From Inpatient to Prom Princess

Nurses make a teenager’s prom dream come true

By Stephanie A. Kearns, RN

The Pediatric Oncology Unit, CMSC-8, had just rolled out the new Sunrise Provider Order Entry (POE) system. Talk about stressful times! The nurses had plenty on their minds. Were the orders correct? Did the lab labels print accurately? Were they getting this right?

But amidst the POE rollout, there was something much more important happening on the floor that day: Someone had to get to the senior prom. You only have one senior prom in your life. For 18-year-old Vanessa (not her real name), prom was this Saturday—and she wasn’t prepared. How could she be? She had been sick in the hospital for days.

Vanessa was brought to the hospital for diabetes insipidus, which had been caused by the steroids she had been given to reduce a recurrent germ cell tumor. The diabetes was out of control and she needed to get on insulin and be taught how to take care of herself with this new development.

This story probably sounds like a thousand others you have heard. Well, maybe not a thousand stories, but you know—someone needs to go to a prom, they don’t have a dress, someone else supplies it, and “Voila!” they are off to the dance, just like Cinderella herself.

But that is not how this story went, exactly.

Vanessa really wanted to go to her senior prom. Her nurse, Christine Woo, RN, and the resident on duty, Katie Sussman, had a lot to do to get her safely ready for discharge in time for the prom.

Then there was Julia Sussan, RN, in February 2006 as a bridesmaid in the wedding of her dear friend, Catherine. Catherine had cystic fibrosis, and had undergone a double lung transplant here at Hopkins in March 2006. She died later that month.

Julie, along with some of Catherine’s other friends and family, started a foundation called Catherine’s Fund 4 Cystic Fibrosis (CF4CF). In fact, the evening I met Julie, she was wearing her CF4CF tee-shirt under her scrubs. The foundation has raised more than $24,000 since it was started.

Julie had recently been working on cleaning out her closet and had even thought about donating all of those dresses to a charity. All of them, of course, except the green one.

Well, you know how young prom princesses are when they make up their mind on a color. Vanessa didn’t even want to hear about the other dresses once she heard about the green one.

Julie knew that she would never wear the dress again. So she sucked it up, called Tom, and talked him into putting down the paint brush, finding the dress, and carefully bringing it in for the soon-to-be prom princess.

Everyone else went into high gear. Makeup and nail polish were located, a sash was fashioned out of a few pillowcases, decorated with the moniker “Prom Princess.” Even the POE nurses jumped in and helped. All the orders were written, the teaching was done, and off she went to the prom. And, like Cinderella, she was late.

Pediatric oncology nurses see a lot of tragedy. Their stories don’t always have a happy ending. But without a doubt, that night certainly did, as one young lady was transformed from a patient into a princess!

On prom night, Stephanie Kearns, RN—the writer of this story—was working on The Pediatric Oncology Unit to support the rollout of the new POE clinical
Super-users to the rescue
Nurse specialists help get diabetes under control
by Lester Davis

With more than 2,000 nurses and nearly 1,000 beds, the task of improving care for diabetic inpatients at The Johns Hopkins Hospital could seem downright daunting. But with a cadre of Super-users—nurse experts in diabetes management and patient care—on each unit, the situation (and blood sugar levels) are under control.

“The disease can negatively affect a patient’s recovery,” noted nurse practitioner Joanne Dintzis, MSN, CRNP, CDE. “If hospitals don’t improve blood sugar levels of inpatients, they can suffer from wound infections and slower healing after surgery.” And insulin, which is often used to treat the disease, is considered a top-five high-risk drug that, if delivered incorrectly, can lead to death.

Dintzis serves as a clinical facilitator, charged by a taskforce of hospital leaders to improve diabetes care.

In 2006, improving care for diabetic inpatients gained steam after the American Diabetes Association and the American Association of Clinical Endocrinologists released a joint statement calling for improved care of diabetic patients in American hospitals. That year, the Hopkins taskforce developed a series of workshops to educate nurses about the dangers facing diabetic inpatients whose blood sugar is insufficiently monitored. But the workshops were reaching a tiny fraction of the nurses. “It was a good turnout,” said Dintzis, “but we still had an awful lot of nurses we were not reaching.”

That’s when the taskforce conceived the idea of Super-users.

Each of the hospital’s more than 40 care units has now committed at least one nurse to help educate other nurses about properly managing diabetes. Currently Hopkins has 90 Super-users, and the program is widely successful.

“We help the Super-users understand the hospital policies associated with diabetes care, and then they can be our liaisons with the staff on their units,” Dintzis said. “We’re really focused on keeping the patient safe and avoiding harm because it is a dangerous disease.”

Researchers Walk the Fine Lyne
With grants from the Dorothy Evans Lyne Fund, Hopkins nurses—from the hospital and the school—are partnering on research to improve patient care
By Lester Davis

Valid and Reliable?
Nurses Assess the Johns Hopkins Fall Risk Tool.
You may think that nurses at The Johns Hopkins Hospital are a bit overzealous in their devotion to studying and preventing inpatient falls. Then again, if you know that falls are the sixth leading cause of injury and death among inpatients, you might admire their spirit of inquiry and determination.

Hopkins nurses first developed a tool to assess and prevent patient falls back in 2003, said Patricia Dawson, MSN, RN, who helps coordinate the fall risk program. Today, it is used in all adult inpatient units at Johns Hopkins and has been embraced by more than 50 other hospitals in the U.S. and around the globe.

Because the tool has been adopted by so many clinicians, the Hopkins nurses decided to make sure the tool was measuring what it was designed to measure—fall risk. This required a rigorous study, so the nurses applied for a grant from the Dorothy Evans Lyne (DEL) Fund to test its reliability and validity. Like all research funded by DEL, the fall risk study is being conducted jointly between a team of nurses from the hospital and Johns Hopkins University School of Nursing.

Members include Stephanie Poe, MSN, RN, assistant director of nursing of clinical quality and informatics; Patty Dawson, MSN, RN, coordinator for Magnet and quality; Maria Cvach, MSN, CRNP, CDE. “If hospitals don’t improve blood sugar levels of inpatients, they can suffer from wound infections and slower healing after surgery.” And insulin, which is often used to treat the disease, is considered a top-five high-risk drug that, if delivered incorrectly, can lead to death.

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RN, assistant director of nursing clinical standards; Margie Burnett, BSN, RN, NCII; Linda Costa, PhD, RN, nurse researcher; and Elizabeth Hill, PhD, RN, Assistant Professor at the school of nursing.

“The school of nursing has really reached out to the hospital to help them with real life issues that the nurses are faced with on a daily basis,” said Cvach, assistant director of nursing and clinical standards for Central Nursing Administration. “They’re not just teaching the students to do research. The school of nursing is interested in solving some real life issues that we face at the hospital.”

In the summer and fall of 2009, nurses at Hopkins have been gathering information on more than 1,600 inpatients. Within two hours of admission, adult inpatients are assessed by a nurse, who looks at factors such as age, type of medication, and use of cumbersome hospital equipment (like an IV pole) that might increase the risk of a patient fall. Each patient in the study receives at least four assessments, which are then compiled by a researcher.

It’s too early to glean any information from the data that have been collected so far, says Cvach, but when the study is completed next summer, nurses may have a proven tool to help these at-risk patients.

**Teach-back to Reduce Readmission**

With little follow-up or guidance after hospital discharge, it’s no wonder that the 30-day readmission rate for U.S. heart failure patients hovers around 25 percent. To keep heart failure patients out of the hospital, nurses at The Johns Hopkins Hospital knew that patients must be given the right information—in a way they could understand and remember it.

