Barney**, mixed and mingled with their families and guests at a reception held at the Omni New Haven Hotel.





Associate Professor **Patricia Ryan-Krause** was congratulated upon receiving the Annie Goodrich Award for Excellence in Teaching.



The lively commencement address was presented by **Barbara Smith**, Professor and Associate Dean for Research at the University of Maryland, Baltimore, School of Nursing.

"You have found your home in nursing."

—SYLVIA PARKER '08

Bernice Coleman '83 Honored with Distinguished Alumna Award

Dr. Coleman was presented with the award on September 27 at the Annual Alumnae/i Banquet held at the Graduate Club in New Haven. The following is the text of the Award citation.

She grew up in the shadow of Yale-New Haven Hospital; her first job was as a nurse's aide at that very institution. Her preparation as an LPN whetted her thirst for knowledge, and after earning her baccalaureate in nursing from the University of Bridgeport, she became a Yale Nurse, graduating with a master's in medical/surgical nursing. Hooked on research and advanced practice, she went on to a PhD from UCLA and then a postdoctoral fellowship in immunogenics and an NIH genetics fellowship.

Putting together her research and her love for practice at the Comprehensive Transplantation Center and Ventricular Assist Programs at Cedars-Sinai Medical Center in Los Angeles, she is expanding the role of nurse practitioner, taking on the interdisciplinary management of patients. She works with patients for whom heart transplant is not an immediate option; they will go home with a device to keep them alive. She prepares the patient, the family, and the community with education, advice, and necessary protocols to support all of them when the patient returns home.

She has married her commitment to equity in health care with her science by studying the outcomes of cytokine gene polymorphism on ethnic transplant outcomes. This topic lies on the cutting edge of policy, science, and culturally safe practice.

She is as generous with her self as with her science. As Chair of the Nursing Research Council at Cedars-Sinai, she promotes study of biomedical research outcomes for bedside nurses. She helped establish an annual conference for showcasing research and quality improvement projects presented by nurses. She serves as a research mentor for new nurses in a program conducted by the National Coalition of Ethnic Minority Nurses.

She has found the thread of advanced practice nursing and research and woven it with the strong fabric formed in the New Haven shadows. The Yale University School of Nursing and her Alumnae/i Association take great pride in claiming Bernice Coleman of the class of 1983 and presenting her the Yale University School of Nursing Distinguished Alumna Award for 2008.

Graduating YSN student **Sylvia Parker** was elected by her classmates to deliver her inspiring address entitled, "If These Photographs Could Talk." The full text and audio are available online at http://nursing.yale.edu/ News/Events/Commencement/2008/student





YSN awarded Doctorate of Science in Nursing degrees to Terry Deshefy-Longhi and Janet Parkosewich. At a separate ceremony in historic Woosley Hall, three graduates from YSN's PhD program became the first to receive Doctor of Philosophy degrees in nursing from Yale University. Pictured, left to right: **Shan Liu, Allison Squires,** and **Karrie Hendrickson**.

Class News

Mimi Dye/Dunham MN '58

MSN '61 was a lecturer in March at the Wellesley College Club, where she discussed her forthcoming book: Assumptions Can Mislead: Failures in Health Care and Elsewhere, to be published circa 2010.

Ada Sue Hinshaw '63 was

welcomed as the new Dean for the Graduate School of Nursing at the Uniformed Services University, effective June 2008. Dr. Hinshaw has had a distinguished career that includes her most recent position as Dean and Professor of the University of Michigan's School of Nursing. While at the University of Michigan, she was selected to serve as the Distinguished Nurse Scholar in Residence at the Institute of Medicine, Washington, D.C., from 2006 to 2007.

Cheryl Beck '72 was named Distinguished Professor by the University of Connecticut Board of Trustees in January 2008. It is the University's highest faculty designation and recognizes exceptional distinction in research, teaching, and service. Dr. Beck is the first UCONN School of Nursing professor ever to be so honored. She is one of the preeminent scholars in qualitative inquiry in nursing research and is a leading nurse researcher on postpartum depression. The postpartum depression screening scale she developed is used worldwide and has been translated into 13 languages. Beck is the co-author of two seminal texts on nursing research, one for undergraduates and one for graduate students, that are also used worldwide. She is a fellow of the American Academy of Nursing, the highest honor for U.S. nurses.

