Medical Center

School of Medicine
School of Nursing
Hospital and Clinic

Vanderbilt
University
1999/2000

Containing general information and courses of study for the 1999/2000 session corrected to 1 July 1999
Nashville
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School of Medicine Calendar 1999/2000

FALL SEMESTER 1999
Registration and classes begin 4th year and half of 3rd year class / Tuesday 6 July
Registration and classes begin other half of 3rd year class / Monday 2 August
Registration 2nd year / Monday 16 and Tuesday 17 August
Registration 1st year / Monday 16 to Wednesday 18 August
Classes begin 2nd year / Wednesday 18 August
Classes begin 1st year / Thursday 19 August
Labor Day holidays for 1st, 2nd and 4th year classes / Monday 6 September
Mid-term exams 2nd year class / Monday 18 to Thursday 21 October
Fall break 1st year class / Wednesday 20 to Sunday 24 October
Fall break 2nd year class / Friday 22 to Sunday 24 October
Thanksgiving holidays / Thursday 25 to Sunday 28 November
Exam period elective courses 1st and 2nd years / Monday 6 to Friday 10 December
Exam period required courses 1st and 2nd years / Monday 13 to Thursday 16 December
Fall semester ends 1st and 2nd years / Thursday 16 December
Fall semester ends 3rd and 4th years / Friday 17 December
Holidays 3rd and 4th year classes / Saturday 18 December to Monday 3 January
Holidays 1st and 2nd year classes / Friday 17 December to Monday 3 January

SPRING SEMESTER 2000
Spring semester begins 1st, 2nd, 3rd and 4th year classes / Tuesday 4 January
Mid-term exams 1st and 2nd year classes / Monday 21 to Friday 25 February
Spring holidays 1st and 2nd years / Saturday 26 February to Sunday 5 March
Spring holidays 3rd year (Med., Surg.) Saturday 11 to Sunday 19 March
Spring holidays 4th year / Wednesday 15 to Sunday 19 March
United States Medical Licensing Examination – Step 2 / TBA
Instruction ends 4th year / Friday 21 April
Spring holidays 3rd year 9 (Ob/Gyn, Peds., Psych., Neuro.) / Saturday 22 April to Sunday 30 April
Exam period elective courses 1st and 2nd years / Monday 24 to Friday 28 April
Instruction ends required courses 1st and 2nd years / Friday 28 April
Exam period required courses 1st and 2nd years / Monday 1 to Thursday 4 May
Commencement / Friday 12 May
United States Medical Licensing Examination – Step 1 / TBA
Instruction ends 3rd year / Sunday 25 June
School of Nursing Calendar 1999/2000

FALL SEMESTER 1999
Orientation for nursing students (mandatory) / Wednesday 18 August–Friday 20 August
Classes begin / Monday 23 August
Homecoming / Saturday 9 October
Reading period / Monday 11–Friday 15 October
Thanksgiving holidays / Saturday 20–Sunday 28 November
Classes end / Friday 10 December
Reading days and examinations / Monday 13–Wednesday 15 December
Holidays begin / Thursday 16 December

SPRING SEMESTER 2000
Orientation for new students / Monday 10 January
Classes begin / Monday 10 January
Spring holidays / Saturday 4–Sunday 12 March
Classes end / Friday 28 April
Examinations / Monday 1–Wednesday 4 May
Commencement / Friday 12 May

SUMMER SEMESTER 2000
Classes begin / Monday 8 May
Classes end / Friday 11 August
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The Collection Advisory Forum advises the Eskind Biomedical Library about a wide range of collection development issues, including new ways to deliver information, strategies for upgrading the collection and access/ownership issues.

Scott Arnold, Erin Davidson, Clark Galbraith, Chris Jones, Terry Minnen, Barbara Petersen, Ann Richmond, Michael Smith, Nancy Wells.
Institutional Review Board for the Protection of Human Subjects

The Institutional Review Board for the Protection of Human Subjects comprises a Chair and the committees of Behavioral Sciences and Health Sciences, which are composed of physicians, behavioral scientists, a staff attorney, and community members. Acting through its two committees, the board reviews research proposals involving human subjects with respect to the rights and welfare of the human subjects, the appropriateness of methods used to obtain informed consent, and the risks and potential benefits of the investigation. Approval of the board or one of its component committees is required prior to initiation of any investigation.

Behavioral Sciences Committee


Health Sciences Committee


Medical Archives Advisory Committee

The Medical Archives Advisory Committee recommends overall collecting and operating policies and appraisal standards for the archival program for the Medical Center. It recommends new programs and directions, recommends policies of accession and deaccession, and encourages departments to prospectively and retroactively contribute material to the archives.

Harris Riley, Chair. Mary Lou Donaldson, Robert Collins, William Darby, Randolph S. Jones, David Robertson, Mary Teloh.

Medical Center Promotion and Tenure Review Committee

The Medical Center Promotion and Tenure Review Committee reports to the Vice-Chancellor for Health Affairs. Its membership is made up of representatives from the School of Medicine and the School of Nursing, and the Dean for Graduate Studies and Research. The committee is responsible for review of all promotions to tenure in the Medical Center.

University Animal Care Committee

The University Committee on Animal Care is responsible for the establishment and periodic review of University policy on the humane care and use of animals in experimentation. While not involved in the direct administration of any animal facility, the committee makes recommendations to the Chancellor on policies maintained by these facilities.

In reviewing and establishing such policies for animal care, the committee considers prevailing federal, state, and local laws and guidelines and their applicability to situations unique to Vanderbilt. The committee also is concerned that its policies lead to standards that will enhance the quality of scientific investigation in the University.

The committee is free to consult with and take recommendations to the Vice-Chancellor for Health Affairs, the Provost, and the deans of the various schools of the University as it formulates and reviews animal care policies.

(New members will be appointed to this committee by September.)

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Vice-Chancellor's Committee for the Veterans Administration

The Vice-Chancellor’s Committee is the fundamental administrative unit for policy development and evaluation of educational and research programs at the affiliated Veterans Administration Medical Center. It is composed of senior faculty members of the School of Medicine and others who are associated with the Veterans Administration Medical Center. Vanderbilt members are appointed by the chief medical director of the Veterans Administration on nomination by the Vice-Chancellor for Health Affairs.

Medical Center

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Medical Center Overview

VANDERBILT University Medical Center (VUMC) has a three-fold mission—the education of health professionals, research in medical sciences, and patient care. This mission is carried out in five primary operating units—the School of Medicine, the School of Nursing, The Vanderbilt Clinic, Vanderbilt University Hospital, and Vanderbilt Children’s Hospital, where patients receive exemplary care from physicians and nurses who are creative teachers and scholars.

Members of the faculty maintain proficiency and establish working relationships in the professional community by participating directly in patient care. Their practice encourages the free flow of ideas among the School of Medicine, the School of Nursing, and the clinical units, facilitating joint research activities. As a result, the Medical Center can undertake significant, innovative programs that set the standards for health care in the region.

Outstanding patient care and technological innovation have established Vanderbilt’s reputation as a leading referral center for the Southeast. Physicians from other states and foreign countries refer to Vanderbilt those patients whose health problems demand interdisciplinary skills and expert knowledge. Consequently, students in the Medical Center encounter a wider range of diseases than they would be likely to see in many years of private practice.

The Medical Center furnishes support for University programs in engineering and law—and makes possible the Ann Geddes Stahlman professorship in medical ethics as well as interdisciplinary programs in philosophy, religion, and the social sciences.

Through the education of physicians, nurses, biomedical scientists, and technicians in allied health professions—and an overriding concern for the care of patients—Vanderbilt University Medical Center strives to improve the health of the individual. Through scholarship and research leading to new knowledge about the nature, treatment, and prevention of disease, the Medical Center contributes to the improvement of the health of all.

Facilities

Vanderbilt University Hospital

The hospital is a dramatic, twin-tower structure of red brick, especially equipped to provide complex and vital services to its patients, continuing Vanderbilt’s century-old tradition of offering the best in patient care.
Routinely, more than 25 percent of patients seen in the Hospitals are from states other than Tennessee, with the majority coming from Kentucky, Alabama, and Mississippi.

*Children’s Hospital of Vanderbilt University Medical Center*

Located on the fourth, fifth, and sixth floors of the University Hospital, the Children’s Hospital meets the unique medical needs of infants and children. Specialty units include neonatal intensive care and a children’s kidney center.

*The Vanderbilt Psychiatric Hospital*

Opened in 1985, this hospital provides care for children and adolescents with general psychiatric problems, chemical dependency, and psychosomatic and neuropsychiatric problems. The hospital is a regional referral center for middle Tennessee and serves as a teaching and research facility for medical students and resident physicians in psychiatry.

*The Vanderbilt Clinic*

The 535,000 square foot Vanderbilt Clinic houses more than eighty-five medical specialty practice areas, the clinical laboratories, a center for comprehensive cancer treatment, a day surgery center. The clinic was opened in February 1988.

*Stallworth Rehabilitation Hospital*

Opened in 1993, this up-to-the-minute hospital is the only freestanding facility of its kind in Middle Tennessee. The eighty-bed hospital provides both inpatient and outpatient rehabilitation services to adults and children who have suffered strokes, head or spinal cord injuries, or have other orthopaedic or neurological diseases requiring rehabilitation. The hospital contains the Junior Chamber of Commerce Clinic Bowl Gymnasium, which is specially designed for handicapped sports, including basketball, volleyball, and indoor tennis. The Vanderbilt Center for Multiple Sclerosis is also housed in the hospital.

*Rudolph A. Light Hall*

Completed in 1977, Light Hall provides classroom and laboratory space for students in the School of Medicine. It houses the department of biochemistry, the department of molecular physics and biophysics, and the Howard Hughes Medical Institute. Named for Dr. Rudolph A. Light, former professor of surgery and member of the Board of Trust, Light Hall is connected by tunnels to Medical Center North and to the hospital and by bridge to the Medical Research Buildings and the Veterans Administration Medical Center.
Medical Research Building I

Laboratories and academic space for pharmacology, biochemistry, and molecular physiology and biophysics are housed in the Medical Research Building. The eight-story building, opened in 1989, is also home to the A. B. Hancock Jr. Memorial Laboratory for Cancer Research and the positron emission tomography (PET) scanner.

The building is linked to Light Hall on all levels and shares an underground level with The Vanderbilt Clinic. The Vanderbilt Clinic and the Veterans Administration Medical Center are connected to the Medical Research Building by a bridge.

Medical Research Building II

Laboratories and academic space for the Cancer Center, Clinical Pharmacology, Molecular Physiology and Biophysics, Pediatric Hematology, and several divisions of the Department of Medicine, including Cardiology, Diabetics, Endocrinology, Hematology, and Oncology, are housed in the Medical Research Building II.

Medical Center East

The original building, constructed in 1993, contains a surgical pavilion and an inpatient thirty-bed obstetrics unit. A four-floor addition was added in 1994. It currently houses the Children’s Hospital Outpatient Center, adult primary care practice suites, and academic and outpatient space for the Department of Ophthalmology and Visual Sciences.

Medical Center North

The 21-bed Newman Clinical Research Center, an inpatient orthopaedic unit, a Level I burn center, and a sub-acute care unit are located in Medical Center North. The complex also houses administrative support services for the hospital and Medical Center.

Faculty and administrative offices and research space for Medical School departments are in Medical Center North. The original portions of the building were completed in 1925. Since that time a number of connecting wings and buildings have been added.

Medical Center South

Medical Center South contains academic space for the Departments of Orthopaedics, Surgical Sciences, and Neurology and houses the School of Medicine Alumni and Development Office.
Vanderbilt Arthritis and Joint Replacement Center

This unique multidisciplinary resource for those with arthritis and rheumatic diseases is located adjacent to the Medical Center in the Village at Vanderbilt.

Vanderbilt Sports Medicine Center

Housed in McGugin Center, the Sports Medicine Center not only serves all University athletes, but is also the primary location for research, education, and treatment for all types of sports-related injuries.

Village at Vanderbilt

The Village contains outpatient facilities for psychiatry, orthodontics, and allergy. It also contains the Arthritis and Joint Replacement Center, the Voice and Balance Center, the Dialysis Center, and the Breast Center.

Oxford House

The Oxford House contains office space for a number of Medical Center functions. Major occupants include the Transplant Center, the Department of Emergency Medicine, and Medical Ethics.

Mary Ragland Godchaux Hall

Godchaux Hall contains classrooms, all offices of the School of Nursing faculty, and the following research and media centers:

Center for Nursing Research. Established in 1987 jointly by the School of Nursing, Vanderbilt Hospital, and Veteran’s Administration Hospital, the Center for Nursing Research develops and tests clinical devices and instruments; conducts research in patient care, nursing management, and related issues; and designs models of health care problems, delivery systems, fiscal analysis, and staffing ratios. The center is on the third floor of Godchaux Hall.

Helene Fuld Instructional Media Center. Established in 1967 by the Helene Fuld Health Trust and housed in Godchaux Hall, this center provides multimedia learning materials, including computer terminals and microcomputers, both in a carrel area and in classrooms. More than 1,000 programs are available for instructional purposes. In addition, the School of Nursing receives new programs via the Helene Fuld television network that serves all the schools in the Helene Fuld Health Trust system.

Kim Dayani Human Performance Center

The Dayani Center is devoted to health promotion, fitness testing and evaluation, cardiac rehabilitation, employee wellness, and fitness and nutrition research.
The center, named in honor of Dr. Kim Dayani (M.D. ‘65), offers membership primarily to Vanderbilt faculty and staff members, but a limited number of memberships are available to the public.

**Bill Wilkerson Hearing and Speech Center**

A diagnostic and treatment center for audiological and speech problems, the Wilkerson Center is located at Edgehill Avenue and 19th Avenue South.

**Medical Arts Building**

Immediately adjacent to the hospital, the Medical Arts Building provides members of the clinical faculty with convenient office space.

**Libraries**

*The Jean and Alexander Heard Library*

This is the collective name for all the libraries at Vanderbilt, which have a combined collection of more than 2.5 million volumes. It comprises the Central, Biomedical, Divinity, Education, Law, Management, Music, and Science and Engineering libraries, each of which serves its respective school and disciplines. Special Collections and the University Archives are also part of the library system. The facilities, resources, and services of these divisions are available to all Vanderbilt faculty and staff member, students, and alumni/ae. Acorn, the electronic link to all these libraries, includes their holdings; gives up-to-the-minute information on the status of material on order, in process, or on loan; and provides links to network databases and to resources outside the libraries. Specialized databases are also available in each of these facilities.

*The Annette and Irwin Eskind Biomedical Library*

The Annette and Irwin Eskind Biomedical Library (EBL) is the hub of Vanderbilt Medical Center’s information services and resources. Opened in 1994, the EBL is prominently located at the center of Vanderbilt’s medical campus. The construction of this award-winning library building was made possible by a gift from Vanderbilt Alumnus Irwin Eskind and his wife, Annette.

The Eskind Biomedical Library collects and provides access to materials to support the teaching, research, and service missions of the Medical Center. Library holdings include almost 200,000 print volumes, of which about 80,000 are monographs and about 120,000 are serials. The Library receives over 2,000 print serial titles and has a small collection of non-
print material. A unique collection of rare books, photographs and historical items can be found in the Historical Collections Room on the third floor. The EBL Medical Center Archives, housed in Medical Center North, is a repository for manuscripts and institutional records that reflect the history of the Medical Center and the history of medicine.

EBL is working to expand its online resources that can be accessed from outside the library. It provides access to over 1500 full-text electronic journal titles, including access to ScienceDirect, a new collection of scientific research titles. It also makes available many educational software products, including online texts such as Harrison’s Plus and Nelson Textbook of Pediatrics, and multimedia programs such as A.D.A.M. EBL subscribes to “MDConsult” and “UpToDate,” new collections of clinical electronic resources. Through OVID Technologies, the Library provides access to several databases, including MEDLINE, CINAHL (nursing and allied health), Evidence-Based Medicine Reviews and EMBASE Drugs & Pharmacology. Access to MEDLINE and other National Library of Medicine databases is provided through Internet Grateful Med and PubMed via the Web as well. The library also provides Web access to the ISI Science Citation Index and to Current Contents. In addition, the network brings into the library a number of Medical Center information systems, and its connection to the World Wide Web provides global access to a wide range of information resources.

The library is committed to service, and its most important resource is the expertise of its staff. Orientations and training sessions on electronic resources are offered regularly. Librarians also help students, residents, and faculty members stay abreast of the latest findings in the literature by actively participating on clinical rounds and providing targeted support to researchers. Members of the Collection Development Team are available to meet with faculty developing new courses or programs to assess the information needs of those endeavors and determine the most appropriate way to fulfill those needs. The library has also established a program to provide VUMC patients and their families with the latest in health information. Other services include circulation of books, management of reserve materials, document delivery to obtain needed material held by other institutions, reference and research services, and guidance in the use of new information technologies. The EBL staff also guides development of VUMC’s web pages. As part of the Informatics Center, a federally designated Integrated Advanced Information Management System (IAIMS) test site, library staff work in partnership with researchers in the Division of Biomedical Informatics and the Information Management Department to innovate the delivery of health information to Vanderbilt and to the larger regional community.

For more information, and regular updates to services and collections, see the library’s Web page at http://www.mc.vanderbilt.edu/biolib/.
Professional and Supervisory Staff

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DEBORAH BROADWATER, M.L.S., Assistant Director for Collection Development/Coordinator of Technical Services
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Affiliated Facilities

Vanderbilt is closely affiliated with the 485-bed Veterans Administration Medical Center—a Vice-Chancellor’s Committee hospital containing 439 acute-care beds and outpatient facilities—and with the Howard Hughes Medical Institute, which occupies the eighth floor of Rudolph A. Light Hall.

Saint Thomas Hospital is closely affiliated with the educational programs of the Schools of Medicine and Nursing. The Medical Center also utilizes the facilities of Baptist Hospital, the Luton Community Mental Health Center, the Middle Tennessee Mental Health Institute, the Metro Nashville-Davidson County Health Department, Southern Hills Hospital, and Centennial Medical Center.

Computer Resources

Academic Computing and Information Services (ACIS) designs, manages and maintains VUnet, the data network that spans the central campus and is Vanderbilt’s link to the Internet. ACIS provides connection to...
VUnet, manages several key services of VUnet, and offers services in support of computing.

ResNet provides services for direct connection to VUnet for students who live on campus. VUaccess is the service for dial-in connection to VUnet. A VUnet ID is required for VUaccess and other services, including VUmail, the electronic message system used by most students. Network access labs are located in Garland, Jacobs, Olin, and Payne halls; the Molecular Biology Building; and Branscomb Quadrangle.

The ACIS Help Desk is an information center designed to help you find answers to questions about connection to VUnet, services of VUnet, and Internet tools. The web site for more information is http://www.vanderbilt.edu/acis/helpdesk. The Research Support team assists with statistical applications, research design, data management, and access to data sets archived locally and at remote sites.

For more information, see http://www.vanderbilt.edu/acis/research. For more information about computing at Vanderbilt, visit Vanderbilt’s computing homepage at http://www.vanderbilt.edu/compute/.

Canby Robinson Society

In 1978 Vanderbilt established the Canby Robinson Society in honor of George Canby Robinson, M.D., dean of the Medical School from 1920 to 1928. It was through Dr. Robinson’s leadership that the teaching hospital and the research laboratories were placed under one roof, thrusting Vanderbilt to the forefront of medical education. His innovation regarding the diversity of the medical School’s curriculum, with emphasis on biomedical research and improved health care, is a legacy that continues today.

Founders’ Circle

DR. AND MRS. BEN J. ALPER
Nashville

MRS. THEODORE R. AUSTIN
Rochester, Minnesota

DR. DIXON N. BURNS
Tulsa, Oklahoma

MR. AND MRS. MONROE J. CARELL, JR.
Nashville

MRS. CAROLYN PAYNE DAYANI
Scottsdale, Arizona

DR. AND MRS. WILLIAM R. DELOACHE
Greenville, South Carolina

DR. AND MRS. IRWIN B. ESKIND
Nashville

MRS. A. B. HANCOCK, JR.
Paris, Kentucky

MISS VIRGINIA E. HOWD
Cincinnati, Ohio

MRS. E. BRONSON INGRAM
Nashville

DR. AND MRS. HARRY R. JACOBSON
Nashville

MR. AND MRS. GEORGE C. LAMB, JR.
Durham, North Carolina

DR. AND MRS. JAMES R. LEININGER
San Antonio, Texas

DR. AND MRS. JOHN S. ODESS
Chelsea, Alabama

MR. AND MRS. DAVID Y. PROCTOR, JR.
Nashville

DR. AND MRS. HERBERT J. SCHULMAN
Nashville

MR. AND MRS. STEVE TURNER
Nashville
With a membership of thirteen hundred plus and a working thirty member board, this donor society provides impetus to the Medical Center’s philanthropic programs. Through the leadership of this group, private support to the Medical Center continues to increase, with the society contributing over seven million dollars last year.

The University

When Commodore Cornelius Vanderbilt gave a million dollars to build and endow Vanderbilt University in 1873, he did so with the wish that it “contribute to strengthening the ties which should exist between all sections of our common country.”

A little more than a hundred years later, the Vanderbilt Board of Trust adopted the following mission statement: “We reaffirm our belief in the unique and special contributions that Vanderbilt can make toward meeting the nation’s requirements for scholarly teaching, training, investigation, and service, and we reaffirm our conviction that to fulfill its inherited responsibilities, Vanderbilt must relentlessly pursue a lasting future and seek highest quality in its educational undertakings.”

Today as Vanderbilt pursues its mission, the University more than fulfills the Commodore’s hope. It is one of a few independent universities with both a quality undergraduate program and a full range of graduate and professional programs. It has a strong faculty of over 1,600 full-time members and a diverse student body of about 9,600. Students from many regions, backgrounds, and disciplines come together for multidisciplinary study and research. To that end, the University is the fortunate recipient of continued support from the Vanderbilt family and other private citizens.
The 316-acre campus is about one and one-half miles from the downtown business district of the city, combining the advantages of an urban location with a peaceful, park-like setting of broad lawns, shaded paths, and quiet plazas.

Off-campus facilities include the Arthur J. Dyer Observatory, situated on a 1,131-foot hill six miles south.

The schools of the University offer the following degrees:
- College of Arts and Science. Bachelor of Arts, Bachelor of Science.
- Graduate School. Master of Arts, Master of Arts in Teaching, Master of Liberal Arts and Science, Master of Science, Doctor of Philosophy.
- Blair School of Music. Bachelor of Music.
- Divinity School. Master of Divinity, Master of Theological Studies.
- School of Engineering. Bachelor of Engineering, Bachelor of Science, Master of Engineering.
- School of Law. Doctor of Jurisprudence.
- School of Medicine. Doctor of Medicine.
- School of Nursing. Master of Science in Nursing.
- Owen Graduate School of Management. Master of Business Administration.
- Peabody College. Bachelor of Science, Master of Education, Master of Public Policy, Specialist in Education, Doctor of Education.

No honorary degrees are conferred.

Accreditation

Vanderbilt University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award Bachelor’s, Master’s, Specialist’s, and Doctor’s degrees. Vanderbilt is a member of the Association of American Universities.
Life at Vanderbilt

VANDERBILT provides a full complement of auxiliary services to meet the personal needs of students, to make life on the campus comfortable and enjoyable, and to provide the proper setting for academic endeavor.

Graduate Student Council

The Graduate Student Council, consisting of one student representative from each graduate program, serves to ascertain graduate student opinion and communicate it appropriately. The council and its committees are available to students and members of the administration and faculty for consultation regarding matters concerning the Graduate School and the graduate student body.

Housing Facilities

The Office of Residential and Judicial Affairs provides apartment-style housing for as many graduate students as possible. Applications for housing will be mailed to all admitted students during the spring. Questions should be addressed to the Office of Residential and Judicial Affairs, Station B 1677, Nashville, Tennessee 37235. A $200 deposit is required at the time of application. Returning residents of University housing will be permitted to renew their leases until May 1. Incoming students in graduate and professional schools will receive priority for the remaining available housing for the fall if their applications are received by May 1. Any returning student may apply for on-campus housing by filing with a $200 deposit. After May 1, assignment is made on the basis of the date of application.

Apartments are leased for the entire academic year. Students who are assigned space on the campus are therefore committed for one year and should understand that only withdrawal from the University will cause the lease to be terminated.

Residential occupancy is subject to the terms and conditions of a lease executed by the occupants. Only full-time students at Vanderbilt are eligible for campus apartments. Apartments must be vacated within twenty-four hours if the occupants cease to be students.

University housing for graduate and professional students is available in the following facilities:

Lewis House, on the south side of campus, is an eleven-story apartment building with air-conditioned efficiency, one-bedroom, and two-bedroom apartments. Undergraduates live on the lower four floors.
The Family Housing Complex, located at the eastern edge of campus on Eighteenth Avenue South, has air-conditioned, town-house apartments with living room and kitchen downstairs and two bedrooms and bath upstairs. The apartments are designed for families with children.

The Garrison Apartment complex on Eighteenth Avenue South has air-conditioned efficiency and one-bedroom units. Single as well as married students are assigned here. TeleVU, the residence hall cable television system, and ResNet, the residential data network, are available in all apartments in Lewis House, Family Housing, and Garrison Apartments.

**Off-Campus Housing**

The Office of Residential and Judicial Affairs maintains a listing of available off-campus accommodations in the Nashville area. The majority of rental property is close to the campus. Cost, furnishings, and conditions vary greatly. For best choices, students seeking off-campus housing should visit the office by early July for suggestions and guidance.

**Change of Address**

Students who change either their local or permanent mailing address are expected to notify school and University registrars immediately. Candidates for degrees who are not in residence should keep the school and University Registrar informed of current mailing addresses.

**Identification Cards**

Identification cards are multifunctional, serving as each student’s library card, building access card, and, when combined with a campus dining or flexible-spending account, dining card that also can be used to make cash-free purchases throughout the campus (see Eating on Campus).

Identification cards are issued at the Vanderbilt Card Office. Validation of each student’s card for the current semester will be made electronically each time it is used. For more information, see the Web site, [http://www.vanderbilt.edu/vucard](http://www.vanderbilt.edu/vucard).

**Eating on Campus**

Vanderbilt Dining operates several food facilities throughout campus that provide a variety of food and services. There are three all-you-care-to-eat dinner plans available on campus during the academic year. Through a Vanderbilt Card account, a student can purchase food at any of the above-listed locations. Two accounts are available: the Flexible Spending Account (FSA) for purchases from the Bookstore or any other on-campus facility that accepts the Vanderbilt Card, and a Campus Dining Account (CDA) for food purchases. All first-year students living in freshman housing are required to enroll in the Dinner Plan, which provides seven all-you-care-
to-eat meals a week for one price, paid at the beginning of the semester. For more information, visit the Web site, http://www.vanderbilt.edu/dining.

Services to Students

Student Records (Buckley Amendment)

Vanderbilt University is subject to the provisions of federal law known as the Family Educational Rights and Privacy Act (also referred to as the Buckley Amendment or FERPA). This act affords students certain rights with respect to their educational records. These rights include:

The right to inspect and review their education records within 45 days of the day the University receives a request for access. Students should submit to the University Registrar written requests that identify the record(s) they wish to inspect. The University Registrar will make arrangements for access and notify the student of the time and place where the records may be inspected. If the University Registrar does not maintain the records, the student will be directed to the university official to whom the request should be addressed.

The right to request the amendment of any part of their education records that a student believes is inaccurate or misleading. Students who wish to request an amendment to their educational record should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the student will be notified of the decision and advised of his or her right to a hearing.

The right to consent to disclosures of personally identifiable information contained in the student's education records to third parties, except in situations that FERPA allows disclosure without consent. One such situation is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted; a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

The Buckley Amendment provides the University the ability to designate certain student information as “directory information.” Directory information may be made available to any person without the student’s consent unless the student gives notice as provided for below. Vanderbilt has designated the following as directory information: the student’s name, address, telephone number, e-mail address, date and place of birth, major field of study, school, classification, participation in officially recognized activities and sports, weights and heights of members of athletic teams, dates of attendance, degrees and awards received, the most recent previous educational agency or institution attended by the student, and other similar information. Any student who does not wish disclosure of
directory information should notify the University Registrar in writing. Such notification must be received by August 1st to assure that the student’s address and phone number do not appear in any printed Vanderbilt directory. No element of directory information as defined above is released for students who request nondisclosure. The request to withhold directory information will remain in effect as long as the student continues to be enrolled, or until the student files a written request with the University Registrar to discontinue the withholding.

If a student believes the University has failed to comply with the Buckley Amendment, he or she may file a complaint using the Student Complaint and Grievance Procedure as outlined in the Student Handbook. If dissatisfied with the outcome of this procedure, a student may file a written complaint with the Family Policy and Regulations Office, U.S. Department of Education, Washington, D.C. 20202.

Questions about the application of the provisions of the Family Educational Rights and Privacy Act should be directed to the University Registrar or to the Office of University Relations and General Counsel.

**Vanderbilt Telephone Directory Listings**

Individual listings in the student section of the Vanderbilt Directory will consist of the student’s full name, school, academic classification, local phone number, local address, box number, and permanent address. Students who want their names to be excluded from the directory must notify the University Registrar, 134 Magnolia Circle, in writing, by 1 August.

In addition to the paper Vanderbilt Directory, there is also an on-line VUnet e-mail directory accessible both on- and off-campus via the World Wide Web. At the time students initially set up their VUnet IDs and passwords, they have the option of withholding their e-mail address from this directory if they so choose.

**Psychological and Counseling Center**

The Psychological and Counseling Center is a broad-based service center available to students, faculty, staff, and their immediate families. Services include: individual and group counseling and psychotherapy for personal problems and issues; psychological assessment; group support programs for learning skills such as relaxation; assertiveness; marital communication; reading and study techniques; weight, stress, and time management; administration of national testing programs; career choice/change and college major counseling; outreach and consultation with departments; and campus speakers and educational programs.

Eligible persons may make appointments by visiting the Center or by calling 322-2571. Services are confidential to the extent permitted by law. For more information, see the Web site, http://www.vanderbilt.edu/pcc.
Career Center

The Career Center at Vanderbilt helps students and graduates of Vanderbilt University develop and implement career plans. This is accomplished by offering a variety of services and educational programs that help them assess career options, learn job search skills, gain career-related experience, and connect with employers. See the Web site, http://www.vanderbilt.edu/career, for more information.

Services include: career counseling and testing; a resource center; a alumni career advisory network; graduate and professional school services; career classes and seminars; résumé consultation; video interview training; internship information service; career and job fairs; campus interviews; job listings and résumé referrals; and alumni services.

Student Health Center

The Vanderbilt Student Health Center (SHC) in the Zerfoss Building is a student-oriented facility that provides routine and acute medical care similar to services rendered in a private physician’s office or HMO.

The following primary care health services are provided to students registered in degree status without charge and without copayment: visits to staff physicians and nurse practitioners; personal and confidential counseling by mental health professionals; routine procedures; educational information and speakers for campus groups; some routine laboratory tests; and specialty clinics held at the SHC.

These SHC primary care services are designed to complement the student’s own insurance policy, HMO, MCO, etc., coverage to provide comprehensive care. Students are billed for any services provided outside the SHC or by the Vanderbilt University Medical Center.

Dr. John W. Greene, director of the Student Health Center, is a tenured faculty member of the Vanderbilt University School of Medicine. The entire medical staff is composed of physicians and nurse practitioners who have chosen student health as a primary interest and responsibility.

The Zerfoss Student Health Center is open from 8 a.m. to 4:30 p.m., Monday through Friday, and 8:30 a.m. until noon on Saturday, except during scheduled breaks and summers. Students should call ahead to schedule appointments (322-2427). A student with an urgent problem will be given an appointment that same day, or “worked in” if no appointment is available. When the Health Center is closed, students needing acute medical care may go to the Emergency Department of Vanderbilt University Hospital. They will be charged by the VU Medical Center for Emergency Department services.

Students may also call 322-2427 for twenty-four-hour emergency phone consultation, which is available seven days a week (except during summer and scheduled academic breaks). On call Student Health professionals take calls after regular hours. Calls between 11 p.m. and 7 a.m. are handled by the Vanderbilt University Emergency Department triage staff.

Student Health Insurance

All degree-seeking students registered for 4 or more hours at Vanderbilt are required to have adequate hospitalization insurance coverage. The University offers a sickness and accident insurance plan that is designed to provide hospital, surgical, and major medical benefits. A brochure explaining the limits, exclusions, and benefits of insurance coverage is available to students at registration, in the Office of Student Financial Services, or at the Student Health Center.

The annual premium is in addition to tuition and is automatically billed to the student’s account. Coverage extends from 12 August until 11 August of the following year, whether a student remains in school or is away from the University.

Medical students who do not wish to subscribe to the insurance plan offered through the University must notify the Medical School Office of Student Financial Services of adequate coverage under another policy. Students will automatically be covered by the University policy unless a waiver card is received by the Medical School Office of Financial Aid before 10 September. Returning students must submit a waiver card each year if they wish to waive student health insurance.

Family Coverage. Additional premiums are charged for family hospital coverage. Married students who want to provide coverage for their families may secure application forms by contacting the Office of Student Financial Services.

International Student Coverage. International students and their dependents residing in the United States are required to purchase the University’s international student health and accident insurance plan. No exceptions are made unless, in the judgment of the University, adequate coverage is provided from some other source. This insurance is required for part-time as well as full-time students. Information and application forms are provided through the Student Health Center.

Services for Students with Disabilities

Vanderbilt is committed to the provisions of the Rehabilitation Act of 1973 and Americans with Disabilities Act as it strives to be an inclusive community for students with disabilities. Students seeking accommodations for any type of disability are encouraged to contact the Opportunity Development Center. Services include, but are not limited to, extended time for testing, assistance with locating sign language interpreters, audio-taped textbooks, physical adaptations, notetakers, and reading services. Accommodations are tailored to meet the needs of each student with a documented disability. The Opportunity Development Center also
serves as a resource regarding complaints of unlawful discrimination as defined by state and federal laws.

Each school has appointed a University Disability Monitor responsible for monitoring and improving disability services in academic programs. Contact your dean to find out the Disability Monitor for your school. Specific concerns pertaining to services for people with disabilities or any disability issue should be directed to the Assistant Director for Disability Services, Opportunity Development Center, Station B 1809, Nashville, Tennessee 37235; phone 322-4705 (V/TDD); fax 343-0671; http://www.vanderbilt.edu/odc/.

Child Care Center

Vanderbilt Child Care Center operates as a service to University staff members, faculty members, and students. The program serves children from six weeks to five years of age. The Center is accredited by the National Academy of Early Childhood Programs.

Security

The Department of Security (322-2745) exists to protect students, faculty and staff members, visitors, and the assets of the University. Campus officers are carefully selected through testing and interviews and are trained according to Police Officer Standards and Training (POST) requirements. The Department of Security enforces state laws and University regulations.

In order to meet its obligations and its duty to the Vanderbilt community, the Department of Security has programs and services in place to educate and protect our community. The Department of Security has an escort service that is available for persons who need an escort after dark between points on campus for personal safety reasons or for those who need transportation because of physical disability. The telephone number for the service is 421-1888.

Blue light emergency telephones are strategically placed around the campus. When the receiver is lifted, they automatically access Security’s 24-hour emergency line. Using this phone automatically identifies the area of the caller to our communications division. The emergency line can also be called by dialing 421-1911 (1-1911 on campus). The emergency phone system should be used to report medical emergencies, crimes in progress, fires or to request immediate assistance for a life-threatening situation. For emergency situations that happen off campus individuals should use 911 for response by local police, fire, and medical services.

The Crime Prevention Division of the Department of Security offers several programs to increase awareness among the Vanderbilt Community and its neighbors. In addition to these services, it publishes and distributes informational resources on a variety of crime prevention topics. For
further information on the programs and literature that are available call 322-2558 or e-mail crimeprevention.atwood@vanderbilt.edu.

Recovered property may be turned in at any time to the Department of Security. Inquires about lost items may be made by contacting Security’s Lost and Found Division, Monday through Friday, 8:30 a.m. to 4 p.m. The telephone number is 343-5371.

Information on security measures and a summary of crime statistics for the Vanderbilt campus are available from the Department of Security, 2800 Vanderbilt Place, Nashville, Tennessee 37212. More information is available from the Web site: http://www.vanderbilt.edu/VUPD/vupdhome.htm.

Parking and Vehicle Registration

Parking space on campus is limited. Motor vehicles operated on campus at any time by students, faculty, or staff must be registered with the Office of Traffic and Parking. A fee is charged. parking regulations are published annually, and are strictly enforced.

Bicycles must be registered with the Department of Security.

Bishop Joseph Johnson Black Cultural Center

The Bishop Joseph Johnson Black Cultural Center (BJJBC) provides African American educational and cultural programming for the University community, and retention services for African American students. Dedicated in 1984, and named for the first African American student admitted to Vanderbilt, Bishop Joseph Johnson (B.D. ‘54, Ph.D. ‘58), the Center reinforces Vanderbilt’s effort to promote diversity through the development of programs that foster understanding and appreciation of the African American experience.

The Center provides a “home away from home” environment for African American students and sponsors lectures, symposia, academic materials, art exhibitions and other activities for the University and the community. Programs are publicized in a monthly campus calendar and a monthly newsletter, “News from the House,” which is distributed to African American students and other campus addresses by request. The Black Student Alliance (BSA) and the Cultural Center Advisory Board work closely with the Center. The Center is open to the campus for small meetings and gatherings.

Margaret Cuninggim Women’s Center

The Women’s Center was established in 1978 to provide support for women at Vanderbilt as well as resources about women, gender, and feminism for the University community. In 1987, the Center was named in memory of Margaret Cuninggim, dean of women and later dean of student services at Vanderbilt.
Programs for students, staff, and faculty are scheduled throughout the fall and spring semesters and are publicized in the monthly newsletter Women’s VU, which is distributed without charge to campus addresses on request. A student group that works closely with the Women’s Center, Students for Women’s Concerns, is open to all interested students, both male and female.

The Center houses a small library with an excellent collection of unbound materials such as clippings and reprints, as well as journals, magazines, and tapes. Books and tapes circulate for two weeks. Copy facilities are available.

**Religious Life**

The Office of the University Chaplain and Affiliated Ministries exists to provide occasions for religious reflection and avenues for service, worship, and action. There are many opportunities to clarify one’s values, examine personal faith, and develop a sense of social responsibility. Major service projects through the Office of Volunteer Activities include the Alternative Spring Break, the Vanderbilt Prison Project, Habitat for Humanity, and the Student Y.

The Holocaust and Martin Luther King Jr. lecture series, as well as Project Dialogue, provide lectures and programs investigating moral issues, political problems, and religious questions.

Baptist, Episcopal, Jewish, Presbyterian, Reformed University Fellowship, Roman Catholic, and United Methodist chaplains work with individuals and student groups. Provisions for worship are also made for other student religious groups.

**Extracurricular Activities**

**Sarratt Student Center**

The Madison Sarratt Student Center ([http://www.vanderbilt.edu/sarratt](http://www.vanderbilt.edu/sarratt)) provides a wide variety of programs and activities for the campus community. The Center, named for a popular former dean of students, houses a cinema where classic, foreign, and first-run films are shown; an art gallery; art studios and a darkroom for classes and individual work; work space for student organizations; comfortable reading rooms and lounges; an upscale pub; and large and small meeting rooms. The Center’s six student-run committees plan concerts and events that take place throughout the campus, and the Sarratt Main Desk serves as a Ticketmaster™ outlet, handling ticket sales for most of the University’s and Nashville’s cultural events. Sarratt will undergo extensive renovations, and portions of the building and some programs will be closed during the 1999/2000 school year.
Recreation and Sports

Graduate and professional students are encouraged to participate in the many physical activity classes, intramurals, and sport clubs offered by the University. All students pay a mandatory recreation fee which supports facilities, fields, and programs (see the chapter on Financial Information). Spouses must also pay a fee to use the facilities.

Physical activity classes offered include swimming, volleyball, racquetball, fly fishing, and scuba, along with rock climbing and kayaking. Twenty-three sport clubs provide opportunity for participation in such favorites as sailing, fencing, rugby, and various martial arts.

The University recreation facilities include gymnasiums, tracks, and four softball diamonds. The four lighted multipurpose playing fields are irrigated and maintained to assure prime field conditions.

The Student Recreation Center houses a swimming pool; three courts for basketball, volleyball, and badminton; six racquetball and two squash courts; a weight and Nautilus room; a wood-floor activity room; a rock-climbing wall; an indoor track; a mat room; locker rooms; a Wellness Center; and the Time-Out Cafe. Lighted outside basketball and sand volleyball courts and an outdoor recreation facility complement the center.
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Medical Education at Vanderbilt

The Vanderbilt University School of Medicine is committed to the education of physicians who are firmly grounded in basic medical science; who can recognize and treat disorders in their patients and provide appropriate preventive counseling; who can obtain, evaluate, and apply the results of scientific research; and who can translate their proficiency into effective humanitarian service.

The medical school’s major strength lies in the quality of its students and faculty. The school provides a supportive, positive environment in which students are treated individually in their pursuit of excellence in medical careers. The student body is diverse, with students from a wide variety of major universities nationwide. The medical school has an unusually low attrition rate and its graduates traditionally gain entrance to residency programs of high quality throughout the country.