As part of a DEL-funded pilot, nurses launched the so-called “teach-back” method to improve care transitions.

Teach-back starts in the hospital, when a nurse explains disease management, such as signs and symptoms, nutrition, medications and appointments. The patient repeats the information (“teaching back”) to the nurse, which gives them a chance to clear up any confusion.

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Team members from The Johns Hopkins Hospital were JoAnn Ioannou, MSN, MBA, RN, assistant director of medical nursing; Stacey Rotman, MSN, RN, heart failure care coordinator; Kelly Caslin, RN, nurse manager; and Karen Davis, MSN, RN, director of medical nursing. The principal investigator, Cheryl Dennison, PhD, ANP, and Jerilyn Allen, ScD, RN, joined the team from the School of Nursing; and Stuart Russell, MD, associate professor at the School of Medicine was also on board.

Teach-back starts in the hospital, when a nurse explains disease management, such as signs and symptoms, nutrition, medications and appointments. The patient repeats the information (“teaching back”) to the nurse, which gives them a chance to clear up any confusion.

Within five days of discharge, a nurse calls the patient at home to check in and assess the retention of the lesson. Two weeks later in the clinic, the patient will again go over the disease information.

**The Dorothy Evans Lyne Fund**

The DEL fund supports pilot studies conducted by teams of nurses from The Johns Hopkins Hospital and Johns Hopkins University School of Nursing. Each study is designed to improve patient care and outcomes, provide evidence to validate clinical practice, or examine the effectiveness of clinical care delivery systems.

The fund was established in 2001 by June R. Elliott, a grateful Hopkins patient, in honor of her long-time friend and Hopkins nursing alumna, Dorothy Evans Lyne ’59.
Emma Barth, RN, spent two years touring dozens of houses in the search for her dream home. She’d still not had success when producers from HGTV’s House Hunters approached her real estate agent about appearing on the reality show.

“We thought it would be a fun experience,” said Barth, a nurse clinician at The Johns Hopkins Hospital.

Newly married and renting in Baltimore’s Charles Village neighborhood, Barth cast her house-hunting net on the Canton area. Shooting for the program began in late May, and Barth and her real estate agent visited up to a dozen houses in a single day.

Almost immediately, Barth realized she had agreed to more than she bargained for. “It was a painstaking process,” she said, adding that the show’s producers had her focus on the more peripheral aspects of each house she visited, like paint color or the molding around stairs.

Being on the show, said Barth, “was a total eye-opener to the ways of reality television. I don’t think I would do it over again now that I know what the process is like.”

After several days of shooting—and missed time at work—Barth found the perfect two-bedroom, 1,300 square-foot row house in Canton. The house, says Barth, fit her checklist of must-haves: open design, new appliances, and spacious backyard. She and her husband moved in June 1, 2009.

The segment is scheduled to air around March 2010. If you miss the show on TV, you can watch it online at www.hgtv.com/house-hunters/show/index.html.

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Satisfaction On The Job

Surveys show that Hopkins is a good place to be a nurse

Job satisfaction is a key factor in attracting and retaining the best nurses,” according to Patty Dawson, MSN, RN, coordinator for Magnet and Quality for The Johns Hopkins Hospital. That’s why this June, more than 70 percent of the hospital’s nurses participated in two surveys to gauge their satisfaction and engagement in the workplace.

Among the 7,300 hospital employees who took the Gallup Q12 employee engagement survey were 1,700 bedside nurses. A more engaged nursing staff can mean improved efficiency, patient satisfaction, and safety, so with nurses comprising approximately 23 percent of Hopkins’ workforce, their participation in the survey was important.

“Our employees are our most valuable asset, and we want to have a way to capture their feedback,” said Carol Woodward, a Johns Hopkins human resources consultant who helps coordinate the Q12 survey every two years. The results for nurses showed improvement over the 2007 “Grand Mean” score as well as scores in 10 of the 12 individual questions on the survey, Woodward said.
Every two years, the Johns Hopkins Hospital nursing community engages in some formal strategic thinking. We pause from the hectic daily pace, take stock of the current healthcare environment, and determine where we need to head. Good strategic thinking is provocative and creative. It leads us into a future which cannot be fully understood or predicted.

This year’s planning has resulted in a set of agreed-upon priorities to focus our work and help us create greater value in four areas: healthy work environment, excellence and discovery in care, leadership and integrity, and respect and collegiality. These priorities are reflected in the poster, shown here and displayed on the units. Nurses on every unit are asked to select one project in each of the four priority areas—set a goal for each, make a plan, determine a measure of success, and push toward improvement over the next two years. This approach allows units to select projects that will benefit their unique cultures or special patient populations. My hope is that we will engage the wisdom of all the nurses on the front lines, and turn the hospital into a veritable learning lab.

Notable Nurses
Karen Haller received the 2009 President’s Award from the American Nurses Credentialing Center (ANCC) for her leadership, contributions to excellence, and service to the Magnet Program and the American Nurses Association. She was presented the award by Debbie Hatmaker, President of ANCC, and Jeanne Floyd, chief executive of ANCC, at the 2009 National Magnet Conference held in Louisville, KY. Haller received a standing ovation from an audience of over 5,000.
New Pavilion Improves Patient Safety
Nurses offer ideas on room design for hospital's new inpatient addition
By Susan Middaugh

Interior design requires a different skill set from providing bedside care. Nurses aren’t trained to read blueprints or to work with architects and electricians. And yet, the nursing staff at the Johns Hopkins Medicine-affiliated Howard County General Hospital (HCGH) played an important role in planning the hospital’s new 90-bed inpatient pavilion, which opened August 3.

The collaboration made sense for several reasons. Patient safety and improved quality of care were the driving forces behind the new addition. Nurses are in daily contact with the clinical needs and wishes of patients and their families. They know what works in a hospital setting and how small changes, such as the placement of a chair, or significant ones, like having private rooms, could work better for patients and staff.

Doree Turnage, RN, PCCN, clinical program manager for the new 3 Pavilion, participated in a committee of nurses that met regularly to offer ideas and feedback on room design to Beth Plavner, HCGH’s special projects administrator who was in charge of overall planning for the new four-story pavilion. “Safety was a first concern,” said Turnage, whose unit cares for a wide variety of illnesses from stable ventilator patients to those in need of pulmonary, renal, and surgical care. Many of these patients are elderly.

One outcome of these planning meetings: bathrooms in the new pavilion feature elevated commodes with side railings for ease of use. To decrease the risk of falls, safety railings were installed at strategic locations to assist patients in getting to the bathroom safely.

The nurses also wanted to make sure there was adequate clearance for their carts and equipment to navigate the hallways and patients’ rooms. “Beth constructed a mockup room so that the staff could offer their concerns and opinions,” said Turnage. “We also wanted enough space to accommodate family members who are visiting or spending the night. Having a family member present is very reassuring to an elderly patient. As a result, each inpatient room has a sleep sofa, a desk large enough for a laptop, shelving for personal items, and a closet.

The new addition contains three new 30-bed inpatient units, all with private rooms. Private rooms reflect a trend in hospital design since the introduction of HIPAA, the federal privacy law, Turnage explained. This trend also helps reduce patient infection because it lowers the risk of cross-contamination that could occur from having a roommate.

Reducing medication errors was also a priority for the hospital. One solution the nurses came up with was to keep each patient’s medications in an alcove outside his or her room. Each alcove in the new pavilion contains a place for the nurse to sit at a computer to take notes and monitor the patient’s heart rhythms on a telemetry screen. This arrangement is “nurse friendly,” said Jacqueline O’Neale, RN, a staff nurse on 2 Pavilion, who participated in a feedback session on the prototype room design. O’Neale and her colleagues suggested that each alcove house a locked drawer for each patient’s medications and a cabinet above the desk be set aside for storing supplies such as tissues, bedpans and urinals.