Beverly Harper '73 received her

doctorate from Nova Southeastern University in higher education in June, 2008. She is recently retired after 32 years on faculty at Chicago State University. During her career, she also served at Cook Country Hospital for 30 years as a nurse-midwife, and she holds an MPH from the University of Michigan. She has twin sons: "We all went to the prom last week," she writes, "or so it seemed." Now she plans to slow down, pay attention to her health, work on her garden, and maybe look at world health programs (like those run by the Bill and Melinda Gates Foundation) after a while.

Christine Burke '76 recently

returned from a mission in the highlands of Ecuador, where she offered women's care to the indigenous people of the mountains. She had medicine and education for the people that visited her—sometimes whole families, complete with cows and pigs. Despite having no electricity, a leaky roof, and limited supplies, Tina called the experience "a joy," and hopes to return to "this magical place."

Mary Lou (Marie Louise) Bernardo '77 is the recipient of the 2008 Will Solimene Award for Excellence in Medical Communications in the Professional Interest Category. She received the award for her continuing education module *Social Anxiety Disorder Restricts Lives*, published by Nursing Spectrum.

Karla Knight '77 and YSN faculty member Ivy Alexander

received the 2008 Will Solimene Award for their book 100 Questions and Answers About Osteoporosis and Osteopenia, published by Jones and Bartlett (2006), and soon to be published in anItalian translation.



Karen White Pettigrew '78 and daughter Jessica Pettigrew '09 represented two generations of Yale Midwives at the annual conference in Boston of the American College of Nurse Midwives.



Luc R. Pelletier '82 was named 2008 Advanced Practice Psychiatric-Mental Health Nurse of the Year by the San Diego Psychiatric Nursing Society. Luc is Administrative Liaison at Sharp Mesa Vista Hospital. In his consultative/ supervisory role, he mentors and supervises staff and provides management counsel to lead RNs and supervisory personnel. He recently facilitated the development of mission and vision statements, core values, and goals for the Nursing Department. He helped to initiate bed meetings where multiple personnel meet to discuss shift activity and staffing, build cooperation, and promote effective handoffs. Luc developed a survey to measure the effectiveness of this activity. He shares his expertise with others in the community by serving as core adjunct faculty at National University and participates in local and national initiatives that ensure safe and equitable care for

behavioral health patients. The National Association for Healthcare Quality recently established the Luc R. Pelletier Healthcare Quality Award in honor of Luc's tireless efforts and contributions to improving health care quality. He served as the *Journal for Healthcare Quality's* editor in chief from 1998 to 2007. Luc can be contacted at luc.pelletier@sharp.com.

Marilyn K. Szekendi '86

completed a PhD in nursing science from the University of Illinois at Chicago in May of 2007. Her dissertation was titled, "Communication among Advanced Practice Nurses and Physicians Working in Teams in an Acute Care Setting." She is currently doing health care services research in patient safety at Northwestern Memorial Hospital in Chicago. Marilyn asks that anyone contact her with any questions at mszekend@nmh.org.

Bonnie Baloga-Altieri '89,

Immediate Past President of the Yale University School of Nursing Alumnae/i Association, became the first person to complete doctoral studies at the Villanova University College of Nursing in May 2008. Her dissertation was titled "Comparison of Staff Nurse Perceptions of Nurse Executive and Nurse Manager Leadership in Magnet and non-Magnet Hospitals."



Sally Richards '97 shares a photo of her daughter Kate, one year old, with her Yale Bulldog. Sally and her husband George

have three children, George (age 10), Will (age 7), and Kate. You can contact Sally at sallybrichards@yahoo.com.

Karen Baranowski, DNSc '99

took a position as President/ CEO of a large home care and hospice organization serving southern NH and northern MA in November 2002. She may be working with a Dartmouth fellow to study palliative and hospice care questions in the future. Karen was appointed by Governor Lynch to serve on the NH Board of Nursing, which addresses regulatory and adjudicatory issues related to licensure. She is also the incoming president of the NH Homecare Association, representing the industry in advocacy, legislative, and lobbying pursuits with the state of NH and CMS in Washington.