The faculty, which represents a variety of specialties and many strong research programs, has a national and international reputation for excellence in the biomedical sciences and clinical care. House staff officers who have teaching duties consistently receive commendation for their contribution to the educational program.

The medical school curriculum contains within its core and elective components the full spectrum of medicine. The curriculum provides sufficient structure to afford guidance, with flexibility to encourage initiative. An extensive elective program during the first two years gives students the opportunity to pursue individual interests. The curriculum provides traditional experiences in the various disciplines of medicine and offers students research opportunities for academic credit. To enrich and expand the student’s understanding of patients and the context in which they experience illness and seek care, there are courses in such subjects as human development, human behavior, medical philosophy, medical ethics, medical history, death and dying, and human sexuality.

From the more than 5,000 applications received each year at the School of Medicine, approximately a hundred students are chosen for the first-year class. A hallmark of the School of Medicine admissions process is the personal attention to details by the administrative staff and the Admissions Committee. The involvement of more than a hundred faculty members in the interview and evaluation process reflects the importance placed on the selection process and leads to a personal interest in each applicant. An important part of the admissions process is the applicant’s tour of the medical school facilities with a member of the student body as a guide.
School of Medicine

JOHN E. CHAPMAN, M.D., Dean
G. ROGER CHALKLEY, D.Phil., Senior Associate Dean of Biomedical Research, Education, and Training
GERALD S. GOTTERER, M.D., Ph.D., Senior Associate Dean of Faculty and Academic Administrative Affairs; Director, Office of Continuing Medical Education
DEBORAH C. GERMAN, M.D., Senior Associate Dean of Medical Education
FREDERICK KIRCHNER, JR., M.D., Associate Dean for Graduate Medical Education
BONNIE M. MILLER, M.D., Associate Dean for Medical Students
ALEXANDER S. TOWNES, M.D., Assistant Dean for Veterans Administration Affairs
VICKY CABLE, Director, Office of Student Financial Servicers
WINFRED L. COX, M.B.A., C.P.A., Director, Finance and Administrative Services
JOSEPH M. GOFF, Assistant Director of Finance and Administrative Services
JOHN O. LOSTETTER, Ph.D., Director of Program Support Services
MICHAEL RODRIGUEZ, M.D., Director of Minority Student Affairs
DAVID ROBERTSON, M.D., Director of the Medical Scientist Training Program
JANELLE CAREY OWENS, Executive Assistant, Medical School Programs and Special Projects
ANNE LARA, Assistant to the Dean

Executive Faculty
Regular Non-Voting Members: Winfred L. Cox, Deborah C. German, Gerald S. Gotterer, Lee E. Limbird, Thomas P. Graham.


Standing Committees
(The Dean is an ex officio member of all standing and special committees.)

Academic Programs
The Academic Programs Committee, appointed by the Dean, is composed of faculty and students. It is charged with monitoring the content and implementation of the Medical School curriculum and recommending to the Dean and the Executive Faculty any actions or modifications in policies relating to its area of responsibility.

Admissions

The Admissions Committee has the responsibility of reviewing Medical School applications for admission and making recommendations to the Dean for the admission of those students who are considered best qualified.


Advisory Council

The Advisory Council provides a formal structure for the synthesis of faculty opinion. It is advisory and has no power to implement its opinion except through the Dean. The council should provide the Dean and Executive Faculty with a long-range perspective on issues that the administration and Executive Faculty may not have the opportunity to develop while responding to day-to-day crises. Furthermore, the Advisory Council provides the faculty with an alternative channel of communication with the Dean through representatives other than the appointed department chairmen who compose the Executive Faculty.


Standing Policy Committees

These committees report to the Advisory Council. (For committee charges, see Rules and Procedures of the School of Medicine, Article II.) Each committee has a student representative.

BIOMEDICAL SCIENCES. Louis J. De Felice, Chair. Stephen J. Brandt, Jeffrey M. Davidson, Kristina E. Hill, Lou Reinisch, Joan T. Richerson.


MEDICAL EDUCATION. Lawrence D. Kerr, Chair. Howard A. Fuchs, Lewis B. Lefkowitz, Jr., Samuel J. McKenna, Dennis C. Stokes, John A. Zic.

POSTGRADUATE EDUCATION. Walter H. Merrill, Chair. Frank A. Fish, Christopher D. Lind, Louise A. Mawn, William H. Martin, John K. Wright.
Clinical Research Center

The Clinical Research Center Advisory Committee meets regularly to act upon new and current faculty research proposals for the use of the center, to formulate policy and review all aspects of the administration of the center, and to approve reports and applications by the center to the National Institutes of Health.


Conflict of Interest

The Conflict of Interest Committee is appointed by and advisory to the Dean of the School of Medicine. It is charged to review individual faculty circumstances where a possible conflict of interest or commitment might exist. The committee makes recommendations to the department chairs and the Dean concerning their review.


Continuing Education

The Continuing Education Committee has the responsibility of developing policies and providing leadership, liaison, and recommendations regarding departmental and institutional programs of instruction designed for those who have completed formal studies in their respective health fields. This year the committee should pay special attention to short- and long-range efforts in which the Medical School can feasibly be involved.


Faculty Appointments and Promotions

The committee, appointed by the Dean, is responsible for consideration of faculty promotions in the School of Medicine and for examination of credentials of candidates for appointment to faculty positions.


Graduate Education

The Graduate Education Committee is the faculty body concerned with graduate student affairs and graduate programs in the Medical Center.

Interdisciplinary Graduate Program

The Interdisciplinary Graduate Program Executive Committee is concerned with graduate student affairs and graduate programs in the Medical Center. It is responsible for admitting students to the Interdisciplinary Graduate Program in the Biomedical Sciences; for recommending candidates for fellowships and other funds available for the program; for reviewing activities and progress of the students in the program and recommending students to the Departments of Biochemistry, Cell Biology, Microbiology and Immunology, Molecular Physiology and Biophysics, Pathology, and Pharmacology for the completion of the Ph.D. degree.


International Medical Educational Experiences

The International Medical Educational Experiences Committee acts as a channel for exchange of students and faculty in areas of international education.

Coordinator: Janelle Carey Owens.

Student Representatives: GUESTS: Current Exchange Students; VMS I: TBA; VMS II: Rose Bohan, Christine Cooper, Clint Devin, Laura Green, Melody Knauf, Rahul Nayak, Sandy Neblett, Amy Robichaux, Shane Rowan, Mark Ryzewicz, Dave Smith, Julie Thwing, Sinan Yavas, Hong Yiu; VMS III: Yasmine Ali, Sarah Bixby, Carmel Colgrove, Andrea Cruz, Vipul Lakhani, Heather McGehean, Bridget Mikysa, Holly Rawizza, Angela Singleton, Sachin Vaikunth, Jen Wambach, Erika Yamada; VMS IV: David Brumbaugh, Melissa Chen, Luke Davis, Melissa Hilmes, Marwan Khalifeh, John Parrott, Sovana Paul, Shannon Snyder, Yoko Tamura, Jesse Taylor, Ron Wells; MD/Ph.D.: John Stafford


Ex Officio: Deborah C. German, Gerald S. Gotterer, Bonnie M. Miller.

M.D./Ph.D. Committee

The M.D./Ph.D. Committee has responsibility for admitting students to the M.D./Ph.D. program; for recommending candidates for fellowships and other funds available for the program; and for maintaining, on a continuing basis, a review of the activities and progress of the students in the program.

**Medical Archives Advisory Committee**

The Medical Archives Advisory Committee recommends overall collecting and operating policies and appraisal standards for the archival program for the Medical Center. It recommends new programs and directions, recommends policies of accession and deaccession, and encourages departments to prospectively and retroactively contribute material to the archives.

Harris Riley, Chair. Mary Lou Donaldson, Robert Collins, William Darby, David Robertson, Mary Teloh.

**Collection Advisory Forum**

The Collection Advisory Forum advises the Eskind Biomedical Library about a wide range of collection development issues, including new ways to deliver information, strategies for upgrading the collection and access/ownership issues.

Scott Arnold, Erin Davidson, Clark Galbraith, Chris Jones, Terry Minnen, Barbara Petersen, Ann Richmond, Michael Smith, Nancy Wells.

**Promotion Committees**

Each promotion committee will have the responsibility for making recommendations to the Dean and the Executive Faculty concerning promotion, remedial action, or dismissal as appropriate for each student in the class for which it is responsible.

**Class of 2000**


**Class of 2001**


**Class of 2002**


**Class of 2003**

The school seeks to attract qualified minority and disadvantaged students. This goal is based not only on a commitment to equal opportunity, but also on the belief that a diverse student population provides the best learning environment for all students.

Medical school is but the beginning of a continuing process. Following graduation from medical school, residency provides a period of further formal training in specialized areas of medicine. For the physician who aspires to a career in academic medicine, additional postdoctoral training in research is needed. The Vanderbilt program in medical education provides a sound basis for the physician graduate to enter any field of medicine. Vanderbilt’s commitment to medical education as a lifelong pursuit is supported by programs of continuing education offered to alumni and to physicians practicing locally as well as those practicing in other parts of the country.

**Mission of the School**

The mission of the Vanderbilt University School of Medicine is:

1. To develop outstanding clinicians, scientists, and teachers in an environment that stimulates learning and discovery and cultivates empathy and compassion.
2. To advance the knowledge base of medicine by continuing our role as a leading research institution.
3. To disseminate knowledge through continuing education of our students, graduates, faculty members, and colleagues.
4. To promote exemplary patient care and to serve our local and extended community.
5. To maintain our atmosphere of cooperation, collegiality, and mutual respect.
6. To recognize individuality and to foster personal growth of all who work and learn with us.

**Education**

The school’s mission includes the education of physicians at all levels of their professional experience: medical school; postgraduate education, including basic science and clinical training; and continuing education for the practicing physician. The faculty seeks to provide students with the attitudes and background, based on sound biomedical science, to continue their education lifelong. At Vanderbilt, every medical student has access to examples of the highest standards of biomedical investigation and clinical practice. The desired end is a graduate who has been challenged and stimulated in as many areas of medicine as are feasible within the limits of a four-year course of study.
Patient Care

A teaching hospital and its associated outpatient facilities constitute a classroom for trainees based on high academic standards. The clinical facility also serves as a laboratory for clinical research. Faculty members, serving as role models for young physicians, teach the practice of exemplary patient care at all levels. Model programs of health care delivery, at primary, secondary, and tertiary levels, fulfill the school’s responsibility for community service in its fullest context.

Research

In addition to teaching, members of the medical school faculty have a second and complementary responsibility to generate new knowledge through research. Exposure to an inquiring faculty sparks the spirit of inquiry in students. At Vanderbilt, research encompasses basic scientific questions, issues in clinical care, and problems related to the health care system itself. Vanderbilt is recognized as one of the leaders in research among medical schools in the United States.

History of the School

The first diplomas issued by Vanderbilt University were to sixty-one Doctors of Medicine in February of 1875, thanks to an arrangement that recognized the University of Nashville’s medical school as serving both institutions. Thus, Vanderbilt embraced a fully-organized and functioning medical school even before its own campus was ready for classes in October of that year.

The arrangement continued for twenty more years, until the school was reorganized under control of the Board of Trust. In the early days, the School of Medicine was owned and operated as a private property of the practicing physicians who composed the faculty and received the fees paid by students—a system typical of medical education in the United States at the time. Vanderbilt made no financial contribution to the school’s support and exercised no control over admission requirements, the curriculum, or standards for graduation. After reorganization under the Vanderbilt Board in 1895, admission requirements were raised, the course was lengthened, and the system of instruction was changed to include laboratory work in the basic sciences.

The famous report of Abraham Flexner, published by the Carnegie Foundation in 1910 and afterward credited with revolutionizing medical education in America, singled out Vanderbilt as “the institution to which the responsibility for medical education in Tennessee should just now be left.” Large grants from Andrew Carnegie and his foundation, and from the Rockefeller-financed General Education Board, enabled Vanderbilt to carry out the recommendations of the Flexner Report. (These two philan-
thropies, with the addition of the Ford Foundation in recent years, have contributed altogether more than $20,000,000 to the School of Medicine since 1911). The reorganized school drew upon the best-trained scientists and teachers in the nation for its faculty. The full benefits of reorganization were realized in 1925 when the school moved from the old South Campus across town to the main campus, thus integrating instruction in the medical sciences with the rest of the University. The school’s new quarters were called “the best arranged combination school and hospital to be found in the United States.”

Rudolph A. Light Hall, completed in 1977, is a sophisticated facility providing much-needed space for medical education and other student activities. The seven-story structure contains 209,000 square feet of space housing the latest in laboratory equipment, audio-visual and electronic teaching tools, and multi-purpose classroom space. The second floor student lounge is designed to foster medical student interaction and to permit informal educational experiences—leading to the development of physicians grounded in the sciences but enlightened by humanitarian interests and understanding. Light Hall is the physical manifestation of Vanderbilt University Medical School’s ongoing commitment to excellence in all areas of medical education.

The Medical Research Building, completed in 1989, provides laboratories and academic space for pharmacology, biochemistry, and molecular physiology and biophysics. The eight-story building also houses the A. B. Hancock Jr. Memorial Laboratory for Cancer Research and the positron emission tomography (PET) scanner.

**Objectives of the Program**

The program of medical education at Vanderbilt seeks to provide the aspiring physician with:

1. An understanding of the fundamental principles involved in human development, structure, and function and the disordered states associated with malfunction and disease. To reach this understanding, the student must acquire basic knowledge concerning the physical, chemical, biological, psychological, and social factors which affect human development, structure, and function.

2. The basic diagnostic skills to recognize disease and disorders in the patient. To acquire these skills, the student must be trained to acquire histories, to perform physical examinations, and to interpret diagnostic tests within the framework of each patient’s unique situation.

3. The knowledge of therapeutic and operative approaches to treating disease and the techniques and resources for prevention. To acquire this knowledge, the student must be directly involved with sick patients, with the clinical processes requisite for their treatment, and with the means available for the prevention of disease and the maintenance of health.

4. The training that will enable the student to keep abreast of develop-
ments in medicine after the M.D. degree is earned. The exponential rate at which medical knowledge has grown in the recent past and the certainty that this growth will continue in the future make it imperative that the student be exposed to the methods, rigor, and techniques of scientific research in order to be able to evaluate and use wisely the results of scientific investigation.

Well into its second century of professional medical education, Vanderbilt has established a proud tradition, yet is keenly aware of what the future demands. We continually adapt our educational programs to the health care needs of tomorrow and identify and meet those needs within the context of proven strengths and our mission as a school of medicine. The diversity of emphasis and strength that have characterized Vanderbilt University School of Medicine carries us confidently into the future.
Requirements for Entrance

Vanderbilt University School of Medicine seeks students with a strong background in both science and the liberal arts who will have the baccalaureate degree before matriculation. The Medical College Admission Test (MCAT) is required and used along with other observations to predict success in preclinical course work.

Applicants must present evidence of having satisfactorily completed the minimum requirements listed below. A semester hour is the credit value of sixteen weeks of work consisting of one hour of lecture or recitation or at least two hours of laboratory.

**Biology.** Eight semester hours, including laboratory, in either general biology, zoology, or molecular biology. Courses should deal with the structure and function of living organisms at the cellular and molecular level.

**Chemistry.** A minimum of 16 semester hours, 8 in general inorganic chemistry, including laboratory, and 8 in organic chemistry, covering aliphatic and aromatic compounds and including laboratory.

While a year of inorganic chemistry is designated, Vanderbilt will accept one semester if it represents the fundamental course in chemistry offered by the college as a satisfactory basis for further courses in chemistry. The course must also be considered by the college to be prerequisite and qualifying for course work in organic chemistry.

**English and Composition.** Six semester hours.

**Physics.** Eight semester hours, including laboratory. Quantitative laboratory work should be emphasized.

Advanced placement credits and pass/fail credits are not acceptable in lieu of science requirements. Advanced science courses, however, may be substituted for the traditional requirements.

The faculty of the Vanderbilt University School of Medicine recognizes its responsibility to present candidates for the M.D. degree who have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. Candidates for the M.D. degree will ordinarily have the broad preliminary preparation to enter postgraduate medical education in any of the diverse specialties of medicine. All candidates for admission must possess sufficient intellectual ability, emotional stability, and sensory and motor function to meet the academic requirements of the School of Medicine without fundamental alteration in the nature of this program. The Associate Dean, in consultation with the Admissions Committee of the School of Medicine, is respon-
sible for interpreting these technical standards as they might apply to an individual applicant to the School of Medicine.

Recommendations for Entrance

A broad experience in non-science courses is encouraged, especially experience beyond the introductory course level in areas such as English, the humanities, the arts, and the social and behavioral sciences. A major in non-science courses does not affect selection.

Selection Factors

The Committee for Admissions seeks applicants who have demonstrated academic excellence and leadership qualities, with broad extracurricular experience. Experience in research and evidence of a concern for others are positive factors for selection.

The applicant’s essay, letters of recommendation, and the interview are also important factors in the Committee’s evaluation. Interviews are conducted at Vanderbilt and, for those applicants unable to travel to Nashville, regionally.

Medical College Admission Test

The Medical College Admission Test is given under the auspices of the Association of American Medical Colleges and is required of applicants to Vanderbilt. It is given twice a year at most universities and colleges. Since the examination score is used by medical schools in the selection of applicants, candidates should take the test in the spring prior to the time application is submitted, if possible. Results of the fall examination are acceptable, but will delay review of the application.

Application Procedure for Admission

As a convenience to the applicant, Vanderbilt University School of Medicine participates in the American Medical College Application Service. All application materials may be obtained through AMCAS by writing:

American Medical College Application Service (AMCAS)  
Association of American Medical Colleges  
Section for Student Services  
2501 M Street, NW, Lbby-26  
Washington, D.C. 20037-1300

The Committee on Admissions evaluates the initial application received through the application service. Applicants receiving favorable initial review are invited to file a final application which includes an
interview and a request for letters of evaluation. Applications are received by AMCAS any time after 1 June and before 15 October preceding an anticipated fall semester enrollment date. Vanderbilt participates in the Early Decision Program through the American Medical College Application Service.

**Visiting Medical Students**

Visiting student status may be afforded students from medical schools accredited by the Liaison Committee on Medical Education or from a limited number of foreign schools with which Vanderbilt maintains exchange programs.

Visiting students from osteopathic medical schools must request an application from the department in which they wish to do course work (if class space is available) and gain departmental approval before being considered by the Office of Student Records.

Visiting students are permitted registration for course work in the Medical School (if class space is available) with approval of the appropriate department and with concurrence of the course instructor and the Associate Dean for Medical Students. Visiting students must present evidence of adequate professional liability coverage and health insurance coverage and pay a registration fee when registering for course work. Completed applications must be received in the Office of Student Records at least eight weeks before the start date of the course. Upon arrival at Vanderbilt Medical School, all visiting students are required to take part in a Bloodborne Pathogen Training Session. Since visiting students have no status for credit as Vanderbilt medical students, they are not issued credit for their experience at Vanderbilt, nor do they establish a medical-school-based record at Vanderbilt. The normal opportunities and prerogatives of regularly enrolled medical students are not available to visiting students. The visiting student is subject to all regulations of the University as well as to any special regulations relating to visiting student status as determined by the department, the course instructor, or the Dean or the Dean’s deputy.

**Medical Scientist Training Program**

The combined M.D./Ph.D. program is designed to develop investigators and teachers in the clinical and basic medical sciences. Students in the program have the opportunity to study a basic biomedical science in depth and to do research in some phase of that subject while concurrently pursuing studies leading to the medical degree. This training develops the skills and techniques necessary for an experimental approach to problems in basic and clinical medical sciences. The program is designed for
students aspiring toward careers in academic medicine and medical research.

The M.D./Ph.D. program fully meets the Vanderbilt University Medical School requirements for the Doctor of Medicine degree and Vanderbilt University Graduate School requirements for the Doctor of Philosophy degree. The combined degree program usually requires six to seven calendar years beyond the baccalaureate for completion. Although some saving of time is built into the program, there is no implication that the combined degree program circumvents, alters, or dilutes requirements for either the M.D. or the Ph.D. The intent is to profit optimally from the strengths of each school.

Admission to the Program

Those applying to the M.D./Ph.D. program should complete the Medical Scientist Training Program section of the final application to Vanderbilt University Medical School. Applications to the program are reviewed by the Medical Scientist Training Program Committee and by the Medical School Committee on Admissions. Applicants must be accepted into Vanderbilt University Medical School and into Vanderbilt University Graduate School upon recommendation of the Medical Scientist Training Program Committee. In exceptional circumstances, late applications to the program will be received from applicants who have already been accepted into the Medical School. Students who have completed no more than two years in medical and/or one year in graduate school may also apply for admission to the combined degree program.

Upon enrollment in the M.D./Ph.D. program, students are assigned to faculty and student advisers. During their first semester, they become familiar with Ph.D. study and research activities of the affiliated graduate programs: Cell Biology, Biochemistry, Biomedical Engineering, Microbiology and Immunology, Molecular Biology, Pathology, Pharmacology, Molecular Physiology and Biophysics, and Neuroscience.

Following the orientation program, but before the end of their second year in medical school, M.D./Ph.D. students must select and be accepted into the graduate program of an affiliated department or program. M.D./Ph.D. students work closely with their assigned faculty and student advisers in all matters related to enrollment, registration, course selection, and scheduling. The usual course of study is divided into several phases. The first phase consists of the first two years of medical school, devoted largely to the basic biomedical sciences. Students then enter the graduate school (Ph.D.) part of the program after the second year of medical school. During this second phase the student meets the Graduate School residency requirements. The third phase consists of the core clinical clerkships of the third year and the elective and selective clinical rotations of the fourth year of medical school.

Requirements for the Ph.D. degree are set out in detail in the Graduate
School Catalog. Briefly stated, Ph.D. students must complete 72 hours of graduate work for credit, of which a minimum of 24 hours is required in formal course and seminar work. Ph.D. students must also complete a qualifying examination to test their knowledge of their field of specialization and present an acceptable dissertation in the major field of study.

M.D./Ph.D. students are encouraged to begin courses for graduate school credit and to select a preceptor to supervise their dissertation research as soon as possible. They are also encouraged to undertake research at an early stage, including the summer prior to matriculation. Students must complete all course work and the research, writing, and defense of the Ph.D. dissertation before entering the third phase of the program.

Certain features concerning the assignment of course credit toward the Graduate School and Medical School degrees should be noted. The only course allowed for credit toward both the M.D. and Ph.D. degree is the basic course of the student’s graduate department. All other approved courses are allowed for credit toward either the Ph.D. degree or the M.D. degree, but not both. Certain Graduate School courses may be taken as part of the elective program in the Medical School and be applied toward formal course work requirements for the Ph.D. degree. The M.D./Ph.D. student must be officially enrolled in any one semester in either or both the Medical and Graduate schools to insure appropriate assignment of credits.

Financial Support

Special funding (tuition and stipend) is possible for those who gain admission to the Medical Scientist Training (M.D./Ph.D.) Program.

The limitations of financial support create a competitive situation in the selection process. Candidates are urged to submit their application to the M.D./Ph.D. program as early as possible. In accepting financial support for the program, the student agrees to promote primary effort to M.D./Ph.D. studies, and further agrees not to undertake concurrently any other gainful employment or effort without formal approval of the Medical Scientist Training Program Committee and the Medical School officers responsible for the M.D./Ph.D. program.

In general, financial support is arranged by mutual agreement of the Medical Scientist Training Program Committee, the Dean of the Medical School and, in certain instances, the chair of the graduate department involved. Various sources of funds are available with different application requirements, restrictions, obligations, and levels of support. Some potential sources for support available to the student include the following:

Vanderbilt Medical Scientist Scholarship Programs. Currently there are two sources of funding available in support of the scholarship awards, a privately endowed program and a special allocation of funds by the School of Medicine. Both programs pay tuition and fees and provide a
competitive stipend. Once awarded, support from these scholarships will continue, contingent upon satisfactory performance, until the M.D. degree is awarded.

National Research Service Award. Financial support is available through an institutional grant awarded to Vanderbilt University Medical School by the National Institute of General Medical Sciences. The support pays tuition at the current level, provides a stipend (plus a Medical School supplement) per year, and includes funds for fees and related expenses. As with all federal funding, support is guaranteed for only one year at a time, since all federal funds are reviewed and funded annually. Generally, funds are renewed and support is continued.

Departmental Support. Limited resources are available through graduate departments. Tuition awards are available as well as some stipend support either from federal training grants or research funds. Interested students should request from their faculty adviser or department chair specific information on the availability of this type of support.

Personal Support. This refers to the student’s own resources or sources of funds. Approved students for the Medical Scientist Training Program who do not receive financial support from any of the above sources may remain in the joint program at their own expense. Although not guaranteed, financial support can usually be obtained for the graduate phase of the M.D./Ph.D. program.

Master of Public Health Degree

The Master of Public Health (M.P.H.) is a two-year program offered by the Department of Preventive Medicine that is designed for physicians and other health care professionals at a comparable level. The primary objective of the program is to provide training in the methods of assessment of clinical outcomes in populations or samples of humans. The program includes four intensive didactic sections and a supervised project resulting in a paper for submission to the biomedical literature.
The Academic Program

THE curriculum is divided into required courses taken by all students and elective courses taken at the choice of the individual student. Required courses constitute the nucleus of medical education at Vanderbilt; elective courses are an integral part of each student’s educational experience in the Medical School, providing considerable flexibility for individual programming. Students develop an elective program to meet individual needs with the help of the faculty and the approval of the Associate Dean for Medical Students or a designee.

All electives are courses for credit. Electives in the first and second years are graded as Pass or Fail; electives and selectives in the third and fourth years are graded on the same basis as required courses. The format for electives includes lecture or seminar series, specialty clinics, clinical clerkships, or research experiences at Vanderbilt or other approved institutions; and, in special circumstances, Vanderbilt undergraduate or graduate courses may be counted as electives.

One hour each week, the Dean’s Hour, is designated for presentations of school-wide interest lectures, medical society meetings, and student papers. Since students and faculty are expected to attend these presentations, other class activities are not scheduled at this time.

The Medical School curriculum in the preclinical years is organized on a semester basis. Students are encouraged to participate in a summer research or community service experience.

The curriculum is under constant review by both faculty and students, and is subject to timely change as recommended by the Academic Programs Committee and approved by the Executive Faculty and the Senior Associate Dean of Medical Education.

Major Courses

First Year

Biochemistry, gross anatomy, physiology, cell and tissue biology, microbiology and immunology, human behavior, and introduction to biomedical research. Monday, Wednesday, and Friday afternoons are reserved for electives. Electives available to the first-year student cover a wide range of subjects, including alcohol and drug abuse, human sexuality, death and dying, cancer biology, emergency medical services, legal medicine, medicine in the community, medical ethics, introduction to problem solving, and a clinical preceptorship program.
Second Year

Pathology, neurobiology, pharmacology, radiology, preventive medicine, psychiatry, laboratory diagnosis, and physical diagnosis. During the second semester, all the clinical departments cooperate in providing an introduction to history taking and the physical examination through a series of lectures, demonstrations, small group sessions, and individual student work with patients. A variety of elective courses or independent study electives may be taken on Wednesday and Friday afternoons and also on Monday afternoons in the fall semester or Tuesday afternoons in the second half of the spring semester.

Third Year

Medicine, obstetrics and gynecology, pediatrics, surgery, psychiatry, and neurology. Required clerkships are scheduled primarily during the third year. Students are assigned to clerkship rotations by a computer program that optimizes their prospects of obtaining their preferred sequence.

Students have close contact with selected patients under the supervision of attending physicians and house staff.

Students have the option of starting the required clerkships at different times, beginning in early July. All students are required to complete the ten-week clerkships in medicine and surgery and two of the eight-week clerkships (obstetrics/gynecology, pediatrics, or psychiatry/neurology) no later than June of their third year. Ordinarily, all required core clerkships are completed by the end of August of the fourth year, but students may defer the final core clerkship to a later time in order to pursue research or other special educational opportunities with the approval of the Associate Dean for Medical Students.

Fourth Year

Clinical selectives and electives in basic science and/or clinical areas. The fourth year is divided into four week academic units. The flexibility of the fourth-year curriculum gives the student maximum opportunity for individual development. Eight full academic units must be completed, including one unit in primary care, one in emergency medicine, and two inpatient selective clerkships.
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<tr>
<th>FIRST YEAR, FALL SEMESTER</th>
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1. Psychiatry for the first half of the semester; introduction to Biomedical Research for the second half of the semester.
2. Dean's Hour is designated to be used periodically for school-wide functions and takes precedence over other course activities.
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<th>FIRST YEAR, SPRING SEMESTER</th>
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<td>Introduction to Biomedical Research</td>
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<td>Cell Biology</td>
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**SECOND YEAR, FALL SEMESTER**

1. Clinical Pathology Conference
2. Dean's Hour is designated to be used periodically for school-wide functions and takes precedence over other course activities.
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<tr>
<th>SECOND YEAR, SPRING SEMESTER—FIRST HALF</th>
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<td><strong>TUESDAY</strong></td>
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<td><strong>WEDNESDAY</strong></td>
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<td>Physical Diagnosis</td>
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<tr>
<td>Laboratory Diagnosis</td>
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<tr>
<td><strong>THURSDAY</strong></td>
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<tr>
<td>Pharmacology</td>
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<tr>
<td>Laboratory Diagnosis</td>
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<tr>
<td>Physical Diagnosis</td>
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<tr>
<td>Dean’s Hour</td>
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<tr>
<td><strong>FRIDAY</strong></td>
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<tr>
<td>Pharmacology</td>
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<tr>
<td>Laboratory Diagnosis</td>
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<tr>
<td>Electives</td>
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<tr>
<td><strong>SATURDAY</strong></td>
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</tbody>
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• Dean’s Hour is designated to be used periodically for school-wide functions and takes precedence over other course activities.
<table>
<thead>
<tr>
<th>DAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
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<th>FRIDAY</th>
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<tr>
<td>HOURS</td>
<td>8–9</td>
<td>Pharmacology</td>
<td>Physical Diagnosis</td>
<td>Pharmacology</td>
<td>Preventive Medicine</td>
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<tr>
<td></td>
<td>9–10</td>
<td>Preventive Medicine</td>
<td>Physical Diagnosis</td>
<td>Preventive Medicine</td>
<td>Electives</td>
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<tr>
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<td>10–11</td>
<td>Physical Diagnosis</td>
<td>Electives</td>
<td>Physical Diagnosis</td>
<td>CPC</td>
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<tr>
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<td>11–12</td>
<td>Electives</td>
<td>CPC</td>
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<td></td>
<td>12–1</td>
<td>CPC</td>
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<td>2–3</td>
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<td>4–5</td>
<td>CPC</td>
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- **Dean's Hour** is designated to be used periodically for school-wide functions and takes precedence over other course activities.
## THIRD AND FOURTH YEARS—FIRST HALF

<table>
<thead>
<tr>
<th>6 July</th>
<th>3 Aug</th>
<th>30 Aug</th>
<th>27 Sept</th>
<th>26 Oct</th>
<th>23 Nov</th>
<th>18 Dec</th>
</tr>
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<tbody>
<tr>
<td>Elective</td>
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<tr>
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<td>Ob/Gyn</td>
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<tr>
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<tr>
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<td>Surgery</td>
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<td></td>
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<td>Medicine</td>
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*Clerkships*

<table>
<thead>
<tr>
<th>Medicine</th>
<th>10 weeks</th>
<th>Pediatrics</th>
<th>8 weeks</th>
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</thead>
<tbody>
<tr>
<td>Surgery</td>
<td>10 weeks</td>
<td>Ob/Gyn</td>
<td>8 weeks</td>
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<tr>
<td></td>
<td></td>
<td>Psych/Neuro</td>
<td>8 weeks</td>
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</tbody>
</table>

(The medicine and surgery clerkships and two of the 8-week clerkships must be completed by July 1 of the fourth year.)
### THIRD AND FOURTH YEARS—SECOND HALF

<table>
<thead>
<tr>
<th>Date</th>
<th>Course</th>
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<tbody>
<tr>
<td>6 July</td>
<td>Elective</td>
</tr>
<tr>
<td>4 Jan</td>
<td>Elective</td>
</tr>
<tr>
<td>1 Feb</td>
<td>Elective</td>
</tr>
<tr>
<td>28 March</td>
<td>Elective</td>
</tr>
<tr>
<td>23 April</td>
<td>Elective</td>
</tr>
<tr>
<td>3 May</td>
<td>Elective</td>
</tr>
<tr>
<td>28 June</td>
<td>Elective</td>
</tr>
</tbody>
</table>

| 6 July   | Psych/Neuro          |
| 4 Jan    | Ob/Gyn               |
| 1 Feb    | Ob/Gyn               |
| 28 March | Pediatric            |
| 23 April | Psych/Neuro          |
| 3 May    | Psych/Neuro          |
| 28 June  | Psych/Neuro          |

| 6 July   | Medicine             |
| 4 Jan    | Surgery              |
| 1 Feb    | Surgery              |
| 28 March | Medicine             |

### Selectives
- Emergency Medicine: 4 weeks
- Primary Care: 4 weeks
- Medical Group: 4 weeks
- Surgical Group: 4 weeks

### Electives
A minimum of four additional units of four weeks duration each. Note: The calendar shows the times during which 10- and 8-week clerkships are scheduled. Most selectives and electives are offered during the 4-week elective units.
Advanced Training

In addition to its primary responsibility of educating medical students, the School of Medicine has active programs for graduate students in the preclinical sciences, for postdoctoral interns and residents, and for postdoctoral research trainees.

Residency Training

Students preparing for the practice of medicine usually spend three or more years in house staff training. Such experiences at Vanderbilt are particularly varied and well supervised. Applicants for positions are carefully chosen because of the competition for positions. As a result, the house staff makes up a competent and stimulating group, with considerable responsibility in medical student teaching.

The faculty of the School of Medicine has professional responsibilities at Vanderbilt, Veterans, Saint Thomas, and Baptist hospitals. Patients in these hospitals are cared for by members of the medical staff, assisted by the intern and resident staff.

Vanderbilt University Hospital is a referral center and consequently has a patient population with complex medical and surgical problems. The Veterans Administration Hospital, adjacent to the Vanderbilt Medical Center, serves veterans and their families from throughout the mid-south and is an important component of the teaching program. All physicians at the VA Hospital are full-time faculty members of the School of Medicine.

Post-Residency Fellowships

Postdoctoral training programs have as their goal the training of physicians for practice and certification in a medical subspeciality. Fellows admitted to these programs must have completed an approved residency program. The fellow is expected to participate in departmental activities related to teaching, clinical services, and research.

Continuing Medical Education

Vanderbilt University School of Medicine and Vanderbilt University Medical Center recognize a major commitment to the continuing education of physicians and others in the health professions. The School of Medicine views medical education as a continuum initiated in the undergraduate phase, progressing through graduate medical education, and maturing in ongoing continuing medical education. The professional life of the physician and all health professionals should include activities encompassing this view, with the goal of improving health care for patients. Under the auspices of the Division of Continuing Medical Education, the
School of Medicine offers a broad spectrum of courses throughout the year to meet the needs of physicians in practice and other health professionals. Inquiries should be directed to the Division of Continuing Medical Education.

Courses toward the Master's and Ph.D. Degrees

Candidates for the degree of Doctor of Philosophy may pursue work in the medical sciences in the Medical School, either in regular courses or in special elective courses, provided such students are accepted by the Interdisciplinary Graduate Program in the Biomedical Sciences and are registered in the Graduate School of the University. Graduate work in the medical sciences is regulated by the Executive Committee of the Interdisciplinary Graduate Program and the faculty of the Graduate School, and candidates should apply to the registrar of the Graduate School (see also Medical Scientist Training Program).

Candidates for the master's degree in hearing and speech sciences may pursue work in their fields in the Bill Wilkerson Hearing and Speech Center and the School of Medicine. Graduate work in this division is regulated by the faculty of the Graduate School. Candidates should apply to the registrar of the Graduate School.
Academic Regulations

VANDERBILT students are bound by the Honor System inaugurated in 1875 when the University opened its doors. Fundamental responsibility for the preservation of the system inevitably falls on the individual student. It is assumed that students will demand of themselves and their fellow students complete respect for the Honor System. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given by the student in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are specifically prohibited under the Honor System. The system applies not only to examinations but also to written work and computer programs submitted to instructors. The student, by registration, acknowledges the authority of the Student Honor Council of the School of Medicine.

The University’s Graduate Student Conduct Council has original jurisdiction in all cases of non-academic misconduct involving graduate and professional students.

The Student Handbook, available at the time of registration, contains the constitution and bylaws of the Honor System and the Honor Code, as well as an explanation of the functions of the Honor System.

Requirements for M.D. Degree

Candidates for the Doctor of Medicine degree must be mature and of good moral character. They must have spent at least four years of study or its equivalent as matriculated medical students at an accredited medical school. Students accepted with advanced standing must complete at least the last two years in the Vanderbilt University School of Medicine. All students must have satisfactorily completed the medical curriculum, have passed all prescribed examinations, and have no outstanding unpaid balances with the University other than sanctioned educational loans. Students fulfilling these requirements will be recommended for the degree Doctor of Medicine.

Advisers

The Vanderbilt Medical School has one of the lowest attrition rates in the country. The faculty and administration take an active interest in assuring that each student achieves to maximum capability. Advisers, both student and faculty, and staff members of the office of the Dean are available to assist students toward successful development of their plans.
Licensure

The school does not require students to take the United States Medical Licensing Examination (USMLE) for promotion or graduation, but it is required for licensure. Students ordinarily will take Step 1 at the end of the second year and Step 2 in the fourth year. Step 3 is taken after graduation. All three steps must be passed to obtain a license to practice medicine. The school does not use test scores to determine promotion or graduation.

Grading and Promotions

Successful completion of the courses of the medical curriculum and scholastic standing are determined by the character of the student’s daily work; the results of examinations, which may be written, oral, or practical; and observation of the student in action. The medical school curriculum builds progressively on the course work of each previous academic year. The courses of each subsequent year require increasing levels of coordination and integration of the material previously presented. Thorough knowledge and understanding of each subject and an appropriate level of skills are therefore required for satisfactory progress to be maintained in the medical curriculum.

Grades

The summative evaluation of academic performance for each course is reported on the following basis:

A: superior or outstanding work in all aspects of course work.
B: completely satisfactory performance in all aspects of course work.

The following intermediate grades may be given: B+, overall satisfactory performance that includes some elements of superior work; B–, overall satisfactory performance that includes some components that are only marginally satisfactory.

C: a conditional grade that reflects performance that is marginal because of important deficiencies in some aspects of course work. The grade C may be applicable for academic credit in an individual course at Vanderbilt only after approval by the student’s Promotion Committee and endorsement by the Executive Faculty as reviewed in the light of the student’s complete record for the year.

F: unsatisfactory performance resulting in failure.

Electives in the first and second year are graded on a Pass or Fail basis. Exemplary or inadequate performance in these electives will be documented by supporting narrative evaluations. Electives and selectives in the third and fourth years are graded on the same basis as required courses.
Student Grievances Concerning Grades

Students should seek redress of a problem with a grade as soon as possible after receiving the grade and in no case later than six months after the event. Students with a problem should confer directly with the course director. Every effort should be made to resolve the problem fairly and promptly at this level.

If the student cannot resolve the problem through discussion with the course director, he or she should bring the problem, within two weeks of talking with the course director, to the attention of the Associate Dean for Medical Students, who will seek to resolve the problem. If resolution is still not achieved, the Associate Dean will make a recommendation to the Senior Associate Dean for Medical Education and to the Dean, which will be accompanied by commentary on the recommendation by the relevant department chair. The Dean will make the final decision.

Promotion

Promotion Committees of the faculty, in consultation with representatives of the departments responsible for instruction, are charged with making recommendations to Senior Associate Dean for Medical Education, the Dean, and the Executive Faculty regarding progress and promotions of students in each class. The Executive Faculty of the School of Medicine has final responsibility for the determination of medical student progress in the school. Decisions on the progress of students during the first two years are ordinarily made at the end of each academic year. In view of the integrated nature of the curriculum in the final two years, no specific decisions on promotion from the third to the fourth year are made. Decisions on the progress of students during these final two years, however, may be made at any time as academic performance may dictate. Ordinarily, decisions for graduation will be made shortly before commencement in the final year.

The committees recommend for promotion those students who have demonstrated appropriate personal behavior and the knowledge, understanding, and skills consistent with faculty expectations at their particular stage of professional development.

The school’s academic program is predicated upon providing students an academic environment conducive to successful achievement. Occasionally, however, the outcome is unsuccessful. The Promotion Committees will review the performance of students with deficiencies and make recommendations concerning their progress.

Students who have C (conditional) grades in two or more courses in a single academic year will undergo special review by their Promotion Committee. In light of the student’s complete academic record, the committee may recommend promotion, promotion on probation, repetition of all or part of the academic year, or withdrawal from school. Ordinarily, a
student with C grades in required preclinical courses accounting for more than half of the scheduled required course hours in a single academic year can expect to repeat an academic year or to withdraw from school. Students who receive C grades in more than two required clerkships can expect to have their progress delayed in order to complete remedial work or to withdraw from school.