“All the nurses like the new room design and the alcoves,” said O’Neale. “We can sit at the desk and do our work. We don’t have to be at the nurses’ station.”

“The patients like it too,” said Turnage. “Each room has calming colors, a large window, and artwork hanging above each bed. The rooms are light-filled, clean, and quiet, which is more restful for the patients and consequently less stressful for the staff.” One patient recently commented that she had donated to the hospital and it was very nice to see her donation go to such good use, Turnage said.
Beat the Clock
CICU nurses cross-train for quicker angioplasties
By Susan Middaugh

Two years ago, the nurses in the Cardiac Intensive Care Unit (CICU) at Johns Hopkins Bayview Medical Center wanted to improve the chances of survival for patients experiencing chest pain and in need of angioplasty. In doing so, they had to “beat the clock” and extend themselves in unfamiliar ways.

The clock starts when acute myocardial infarction (MI) patients enter the emergency department for diagnosis and referral and ends in the catheterization lab. The state standard for door to balloon inflation time is 120 minutes. Bayview was taking slightly longer than that, but aspired to a more ambitious goal. “We wanted to go by the American Heart Association’s 90-minute standard because that was better for patients,” said Tim McFeely, RN, patient care manager of the CICU.

Closing that gap required ingenuity on the part of the CICU nurses and more than a little juggling. In addition to providing patient care on their unit, these nurses are responsible for codes, a hypothermia protocol for patients following arrest, and serving on a rapid response team. Then they added one more task. Eighteen CICU nurses out of a staff of 35 volunteered to be part of a “bridge” team to be cross-trained in the cath lab.

Here’s how the new procedure works. When a patient with acute MI comes into the emergency department, the CICU nurse goes downstairs to the ER to transport the patient to the cath lab. While waiting for other members of the team to arrive, this nurse stabilizes and preps the patient according to the lab’s protocols, remains present throughout the procedure, and then transports the patient to the CICU.

The bridge team began as a pilot in June of 2007. Since then, approximately 110 men and women have gone through this regimen, said McFeely, noting that “almost immediately we saw a huge improvement” in both the patients’ health and the nurses’ response time. In July 2009, the median door to balloon time at Bayview had been reduced to 70 minutes. “These patients used to be very sick,” said McFeely, “now they’re usually in the CICU for just one day.”

The bridge team has been a win-win for patients and nurses alike, says Heather Wilkerson, RN, CCRN, an advanced clinical nurse educator for the CICU. Wilkerson and cardiac cath lab nurse Jeff Burkins, RN, trained their colleagues in the new procedure. “The nurses love it,” she said. “It makes them feel empowered, like they’re doing something worthwhile for the patient. In the past many of our acute MI patients died or suffered a poor quality of life after discharge and were frequently readmitted to the hospital. Now many of our acute MI patients walk out of here with their families. They may need to make lifestyle changes, but their outcomes are much improved.”

The nurses have benefited in other ways, says Wilkerson. “They’ve enhanced their skill set by developing a certain level of competency in two different entities of the hospital.”

Janet McIntyre, MSN, RN, CPHQ, senior director of quality and patient safety at Bayview, was so impressed with the CICU nursing team’s efforts to “go well beyond the call of duty” that she nominated them for a regional award from Advance for Nurses magazine. The CICU nurses earned best in initiative and second overall for the best nursing team.
Overseas Delivery

Thanks to these Bayview nurses, an Air Force dad was able to coach his wife through labor—from Afghanistan.

By Susan Middaugh

Obstetrics nurses at Johns Hopkins Bayview Medical Center pride themselves on creating a personalized care plan for their maternity patients that combines compassion and expertise with sophisticated technology. But earlier this year Christy McPheeters, RN, received an unusual request from her supervisor. Joe Burns wanted to be with his wife, Amy (not their real names), during the birth of their first child, but he was stationed in Afghanistan with the U.S. Air Force. Could the maternity unit reach out to him electronically?

McPheeters was recruited for this special assignment because her husband also serves in the Air Force and frequently gets called overseas. “We try to accommodate all of our patients,” McPheeters said, “but this was the first time we had ever done a telecast delivery.” She describes the experience as new and exciting for her and an example of how accommodating the nursing staff is to its maternity patients.

The Freedom Calls Foundation, a nonprofit in Morristown, N.J., that offers free phone and video conferencing to U.S. troops, helped with the logistics. They arranged for Joe to be in a hotel conference center in Afghanistan where he could be connected to his wife in real time. The hospital supplied the television, a web cam that rotated 360 degrees, a speaker, remote control, and a microphone for Amy.

McPheeters admits that the presence of a TV camera in the labor and delivery room was an adjustment for her. Otherwise, her role was the same—being supportive of the patient, helping Amy push when appropriate and taking care of the new baby. Although the expectant father was physically thousands of miles away, his voice and persona were felt during his wife’s labor because of the video transmission and telephone hookup. The Air Force dad “was very personable and comfortable with the situation,” McPheeters said, which also helped her and Amy. “The couple were able to see and talk to each other” during what could have been an especially stressful event. The only complication was that the induction took longer than Freedom Calls had allotted. As a result, the new dad was no longer available by telecast, but he was able to be on the phone for the birth and able to take still photos of his new baby after the delivery. “The parents were very happy and grateful to have more than eight hours to spend together,” McPheeters said.

About six weeks later, the couple and their newborn returned to Bayview to express their thanks to McPheeters in person. Since then, the maternity unit has received a second request for the same service from an expectant mother who wants her husband, who is stationed overseas, to participate in the birth of their child—remotely. “We try to meet the needs of all of our patients,” said McPheeters. “But it’s nice to know that these options are available to military families.”

“This was the first time we had ever done a telecast delivery.”

—Christy McPheeters, RN
Emergency Accommodation

New procedures reduce emergency department closures by 50 percent
By Susan Middaugh

When the State of Maryland approved Suburban Hospital’s cardiac surgery program a few years ago, the hospital knew it had to be open to as many ambulance patients as possible. The problem was, Suburban’s emergency department (ED) was frequently overwhelmed and often had to close its doors to all but the most severe trauma cases.

Two years ago those closures started to decline when the nursing staff initiated a patient-centered change in procedure that requires the cooperation of nearly the entire hospital. One of the motivators was a need to be more community-minded.

Diverting ambulances away from the hospital meant “we weren’t there for the public,” said Cindy Notobartolo, RN, corporate director of Suburban’s emergency/trauma, safety, and security services. “Their doctor and medical records might be here, but they had to go further away to another hospital.” The nurses at Suburban thought they could do better.

The new procedure, called Code C, consists of a comprehensive plan to improve the flow of patients from the ED—which can accommodate approximately 50 patients—to inpatient beds. Of all Suburban’s admissions, 75 percent come through the ED.

“We looked at best practices and principles espoused by the Institute for Healthcare Improvement,” said Notobartolo, “then we fashioned our own protocol.” Interdepartmental cooperation and communication are at its core.

The decision to begin a pre-closure alert rests with the ED’s charge nurse, who is “often in the best possible spot” to assess the situation, said staff nurse Mary Welsh, RN, TNCC, CCRN, PHN, who also serves as a relief charge nurse. An RN for the past 24 years, Welsh has worked in Suburban’s ED for the past six. The goal of Code C, she explained, is to prevent a closure by paging a team that includes representatives from nursing, the ICU, and CCU as well as Admitting, Housekeeping, and Transport Services. Everyone gathers in the ED to discuss next steps. Through an exchange of information and subsequent deployment of staff to different parts of the hospital, a closing may be averted. For example, the cardio-thoracic unit might be able to accept a patient from the ED on a temporary basis. Another patient’s admission might be sped up because Housekeeping dispatches a staff member to clean a recently unoccupied room.