Jennifer McKenna '99 is currently working at Beth Israel Deaconess Medical Center (Boston) in the outpatient oncology clinic. She primarily works with patients with breast cancer at all stages of their disease and also works with general oncologists seeing patients with lymphoma, lung cancer, colon cancer, etc. She has been at BIDMC since graduating from YSN in 1999—first as a staff nurse on the inpatient oncology unit and then transitioned to an NP position in 2001. Jennifer lives in Milton, MA (just outside Boston) with her husband, Roba, and their two kids, Jack and Mae. Jennifer can be contacted at jmckenn2@bidmc.harvard.edu.

Michelle Dynes 'oo works

full time at the Mayo Clinic and completed an MPH degree in MCH with a concentration in global health in August of 2008. She recently traveled to Bangladesh in March/April 2007 to help train and implement the Home Based Life Saving Skills program (developed by the ACNM Department of Global Outreach). Michelle went back to Bangladesh in April 2008 and conducted a process evaluation that showed high satisfaction with the program, good coverage, and strong retention of information. She is also on the ACNM International Health Committee and the ACNM ad hoc Committee for Disaster Preparedness. Michelle and her family, husband Travis (a stay-at-home dad), son Forest (age 5), daughter Amara (age 4, adopted

In Memoriam as of February 29, 2008

Ruth C. Johnson '32 5/7/2008

Helen A. Wolf '38

Grace Nichols Knight '43 3/8/2008

Shirley M. Stiles '44 4/26/2008

Elizabeth S. Grigg '45w 11/18/2007

Mary Ellen Haw '45w 4/2/2008

Sara W. Pruitt '45 5/11/1998 Thekla R. House '46

1/25/2008 Elizabeth E. O'Neill '47w 5/3/2008

Norma A. Gardner '50

11/11/2006

Corinne M. Schultz '53 5/8/2008

Cornelia C. Whalen '55 12/17/2007

John E. Collins '72 5/19/2008

Carol A. Baer '73 2/4/2008

from Ethiopia), and son Shen (age 3, adopted from China) live in Rochester, Minnesota.

Meghan J. Sawyer '01 contin-

ues to be employed by CT Children's Medical Center as an acute care PNP at Waterbury Hospital. She married Todd Canedy on January 5, 2008. Todd is employed by the U.S. Air Force and is currently serving in Iraq as a First Sergeant with the 447 Air Expeditionary Group.

Michael D. Greene, MSN '02

received his DNP from University of Tennessee–Memphis in May 2008. He and his partner, Bruce Fitting, currently live in Palm Springs, CA, where Michael is in practice as an adult nurse practitioner. Michael can be reached at michoganp@aya.yale.edu.

Teresa Deshefy-Longhi, DNSc

'08 recently completed her doctoral studies at YSN, and at Commencement, received the symbolic diploma on stage from President Levin on behalf of all her fellow doctoral students. She has moved with her husband (and their two dogs) to Durham, NC, to accept one of three postdoctoral fellowships at Duke's Center for the Study of Aging and Human Development. Terry is being mentored by Drs. Linda Davis and Dean Catherine Gilliss, both of DUSON, in furthering her research in dyadic nonverbal communication in chronic degenerative illnesses.

Who is your class agent?

Every year, new class agents are nominated by the graduating students at YSN. Class agents have the important job of staying in touch with their classmates by updating them with news of fellow classmates, and activities at YSN, and reminding them of the importance of making an annual contribution to the YSN Annual Fund to help the students of YSN. Throughout the year, agents connect with their classmates by e-mail, correspondence, newsletters, and by phone.

This year, we welcome seven new agents representing the class of 2008, who have volunteered to help their classmates stay connected:

Psychiatric/Mental Health:

Deanna Barney, deanna.barney@aya.yale.edu

Pediatric Nurse Practitioner:

Bethany Skelton, bethskelton@gmail.com

Nurse-Midwifery:

Sarah Kleinman, sarahkleinman@gmail.com Jessica Theorin, jessTheorin@aya.yale.edu

Adult, Family, Gerontological, and Women's Health (A+):

Darlene Costello, darlene.costello@gmail.com Asefeh Faraz, asefeh.faraz@aya.yale.edu

Adult Advanced Practice:

Krista Knudson, kknudson2002@yahoo.com

If you are interested in becoming an agent for your class year, contact Elizabeth Roscher at elizabeth.roscher@yale.edu.