Students who fail in a course, whether required or elective, will be required to remedy the failure before being permitted to enter the courses of the next academic year. Credit may be given on the basis of re-examination or satisfactory repetition of the course work, but failures will remain on the record and may be counted as cause for dismissal if additional failure occurs. Students who fail in two courses or fail a re-examination or course repetition may be required to withdraw from the school.

Promotion Committees will ordinarily recommend that students be placed on academic probation if their course work includes any failures or is generally of marginal character as evidenced by multiple C grades. Students placed on academic probation who do not perform in a satisfactory manner during the subsequent academic year will be dismissed from school unless there are mitigating circumstances approved by the Senior Associate Dean for Medical Education and the Dean. Students on probation may be withdrawn from school if their academic performance continues at a marginal level, even though there may be no recorded failures. Promotion Committees may recommend removal of probationary status when a student has demonstrated a continuing record of satisfactory performance in the succeeding units of study.

Students who are shown by work or conduct to be unfit for the practice of medicine may be required to withdraw from the school at any time.

**Extracurricular Work**

The Medical School does not regulate the outside work of its students, although it does take the firm position of discouraging outside work. No outside commitments may be assumed by medical students that may compromise their responsibilities at the Medical School. If the outside obligation is considered prejudicial, the student may be required to discontinue it.

**Leave of Absence**

A leave of absence may be granted by the Associate Dean for Medical Students for a period not to exceed one year for purposes of approved studies or for recuperation from illness. Should it be necessary for a student to be absent for a period of more than one calendar year, the student must make formal reaplication and be reconsidered by the Admissions Committee, unless special approval is given by the Associate Dean for Medical Students for a more extended leave.
Commencement

The University holds its annual Commencement ceremony following the spring semester. Degree candidates must have completed successfully all curriculum requirements and have passed all prescribed examinations by the published deadlines to be allowed to participate in the ceremony. A student completing degree requirements in the summer or fall semester will be invited to participate in Commencement the following May; however, the semester in which the degree was actually earned will be the one recorded on the diploma and the student’s permanent record. Students unable to participate in the graduation ceremony will receive their diplomas by mail.
Chairs, Professorships, and Lectureships

Chairs and Professorships

THE BEN J. ALPER CHAIR IN RHEUMATOLOGY. Dr. Alper, a 1949 graduate of Vanderbilt University School of Medicine, and his wife, Phyllis, provided for the establishment of this chair in 1995. The chair will support research and clinical care in rheumatology.

THE THEODORE R. AUSTIN CHAIR IN PATHOLOGY. This chair was established in memory of Dr. Austin, a pathologist who practiced in Alexandria, Virginia. He was an alumnus of Vanderbilt Medical School. The chair was established by his wife, Mrs. Dorothy B. Austin.

THE OSWALD T. AVERY PROFESSORSHIP IN MICROBIOLOGY AND IMMUNOLOGY. Established in 1989, this professorship honors Dr. Oswald T. Avery, a Nashvillian and faculty member of the Vanderbilt University School of Medicine who was a leader in understanding of the composition and significance of DNA.

THE DEREK H. R. BARTON PROFESSORSHIP. This professorship is named for Sir Derek H.R. Barton. Dr. Barton received the Nobel Prize for Chemistry in 1970 for his studies on conformational analysis.

THE ALLAN D. BASS CHAIR IN PHARMACOLOGY. Funded in large part by a gift from an anonymous donor, this chair supports scientific development in pharmacology. Allan D. Bass, chairman of the Department of Pharmacology from 1953 to 1972, was instrumental in establishing pharmacology as an independent research discipline.

THE BETTY AND JACK BAILEY PROFESSORSHIP IN CARDIOLOGY. Through the generosity of Betty and Jack Bailey, this gift was made in support of a professorship in the Division of Cardiology as a tribute to a distinguished physician, Dr. F. T. Billings, Jr.

THE CHARLES H. BEST PROFESSORSHIP IN DIABETES RESEARCH. This professorship is named for Dr. Charles H. Best, who was involved in the isolation of insulin and its initial use in the treatment of diabetes.

THE JAMES G. BLAKEMORE CHAIR IN PSYCHIATRY. Through the generosity of James G. Blakemore, Nashville businessman and Vanderbilt alumnus, this professorship in psychiatry was endowed in 1973 to support a distinguished faculty member in the Department of Psychiatry, providing freedom to contribute to research and teaching within a specific field of excellence.

THE WILLIAM L. BRAY CHAIR IN UROLOGIC SURGERY. Established in 1992 by a bequest from James L. Bray, M.D. ‘31, a physician in Los Angeles, this chair supports the research of a distinguished faculty member in urologic surgery. The chair honors Bray’s father.

THE ROBERT AND RACHEL BUCHANAN / A. H. AND LUCILLE LANCASTER CHAIR IN DERMATOLOGY. Dr. and Mrs. Robert Buchanan and Mrs. A. H. Lancaster provided for the creation of this chair in 1994. The chair honors two of Tennessee’s first dermatologists, both of whom graduated from the Vanderbilt University School of Medicine, and will support a faculty member in the division of Dermatology.
THE FRANCES AND JOHN C. BURCH CHAIR IN OBSTETRICS AND GYNECOLOGY. This chair was endowed in 1995 through the generosity of the Burch family and other friends and colleagues. John C. Burch, M.D. ’23, was chairman of the Department of Obstetrics and Gynecology and son of former Vanderbilt School of Medicine Dean Lucius E. Burch.

THE LUCIUS E. BURCH CHAIR IN REPRODUCTIVE PHYSIOLOGY AND FAMILY PLANNING. In 1967, the Department of Obstetrics and Gynecology received funds from an anonymous donor to establish this professorship, the purpose of which is to further research in basic reproductive biology, and applied family planning. The chair is named for Dr. Lucius E. Burch, dean of the School of Medicine from 1913 until 1920, and chairman of the Department of Obstetrics and Gynecology until his retirement in 1945.

THE BENJAMIN F. BYRD JR. CHAIR IN CLINICAL ONCOLOGY. Family, friends, and patients established in 1992 an endowed chair that honors Nashville surgeon and former president of the American Cancer Society, Benjamin F. Byrd, Jr., M.D.

THE ANN AND MONROE CARELL FAMILY CHAIR IN THE VANDERBILT CHILDREN’S HOSPITAL. This chair was established in 1991 through the generosity of Board of Trust member Monroe Carell, Jr., and his wife Ann. The chair is held by the head of the Division of Pediatric Cardiology.

THE BENJAMIN F. BYRD JR. CHAIR IN CLINICAL ONCOLOGY. Family, friends, and patients established in 1992 an endowed chair that honors Nashville surgeon and former president of the American Cancer Society, Benjamin F. Byrd, Jr., M.D.

THE CORNELIUS ABERNATHY CRAIG CHAIR IN MEDICAL AND SURGICAL ONCOLOGY. Established by the late Kathryn Craig Henry, this chair supports cancer research and serves as a memorial to her father, who was a Nashville businessman and member of the Vanderbilt University Board of Trust.

THE CRAIG-WEAVER CHAIR IN PEDIATRICS. Established through the generosity of Elizabeth Proctor, this chair enhances research and teaching programs of Children’s Hospital and provides high quality specialty care for children. The chair honors Mrs. Proctor’s parents, the late Mr. and Mrs. Edwin Wilson Craig, and her late husband, William C. Weaver, Jr.

THE JOE C. DAVIS CHAIR IN BIOMEDICAL SCIENCE. This chair was established in 1994 with the proceeds from a trust created by the estate of Mr. Davis, a Vanderbilt alumnus and trustee.

THE JOHN CLINTON FOSHEE CHAIR IN SURGERY. Through the generosity of the late Dr. John C. Foshee, a 1916 graduate of Vanderbilt University School of Medicine and distinguished surgeon, this professorship was endowed in 1976 for the purpose of furthering medical education and research in the field of general surgery.

THE THOMAS F. FRIST CHAIR IN MEDICINE. This professorship was established in 1985 to support and recognize a distinguished leader-physician-scholar of national stature who combines the qualities of an eminent physician and experienced medical scholar. When possible, the occupant of the chair will be the chair of the Department of Medicine.

THE ERNEST W. GOODPASTURE CHAIR IN EXPERIMENTAL PATHOLOGY. In recognition of Ernest W. Goodpasture, this chair was established in 1960 to enhance basic investigative efforts in experimental pathology.

THE GEORGE WEEKS HALE PROFESSORSHIP IN OPHTHALMOLOGY. Through the generosity of Virginia McHenry Hale, this professorship was established in 1960 for the advancement of ophthalmology. The chair honors Hale’s late husband.

THE ELSA S. HANIGAN CHAIR IN PULMONARY MEDICINE. Mr. John L. Hanigan endowed this chair in memory of his wife. The chair strengthens the ability to treat and care for patients with respiratory diseases and offers a unique opportunity to develop innovative programs in pulmonary research, education, and rehabilitation.
THE JOEL G. HARDMAN CHAIR IN PHARMACOLOGY. Named in honor of noted researcher Joel G. Hardman, Ph.D., chair of the Department of Pharmacology from 1975 to 1990 and Associate Vice Chancellor for Health Affairs from 1990 to 1997. This chair supports investigational opportunities in pharmacology.

THE HORTENSE B. INGRAM CHAIR IN MOLECULAR ONCOLOGY. This chair, established in 1991 by president and CEO of Ingram Industries, Inc., E. Bronson Ingram, provides continued support for cancer research in the Department of Cell Biology. The chair honors Mr. Ingram's mother, the late Hortense Bigelow Ingram, a Nashville civic and charity leader.

THE DAVID T. KARZON CHAIR IN PEDIATRICS. This chair was established in 1991 to recognize an outstanding researcher, teacher, leader, and care giver, David T. Karzon, M.D. The chair provides support for pediatric science in any subspecialty area.

THE ANN LIGHT CHAIR IN PULMONARY MEDICINE. Through the generosity of Ann R. Light (Mrs. Rudolph A. Light), the School of Medicine will benefit from a charitable trust to establish a chair in pulmonary medicine.

THE GUY M. MANESS CHAIR IN OTOLARYNGOLOGY. This chair was created in 1986 through the generosity of Dr. Maness, longtime friend of Vanderbilt Otolaryngology. The chair supports a comprehensive program of education, research, and treatment of diseases of the ears, nose, throat, head, and neck at Vanderbilt.

THE WILLIAM F. MEACHAM CHAIR IN NEUROLOGICAL SURGERY. Funding of this chair was spearheaded by the William F. Meacham Society, a group composed primarily of house officers who studied under Meacham, M.D. '40, chairman of the Department of Neurosurgery from 1954 to 1984. The chair supports research in neurological surgery and honors Meacham's contributions to this field.

THE STANFORD MOORE CHAIR IN BIOCHEMISTRY. Established in 1991 by an anonymous donor, this chair recognizes and encourages significant research in biochemistry and memorializes Dr. Stanford Moore, a former member of the Board of Trust and a Nobel Prize winner.

THE HUGH J. MORGAN CHAIR IN MEDICINE. The Morgan chair recognizes the many contributions of the distinguished former chairman of Vanderbilt's Department of Medicine. Members of his family, physicians who trained under him, patients, and friends contributed to chair's endowment.

THE JAMES C. OVERALL CHAIR IN PEDIATRICS. Through the generosity of Mr. and Mrs. William K. Warren of Tulsa, Oklahoma, this chair was endowed in 1981 to enhance the academic program in the Department of Pediatrics. The professorship honors Mrs. Warren's brother, Dr. James C. Overall, a distinguished clinician and contributor to American pediatrics.

THE RALPH AND LULU OWEN CHAIR IN PULMONARY DISEASES. This chair was established in 1994 through a bequest from the estate of Mrs. Owen, who, with her late husband, was a trustee and life-long supporter of Vanderbilt University and its Medical Center.

THE CAROL D. AND HENRY P. PENDERGRASS CHAIR IN RADIOLOGY. Established by family and friends in 1997, the Carol D. and Henry Pendergrass Chair is the first endowed chair in the Department of Radiology and Radiological Sciences. The chair honors Dr. Pendergrass, a gifted professor of radiology and radiological sciences who served Vanderbilt and his profession with distinction, and his late wife, Carol. His research in the early diagnosis and detection of disease through medical imaging, along with his involvement in postgraduate and continuing medical education, helped establish the Department of Radiology and Radiological Sciences at Vanderbilt as one of the nation's leading centers for radiological research, education, and patient care.
THE LEO AND MARGARET MILNE RECORD CHAIR IN SURGERY. This chair was established through the generosity of Dr. Record, a prominent Chattanooga physician, and his wife.

THE ANN AND ROSCOE R. ROBINSON CHAIR IN NEPHROLOGY. Friends of Dr. and Mrs. Robinson endowed this chair in 1995. Dr. Robinson has served as Vanderbilt’s Vice Chancellor for Health Affairs since 1981 and is internationally recognized as a nephrologist.

THE PAUL W. SANGER CHAIR IN EXPERIMENTAL SURGERY. Through the generosity of the late Paul W. Sanger, M.D., 1931, a distinguished surgeon and former president of the Vanderbilt Medical Alumni, this professorship was established in 1969 and funded in collaboration with the Department of Surgery for the purpose of furthering research in surgical biology and in the general field of surgery.

THE JOHN L. SAWYERS CHAIR IN THE SECTION OF SURGICAL SCIENCES. The Chair honors John L. Sawyers, M.D., professor and chairman of the Department of Surgery and former director of the Section of Surgical Sciences, for his contribution to medicine and his dedication to training surgeons.

THE H. WILLIAM SCOTT JR. CHAIR IN SURGERY. Through the generosity of members of the H. William Scott, Jr., Society, consisting primarily of residents trained by Dr. Scott, this professorship was established in 1983 to honor Dr. Scott for his contributions to the Section of Surgical Sciences and Vanderbilt University during his thirty-year tenure as chairman, 1952–82.

THE ADDISON B. SCOVILLE JR. CHAIR IN MEDICINE. This chair was endowed in 1985 by the Justin and Valere Potter Foundation to support and recognize a distinguished physician scholar whose accomplishments in investigative medicine will enrich and strengthen the scientific endeavors of the Department of Medicine.

THE JOHN L. SHAPIRO CHAIR IN PATHOLOGY. Funded by family, friends, former house officers, and alumni, the holder of this chair promotes medical student involvement in research or clinical-pathological projects, graduate student recruitment, and young faculty development. The chair honors the late John L. Shapiro, M.D., a faculty member from 1948 to 1971 and Chairman of the Department of Pathology from 1956 until his retirement. During that time, Shapiro instructed more than 1,000 medical students and was considered to be the most effective teacher at Vanderbilt School of Medicine.

THE ANN GEDDES STAHLMAN CHAIR IN MEDICAL ETHICS. Endowed in 1973 by James C. Stahlman, B.A. ’19, the broad objective of the chair is to contribute to the return of humanism in the practice of medicine. Stahlman was owner and publisher of the Nashville Banner and a long-time member of the Vanderbilt University Board of Trust. This chair honors one of his daughters.

THE EDWARD CLAIBORNE STAHLMAN CHAIR IN PEDIATRIC PHYSIOLOGY AND CELL METABOLISM. Endowed in 1972 by James C. Stahlman in honor of his father, this chair supports studies in pediatric physiology and cell metabolism.

THE GLADYS PARKINSON STAHLMAN CHAIR IN CARDIOVASCULAR RESEARCH. Established in 1973 by James C. Stahlman in honor of his wife, this chair supports cardiovascular research, with emphasis on the cause of the disease, its prevention, and its treatment.

THE MARY GEDDES STAHLMAN CHAIR IN CANCER RESEARCH. James C. Stahlman, endowed this professorship in 1972 for the purpose of furthering studies in cancer research. The chair honors his mother.
THE MILDRED THORNTON STAHLMAN CHAIR IN PERINATOLOGY. James C. Stahlman established this professorship in perinatology. The chair will reinforce the study of perinatology over an indefinite period of time. It is named in honor of Dr. Mildred Stahlman, one of Mr. Stahlman’s daughters and a member of the School of Medicine faculty since 1951.

THE WILLIAM STOKES CHAIR IN EXPERIMENTAL THERAPEUTICS. Established in 1989, through the generosity of the Daiichi Seiyaku Company of Japan, this chair honors William Stokes. Stokes was a 19th century Dublin physician who made many contributions to cardiovascular medicine. The chair resides in clinical pharmacology.

THE WILLIAM S. STONEY JR. CHAIR IN THORACIC AND CARDIAC SURGERY. The chair honors William S. Stoney, Jr., M.D.’54, clinical professor in the department from 1969 to 1988, for his many contributions to thoracic and cardiac surgery and especially the surgical treatment of adult heart disease.

THE MINA COBB WALLACE CHAIR IN IMMUNOLOGY. Established through the generosity of John Wallace in memory of his mother. The chair supports advancements in education and research in the field of immunology.

THE NATALIE OVERALL WARREN DISTINGUISHED CHAIR IN BIOCHEMISTRY. This chair was endowed by the William K. Warren Foundation in 1995. Mr. Warren’s wife, Natalie Overall Warren, was an honors graduate of the class of 1920 with a major in chemistry and one of eight members of her family to graduate from Vanderbilt University.

THE WILLIAM C. WEAVER III CHAIR IN NEUROLOGY. Mrs. David Y. Proctor, whose generous support is evident throughout the Medical Center, endowed this chair in 1992 in honor of her son, William C. Weaver III, in support of research and service in neurodegenerative diseases and multiple sclerosis.

THE WERTHAN PROFESSORSHIP IN INVESTIGATIVE MEDICINE. Through the generosity of the Werthan family of Nashville, this professorship was established in 1951 for the purpose of furthering research in the general field of internal medicine.

THE THOMAS L. AND JANE WILKERSON YOUNT CHAIR IN AUDIOLOGY. This chair was established by Thomas and Jane Yount in memory of her father, Wesley Wilkerson, who founded the Bill Wilkerson Hearing and Speech Center. This chair enhances the three-fold mission of the Bill Wilkerson Center: research, education, and service.

Lectureships

THE JOHN Q. ADAMS LECTURESHIP IN OTOLARYNGOLOGY. Through the generosity of the Adams family this annual lecture furthers education in otolaryngology.

THE ALPHA OMEGA ALPHA LECTURE. The Alpha Omega Alpha Honor Medical Society each year invites a scientist of prominence to deliver a lecture before the students and faculty and members of the medical community. The first lecture was given during the school year 1926/27.

THE ALLAN D. BASS LECTURESHIP. This lectureship was established in 1976 in recognition of Dr. Bass’s outstanding contributions to Vanderbilt University, the Nashville community, and the field of Pharmacology. He served as professor and chairman of the Department of Pharmacology from 1953 to 1973, as associate dean for biomedical sciences from 1973 to 1975, and as acting dean of the School of Medicine from 1973 to 1974. The lectureship is made possible through the generosity of his associates and colleagues in the American Society of Pharmacology and Experimental Therapeutics; the FASEB; the
AMA Council on Drugs; the Nashville Academy of Medicine; the present and former staff, students and faculty members at Vanderbilt University; and the Department of Pharmacology. The first lecture was given in April 1977.

THE BARNEY BROOKS LECTURESHIP. This lectureship was established in 1953 as a fitting memorial for the former professor and chairman of the Department of Surgery. It is held annually in conjunction with the spring meeting of the H. William Scott Society.

THE ROBERT N. BUCHANAN JR. VISITING PROFESSORSHIP IN DERMATOLOGY. The Department of Medicine established in 1980 a visiting professorship to honor Dr. R. N. Buchanan, Jr., professor emeritus and former chairman of the Division of Dermatology. Each year a distinguished dermatologist is invited to come to Vanderbilt to deliver a series of formal lectures and participate in teaching conferences.

THE BARNEY BROOKS MEMORIAL LECTURESHIP IN SURGERY. In 1952 through the generosity of a Vanderbilt alumnus an annual lectureship was established to honor the memory of Dr. Barney Brooks, formerly professor of surgery and head of the department, and surgeon-in-chief of Vanderbilt University Hospital. As a fitting memorial to Dr. Brooks these lectures have been given by physicians who have made distinguished contributions in clinical or investigative surgery. It is held annually in conjunction with the spring meeting of the H. William Scott Society.

THE GEORGE DANIEL BROOKS LECTURESHIP IN ONCOLOGY. Established and endowed in 1991 by Frances Brooks Corzine in honor of her father, G. Daniel Brooks, who died of cancer. The focus of the lectureship is oncology and rotates between clinical and basic cancer distinguished lecturers.

THE JOHN E. CHAPMAN LECTURESHIP IN THE ECOLOGY OF MEDICINE AND MEDICAL EDUCATION. Established by Richard E. Strain, M.D. ’75, in memory of his father, Richard E. Strain, Sr., M.D. ’35, and honoring Dr. John E. Chapman, current Dean of Vanderbilt University School of Medicine. The annual lecture will be devoted to subjects that address the changing role of medicine in our culture.

THE W. ANDREW DALE MEMORIAL LECTURESHIP. Established by the Dale family and friends, this first lecture in vascular surgery supports the advancement of vascular education, research, and patient care. The lecture reflects the depth of Dr. Dale’s commitment to Vanderbilt Medical School and vascular surgery.

THE ROLLIN A. DANIEL JR. LECTURE IN THORACIC SURGERY. In 1977 the Department of Thoracic and Cardiac Surgery established the Rollin A. Daniel Jr. Lecture as a tribute to Dr. Daniel. Since Dr. Daniel’s death, there has been generous support from Dr. Daniel’s family and many former residents to this lectureship fund. Each year a distinguished thoracic surgeon is invited by the Department to visit Vanderbilt and deliver the annual lecture, usually in the fall.

THE LEONARD W. EDWARDS MEMORIAL LECTURESHIP IN SURGERY. This annual lectureship was established in 1972 by the family and friends of Dr. Leonard Edwards, who was professor of clinical surgery, in recognition of his more than fifty years of contributions to Vanderbilt and the Nashville community as a distinguished surgeon and teacher. The first lecture was given in 1972 by Dr. Lester Dragstedt. Lectures usually concentrate on surgery and physiopathology of the alimentary tract.

THE PHILIP W. FELTS LECTURE SERIES IN THE HUMANITIES. This lecture series was established to honor Dr. Felts’s dedication to medical students and his desire to help them develop as individuals as well as physicians. Funding in his memory comes primarily from
former students and his own Vanderbilt classmates and friends as well as Vanderbilt faculty members. It allows medical students to invite a nationally recognized figure in the humanities to speak at the Medical School each year as part of the annual student-run humanities series. He was director of alumni affairs when he died in 1992.

THE ABRAHAM FLEXNER LECTURESHIP. In the fall of 1927 Mr. Bernard Flexner of New York City donated $50,000 to Vanderbilt University to establish the Abraham Flexner Lectureship in the School of Medicine. This lectureship is awarded every two years to a scientist of outstanding attainments who shall spend as much as two months in residence in association with a department of the School of Medicine. The first series of lectures was given in the fall of 1928.

THE LEROY BRUNSON GEORGE, JR., LECTURESHIP IN TRANSPLANTATION. This lecture provided by his mother, in tribute to his brave spirit in facing unprecedented heart surgery in 1956, which resulted in his death.

THE JANET M. GLASGOW MEMORIAL ACHIEVEMENT CITATION. Presented in recognition of the accomplishments of women medical students who graduate with honors. It serves to reaffirm the American Medical Women’s Association’s commitment to encouraging their continuing achievement.

THE ALVIN F. GOLDFARB LECTURESHIP IN REPRODUCTIVE ENDOCRINOLOGY. Established by the children of Dr. Goldfarb to honor their father, an alumnus of Vanderbilt University School of Medicine, this is the first named lectureship in the Center for Fertility and Reproductive Research. Serving as an important forum for continuing education, the lectureship enables the Vanderbilt medical community to learn from those at the cutting edge of research and practice in reproductive biology.

THE ERNEST W. GOODPASTURE LECTURE. In 1968 the Goodpasture Lecture was established by a friend of Vanderbilt University and of the Department of Pathology, Mrs. George M. Green, Jr. The lecture is to honor the memory of Dr. Ernest William Goodpasture, distinguished chairman of the Department of Pathology from 1925 until his retirement in 1955. Each year a lecturer prominent for achievements in research or in medical education is selected. The first lecture was given in the fall of 1971.

THE J. WILLIAM HILLMAN VISITING PROFESSORSHIP. This professorship was established in 1976 as a tribute to the late Dr. J. William Hillman, who served as professor and chairman of the Department of Orthopaedics. To commemorate Dr. Hillman’s tireless dedication to the art of teaching, the department annually invites a prominent orthopaedist to spend three or four days in residence teaching the house staff through a series of walking rounds and informal talks, concluding with a day-long seminar on special topics in the field.

THE GEORGE W. HOLCOMB LECTURESHIP. This lectureship was established in 1990 in tribute to George Whitfield Holcomb, M.D., clinical professor of pediatric surgery, emeritus, for his many contributions as a pediatric surgeon and teacher from 1952 to 1989. The lectureship will keep pediatric surgeons at Vanderbilt abreast of new clinical procedures and research discoveries in the field of pediatrics by inviting guest lecturers from all over the country to give presentations.

THE BOEHRINGER INGELHEIM DISTINGUISHED LECTURESHIP IN BIOMEDICAL SCIENCES. This lectureship was established by the Boehringer Ingelheim Pharmaceutical Company in 1992 as an annual lecture. The lectureship was given in tribute to the strength of basic biomedical sciences at Vanderbilt University Medical Center. The focus of two lectures given by the distinguished lecturer is on a fundamental research area of broad and dramatic impact on the biomedical sciences.
THE EVERETTE JAMES, JR., LECTURESHIP IN RADIOLOGY AND RADIOLOGICAL SCIENCES. Established by friends and colleagues of Dr. James, former chairman of the Department of Radiology and Radiological Sciences, this lectureship brings internationally known experts in a variety of areas of diagnostic radiology to Vanderbilt annually.

THE CONRAD JULIAN MEMORIAL LECTURE. This lecture was instituted in 1980 in honor of Dr. Conrad G. Julian, the first director of gynecologic oncology at Vanderbilt University Hospital. The lecture is delivered each year on a subject related to gynecologic oncology and is given in conjunction with the annual Gynecologic Oncology Seminar.

THE PAULINE M. KING MEMORIAL LECTURESHIP. This lectureship was established in 1962 by Mr. Robert F. King of Klamath River, California, as a memorial to his wife. Each year a distinguished thoracic or cardiovascular surgeon is invited to lecture by the Department of Surgery. The first Pauline M. King Memorial Lecture was given in the spring of 1963.

THE M. GLENN KOENIG VISITING PROFESSORSHIP IN INFECTIOUS DISEASES. This visiting professorship was established in 1973 through the generosity of alumni, faculty, friends, and the family of the late Dr. M. Glenn Koenig who served as professor of medicine and head of the Division of Infectious Diseases. In recognition of Dr. Koenig's unexcelled ability to teach at the bedside, the Department of Medicine invites physicians of unusual competence in the teaching of clinical infectious diseases to join the Division of Infectious Diseases for short periods to spend time on the wards and in discussions with students, house staff, fellows, and faculty. The first visiting professorship was held in 1973.

THE KROC FOUNDATION LECTURESHIP IN MOLECULAR PHYSIOLOGY AND BIO-PHYSICS. Established in 1986 by the Kroc Foundation in honor of Ray A. Kroc and Robert L. Kroc to support several visiting professors each year. These individuals present a state-of-the-art lecture on diabetes, insulin action, or a related endocrine topic and consult with faculty members and their groups.

THE PAUL DUDLEY LAMSON MEMORIAL LECTURE. This lectureship was instituted in 1965 in memory of Dr. Lamson, professor of pharmacology and chairman of the department from 1925 until his retirement in 1952. A prominent scientist is brought to the campus biennially under the sponsorship of the alumni and staff of the Department of Pharmacology.

THE FRANK H. AND MILBREY LUTON LECTURESHIP. Established in 1976 through the generosity of friends and former students, this lectureship honors Dr. Frank H. Luton, the first psychiatrist on the Vanderbilt faculty. Each year a prominent lecturer in the field of psychiatry is selected.

THE MARTHA E. LYNCH LECTURESHIP. The Martha E. Lynch Lectureship is an annual series of lectures presented by the Vanderbilt Bill Wilkerson Center and is designed to provide continuing education to speech-language pathologists working in the public school system. The Lectureship is named in honor of Martha E. Lynch, a speech-language pathologist who has devoted her thirty-year career to children with communication disabilities.

THE DAN MAY LECTURE. Made possible by a gift from the May family, this lecture series honors Mr. May, a Nashville business, educational, and civic leader who was a Vanderbilt graduate, long-time Board of Trust member, and friend of the University. The lecturer is a distinguished scholar of medicine or another discipline with expertise in cardiovascular disease, medical education, or humanistic aspects of medicine.

THE GLENN A. MILLIKAN MEMORIAL LECTURE. This lectureship was established in 1947 in memory of Dr. Millikan, professor of physiology, by members of the then second-year class. It has subsequently received support by means of a capital fund by Dr. Millikan's
father and mother, Dr. Robert A. Millikan and Mrs. Gretna B. Millikan, and friends. Contributions have been made to the fund by members of the founding class and other students. The lectureship is maintained to provide a distinguished lecturer in physiology.

THE WILLIAM F. ORR LECTURESHIP. This annual lectureship was established in 1976 through the generosity of Hoffman-LaRoche, Inc., in honor of Dr. William F. Orr, first professor and chairman of the Department of Psychiatry, a position he held from 1947 to 1969. A psychiatrist of national prominence is invited each year to present the lecture and to participate in various teaching conferences in the Department of Psychiatry.

THE FRED D. OWNBY LECTURESHIP IN CARDIOLOGY. This lectureship was established in 1996 as a tribute to Dr. Fred D. Ownby's contributions to the field of cardiology, his passion for education, and his commitment to the people of Middle Tennessee. Presented annually by a visiting professor, researcher, or clinician of national renown, the lectures, seminars, and teaching rounds address the latest advances in research, technology, and treatment of cardiovascular illnesses.

THE COBB PILCHER MEMORIAL LECTURE. In 1950 the Pi Chapter of the Phi Chi Medical Fraternity established the Cobb Pilcher Memorial Lecture to honor the memory of Dr. Pilcher, formerly associate professor of surgery, distinguished neurosurgeon, and a member of Phi Chi fraternity. Each year a lecturer of prominence is selected. The first lecture was given in 1950.

THE DAVID RABIN LECTURE IN ENDOCRINOLOGY. The Department of Medicine established in 1980 a visiting lectureship in recognition of the salient contributions of Dr. David Rabin to the world of endocrinology. Dr. Rabin was professor of medicine and head of the Division of Endocrinology from 1975 until his death in 1984. This lectureship annually brings to Vanderbilt a world leader in the science of endocrinology and the application of that science to the solution of the problems of humankind.

THE SAMUEL S. RIVEN VISITING PROFESSORSHIP. This professorship was established in 1989 to honor Dr. Samuel Riven for over fifty years of service to his patients and the Department of Medicine at Vanderbilt University. A physician of prominence is invited each year to present a lecture and to participate in various teaching conferences in the Department of Medicine.

THE NORMAN E. SHUMWAY, JR., LECTURESHIP IN TRANSPLANTATION. This lectureship was established in 1994 to recognize the contributions and leadership of Dr. Shumway, a 1949 graduate of VUMS, in pioneering transplantation research, education, and patient care.

THE R. TURNER SIMPSON LECTURESHIP IN THE HISTORY OF MEDICINE. This lectureship was made possible by the generous contributions of John W. Simpson, M.D., Vanderbilt School of Medicine class of 1932, and his wife. The late Dr. Turner Simpson, brother of Dr. John W. Simpson, was also a Vanderbilt graduate. This lectureship will bring prominent figures in the field of medical history to Vanderbilt.

THE GRACE AND WILLIAM S. SNYDER LECTURESHIP. Established in 1983 by Phyllis and William B. Snyder, MD '57, the Snyder Lectureship honors his parents, both of whom practiced medicine in Kentucky. The lectureship is in the Department of Ophthalmology and Visual Sciences.

THE CHARLES J. THUSS SR. AND GERTRUDE NOBLE THUSS LECTURESHIP IN PLASTIC AND RECONSTRUCTIVE SURGERY. This lectureship was established in 1977 by Dr. Charles J. Thuss, Jr., Medical Class of 1961, of San Antonio, Texas, in honor of his parents.
The lectureship is funded in collaboration with the Department of Plastic Surgery for the purpose of bringing distinguished lecturers in the field of plastic and reconstructive surgery to the Vanderbilt campus.

THE "UNIT S" OTOLARYNGOLOGY LECTURESHIP. This lectureship was established in 1994 through the leadership and generosity of Dr. William G. Kennon, Jr., and other descendants of the VUMS Team which served during World War I.

THE VANDERBILT UROLOGY SOCIETY VISITING PROFESSORSHIP AND RHAMY-SHELLEY LECTURE. This annual visiting professorship and lectureship was established in 1972 through the efforts of former residents in urology at Vanderbilt University Medical Center. An outstanding urologist, from either the United States or abroad, is invited to spend four or five days as visiting professor in the Department of Urology, to join with former residents and other urologists in demonstrations of surgical technique and diagnostic acumen, as well as in a series of conferences and lectures. The activities conclude with a formal lecture which honors Dr. Robert K. Rhamy, who was chairman of the Department of Urology at Vanderbilt from 1964 to 1981, and Dr. Harry S. Shelley, former chief of the Division of Urology at Nashville Veterans Administration Hospital.

THE MINA COBB WALLACE CHAIR IN GASTROENTEROLOGY AND CANCER PREVENTION. This chair was endowed in 1998 by John B. Wallace, a prominent physician from Gallatin, Tennessee, in memory of his mother, Mina Cobb Wallace. It promotes research in gastroenterology with specific application to the field of cancer prevention.

THE ALBERT WEINSTEIN LECTURESHIP IN DIABETES. This lectureship was established as a tribute to the late Dr. Albert Weinstein by his wife, Miriam, and family members. Dr. Weinstein was born in Middlesboro, Kentucky, in 1905 and received his A.B. degree from Vanderbilt University in 1926. Three years later he graduated as Founder’s Medalist from Vanderbilt Medical School. Following his residency training at Johns Hopkins, he moved to Nashville to begin his medical practice in internal medicine at Vanderbilt, where he served as clinical professor for over three decades. Recognized for his remarkable insight into the treatment of his patients, he was also an avid reader and publisher credited for more than forty scientific papers on a wide array of subjects, including diabetes, cardiology, and hypertension.

THE MARY JANE AND ALBERT WERTHAN VISITING LECTURESHIP IN DERMATOLOGY. This lectureship was established by the Werthans in 1997 in honor of Dr. Lloyd King, Chairman of the Division of Dermatology at Vanderbilt University Medical Center. The named lectureship will bring topflight physician-scientists to Vanderbilt annually to discuss advances in the diagnosis, treatment, and causes of skin lymphoma and other types of skin cancers.

THE JOHN D. WHALLEY LECTURESHIP. The John D. Whalley Child Language Lecture-ship is an annual lecture presented by the Vanderbilt Bill Wilkerson Center, featuring internationally recognized researchers in the area of child language disorders. The lectureship is a tribute to the late John Donelson Whalley, one of the influential forces behind the development of the Scottish Rite Masons Research Institute for Communication Disorders at the Bill Wilkerson Center.
Honors and Awards

Alpha Omega Alpha

A chapter of this medical honor society was established by charter in the School of Medicine in 1923. Not more than one-eighth of the students of the fourth-year class are eligible for membership and only one-half of the number of eligible students may be elected to membership during the last half of their third year. The society has for its purpose the development of high standards of personal conduct and scholarship and the encouragement of medical research. Students are elected into membership on the basis of scholarship, character, and originality.

Founder’s Medal

The Founder’s Medal, signifying first honors, was endowed by Commodore Cornelius Vanderbilt as one of his gifts to the University. This medal is awarded to the student in the graduating class of the School of Medicine who, in the judgment of the Executive Faculty, has achieved the strongest record in the several areas of personal, professional, and academic performance in meeting the requirements for the Doctor of Medicine degree during four years of study at Vanderbilt.

Other Prizes and Awards

THE BEAUCHAMP SCHOLARSHIP. This scholarship, founded by Mrs. John A. Beauchamp in memory of her husband, who was for many years superintendent of the Central State Hospital in Nashville, is awarded to the student showing the greatest progress in neurology and psychiatry and who is otherwise worthy and deserving.

THE LONNIE S. BURNETT AWARD IN OBSTETRICS AND GYNECOLOGY. This award is given to the student demonstrating superior performance and who exemplifies the qualities of dedication, leadership, compassion, and integrity in the field of obstetrics and gynecology.

THE DIXON N. BURNS AWARD IN MEDICAL ETHICS. This award is given by the Center for Clinical and Research Ethics to the graduating medical student who has, through a written essay, demonstrated unusual ability in identifying and analyzing ethical issues presented in either clinical or research contexts.

THE AMOS CHRISTIE AWARD IN PEDIATRICS. Established in 1970 by an anonymous donor, this award is made to the student in the graduating class who has demonstrated the outstanding qualities of scholarship and humanity embodied in the ideal pediatrician. The award is in memory of Dr. Amos Christie, professor of pediatrics, emeritus, who was chairman of the Department of Pediatrics from 1943 to 1968.
THE JOHN G. CONIGLIO PRIZE IN BIOCHEMISTRY. This award is presented to a medical student who has achieved distinction in Biochemistry. Both accomplishments in biomedical research and performance in Biochemistry courses are considered in evaluating candidates. This award was established by friends of Professor Coniglio on the occasion of his retirement to honor his many contributions to medical education at Vanderbilt.

THE DEAN’S AWARD. This award is presented by the Dean to students who have distinguished themselves by their outstanding contribution of leadership and service throughout four years of study at Vanderbilt University School of Medicine.

THE DIABETES/ENDOCRINE RESEARCH AWARD. Given to the graduating student who has performed the most meritorious research related to diabetes and endocrinology. The award was established in honor of Dr. Oscar Crofford, Professor of Medicine, by his colleagues and friends throughout North America, to honor his leadership and distinguished service in diabetes research.

THE ENDOCRINE SOCIETY AWARD FOR EXCELLENCE IN CLINICAL ENDOCRINOLOGY. This award is presented annually by the Division of Endocrinology and Diabetes to the graduating medical student who demonstrates outstanding performance in clinical endocrinology. The award is sponsored by the Endocrine Society. The Society, founded in 1916, is the world's largest professional association devoted to all aspects of endocrinology.

THE EXCELLENCE IN EMERGENCY MEDICINE AWARD. The award for Excellence in Emergency Medicine is given on behalf of the Society for Academic Emergency Medicine. This award recognizes a medical student for outstanding clinical performance in the Emergency Department at Vanderbilt University Medical Center.

THE DAVID R. FREEDY MEMORIAL AWARD. This award was established to honor the memory of David Richard Freedy, a member of the class of 1993. It is given to the student who has demonstrated qualities of leadership, exceptional courage and perseverance in the face of adversity, and dedication to improving and promoting community life.

THE JANET M. GLASGOW MEMORIAL ACHIEVEMENT CITATION. Presented in recognition of the accomplishments of women medical students who graduate with honors. This citation serves to reaffirm the American Medical Women's Association's commitment to encouraging continuing achievement.

THE JANET M. GLASGOW MEMORIAL AWARD. This award is presented to a woman medical student who is an honor graduate and leads her class in academic distinction.

THE PAULA C. HOOS AWARD. The Class of 2001 presents this award in recognition of teaching excellence in the anatomy laboratory and to express our sincere appreciation for the assistance of members of the graduating class.

THE HOSPITAL AWARD FOR EXCELLENCE. This award recognizes the graduating medical student selected by the chief residents of all the services as having made the largest personal contribution toward quality patient care by demonstrating sensitivity, compassion, and concern in his or her clinical responsibilities to patients.

THE RUDOLPH H. KAMPMEIER PRIZE IN CLINICAL MEDICINE. Awarded by the Department of Medicine to the student who, at the completion of the fourth year of training, is judged by the faculty of the department to have exhibited the qualities of the excellent physician as exemplified by Dr. Rudolph H. Kampmeier throughout his career. The qualifications to be given greatest weight will be proficiency in diagnosis and therapy; consideration of the patient as a complete person with a life that is more than that of a "sick patient";
ability to think with originality and to teach, lead, and inspire others; unstinting devotion to the welfare of others; and ability to work effectively with other members of the medical and paramedical professions.

THE KAUFMAN PRIZE IN MEDICINE. This award, honoring J. Kenneth Kaufman, a 1939 Medical School graduate, is presented to a graduating medical student who has demonstrated qualities of humaneness, dedication, and unselfish service in the study of medicine and will apply these qualities in medical practice.

THE MERCK AWARD FOR EXCELLENCE IN THE STUDY OF INFECTIOUS DISEASES. Presented annually by the Divisions of Infectious Diseases in the departments of Medicine and Pediatrics to the student who has demonstrated outstanding aptitude and performance in clinical and investigative efforts in infectious diseases or microbiology.

THE TOM NESBITT AWARD. The Tom Nesbitt award is presented by the Nashville Academy of Medicine and the Davidson County Medical Society in recognition of the service and contribution of Tom Nesbitt, M.D., as a member of the Academy and the one hundred and thirty-third president of the American Medical Association. Dr. Nesbitt is an assistant clinical professor of urology. This award is presented to the graduating medical student who demonstrates exemplary character and leadership.