Because of Code C “we now have a shorter prep time for moving patients from the ED to another floor,” Welsh said, “and we’re closing the ED less often.” During the last fiscal year, which ended June 30, for example, Suburban had reduced the number of ED closures by 50 percent, said Notobartolo.

The new system is better for patients, said Welsh. “They don’t have to go to a hospital where the doctor doesn’t know them and is further away for their families to visit.”

Notobartolo agreed. “Our patient satisfaction scores are up and a recent poll of area physicians in Washingtonian magazine indicated that Suburban Hospital was one of the best hospitals to go to,” she said.

Welcome to the Family

Johns Hopkins Nursing welcomes the newest members of the family—the 604 nurses of the Suburban Hospital Healthcare System. This summer, the 238-bed, Bethesda-based Suburban Hospital joined Bayview and Howard as a wholly-owned subsidiary of the Johns Hopkins Health System.
Because we put healing and careers in motion.

We keep your work-life balance in harmony.

The atmosphere and approach to care is innovative and our facility size and specialty focus fosters a climate of camaraderie and support. Unique specialty services enhance our Medical Surgical, PCU, Rehab Specialty Units, Ambulatory Services, and Same Day Surgery.

RN Managers/Educators, Ready To Evolve Your Career?

Performance Improvement Coordinator
32 hrs/week

The successful candidate will coordinate the medical staff Patient Care Review process, facilitate RCAs and FMEAs, coordinate core measures, collect and analyze data, serve on and/or chair hospital-wide and nursing committees, and assist with all facets of Joint Commission survey readiness. The Performance Improvement Coordinator plays an active and vital role in patient care, safety, and outcomes.

The qualified RN should have a BSN, a minimum of three years of clinical experience, one year of quality related experience (may be demonstrated via management/non-quality position title), strong communication skills, and proficient computer skills in Word and Excel. This position does not necessarily require Performance Improvement/Quality experience, and in fact, is well-suited to RN Directors, Managers, and Educators.

RNs – Progressive Care Unit
Full-Time, Part-Time and PRN

We also have opportunities for RNs with critical care experience and ACLS/PALS certification (available at Kernan) in our Progressive Care Unit (PCU). Our 23-bed unit with five ICU/IMCU beds employs an innovative care delivery model that meets the needs of patients at all levels of recovery. Pain Management techniques include PCS, PCEA, and Peripheral Nerve Block. We also provide cardiac monitoring.

Kernan Orthopedics and Rehabilitation is a community teaching hospital, a member of the University of Maryland Medical System located in the Baltimore metropolitan area. Kernan Hospital values certification, offering a certification bonus in a position-related area, and support to obtain certification, free parking, financial support to attend external conferences, tuition reimbursement, and a comprehensive benefits package. To learn more, and to apply, fax resumes to 410-448-6854, or email Michelle Jones at mmjones@kernan.umm.edu, or call 410-448-6660 for more information. EOE.
**Students**

MSN student **Brooke Bucci** attended a White House healthcare reform press event in September. She joined about 150 nurses representing professional societies such as the MNA, ANA, SEIU, and AWHONN.

DNP students **Lynn Marie Bullock** and **Lisa Paris**, along with faculty member Mary Terhaar, won first prize at the National Nursing Staff Development Conference for their poster “Revolution in New Graduate Orientation.”

MSN/MPH student **Kara Franz** received a student grant from the Association of Professionals in Infection Control (APIC) to perform a baseline assessment of the administrative, environmental, and personal infection control infrastructure among multi-drug resistant tuberculosis (M(X)DR-TB) Clinics in South Africa. In June, Franz, along with faculty mentor Jason Farley and PhD student **Carrie Tudor**, collected data at 10 such hospitals throughout South Africa.

Family Nurse Practitioner students **Meghan Greeley** and **Monica Nandwani** received Johnson & Johnson sponsored scholarships to attend the Retail Clinician Education Congress.

Family Nurse Practitioner students **Kathryn Ruble** has completed her PhD studies and joined the Hopkins medical faculty as an instructor in oncology. She plans to continue her research in late-effects of therapy in cancer survivors and issues related to cancer survivorship.

Family Nurse Practitioner students **Liz Scala** is the first Hopkins nursing student to apply and be accepted to the Carey Augsberg-International Project, an international competitive strategy course that is part of the Johns Hopkins Carey Business School MBA program.

**Seth Taylor** ‘10 received a MidAtlantic Cardiovascular Foundation Scholarship.

**Staff**

The Blackboard Team—**George Anagnostou, Matt Chin, Theron Feist, Frank Hoey, Emily Jones, and Devin Wilson**—have successfully conducted 19 training sessions, trained 58 of 66 faculty (88%) and 34 administrative staff, and migrated 230 (100%) courses to the new platform.

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**Vaughn to lead technology initiatives**

**A**s the inaugural assistant dean for information and technology integration, Michael Vaughn, MS, came on board in November to lead the school’s strategic, operational, and innovative technological initiatives, such as real-time simulations involving manikins and online courses.

Vaughn brings 12 years of experience leading the integration of technology into health education, research, and practice. He comes to Johns Hopkins from Indiana University, where he pioneered the introduction of many cutting-edge technologies, including the first school-wide implementation of a course management system in 1997, implementation of a fully distance-accessible option for the PhD program utilizing sophisticated web conferencing technologies, and the construction of a state-of-the-art clinical simulation facility. He was also instrumental in establishing the IU School of Nursing Lifelong Learning department as a global provider of online continuing education offerings, reaching over 1,500 individuals annually.

“It is a tremendous opportunity for me to become part of the Johns Hopkins tradition with a school whose star is rising,” Vaughn said about his new position. “I am excited to work with faculty, students and practice providers to take full advantage of technology to improve healthcare and healthcare education.”
Meet the New Faculty Leaders

Congratulations to our new directors and chairpersons for the baccalaureate, master’s, and doctoral programs:

Cheryl Dennison, PhD, RN, ANP, PhD Admissions and Progressions Committee Chair
Linda Gerson, PhD, RN, APRN, Baccalaureate Admissions and Progressions Committee Chair
Susan Immelt, PhD, RN, Baccalaureate Curriculum Revision Committee Chair
Sarah “Jodi” Shaefer, PhD, RN, Baccalaureate Curriculum Chair
Daniel Sheridan, PhD, RN, FAAN, DNP Curriculum Chair
Julie Stanik-Hutt, PhD, ACNP, CCNS, MSN Program Director
Jo Walrath, PhD, MS, RN, Baccalaureate Program Director

Welcome Back

Alumnae Nicole Warren ’98, PhD, MPH, CNM, and Sharon Kozachik, PhD ’06, RN who returned to their scholarly roots this fall as faculty members at Hopkins. Kozachik has joined the Department of Acute and Chronic Care, and Warren is faculty in the Department of Community Public Health.

Faculty, department of community health

Joan Kub, PhD, APHN, BC was elected as a Northern Member at Large for the Association of Community Health Nursing Educators (ACHNE) for 2009-2011. She was also selected as a fellow of the AACN Leadership for Academic Nursing Program.

Faculty, department of health systems and outcomes

Patti Abbott, PhD, RN, BC, FAAN, FACMI, and Laura Taylor, PhD, RN, presented “Combining Science and Wisdom: Bringing Evidence-Based Practice into Nursing Education,” at the 10th International Congress on Nursing Informatics in Helsinki, Finland.