Alumnae/i Reunion Weekend September 25-27, 2008

Yale Nurses and Leadership: From Vision to Voice

Throughout sessions on Friday and Saturday, YSN alumnae/i and other eminent nurses led discussions on leadership, research, and practice in nursing. Left to right: Bethany Golden '03, Ruth Chen '02, Bernice Coleman '83, Didine Ebersole '58, Kit Rich Dreyfuss '58.



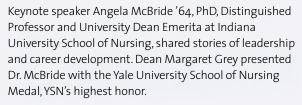


The Class of 1958 toast their 50th reunion during the Banquet Saturday night. YSN alumnae/i celebrating their 25th and 50th reunions (and beyond!) also gathered Friday night for dinner at historic Mory's.

















Annual Report from the 2007–08 President of Yale University School of Nursing Alumnae/i Association

Speed Mentoring drew current students seeking career advice from YSN alumnae/i.





The Distinguished Alumna Award was given to Bernice Coleman '83, pictured here with Dean Grey (see page 35).



Special Recognition Awards were given to Lisa Summers '83, and posthumously to John Collins '72. At left: Judy Lentz '76 (left) with Lisa Summers. Below: Judith Collins with sons John and Tucker.





As my year as president of the YSN Alumnae/i Association comes to an end, I want to take this opportunity to share some of the more significant activities and accomplishments of your Board. These accomplishments represent the dedication of time, expertise, and energy of everyone on the current Board of Directors and often the commitment of former Board members as their ideas and efforts are finally being reflected in concrete results.

The year started with important changes in the composition of the Board. With the addition of Linda Juszczak, DNSc '99, the School's doctoral graduates are now represented on the Board; and with the addition of Ruth Chen '99 (Ontario, Canada), the growing contingent of international alumnae/i have representation. These additions are a reflection of the alumnae/i association's continued commitment to represent YSN's inherent and growing diversity.

Efforts to enhance the connections between current students (future alums) and the alumnae/i and communication among alumnae/i are showing signs of success. Speed Mentoring (an adaptation of "speed dating"), initiated during last year's reunion weekend, proved to be an effective vehicle for connecting YSN alumnae/i and students. At this year's reunion, the second annual Speed Mentoring event again offered ED students an opportunity to meet alumnae/i and connect around shared interests and goals. During the Board's April meeting in New Haven, the Alumnae/i Association sponsored a program for students entitled, "Life After YSN: Tips to Surviving and Enjoying the First Years Out." Lisa Tangredi '06 and Christina Tangredi '06, representatives of an emerging Young Alumnae/i Group, organized the presentation, which focused on credentialing, negotiating employment contracts, and resuming a satisfying personal life, all critical concerns for those preparing for their May graduation.

Early in 2008, the Board was notified that YSN's publication Yale Nursing Matters, would incorporate a new section: Yale Nurse. The re-emergence of Yale Nurse reflects the efforts of previous Boards and particularly of former Board member Karla Knight '77, who has served as the liaison among the Alumnae/i Association, YSN's Office of Alumnae/i Affairs, and the editorial staff of Yale Nursing Matters for the past five years. It is anticipated that Yale Nurse will enhance alumnae/i communications by focusing on the activities and achievements of YSN's alumnae/i as well as the school's faculty and students.

Thank you for the honor and privilege of serving as your President; and let me congratulate Judy Beal '75 as she moves from the position of President-Elect to President of Yale University School of Nursing Alumnae/i Association.

Respectfully submitted, Judith Lentz '76

Networking: Not Just for MBAs

Networking isn't just for MBAs! Use the Yale Career Network to interact and network with Yale Alumni and students in nursing and across different fields. You can also serve as a resource to other alumni and students by joining the Yale Career Network and filling out your profile.

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- the satisfaction of advancing YSN's mission

A solid financial future—it is a goal that you and YSN share in common. You have been careful about building your assets and providing for your family. You are also committed to the learning and discovery that make YSN great. Can you advance all these objectives at the same time? Yes—with a planned gift to YSN!

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Additional information is available at www.yale.edu/development.



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