THE ORTHOPAEDIC SURGERY CLERKSHIP AWARD. This award is presented by the Department of Orthopaedic to the student who has excelled in both the third and fourth year orthopaedic clerkships and who has demonstrated outstanding potential in the field of orthopaedic surgery.

THE ROENTGEN AWARD. This is an annual award to a graduating medical student who has made important contributions in one of the radiological sciences during four years at Vanderbilt University Medical School. Named for Wilhelm Conrad Roentgen (1845–1923), a pioneer in diagnostic radiology, the award recognizes discoveries in either clinical or research areas.

THE SCHOOL OF MEDICINE AWARD OF DISTINCTION IN MEDICAL EDUCATION. This award is presented to the student who has demonstrated outstanding qualities of scholarship, leadership, and humanitarian service in the context of medical education.

THE H. WILLIAM SCOTT JR. PRIZE IN SURGERY. This award is presented to the graduating student who exemplifies the qualities of leadership, performance, and character reflecting the ideal surgeon.

THE JOHN L. SHAPIRO AWARD FOR EXCELLENCE IN PATHOLOGY. This award is given to the student selected by the Department of Pathology on the basis of accomplishments and potential in medicine with superior performance in the pathology course or superior performance in research in pathogenesis of disease.

THE SURGICAL CLERKSHIP AWARD. This award is presented annually by the Section of Surgical Sciences to a student who has had a superior performance in the third-year surgical clerkship and who plans to enter graduate education in surgery. The award includes an expense-paid attendance at the annual meeting of a national surgical society.

THE ALBERT WEINSTEIN PRIZES IN MEDICINE. Three prizes established in memory of Albert Weinstein, M.D., are awarded at graduation to fourth-year students who, in the opinion of the faculty of the Department of Medicine, merit recognition for high scholastic attainment and the qualities which characterize the fine physician.
Dr. Albert Weinstein graduated from Vanderbilt University in 1926 and was founder’s medalist from Vanderbilt School of Medicine in 1929. Following training at Vanderbilt and Johns Hopkins he returned to Vanderbilt as chief resident in medicine, 1933–1935, and served as a distinguished member of the faculty and clinical professor of medicine until his death on 1 October 1963. Despite a busy and successful practice, Dr. Weinstein contributed regularly to the medical literature and maintained a major interest in the teaching of medical students. These prizes were established in 1964 by contributions from friends, associates, and former patients of Dr. Weinstein.

THE CANBY ROBINSON SOCIETY AWARD. With nominations generated from the fourth year class, this award is presented to a member of the graduating class who possesses those intangible qualities of common sense, knowledge, thoughtfulness, personal warmth, gentleness, and confidence that combine to make the “ideal doctor”—the person fellow classmates would most like to have as their personal physician.

THE TENNESSEE ACADEMY OF FAMILY PHYSICIANS AWARD. This award is given to a graduating medical student in recognition of dedication to the high ideals of Family Practice.
Tuition for the academic year 1999/2000 is $25,250. The annual expense of a student in the School of Medicine is estimated to be $37,700.

Tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

Other Fees (1999/2000)

- Application fee (to accompany secondary application) $50
- Student activities and recreation fee $237
- Microscope usage fee per year (1st and 2nd years) $100
- Student health insurance $730
- Professional liability insurance $108
- Student long-term disability insurance $130
- Student health service fee $55

Payment of Tuition and Fees

All regularly enrolled medical students must pay the full tuition each year. There will be no exception to this requirement. Graduate students who enroll in courses in the medical curriculum for credit toward an academic degree and who later become candidates for the Doctor of Medicine degree may be required to pay the full tuition as indicated above. First-year medical students who are also three-year students in the College of Arts and Science are required by the College to pay a senior-in-absentia fee equal to one hour of Arts and Science tuition. One half of tuition, total fees, and other University charges are due and payable by 27 August. Second semester tuition and other University charges are due and payable by 14 January.

Refund of Tuition

Students who withdraw officially or who are dismissed from the University for any reason after the beginning of a term may be entitled to a partial refund in accordance with the schedule shown below. No refund will be made after the tenth week in any semester.

Dean Chapman congratulates Founder’s Medalist Michael Alan Proffitt
Withdrawal prior to the end of Reduction

1st full week 100%
2nd full week 90%
3rd full week 80%
4th full week 70%
5th full week 70%
6th full week 60%
7th full week 50%
8th full week 50%
9th full week 40%
10th full week 40%

No refund after the 10th full week.

Late Payment of Fees

Charges not paid by 27 August will be automatically deferred, and the student’s account will be assessed a monthly late payment fee at the following rate: $1.50 on each $100 that remains unpaid after 27 August ($5 minimum). An additional monthly late payment fee will be assessed unless payment is received in full on or before the end of each month; and late payment fees will continue for each month thereafter based on the outstanding balance unpaid as of the end of each month. All amounts deferred are due not later than 30 November for fall semester and 30 April for spring semester. Fourth year students are not allowed to defer charges that are billed in advance for the final semester.

Financial Clearance

Students will not be allowed to register for any semester if they have outstanding unpaid balances for any previous semester. No transcript, official or unofficial, will be issued for a student who has an outstanding balance until the account has been paid. Diplomas of graduating students will be withheld until all bills are paid.

Microscopes, Books, and Equipment

First-year and second-year students are provided microscopes by the University. The usage fee for this service is included in the tuition and fee schedule and is required of all students in these classes.

All students must have clean white laboratory coats. In their second year students must acquire hemocytometers and ophthalmoscopes. The average cost for these instruments is approximately $450.

The average cost of books is approximately $500 per year. The Medical Bookstore accepts cash or major credit cards.
Activities and Recreation Fees

The required student activities and recreation fees entitle students to use the facilities of Sarratt Student Center and the Student Recreation Center. The fees also cover admission to certain social and cultural events and subscriptions to certain campus publications. Specific information on these fees is published annually in the Student Handbook. By payment of an additional fee, students and their spouses may use their identification cards for admission to athletic events.

The student activities fee (Sarratt and University programs) and the student recreation fee will be waived automatically if the student is a part-time student registered for four or fewer semester hours, or if he or she resides, while a student, beyond an approximate fifty-mile radius from the campus as determined by zip code. Students who register late or students who wish to have fees waived due to exceptional circumstances must petition for a waiver through the Office of Campus Student Services, Box 6206 Station B, Nashville, Tennessee 37235. A $10 charge is assessed for processing the waivers of students who register late.

Professional Liability Insurance

Students will be automatically covered with professional liability insurance, required of all enrolled medical students, at the time of registration. The annual premium is payable in addition to tuition. Details of the policy are available at the University student insurance office, and students are encouraged to familiarize themselves with these details and with their responsibilities in this regard.

Students are covered whether they are at the Vanderbilt-affiliated hospitals (Vanderbilt University Hospital, Nashville Veterans Administration Hospital, St. Thomas Hospital, or Baptist Hospital) or elsewhere as a “visiting student,” providing that (1) the clerkship or other educational experience has prior approval from the School of Medicine as course work for credit, and (2) the activities within this experience are consonant with the student’s level of training and experience and are performed under the supervision of appropriate faculty and/or staff.

Disability Insurance

Students will be automatically covered with long-term disability insurance, required of all enrolled medical students, at the time of registration. The annual premium is payable in addition to tuition. Details of the policy will be provided to each student following registration.
**Student Health Insurance**

All degree-seeking students registered for 4 or more hours at Vanderbilt are required to have adequate hospitalization insurance coverage. The University offers a sickness and accident insurance plan that is designed to provide hospital, surgical, and major medical benefits. A brochure explaining the limits, exclusions, and benefits of insurance coverage is available to students at registration, in the Office of Student Financial Services, or at the Student Health Center. See page 33 for more details.

**Student Health Service Fee**

The required student health service fee covers required immunizations and health screening tests.

**Honor Scholarships**

THE DORIS M. AND FRED W. LOVE SCHOLARSHIP. The Love Scholarship was established by Dr. and Mrs. Fred W. Love, a 1945 School of Medicine graduate. This tuition scholarship is given periodically and continues contingent upon satisfactory progress until the recipient graduates.

THE CANBY ROBINSON SCHOLARSHIPS. Canby Robinson Scholarships provide full tuition and, with satisfactory progress at Vanderbilt, continue for four years. The scholarships are awarded on the basis of academic achievement and financial need. Scholarship recipients are recommended by the Dean and the chairman of the Admissions Committee and chosen by a committee from the Canby Robinson Society. These scholarships were established in 1986 by the Canby Robinson Society.

THE JOE C. DAVIS SCHOLARSHIP. The Davis Scholarship is given periodically to an incoming medical student who has demonstrated qualities of scholarship and leadership, as well as financial need. To be eligible, the candidate must come from a state specified as a Southeastern state east of the Mississippi. It is a full tuition scholarship for four years of medical study, contingent upon satisfactory performance.

THE DEAN’S SCHOLARSHIPS FOR OUTSTANDING MINORITY STUDENTS. These full-tuition scholarships are funded by the Dean’s Office for four years of study, contingent upon satisfactory academic performance. The Vanderbilt University School of Medicine is committed to diversity in its student body.

THE GRACE MCVEIGH SCHOLARSHIP FUND. This endowed scholarship was established by Grace McVeigh, a 1925 Vanderbilt University graduate, to provide full tuition, four-year scholarships for the benefit of needy and worthy students in the School of Medicine.
Financial Assistance

Education leading to the Doctor of Medicine degree requires a careful consideration of financial commitment by prospective students and their families. Financial planning is an important part of the student’s preparation for medical school.

In addition to the Honor Scholarships just described, scholarships and loans are available through Vanderbilt, based on demonstrated financial need and continued satisfactory academic progress. The applicant must be a U.S. citizen, national, or permanent resident. Financial aid from school sources must be considered a supplement to governmental and other sources, rather than the primary source of funds necessary to attend medical school. Institutional financial aid is not adequate to meet students’ demonstrated need, but approved educational expenses are met with funds from a combination of sources. Government funds that furnish significant loans to medical students are the Federal Subsidized and Unsubsidized Stafford Loan programs. Students interested in primary care may be eligible for Primary Care Loans. Private alternative loans are also available.

Applications for financial aid will be sent to incoming first-year students in January or, if they are invited after that date, along with the offer of admission to the Medical School. Applicants desiring more specific information about financial aid resources should contact the Medical School Office of Student Financial Services.

The following are some of the Vanderbilt University School of Medicine institutional scholarships and loans available to assist students with demonstrated financial need.

Scholarships

THE ALPHA KAPPA KAPPA ALUMNI ASSOCIATION FUND. These funds are made available to students through contributions from alumni of the Alpha Kappa Kappa medical fraternity.

THE LUCILE R. ANDERSON SCHOLARSHIP FUND. This scholarship was established by Lucile R. Anderson, a 1933 School of Medicine graduate.

THE EUGENE AND MARGE BESPALOW SCHOLARSHIP FUND. This endowed scholarship fund for deserving medical students was established by Dr. Bruce Dan, a Vanderbilt alumnus, in honor of his grandparents.

THE DR. DANIEL B. BLAKEMORE SCHOLARSHIP FUND. This endowed scholarship was established by the will of Mrs. Nell J. Blakemore in memory of her husband for the benefit of worthy medical students who are in need of financial assistance.

THE BURRUS SCHOLARSHIP FUND. This endowed scholarship was established by members of the Burrus family to help meet the cost of tuition for medical students.

THE THOMAS CULLOM BUTLER AND PAULINE CAMPBELL BUTLER SCHOLARSHIP. This endowed scholarship was established by Thomas Cullom Butler, a 1934 School of Medicine graduate, for worthy and needy medical students.
THE ALICE DREW CHENOWETH SCHOLARSHIP. This scholarship honors the career of Dr. Alice Drew Chenoweth, a 1932 School of Medicine graduate who had a distinguished career as a pediatrician in the area of public health.

THE CLASS OF 1943 MARCH AND DECEMBER SCHOLARSHIP FUNDS. These endowed scholarships were established by members of these Medical School classes.

THE CLASS OF 1946 MEDICAL SCHOLARSHIP. This scholarship was established by members of this Medical School class.

THE CLASS OF 1947 SCHOLARSHIP. This scholarship was established by members of this Medical School class.

THE CLASS OF 1964 MEDICAL SCHOLARSHIP FUND. This scholarship was established by members of this Medical School class.

THE DR. ROBERT D. COLLINS SCHOLARSHIP FUND. This endowed scholarship was established by alumni in honor of Dr. Robert D. Collins, a distinguished and admired longtime professor of pathology and 1951 School of Medicine graduate.

THE LOUISE WILLIAMS COUCH MEMORIAL SCHOLARSHIP. This fund was endowed by the friends and family of Mrs. Louise Williams Couch.

THE DEBORAH AND C. A. CRAIG II MEDICAL SCHOLARSHIP FUND. This fund was established in 1992 by Mr. and Mrs. C. A. Craig II. It provides support to talented and deserving students engaged in the study of medicine. Preference is awarded to former Eagle Scouts.

THE JACK DAVIES SCHOLARSHIP FUND. This fund was endowed primarily through gifts from the Classes of 1981, 1982, 1983, 1984, and 1994 in honor of the distinguished and beloved longtime professor of anatomy. This fund is designed to provide medical student financial assistance.

THE J. T. AND MARY P. DAVIS SCHOLARSHIP FUND. This endowed scholarship was established by J. T. Davis, a 1931 School of Medicine graduate.

THE EBERT MEMORIAL MEDICAL SCHOLARSHIP. This scholarship was provided from the estate of A. F. Ebert, a 1924 School of Medicine graduate.

THE HERBERT ESKIND MEMORIAL FUND. This scholarship honoring the memory of Mr. Herbert Eskind was established by members of his family.

THE ROBERT SADLER–WILLIAM EWERS SCHOLARSHIP FUND. This endowed scholarship was established in honor of Robert Sadler and William Ewers, 1947 School of Medicine graduates.

THE SAM FLEMING SCHOLARSHIP. This scholarship for needy medical students was established by J. T. Stephens in honor of Sam Fleming, former president of the Vanderbilt Board of Trust.

THE J. F. FOX STUDENT SCHOLARSHIP IN MEDICINE. This fund was established in memory of Dr. J. F. Fox, a Vanderbilt graduate, and provides for annual assistance to students in the School of Medicine based on scholarship, promise, and financial need.

THE D. G. GILL SCHOLARSHIP FUND. This fund was established in 1982 by the family of the late Dr. Daniel Gordon Gill. First preference goes to those students with financial need who have expressed an interest in the field of public health.
THE DRS. FRANK LUTON AND CLIFTON GREER SCHOLARSHIP FUND. This fund was founded in 1995 through a gift from the estate of Dr. Clifton Greer, M.D. '51, in honor of the late Dr. Luton, M.D. '27. It provides tuition support for medical students with demonstrated financial need, with preference given to those from the southeastern United States.

THE DR. HARRY GUFFEE SCHOLARSHIP FUND. This endowed scholarship was established in honor of Dr. Harry Guffee, a 1939 School of Medicine graduate. Residents of Williamson County, Tennessee, are given first preference, and residents of the counties adjoining Williamson County are given second preference.

THE JAMES HOLLORAN SCHOLARSHIP. This endowed scholarship was established by the class of 1980 in memory of their classmate, “Ed” Holloran.

THE HOLLIS E. AND FRANCES SETTLE JOHNSON SCHOLARSHIP FUND. This endowed scholarship was established by Hollis E. Johnson, a 1921 School of Medicine graduate.

THE IKE J. KUHN FUND. This scholarship fund is provided by a bequest from the will of Mr. Ike J. Kuhn and is awarded in the School of Medicine to a worthy man or woman born and raised in any of the states commonly known as the “southern states.”

THE ANN R. LIGHT SCHOLARSHIP FUND. This endowed scholarship was established by Ann R. Light for needy medical students.

THE THOMAS L. MADDIN, M.D., FUND. This fund is provided by a bequest from the will of Mrs. Sallie A. C. Watkins in memory of Dr. Thomas L. Maddin.

THE JACK MARTIN SCHOLARSHIP FUND. This endowed scholarship was established in honor of Jack Martin, a 1953 School of Medicine graduate.

MEDICAL STUDENT SCHOLARSHIPS GIFT FUND. Funds are available to needy students through gifts donated by alumni and friends of Vanderbilt Medical School.

THE H. HOUSTON MERRITT SCHOLARSHIP. This endowed scholarship was established by H. Houston Merritt, a 1922 School of Medicine graduate.

THE JAMES PRESTON MILLER TRUST. This trust, left by the will of James P. Miller in memory of his father, James Preston Miller, provides funds to assist in the medical education of deserving young men and women at Vanderbilt University. Residents of Overton County, Tennessee, are to be given first preference, and other residents of Tennessee are to be given second preference.

THE THOMAS W. RHODES STUDENT SCHOLARSHIP FUND. Funds provided by the will of Georgine C. Rhodes were left to Vanderbilt University for the purpose of establishing a scholarship fund in the School of Medicine.

THE RILEY SCHOLARSHIP. This endowed scholarship was established by members of the Riley family: Harris D. Riley, Jr., M.D.; Frank Riley; Richard F. Riley, M.D.; and William G. Riley, M.D., all of whom are Vanderbilt alumni.

THE CANBY ROBINSON SOCIETY STUDENT SCHOLARSHIP BENEFACCTOR PROGRAM. Scholarships are made available to students from members who donate to this program.

THE HELEN AND LOUIS ROSENFELD ENDOWED SCHOLARSHIP FUND. This endowed scholarship was established by Helen Rosenfeld, a Vanderbilt University alumna, and Louis Rosenfeld, a 1936 School of Medicine graduate.
THE GEORGE E. ROULHAC MEMORIAL SCHOLARSHIP FUND. This fund was established in 1994 through a gift from the estate of Dr. Roulhac, M.D. ’39. It provides tuition support for medical education.

THE WILLETT H. “BUDDY” RUSH SCHOLARSHIP. Established in memory of Dr. Rush, a 1941 graduate of the School of Medicine, this scholarship honors the dedication he showed to the practice of medicine and the Frankfort, Kentucky community. Awards are given in order of preference to students from Frankfort, Kentucky, the Blue grass region of Kentucky, and then the state of Kentucky.

THE RICHARD M. SCOTT FINANCIAL AID PROGRAM. This endowed scholarship was established by the Medical Class of 1988 to honor Richard M. Scott, Director of Financial Aid for the School of Medicine from 1970 to 1987.

THE JOHN SECONDI SCHOLARSHIP FUND. This endowed scholarship was established in memory of Dr. John Secondi, a 1970 School of Medicine graduate.

THE FRANK C. AND CONNIE EWELL SPENCER MEDICAL SCHOLARSHIP FUND. This endowed scholarship fund was established in 1997 by Dr. Frank Cole Spencer, M.D. ’47 and his wife, Connie Ewell Spencer, B.A. ’46, to honor his medical class of 1947 on the occasion of its 50th reunion. The scholarship is used to assist worthy students who would not otherwise be able to attend the School of Medicine.

THE LESLIE M. SMITH AND EVELYN C. SMITH SCHOLARSHIP ENDOWMENT FUND. This endowed scholarship fund was established in 1998 by Mrs. Evelyn Clark Smith, widow of Dr. Leslie McClure Smith, M.D. ’30, to be used to assist needy medical students. Preference is given to those students from New Mexico and Kentucky.

THE JOHN N. SHELL ENDOWMENT FUND. This scholarship fund is provided by a bequest from the will of John N. Shell.

THE K. DOROTHEA AND JOSEPH G. SUTTON SCHOLARSHIP IN MEDICINE. This scholarship was established in 1995 through a gift from the estate of Dr. Sutton, M.D. ’22, for the benefit of students with financial need pursuing the study of medicine.

THE FRED C. WATSON MEMORIAL SCHOLARSHIP. This scholarship is made on the recommendation of the Medical School to students selected by a committee based in Lexington, Tennessee, to students who are graduates of Lexington High School and are residents of Henderson County.

THE JOE AND HOWARD WERTHAN FOUNDATION FUND. The funds made available by this foundation to Vanderbilt University are to be given to those students in the School of Medicine needing financial assistance.

THE WILLIAM STUART YOUNGER, JR., MEMORIAL SCHOLARSHIP. This scholarship was established by Rachel K. Younger, a 1945 Vanderbilt University graduate, in memory of her son.

Other Scholarships

Other scholarships are available outside of the need-based institutional financial aid program. They are as follows:

THE ELBYRNE GRADY GILL SUMMER RESEARCH SCHOLARSHIPS IN OPHTHALMOLOGY AND OTOLARYNGOLOGY. These scholarships provide support for medical student sum-
mer research in the areas of ophthalmology and otolaryngology.

THE MARY AND WILLIAM O. INMAN JR. SCHOLARSHIP FUND. This fund was established by Miss Grace McVeigh to pay tribute to the many contributions to the Brunswick, Georgia, community by the Inmans. This fund supports students in the combined M.D./Ph.D. program.

THE KONRAD LUX SCHOLARSHIP. This endowed scholarship was established by the will of Konrad Lux, a 1925 Vanderbilt University graduate, to benefit students in the Oral Surgery program.

MEADE HAVEN SCHOLARSHIPS IN BIOMEDICAL SCIENCES. Meade Haven scholarships in biomedical sciences have been endowed to provide support for medical students who have made a serious career commitment to obtain advanced experience and training in research in the biomedical sciences.

Revolving Loans

THE AMA/ERF LOAN FUND. Funds are available to needy students through gifts donated by the American Medical Association Education and Research Foundation.

THE F. TREMAINE BILLINGS REVOLVING STUDENT LOAN FUND. Established by Elizabeth Langford and friends, this loan fund honors Dr. Billings and his many contributions as friend and internist. It is to be used for the education of worthy medical students.

THE BLOSSOM CASTER LOAN FUND. This fund was established by Milton P. Caster, a 1949 School of Medicine graduate, in honor of his mother, Mrs. Blossom Caster.

THE O. D. CARLTON II LOAN FUND. This revolving loan fund was established by Hall Thompson in honor of O. D. Carlton II for needy third- and fourth-year medical students.

THE EDWARD F. COLE REVOLVING MEDICAL LOAN FUND. These funds are made available to students through contributions from Dr. Edward F. Cole, a Vanderbilt Medical alumnus.

THE FRANK M. DAVIS AND THEO DAVIS STUDENT LOAN FUND. This endowed loan was established by Frank M. Davis, a 1934 School of Medicine graduate.

THE MAX EISENSTAT REVOLVING STUDENT LOAN FUND. This fund was established to honor the memory of Dr. Max Eisenstat.

THE TINSLEY HARRISON LOAN FUND. This fund was established to assist needy and worthy medical students by Dr. T. R. Deur, a Vanderbilt Medical School alumnus, in memory of Dr. Harrison, a former teacher and clinician at the school.

THE DR. ISADORE DAVID HASKELL FUND. This fund is provided by a bequest from the will of Mrs. Elena G. Haskell. The loans are to be provided in emergency situations to needy and deserving students.

THE GALE F. JOHNSTON LOAN FUND. The funds donated by Gale F. Johnston are to be used as a revolving loan fund for students in the School of Medicine.

THE W. K. KELLOGG FOUNDATION LOAN FUND. This fund was established through donations from the W. K. Kellogg Foundation.
THE VANDERBILT MEDICAL FACULTY LOAN FUND. This fund is made available by donations from members of the Medical School faculty to be used to defray the educational costs of disadvantaged students.

THE MEDICAL LOAN FUND OF LIFE AND CASUALTY INSURANCE COMPANY OF TENNESSEE. Through donations from the Life and Casualty Insurance Company of Tennessee, needy students are provided revolving student loans.

THE MEDICAL SCHOOL CLASS OF 1957 LOAN FUND. This fund was established by members of this Medical School class.

THE MEDICAL SCHOOL STUDENT AID LOAN FUND. This fund is made possible through contributions from alumni and friends.

THE KARL METZ MEMORIAL LOAN FUND. This fund for needy students was established in memory of Karl Metz.

THE J. C. PETERSON STUDENT LOAN FUND. This fund was established in memory of Dr. J. C. Peterson to provide loan monies for deserving medical students.

THE COLONEL GEORGE W. REYER MEMORIAL LOAN FUND. This fund was established by Colonel George W. Reyer, a 1918 School of Medicine graduate.

THE LEO SCHWARTZ LOAN FUND. This loan fund was established through contributions from Dr. Leo Schwartz.

THE ROBERT E. SULLIVAN MEMORIAL LOAN FUND. Through the generosity of Robert E. Sullivan, a fund has been established to assist worthy and deserving medical students.

THE ROANE/ANDERSON COUNTY MEDICAL SOCIETY FUND. This revolving loan fund is given to a needy medical student, with preference given, when possible, to students from Roane, Anderson, and Morgan Counties of Tennessee.

THE THOMPSON STUDENT LOAN FUND. This fund is to be used as a revolving loan fund for students in the School of Medicine from Middle Tennessee.

THE VANDERBILT MEDICAL SCHOOL ALUMNI REVOLVING LOAN FUND. This fund was established through contributions from alumni.

Student Summer Fellowships

Student research under the sponsorship of members of the faculty of the preclinical and clinical departments is endorsed as an important part of the elective medical curriculum. Stipends vary from about $2,000 to $3,500 for the summer programs, depending upon experience. Limited funds for fellowship support are available on a competitive basis from individual departments within the Medical School. Funds are provided from a variety of sources, including the United States Public Health Service and various private foundations and health-interested organizations such as the local affiliates of the American Heart Association.

Research projects may be taken as electives for credit but without remuneration. Special arrangements can be made for participation in research programs abroad or in other medical schools in the United States. Individual departments or faculty members may also support student re-
search experiences. Funds from all sources are becoming more difficult to obtain, but remain available, though limited.

THE DAN MAY SUMMER SCHOLARSHIP IN CARDIOVASCULAR MEDICINE. This scholarship for a predoctoral student was made possible by a gift from the May family in honor of Mr. May, a Nashville business, educational, and civic leader who was a graduate of Vanderbilt, long-time Board of Trust member, and friend of the University. The scholarship provides a summer stipend to support a predoctoral student who shows interest and promise in academic cardiovascular medicine.

THE WILLIAM N. PEARSON SCHOLARSHIP FUND. This scholarship for studies in nutrition was established by colleagues and friends throughout the world to perpetuate the memory of Dr. Pearson. Students at Vanderbilt University are selected from the following categories: (1) a graduate student in nutrition; (2) a postdoctoral trainee in nutrition; or (3) a medical student, for summer "off-quarter stipend" research in nutrition. Priority is given first to foreign student candidates and second to American students who propose to work in the international areas.

Medical Scholars Program

The Medical Scholars Program is sponsored by the school and offers interested students a one-year, in-depth, research experience in addition to the traditional four years of medical school. The goal of the Medical Scholars Program is to foster an interest in research among medical students that may eventually lead them to pursue careers in academic medicine. The research opportunities encompass all departments of the School of Medicine and are aimed at giving medical students the opportunity to contribute to the process of discovery in either clinical or basic research laboratories.

All medical students at the Vanderbilt University School of Medicine, except those enrolled in the MSTP program, are eligible to apply to the program. Formal application to the Medical Scholars Program may be made in the spring of each year. The duration of the program is twelve consecutive months, beginning July 1. A stipend of $14,500 is provided for each student. Criteria for selection include a student’s interest in research and an appropriate research topic and mentor. Over 200 faculty members serve as potential advisers. The types of research available to students range from patient-oriented studies to epidemiological investigations to research research at the molecular level. Interested students should contact Jason D. Morrow, M.D., Director, Medical Scholars Program.

Employment Opportunities for Spouses

Nashville is a middle-sized city (500,000) affording employment opportunities common to an industrial, business, and educational center. Major employers include Vanderbilt University, two national insurance companies, and the state government. Every attempt is made to find a position within the University for spouses of students. If interested, student spouses should make inquiry at the Vanderbilt Employment Center.
Endowed Research Funds

THE RACHEL CARPENTER MEMORIAL FUND. This fund was established in 1933 by a gift from Mrs. Mary Boyd Carpenter of Nashville. The income derived from the fund is to be used for education in the field of tuberculosis.

THE BROWNLEE O. CURREY MEMORIAL FUND FOR RESEARCH IN HEMATOLOGY. This is a memorial fund created by the friends of Brownlee O. Currey. The income is being used for the support of research in the field of hematology.

THE JACK FIES MEMORIAL FUND. The income from a gift to Vanderbilt by Mrs. Hazel H. Hirsch as a memorial to her son, Jack Fies, is to be used to support research in the field of neurosurgery. It is hoped that subsequent donations will be made by those who may be interested in creating a larger fund for this phase of research.

THE JOHN B. HOWE FUNDS FOR RESEARCH. In January 1946, the members of the family of the late John B. Howe established two funds in the University to be known as the John B. Howe Fund for Research in Neurosurgery and the John B. Howe Fund for Research in Medicine. The expenditures from the funds for neurosurgery and medicine are administered through the Department of Surgery and the Department of Medicine.

THE BEQUEST OF AILEEN M. LANGE FOR MEDICAL RESEARCH. To be used for medical research in preventing and curing ailments of human beings.

THE ANNIE MARY LYLE MEMORIAL FUND FOR MEDICAL RESEARCH. This gift is to be used for basic or applied research in medical science, particularly cardiovascular research or another area of need.

THE NEUROLOGY RESEARCH FUND. Funds to be used for research efforts in the field of Neurology.

THE MINNIE J. ORR FUND FOR RESEARCH IN POLIOMYELITIS OR HEART DISEASE.

THE MARTHA WASHINGTON STRAUS–HARRY H. STRAUS FOUNDATION, INC. The foundation provides support for research in the Department of Medicine in the field of cardiovascular diseases.

THE LESLIE WARNER MEMORIAL FUND FOR THE STUDY AND TREATMENT OF CANCER. This fund was established in 1932 in the memory of Leslie Warner of Nashville, Tennessee. Half of the founding grant was contributed by the nieces and nephews of Mrs. Leslie Warner.
Research Centers

Vanderbilt University School of Medicine encompasses a number of multidisciplinary research groups that are funded primarily by external sources. Many of the centers involve investigators from schools of the University other than medicine. A brief description of each center and its general activities follows.

E. Bronson Ingram Cancer Center
Harold L. Moses, Director

This center is concerned with all cancer-related efforts at Vanderbilt University Medical Center. It is a matrix center including 197 faculty members. In 1995, after a comprehensive review, the National Cancer Institute designated the center as one of its nationally recognized clinical cancer centers. It fosters interdisciplinary cancer patient care, cooperative bench research activities, bridging of basic and clinical research with clinical care activities, and education of predoctoral students, postdoctoral research fellows, and clinical residents and fellows. The E. Bronson Ingram Cancer Center administrative offices are housed on the sixth floor of MRB II and have approximately 15,000 square feet of research space in this area. Research laboratories are also housed on other floors of MRB I and MRB II and in Light Hall, Medical Center North, and the Henry-Joyce Clinical Research Center in The Vanderbilt Clinic. Patient care activities occur in the Henry-Joyce Cancer Clinic, Vanderbilt Hospital, Children’s Hospital, the Breast Cancer Clinic at the Village of Vanderbilt, and the Veterans Administration Medical Center.

The E. Bronson Ingram Cancer Center includes the A. B. Hancock Jr. Memorial Laboratory, focusing on molecular epidemiology and cancer prevention studies, and the Frances Williams Preston Laboratory, funded by the T. J. Martell Foundation and focusing on cancer genetics and gene therapy. Also included are six endowed chairs: Craig-Weaver Chair in Pediatrics, William L. Bray Chair in Urologic Surgery, Cornelius Abernathy Craig Chair in Medical and Surgical Oncology, Mary Geddes Stahlman Chair in Cancer Research, Benjamin F. Byrd Jr. Chair in Clinical Oncology, and Hortense B. Ingram Chair in Molecular Oncology. The eight research programs include Signal Transduction and Cell Proliferation, Host-Tumor Interactions, Gastrointestinal Cancer, Cancer Etiology, Cancer Genetics, Breast Cancer, Cancer Pharmacology, and Clinical Investigations. Core laboratories are transgenic, retroviral vector, cell imaging, DNA sequencing, human tissue acquisition, clinical trials, biostatistics, bioanalysis, peptide sequencing, and genetics.
Center for Clinical and Research Ethics
Richard M. Zaner, Director

Since its establishment in 1982, the Center has been devoted to developing multi-faceted programs serving the Medical Center and University communities and to helping cultivate a public that is informed by and supportive of the very finest in patient care, biomedical research, and ethical understanding. To those ends, Center faculty members pursue a variety of activities. These include establishing (in 1984) and staffing the Medical Center’s Clinical Ethics Consultation Service; serving on the Medical Center Ethics Committee, teaching both required and elective courses at Vanderbilt’s Schools of Medicine and Nursing, teaching undergraduate and graduate courses in Vanderbilt’s Department of Philosophy, Graduate Department of Religion, the Divinity School, and the School of Law; providing lectures and other types of public presentation for area community groups—churches, schools, civic groups, health agencies, industry, and others; and publishing and participating in professional scholarship focused on health care ethics and ethics consultation.

There are three central aims to all work pursued by Center personnel. First is to understand the distinctive clinical and research practices and activities in which health care professionals engage, in the contexts where such practices and activities actually occur—e.g., hospitals, clinics, and laboratories. Second is to address the ethical issues present within these various settings and practices in a manner that is attentive to one’s own placement within these settings and as associated with those practices. Third is to understand this complex involvement in the more general terms of the moral dimensions of human relationships.

Clinical Research Center
David Robertson, Director

The Clinical Research Center (CRC) is a 21-bed unit located in Medical Center North. Its objectives are to encourage and support clinical research into the cause, progression, prevention, control, and care of human disease. It fulfills these objectives by creating a controlled environment for studies of normal and abnormal body function. The CRC provides space, hospitalization costs, laboratories, equipment, and supplies for clinical research by any qualified member of the faculty of any medical school department. The common resources of the CRC support all disciplines, with particular emphases on nutrition, oncology, neurology, cardiology, clinical pharmacology, endocrinology, gastroenterology, hematology, and diabetes. The CRC is supported by a grant from the National Center for Research Resources.
Clinical Nutrition Research Unit
Raymond F. Burk, Director

The CNRU is one of twelve nutrition research units established nationwide by the National Institutes of Health. Its objectives are to enhance clinical and basic nutrition research within Vanderbilt; to strengthen nutrition training of health care professionals; and to improve patient care by focusing attention on nutrition. The CNRU research base investigators include twenty-eight clinicians and scientists representing eight departments within the School of Medicine. Research activities include study of the role of growth factors on the maturation and differentiation of the intestinal tract; the metabolism and function of vitamins, amino acids, lipids and trace elements; and the interaction among nutrient metabolism, exercise, and energy expenditure. The CNRU core facilities include an energy balance core with whole room indirect calorimeter, a nutrition assessment core, a one-carbon metabolism core, a mass spectrophotometer core, an analytical core, a protein-immunology core, and an administrative core with a biostatistical component. The CNRU provides support for a Pilot and Feasibility Program for nutrition related research and a New Investigator Award for young researchers involved in basic or clinical research. The work of the CNRU is supported by a grant from the National Institute of Diabetes and Digestive and Kidney Diseases.

Vanderbilt Diabetes Center
Daryl K. Granner, Director

The Vanderbilt Diabetes Center (VDC) encompasses the NIH-sponsored Diabetes Research and Training Center (DRTC), the Veterans Administration/Juvenile Diabetes Foundation-sponsored Diabetes Research Center (VA/JDF DRC), three NIH-sponsored training programs, and an extensive clinical care program.

The Vanderbilt Diabetes Research and Training Center (DRTC) involves sixty-five participating faculty members from fourteen departments, schools, and colleges of the University. The center is organized into three components: research, training and translation, and administration. The activities of the research component include core support for basic biomedical research and the Pilot and Feasibility Studies Program, which aids new investigators in testing the feasibility of new ideas before submitting grant proposals for long-term support. The demonstration and education component operates a model demonstration unit in which students in the health professions encounter patients with well-characterized diabetes who have volunteered for approved clinical research programs. The administrative component develops outside resources for training and research grants and initiates and supervises such activities as the Diabetes Center Seminar Series and the Visiting Scientist Program. DRTC funding is provided by a grant from the National Institutes for Health.
The newly established VA/JDF DRC involves 18 participating faculty members from several different departments and schools of the VA and the University. The center has the overall project title “Metabolic Adaptations to Diabetes” and consists of three individual research projects and a clinical services core. The activities of the research component combine basic biomedical research with a heavy emphasis on patient-oriented clinical studies. A broad spectrum of topics clinically relevant to diabetes, such as insulin resistance, defective body weight regulation, exercise, and hypoglycemia, are investigated by the center. The clinical services core 1) recruits and intensively treats diabetic patients for individual research projects; 2) translates research advances of the center to patients and scientists; and 3) teaches and raises awareness of diabetes to health care professionals caring for diabetes. The Nashville VA/JDF DRC is one of only three such centers in the country, and funding is provided by a joint grant from the Veterans Affairs Administration and the Juvenile Diabetes Foundation International.

Three NIH-sponsored training programs are administered through the VDC. These include the Molecular Endocrinology Training Program (pre- and postdoctoral trainees), the Diabetes and Endocrinology Training Program (postdoctoral), and the Student Summer Research Programs (medical student trainees). The Diabetes Clinical Care Program is administered by Dr. Alan Graber. He, along with two other full-time clinicians and the several members of the Diabetes-Endocrinology Division, provide state-of-the-art care to persons with diabetes and other endocrine disorders.

Center for Lung Research
Kenneth L. Brigham, Director

This center stimulates and facilitates lung research and training throughout the institution. Center investigators represent nine departments and are engaged in a wide range of basic and clinical research. These investigators work both individually and in collaboration with many other faculty members. The center serves to identify important research opportunities, to assist investigators in identifying collaborators within and without the institution, and to facilitate the research process by providing physical facilities, financial support, and administrative and scientific expertise. The center maintains close relationships with the departments of medicine, cell biology, pediatrics, pathology, biomedical engineering, pharmacology, and molecular physiology and biophysics, as well as with other departments in the schools of medicine and engineering.

Center in Molecular Toxicology
F. Peter Guengerich, Director

The Center in Molecular Toxicology is an interdepartmental system that provides an environment for research in molecular toxicology by cen-
ter investigators and affiliated faculty in the departments of biochemistry, cell biology, chemistry, medicine, pathology, and pharmacology. The National Institute of Environmental Health Sciences has aided the center with a grant since 1967. The center provides ongoing support for key faculty members in toxicology; supports core facilities, used on a collaborative basis for research efforts; and fosters collaboration through seminar programs, symposia, and pilot project support. Faculty members are involved in a wide spectrum of research interests covering the chemical and biological aspects of molecular toxicology. Key research interests include (a) enzymatic oxidation and conjugation, (b) oxidative damage, (c) DNA damage and mutagenesis, (d) regulation of gene expression, and (e) environmental pathology.

George O’Brien Center for the Study of Renal Disease
Raymond C. Harris, Director

The objective of the Nephrology Center is to contribute to the understanding of pathogenic mechanisms leading to progressive nephron destruction in the kidney. Investigators from the departments of medicine, pediatrics, surgery, cell biology, pharmacology, and pathology bring a multidisciplinary approach to bear on specific mechanisms leading to glomerular and tubular dysfunction and progressive glomerular destruction. Center funding is derived primarily from the National Institutes of Health grant entitled “Biology of Progressive Nephron Destruction.”

Center for Pharmacology and Drug Toxicology
John A. Oates, Director

Research in the center is conducted by fifteen investigators in the departments of pharmacology and medicine, working in a program that joins clinical investigation with science at the molecular level. The research addresses the pharmacology of prostaglandins, leukotrienes, and other lipid mediators, as well as their participation in the pathophysiology of allergy, asthma, and cardiovascular disease. Funds for the support of the center come from the National Institute of General Medical Sciences.