Sarah Szanton, PhD, CRNP, received a 2009-2011 John A. Hartford Foundation Claire M. Fagan Fellowship in geriatric nursing research to study how chronic stress affects the health of older adults.

Faculty, department of acute and chronic care

Anne Belcher, PhD, RN, AOCN, CNE, FAAN, presented “Religious and Spiritual Perspectives Among Clients in a Mental Health Day Care Setting” and “Spiritual Care: Scope of the Issue” at the 2nd Annual Meeting of The Society for Spirituality, Theology and Health at Duke University.

Faculty member Sharon Kozachik, PhD, RN, has received the 2009 Oncology Nursing Society (ONS) Foundation Research Grant for “Sleep, HPA Axis Activity, and Paclitaxel-Induced Neuropathic Pain.”

Rosemary Mortimer, MEd, MSN, RN, attended a White House healthcare reform press event in September. She joined about 150 nurses representing professional societies such as the, MNA, ANA, SEIU, and AWHONN.

Sharon Olsen, PhD, RN, AOCN, received her PhD—and the Janet Rexrode Southby Prize in Nursing Research—from the Catholic University of America in Washington, DC.

The staff of Johns Hopkins Nursing magazine has received the prestigious Sigma Theta Tau International (STTI) 2009 Award for Nursing Print Media.
Hopkins nurses are appearing in news media worldwide. Johns Hopkins Nursing brings you this new section, “Hopkins Nurses in the News,” to share their stories.

Baltimore Sun
In “Coping with the ‘he-cession’” (July 17, 2009), Nicholas Martin, accelerated ’10, (right), commented on men seeking more jobs traditionally held by women, including nursing. Martin had originally considered pursuing a master’s in business administration, but chose a second degree in nursing instead. “I didn’t want to be behind a desk, or anything like that,” he said. “I wanted to be on my feet. I really enjoy the interaction with people—whether it’s education or healthcare.”

In her op-ed, “Dangerous Times” (June 14, 2009), Jacquelyn Campbell, PhD, RN, FAAN, addressed the rise in domestic violence in the midst of the economic downturn, and how services to help the victims are also dwindling.

Tricia Angulo-Bartlett discussed the role that nurse practitioners will play in primary care if the “congressional health care reform delivers what it promises—insurance to an estimated 47 million Americans, who would be added to an already strained system” in the article, “Nurse Practitioners Pick up the Slack in Providing Primary Care” (August 9, 2009).

International Doula
Jessica Sabo ’07 described her experiences of assisting African women during the child-bearing process in her article “A Student Doula’s Experience in a South African Maternity Ward” (Vol. 17, Issue 2).

Peace Corps Fellows USA
“I build the socialization aspect of the Fellows program by collaborating with the students,” said Lori Edwards, MPH, BSN, APRN, BC, in the article “Putting the FUN in Fellows/USA” (spring 2009).

In Other News
Research!America picked up the blogs written by Nancy Glass, PhD, MPH, RN during her travels throughout Africa researching rape “from the perspective of perpetrators, [which] is an important way to build programs for prevention.” Follow Dr. Glass’s blogs at www.nursing.jhu.edu/blogs/blogs/nancyglass.

In the article “Nurses: Pain Affects Everything Else,” appearing in the September 14 United Press International newswire feed, Gayle Page, DNSc, RN, FAAN, and Sharon Kozachik, PhD, RN, note that pain is an “exquisite stressor affecting mood, sleep, the abilities to heal, and to fend off infection.”

The Miami County Republic (June 24, 2009) reported the progress of Mary McQuilkin ’09 and 27 other cyclists pedaling 4,000 miles across the country as part of the “4K for Hopkins” fundraising effort for cancer research. On the evening of June 22, McQuilkin and other cyclists stopped for the night in Paola, Kan. after covering 112 miles in a single day. The journey started in Baltimore on May 31 and finished in San Francisco on August 1.
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CHARITABLE GIFT ANNUITY RATES
as of Feb. 1, 2009

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To find out more, please contact Kathryn A. Shelton
Office of Gift Planning
410-516-7954 or 800-548-1268
kshelton1@jhu.edu
www.jhu.plannedgifts.org

Seek advice from a tax professional before entering into a gift annuity agreement. Hopkins gift annuities not available in all States.

Look ahead at Johns Hopkins’ charitable gift annuity program.

Look back at some of the best years of your life at the Johns Hopkins School of Nursing.
A Heart for Helping

Since I was a child, I’ve wanted to do something that would help make life better for the people around me; to help society in a meaningful way. When I started working as a certified nurse assistant in a local nursing home, I took notice of the care and personal interaction a nurse provides to a patient. I realized that the nursing profession is meant for only those who really have a heart for helping people. Nurses are diligent, dedicated, patient, and compassionate toward individuals in need.

And I knew that becoming a nurse was my true desire.

Today, I am enrolled in the BS-to-MSN program, where I continue my work with older adults through the school’s Community Outreach program. Once I complete my degrees, what I really want to do is work with adults in underserved populations. I will strive to be an exemplary contributing member of my community as a professional nurse, because, really, it feels good to help the people who need it most.

—Cyasha Brown, Accelerated ’10
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Here are a few reasons why Suburban Hospital is an employer of choice for some of the area’s best clinicians:

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- Named one of the 5 most highly prepared trauma centers in the nation
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- Physician Assistant – CVOR
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- Critical Care Pharmacist
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For more information visit our Web site, www.suburbanhospital.org and click on “Careers” or call: 301-896-3830 Email: recruitment@suburbanhospital.org

EOE. Suburban Hospital is a smoke-free environment.
Photos by Joe Kemp and Rob Smith

View more photos online at
www.nursing.jhu.edu/homecoming09.
2009

1. Phoebe Evans Letocha, archivist, and Violet Hembrow-Gay ’59
2. Christiane Garcia ’10, Neysa Ernst ’06, Rosemary Mortimer, faculty
3. Jane Smith Arevalo ’60 and Danielle Miller ’11
4. Anna Peterson ’11 and Nancy Kairia ’10
6. Pat Corbly Puchalik ’69 and Sandra Stine Angell ’69
7. Mary Rex Warfield ’59
8. Gertrude “Trudy” Jones Hodges ’59 and Gerry Pignato Peterson ’64
9. Mary Brister Burns ’54, Janet Cummings Snyder ’54, Yvonne Metoxen Brockman ’54
10. Eric Ipsen, accelerated ’10, Mary “Mimi” Lambert ’59, and Mary Sue Clark Spahr ’59
11. JoAnn Coleman, postmaster’s ’95 and Sue Verrillo, MSN ’03
12. Johns Hopkins alums singing their school song
13. Diane Aschbrenner, faculty; Karen Ball ’95; Nancy McAleer ’95
14. Barbara Pickel Daniel ’59 and June Persson ’59
I want to thank all of you who attended Homecoming this year. The educational program was very informative and well-attended as were the cocktail party and luncheon. At the Homecoming luncheon, Mary Warfield gave a wonderful talk about the class of 1959’s experiences in nursing at Johns Hopkins (www.nursing.jhu.edu/warfield). It was captivating, interesting, and moving. We need to find a way to film and broadcast these verbal accounts of the Hopkins experience over the years. All students and alumni would enjoy and embrace this history of Hopkins nursing through historic times.

The Nurses’ Alumni Association annual business meeting minutes and reports are usually shared in this section. The board decided to post the annual report online (www.nursing.jhu.edu/alumninimutes) to allow space for some class news in this issue of the magazine.