Center for Reproductive Biology Research
Marie-Claire Orgebin-Crist, Director

Thirty-four faculty members from ten departments in the School of Medicine and the College of Arts and Science participate in the work of the center. Basic and clinical research focuses on four areas: the male reproductive system; the female reproductive system; fertilization, implantation, and embryonic development; and reproductive endocrinology. Center financing is provided by a training grant from the National Insti-
tute of Child Health and Human Development and from research grants related to both basic and clinical aspects of the reproductive sciences.
Courses of Study

School of Medicine Departments

Anesthesiology
Biochemistry
Biomedical Informatics
Cell Biology
Emergency Medicine
Family Medicine
Hearing and Speech Sciences
Medical Administration
Medicine
  Dermatology
  Microbiology and Immunology
Molecular Physiology and Biophysics
Neurology
Obstetrics and Gynecology
Ophthalmology and Visual Sciences
Orthopaedics and Rehabilitation
Pathology
Pediatrics
Pharmacology
Preventive Medicine
  Biostatistics
  Pharmacoepidemiology
Psychiatry
Radiation Oncology
Radiology and Radiological Sciences

SURGICAL SCIENCES

General Surgery
Dentistry
Neurosurgery
Oral Surgery
Otolaryngology
Pediatric Surgery
Plastic Surgery
Thoracic and Cardiac Surgery
Urologic Surgery

INTERDISCIPLINARY COURSEWORK
Anesthesiology

CHAIR Charles Beattie
PROFESSORS EMERITI M. Lawrence Berman, John J. Franks, Joanne Lovell Linn
PROFESSORS Charles Beattie, Jayant K. Deshpande, John Watson Downing, Jayakumar Reddy Kambam, Bradley E. Smith, Kevin Strange
ADJUNCT PROFESSORS Winston Clive-Victor Parris, B. V. Rama Sastry
ASSOCIATE PROFESSORS John T. Algren, Jeffrey R. Balser, Piotr K. Janicki, Benjamin W. Johnson, Jr., Paul H. King, Janice M. Livengood, David Michael Lovinger
ADJUNCT ASSOCIATE PROFESSOR David Dwight Alfery
ADJOINT ASSOCIATE PROFESSOR Kevin L. Donovan
ASSOCIATE CLINICAL PROFESSORS Ronald J. Gordon, W. Bradley Worthington
ADJUNCT ASSISTANT PROFESSORS John F. K. Flanagan, J. David Netterville, Geeta P. Wasudev
ASSISTANT CLINICAL PROFESSORS Timothy L. Arney, Michael J. Stabile
ASSOCIATES Stephen T. Blanks, Raymond F. Johnson
INSTRUCTORS Susan A. Calderwood, Meera Chandrashekar, Donald F. Pierce, Jr., Jeffrey York
RESEARCH INSTRUCTOR Christina I. Petersen
CLINICAL INSTRUCTOR James K. Cooper II
ASSISTANT Nimesh Patel

THE Department of Anesthesiology provides lectures and offers a two-and-a-half-week selective for third-year students on aspects of anesthesiology within the Surgery clerkship. Fourth-year elective courses are offered in the pharmacology of anesthesiology, as well as a clerkship that includes operating room experience in the conduct of anesthesia.

Biochemistry

CHAIR Michael R. Waterman
THE Department of Biochemistry offers to first-year students basic information on the chemistry of living organisms. Electives available to students at all levels include such topics as nutritional biochemistry; toxicology; fundamentals of human nutrition; advanced biochemistry; genes and their regulation; clinical biochemistry; lipid chemistry, metabolism and transport; nutrition rounds; chemical mechanisms of enzyme catalysis; and reproductive biology. Research experience in biochemistry and nutrition is available to fourth-year students. The department offers as electives in the first, second, and fourth years a biochemistry seminar and a course in special problems in nutrition. A preceptorship in biochemistry is also offered in the fourth year.

Required Courses

501. Biochemistry. First year. Lectures and seminars on the chemistry and metabolism of carbohydrates, hormones, lipids, nucleoproteins, and on the chemistry and function of enzymes, vitamins, and other factors related to cellular metabolism and body processes. The application of recombinant DNA methodologies for the study of human disease is also discussed. FALL. Osheroff and staff.

5012. Advanced Biochemistry. A lecture series on selected topics in biochemistry for students who have had course work in basic biochemistry. FALL. Ong and staff.
THE Department of Biomedical Informatics was established in 1993 to provide an academic base for those who engage in the study, invention, and implementation of structures and algorithms to improve communication, understanding, and management of biomedical information. An interdisciplinary seminar series brings together concepts from biomedical engineering, biometry, computer science, decision science, health policy, and library science. Electives offer an opportunity for independent study in one of these areas.

Cell Biology

CHAIRMAN OF THE DEPARTMENT Harold L. Moses
VISITING PROFESSOR Galina Skibo
ADJUNCT PROFESSOR David G. Greathouse
ADJUNCT ASSOCIATE PROFESSOR Robert C. Bone
RESEARCH ASSISTANT PROFESSORS Kolari S. Bhat, Howard C. Crawford, Peter J. Dempsey, Susan Kasper, Subir Kumar Nag Das, Deborah S. Threadgill, Fiona Elizabeth Yull, Ming-Zhi Zhang
ADJUNCT ASSISTANT PROFESSOR Josiah Ochieng
INSTRUCTOR H. Wayne Lambert
RESEARCH INSTRUCTORS Yasuhide Furuta, Cunxi Li, Ding-Zhi Wang, Qiurong Xiao
THE Department of Cell Biology is responsible for instruction in histology, gross anatomy, and the human nervous system as part of the required curriculum for first- and second-year medical students. Elective courses are offered by the department in areas of reproductive biology, advanced neurobiology, surgical anatomy, neurochemistry, and cell biology.

**Required Courses**

501.1. **Cell and Tissue Biology.** First year. Designed to give students a familiarity with the properties of cells, in particular their interactions with one another to compose the tissues and organs of the body. Emphasis is on the correlates between structure and function at both the light and electron microscopic levels so as to serve as a basis for understanding the physiological and biochemical activities of cells and tissues. SPRING. Staff.

501.2. **Gross Anatomy.** First year. Devoted to a systematic dissection of the human body, supplemented by lectures and demonstrations. Emphasis is on the function and clinical relevance of the anatomical structures. Saturday morning lectures are concerned with the embryological basis of the anatomical structures and emphasize the problem of congenital abnormalities. FALL. Dailey and staff.

503. **Neurobiology.** Second year. Provides students with a solid understanding of the organization of the human central nervous system, integrating basic information from neuroanatomy, neurophysiology, and neurochemistry. Students are also introduced to the most up-to-date research being conducted in neurobiology, with special emphasis on research with potential clinical significance. Additional clinical material is provided by patient presentations and an introduction to neuropathology. FALL. Norden and staff.

**Emergency Medicine**

CHAIR Corey M. Slovis
PROFESSORS Corey M. Slovis, Keith Wrenn
ASSOCIATE PROFESSORS E. Paul Nance, Jr., Seth W. Wright
ASSISTANT PROFESSORS Richard S. Belcher, James F. Bihun, Andrea C. Brackowski,
John R. Edwards, Robin R. Hemphill, Daniel P. Himes, Mark A. Hostetler, Laurie M.
Lawrence, Jeffry P. McKinzie, Valerie C. Norton, Sally Santen, Gary R. Schwartz,
Charles M. Seamens, Lawrence B. Stack, Steven A. Toms, Steven John White
ASSISTANT CLINICAL PROFESSORS Paul M. Bergeron, Donald McLain Blanton, Kevin J.
Bonner, Anna H. Bradham, Janet Loch-Donahue, Brian R. McMurray, John Hannon
Proctor
SENIOR ASSOCIATE Judy Jean Chapman
INSTRUCTORS Jennifer L. Isenhour, Ian D. Jones, William E. Lummus, Melissa L. Peters,
Steven T. Riley
CLINICAL INSTRUCTORS Bruce E. Day, Rachel T. Kaiser, David W. Lawhorn, Andrew J.
Panos, J. Raymond Pinkston
CLINICAL ASSISTANT Lawrence Poole

THE Department of Emergency Medicine offers an introductory elective-course for first- and second-year students to acquaint them with emergency
medical services, including ambulance ride-alongs and observation time in the Emergency Department (ED). Additionally, there is a required fourth year emergency medicine course, one month in length, consisting of 20 to 25 hours a week of lectures and 12 to 15 eight-hour clinical shifts, either in the main ED at Vanderbilt, the Pediatric ED at Vanderbilt, or the ED at St. Thomas Hospital.

**Required Course**

**502-5950.** This required four-week clerkship introduces the senior medical student to the specialty of Emergency Medicine. Students independently interview and examine patients with a variety of complaints. They work closely with faculty members and senior residents to formulate treatment plans and participate in procedures and therapeutic interventions. Norton and staff.

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**Family Medicine**

INTERIM CHAIR Thurman L. Pedigo, Sr.
PROFESSOR Roy L. DeHart
CLINICAL PROFESSOR Thurman L. Pedigo, Sr.

FAMILY physicians are seen as holding pivotal positions to ensure the delivery of comprehensive and personalized health care. Twenty-seven percent of all office visits are made to family physicians. Their role, along with other primary care providers, is very important in making the optimal use of health resources. By involvement in training family physicians, medical schools gain the opportunity to develop strategies that improve the relevance of medical education and medical practice in meeting people’s health needs.

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**Hearing and Speech Sciences**

DIRECTORS Fred H. Bess, Marleen Ochs
PROFESSORS EMERITI Russell J. Love, Jay Sanders
PROFESSORS Fred H. Bess, Edward Gage Conture, D. Wesley Grantham, Howard S. Kirschner, Ralph N. Ohde, Robert H. Ossoff, Robert T. Wertz
RESEARCH PROFESSOR Teris K. Schery
CLINICAL PROFESSORS Gary W. Duncan, C. Gary Jackson
ASSOCIATE PROFESSORS Daniel H. Ashmead, Stephen M. Camarata, James W. Hall III,
THE Division of Hearing and Speech Sciences offers work leading to the master’s and Ph.D. degrees in the following areas: audiology, speech and language pathology, and hearing or speech science. Information on regulations and requirements may be found in the catalogue of the Graduate School. The research, teaching, and clinical programs associated with this program are housed in the Bill Wilkerson Hearing and Speech Center.

Medical Administration

CHAIR OF THE DIVISION John E. Chapman
VICE CHAIRMAN OF THE DIVISION John O. Lostetter
PROFESSOR EMERITUS T. Mark Hodges
PROFESSORS John E. Chapman, Deborah C. German, Gerald S. Gotterer, Roxane Spitzer
CLINICAL PROFESSOR Alexander C. McLeod
ASSOCIATE PROFESSOR Norman B. Urmy
ADJUNCT ASSOCIATE PROFESSOR Dennis K. Wentz
ASSISTANT PROFESSORS Connie Stone Chevalier, Alan E. Christman, Winfred L. Cox,
   Lynn Cunningham, James K. Geraughty, John O. Lostetter, Chanchai Singhanay Mc-
   Donald, Janet Meeks, William A. Mountcastle, David S. Noel, Frank Rosato
ASSISTANT CLINICAL PROFESSOR David T. Dodd
ASSOCIATE William R. Rochford
INSTRUCTORS Gregory L. Dixon, Lynn E. Webb
ASSISTANT G. Wayne Wood
ADJUNCT LECTURER Marsha Tanner Wilson

THE Division of Medical Administration was established in 1969 to provide an academic base for those who engage in service, education, and research as these support the objectives of the Medical School. The division offers elective courses on subjects related to past and present trends in American medical education, the influence of various professional organizations and government bodies in medical education, issues in health care at all levels, and the transition to medical practice and medical practice management. Special subject seminars are encouraged.
CHAIRMAN OF THE DEPARTMENT John A. Oates
VICE CHAIRMAN OF THE DEPARTMENT Allen B. Kaiser
DIRECTORS Raymond F. Burk, Steven C. Hebert, Harry R. Jacobson, Sanford B. Krantz, Peter T. Loosen, Samuel R. Marney, Jr., David N. Orth, Dan M. Roden
PROFESSORS EMERITI Fred Alliston, Jr., F. Tremaine Billings, Oscar B. Crofford, Jr., Roger M. DesPrez, Irvin B. Eskind, Robert A. Goodwin, Jr., David N. Orth, Lloyd H. Ramsey, Joseph C. Ross, William D. Salmon, Jr., Harrison J. Shull, Sr., Paul E. Teschan
ADJUNCT PROFESSORS Raymond M. Hakim, Tetsuro Kono, James R. Snapper, John P. Sundberg
RESEARCH ASSOCIATE PROFESSORS Kristina E. Hill, Guillermo I. Perez-Perez, Robert Whitehead

ADJUNCT ASSOCIATE PROFESSORS Maria del Pilar Aguinaga, Maciej S. Buchowski, Denise Melia Buntin, John R. Chipley, Paul C. McNabb II


ADJUNCT ASSISTANT PROFESSORS John W. Boldt, Jr., Gary Brock, Mark Arden Pierce


SENIOR ASSOCIATE Lynda Denton Lane
ASSOCIATE Victoria L. Harris
ASSISTANTS Anne W. Brown, Jacqueline Goffaux, William H. Swiggart, Kathleen L. Wolff
ADJUNCT ASSISTANT Sarah J. White
RESEARCH ASSOCIATES Ping Cao, Alice Gung, Moushumi Lahiri, Nancy L. Rogers, Howard M. Snyder

Dermatology

DIRECTOR OF THE DIVISION Lloyd E. King, Jr.
PROFESSOR EMERITUS Robert N. Buchanan
PROFESSORS Lloyd E. King, Jr., J. Ann Richmond
THE Department of Medicine offers four areas of required course work, two of them in the second year:

**Second Year.** Two courses: An interdepartmental course which introduces sophomore students to the basic laboratory techniques, methods, principles, and procedures of clinical medicine; and a course in the diagnosis of disease and the application of clinical medicine to patient care.

**Third Year.** Third-year medical students are assigned to the medical wards for a ten-week period for an intensive inpatient experience.

**Fourth Year.** Fourth-year medical students participate in an outpatient experience as well as a selective medical clerkship.

The Department of Medicine has many subspecialty divisions, and a number of different elective programs are available.

### Required Courses

501.1. **Laboratory Diagnosis.** Second year. Introduces the student to the laboratory in clinical medicine, emphasizing its application to understanding basic pathophysiology. Areas covered include hematology, gastroenterology, nephrology, neurology, rheumatology, and clinical microbiology. In most of these areas, the student will spend some time gaining experience in the laboratory. SPRING. Staff.

501.2. **Physical Diagnosis.** Second year. Education of second-year medical students in diagnosis of disease by the art of examination at the bedside and in the laboratory, emphasizing the significance of information gained in the basic science courses as applied to clinical medicine. SPRING. Raiford and staff.

502. **Clinical Clerkship.** Third year. Students are assigned to the medical wards for ten-week periods. Time is divided between the Vanderbilt Hospital, St. Thomas Hospital, and the Veterans Administration Hospital. The clinical clerkship is regarded as the backbone of the student’s training in medicine and represents the most intensive inpatient experience offered within the department. It is believed that learning is most vivid through direct experience with patients, obtaining histories, doing physicals and laboratory studies, and that it is amplified by reading and intensive contact with members of the house staff and teaching staff. Students are given considerable responsibility under close supervision of the teaching staff. Additional instruction is carried out during rounds with the chief of service. In these sessions, clinical clerks present cases for discussion and criticism and the more important fields of internal medicine are covered. Ward work is supplemented by numerous teaching and subspecialty conferences held throughout the academic year. Leonard, Newman, Johnson, and staff of the Department of Medicine

520. **Ambulatory Clerkship.** Fourth year. During a four-week unit each fourth-year student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or the emergency service. Spickard, Gigante, and staff.
Microbiology and Immunology

CHAIR Jacek Hawiger
PROFESSOR EMERITUS John H. Hash
ASSOCIATE PROFESSORS Mark Boothby, G. Neil Green, Geraldine G. Miller, James Ward Thomas II, Peter F. Wright
RESEARCH ASSISTANT PROFESSOR Sheila Downs Timmons
INSTRUCTORS Andres G. Grandea III, Michael L. Sikes
RESEARCH INSTRUCTORS Yi-An Lu, Ana Lucia Mora, Jin-Long Yang, Qitao Yu
ASSISTANT Chengwei Wu

Required Course

501. Microbiology and Immunology. First year. Lectures, laboratory exercises, and small group sessions on clinically important microbial topics. The course encompasses basic immunology, microbial genetics, and the etiologic agents of the important bacterial, mycotic, parasitic, and viral infectious diseases. Van Kaer and staff.

Molecular Physiology and Biophysics

CHAIR Daryl K. Granner
VICE CHAIR OF THE DEPARTMENT Alan D. Cherrington
DIRECTOR Albert H. Beth
PROFESSORS EMERITI Tetsuro Kono, H. C. Meng, David N. Orth, Charles Rawlinson Park, Robert L. Post
RESEARCH PROFESSOR Sharron H. Francis
ADJUNCT PROFESSOR David M. Regen
ASSISTANT PROFESSORS Robert Allen Kesterson, Jr., Jason Hall Moore, Richard M. O’Brien, James S. Sutcliffe, Danly G. Winder
RESEARCH ASSISTANT PROFESSORS Charles E. Cobb, Cynthia Cate Connolly, Robert K. Hall, Mary E. Courtney Moore, Richard Lee Printz, Masakazu Shiota
INSTRUCTORS Illarion V. Turko, Richard R. Whitesell
RESEARCH INSTRUCTORS ChangAn Chu, Eric J. Hustedt, Rekha Pattanayek, R. Lisa Popp, Catherine Postic
THE Department of Molecular Physiology and Biophysics instructs first-year students in the essentials of physiological processes related to organs, tissues, and cells. Students may devise elective course work in any area of Molecular Physiology and Biophysics, in conjunction with a sponsoring faculty member. Opportunities to participate in research activities are available to fourth-year students as electives.

**Required Course**

501. Molecular Physiology and Biophysics. First year. This course consists of lectures designed to cover the essentials in mammalian physiology SPRING. McGuinness and staff.

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**Neurology**

CHAIR Gerald M. Fenichel  
VICE CHAIR Howard S. Kirshner  
PROFESSOR EMERITUS John Sloan Warner  
PROFESSORS Gerald M. Fenichel, Frank R. Freemon, Howard S. Kirshner, David Robertson, Subramanian Sriram, Ronald G. Wiley  
CLINICAL PROFESSORS Gary W. Duncan, Karl Edward Misulis  
ASSOCIATE PROFESSORS Bassel W. Abou-Khalil, Thomas L. Davis, Kenneth J. Gaines, Mark Jennings, Anthony W. Kilroy, Patrick Lavin, Michael J. McLean, Paul L. Moots  
ASSOCIATE CLINICAL PROFESSOR Blaise Ferraraccio  
ASSISTANT CLINICAL PROFESSORS Mary Ellen Clinton, Barbara J. Olson, James S. Walker  
INSTRUCTOR Saiz E. Niaz  
RESEARCH INSTRUCTORS Daohong Chen, Stefan Engstrom  
CLINICAL INSTRUCTORS Alan F. Bachrach, Dennis O. Bradburn, Jan Lewis Brandes, James Alan Fry, Gary Lee Howe

THE Department of Neurology offers instruction in neurobiology to first-year students, seminars in clinical neurology to second-year students, and instruction in diseases of the nervous system to third-year students. Further clinical experience can be attained through specialty clinics offered as fourth-year electives. These clinics include the specialties of pediatric neurology, adult neurology, epilepsy, general neurology, movement disorders, and neuromuscular disease. Clerkships in neurology at affiliated hospitals are available, as electives, in the fourth year. Elective research programs in basic neuroscience or clinical neurology are available to students at all levels.
Required Course

501. Clinical Clerkship. Third year. Students are assigned to the neurology wards for two weeks and are given direct responsibility for the evaluation and care of patients under the supervision of house staff and faculty. This experience is intended to provide the students with an approach to patients with diseases of the nervous system. Kirshner and staff.

Note: Psychiatry and Neurology are given in an eight-week block. During this unit, students will participate in lectures and conferences given by both departments, and they will be assigned for two weeks to a neurology clinical setting and for six weeks to one or more clinical settings in Psychiatry.

Obstetrics and Gynecology

CHAIR Stephen S. Entman
PROFESSOR EMERITUS C. Gordon Peerman, Jr.
CLINICAL PROFESSORS G. William Bates, Peter S. Cartwright, James F. Daniell, Jr., Henry W. Foster, Joel T. Hargrove, Houston Sarratt
ASSOCIATE PROFESSORS Joseph P. Bruner, Esther Eisenberg, Lynn M. Matrisian
RESEARCH ASSOCIATE PROFESSOR Yoshihiko Araki
ASSOCIATE CLINICAL PROFESSORS Larry T. Arnold, Angus M. G. Crook, James H. Growdon, Jr., Robert H. Tosh, Carl W. Zimmerman
RESEARCH ASSISTANT PROFESSOR Marjorie D. Skudlarek
INSTRUCTORS Paula H. Jewett, Nancy B. Lipsitz, Lucia Cagnes McNabb, Eric Strand
RESEARCH INSTRUCTORS Kaylon L. Bruner, Liying Li
THE Department of Obstetrics and Gynecology provides third-year students with an introductory experience in inpatient and outpatient obstetrics and gynecology. A number of electives are offered at various levels. These include: reproductive biology, a high-risk obstetrics seminar, human sexuality, gynecologic pathology, and sex counseling. Research experiences and a clinical clerkship in obstetrics and gynecology are available as electives to fourth-year students.

Required Course

502. Clinical Clerkship. Third year. Students are assigned for an eight-week rotation, which provides an introductory experience in inpatient and outpatient obstetrics and gynecology. Rush and staff.

Ophthalmology and Visual Sciences

CHAIR Denis M. O’Day
PROFESSOR EMERITUS James H. Elliott
PROFESSORS Vivien A. Casagrande, Anne L. Corn, J. Donald M. Gass, Denis M. O’Day, John S. Penn
CLINICAL PROFESSORS John B. Bond, Ralph E. Wesley
ASSOCIATE PROFESSORS Frederick R. Haselton, Patrick Lavin
ASSOCIATE CLINICAL PROFESSORS Roy C. Ezell, Gary W. Jerkins, Reginald S. Lowe, Jr.
ASSISTANT PROFESSORS Anita Agarwal, Amy S. Chomsky, Sean P. Donahue, Jeffrey David Horn, Karen Margaret Joos, Louise Mawn, Azizur Rahman, Robbin B. Sinatra, Khaled A. Tawansy, James C. Tsai, Ming Wang, Thomas A. Wohl
RESEARCH ASSISTANT PROFESSORS Thomas C. Leonard-Martin, Jin-Hui Shen
ASSOCIATE David J. Shen
INSTRUCTOR Shin Wook Kang
ASSISTANT Cathy J. Hall
ASSISTANT  Georgia R. McCray

THE Department of Ophthalmology provides second-year students an introduction to ophthalmology and the methodology of clinical science. The department also instructs third-year students, providing them
with clinical exposure in ophthalmology. An elective course available in the second year consists of lectures on the basic and clinical aspects of ophthalmology. An elective fourth-year clerkship and clinic provide intensive clinical experience.

**Required Course**

**502. Ophthalmology Clinical Clerkship.** Third year. Students may select ophthalmology as a two-and-a-half-week clinical rotation in the surgical subspecialty rotations. The student gains operating room experience, and a series of lectures is presented. Students also participate in general ophthalmology and ophthalmic subspecialty clinics. Johns and staff.

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**Orthopaedics and Rehabilitation**

CHAIR Dan M. Spengler
VICE CHAIR Neil Edward Green
PROFESSORS Neil Edward Green, Kenneth D. Johnson, Michael M. Lewis, Herbert S. Schwartz, Dan M. Spengler
ASSOCIATE PROFESSORS Thomas J. Limbird, Mark P. McAndrew, Gregory A. Mencio, Kurt P. Spindler
ADJUNCT ASSISTANT PROFESSORS Nahshon Rand, Marek Szpalski
ASSISTANT CLINICAL PROFESSORS John Wilson Thomas Byrd, Michael J. Christie, Mark R. Christofersen, David K. DeBoer, Donald L. Gaines, Frank E. Jones
SENIOR ASSOCIATE Samuel Lewis Beckman
ASSOCIATES Carolyn Aubrey, Arleen L. Hodge
INSTRUCTORS Tarek G. Elalayli, Stephanie S. Martin, Paul J. Rummo, David W. Sanders
CLINICAL INSTRUCTORS John C. Brothers, Shannon S. Curtis, Michael Craig Ferrell, Mark J. Triffon

THE Department of Orthopaedics and Rehabilitation offers an introduction to clinical orthopaedic surgery. Elective specialty clinics and an elective clerkship are offered in the fourth year. The department also offers an opportunity for students to do research in orthopaedic surgery.

**Required Course**

**502. Orthopaedics.** Third year. Students may elect a two and one-half week rotation in orthopaedic surgery during the surgical clerkship. The experience involves student participation in ward patient care, clinic assignments, operating room experience, and daily conferences. Watson and staff.
Pathology

CHAIR Doyle G. Graham

PROFESSORS Emeriti Awadh A. Binhazim, Anh H. Dao, Mary Phillips Edmond Gray, Virgil S. LeQuire, Martin G. Netsky, John Brown Thomison


RESEARCH PROFESSOR F. James Primus

ADJUNCT PROFESSOR Martin Charles Mihm, Jr.

CLINICAL PROFESSORS Robert G. Horn, Hugo C. Pribor, Bernard E. Statland, Renu Virmani


RESEARCH ASSOCIATE PROFESSORS Venkataraman Amarnath, Maria Gabriella Giro

ASSOCIATE CLINICAL PROFESSORS M. Neil Allison, Richard D. Buchanan, Paul B. Googe, Myron A. Holscher, Edward C. McDonald, Richard Oldham, Ronald W. Oxenhander, Steven J. Schultenover, Bertram E. Sprofkin


RESEARCH ASSISTANT PROFESSORS Kalyani Amarnath, M. Diana Neely, Elena E. Tchekneva, Ingrid M. A. Verhamme

ADJUNCT ASSISTANT PROFESSOR Ronald Bruce Wilson


SENIOR ASSOCIATES Herman Benge, Martha K. Miers, Susan Moore Steane, Patricia C. Tanley

ASSOCIATE Maralie Gaffron Exton

INSTRUCTORS Xochiquetzal J. Geiger, Yasin Kokoye

RESEARCH INSTRUCTORS Mayme Lee Lawrence, Kathleen S. Montine, Sandra J. Olson, Holly L. Valentine, Jeffrey S. Whitsett

ADJUNCT INSTRUCTOR Monita Soni

CLINICAL INSTRUCTORS Carla M. Davis, Larry M. Lewis

THE Department of Pathology offers instruction in the study of the pathogenesis of disease and the structural and functional alterations which result from disease, including the natural history of these changes. The
elective program includes lecture and laboratory experiences and research programs.

Electives include basic concepts of cancer, neuropathology, gynecologic pathology, clinical pathology, renal pathology, and hematopathology. Electives for third- and fourth-year students provide experiences in autopsy pathology, surgical pathology, and pathology specialty areas. Research fellowships are available to post-sophomore students.

Required Course

501. General and Special Pathology. Second year. General and special pathology presented in the form of lectures, demonstrations, discussions, and laboratory work. Gross and microscopic lesions characteristic of various diseases are studied and correlated. Small group sessions are included, using the problem-based learning method. Laboratory work includes an innovative computer-based instructional program. Coogan and staff.

Pediatrics

CHAIR Ian M. Burr
PROFESSORS EMERITI Randolph Batson, David T. Karzon, Sandra G. Kirchner, Sarah H. Sell
VISITING PROFESSOR Victor A. Najjar
RESEARCH PROFESSOR Daniel P. Lindstrom
ADJUNCT PROFESSORS Mary Ann South, Susanne Tropez-Sims
RESEARCH ASSOCIATE PROFESSOR Joy D. Cogan
ADJUNCT ASSOCIATE PROFESSORS Thomas K. Chin, Donald E. Lighter, John Nading
RESEARCH ASSISTANT PROFESSORS Danko Martincic, Taiji Matussaka, Farhang Payvar, Hiroaki Yoshida
ADJUNCT ASSISTANT PROFESSORS Francis Joseph McLaughlin III, Reeta Misra, Olayinka Onadeko, Kreig D. Roof, Debra S. Selby, Roger D. Smalligan
SENIOR ASSOCIATES Cheryl W. Major, Juliette M. Thompson
ASSOCIATES Susan C. Donlevy, Barbara K. Ramsey, Lois J. Wagner, J. Denise Wetzel INSTRUCTORS Albert Dewey Copeland, Jr., Mary Ellen Dees, Rita A. Fie, Patricio Frias, Regan A. Logan, Jennifer J. Willers
RESEARCH INSTRUCTORS Nada M. Bulus, Justin C. Grindley
VISITING RESEARCH INSTRUCTOR Oleg Zhirnov
ADJUNCT INSTRUCTOR Richard W. Greene
THE Department of Pediatrics provides second-year students an introduction to pediatrics as part of an introduction to clinical medicine. Third-year students participate in a clinical experience on the pediatric wards and clinics and attend a series of clinical lectures and demonstrations.

Electives are available to students in all four years including such courses as signposts of human growth and development; pediatric pathophysiology; pathogenetic mechanisms in clinical infectious disease; pediatrics ward rounds; an introduction to clinical pediatrics; nutrition rounds; the fundamentals of human development; methods of delivering pediatric medical care in rural areas; urban health problems; child behavior and growth and development. There are also clinical selectives and electives in general pediatrics and specialties.

**Required Courses**

**502. Clinical Clerkship.** Third year. Students are assigned to the pediatric services for five weeks. Students participate in all phases of diagnosis and treatment of a wide variety of illnesses of children and infants in both inpatient and outpatient settings. Burr, Janco, and staff.

**520. Ambulatory Clerkship.** Fourth year. During a four-week unit each student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or emergency service. Gigante, Spickard, Parkerson, and staff.
The Department of Pharmacology is responsible for the instruction of second-year students in the reactions of the human organism to chemical substances. Electives available to second-, third-, and fourth-year students include pharmacokinetics, drug metabolism, cardiovascular pharmacology, molecular pharmacology, psychopharmacology, and drug receptor interactions. A clerkship in clinical pharmacology is offered in the fourth year. Seminars, research programs, and special course work assignments are also available to fourth-year students as electives.

**Required Course**

**501. Pharmacology.** Second year. Lectures in which the reaction of the human organism to chemical substances is taken up in a systematic manner and typical reactions are demonstrated in clinical correlations and by animal experiments. In conferences students learn to evaluate critically the results of drug trials. SPRING. Awad and staff.
Preventive Medicine

CHAIR William Schaffner
DIRECTOR Wayne A. Ray
PROFESSOR EMERITUS Robert W. Quinn
PROFESSORS Roy L. DeHart, Lewis B. Lefkowitz, Jr., David L. Page, William Schaffner
ASSOCIATE PROFESSORS Michael D. Decker, Eugene W. Fowinkle, Patricia Hebert, Yu Shyr
ASSISTANT PROFESSORS Ban Mishu Allos, Karen C. Bloch, Christopher S. Coffey, Shiva Gautam, Loren Lipworth, Walter E. Smalley, Jr., Mary I. Yarbrough
ADJUNCT ASSISTANT PROFESSORS Bruce B. Dan, Bruce G. Gellin
ASSISTANT CLINICAL PROFESSORS Allen Scott Craig, Dorothy Jean Turner
CLINICAL INSTRUCTOR Robert H. Hutcheson, Jr.

THE Department of Preventive Medicine offers a second-year course in the fundamentals of epidemiology, medical statistics, and the basic principles of public health and preventive medicine. Electives available to students at various levels include biometry; clinical trials and medical surveys; sampling methods; environmental/occupational health; and special projects in public health. A preceptorship in primary health care and clerkships in applied public health, sexually-transmitted diseases, and family and community medicine are also available to second- and fourth-year students as electives.

Required Course

503. Principles of Epidemiology, Biostatistics, and Preventive Medicine. A course of lectures and seminars providing second-year students with the preventive point of view in the practice of medicine, making them aware of the major health problems and the changing nature of these problems, and acquainting them with the organized forces working for the advancement of public health. Subjects considered include: epidemiology, etiology, modes of transmission, and methods of prevention and control of communicable diseases; the venereal disease problem; environmental and occupational diseases; water supplies and sewage disposal; and population problems. Clinical preventive medicine is emphasized in relation to cardiovascular diseases, diabetes, and cancer. The problems of geriatrics are presented. Stress is placed on principles in public health administration at international, national, state, and local levels and their relation to the practitioner of medicine. SPRING. Lefkowitz and staff.

Biostatistics

DIRECTOR William D. Dupont
PROFESSORS William D. Dupont, Charles F. Federspiel
ASSISTANT PROFESSOR Beverly G. Mellen
RESEARCH ASSOCIATE An-Ping Li
Pharmacoepidemiology

DIRECTOR Wayne A. Ray
PROFESSORS Marie R. Griffin, Wayne A. Ray
ASSISTANT PROFESSOR Sarah K. Meredith

Psychiatry

CHAIR Michael H. Ebert
PROFESSORS EMERITI Virginia D. Abernethy, Thomas A. Ban, Warren W. Webb, LaVergne Williams
RESEARCH PROFESSOR Sydney Spector
ADJOINT PROFESSOR Michael Maes
CLINICAL PROFESSORS David Barton, William M. Petrie
RESEARCH ASSOCIATE PROFESSOR Dennis E. Schmidt
ASSOCIATE CLINICAL PROFESSORS Charles Corbin, Jr., J. Emmett Dozier, Jr., Joseph Fishbein, D. Catherine Fuchs, Frederick T. Horton, Jr., Ronald F. Kourany, Kent Kyger, Samuel O. Okpaku, J. Kirby Pate, Rudra Prakash, Vernon H. Sharp, Charles B. Smith, S. Steve Snow, C. Richard Treadway
RESEARCH ASSISTANT PROFESSORS Tomas De Paulis, Irene Feurer, Vicki S. Harris, Lynn Nielsen-Bohlman, Emmanuel Onaivi, S. Paul Rossby, Randy L. Smith-Barrett, William Thomas Summerfelt
ADJUNCT ASSISTANT PROFESSOR Sara E. Sedgewick
THE Department of Psychiatry presents a series of lectures on human behavior and the practice of medicine to first-year students and instructs second-year students in the diagnosis, etiology, and treatment of basic psychiatric disorders. In the third year, students participate in a clerkship studying various psychiatric problems in both inpatient and outpatient settings.

A number of elective courses offered at various levels include such topics as determinants of human behavior; human sexuality; health and illness, doctors and patients; and children’s problems in contemporary society. A number of clerkships, offered to fourth-year students as electives, provide intensive clinical experience in both inpatient and outpatient settings.

**Required Courses**

**504. Human Behavior and the Practice of Medicine.** First year. This course provides a framework for the consideration of psychosocial factors in the practice of medicine, including modern neurological concepts. FALL. LaBarbera and staff.

**501. Psychiatry.** Second year. This course introduces the student to the concept of psychopathology with emphasis on etiology, diagnosis, treatment of the basic psychiatric disorders, and interviewing methods. SPRING. Hubbard and staff.

**502. Psychiatry Clinical Rotation.** A six-week rotation in which students are exposed to a variety of psychiatric disorders. Patient care, ward rounds, components, and seminars comprise the rotation. Bolian and staff.

Note: Psychiatry and Neurology are given in an eight-week block. During this unit, students will participate in lectures and conferences given by both departments, and they will be assigned for two weeks to a neurology clinical setting and for six weeks to one or more clinical settings in Psychiatry.
Radiation Oncology

CHAIR Dennis Hallahan 
PROFESSORS Hak Choy, Dennis Hallahan 
ASSOCIATE PROFESSORS Dennis Michael Duggan, Michael L. Freeman 
ASSISTANT PROFESSORS Anuradha Chakravarthy, Allan Yi-Nan Chen, Anthony J. Cmeliak, Pengnian Charles Lin, Eduardo Mercado, Elaine Sierra-Rivera, Ming Teng 
RESEARCH ASSISTANT PROFESSOR George P. Amorino 
INSTRUCTORS Darryl G. L. Kaurin, Algis P. Sidrys 
RESEARCH ASSOCIATES Ling Geng, David Sheshelidze 

THE Department of Radiation Oncology introduces the discipline of radiation oncology to medical students during their third- or fourth-year clerkships. 

In third year, students attend departmental presentations as a part of their clinical rotations and discuss the use of appropriate work-up and treatment of cancer patients. 

Fourth-year students may participate in basic science, translational, or clinical research in radiation oncology. 

Radiology and Radiological Sciences

CHAIR C. Leon Partain 
PROFESSORS EMERITI Joseph H. Allen, Jr., John H. Beveridge, Sandra G. Kirchner, W. Faxon Payne, Henry P. Pendergrass 
RESEARCH PROFESSOR A. Bertrand Brill 
ADJUNCT PROFESSORS Gerald Stanley Freedman, A. Everette James, Jr., F. David Rollo 
CLINICAL PROFESSORS Thomas R. Duncan, Ronald E. Overfield 
RESEARCH ASSOCIATE PROFESSOR Haakil Lee 
ASSOCIATE CLINICAL PROFESSORS Ronald B. Addlestone, Craig M. Coulam, Glynis A. Sacks 
RESEARCH ASSISTANT PROFESSORS Sekhar Konjeti, William R. Riddle 
ADJUNCT ASSISTANT PROFESSORS Susana Martinez Cruz, Christine H. Lorenz, Richard W. Rieck
THE Department of Radiology and Radiological Sciences introduces the discipline of radiology to medical students during their first-year course in gross anatomy.

The second-year course includes lectures and small group seminars correlating pathological findings and physical diagnostic signs with roentgen findings. In the third year students attend departmental presentations as a part of their clinical rotations and discuss the use of appropriate imaging modalities including computed axial tomography, nuclear medicine, magnetic resonance imaging, digital subtraction angiography, and ultrasound in diagnostic evaluation.

Fourth-year students have at their disposal a variety of audiovisual aids prepared for self-instruction and personally observe and participate in departmental procedures in a didactic lecture series. A clerkship in diagnostic radiology is offered as a fourth-year elective. Other electives available to students at various levels include computer applications in medicine principles in the use of radioisotopes in biology and medicine; clinical nuclear medicine; physics in diagnostic and therapeutic radiology; mammalian radiobiology; and neuroradiology. Clerkships in therapeutic radiology are also available.

**Required Course**

**501. Introduction to Radiology.** Second year. A series of lectures and small group sessions to introduce the student to conventional radiographic methods in the study of various organ systems. Basic principles of imaging and interpretation are emphasized along with indications, contraindications, and risk of the examinations. FALL. Wright and staff.
Section of Surgical Sciences

The Section of Surgical Sciences is composed of the departments of Surgery, Dentistry, Emergency Medicine, Neurosurgery, Oral Surgery, Otolaryngology, Pediatric Surgery, Plastic Surgery, Thoracic and Cardiac Surgery, and Urologic Surgery.

These departments contribute to the interdepartmental course in methods in clinical science. Third-year students participate in a clinical clerkship in which they are assigned to the surgical divisions of Vanderbilt Hospital, St. Thomas Hospital, or Veterans Administration Hospital. Third-year surgical clerks also participate in a series of clinical case presentations. Fourth-year students are required to have one month of senior selective clerkship in general surgery or another surgical specialty.

Surgical clerkships are offered to fourth-year students as electives at affiliated hospitals. Other elective clerkships available to fourth-year students include neurological surgery, cardiovascular surgery, urology, pediatric surgery, clinical oncology, plastic surgery, renal transplantation, and oral surgery. A laboratory research elective and a urology clinic seminar are also available to fourth-year students.

General Surgery

CHAIR James A. O’Neill, Jr.
ADJUNCT RESEARCH PROFESSOR Harold C. Miller
CLINICAL PROFESSORS J. Kenneth Jacobs, Joseph L. Mulherin, Jr.
RESEARCH ASSOCIATE PROFESSORS Paul J. Flakoll, Hongmiao Sheng, Phillip E. Williams
ASSISTANT PROFESSORS Maria E. Frexes-Steed, Jeffrey S. Guy, Raul J. Guzman,
    Michael D. Holzman, Ellen B. Hunter, H. Keith Johnson, Mark C. Kelley, Murray J.
    Mazer, Thomas C. Naslund, Marc A. Passman, A. Scott Pearson, Walter E. Smalley, Jr.,
    Timothy L. Van Natta
RESEARCH ASSISTANT PROFESSORS Leonard Alan Bradshaw, Kareem Jabbour, Jinyi
    Shao
ASSISTANT CLINICAL PROFESSORS Terry R. Allen, Jeanne F. Ballinger, Stanley Bernard,
    A.J. Bethurum, Bernard L. Burgess, Jr., Richard J. Geer, Robert W. Ikard, Sabi S. D.
    Kumar, William I. Lewis, Kimberly D. Lomis, Donald E. Meier, Jefferson C. Pennington,
    Timothy J. Ranval, Charles B. Ross, Henry P. Russell, Richard B. Terry
ASSOCIATES Carolyn S. Watts, Sara Jayne Williams
INSTRUCTORS Jose J. Diaz, Karen Draper-Stepanovich, Eric A. Toschlog
RESEARCH INSTRUCTORS Myfanwy Borel, Liying Li
CLINICAL INSTRUCTORS Laura L. Dunbar, Ray Hargreaves, John E. Keyser III, John K.
    Wright
ASSISTANT Mary Fran Hazinski
LECTURER Hal E. Houston

Cardiac and Thoracic Surgery

CHAIR Davis C. Drinkwater, Jr.
PROFESSORS EMERITI Harvey W. Bender, Jr., William S. Stoney, Jr.
PROFESSORS Davis C. Drinkwater, Jr., Walter H. Merrill
CLINICAL PROFESSOR William C. Alford, Jr.
ASSOCIATE CLINICAL PROFESSORS J. Scott Rankin, Clarence S. Thomas, Jr.
ASSISTANT PROFESSORS Karla G. Christian, Rebecca J. Dignan, William H. Frist,
    Richard Norris Pierson III, John Robert Roberts
RESEARCH ASSISTANT PROFESSORS Agnes Azimzadeh, Paul A. Chang
ASISTANT CLINICAL PROFESSORS Phillip P. Brown, George R. Burrus, William Hubert
    Coltharp, David M. Glassford, Jr., Michael R. Petracek
INSTRUCTORS Andras Kollar, Marinos C. Soteriou
CLINICAL INSTRUCTOR Robert A. Hardin

Dentistry

PROFESSOR Harry Lewis Legan
CLINICAL PROFESSOR Stanley Braun
ASSOCIATE CLINICAL PROFESSOR James D. Allen
ASSISTANT PROFESSORS S. Julian Gibbs, William Robert Pettigrew
ASSISTANT CLINICAL PROFESSORS Bill Akin, Herbert Allen Crockett, Ernest J. DeWald,
    James L. Dickson, Ernest Mac Edington, Matthias J. Gorham, Jr., Irwin Hodes, Robert
    C. Lineberger, Terryl A. Propper, Henry Clifton Simmons III, David J. Snodgrass, John
    W. Turner, Jr.
CLINICAL INSTRUCTORS George A. Adams, Jr., Franklin William Taylor
Neurological Surgery

CHAIR George S. Allen
PROFESSOR EMERITUS William F. Meacham
PROFESSOR George S. Allen
CLINICAL PROFESSOR Cully A. Cobb, Jr.
ASSOCIATE PROFESSORS Lewis S. Blevins, Jr., J. Michael Fitzpatrick, Robert L. Gal- loway, Jr., Noel B. Tulipan
ASSOCIATE CLINICAL PROFESSORS Michael E. Glasscock III, Ray W. Hester
ASSISTANT PROFESSORS Terry A. Day, Peter E. Konrad, Scott Crawford Standard, Robert J. Weil
ASSISTANT CLINICAL PROFESSORS Michael L. Copeland, Everette I. Howell, Jr.
CLINICAL INSTRUCTORS Vaughan A. Allen, Arthur Cushman, James W. Hays

Oral Surgery

CHAIR Scott B. Boyd
PROFESSORS EMERITI H. David Hall, Elmore Hill
PROFESSOR Scott B. Boyd
ASSOCIATE PROFESSOR Samuel Jay McKenna
ASSISTANT PROFESSOR John Robert Werther
ASSISTANT CLINICAL PROFESSORS Jeffrey B. Carter, John T. King, Gregory P. Robertson, Stanley C. Roddy, Jr.
INSTRUCTOR Richard Scott Conley

Otolaryngology

CHAIR Robert H. Ossoff
PROFESSOR EMERITUS William G. Kennon, Jr.
PROFESSORS Fred H. Bess, Robert H. Ossoff
VISITING PROFESSOR Johan Sundberg
CLINICAL PROFESSORS Michael E. Glasscock III, C. Gary Jackson
ASSOCIATE CLINICAL PROFESSORS C. K. Hiranya Gowda, Paul M. Nemiroff
ASSISTANT CLINICAL PROFESSORS Jerrall P. Crook, William L. Downey, Perry F. Harris, Daniel R. Hightower, Thomas W. Holzen, Michael J. Koriwchak, David V. Martini, Warren R. Patterson, Mark E. Reiber
INSTRUCTORS Robert Arthur Buckmire, Mary A. Hudson, Alain N. Sabri, Joseph C. Sniezek, Yvette Marie Vinson
RESEARCH INSTRUCTOR Shan Huang
CLINICAL INSTRUCTORS Ronald Cate, Jerrall Paul Crook, Jr., William G. Davis, Mark A. Deaton, Edwin Boyette Emerson, F. Brian Gibson, William Thomas Moore, Robert C. Owen, John D. Witherspoon

Pediatric Surgery

CHAIR Wallace W. Neblett III
PROFESSOR EMERITUS George W. Holcomb, Jr.
PROFESSOR Wallace W. Neblett III
ASSOCIATE PROFESSORS George W. Holcomb III, John B. Pietsch
ASSISTANT PROFESSOR Walter M. Morgan III

Plastic Surgery

CHAIR R. Bruce Shack
PROFESSORS EMERITI John B. Lynch, Greer Ricketson
PROFESSORS Lillian B. Nanney, R. Bruce Shack
ASSOCIATE CLINICAL PROFESSORS Reuben A. Bueno, Jack Fisher, G. Patrick Maxwell
ASSISTANT PROFESSORS Ronald M. Barton, Kevin F. Hagan, Kevin J. Kelly
ASSISTANT CLINICAL PROFESSORS Stephen M. Davis, Philip E. Fleming, Perry F. Harris, James J. Madden, Jr., Thomas W. Orcutt, Lois Wagstrom

Urologic Surgery

CHAIR Joseph A. Smith, Jr.
PROFESSOR EMERITUS Charles E. Haines, Jr.
PROFESSORS Robert J. Matusik, Joseph A. Smith, Jr.
ASSOCIATE PROFESSORS Mark C. Adams, John W. Brock III, Frederick Kirchner, Jr., William J. Stone
ASSISTANT PROFESSORS Michael S. Cookson, Jenny Jo Franke, Douglas Franklin Milam, John C. Pope IV
RESEARCH ASSISTANT PROFESSOR Susan Kasper
ASSISTANT CLINICAL PROFESSORS Robert B. Barnett, Keith W. Hagan, David E. Hill, Thomas E. Nesbitt, Robert A. Sewell
Required Courses

502. Clinical Clerkship. For ten weeks each student in the third-year class is assigned to the surgical divisions of the Vanderbilt University Hospital, St. Thomas Hospital, or Veterans Hospital. Under the direction and supervision of the staff, the student takes histories, does physical examinations, and assists the staff in the diagnostic evaluation and clinical management of assigned patients. Half of each student's period of clinical work is in general surgery, including oncology, vascular, and pediatric services. The other five weeks of the clinical assignment provide concentrated rotations in two of the following services: neurosurgery, urology, ophthalmology, plastic, cardiac and thoracic surgery, orthopaedics, and anesthesiology. These rotations provide exposure to a variety of patients with problems in general surgery and in the special fields of surgery. Teaching rounds are held daily by members of the staff. Students go with their patients to the operating rooms where they are observers and assistants to the staff in surgery, the surgical specialties, and anesthesiology. Sharp and staff.

520. Ambulatory Clerkship. During a four-week unit each fourth-year student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or emergency service. Hickson and staff.

Interdisciplinary Course Work

501. Introduction to Biomedical Research. Each first year student is assigned to a faculty preceptor and completes a project in basic biomedical research. This is intended to provide students with an effective working appreciation of basic laboratory techniques and an opportunity to make observations and assess the validity of findings, applying the scientific method in realistic problem solving. During the fall semester, students will identify the preceptor, acquire experience in bibliography searching, and begin background preparation for the project. In the spring semester, two blocks of time each week are reserved for work on the project. Oeltmann and faculty of the participating departments. Cherrington and staff.

520. Ambulatory Clerkship. During a four-week unit each fourth-year student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or emergency service. Hickson and staff.
Named and Distinguished Professors

GEORGE S. ALLEN, William F. Meacham Chair in Neurological Surgery
CARLOS M. ARTEAGA, Ingram Professor of Cancer Research
DAVID M. BADER, Gladys Parkinson Stahlman Chair in Cardiovascular Research
JEFFREY R. BALSER, James Taloe Gwathmy Clinician-Scientist Chair
R. DANIEL BEAUCHAMP, John L. Sawyers Chair in Surgical Sciences
RANDY D. BLAKELY, Allan D. Bass Chair in Pharmacology
MARTIN J. BLASER, Addison B. Scoville Jr. Chair in Medicine
KENNETH L. BRIGHAM, Ralph and Lulu Owen Chair in Pulmonary Diseases
LONNIE S. BURNETT, Frances and John C. Burch Chair in Obstetrics and Gynecology
IAN M. BURR, James C. Overall Chair in Pediatrics
RICHARD M. CAPRIOLO, Stanley Cohen Professorship in Biochemistry
DAVID P. CARBONE, Ingram Professor of Cancer Research
Graham Carpenter, Ingram Professor of Cancer Research
ALAN D. CHERINGTON, Charles H. Best Professorship in Diabetes Research
FRANK CHYTIL, General Foods Distinguished Professor of Nutrition
ELLEN WRIGHT CLAYTON, Rosalind E. Franklin Professorship in Genetics and Health Policy
ROBERT J. COFFEY, JR., Ingram Professor of Cancer Research
STANLEY COHEN, Distinguished Professor of Biochemistry and American Cancer Society Research Professor of Biochemistry
ROBERT D. COLLINS, John L. Shapiro Chair in Pathology
THOMAS O. DANIEL, Catherine McLaughlin Hakim Chair in Medicine
ROBERT S. DITTUS, Joe and Morris Werthan Professorship in Investigative Medicine
DAVIS C. DRINKWATER, JR., William S. Stoney Jr. Chair in Cardiac and Thoracic Surgery
RAYMOND N. DUBOIS, JR., Mina Cobb Wallace Chair in Gastroenterology and Cancer Prevention
MICHAEL H. EBERT, James G. Blakemore Chair in Psychiatry
RONALD B. EMESON, Joel C. Hardman Chair in Pharmacology
GOTTLIEB C. FRIESSINGER II, Betty and Jack Bailey Professorship in Cardiology
THOMAS P. GRAHAM, JR., Ann and Monroe Carell Jr. Family Chair in Pediatric Cardiology
DARYL K. GRANNER, Joe C. Davis Chair in Biomedical Science
JACEK HAWIGER, Oswald T. Avery Professorship in Microbiology and Immunology
STEVEN C. HEBERT, Ann and Roscoe R. Robinson Chair in Nephrology
BRIGID L. M. HOGAN, Hortense B. Ingram Chair in Molecular Oncology
TADASHI INAGAMI, Stanford Moore Chair in Biochemistry
DAVID H. JOHNSON, Cornelius Abernathy Craig Chair in Medical and Surgical Oncology
ALEXANDER R. LAWTON, Edward Claiborne Stahlman Chair in Pediatric Physiology and Cell Metabolism
LAWRENCE J. MARNETT, Mary Geddes Stahlman Chair in Cancer Research
LYNN M. MATRISIAN, Ingram Professor of Cancer Research
HERBERT Y. MELTZER, Bixler/Johnson/Mays Chair in Psychiatry
JASON D. MORROW, F. Tremaine Billings Professor of Medicine
HAROLD L. MOSES, Benjamin F. Byrd Jr. Chair in Clinical Oncology
JOHN J. MURRAY, Elizabeth and John Murray Chair of the Asthma, Sinus, and Allergy Program
ERIC G. NEILSON, Hugh J. Morgan Chair in Medicine
JOHN H. NEWMAN, Elsa S. Hanigan Chair in Pulmonary Medicine
DENIS M. O’DAY, George W. Hale Professorship in Ophthalmology
JAMES A. O’NEILL, JR., John Clinton Foshee Distinguished Chair in Surgery
JOHN A. OATES, Thomas F. Frist Chair in Medicine
MARIE-CLAIRE ORGEBIN-CRIST, Lucius E. Birch Chair in Reproductive Physiology and Family Planning
Faculty

MATTHEW J. ABBATE, Adjunct Instructor in Medicine  
A.B. (Brown 1987); M.D. (Tufts 1991) [1995]

RASUL ABDOLRASULNIA, Research Instructor in Medicine  
B.S. (Shiraz 1961); M.S. (Pahlavi 1972); Ph.D. (Tennessee 1978) [1988]

VIRGINIA D. ABERNETHY, Professor of Psychiatry (Anthropology), Emerita  

BASSEL W. ABOU-KHALIL, Associate Professor of Neurology  

MAURICE M. ACREE, JR., Assistant Clinical Professor of Pathology  
B.A. (Vanderbilt 1949); M.D. (Tennessee 1961) [1970]

GEORGE A. ADAMS, JR., Clinical Instructor in Oral and Maxillofacial Surgery  
(Dentodontics)  
D.D.S. (Indiana 1974) [1978]

MARK C. ADAMS, Associate Professor of Urologic Surgery; Associate Professor of Pediatrics  
A.B., M.D. (Vanderbilt 1979, 1983) [1995]

RONALD B. ADDLESTONE, Associate Clinical Professor of Radiology and Radiological Sciences  
B.S. (Charleston 1965); M.D. (Emory 1968) [1982]

EARL RULEY, Ingram Professor of Cancer Research  
FRIEDRICH SCHUENING, Ingram Professor of Cancer Research  
JOSEPH A. SMITH, JR., William L. Bray Chair in Urologic Surgery  
SUBRAMANIAM SRIRAM, William C. Weaver Chair in Neurology  
DOUGLAS E. VAUGHAN, C. Sidney Burwell Professor of Medicine  
MICHAEL R. WATERMAN, Natalie Overall Warren Distinguished Chair in Biochemistry  
JAMES A. WHITLOCK, Craig-Weaver Chair in Pediatrics  
RICHARD M. ZANER, Ann Geddes Stahlman Chair in Medical Ethics

R. BENTON ADKINS, JR., Professor of Surgery; Professor of Cell Biology  
B.S. (Austin Peay State 1954); M.D. (Vanderbilt 1958) [1964]

R. TERRY ADKINS, Clinical Instructor in Obstetrics and Gynecology  
A.B. (Tennessee 1980); M.D. (Baylor 1983) [1989]

ANITA AGARWAL, Assistant Professor of Ophthalmology and Visual Sciences  
M.S. (Chandigarh [India] 1990); M.D. (Mangalore [India] 1995) [1999]

MARIA DEL PILAR AGUINAGA, Adjunct Associate Professor of Medicine  

CHRISTOPHER R. AIKEN, Assistant Professor of Microbiology and Immunology  
B.S. (California, Santa Barbara 1983); Ph.D. (Illinois 1991) [1995]

BILL AKIN, Assistant Clinical Professor of Oral and Maxillofacial Surgery (Periodontics)  

JUDITH B. AKIN, Assistant Clinical Professor of Psychiatry  
Pharm.D., M.D. (University of Arkansas for Medical Sciences 1982, 1986) [1990]

NORMAN ALBERTSON, Clinical Instructor in Pediatrics  
B.S. (Texas A & M 1981); M.D. (Texas 1991) [1995]
CHARLES F. ALBRIGHT, Assistant Professor of Biochemistry
S.B., Ph.D. (Massachusetts Institute of Technology 1980, 1989) [1993]

DAVID DWIGHT ALFERY, Adjunct Associate Professor of Anesthesiology
B.A. (Tulane 1970); M.D. (Louisiana State 1976) [1995]

ROBERT H. ALFORD, Clinical Professor of Medicine

WILLIAM C. ALFORD, JR., Clinical Professor of Cardiac and Thoracic Surgery

JOHN T. ALGREN, Associate Professor of Anesthesiology; Associate Professor of Pediatrics
B.S. (Kentucky 1971); M.D. (Louisville 1975) [1999]

DAVID W. ALLEN, Assistant Clinical Professor of Medicine
B.S. (Vanderbilt 1984); M.D. (East Tennessee State 1989) [1994]

GEORGE S. ALLEN, William F. Meacham Chair in Neurological Surgery; Professor of Neurological Surgery and Chair of the Department
B.A. (Wesleyan 1963); M.D. (Washington University 1967); Ph.D. (Minnesota 1974) [1984]

GREGG P. ALLEN, Clinical Instructor in Family Medicine
A.B. (Oberlin 1974); M.D. (Jefferson Medical College 1978) [1998]

JAMES D. ALLEN, Associate Clinical Professor of Oral and Maxillofacial Surgery

JOSEPH H. ALLEN, JR., Professor of Radiology and Radiological Sciences, Emeritus
M.D. (Washington University 1948) [1956]

PATRICIA FLYNN ALLEN, Assistant Professor of Hearing and Speech Sciences

TERRY R. ALLEN, Assistant Clinical Professor of Surgery
B.A. (Swarthmore 1962); M.D. (Virginia 1966) [1974]

VAUGHAN A. ALLEN, Clinical Instructor in Neurological Surgery
B.S. (Springfield 1967); M.D. (Temple 1972) [1978]

FRED ALLISON, JR., Professor of Medicine, Emeritus
B.S. (Alabama Polytechnic Institute, Auburn 1944); M.D. (Vanderbilt 1946) [1987]

M. NEIL ALLISON, Associate Clinical Professor of Pathology
D.V.M. (Oklahoma State 1971) [1996]

BAN MISHU ALLOS, Assistant Professor of Medicine; Assistant Professor of Preventive Medicine
B.A. (Emory 1981); M.D. (Tennessee, Memphis 1985) [1993]

BENJAMIN J. ALPER, Associate Clinical Professor of Medicine
B.A., M.D. (Vanderbilt 1946, 1949) [1955]

LAUREL V. ALSENTZER, Assistant Clinical Professor of Pediatrics
B.S.N. (Vanderbilt 1983); M.D. (Medical College of Pennsylvania 1987) [1990]

DARRINGTON PHILLIPS ALTENBERN, Clinical Instructor in Obstetrics and Gynecology
B.A. (North Carolina 1984); M.D. (Vanderbilt 1988) [1992]

KALYANI AMARNATH, Research Assistant Professor of Pathology

VENKATARAMAN AMARNATH, Research Associate Professor of Pathology
B.S. (Madras Christian 1968); M.S. (Indian Institute of Technology 1970); Ph.D. (Carnegie-Mellon 1973) [1995]

SUDHA S. AMATYA, Clinical Instructor in Pediatrics

SUSAN M. AMBERG, Clinical Instructor in Hearing and Speech Sciences

LORI L. AMIS, Clinical Instructor in Pediatrics
B.S. (Auburn 1989); M.D. (Tennessee, Memphis 1993) [1996]

GEORGE P. AMORINO, Research Assistant Professor of Radiation Oncology
B.S., M.S. (California State 1986, 1988); Ph.D. (Colorado State 1995) [1998]
VINITA ANAND, Assistant Clinical Professor of Medicine  
M.B.,B.S. (Bangalore 1978) [1990]  
EDWARD E. ANDERSON, Clinical Instructor in Medicine  
B.A., M.D. (Vanderbilt 1958, 1961) [1971]  
EDWIN B. ANDERSON, JR., Assistant Clinical Professor of Medicine  
B.S. (Georgia Institute of Technology 1969); M.D. (Vanderbilt 1973) [1981]  
JAMES C. ANDERSON, Assistant Clinical Professor of Pediatrics  
B.A. (Illinois Wesleyan 1985); M.D. (Vanderbilt 1989) [1993]  
JAMES ERWIN ANDERSON, JR., Associate Clinical Professor of Medicine  
B.A., M.D. (Vanderbilt 1956, 1959) [1966]  
JOHN E. ANDERSON, Assistant Clinical Professor of Medicine  
B.A. (Virginia 1982); M.D. (Vanderbilt 1986) [1989]  
MARK E. ANDERSON, Assistant Professor of Medicine; Assistant Professor of Pharmacology  
TED L. ANDERSON, Assistant Clinical Professor of Obstetrics and Gynecology  
WAYNE F. ANDERSON, Adjunct Professor of Biochemistry  
B.S. (Minnesota 1970); M.Phil., Ph.D. (Yale 1975, 1975) [1988]  
WILLIAM J. ANDERSON, Associate Clinical Professor of Surgery  
SUBBU APPARSUNDARAM, Research Instructor in Pharmacology  
B.S. (Madras Medical [India] 1985); M.S. (India 1988); Ph.D. (Houston 1994) [1999]  
YOSHIHIKO ARAKI, Research Associate Professor of Obstetrics and Gynecology  
MARY ANN T. ARILDSEN, Assistant Professor of Cell Biology  
B.S., M.S. (Yale 1977); M.D., Ph.D. (Pennsylvania 1983) [1999]  
RONALD CURTIS ARILDSEN, Associate Professor of Radiology and Radiological Sciences  
RICHARD N. ARMSTRONG, Professor of Biochemistry; Professor of Chemistry  
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CHENGWEI WU, Assistant in Microbiology and Immunology
M.S. (Iowa State 1997) [1998]
YUEJIN WU, Research Instructor in Medicine
M.Sci. (Wuhan [China] 1987); Ph.D. (Tongji Medical University [China] 1990) [1999]
KENNETH N. WYATT, Clinical Instructor in Pediatrics
B.S., M.D. (Michigan State 1968, 1979) [1984]
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B.Ph. (Beijing Medical [China] 1982); M.M. (Beijing 1986); Ph.D. (McGill [Canada] 1994) [1997]
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ELIZABETH YANG, Assistant Professor of Pediatrics; Assistant Professor of Cell Biology
JIN-LONG YANG, Research Instructor in Microbiology and Immunology
M.D. (Shanghai Medical) [1998]
TAO YANG, Research Instructor in Pharmacology
XUEFENG YANG, Assistant Professor of Hearing and Speech Sciences
GLEN R. YANK, Professor of Psychiatry
B.A. (Harvard 1971); M.D. (SUNY, Downstate Medical Center 1975) [1997]
MARY I. YARBROUGH, Assistant Professor of Medicine; Medical Director, Employee Health Services; Assistant Professor of Preventive Medicine
B.S., M.D. (Vanderbilt 1976, 1981); M.P.H. (Johns Hopkins 1990) [1994]
AIDA YARED, Assistant Professor of Pediatrics
B.S., M.D. (American University of Beirut 1976, 1980) [1986]
CHRISTINA YNARES, Assistant Clinical Professor of Medicine
B.S., M.D. (Philippines 1968, 1972) [1991]
TADAYUKI YONEYAMA, Clinical Instructor in Pediatrics
B.S. (Duke 1990); M.D. (Medical College of Virginia 1994) [1998]
JEFFREY YORK, Instructor in Anesthesiology
B.A. (Randolph-Macon 1980); M.D. (Glasgow [Scotland] 1991) [1999]
HIROAKI YOSHIDA, Research Assistant Professor of Pediatrics
RUTH T. YOUNG, Assistant Clinical Professor of Medicine
B.A. (Duke 1972); M.A. (Minneapolis 1974); M.D. (Tennessee, Memphis 1977) [1995]
QITAO YU, Research Instructor in Microbiology and Immunology
B.S. (Da [China] 1963); Ph.D. (Shanghai Institute 1976) [1995]
FIONA ELIZABETH YULL, Research Assistant Professor of Cell Biology
CHUL-HO YUN, Research Assistant Professor of Biochemistry
B.S. (Yonsei [Korea] 1985); M.S., Ph.D. (Korea Advanced Institute of Science and Technology 1987, 1990) [1998]
PAUL B. ZANABONI, Assistant Professor of Anesthesiology
B.S., Ph.D., M.D. (St. Louis 1985, 1990, 1992) [1999]
RICHARD M. ZANER, Professor of Medicine (Philosophy); Ann Geddes Stahlman Chair in Medical Ethics; Professor of Philosophy; Professor of Ethics, Divinity School; Director, Center for Clinical and Research Ethics
B.S. (Houston 1957); M.A., Ph.D. (New School for Social Research 1959, 1961) [1981]

MICHAEL D. ZANOLLI, Associate Clinical Professor of Medicine
B.S. (Memphis State 1977); M.D. (Tennessee 1981) [1992]

DAVID L. ZEALEAR, Associate Professor of Otolaryngology
B.S. (California, Davis 1970); Ph.D. (California, San Francisco 1979) [1986]

MARK E. ZENKER, Assistant Professor of Medicine

MING-ZHI ZHANG, Research Assistant Professor of Cell Biology

RONG ZHANG, Research Instructor in Medicine
M.S. (Dalian Medical [China] 1987); M.D. (Jiangxi Medical [China] 1982); Ph.D. (Saga Medical [Japan] 1995) [1997]

JOE ZHIZHUANG ZHAO, Assistant Professor of Medicine; Assistant Professor of Biochemistry
B.S. (Jilin [China] 1984); Ph.D. (Oregon State 1990) [1995]

OLEG ZHIRNOV, Visiting Research Instructor in Pediatrics
M.D. (First Moscow Medical Institute 1974); Ph.D. (Ivanovsky Virology Institute 1978) [1999]

SHAN-REN ZHOU, Clinical Instructor in Neurology
M.D. (Hsu Chou Medical College 1978) [1999]

JOHN A. ZIC, Assistant Professor of Medicine
B.S. (Notre Dame 1987); M.D. (Vanderbilt 1991) [1995]

CARL W. ZIMMERMAN, Associate Clinical Professor of Obstetrics and Gynecology
B.S. (Peabody 1969); M.D. (Tennessee 1972) [1978]
Register of Students, 1999/2000

First Year Class

Wesley Abadie (B.S., U.S. Air Force Academy) Carrollton, TX
Dana Adkins (B.S., William and Mary) Yorktown, VA
Lisa Andrews (B.A., Bowdoin) Lincroft, NJ
Mary Margaret Atkins (B.S., Mississippi State) Demopolis, AL
Christopher Barbieri (B.A., Dartmouth) Abington, PA
Kimberly Barton (B.E., Vanderbilt) Houston, TX
Gustav Blomquist (B.S., Massachusetts Institute of Technology) Greensboro, NC
Daniel Boyer (B.A., Northwestern) Iowa City, IA
Jeanette Carpenter (B.A., Rice) Salt Lake City, UT
Christine Chan (B.S., Emory) Alpharetta, GA
Brian Chin (B.S., Richmond) Calhoun, LA
Tracy Clark (B.S., California, Los Angeles) San Diego, CA
John Conoyer (B.S., St Louis) St. Charles, MO
Meg Corrigan (B.A., Vanderbilt) St. Louis, MO
Samuel Coy (B.A., Centre) Richmond, KY
Jerry Crook (B.A., William and Mary) Cartersville, GA
Ildiko Csikiv (B.A., Arkansas) Springdale, AR
Danielle Dion (B.A., Lewis and Clark) Carpentia, CA
Lesly Dossett (B.S., Western Kentucky) Mt. Washington, KY
Maren Eggert (B.A., Williams) Falcon Heights, MN
Kristin Ehst (B.S., Vanderbilt) Bally, PA
Brian Emerson (B.A., Notre Dame) Nashville, TN
Justin Esses (B.A., Missouri) Chesterfield, MO
Joshua Fessel B.S., Evansville) Vincennes, IN
William Fiske (B.S., Duke) Alexandria, VA
Kathryn Fitz (B.A., Vanderbilt) Miami, FL
Brent Frisbie (B.S., Birmingham-Southern) Brentwood, TN
Sandra Garris (B.E., Brigham Young) Provo, UT
Melissa Gibbs (B.S., Abilene Christian) Escondido, CA
Stephen Gimple (B.A., Kansas) Topeka, KS
Joann Goring (B.S., Vanderbilt) Kansas City, KS
Daniel Gripp (B.S., Pennsylvania State) Clearfield, PA
Brenda Harris (B.A., Colorado) Arvada, CO
Aaron Hata (B.S., Wheaton) Portland, OR
Jonathan Heavey (B.A., Dartmouth) Orchard Park, NY
Benjamin Heavrin (B.A., Princeton) Castle Rock, CO
Christopher Hilton (B.A., Harvard) Durham, NH
Shih-Kuang Hong (B.S., Michigan-Ann Arbor) Fort Lee, NJ
Bruce Huang (B.A., Johns Hopkins) Potomac, MD
Alexander Hughes (B.E., Vanderbilt) San Antonio, TX
Jeong Hwang (B.S., California, San Diego) Cypress, CA
Lisa Jackson (B.A., New York) Baltimore, MD
Kevin Jo (B.A., Virginia), Burke, VA
Oluwatumini Johnson (B.A., Rice), Nashville, TN
Michael Johnston (B.A., Vanderbilt) Barrington Hills, IL
Jeffrey Jorgensen (B.A., Dartmouth), Highlands Ranch, CO
Anthony Khalifah (B.S., Kansas), Overland Park, KS
SeRyoungagn Kim (B.A., Yale), New York, NY
Kristopher Kimball (B.S., University of the South), Atlanta, GA
Monika Kiripolsky (B.S., California, Los Angeles), Del Mar, CA
Brian Lishawa (B.S., Michigan) Traverse City, MI
Justin Lockman (B.S., William & Mary) Chevy Chase, MD
Andrew Lundquist (B.S., Harvard) Bethesda, MD
Dee Malknerkev (B.A., California, Los Angeles) Burr Ridge, IL
Karen Martin (B.S., Vanderbilt) Hendersonville, TN
Jared McKinney (B.S., Purdue) Indianapolis, IN
Andrew Michel (B.A., Baylor) Brandon, MS
Constance Mobley (B.S., Memphis) Union City, TN
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John Mori (B.S., Stanford) Moraga, CA
David Morris (B.S., Vanderbilt) Cleveland, TN
Christopher Nolte (B.A., Florida State) Valrico, FL
Kristin Nyweide (B.A., Stanford) Wilmette, IL
Colleen O’Connor (B.A., Dartmouth) Franklin Lakes, NJ
John Olarte (B.A., Vanderbilt) Miami Shores, FL
Mona Patel (B.S., Vanderbilt) Brentwood, TN
Boris Pavlin (B.S., Brown) Corralitos, CA
Robert Peck (B.A., Covenant) Arnold, MD
Lauren Peters (B.A., Duke) McLean, VA
William Pidwell (B.S., Vanderbilt) Saratoga, CA
Tunghi Pini (B.S., Stanford) New York, NY
Francisco Ponce (B.A., Harvard) Sunnyvale, CA
Susannah Quisling (B.S., Vanderbilt) Nashville, TN
Doreen Ray (B.S., Duke) Troy, MI
Susan Rescorla (B.S., Wheaton) Plymouth, MN
Jacob Richardson (B.S., California, San Diego) Pleasant Hill, CA
Chloe Rowe (B.A., Dartmouth) Smithtown, NY
Naveen Seth (B.A., Pennsylvania) Maitland, FL
Brian Shannon (B.S., Notre Dame) Hartland, WI
Michael Shashaty (B.S., Georgetown) McLean, VA
Yun-Ying Shi (B.S., Massachusetts Institute of Technology) Tullahoma, TN
Eric Shinohara (B.S., Maryland Pk) Chestnut Hill, MA
James Sieradzki (B.A., Williams) South Bend, IN
Victor Soukoulis (B.A., Vanderbilt) Ames, IA
Jonathan Spanier (B.S., Duke) New City, NY
Jeffrey Stark (B.S., Georgia Institute of Technology) Fayetteville, GA
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Nicole Streiff (B.S., Vanderbilt) Nashville, TN
Anupama Subramony (B.A., Yale) Jackson, MS
Hemangini Thakar (B.A., Rice) Gaithersburg, MD
Andrew Trueblood (B.S., Duke) Cape Girardeau, MO
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Jeffrey Venstrom (B.A., Vanderbilt) Mission Viejo, CA
Kimberly Vinson (B.S., Birmingham-Southern) Muscle Shoals, AL
Justin Wahstrom (B.A., Johns Hopkins) Rockaway, NJ
Sonya Wang (B.S., Stanford) Camarillo, CA
Alec Weisberg (B.A., Brown) New Orleans, LA
Janet Willoughby (B.S., Georgetown) Haslett, MI
Todd Wine (B.A., Denison) Grove City, OH
Jack Wu (B.A., California, Berkeley) Rowland Heights, CA
Second Year Class

Kamyar Amini (B.S., California, Los Angeles) Woodland Hills, CA
Laurie Renee Archbald (B.A., Johns Hopkins) Gainesville, FL
Elizabeth Sprott Atkinson (B.A., Colby) Signal Mt., TN
Adam Zubrow Barkin (B.A., Williams) Denver, CO
Aaron Patrick Bayne (B.S., Vanderbilt) Anchorage, AK
Rose Therese Bohan (B.A., St Mary’s Columbia, MD
Erika Lee Bono (B.S., North Carolina) Charlotte, NC
Lynn Jennifer Bunch (B.S., Emory) Tallahassee, FL
Danny Lee Chang (B.A., California, Berkeley) Oakland, CA
Kou-Wei Chiu (B.S., Maryland) Silver Springs, MD
Leigh Anne Compton (B.S., Centenary) Spring, TX
Jeffrey Alan Conway (B.A., Princeton) Grand Rapids, MI
Christine Genelle Cooper (B.A., Indiana) Chicago, IL
Dhiren Sirish Dave (B.S., Johns Hopkins) Salt Lake City, UT
Joshua Charles Denny (B.S., Vanderbilt) Louisville, KY
Clinton James Devin (B.S., Wyoming) Laramie, WY
Dwayne Everett Dove (B.S., Clemson) Summerville, SC
Nathaniel David Dueker (B.A., Bowdoin) Columbia, MO
Joy Louise Duong (B.A., Vanderbilt) Knoxville, TN
Steven Michael Farley (B.A., Pomona) Evergreen, CO
Jason Andrew Freedman (B.A., Pennsylvania) Baltimore, MD
Jennifer Rae Frump (B.S., Calvin) Lansing, IL
Qing Jocelyn Ge (B.E.) Beijing, China
Christopher Robert Girasole (B.A., Yale) East Greenwich, RI
Laura Katharine Green (B.S., William & Mary) Oakton, VA
Rajnish Kumar Gupta (B.A., Vanderbilt) Lilburn, GA
Sarah Habibian (B.S., Virginia) Nashville, TN
Sarah Page Hammond (B.A., Bowdoin) Worcester, MD
Denise Lorraine Harris (B.A., Princeton) Nassau, NY
Stephanie Elizabeth Harris (B.A., Duke) Madras, OR
Matthew Earl Harris (B.A., Vanderbilt) Longwood, FL
Jennifer Sharon Haskell (B.A., Virginia) Columbia, MD
Hilary Anne Highfield (B.A., Washington University) Louisville, KY
Kevin Eugene Hsieh (B.A., California, Berkeley) Rancho Palos Verdes, CA
Gopakumar Vasudeva Iyer (B.S., Vanderbilt) Louisville, KY
Charlie Jung (B.A., Virginia) Richmond, VA
Christine Claiborne Kane (B.A., Bowdoin) Chevy Chase, MD
Sara Marshall Kantrow (B.A., Princeton) Baton Rouge, LA
Steven Randall Kaptik (B.A., Boston) New Hope, PA
Stefanie Knapp (B.S., Carnegie-Mellon) Belle Mead, NJ
Melody Beth Knauf (B.A., Middlebury) Steamboat Springs, CO
Bradley Todd Kovach (B.A., Johns Hopkins) Annapolis, MD
Anthony Nannini Kuo (B.S., Vanderbilt) Douglasville, GA
George Shou-Cheng Lee (B.S., Weber State; D.D.S., Northwestern) Ogden, UT
Jaclyn Mary Lekse (B.S., Vanderbilt) Pittsburgh, PA
Kathleen Maria Lombard (B.E., Pennsylvania) Norcross, GA
John Royston Long (B.A., Duke) Nashville, TN
Christopher Alan Lundquist (B.S., Iowa) Urbandale, IA
Daniel Paul Luppens (B.S., Duke Salisbury, MD
Lindsay Jenna Mallard (B.A., Virginia) Nashville, TN
Jonathan Orion Massey-Taylor (B.S., Arizona State) Albuquerque, NM
Margaret Louise McCullough (B.A., Washington University) Nashville, TN
Suhail Kamrudin Mithani (B.S., Massachusetts Institute of Technology) Bel Air, MD
Kristen Marie Mol (B.S., Calvin) Rockford, MI
Joshua Parker Moss (B.S., Notre Dame) Indianapolis, IN
Nicolette Elizabeth Muscato (B.S., Notre Dame) Orchard Park, NY
Rima Alice Nasrallah (B.A., Boston) Columbus, OH
Rahul Satish Nayak (B.S., Brown) St. Louis, MO
Robert Saunders Nebbitt (B.A., Davidson) Nashville, TN
Amanda E Nelson (B.A., Colorado) Aurora, CO
Ross Ian Palis (B.S., Duke) Wantagh, NY
Brian Kwanhee Park (B.A., Harvard) Germantown, TN
Stephanie Sun-Young Park (B.A., Yale) Waterloo, IL
Morgan Grey Parker (B.A., Vanderbilt) Nashville, TN
Mayur Bipin Patel (B.A., Johns Hopkins) Vestal, NY
David Andres Pearson (B.S., Florida) Vero Beach, FL
Alice Anne Perlowski (B.A., Cornell) Flemington, NJ
Adrian Poole (B.S., Emory) Atlanta, GA
Emily Elizabeth Prough (B.A., Wellesley) Galveston, TX
Krishna Krupa Ratnam (B.A., Princeton) Los Altos Hills, CA
Thomas Patrick Rauth (B.S., California, San Diego) Los Angeles, CA
Amy Lynn Robichaux (B.E., Catholic) Lafayette, LA
Shane Benton Rowan (B.A., Vanderbilt) Germantown, TN
Robin Cheryl Ryther (B.S., Missouri) Chesterfield, MO
Mark Eugene Ryzewicz (B.A., Stanford) Big Timber, MT
Sonal Suresh Saraswat (B.E., Vanderbilt) Murfreesboro, TN
Jessica Koch Schechter (B.A., Dartmouth) Great Falls, VA
Karen Elizabeth Schill (B.E., Georgia Institute of Technology) Atlanta, GA
Christine Marie Schlenker (B.S., Tufts) Chicago, IL
Tricia Ann Scholes (B.A., California, Berkeley) Concord, CA
Michael Dean Scott (B.S., Centre) Dale, IN
Vikas Navin Shah (B.E., Michigan State) Denville, NJ
George Gang Sheng (B.S., Trinity)
Fun-Yang Shieh (B.S., California, Berkeley) San Jose, CA
Stephen Lung-Wen Shih (B.A., Stanford) Torrance, CA
Kara Anne Slagter (B.S., Calvin) Tinley Park, IL
David Ian Smith (B.A., Princeton) Mountain Lakes, NJ
Jeffrey Daniel Smithers (B.S., Michigan) Owosso, MI
Sudheer Jagannath Surpure, (B.A., D.D.S., Oklahoma) Los Vegas, NV
Christopher Dennis Tarr (B.S., Tulane) Sarasota, CA
Jacques Chern-Jet Tham (B.S., Duke) Bartlesville, OK
Julie Irene Thwing (B.A., Harvard) Cambridge, MA
William H. Tu (B.S., Maryland) Gaithersburg, MD
Leland Shayne Webb (B.S., Middle Tennessee State)
Richard Oliver White III (B.S., Duke) Orange Park, FL
Christopher Shawn Williams (B.S. Brigham Young) Belmont, MA
John Dawson Wolfe, Jr. (B.S., Duke) Atlanta, GA
Steve Wei Wu (B.A., California, Berkeley) Rowland Hts., CA
Tom Lou Yao (B.S., Vanderbilt) Knoxville, TN
Sinan Yavas (B.A., Vanderbilt) Johnson City, TN
Hong Yu (Harvard) Fort Collins, CO
Tina Fang-Ting Yu (B.A., California, Berkeley) Culver City, CA
Qi An Zhan (B.E., Vanderbilt) Huntsville, AL
Geoffrey Andrew Zimmerman (B.E., Vanderbilt)