The primary area of focus for JHNAA’s next year is engagement. We will continue networking events for the students as well as sponsoring the pinning ceremonies. The membership committee will focus on community service as well as developing regional subcommittees which will reach out to Hopkins Nurses in their area. Also, a board director will focus on Facebook networking. We are reaching out to alumni in other areas to join committees through conference calls. If you are interested, please let us know (no matter where you live). Homecoming committee will be looking at creative ways to enhance this experience. Please do not hesitate to send me your comments and suggestions (JHNAA@son.jhmi.edu or 410-955-4285).

Join your fellow alumni and please consider paying your alumni dues! I would like to end my comments by thanking Lois Hoffer, JoAnn Coleman, and Sue Culp for all their support. They will be missed on the Board. JHNAA@son.jhmi.edu

Frances Lewis Elder is retired and lives in Nantucket, MA. She served in France as a U.S. Army nurse during World War II and has been active in many nursing activities and non-profit fundraising efforts. Helen Copperud Marconett lives in MN and enjoys doing volunteer work with schools, the church, mentally challenged, tutoring and loves visits from her family. Helen says her JHH friends have meant a lot to her through the years and has enjoyed visiting them. Jill Kinnell Niekamp lives in KY. Class memories include running through the eerie tunnel. Constance Heard Cole Waxter is enjoying life in the Erickson Retirement Community. She spent most of her professional career at Hopkins Hospital ending up as special assistant to the director of nursing service.

The highlight of her career was being the first president of a national nurses association for obstetrics and gynecologic nurses — AWHONN. She has many class memories. Can anyone else share their memories for class news?

Laura Brautigam June, P.O. Box 655, Joshua Tree, CA 92252; (760) 366-8181, LRJune@roadrunner.com. I urge all reading this, who were in the Cadet Nurse Corps during WWII, to contact their U.S. Representative to see if we can get House Resolution 1522 out of committee and passed. This would give us Cadet Nurses an honorable discharge. It has been estimated that the WASPS (women who ferried planes in the war) received an honorable discharge plus veterans’ benefits more than 30 years after the end of WWII which ended in 1945. Perhaps we can be so lucky! If a Cadet Nurse wishes to find out if her state provides any veterans’ benefits, she can write to her state’s Department of Veterans Affairs (California has none for us). In order to apply in case of some benefits, a Cadet Nurse number is necessary and can be obtained from the National Archives & Records Administration, 8601 Adelphia Road, College Park, MD 20740. Happy to read that Primrose Gundry Vining lives with two other JHH nurses in a retirement home in Charlottesville, VA. A call from Mona Staska Riley in CA said she was out of the hospital after a bout of congestive heart failure. She sounded well. Sadly June Cutts McLean of OR, sent in her husband’s July obituary, Dr. Edward McLean. Of all our classmates, I think he and June were the most traveled. Dr. McLean developed a treatment for recurrent corneal erosion still used today. Bunny Davis Faulconer of VA e-mailed and reported on a trip to our new building for our JH School of Nursing. Astrid Johnsen Reiley ’47 of NY
Our patients come from all over the country. And so do our nurses. They come to be part of the most professional, diverse and reputable nursing teams. They come to work beside the unequaled talent of Johns Hopkins physicians, nurses and staff. And they come for the benefits and unlimited opportunities for personal and professional growth.

Join our team. Be the next face of Johns Hopkins.

For additional information or to apply online, visit www.workingathomjohns.org
sent on the name of a prescription for arthritis in my right finger. How thoughtful! Sally Carton Mitchener of NC from the Class of 6/46 wrote since she thought her class no longer had a representative. Sally keeps in touch with several JHH grads, and still plays duplicate bridge. Classmates: Remember class news is online @ www.nursing.jhu.edu/alumni/classnews

‘49 Kathleen Connolly Anello is retired, living in a senior residence and trying to keep up with everything. She enjoys walking, reading, politics, public affairs, music, drama, cards, and all her friends. One achievement Ruth Preston White recalls is being the recipient of a US Public Health Grant for research while working at the University of Vermont as an Assistant Professor in Community Medicine in ’63. The study was patient oriented. She remembers the warm and friendly classmates, who were in awe of Miss Wolf and her support of the students.

‘50 Class Reporter — Betty Borenstein Scher, 1190 W. Northern Parkway, #225, Baltimore, MD 21210, (443) 449-5934, lbscher@comcast.net. Not too much news this time. First of all, Homecoming was nice, but a bit lonely as far as seeing classmates and alums in classes near ours. Class of 1949 “celebrated” their 60th, but no one was there to represent them. Next year will be our 60th, and I am really hoping some of us can manage to get back for some kind of celebration. I know some of us can still travel alone and others can travel with an “assist.” A reunion letter I sent out got no response—so far, no response, so I only can trust all is well there with her flowers and pets. As for me, Betty Borenstein Scher, I continue my activities. My special love is my continued work at the Medical Archives cataloging each issue of the Alumni magazine. To anyone reading these notes, please realize that none of us can hold the proverbial candle to those earlier graduates. I have “met” so many of them through the magazine pages, outstanding women whose names have never entered nursing history books and are not even recognized by people of today. The family is fine, so I will not bore you with repetitions of that news. Those of you not in these notes, remember the holiday season is approaching so send me your news. Thanks.

‘54 Yvonne Metoxen Brockman is currently retired and enjoys travel, family and art classes. She volunteers and is a board member for a pet therapy group, PALS FOR LIFE, and of American Technion Society. Remembers the old fashioned, bedside nursing and the back rubs. Endrea Gail Brunner was recently widowed. Her son and grandkids live nearby. She is retired from Baptist Medical Center in Little Rock. Her interests include her animals, bridge, books, choir and the Women’s Club. Her JH memories include the first time ‘in charge’ at night on OB. Mary Louise Brister Burns worked in hospital administration before working for her husband’s dentist office. Now retired, she enjoys needlework, reading, and traveling with her husband. They travel quite a bit and their favorite places include the saharas of Africa and Antarctica. Class memories: the tunnel under Broadway, morning nourishment with cookies, milk and coffee, Miss Courteney, Miss Patterson, and so many of the other instructors who had patience to teach and prepare us for a career in nursing. Helen Peters Finnley is still working at Linens and Lingerie—going on 26 years. She lives in Baltimore, and enjoys working out at Curves. Class memories include night duty on Osler 2, walking through the long tunnel at night (spooky!), and wonderful, lasting friends. Emily Storey Foster is retired and spends her time rug hooking, playing Mahjong, and singing in the choir. She received her BS from JHU and her MEd from Boston University. She is widowed and currently lives in MA. Maxine Garvin Fritz is currently retired and lives in Keymar, MD. She received her MS from University
of MD in 1962. She enjoys playing the organ, horse-back riding, doing church work, and traveling to various countries including Ireland, England, Scotland, Wales, Spain, Israel, and most recently China. Maxine belongs to the Red Hat Society—“Purple Passionettes.” Class memories include bandage class, and various experiences in the program and with classmates.

Lois Seymour Hessler received a certificate to practice P.H. in NY and has been a visiting nurse in Syracuse, NY for 27 years. She enjoys reading. Mary Eleanor Fitzhugh Hitselberger started her career at JHH; then to Henry Ford Hospital and Providence Hospital in MI. Now they live in Fond du Lac, WI. Jim retired as a dermatologist but didn’t like retirement so has been doing “Locum Tenens.” They are now in VA where he is at the VA hospital. It’s wonderful for her —everything furnished and free to do what she desires each day. Each week brings something new to do and explore. She does her research projects, travels with her sisters, and travels with Jim. Virginia F. Roach Hochstein worked at NIH for four years, and now works per diem in Occupational Health. Activities include gardening, and driving for Bethesda Help to deliver food and/or to take patients to doctor appointments. For years, Virginia volunteered for International Executive Service Corp. to help companies bring their product up to FDA standards. She has traveled extensively with her husband. Virginia’s class memories include going to the cottage on the bay, going through the tunnel, and witnessing an autopsy. Barbara Ann Johnson Law is retired and volunteers for American Red Cross and California Highway Patrol. She remembers the basement annex at the Hampton House and the cottage on The Severn. Mary Louise Sidwell Poole has been married to her husband for 55 years. For 23 years she was the director of College Health Service in DE and for three years was the Nurse Director of a Community Health Service which provides health care for individuals without health insurance. Currently she volunteers at a facility for 63 residents with special needs, and does mostly computer and phone work. Genealogy has been a hobby of hers for years. Class memories include dosage and solution course, the tunnel, sunbathing on the roof of the Hampton house, the Turtle Derby, deep appreciation for instructors and their knowledge, the statue of Christ, and the thrill of graduation day with all family there.

Sally A. Sample served three terms on the Joint Commission of Health Board of Directors in the newly created Nurse-at-Large position. She was acknowledged by the American Academy of Nursing as a Living Legend and honored by Johns Hopkins University with a Distinguished Alumna Award. She is an international hiker, plays golf, and participates in the performing arts activities at her retirement community. Class memories: “The Villains of Virus Villa,” named in the first year when everyone on the floor had “the virus,” Miss Courtney supervising her first shot; a patient’s husband who waited for her outside the gate to give her a small bouquet of flowers for her caring for his wife who died. Mary Dee Darby Shearer still volunteers as a nurse. She enjoys reading, music, and crafts. Mary remembers friends and cooking at Hopkins. Janet Cummings Snyder enjoys spending time with her grandchildren, gardening, reading, knitting, crewel work, and her granddogs. There are plans to move to a retirement community with her husband in the near future. From JHH, she remembers the 6th floor group, trips to the house on the Severn River, and friendships that have lasted a lifetime. Hopkins was a wonderful experience for her as a young girl from a small NH town. It opened the world for her.

Janice Tice Wing, retired since ’96, has a great career in OR nursing and as a nurse educator. She enjoys gardening and being a mother and

She Had a Dream

Fifty years ago, she was the school’s first African American graduate. Today, she is one of our most distinguished alumni.

In 1956, Gertrude Theresa Jones Hodges ’59—known as “Trudy” to her friends—ignored the advice of her high school guidance counselor. Johns Hopkins and the citizens of Baltimore are grateful that she did.

Defying the guidance counselor, who questioned whether the nursing profession was even open to blacks, Hodges sent a letter inquiring if The Johns Hopkins Hospital School of Nursing accepted “colored” students. She followed her dream, and in 1959 became the first African American graduate of the nursing school.

Hodges went on to earn her master’s degree, then began to teach nurses—at Hopkins, at St. Agnes, and finally at the two-year institution known today as Baltimore City Community College. It was there that she spent decades inspiring students, many of whom were from disadvantaged backgrounds, to work hard and achieve academic degrees in nursing. For her relentless pursuit of excellence in health care education, Hodges has been honored with a JHU Distinguished Alumna Award.

Learn more at http://alumni.jhu.edu/distinguishedalumni, or read Hodges’ Homecoming speech at www.nursing.jhu.edu/Hodges.
‘59 Congratulations on celebrating your 50th Reunion from JH. Thirty-one members of the class returned to Hopkins and had a great time renewing friendships. Mary Rex Warfield gave a wonderful presentation of the life of a Class of ‘59 student. Special congratulations to Trudy Jones Hodges on receiving the JHU Distinguished Alumna Award. A grand time was had by all.

‘61 Class Reporter—Wendy Gehlbach, 1141 Nettles Blvd., Jensen Beach, FL 34957, (772) 229-0601, wendygehlbach@gmail.com. Judy, Rose and I, along with our husbands, attended the 5th annual JHH Crab Fest. We ate non-stop for 3½ hours! We will be getting together for lunch with Flo Smith Milliot ‘56 and Barb Shepard Feigenbaum in November. I am back in FL now after spending several weeks visiting old friends. We had a wonderful overnight stay at Jim and Mary Ann Quinck Slowick’s. Jim fixed a delicious dinner for us. We were also lucky enough to have brunch with Roger and Julia Gooden Bolton. I tried unsuccessfully to connect with Billie Hawks Blosser while in Erie, PA. Don’t forget that we have our very own Facebook page.

‘63 M. Louise Fitzpatrick, EdD, RN, FAAN, Dean and Professor of Nursing at Villanova University College of Nursing, spoke at the 24th Quadrennial Congress of International Council of Nurses in Durban, South Africa, sharing her expertise on global partnership. At Villanova, she has worked to globalize the College of Nursing community through study abroad and health promotion experiences in countries such as England, Ireland, Japan, Peru, South Africa, and Nicaragua.

‘64 Sixteen members of the class celebrated their 45th class reunion at Hopkins. Eileen Sweetland Leinweber put together a wonderful reunion booklet on a CD. It brings everyone up to date on the accomplishments of the class. The reunion dinner was at Martha Norton Hill’s home. Thanks to Gerry Pignato Peterson, Nancy Schartner McKelvey, Helene Botta Williams, Jeane Hadden Shulman who also helped organize the festivities.

‘67 Diane Coalla Brabetz, RN, CPNP, PHN has lived in northern CA since 1984. She sends this update. “Since 1998, I have owned my own businesses — At Home Nursing, At Home Nursing Services & At Home Nursing Registry. We provide Personal Care Attendants for frail elders at home, provide licensed professionals for medically fragile pediatric clients, provide school nurses and supplemental staff to all kinds of facilities. She has been married since 1968. In addition to keeping busy with their nursing agency, they own a second home on the beach in Mexico where they go to recharge their batteries.

‘69 Members of the Class of 1969 came together for the reunion weekend in September 2009. There was a good showing for this our 40th reunion, and we had a wonderful time. Through the diligent efforts of Jeanne Brinkley, the Class of ’69 made a substantial donation to the Alumni Association. I think that it was our largest ever and will help defray the cost for nursing students attending Hopkins today. It is so much more expensive now than it was for us during our three years at Hopkins! Thanks to Jane Williams Ball, who created a wonderful memory book for our class. Those who attended the reunion reminisced about our adventures at Hopkins in the late 1960’s and were ever-mindful of members of our class who were not able to make the trip to Baltimore. There were tours of the hospital and a group even explored the halls of Hampton House. We rallied for Sandy Stine Angell who was awarded the Heritage Award during the luncheon on Saturday. Our class dinner at the Hopkins Club included a handful of amiable spouses who joined in the fun. We talked about creating a blog, and we agreed to return for our 50th anniversary, for sure, when we will receive a special medallion and lots of goodies! Congratulations everyone!

‘79 Reported by Jane Houck: There are 14 of us on the list from the School of Nursing, and I heard back from 11 (including myself in that count). Carolyn Dearborn appears to have gotten lost long ago and has not resurfaced. I tried to locate her on the nursing board list and found nothing. Anne York Hosking also seems to have disappeared. Barbara Hergenrother is still in Bel Air, MD, I think. I found a picture of her on the internet in a community chorus. I have left a message on her phone but have not yet heard back from her. Mary Watson is still in FL and still working. She does coding for coronary angiograms and other tests, has back problems and appreciates this job. Her mother died, and she doesn’t get back to Baltimore often. She will not attend, sends greetings. Nancy Dandy Patz is still in Grand Junction, CO. She and David, who is a sleep specialist, have a sleep lab, and she is the manager. She gets back to Baltimore fairly frequently to see her Mom and Dad who still live in the area. I had a great email from her about her family, daughter in grad school and son in med school. Of course it was funny regarding aging!! Sue King Plante and husband, Dave,
Featuring over 300 unique and original views of Baltimore, Washington, DC and New York City plus lots of CATS & DOGS!