Third Year Class

Yasmine Subhi Ali (B.A., Vanderbilt) Waverly, TN
Rajesh Alla (B.A., Yale) Rock Island, IL
Julia Feliz Alvarado (B.S., California, Los Angeles) Newton Corner, MA
Christopher Seabrook Ambrose (B.A., Virginia) Knoxville, TN
Nitin Jagdish Anand (B.A., Johns Hopkins) Germantown, MD
Folasade Adenike Aworinde (B.S., Southwestern) Austin, TX
Barbara Ann Backer (B.S., California, Davis) Oakland, CA
Bryan James Baranowski (B.S., Duke) Mississauga, Ontario,
Tyler Warren Barrett (B.S., Michigan) Newton, MA
Brian P. Barrick (B.S., Maryland) Baltimore, MD
Amogh Bhat (B.S., California, San Diego) Merced, CA
Mark Joseph Billante (B.S., Vanderbilt) Brentwood, TN
Larry Jerome Bischof (B.S., Wabash) New Albany, NY
Sarah Dantzler Bixby (B.A., Princeton) Ripon, NJ
Julie Alicia Boyd (B.S., Tennessee) Shelbyville, TN
William Bryan Burnette (B.S., Emory) Winder, GA
Matthew Lee Busam (B.A., Notre Dame) Cincinnati, OH
Nancy Larrison Campbell (B.A., Vanderbilt) Greenville, MS
Christopher Copp Canale (B.A., Lewisand Clark) Nashville, TN
Joseph Sze-Tsu Chan (B.S., California, San Diego) Los Alamos, NM
Yen-Lin Chen (B.A., Harvard) San Antonio, TX
Carmel Eden Colgrove (B.S., California, Davis) Los Gatos, CA
Andrea Tania Cruz (B.A., Harvard) West Miami, FL
Phillip Stephan Cuculich (B.S., Boston) Lockport, IL
Nicole Daamen (B.S., California, San Diego) Byron, CA
Marc Robert De Jong (B.A., Calvin) Grand Rapids, MI
Paul Thomas DeFlorio (B.A., Michigan) Ridgefield, CT
Greg Joseph Den Haese (B.S., Niagara) Liverpool, NY
Sister Mary Diana Dreger (B.S., SUNY, Stony Brook) East Northport, NY
Christopher John Dull (B.A., Michigan) Bloomfield Hills, MI
James Patrick Eaton (B.S., Villanova) Spokane, WA
Byard Edwards (B.S., Texas) Mandeville, LA
Michael Eugene Engel (B.S. Purdue) La Jolla, CA
S. R. Evans (B.S., Washington and Lee) Greenwood, MS
Audrey L. Fan (B.S., Massachusetts Institute of Technology) Culver City, CA
John Ping-Chung Fang (B.S., Johns Hopkins) Oklahoma City, OK
Nancy Lynn Flattem (B.S. Missouri) Monette, MO
Clayton Caulley Fonvielle (B.S., Vanderbilt) Tallahassee, FL
Katherin Leigh Freeman (B.A., Wellesley) Shreveport, LA
Gargi Gajendragadkar (B.S., Vanderbilt) Spartanburg, SC
Aris Charles Garro (B.A., Virginia) Glastonbury, CT
Robert Francis Garza (B.S., Tennessee) Knoxville, TN
Jeffrey Allen Giullian (B.A., Baylor) Superior, CO
James David Grippo (B.S., Pennsylvania State) Clearfield, PA
Neil David Harris (B.S., Colorado) Littleton, CO
John Matthew Hassan (B.A., Princeton) Cincinnati, OH
Wellington Kanwen Hsu (B.S., Wisconsin) Irvine, CA
Kent Kunio Ishihara (B.E. Vanderbilt) Carmichael, CA
Sunita Iyengar (B.S., Vanderbilt) Tucker, GA
Cameron Campbell Johnson (B.A., Birmingham Southern) Pensacola, FL
Kevin James Joseph (B.S., Johns Hopkins) Lexington, MA
Christopher Jay Keefer (B.S., University of the South) Lake Wales, FL
Kellie Anne Klein (B.A., California, Santa Barbara) Palos Verdes Estates, CA
Sharat Kumar Kusuma (B.A., Vanderbilt) Albany, GA
Amir Lagstein (B.S., California, Los Angeles) Las Vegas, NV
Vipul Tulsi Lakhani (B.S., Duke) Charlotte, NC
Truc Minh Le (B.A., Harvard) Chattanooga, TN
Annie Wang Lee (B.A., Tufts) Milford, CT
Carisa Anne Lee (B.S., California, San Diego) Milpitas, CA
Rosalind Hweimei Lin (B.S., Yale) Nashville, TN
Susie I-Ching Lin (B.S., SUNY, Stony Brook) Fresh Meadows, NY
Amy Lo (B.A., Harvard) Nederland, TX
James Matthew Luther (B.A., David Lipscomb) Nashville, TN
Michael Ray Lyaker (B.S., Duke) Richmond, VA
Stephanie Ann McAbee (B.S., Vanderbilt) Knoxville, TN
Heather Michelle McGehee (B.S., Vanderbilt) Asheville, NC
James Bartley McGehee (B.S., Vanderbilt) Nashville, TN
Todd Andrew Michener (B.A., Virginia) Alexandria, VA
Bridget Nicole Mikysa (B.A., Princeton) Oklahoma City, OK
Emily Suzanne Minderman (B.S., Creighton) Grand Island, NE
Marcus Wayne Moody (B.A., Virginia) Alpharetta, GA
Samir Mukund Parikh (B.S., Harvard) Edison, NJ
Jeremy Jesse Perry (B.A., Williams) Las Vegas, NV
Chad Spencer Peterson (B.S., Illinois) Lake Forest, IL
Matthew David Peterson (B.A., Virginia) Murfreesboro, TN
Meeta Prasad (B.S., Princeton) Kenner, LA
Patrick Hank Pun (B.S., Wheaton) Wheaton, IL
Holly Elizabeth Rawizza (B.A., Stanford) Chesterfield, MO
John Alston Riddick (B.S., Duke) New Orleans, LA
Cheryl Denise Riddle (B.S., Tennessee) Lynchburg, TN
James Giacomo Saccamando (B.S., Miami) Burke, VA
Jason John Schrager (B.A., Drew) Ramsey, NJ
Amy Elizabeth Shaw (B.S., Wake Forest) Solvang, CA
Timothy James Sherry (B.A., Washington) Seattle, WA
Angela Rae Singleton (B.A., Indiana) Bruceville, IN
Trent Hurley Smith (B.A., Pomona) Long Beach, CA
Charles Bryce Stevenson (B.S., Southern Methodist) Lafayette, LA
Laura Elizabeth Stobie (B.S., Duke) Clifton, VA
Kristina Lynn Storck (B.S., University of Washington) Bellingham, WA
Joyce Ming Cao Teng (B.S., Jinan) Shandong, China
Hong-Thao Nguyen Thieu (B.S., Vanderbilt) Columbia, SC
George Thomas (B.A., Johns Hopkins) Bradenton, FL
Sachin Sudhir Vaikunth (B.A., Willamette) Nashville, TN
John Anthony van Doorninck (B.A., Williamette) Franklin, TN
Eric Lee Wallace (B.S., Furman) Knoxville, TN
Jennifer Anne Wambach (B.A., Vanderbilt) Barrington Hills, IL
Darryl Steven Wells (B.S., Notre Dame) Piqua, OH
Matthew Hunter Wilson (B.S. Georgetown) Ashland, KY
Erika Yamada (B.A., Yale) New York, NY
Young-HoYoon (B.A., Harvard) Belmont, MA

Fourth Year Class

Derek Wesley Abbott (B.A., Virginia) Cumberland, ME
Allen Dale Adams (B.S., Vanderbilt) Newport, AK
Bond Almand, III (B.S., Duke) Atlanta, GA
Mary Thomas Austin (B.S., Duke) Horse Cave, KY
Geoffrey Scott Baer (B.A., Miami [Ohio]) Fairfield, Oh
Scott Michael Blackman (B.A., Princeton) Dalton, GA
David Elliott Brumbaugh (B.A., Virginia) Miami, FL
Allyson Marie Campbell (B.A., Stanford) Carson, CA
Jennifer Joy Casaletto (B.A., Notre Dame) Alexandria, VA
Melissa Chen (B.A., Harvard) Lincoln, NE
Simon Hong-Suk Chin (B.A., Harvard) Port Washington, NY
Patricia Shihann Chu (B.S., Vanderbilt) Spring, TX
Jeffrey Scott Cluver (B.A., Notre Dame) Media, PA
Eileen Hoff Dauer (B.A., Brown) Omaha, NE
John Lucian Davis, Jr. (B.A., Princeton) Nashville, TN
Jeffrey Michael Dendy (B.E., Vanderbilt) Piedmont, SC
Kathryn Witcher Dixon (B.A., Virginia) Alexandria, VA
Jennifer Ann Domm (B.S., Brown) Garden City, NY
Truit Clayton Ellis (B.S., Alabama) Columbus, MS
Nitin Jagdish Engineer (B.A., Vanderbilt) Macon, GA
Aloke Virmani Finn (B.A., Kenyon College) Chevy Chase, MD
Mark Nathaniel Fluchel (B.A., Miami) Chesterfield, MO
Amanda Frisch (B.S. Rochester) Fayetteville, NY
Austin Edward Garza (B.S., Vanderbilt) Nashville, TN
Brian David Gelbman (B.S., Cornell) Baltimore, MD
Lisa Marie Goetz (B.S., Duke) Nashville, TN
Anil Kumar Goklaney (B.S., Vanderbilt) Knoxville, TN
Ricardo Andres Gonzales (B.A., New Mexico) Nashville, TN
Dominika Anna Grodzicka-Trudgett (B.S., Emory) Germantown, MD
Amy Denise Grotelueschen (B.S., Illinois [Urbana]) East Moline, IL
Rosemary Guerguerian (B.S., Emory) Marietta, GA
Scott Alan Hande (B.A., Princeton) Nashville, TN
Stuart Garth Hannah (B.S., William and Mary) Roanoke, VA
David Hardman Harley (B.A., Dartmouth) Asheville, NC
Julie Cleek Hibbard (B.S., Abilene Christian) Brentwood, TN
Robin Nicole Hickman (B.S., Tulane) Beaumont, TX
Melissa Anne Hilmes (B.S., Vanderbilt) Chesterfield, Mo.
Tonya Nichelle Hollinger (B.S., Vanderbilt) College Park, GA
Michael Brian Humble (B.S., Western Kentucky) Auburn, KY
Rachel Joy Jankolovits (B.A., Yale) Manhasset Hills, NY
Brett Lee Johnson (B.S., Emory) Tulsa, OK
Jesse Paul Jorgensen (B.S., St. Edward's) Lubbock, TX
Sandeep Kumar Kakaria (B.A., Case Western Reserve) Steubenville, OH
Kunal Datta Kanitkar (B.S., Harvard) Columbia, SC
Marwan Riad Khalifeh (B.A., Pennsylvania) New York, NY
Varsha Venilal Khatri (B.S., California [Irvine]) Fountain Valley, CA
Pamela Beth Kingma (B.S., Calvin) Grand Rapids, MI
Paul Scot Kingma (B.S., Calvin) DeMotte, IN
Michael Young Ko (B.A., Johns Hopkins) Cherry Hill, N.J.
Michael Ross Konikoff (B.A., Virginia) Virginia Beach, VA
Timothy Kuo (B.A., Princeton) Palo Alto, CA
Kane Sam Lai (B.S., Stanford) Westlake Village, CA
Yen-Tsun Lai (B.A., Harvard) Brossard, Canada
Karen Smoller Leonard (B.A., Wellesley) Berkeley, CA
Jason Talmadge Lewis (B.S., Tennessee [Knoxville]) Hickson, TN
Martha Katherine Linker (B.A., Wellesley College) Clemmons, NC
Judy Chi-Wen Liu (B.A., Harvard) Forest Hills, KY
Brian Robert Long (B.S., Michigan [Ann Arbor]) Bloomfield Hills, MI
Noble Mashuqalam Maleque (B.S., Vanderbilt) Nashville, TN
Robert Charles Matthias,Jr. (B.A., Duke) Winter Park, FL
Sarah Elizabeth McAchran (B.A., Michigan [Ann Arbor]) Nashville, TN
Aaron Matthew McMurtray (B.S., Claremont Mckenna) Bellevue, WA
David Michael Mellman (B.S., James Madison) Oakton, VA
John Walter Millstine (B.A., Vanderbilt) Norcross, GA
Kelly Lynn Moore (B.S., Vanderbilt) Huntsville, AL
Tracy Marie Motyka (B.S., Alabama) Brentwood, TN
Frank Edward Mullens (B.A., Johns Hopkins) Wenonah, NJ
Adam Paul Myhre (B.S., Stanford) Westlake Village, CA
Michael Mark Nelson (B.A., Minnesota, Morris) Osakis, MN
Daniel Edmond Otten (B.A., Princeton) Scarsdale, NY
Asit Parikh (B.A. (Northwestern) Indianapolis, IN
Ellen Elizabeth Parker (B.S., Millsaps) Brandon, MS
John Flick Parrott,Jr. (B.A., Virginia) Greer, SC
Barron Lee Patterson (B.E., Vanderbilt) Talladega, AL
Souvan Rani Paul (B.S., Vanderbilt) Jackson, MS
Brent Edward Pennington (B.A., Vanderbilt) Clarksville, TN
Hilary Ann Petersen (B.S., Arkansas State) Littleton, CO
Jeffrey Dierker Pollard (B.S., Duke) Palo Alto, CA
Carolyn Denise Quinn (B.S., Miami) Littleton, CO
David Lawrence Sanders (B.E., Vanderbilt) Jacksonville, FL
Neil Alan Segal (B.A., Brown) Rochester, NY
Selina Shah (B.S., Vanderbilt) Lakeland, FL
Dana Sainsbury Smith (B.A., Dartmouth) Pittsford, NY
Brent Michael Snader (B.S., Dickinson) Akron, PA
Shannon Bishop Snyder (B.S., Stanford) New York, NY
Alireza Sodeifi (B.A., South Florida; D.D.S. Harvard)
Usharbudh Sohur (B.S., Angelo State) Esperance Treb, Mauritius
Joseph Carlyle Soto (B.E., Vanderbilt) Lilburn, GA
Yoshiko Tamura (B.S., Vanderbilt) Vestavia Hills, AL
Jesse Adam Taylor (B.S., Washington and Lee) Springfield, IL
Joshua Wayne Thomas (B.S., Southern Mississippi) Gulfport, MS
Kenneth Tyson Thomas (B.A., Emory) Tracy City, TN
Behrooz Abraham Torkian (B.S., California, Los Angeles) Sherman Oaks, CA
Albert James Tricomi (B.S., Cornell) Vestal, NY
Steven Terry Turner (B.A., Johns Hopkins) Roanoke, VA
Andrea Lynn Utz (B.S., Duke) Hebron, KY
Robert Christopher VanWinkle (B.S., Pepperdine) Las Vegas, NV
Christine Deting Wang (B.S., Stanford) La Jolla, CA
Derek Christopher Welch (B.A., Tennessee [Knoxville]) Hermitage, TN
Ronald Scott Wells (B.S., Oregon State) Hood River, OR
John Jason West (B.S., Stanford) Martinez, CA
Elizabeth Collens Wick (Johns Hopkins) New York, NY
Matthew Clayton Wiggins (B.A., Swarthmore) Lewes, DE
Ashley Elizabeth Wilkerson (B.S., Duke) Greenville, SC
Douglas John Williamson (B.A., Colorado) Denver, CO
Charles Jackson Wray (B.A., Dartmouth) Nashville, TN

**Medical Scientist Training Program (MD/Ph.D.) 1998/1999**

Derek Abbott, Cell Biology
Allen Adams, Cell Biology
Geoff Baer, Microbiology and Immunology
Christopher Barbieri, Medical School, First Year
Larry Bischof, Biochemistry
Scott Blackman, Molecular Physiology and Biophysics
Arthur Blomquist, Medical School, First Year
Daniel Boyer, Medical School, First Year
Geoffrey Burns, Cell Biology
Allyson Campbell, Molecular Physiology and Biophysics
Leigh Compton, Medical School, Second Year
Ildiko Csiki, Medical School, First Year
Dwayne Dove, Medical School, Second Year
David Duong, Molecular Physiology and Biophysics
Daniel Ebert, Microbiology and Immunology
Michael Engel, Cell Biology
Patrick Fessel, Medical School, First Year
Amanda Frisch, Cell Biology
Rajnish Gupta, Cell Biology
Aaron Hata, Medical School, First Year
Hilary Highfield, Medical School, Second Year
Paul Kingma, Biochemistry
Pamela Kingma, Biochemistry
Jean Paul Kovalik, Microbiology and Immunology
Kevin Kozak, Biochemistry
Brian Lindman, Cell Biology
Christopher Lundquist, Medical School, Second Year
Andrew Lundquist, Medical School, First Year
Clinton Marlar, Microbiology and Immunology
Anthony Miller, Graduate School, First Year
John Moody, Biochemistry
Steven Muhle, Biochemistry
Franklin Mullins, Pharmacology
Erika Nurmi, Neuroscience
Joyce Ou, Neuroscience
Asit Parikh, Biochemistry
John Plastaras, Biochemistry
David Pride, Microbiology and Immunology
Brent Rexer, Biochemistry
Robin Ryther, Medical School, Second Year
John Schoenhard, Pharmacology
Vikas Shah, Medical School, Second Year
Kathrin Sidell, Neuroscience
Shivraj Sohur, Microbiology and Immunology
Victor Soukoulis, Medical School, First Year
John Stafford, Molecular Physiology and Biophysics
Zoe Stewart, Biochemistry
David Strayhorn, Cell Biology
Corrie Tolerico, Microbiology and Immunology
William Tu, Medical School, Second Year
Andrea Utz, Pharmacology
David Weisberg, Medical School, First Year
Christopher Williams, Cell Biology
Doug Williamson, Microbiology and Immunology
Matthew Wilson, Pharmacology
Michael Wilson, Graduate School, First Year
Steve Wu, Medical School, Second Year
Tina Yu, Medical School, Second Year

Fellows

Amira Abbas, M.B.B.S., Cardiology
Deanna Lee Aftab-Guy, M.D., Pediatric Endocrinology
Alon Samuel Aharon, M.D., Cardiac and Thoracic Surgery
Tamer S. Ahmed, M.D., Nephrology
James Curtis Anderson, M.D., Neuroradiology
Zaki Anwar, M.D., Pain Control
Amir Manzoor Arain, M.D., Clinical Neurophysiology
Mark A. Aronica, M.D., Allergy, Pulmonary, and Critical Care
Divyang Chhaganbhai Ayar, M.D., Vascular/Interventional Radiology
Edward Kirk Barnes, M.D., Hematology/Oncology
Luciana Cristina Berceanu, M.D., Pain Control
Bhadresh Lallubhai Bhakta, M.D., Pain Control
John Jacob Block, M.D., Radiology
Jeffrey Barton Boord, M.D., Endocrinology and Diabetes
Timothy Eric Bowen, M.D., Cardiology
Thomas Boyce, M.D., Pediatric Infectious Diseases
John Andrew Bradshaw, M.D., Pediatric Infectious Diseases
Paul R. Branca, M.D., Allergy, Pulmonary, and Critical Care
Whitney DiSandro Brooks, M.D., Gastroenterology
Varshasb Broumand, M.D., Nephrology
Lisa Marie Brumble, M.D., Infectious Diseases
Bobbi Joann Byrne, M.D., Neonatology
Jeffrey T. Camp, M.D., Ophthalmology and Visual Sciences
Christopher Jason Cherry, M.D., Cardiology
Wichai Chirratanalab, M.D., Hematology/Oncology
Sallaya Dhanvarachorn Chirratanalab, M.D., Rheumatology
JaNae Michelle Clapp, M.D., Hematology/Oncology
Michael D. Coleman, M.D., Nephrology
Barrett Dow Conner, M.D., Allergy, Pulmonary, and Critical Care
Laine Jerry Murphey, M.D., Ph.D., Clinical Pharmacology
Ferhana Najam, M.B., B.S., Rheumatology
Syed Mohammad Nasir, M.B.,B.S., Pain Control
Kairasp Cawas Noshiwani, M.B., Ch.B., Gastroenterology
Joseph Dean Nuckols, M.D., Hematopathology
Michael Osasere Osayamen, Pharm.D., M.D., Cardiology
Marta Papp, M.D., Neonatology
Daniel Ako Patterson, M.D.,Ph.D., Hematology/Oncology
Paisit Paeuksakon, M.D., Pathology
DeLinda Lee Pearson, M.D., Neonatology
Timothy Ross Peters, M.D., Pediatric Infectious Diseases
Katherine Anne Poehling, M.D., Pediatrics
Mary E. Porisch, M.D., Pediatric Cardiology
Lisa Erelis Radix, M.D., Nephrology
Chakravarthi R. Ramaswamy, M.D., M.R.C.P., Nephrology
Heather Marguerite Rietz, M.D., Hematopathology
Reuben Rolnick, M.D., Pain Control
David Arthur Rosenbaum, M.D., Cardiology
Ruxana Taherally Sadikot, M.B.B.S., M.D., Allergy,Pulmonary, and Critical Care
Pairunyar Sawathiparnich, M.D., Pediatric Endocrinology
Kenneth A. Schroeter, D.O., Pediatric Cardiology
Robert David Schumaker, M.D., Hematology/Oncology
Clark Allen Scovel, M.D., Critical Care and Cardiothoracic
Kevin Cronin Sharkey, M.D., Cardiology
Bashir S. Shihabuddin, M.D., Neurology
Patrick Joseph Simpson, M.D., Cardiology
Mark Warren Slepian, M.D., Vascular/Interventional Radiology
Nicholas B. Sliz, Jr., M.D., Pediatric Cardiology
Renick Mathew Smith, M.D., Gastroenterology
John Malotte Starmer, M.D., Biomedical Informatics
Rahaman Olatunji Suara, M.B.B.S., Pediatric Infectious Diseases
Thomas Robert Talbot, III, M.D., Infectious Diseases
Mary Barraza Taylor, M.D., Pediatric Critical Care
Marshall Carney Taylor, M.D., Nephrology
Joel David Temple, M.D., Pediatric Cardiology
Alan Quinn Thomas, M.D., Allergy,Pulmonary, and Critical Care
William David Thompson, M.D., Cardiology
Daniel Joseph Tierney, M. D., Ph. D., Nephrology
Timothy Roger Toonen, M.D., Hematology/Oncology
James Aubrey Underwood, Jr., M.D., Gastroenterology
Daniel Scott VanderEnde, M.D., Clinical Pharmacology
Edwardo D. Verzola, M.D., Gastroenterology
Madhuri Vusirikala, M.D., Hematology/Oncology
Sameh Abou Ward, M.D., Pain Control
Sally Ammon Watson, M.D., Pediatric Critical Care
Dorothy Jean Wawrose, M.D., Infectious Diseases
Mark H. Weidner, M.D., Nephrology
Jorn-Hendrik Karl-Wilhelm Weitkamp, M.D., Pediatric Infectious Diseases
Marion T. Wells, M.D., Cardiology
Terry Trent Wilsdorf, M.D., Cardiology
Jackie Renee York, M.D., Neonatology
Class of 1999
Residency Assignments

Rudolph Aldo Agosti
Massachusetts General Hospital, Boston (Psychiatry)
Huntington, N.Y.

Robert Chance Algar
Cornell Medical Center/New York Hospital, New York (Neurology)
Mount Pleasant, S.C.

Stephen Carter Altmin
Exempla Saint Joseph Hospital, Denver, Colo. (Medicine-PGY 1)
Denver Health Medical Center, Colo. (Emergency Medicine)
Brookfield, Wis.

Richard Dwayne Archuleta
Mount Auburn Hospital, Cambridge, Mass. (Medicine-PGY 1)
Massachusetts General Hospital, Boston (Anesthesiology)
Menlo Park, Calif.

George Edward Arquitt III
Vanderbilt University Affiliated Hospitals (Surgery, Oral/Maxillofacial)
Stillwater, Okla.

Alix Ashare
University of Iowa Hospitals and Clinics, Iowa City (Medicine)
Framingham, Mass.

Evelyn Louise Baker
Carilion Health System, Roanoke, Va. (Transitional-PGY 1)
University of Miami/Bascom Palmer Eye Institute, Fla. (Ophthalmology)
Sugar Grove, Va.

Julie Anne Bastarache
Vanderbilt University Affiliated Hospitals (Medicine)
Turners Falls, Mass.

Sheela Nancy Bavikatty
Yale-New Haven Hospital, Conn. (Pediatrics)
Akron, Ohio

Lawrence Miller Berman
Pennsylvania State University College of Medicine, Hershey, Pa. (Medicine-PGY 1)
Emory University School of Medicine, Atlanta, Ga. (Anesthesiology)
Nashville, Tenn.

Helen Rodgers Boehm
University of Florida/Shands Hospital, Gainesville (Pediatrics)
Chattanooga, Tenn.

Megan Elizabeth Bowles
Johns Hopkins Hospital, Baltimore, Md. (Medicine)
Del Mar, Calif.

Anne Elizabeth Wilkerson Boyce
Vanderbilt University Affiliated Hospitals (Pathology)
Montgomery, Ala.

Craig Edward Brener
The Mount Sinai Hospital, New York, N.Y. (Medicine, Anesthesiology)
Hurley, N.Y.

Tom Evans Brittingham
University of Tennessee/Baptist Hospital, Nashville (Medicine)
Nashville, Tenn.

Richard Anthony Bucco, Jr.
Mary Imogene Bassett Hospital, Cooperstown, N.Y. (Medicine)
Cambridge Springs, Pa.

Andrea Joan Roberts Carlsten
Saint Johns Mercy Medical Center, Saint Louis, Mo. (Transitional-PGY 1)
Medical University of South Carolina, Charleston (Ophthalmology)
Shelter Island, N.Y.

Benjamin Nathaniel Carr III
Johns Hopkins Hospital, Baltimore, Md. (Orthopaedic Surgery)
Providence, R.I.

Elizabeth Pfaffenroth Cartwright
Thomas Jefferson University, Philadelphia, Pa. (Medicine)
Chester, N.J.

Jason Troy Cheney
University of Louisville School of Medicine, Ky. (Pediatrics)
Cumberland, Md.

Andrea Lynne Cherrington
University of Alabama Hospital, Birmingham (Medicine-Primary)
Nashville, Tenn.
Jaime Cintado
Emory University School of Medicine, Atlanta, Ga. (Emergency Medicine)

Travis Matthew Clark
Vanderbilt University Affiliated Hospitals (Surgery, Urology)

Brendan Joseph Collins
Johns Hopkins Hospital, Baltimore, Md. (Surgery)

Dominic Connolly
University of Arizona Affiliated Hospitals, Tucson (Emergency Medicine)

Mark Alan Cordes
University of Maryland Medical Center, Baltimore (Medicine-PGY 1)
Massachusetts General Hospital, Boston (Anesthesiology)

Anthony Louis D’Ambrosio
Columbia University, New York, N.Y. (Neurosurgery)

Jeffrey Michael Davis
Mercy Hospital, San Diego, Calif. (Transitional-PGY 1)
University of California, San Diego Medical Center (Emergency Medicine)

Aaron Shawn Huyer DeVries
University of Minnesota Medical School, Minneapolis (Medicine/Pediatrics)

Peter Reist Eby
University of Tennessee/Baptist Hospital, Nashville (Medicine-PGY 1)
University of Washington Affiliated Hospitals, Seattle (Radiology, Diagnostic)

Robert Charles Eison
University of Colorado School of Medicine, Denver (Medicine)

Douglas Hinten Emch
University of Colorado School of Medicine, Denver (Psychiatry)

Gregory Jacob Esper
Barnes-Jewish Hospital, Saint Louis, Mo. (Medicine-PGY 1)
Washington University, Saint Louis, Mo. (Neurology)

Michele Lynn Etterbeek
University of California, San Diego Medical Center (Pediatrics)

Jeremy Harmon Freeman
Riverside Regional Medical Center, Newport News, Va. (Family Practice)

James Theodore Gaensbauer
University of Washington Affiliated Hospitals, Seattle (Pediatrics)

Judd Lawrence Glasser
Mercy Hospital, San Diego, Calif. (Transitional-PGY 1)
University of California, San Diego Medical Center (Emergency Medicine)

Ronald Edward Glenn, Jr.
Vanderbilt University Affiliated Hospitals (Orthopaedic Surgery)

Rebecca Gould
Thomas Jefferson University, Philadelphia, Pa. (Obstetrics/Gynecology)

Melissa Meghan Greenfield
Johns Hopkins Hospital, Baltimore, Md. (Pediatrics)

Eric Lee Grogan
Vanderbilt University Affiliated Hospitals (Surgery)

Ralph James Groves
Memorial Hospital of Rhode Island, Pawtucket (Family Practice)

Arun Gupta
Stanford University, Calif. (Pediatrics)

Jennifer Lynne Halpern
Vanderbilt University Affiliated Hospitals (Medicine/Pediatrics)
Mark Fischer Harper
Palmetto Richland Memorial Hospital, Columbia, S.C. (Orthopaedic Surgery)

Daniel Owen Herzig
Rhode Island Hospital/Brown University School of Medicine, Providence (Surgery)

Kenneth Matthew Heym
New York Presbyterian Hospital/Columbia-Presbyterian, N.Y. (Pediatrics)

Todd Christopher Huber
Saint Louis University School of Medicine, Mo. (Otolaryngology)

Suzanne Marie Humphreys
Vanderbilt University Affiliated Hospitals (Pediatrics)

Sanford Jong Kim
Vanderbilt University Affiliated Hospitals (Medicine)

Lance Jeffrey Klingler
Southern Illinois University School of Medicine and Affiliated Hospitals, Springfield (Orthopaedic Surgery)

James Charles Lavelle IV
University of Michigan Hospitals, Ann Arbor (Medicine)

Sarah Christine Lilly
University of Vermont/Fletcher Allen Health Care, Burlington (Medicine)

Sauyu Lin
Duke University Medical Center, Durham, N.C. (Medicine)

Roger Kenji Long
University of California, San Diego Medical Center (Medicine/Pediatrics)

Dennis Mark Lyu
Johns Hopkins Hospital, Baltimore, Md. (Medicine)

Daus Mahnke
Yale-New Haven Hospital, Conn. (Medicine)

James Moss Mann II
Vanderbilt Medical Scholars Program

Juli Anne McCay
Vanderbilt University Affiliated Hospitals (Pathology)

Karen Wasilewski McCreight
Vanderbilt University Affiliated Hospitals (Pediatrics)

Melanie Payne McGraw
Stanley J. Sarnoff Fellowship in Cardiovascular Research, California, San Diego

Derek Edd Moore
Vanderbilt University Affiliated Hospitals (Surgery)

Michael James Mugavero
University of Alabama Hospital, Birmingham (Medicine)

James Anthony Sheerin Muldowney III
Hospital of the University of Pennsylvania, Philadelphia (Medicine)

Dmitry Paul Nemirovsky
Massachusetts General Hospital, Boston (Medicine)

Carolyn Taylor Oates
University of North Carolina Hospital, Chapel Hill (Medicine)

Angela Jean Peck
University of Washington Affiliated Hospitals, Seattle (Pediatrics)

Erik Elliott Penner
Oregon Health Sciences University, Portland (Emergency Medicine)

Christopher John Petit
Childrens Memorial Hospital, Chicago, Ill. (Pediatrics)

Sara Jane Pieper
University of Utah Affiliated Hospitals, Salt Lake City (Obstetrics/Gynecology)
Jason Wayne Pollock
Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology)
Winchester, Tenn.

Eric Colson Potter
University of Tennessee College of Medicine, Memphis (Medicine/Pediatrics)
Smiths Grove, Ky.

Michael Alan Proffitt
Wright-Patterson Air Force Base, Dayton, Ohio (Obstetrics/Gynecology)
Van Wert, Ohio

Erika Lynn Rager
University of North Carolina Hospital, Chapel Hill (Surgery)
Mishawaka, Ind.

Kevin Michael Reavis
Oregon Health Sciences University, Portland (Surgery)
Virginia Beach, Va.

Jason Booth Robbins
Biomedical and Health Care Research, Nashville, Tenn.
Tucson, Ariz.

Steven Edward Rodgers
Jackson Memorial Hospital, Miami, Fla. (Surgery)
Little Rock, Ark.

Keita Sakon
Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology)
Kawasaki-shi, Japan

John Stuart Salmon
University of Virginia, Charlottesville (Medicine-Primary)
Alexandria, Va.

Scott Andrew Scharer
University of North Carolina Hospital, Chapel Hill (Surgery, Otolaryngology)
Rumson, N.J.

Joseph Matthew Schneider
San Diego Naval Hospital, Calif. (Medicine)
Nicholasville, Ky.

Nathan Alexander Sewell
Medical College of Virginia, Richmond (Plastic Surgery)
Nashville, Tenn.

Rebecca Margaret Shepherd
Barnes-Jewish Hospital, Saint Louis, Mo. (Medicine)
San Antonio, Texas

Jeffrey Wayne Shooks
Vanderbilt University Affiliated Hospitals (Surgery)
DeWitt, Mich.

Faisal Ahmed Siddiqui
University of Rochester/Strong Memorial, N.Y. (Orthopaedic Surgery)
Cincinnati, Ohio

Chasidy Dionne Singleton
Vanderbilt University Affiliated Hospitals (Medicine, Ophthalmology)
Houston, Texas

Christopher Sheldon Sipe
McGaw Medical Center, Northwestern University, Chicago, Ill. (Obstetrics/Gynecology)
Lake Forest, Ill.

Michele Donna Spring
University of California, San Francisco Medical Center (Pediatrics)
Nashville, Tenn.

Michael Kane Taylor
Chestnut Hill Hospital, Philadelphia, Pa. (Family Practice)

Michael Ryan Thomas
Christ Hospital and Medical Center, Oak Lawn, Ill. (Emergency Medicine)
Ozark, Ala.

Jon Charles Tilburt
University of Michigan Hospitals, Ann Arbor (Medicine)
Nashville, Tenn.

April Athena Truett
Portsmouth Naval Hospital, Va. (Medicine)
Heflin, Ala.

Travis Thomas Walters
Vanderbilt University Affiliated Hospitals (Pediatrics)
Birmingham, Ala.

David Hong-En Wang
Johns Hopkins Hospital, Baltimore, Md. (Medicine)
Wilmore, Ky.

John David Wood
University of Washington Affiliated Hospitals, Seattle (Otolaryngology)
Dothan, Ala.

Ronald Bruce Workman, Jr.
University of Alabama Hospital, Birmingham (Surgery)
Decatur, Ala.
School of Nursing

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School of Nursing

COLLEEN CONWAY-WELCH, Ph.D., C.N.M., Dean
LINDA D. NORMAN, M.S.N., R.N., Associate Dean
PATRICIA L. PEERMAN, M.S., R.N.C., Assistant Dean for Enrollment Management
MINDY SCHUSTER, M.Div., Assistant Dean for Administration
MARILYN A. DUBREE, M.S.N., R.N., Assistant Dean for Clinical Practice
MARJORIE COLLINS, M.S., R.N., Assistant Dean for Veterans Administration Clinical Affairs
CATHY AKINS REAS, M.B.A., Director of Finance
GERALD MURLEY, M.Ed., Director, Instructional Technology
SARAH RAMSEY, B.A., M.Ed., Director of Student Affairs
SALLIE WAMSLEY, Registrar
GERDA CRAWFORD, Director of Development

Center for Nursing Research

CAROLE ANN BACH, Ph.D., R.N., Interim Director; Director of Nursing Research at the Veterans Administration Medical Center
NANCY WELLS, D.N.Sc., R.N., Assistant Director; Director of Nursing Research at the Vanderbilt University Medical Center

Faculty Council

(New members to be appointed by September 1999)

JANE B. DADDARIO, Chair
JANE S. PIERCE, Chair-Elect
LESLIE COLEMAN
THOMAS H. COOK
CHARLOTTE M. COVINGTON
PAUL DEBALDO
LARRY E. LANCASTER
ANNE MOORE
MARY A. NIES
MICHELE SALISBURY
VAUGHN G. SINCLAIR
Standing Committees (New members to be appointed in September 1999)

Charges of committees are summarized. For more detailed descriptions of committee charges, see School of Nursing Bylaws, Article V.

Curriculum

The Curriculum Committee is responsible for reviewing and evaluating the curriculum.


Faculty Recruitment and Appointment

The Faculty Recruitment and Appointment Committee is responsible for recruiting and appointing new faculty members.

Larry E. Lancaster, Chair. Lynda L. LaMontagne, Chair-Elect. Margaret M. McGill, Leon McAulay, Caroline Post-Cone, Geri Reeves, Cathy R. Taylor. Ex officio: Colleen Conway-Welch, Gail Ingersoll, Linda Norman, Roxane Spitzer

Informatics

The Informatics Committee addresses informatics concerns that jointly affect faculty members, students, and staff members and maintains an ongoing process of developing and adapting information technology strategies.


Nominating

The Nominating Committee is responsible for preparing a slate of consenting candidates for chair-elect, secretary, parliamentarian, senator, vacant positions on the Faculty Council, and elected committees.

Anne Moore, Chair. Leslie Coleman, Sheila Decker, Carol Etherington, Vaughn G. Sinclair.

Non-Tenure Track Promotion Committee

This committee is responsible for receiving and reviewing dossiers of persons to be promoted to assistant, associate, and full professor of the practice and makes recommendations to the dean.

Anne Moore, Chair. Carolyn Bess, Barbara Petersen, Joan E. King, Roxane Spitzer
Nursing Student Conduct Council

The Conduct Council addresses issues or concerns of serious misconduct of a non-academic nature on the part of VUSN students and imposes appropriate sanctions.


School Life

The School Life Committee addresses concerns and issues that affect the quality of school life of faculty, students, and staff; promotes formal and informal programs to enhance the quality of school life; and assists in orientation of international members.


Student Admissions and Academic Affairs

The Student Admissions and Academic Affairs Committee is responsible for reviewing and acting upon applications for admission to the School of Nursing; selecting traineeship, honor scholarship, and other appropriate scholarship recipients; reviewing student progress and considering and acting on student petitions for waiver or policy; and recommending to the Faculty Assembly conferral of degrees designating appropriate honors.


Tenure

The Tenure Committee is responsible for receiving and reviewing dossiers of persons to be promoted to Associate Professor or to be appointed to a rank holding tenure and makes recommendations to the Dean.

Nursing Education at Vanderbilt

VANDERBILT University School of Nursing has a national reputation for excellence in nursing education and attracts students from across the nation and from several foreign countries.

The School of Nursing was founded in 1909 as the Training School for Nurses of Vanderbilt University Hospital, with a three-year program leading to eligibility for nurse licensure. Under University administration since 1930, the Nursing School became a part of Vanderbilt University Medical Center in 1985. This relationship allows greater opportunity for nursing faculty and students to interact with nursing staff, medical faculty, and medical students in the areas of teaching, research, and practice.

The School of Nursing and Vanderbilt University Medical Center Nursing Services have developed a collaborative, interactive model of nursing practice, education, and research, focusing on quality patient care delivery. This collaborative model accommodates a rapidly and continually changing practice environment. Elements of the model are designed to foster innovation and interdisciplinary activity in an environment that promotes health and job satisfaction.

Accreditation. The school is approved by the Tennessee Board of Nursing. It was a charter member of the Association of Collegiate Schools of Nursing, which later was incorporated into the National League for Nursing (NLN). The M.S.N. program is accredited by the National League for Nursing Accreditation Commission (NLNAC), 61 Broadway, New York, New York 10006; (212) 363-5555, Ext. 153. The midwifery specialty is also accredited by the American College of Nurse-Midwives.

Philosophy of the School

The School of Nursing is committed to freedom of inquiry into the natural, social, and human orders of existence, and to stating the conclusions of that inquiry. The School of Nursing fosters excellence in both scholarship and service; a liberal education must concern the whole person. The curriculum requires both liberal arts and professional courses.

The central concepts of our profession are person, environment, health, and nursing. These four concepts interact and serve as the basis for the practice of nursing.

Each person is unique, with intrinsic worth and dignity. Human beings are whole persons, with interacting and interdependent physical structures, minds, and spirits.

The environment consists of all conditions, circumstances, and influences that exist outside one’s social system’s boundary. An intimate rela-
tionship exists between the constantly changing environment and the person. The environment in which we live determines, to a degree, lifestyle and state of health. Development of the individual occurs throughout life within a pluralistic and culturally diverse society.

Health is a dynamic state of being in which the developmental and behavioral potential of an individual is realized to the fullest extent possible. Individuals have the right to pursue that level of health perceived by them to be optimal, taking into account their social and cultural definition of health. The level of health that individuals can attain is directly influenced by the level of health of the families and communities of which they are a part.

Nursing is a professional discipline that seeks to understand phenomena and predict circumstances that affect the health of individuals, families, groups, and communities. The discipline of nursing encompasses science, ethics, politics, and the heritage of nursing. The central focus of the discipline is the diagnosis and treatment of individuals, families, and groups as they respond to actual or potential health problems. The practice of nursing is an art and a science, used to help individuals improve their health potential.

The profession of nursing builds on a liberal education, and a university provides the best possible environment for this kind of education. A liberal education includes fine arts and humanities as well as social, biological, and physical sciences. The synthesis of knowledge from these disciplines, as well as from nursing, will enhance the ability of nurses to understand self, relationships with others, the nature of communities, other cultures, the physical world, current issues, and human values.

The study of diverse disciplines contributes to the ability to think analytically, reason logically, and communicate effectively. Students are expected to continue growing in intellectual and communication skills, using their liberal education to deepen their understanding of nursing and health. University-wide interdisciplinary activities are actively sought for the intellectual exchange and stimulation they provide.

The purpose of graduate education in nursing is to prepare students for advanced practice roles including nurse midwife, nurse practitioner, and nurse manager. At the master’s level, graduate study provides the opportunity for in-depth theoretical knowledge, the basis for advanced clinical practice. Students acquire research skills and a deeper knowledge of their nursing specialty.

Graduate education provides students the knowledge and skills for planning and initiating change in a health care system. For potential members of interdisciplinary health care management teams, the focus is on advanced patient care skills that will provide leadership and will influence nursing organizations within a variety of health care settings. It is acknowledged that preparation for the nurse educator role requires education beyond the master’s degree.

The first-professional degree in nursing at Vanderbilt is specialty-re-
lated and offered on the graduate level. The increase in knowledge and scope of nursing responsibilities, as well as changes in roles, functions, and practice settings, require a post-baccalaureate nursing education that is built on a rich undergraduate liberal education base and a baccalaureate in nursing or its equivalent.

The nursing program leading to the M.S.N. at Vanderbilt constitutes an arena for excellence in nursing practice, as well as a forum for discussion and analysis of issues that affect health care, consumers, the nursing profession, and society. The program is based on a variety of cognitive styles, life experiences, and professional backgrounds, and its flexibility allows all students to achieve the same goals through different options.

**Code for Nurses**

The school adheres to the American Nurses Association’s Code for Nurses. The Code for Nurses is based on belief about the nature of individuals, nursing, health, and society. Recipients and providers of nursing services are viewed as individuals and groups who possess basic rights and responsibilities and whose values and circumstances command respect at all times. Nursing encompasses the promotion and restoration of health, the prevention of illness, and the alleviation of suffering. The statements of the code and their interpretation provide guidance for conduct and relationships in carrying out nursing responsibilities consistent with the ethical obligations of the profession and quality in nursing care. The nurse provides services with respect for human dignity and the uniqueness of the client, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

**Organizing Framework**

Course sequencing in the M.S.N. program with multiple entry options is designed to move students from (a) basic to advanced knowledge and skill levels, (b) simple to more complex practice situations, and (c) generalist to specialist role preparation. Course objectives include content in the three learning domains: cognitive, affective, and psychomotor, appropriately progressed in each taxonomy.

The curriculum design has three components: prerequisite liberal education requirements, generalist nursing courses, and specialist nursing courses. The prerequisite liberal education requirements assist the student in acquiring basic knowledge and understanding of human beings, culture, environment, and health through the study of the arts, humanities, and social, biological, and physical sciences. This basic knowledge is applied to the study of nursing in the nursing components of the curriculum.