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are still in the Boston area. She is an advanced practice mental health nurse who prescribes and treats for a private practice group. Elizabeth Kramer is back in Singapore. She and Michael were here in US last year. They were thinking of semi-retirement and bought a house in Chapel Hill, NC. However, the economy forced them to rethink that plan, and they are back to teaching again. Carol Kalfon is working part time here in Baltimore at the Greater Baltimore Medical Center in their finance department as a compliance auditor. She has had quite a year with diagnosis of cancer after being a 38-year survivor of breast cancer. She was diagnosed with cervical and uterine cancer in January, had surgery in April and just finished chemo at the end of July. She may be able to join us. Sue Renas Balfour and husband are still in WY. She is working as a school nurse and critical care nurse and also working on her master's in nursing education and expects to be done in December. She has also had a rough year with diagnosis of breast cancer last November. Had radiation treatment and latest mammogram was clear. Her mother, who lives in this area, has not been well. Now for those who came to reunion: Kitti Watts and her husband, Steve, are still in the Philly area. She has just received her master's in school nursing this past June and still working in school nursing. Gary Dunn and wife, Linda, are in Baltimore. He is still working for the Dept of Psychiatry here at JHH. Presently working on data collection and has joined that special group, nursing computer geeks. Mollie Geismer is still in FL with her husband. She is working like crazy on breast cancer clinical trials. Kris Schultz Roethlisberger and Terry are still in the area of Saginaw, MI but now live in the country. Kris is still teaching at the state university. Terry has retired from the Army. Jane Houck and Joe are still here in Baltimore. Joe retired a couple of years ago. I am working in HIV with a special grant for those who fail traditional out-patient care. This work combines all my past nursing experience, and I have a huge amount of freedom.

‘89 Reported by Anne Efron: Karen Daniels received her MS from the U of MD in 2007 and is working as a CRNP at Chesapeake Cardiology on the Eastern Shore of Maryland.

CALL FOR AWARD NOMINATIONS……

Johns Hopkins Nursing alumni, friends, faculty and colleagues are encouraged to nominate alumni to be recognized by the Johns Hopkins University. The JHU Alumni Association presents the following awards each year. Please submit nominees to the Nurses’ Alumni Office at 525 North Wolfe Street, Baltimore, MD 21205 or e-mail them to JHNAA@son.jhmi.edu.

Heritage Award Honors alumni and friends of JH who have contributed outstanding service over an extended period to the progress of the university or the activities of the Alumni Association.

Distinguished Alumni Award Honors alumni who have typified the JH tradition of excellence and brought credit to the university by their personal accomplishment, professional achievement, or humanitarian service.

Knowledge for the World Award Honors alumni who exemplify the JH tradition of excellence and have brought credit to the university and their profession in the international arena through their professional achievements or humanitarian service.

Outstanding Recent Graduate Award Honors recent graduates of JH (within 10 years of graduation) for outstanding achievement or service in their professional or volunteer life. Support of JH may be a consideration, but not a requirement.

Woodrow Wilson Award for Distinguished Government Service Honors alumni who have brought credit to the university by their current or recently concluded distinguished public service as elected or appointed officials.

An Angell Among Us

Student, alumna, nurse, nurse manager, admissions counselor, assistant dean—Sandra Stine Angell ’69, today the Associate Dean for Admissions and Student Affairs at the Johns Hopkins University School of Nursing, has undoubtedly given a lifetime of outstanding service to Johns Hopkins.

“Sandy is totally committed to each and every student having nothing but a quality experience at Johns Hopkins,” a colleague recently praised. “She is driven by what is best for the students. Frankly, the students are truly fortunate to have someone like her in their corner. And because of her commitment to the highest level of quality, and personal service to students, the entire staff in Student Affairs follows her example.”

For all her contributions to the university and alumni association, Angell has received a 2009 JHU Alumni Heritage Award.

Learn more at http://alumni.jhu.edu/heritage2009, or send a note of congratulations to sangell@son.jhmi.edu.
Thirty-six alumnae from 1942-1976 attended Homecoming this year. Eleven members of the class of 1959 were there to celebrate their 50th! All of the “Golden Girls” enjoyed their gold Mardi Gras beads and gold gift bags, which included a poem and a “Golden Glitter” scratch-off, donated by the Maryland Lottery. I heard of one $5 winner and would love to know if anyone else was even luckier!

Margie Beggs Turner, CHH ‘59 made a Homecoming Memory Book for each of her fellow classmates and donated a copy to the Archives. It was quite a labor of love and very special tribute to 50 years of memories. Thank you, Margie.

A raffle generated $275 to help offset Homecoming costs. Thanks to all who donated and congratulations to the winners.

Class of 1969 Celebrates 40th & Launches Facebook Page
Barbara Zelenka Spink, CHH ’69 reported that 16 members of her class enjoyed dinner at Liberatore’s in September. She has posted pictures from her reunion as well as Homecoming on a new FaceBook page. Go to “Church Home & Hospital School of Nursing” on Facebook to see the pictures and reconnect with some alumnae.

Good Samaritan Opens Church Home & Hospital Unit
On October 28, 2009, CHH alumnae gathered at Good Samaritan Hospital to share in the ribbon-cutting ceremony of the newest unit, dedicated to Church Home & Hospital nurses and staff. The manager of the new unit, Cathy Mickelwright Rossetti, CHH ’70, was on hand to greet visitors and assist with tours.

Thanks for the Archive Donation
Mildred Rogers, JHH ’67, who worked at Church Home for many years, donated a copy of her book, Poe Died Here. She collaborated with writer Fred Wehr on the project.

Linda Knoche Clarke, CHH ’64, donated a memory book she made for the 45th reunion this past summer. The workmanship is nothing short of a professional publication!

Thank you, Mildred and Linda, for these valuable additions to the CHH collection.

Tidbits
- The CHH cap can be obtained from Kay’s Caps by requesting School #33. Orders can be placed by phone (516-791-8500) or by mail (Kay’s Caps, PO Box 818, Valley Stream, NY 11582).
- CHH pins and rings are available from Vince Fino, 9650 Belair Road, Perry Hall, MD 21236, 410-256-9555.
- Transcripts can be obtained from Aniese Gentry at Quinlan Storage (formerly Chart One Storage) in Jessup at 888-416-5353 (ext. 7550 or 3907).
- Send any address changes or notice of deceased members to: Deb Kennedy, 1990 Gulfstream Court, Forest Hill, MD 21050; 410-893-2421, debkennedy29@hotmail.com.
January 4-6, 2010
Diagnosis, Care, and Management of Persons with HIV/AIDS
This three-day course provides nurses and other health care professionals with evidence-based clinical management strategies and prevention techniques for HIV and HIV/AIDS.

January 11-12, 2010
Nursing in Global Humanitarian Relief
This one week course is an introduction to the nurse’s role in global humanitarian relief. It is designed to give an overview of the skills needed to participate in providing health services to large populations in humanitarian emergencies.
Starting her new job as a Labor & Delivery nurse inspired Margaret Fink to envision this “OB Nurse of the Future.” “Sitting down with a blank piece of paper and a nice new Sharpie® pen is one of my favorite ways to relax,” says Fink, who completed the accelerated nursing program in July. “I can’t wait to see what new experiences will inspire me next.”