The Bridge component of the curriculum consists of clinical and non-clinical courses that contain nursing practice and discipline content at the
generalist level. Clinical experiences focus on situations that reflect an understanding of the nursing process and the nursing paradigm in health promotion and maintenance, illness care, and rehabilitation. The theoretical basis for practice is presented in the classroom and provides the scientific knowledge base needed to diagnose and treat human responses to actual or potential health problems. Non-clinical courses focus on the discipline of nursing in the areas of ethics, economics, politics, research, legal issues, health care delivery systems, and the heritage of nursing.

The specialist component of the curriculum is divided into three segments: research/theory, specialty courses, and electives. Research/theory courses focus on research methods, scientific inquiry, and examination of conceptual models and theories in the development of nursing science. Specialty courses focus on advanced knowledge and skills in a given specialty area to equip graduates to function in complex situations and advanced practice roles, including those of nurse midwife, nurse practitioner, nurse midwife, and nurse manager. Electives provide the opportunity to select course work that complements the students’ career goals.

Program Goals

The goals of the M.S.N. program are to prepare

1. Students for advanced practice roles including nurse midwives, nurse practitioners, and nurse managers who have expertise and advanced knowledge in a specialty area and who can function in complex situations either independently or collaboratively with health care team members;
2. Seekers of new knowledge by means of critical thinking, creative reasoning, and scientific investigation in relation to nursing practice and nursing science;
3. Disseminators of nursing knowledge and research to consumers and professionals;
4. Leaders capable of determining effective strategies that stimulate change within the profession and that lead to a more effective management of the health care delivery system;
5. Decision-makers who utilize advanced knowledge and consider ethical principles in serving the needs of individuals and society; and
6. Students who possess the foundation for doctoral education.

All students are expected to meet the above program goals whether they enter the M.S.N. program with a B.S.N. or through the three-semester Bridge component. Students who enter through the Bridge component, however, must also meet transitional objectives upon completion of the three semesters of Bridge nursing courses.
Transitional objectives

On completion of the Bridge component, students will be able to:

1. Synthesize knowledge from nursing, the humanities, and the bio-
   physical and social sciences into the practice of professional nursing.
2. Demonstrate skills in critical thinking, decision making, information
   management, and use of the nursing process with individuals, families,
   and groups experiencing complex health problems.
3. Evaluate usefulness of and apply research findings to professional
   nursing practice.
4. Teach and counsel individuals, families, communities, and other
   groups about health, illness, and health-seeking behaviors.
5. Provide health care to culturally diverse populations in a variety of
   environments, both independently and in collaboration with other health
   care team members.
6. Demonstrate leadership qualities in addressing professional nursing
   and health issues.
7. Demonstrate accountability for decisions about nursing practice.
8. Demonstrate awareness of the historical and current aspects of eco-
   nomic, political, legal, and ethical issues related to health care in society.
9. Demonstrate awareness of nursing roles within the health care sys-
    tem.
The Academic Program

The Bridge Component

Webster’s defines a bridge as a structure built over an obstacle or a river, etc., to provide a way across. At Vanderbilt University School of Nursing, our Bridge is a three semester sequence of generalist nursing courses leading to a three semester sequence of specialty nursing courses for the Master’s of Science in Nursing degree (M.S.N.) for A.D.N. and diploma nurses and non-nurses with and without college degrees. Entry requires 72 hours of undergraduate course work or a college degree.

General Education Courses. 72 semester hours, all of which the applicant must have completed before entering the program. (Details of the 72 prerequisite hours are listed under Admission to the M.S.N. Program via the Bridge.

Bridge Nursing Courses. 35–42 hours.
Specialist Nursing Courses. 39 hours.

Bridge Curriculum Overview

The Bridge component consists of 42 hours of generalist nursing courses. (Registered Nurse bridge curriculum consists of 35 hours.) The Bridge courses can be completed in three semesters (one calendar year) of full-time study. Sample curriculum plans for full-time study in the Bridge component follow:

Sample Bridge Curriculum for Non–Registered Nurse Students

<table>
<thead>
<tr>
<th>FALL, SEMESTER I</th>
<th>HOURS</th>
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</thead>
<tbody>
<tr>
<td>215</td>
<td>Foundations of Professional Nursing</td>
</tr>
<tr>
<td>225</td>
<td>Population-Based Health Care</td>
</tr>
<tr>
<td>235*</td>
<td>Human Experience of Health and Illness across the Lifespan I</td>
</tr>
<tr>
<td>245</td>
<td>Foundations for Clinical Practice</td>
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<table>
<thead>
<tr>
<th>SPRING, SEMESTER II</th>
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<tbody>
<tr>
<td>216</td>
<td>Professional Nursing Seminar</td>
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<tr>
<td>226</td>
<td>Health Care Systems I</td>
</tr>
<tr>
<td>236*</td>
<td>Human Experience of Health and Illness across the Lifespan II</td>
</tr>
<tr>
<td>246</td>
<td>Integration of Theoretical and Clinical Aspects of Nursing I</td>
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261
SUMMER, SEMESTER III

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<thead>
<tr>
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<tr>
<td>227</td>
<td>Health Care Systems II</td>
<td>3</td>
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<td>237</td>
<td>Human Experience of Health and Illness across the Lifespan III</td>
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<tr>
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<td>Integration of Theoretical and Clinical Aspects of Nursing II</td>
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Sample Bridge Curriculum for Registered Nurse Students

FALL SEMESTER

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<tr>
<td>225</td>
<td>Population-Based Health Care</td>
<td>3</td>
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<tr>
<td>248†</td>
<td>Clinical Applications</td>
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</tr>
<tr>
<td>‡ Electives</td>
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SPRING SEMESTER

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<tr>
<td>226</td>
<td>Health Care Systems I</td>
<td>3</td>
</tr>
<tr>
<td>249</td>
<td>Seminar in Integration of Theoretical and Clinical Aspects of Nursing</td>
<td>2</td>
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<tr>
<td>249a†</td>
<td>Integration of Theoretical and Clinical Aspects of Nursing IIa</td>
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<tr>
<td>‡ Electives</td>
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SUMMER SEMESTER

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<tr>
<td>227</td>
<td>Health Care Systems II</td>
<td>3</td>
</tr>
<tr>
<td>237•</td>
<td>Human Experience of Health and Illness across the Lifespan III</td>
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</tr>
<tr>
<td>249b†</td>
<td>Integration of Theoretical and Clinical Aspects of Nursing IIb</td>
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<td>‡◊</td>
<td>Elective</td>
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<tr>
<td></td>
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</tbody>
</table>

* RN students who have a 3.0 GPA in their ADN or diploma nursing courses are eligible to replace N235 and N236 by validation process.
• Successful completion of N237 will validate the competencies for N235 and N236 Human Experience of Health and Illness across the Lifespan I and II.
† Students who validate courses are required to take 6 elective credit hours.
◊ Note if the student wishes to remain at full-time status, additional electives are required in summer semester.
† Precepted clinical experiences. Site and preceptor must be approved by VUSN faculty.

Classes for the R.N. Bridge students are scheduled in a concentrated format of three to four sessions per semester, consisting of four days of classes during each session, to facilitate the student’s work schedule. On-line conferencing is required between sessions to keep the student in contact with the faculty. Students must have computer access.

After successful completion of the Bridge component, students will enter directly into the specialty master’s component. The specialty component can be completed in three semesters (one calendar year) of full-time study and follows the same curriculum plan as the direct entry M.S.N. program—39 hours of credit, including research, theory, and specialty courses. Please refer to the Specialist Nursing Curriculum for sample curriculum plans in the various specialties.
Bridge: Part-Time Studies

Part-time students should meet with their faculty advisers regularly to update their program of studies. Part-time Bridge-level students have five years from first enrollment to complete all M.S.N. degree requirements. Students must check the schedule, however, for availability of courses each semester.

Specialist Nursing Curriculum Overview

Research/Theory Courses (9 semester hours)

These courses encompass content that is essential for all master’s degree students and allow students across specialties to share experiences. The Models/Theories in Nursing course (N308) provides a basis for nursing theory analysis and application to practice. Further application occurs in the specialty offerings subsequent to the foundation course. The research courses include 6 hours of research methods and scientific inquiry (Nursing 375 and 376).

Specialty Courses (25 semester hours minimum)

This portion of the master’s program consists of didactic and practicum courses in a selected specialty. The didactic courses cover advanced nursing content; the practicum courses place the student in the advanced practice role of nurse midwife, nurse practitioner, or nurse manager. For detailed information about specialty courses, see the section on Graduate Curriculum and the appropriate course descriptions.

Electives (0–9 semester hours)

Students select electives of interest, with the approval of their adviser, based on their professional goals. Options include courses related to the clinical specialty, teaching, or management. Courses available in the School of Nursing, the School of Medicine, Owen Graduate School of Management, Peabody College, and the Graduate School allow nursing students to interact with other professional and graduate students. Elective hours may be designated by selection of subspecialty for certification. Some specialty programs of study may not require electives. Students may choose to take electives above the required 39 credit hours.
Specialist Nursing Curriculum

Research/Theory Courses

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>308</td>
<td>Models/Theories in Nursing</td>
<td>3</td>
</tr>
<tr>
<td>375</td>
<td>Research Methods</td>
<td>3</td>
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<tr>
<td>376</td>
<td>Scientific Inquiry in Nursing</td>
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Elective Courses

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Specialty Courses

**Acute Care Nurse Practitioner**

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<th>Course</th>
<th>Title</th>
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<tbody>
<tr>
<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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<tr>
<td>304b</td>
<td>Advanced Health Assessment Applications</td>
<td>1</td>
</tr>
<tr>
<td>306</td>
<td>Physiologic Foundations of Nursing</td>
<td>3</td>
</tr>
<tr>
<td>307c</td>
<td>Clinical Pharmacology for Acute Care</td>
<td>3</td>
</tr>
<tr>
<td>340a</td>
<td>Theoretical Foundations of Episodic/Chronic Problems in Acute/Critical Care I</td>
<td>3</td>
</tr>
<tr>
<td>340b</td>
<td>Theoretical Foundations of Episodic/Chronic Problems in Acute/Critical Care II</td>
<td>3</td>
</tr>
<tr>
<td>340c</td>
<td>Theoretical Foundations of Episodic/Chronic Problems in Acute/Critical Care III</td>
<td>3</td>
</tr>
<tr>
<td>342</td>
<td>Practicum in Acute Care Nursing</td>
<td>4</td>
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<tr>
<td>343</td>
<td>Acute Care Nurse Practitioner Preceptorship</td>
<td>5</td>
</tr>
<tr>
<td>346a</td>
<td>Basic Dysrhythmias</td>
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<tr>
<td>346b</td>
<td>12-Lead EKG Interpretation</td>
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**Pediatric Nurse Practitioner Program**

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<tr>
<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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</tr>
<tr>
<td>304b</td>
<td>Advanced Health Assessment Applications</td>
<td>1</td>
</tr>
<tr>
<td>305</td>
<td>Theoretical Foundations of Family Nursing</td>
<td>2</td>
</tr>
<tr>
<td>306</td>
<td>Physiologic Foundations of Nursing</td>
<td>3</td>
</tr>
<tr>
<td>307</td>
<td>Pharmacotherapeutics for Primary Care</td>
<td>3</td>
</tr>
<tr>
<td>311</td>
<td>Theoretical Foundations of Child Development</td>
<td>2</td>
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<tr>
<td>312</td>
<td>Care of the Child with Special Needs: Theoretical and Research Foundations</td>
<td>3</td>
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<tr>
<td>313</td>
<td>Advanced Topics in Child Health Care</td>
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</tr>
<tr>
<td>314a</td>
<td>Practicum in Advanced Pediatric Nursing</td>
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<td>314b</td>
<td>Advanced Pediatric Primary Care Preceptorship</td>
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<tr>
<td>360</td>
<td>Theoretical Foundations of Child and Adolescent Primary Care</td>
<td>3</td>
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<td>362</td>
<td>Practicum in Primary Health Care of the Child and Adolescent</td>
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Women’s Health Nurse Practitioner

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<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
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<td>Advanced Health Assessment and Clinical Reasoning</td>
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<td>304b</td>
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<td>306</td>
<td>Physiologic Foundations of Nursing</td>
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<td>307</td>
<td>Pharmacotherapeutics for Primary Care</td>
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<td>Issues in Women’s Health Nursing</td>
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<td>Theoretical Foundations in Women’s Health</td>
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<td>328</td>
<td>Women’s Health Practicum I</td>
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<tr>
<td>330</td>
<td>Theoretical Foundations in Ambulatory Obstetrics</td>
<td>3</td>
</tr>
<tr>
<td>331</td>
<td>Women’s Health Practicum II</td>
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<td>334</td>
<td>Preceptorship in Women’s Health Nursing</td>
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<tr>
<td>361a</td>
<td>Diagnostic Reasoning and Management in Adult Primary Care</td>
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<td>361b</td>
<td>Seminar in Adult Primary Care</td>
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Nurse-Midwifery*

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<th>Course Title</th>
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<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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<tr>
<td>304b</td>
<td>Advanced Health Assessment Applications</td>
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<tr>
<td>306b</td>
<td>Physiologic Foundations of Nursing</td>
<td>3</td>
</tr>
<tr>
<td>307</td>
<td>Reproductive Physiology</td>
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<td>Pharmacotherapeutics for Primary Care</td>
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<td>327</td>
<td>Theoretical Foundations in Women’s Health</td>
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<td>332d</td>
<td>Practicum in Women’s Health for Nurse Midwifery</td>
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<tr>
<td>330d</td>
<td>Theoretical Foundations of Antepartum Care of Normal Women for Nurse-Midwifery</td>
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<td>Practicum in Antepartum Care of Normal Women for Nurse Midwifery</td>
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<td>Theoretical Foundations of Intrapartum Nurse-Midwifery Care</td>
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<td>Practicum in Postpartum and Neonatal Nurse-Midwifery Care</td>
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<td>Nurse-Midwifery Advanced Clinical Integration Experience</td>
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<td>Leadership and Management for Nurse-Midwifery</td>
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* Note: 4 semester program of study

Family Nurse Practitioner

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<th>Course Title</th>
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27

* Note: 4 semester program of study
### Gerontological Nurse Practitioner

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<td>Advanced Health Assessment Applications</td>
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### Neonatal Nurse Practitioner

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<td>307b</td>
<td>Clinical Neonatal Pharmacology</td>
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<tr>
<td>310</td>
<td>Developmental Physiology</td>
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<tr>
<td>315a</td>
<td>Essential Components of Neonatal Intensive Care Nursing Lab</td>
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<tr>
<td>315b</td>
<td>Introduction to Advanced Practice</td>
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<tr>
<td>316</td>
<td>Theoretical Foundations of Neonatal/Infancy Nursing I</td>
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<tr>
<td>317a</td>
<td>Theoretical Foundations of Neonatal/Infancy Nursing II</td>
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<td>317b</td>
<td>Theoretical Foundations of Neonatal Critical Care Nursing</td>
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<tr>
<td>318</td>
<td>Neonatal/Infancy Practicum</td>
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<td>319</td>
<td>Neonatal/Infancy Preceptorship</td>
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### Psychiatric Mental Health Nurse Practitioner*

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<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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<tr>
<td>304b</td>
<td>Advanced Health Assessment Applications</td>
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</tr>
<tr>
<td>350</td>
<td>Models and Theories of Psychiatric Mental Health Nursing</td>
<td>3</td>
</tr>
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<td>351</td>
<td>Theoretical Foundations and Practicum in Advanced Psychiatric Mental Health Nursing</td>
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</tr>
<tr>
<td>352</td>
<td>Biobehavioral Aspects of Psychiatric Disorders</td>
<td>3</td>
</tr>
<tr>
<td>354</td>
<td>Theoretical Foundations of Psychiatric Mental Health Nursing with Groups and Families</td>
<td>3</td>
</tr>
<tr>
<td>356</td>
<td>Practicum in Psychiatric Mental Health Nursing with Individuals, Groups and Families</td>
<td>3</td>
</tr>
<tr>
<td>357</td>
<td>Theoretical Foundations of Systems in Psychiatric Mental Health</td>
<td>3</td>
</tr>
<tr>
<td>358</td>
<td>Psychiatric Mental Health Nurse Practitioner Preceptorship</td>
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<tr>
<td>306</td>
<td>Physiologic Foundations of Nursing</td>
<td>3</td>
</tr>
<tr>
<td>392</td>
<td>Interdisciplinary Foundations Health Care</td>
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<td>398</td>
<td>Psychopharmacology</td>
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*Note: PMHNP students do not take N308
### Health Systems Management

<table>
<thead>
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<td>380</td>
<td>Epidemiology</td>
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<td>381</td>
<td>Health Informatics</td>
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<td>382</td>
<td>Health Systems Management</td>
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<tr>
<td>383</td>
<td>CQI and Outcomes Measures</td>
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<tr>
<td>385</td>
<td>Health Care Financial Management</td>
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<tr>
<td>386</td>
<td>Management Practicum I</td>
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<tr>
<td>387</td>
<td>Management Practicum II</td>
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<td>389</td>
<td>Population Based Case Management</td>
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<td>391</td>
<td>Strategic Management for Health Care Enterprises</td>
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### Adult Nurse Practitioner/Occupational Health

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<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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<td>304b</td>
<td>Advanced Health Assessment Applications</td>
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<tr>
<td>306</td>
<td>Physiologic Foundations of Nursing</td>
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<tr>
<td>307</td>
<td>Pharmacotherapeutics for Primary Care</td>
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<tr>
<td>361a</td>
<td>Diagnostic Reasoning and Management in Adult Primary Care</td>
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<tr>
<td>361b</td>
<td>Seminar in Adult Primary Care</td>
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<tr>
<td>363</td>
<td>Practicum in Primary Care of the Adult</td>
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<tr>
<td>364b</td>
<td>Adult Nurse Practitioner Preceptorship</td>
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<tr>
<td>368</td>
<td>Theoretical Foundations of Occupational Health I</td>
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<td>369a</td>
<td>Practicum in Occupational Health I</td>
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<td>Practicum in Occupational Health II</td>
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<td>374</td>
<td>Theoretical Foundations of Occupational Health II</td>
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<td>380</td>
<td>Epidemiology</td>
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### Adult Nurse Practitioner/Correctional Health

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<tr>
<th>Course Code</th>
<th>Course Title</th>
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<tr>
<td>304a</td>
<td>Advanced Health Assessment and Clinical Reasoning</td>
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<tr>
<td>304b</td>
<td>Advanced Health Assessment Applications</td>
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<tr>
<td>306</td>
<td>Physiologic Foundations of Nursing</td>
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<td>307</td>
<td>Pharmacotherapeutics for Primary Care</td>
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</tr>
<tr>
<td>361a</td>
<td>Diagnostic Reasoning and Management in Adult Primary Care</td>
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<tr>
<td>361b</td>
<td>Seminar in Adult Primary Care</td>
<td>1</td>
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<tr>
<td>363</td>
<td>Practicum in Primary Care of the Adult</td>
<td>3</td>
</tr>
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<td>364b</td>
<td>Adult Nurse Practitioner Preceptorship</td>
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<tr>
<td>368b</td>
<td>Theoretical Foundations of Correctional Health I</td>
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<tr>
<td>369c</td>
<td>Practicum in Correctional Health I</td>
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<td>369d</td>
<td>Practicum in Correctional Health II</td>
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<td>374b</td>
<td>Theoretical Foundations of CorrectionalHealth II</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>27</strong></td>
</tr>
</tbody>
</table>
The M.S.N. Degree

The Master of Science in Nursing, the first-professional degree in nursing at Vanderbilt, is specialty-related and offered at the graduate level. The increase in knowledge required of nurses and the scope of their responsibilities, as well as changes in roles, functions, and practice settings, require a post-baccalaureate nursing education built on a rich undergraduate liberal education or baccalaureate nursing degree or its equivalent.

Due to the present diversity in nursing programs, educational opportunities must be made available to facilitate progression to the M.S.N. as the first-professional degree. Vanderbilt School of Nursing offers several options for entry into a master’s degree program designed to accommodate a variety of cognitive styles, life experiences, and professional backgrounds.

In addition to educating students, the M.S.N. program provides other benefits. Faculty members are engaged in the scientific investigation of nursing practice and theory, innovative nursing care, and participation in national, state, and local activities related to nursing and health care delivery. Thus, they serve as role models for students, the profession, and the public. The program constitutes an arena for excellence in nursing practice and research, as well as a forum for discussion and analysis of issues that affect health care, consumers, the nursing profession, and society.

Advanced Practice

Acute Care Nurse Practitioner

The Acute Care Nurse Practitioner specialty is designed to prepare nurse practitioners to provide care for chronically ill, acutely ill, and critically ill patients. Students receive didactic content about diseases across the illness trajectory, thus enabling students to learn about the chronic nature of many illnesses in addition to the acute episodic problems and critical care aspects of these same illnesses. Enrollment in this option will be limited by availability of preceptors. Graduates are currently eligible to sit for the American Nurses Association (ANA) Acute Care Nurse Practitioner Certification exam.
Adult/Correctional Health Nurse Practitioner

The Adult/Correctional Health Nurse Practitioner specialty, a challenging new program at Vanderbilt, prepares advanced practice nurses to function effectively as nurse practitioners in a correctional facility and/or adult primary care setting. Since these nurse practitioners work in a wide variety of settings, with patients who have a range of health-related problems, the program emphasizes primary care of the adult as well as the special health needs of the incarcerated population.

Students will gain an understanding of the culture of the correctional health delivery system, assess and manage health problems common to the incarcerated population, and evaluate correctional health workplace safety. The program examines the social, economic, regulatory, and legal context of correctional health and gives students strategies for effective case management of this special patient population.

Pediatric Nurse Practitioner: Children with Special Needs

The Pediatric Nurse Practitioner specialty is designed to prepare advanced practice nurses who provide primary care to children. A unique feature of Vanderbilt’s program is the special emphasis on caring for children with special needs and on the related concerns of their families.

The program of study provides a broad theoretical and research foundation in advanced concepts of parent, child, and adolescent nursing. Clinical experiences occur across a variety of settings and focus on providing primary care to all children, with particular emphasis on those with special needs. Upon completion of the program, graduates are eligible to sit for the American Nurses Credentialing Center (ANCC) Pediatric Nurse Practitioner (PNP) examination and the National Certification Board of Pediatric Nurse Practitioners and Nurses (NCB) Pediatric Nurse Practitioner exam.

Women’s Health Nurse Practitioner

Women’s Health Nurse Practitioner specialty begins with the study of gynecologic, well-woman care and continues with the study of healthy childbearing women. Emphasis is on health maintenance of women throughout the life span. This program prepares students for entry level advanced practice as a Women’s Health Nurse Practitioner. A focus on Critical Care Obstetrical Nursing is open to a limited number of students who have practiced as registered nurses.

Upon completion of the program, the student will be eligible to sit for the National Certification Corporation Women’s Health Nurse Practitioner exam.
Nurse-Midwifery

The Nurse-Midwifery specialty prepares students to manage the obstetric and primary health care needs of essentially healthy women across the lifespan as well as the care of the normal newborn. Graduates will be eligible to take the American College of Nurse-Midwives Certification exam.

Family Nurse Practitioner

This specialty prepares graduates to deliver comprehensive primary care to individuals, from infancy through adulthood. Emphasis is on acquisition of the knowledge and skills necessary for a family-centered approach to health promotion and intervention in illness. Students gain clinical experience in child and adult primary health care settings. The preceptorship facilitates development of clinical skills that prepare the graduate for the advanced practice role of the Family Nurse Practitioner. Graduates are eligible to sit for either the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP) Family Nurse Practitioner certification exam.

Gerontological Nurse Practitioner

This specialty focuses on primary care of older adults. Emphasis is on acquisition of knowledge and skills necessary for health assessment, illness prevention, and health care management. Students learn to modify the treatment regimen to meet the physical and psychosocial needs of the aged.

Clinical experiences in institutional and community settings are required throughout the program. The final clinical experience, the preceptorship, takes place in a primary care setting. The preceptorship calls on the knowledge and skills acquired throughout the course of study. Graduates are eligible to take the American Nurses Credentialing Center (ANCC) Gerontological Nurse Practitioner exam.

Neonatal Nurse Practitioner

This specialty is designed to prepare entry-level, advanced practice nurses who provide acute care to ill and convalescent neonates. Emphasis is on the acquisition of knowledge and skill required for the Neonatal Nurse Practitioner role. Graduates of the program are eligible to take Neonatal Nurse Practitioner certification exam offered by the National Credentialing Center (NCC).

Psychiatric Mental Health Nurse Practitioner

This specialty focuses on the mental health care needs of individuals across the life-span within the context of their environment. Course con-
tent and clinical practica prepare students to use critical judgment in the performance of comprehensive (physical and mental) assessments, differential diagnoses, precription of psychopharmacologic agents, and non-pharmacologic interventions such as case management, individual, group, and family psychotherapy. Students may select clinical sites with an emphasis on child-adolescent, adult, or geriatric populations. Legal, ethical, social, cultural, financial, and policy issues that impact the delivery of mental health services and the PMHNP role are integrated throughout the curriculum.

Graduates of this program will be eligible to take the certification exams for Clinical Nurse Specialist in Adult or Child-Adolescent, Psychiatric-mental Health Nursing and for the Psychiatric-mental Health Nurse Practitioner exam being developed by ANCC. (PMHNP exam is expected to be available in 2000.)

Adult Nurse Practitioner/Occupational Health

This specialty focuses on primary care needs of adults, including a focus on the needs of workers. This care may also include direct services to individuals, groups of employees, families, and corporations. The ANP/OH role includes clinical care, case management, environmental assessment, and service as a change agent.

The specialty content for the Adult Nurse Practitioner/Occupational Health track includes advanced health assessment, epidemiology, physiology, primary care services for adults, didactic courses that focus on the theoretical foundation of adult primary care, occupational health nursing, and clinical practica in occupational health settings. Graduates of this program will be eligible to take the American Nurses Association (ANA) Adult Nurs Practitioner Certification examination. After completing the required practice hours, graduates are eligible to take the Occupational Health Nursing Specialist exam.

Health Systems Management

This specialty prepares graduates for the advanced practice role of nursing and health care management. The specialty is designed to prepare the graduate for multiple roles on an interdisciplinary health management team in nurse managed clinics, managed care firms, community based clinic and ambulatory care centers with skills in strategy planning, designing, managing, and evaluating programs and resources within a variety of health care settings. Classes are offered in a concentrated format of four-day meetings, three times each semester, to accommodate students’ work schedules.
Joint Program

M.S.N./M.B.A.

A joint program leading to the M.S.N./M.B.A. degrees is offered through the Health Systems Management Specialty at the School of Nursing and the Owen Graduate School of Management.

The M.S.N./M.B.A. joint-degree program is uniquely designed to prepare nurse managers for top level management in various health care settings. In addition to advanced practice in Health systems management, opportunities are provided for advanced practice in financial management, operations management, marketing, accounting, economics, organization studies, management, and policy. Admission is required to both the School of Nursing and the Owen Graduate School of Management. Successful completion of the GMAT is required.

Students are required to attend full time and will take approximately 75–80 hours of required coursework in five semesters including one summer of full-time study. A non-credit math review course taken at Owen may be required of students in the summer preceding fall enrollment. Nursing and management practice are required in selected courses. Special requirements for admission to the joint degree program are listed under admission criteria for Health Systems Management. Specific curriculum information is available in the Office of Admissions, 101 Godchaux Hall, or by calling (615) 322-3800.

Degree Requirements

For students entering with a B.S.N. degree, the M.S.N. degree is based on a minimum of 39 credit hours. All degree requirements must be completed within three years of first enrollment. The grade of B in each clinical course and an overall B average is required. No more than 9 hours of Pass-Fail credit may apply to the degree. No required core or specialty course may be taken Pass-Fail. No audit courses apply to the degree. Up to 6 hours may be transferred from other schools for graduate courses taken within the past five years. No credit is awarded toward the degree for courses designated as prerequisite for admission.

For students entering through the Bridge component, the M.S.N. degree is granted on the basis of 81 credit hours. (R.N. Bridge students complete 74 credit hours.) In the generalist nursing or Bridge component, students must earn at least a C in each course. To progress from the generalist to the specialist component, students must (a) complete 42 semester hours of the generalist nursing component with the minimum grade of C in each course and (b) earn a cumulative grade average of B. Students entering the Bridge component must complete all M.S.N. degree requirements within five years of initial enrollment.
In addition to the ordinary course evaluations, the M.S.N. candidate may be required, at the discretion of the faculty, to take a final comprehensive examination. Such examination shall be completed no later than fourteen days before the degree is to be granted. The candidate for the degree must have satisfactorily completed the M.S.N. curriculum, have passed all prescribed examinations, and be free of indebtedness to the University.

**Certification**

Students interested in becoming certified in a specialty should consult their specialty directors for details. Certification is offered through several professional nursing organizations, including the American Nurses’ Association. Graduates of each specialty are eligible to sit for the certification exams specific to their specialty. Some exams require documented clinical work hours. Certification examinations from American Nursing Credentialing Center include acute care nurse practitioner, the adult nurse practitioner, family nurse practitioner, gerontological nurse practitioner, adult psychiatric nursing clinical specialist, pediatric nurse practitioner, and advanced nursing administration examinations. The Nursing Credentialing Center offers the obstetric-gynecological nurse practitioner and neonatal nurse practitioner exams.
Ph.D. in Nursing Science

This program is designed for highly qualified individuals who hold graduate degrees in nursing and who are interested in careers in nursing science. Areas of concentration in the doctoral program include the study of individual, family, and community responses to health and illness across the life span and the outcomes of care delivery practice. These areas of study are reflective of the research interests and expertise of School of Nursing faculty members and the resources available in the Medical Center and the University.

Successful applicants to the program are those whose previous academic performance, letters of reference, results of the Graduate Record Examination (GRE), and written statement about short and long range scholarship plans meet admission standards for the School of Nursing and the University Graduate School and whose research and career goals are consistent with the school’s research concentration areas.

The Ph.D. in Nursing Science curriculum is organized into three broad areas: phenomena of concern in nursing science; scientific inquiry, including application, testing, and generation of theory; and a minor in an area of interest that supports the student’s focus of study. Students work with faculty mentors who guide and oversee their educational program from admission through completion of degree requirements. They participate in intensive research experiences connected with faculty research projects and are exposed to a variety of research designs and analysis techniques.

Requirements for the degree include successful completion of advanced course work, two qualifying papers, oral qualifying exam, and dissertation (including oral defense of proposal and findings). Students in the doctoral program have access to the clinical and research facilities of Vanderbilt University Medical Center, the Joint Center for Nursing Research, and the School of Nursing’s nurse-managed and interdisciplinary care delivery services.
Pre-Nursing Studies

FRSHMAN students interested in nursing at Vanderbilt apply for admission to either the College of Arts and Science or Peabody College and indicate that pre-nursing is their intended program of studies. In addition to their faculty advisers in the College of Arts and Science or Peabody College, pre-nursing students will be assigned advisers in the School of Nursing to assist them in planning their program of studies.

Qualified students are admitted to the Master of Science in Nursing program upon completion of 72 prerequisite semester hours of credit or after earning a baccalaureate degree at Vanderbilt. Students are encouraged to write or call the Office of Admissions, 110 Godchaux Hall, (615) 322-3800 for further details of the program.

Pre-Nursing Studies in the College of Arts and Science

Pre-nursing students in the College of Arts and Science may either (a) complete the three-year bachelor’s program offered by the College and apply for admission to the School of Nursing upon completion of the degree or (b) complete 72 hours of prerequisite courses and apply for admission to the School of Nursing for either their junior or their senior year. Under either option, students must satisfy admission requirements for the M.S.N. program. Upon admission to the School of Nursing, the student will complete six semesters (two calendar years) of full-time study to earn the M.S.N.

Students must plan their program of studies carefully with their advisers in both the College of Arts and Science and the School of Nursing.

Pre-nursing students in the College may also elect to complete 72 hours of prerequisite courses and apply for admission to the School of Nursing in either their junior or senior year. Students choosing this option will continue to the M.S.N. degree, bypassing a baccalaureate degree. With the M.S.N., however, students are qualified for all professional nursing careers and eligible to take the National Counsel on Licensure Examination (NCLEX) to become a Registered Nurse.

Pre-Nursing Studies at Peabody College

Pre-nursing students at Peabody College may either (a) complete a major in human development and earn both a B.S. and an M.S.N. through
a senior-in-absentia program or (b) complete 72 hours of prerequisite courses and apply for admission to the School of Nursing for either their junior or their senior year. Students choosing either option must satisfy admission requirements for the M.S.N. program. Upon admission to the School of Nursing, the student is required to complete six semesters (two calendar years) of full-time study to earn the M.S.N.

Students interested in the senior-in-absentia program should refer to the section on Senior-in-Absentia in this catalog as well as to the Major in Human Development in the Undergraduate Catalog. Under this option, students complete their first three years of study. They apply for admission to the School of Nursing during the spring of their junior year and, upon admission, take generalist nursing courses their senior year, formally transferring to the School of Nursing in the fall semester, after completing 105 hours as Peabody students. Upon successful completion of the fall and spring semester nursing course work, students are awarded the B.S. in human development. They then continue for an additional four semesters (summer, fall, spring, and summer) to earn the Master of Science in Nursing.

The B.S. in Human Development is conferred by Peabody College at the end of the spring semester. The M.S.N. is conferred by the School of Nursing at the end of the fifth year.

Pre-nursing students at Peabody who elect to complete 72 hours of prerequisite courses and enter the School of Nursing in either their junior or their senior year will continue to the M.S.N. degree, bypassing the baccalaureate degree. With the M.S.N., however, students are qualified for all professional nursing careers and eligible to apply to the National Council on Licensure Examination (NCLEX) to become a Registered Nurse.

Senior-in-Absentia Programs

The School of Nursing has formalized arrangements with several liberal arts colleges to allow students to combine a baccalaureate degree in liberal arts and a Master of Science in Nursing degree. Students who complete this five-year program of study will have had the experience of dividing their academic career between a liberal arts college and the health sciences center of a major university. This unique combination of study on two differently-oriented campuses provides the student with an excellent nursing education, strongly complemented by study in the humanities, natural sciences, and social sciences.

While specific details vary in each senior-in-absentia program, these programs generally require students to spend three years at their liberal arts college, completing general curriculum requirements for the baccalaureate degree and satisfying the prerequisite courses for admission to the School of Nursing. Students apply for admission to the School of
Nursing in the fall semester of their junior year. If accepted, the student enrolls at Vanderbilt in the fall semester of the senior year. After successfully completing the fall and spring semesters of generalist nursing courses at Vanderbilt, the student is awarded a baccalaureate degree from his or her undergraduate school. The student then continues for an additional four semesters (summer, fall, spring, summer) to earn a Master of Science in Nursing from Vanderbilt University.

At the time of publication, senior-in-absentia programs have been formalized with Belmont University, David Lipscomb University, Fisk University, Trevecca Nazarene College, and Vanderbilt University’s Peabody College, all in Nashville, Tennessee; as well as Mary Baldwin College in Staunton, Virginia; Maryville College in Maryville, Tennessee; Morris Brown College in Atlanta, Georgia; Randolph-Macon Woman’s College in Lynchburg, Virginia; Tennessee Wesleyan, Athens, Tennessee; Wheaton College in Wheaton, Illinois; Birmingham-Southern College, Birmingham, Alabama; Bryan College, Dayton, Tennessee; and Covenant College, Lookout Mountain, Georgia. Please call or write the Director, Office of Admissions, 101 Godchaux Hall, Vanderbilt University, Nashville, Tennessee 37240, (615) 322-3800, for further details.
THE purpose of the post-master’s studies program is to provide, for nurses who already hold a master’s degree in nursing, an educational route to specialization in an area other than that obtained in their master’s program. The program is designed to strengthen or broaden the clinical, teaching, or administrative capabilities of master’s-prepared nurses who are planning a role expansion or role change.

Admission Requirements

1. A master’s degree in nursing from an NLN-accredited program.
2. Completed application and official transcript documenting conferral of master’s degree in nursing.
4. Requirements regarding letters of reference, nursing experience, interview, and prerequisite courses vary according to the area of specialization. Call the Director, Office of Admissions, (615) 322-3800, for further details.
5. Approval by the specialty director.

Academic Standards

Post-master’s students must meet the same academic standards for progression and program completion as M.S.N. students. See Academic Standards section under M.S.N. Students.

Advanced Practice Roles

Post-master’s study programs are available in each of the following specialties: acute care nurse practitioner; family nurse practitioner; neonatal nurse practitioner; gerontological nurse practitioner; women’s health nurse practitioner; nurse-midwifery; pediatric nurse practitioner; psychiatric mental health nurse practitioner; health systems management; and adult nurse practitioner/occupational health or correctional health. Please refer to the specific advanced practice specialty curriculum for sample curriculum plans. For further information, call the Office of Admissions at (615) 322-3800.
VANDERBILT students are bound by the Honor System inaugurated in 1875 when the University opened its doors. Fundamental responsibility for the preservation of the system inevitably falls on the individual student. It is assumed that students will demand of themselves and their fellow students complete respect for the Honor System. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given by the student in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are specifically prohibited under the Honor System. The system applies not only to examinations but also to written work and computer programs submitted to instructors. The student, by registration, acknowledges the authority of the Honor Council of the School of Nursing.

The University’s Graduate Student Conduct Council has original jurisdiction in all cases of non-academic misconduct involving graduate and professional students.

Students are expected to become familiar with the Student Handbook, available at the time of registration, which contains the constitution and bylaws of the Honor Council and sections on the Graduate Student Conduct Council, Appellate Review Board, and related regulations.

For information concerning academic rules and regulations for the Ph.D. program, consult the Graduate School Catalog.

Nursing Honor Council

The Honor Council is an organization that seeks to preserve the integrity of the Honor Code. The membership consists of student representatives from the specialty and Bridge levels. Representatives serve for one year from September through August. Officers of the council must be full-time students in good standing. Alternates are elected to serve in the absence of representatives.

Orientation

An orientation program is held each fall prior to the registration period to acquaint new and continuing students with the school environment. The Associate Dean may call additional class meetings throughout the year as needed.

A spring orientation is designed for students who enter in the spring semester.
Registration

Each semester, at a time specified in the calendar, all students are required to confer with their academic advisers and register for courses for the next semester. Students should check carefully with their faculty advisers concerning progress toward completing degree requirements and make the necessary revisions in their program of studies. A student who registers late is charged a $30 late registration fee.

At the time of enrollment, the student must present evidence of the following:
1. Active Tennessee licensure if the student is a Registered Nurse.
2. Adequate hospitalization insurance coverage either through the University insurance plan or by another policy. See the section on the University’s Hospitalization Insurance Plan in the front of this catalog for further details.
3. Current CPR certification for both adult and child (health care provider course preferred).
4. Student Health clearance for the following:
   a. Negative results of either tuberculin skin test or chest X-ray taken annually.
   b. MMR is required of all students born after 1956. For students born before 1957, documentation of Rubella immunity (Rubella antibody titer) or Rubella vaccination is required.
   c. Hepatitis B vaccination (3-part series).
   d. Diphtheria/tetanus (inoculated within last ten years).
   e. Varicella titer (Students testing negative are required to be immunized).
   f. Physical exam within the last six months.
   g. Documented attendance at Bloodborne Pathogens Workshop and other required safety sessions annually. Registration will be cancelled for failure to attend required sessions.
5. Other immunizations, titers, or tests as required by clinical agencies.

The School of Nursing requires continuous registration of all degree candidates. Responsibility to maintain registration rests with the student. To retain student status, the student must register each fall, spring, and summer semester or secure an approved leave of absence. Students who are registered for zero hours in order to satisfy requirements for an incomplete grade are considered degree candidates. Students registering for zero hours or only completing an incomplete grade are charged one-half credit hour tuition.

All matriculated students must take a minimum of 6 semester hours each semester. Post-master’s students continue to be allowed to take three or more hours each semester in an approved, planned program of studies. Special students are an exception; by virtue of their non-matriculated status, they will still be able to take three hours a semester until two courses (6–7 hours) have been completed. Other exceptions may be requested by
written petition to the chair of the Student Admissions and Academic Affairs Committee.

Accidents / Injury / Illnesses

Students are responsible for the costs of tests, treatment, and follow-up care for any accidents, injury, or illnesses that occur while enrolled as students at Vanderbilt University School of Nursing. Students are not entitled to workmen’s compensation benefits.

Calendar

The official calendar of the School of Nursing is printed at the front of this catalog. A detailed calendar for each semester is distributed at registration. Students are expected to be familiar with these dates and to conform to them. The *Vanderbilt Register*, issued weekly by the Office of News and Public Affairs, contains notices of all events and announcements pertaining to the University community. It is the responsibility of the student to keep informed of any event or announcement applicable to the School of Nursing. Failure to know of an officially required event is not an excuse for non-attendance.

Faculty Advisers

Each student will be assigned a faculty adviser who will assist with planning a program of studies. The complete program should be approved within the first semester of enrollment. The Associate Dean for Academics serves as adviser to special students.

Program of Studies

During the first semester of study, all students must file an approved program of studies with the faculty adviser. When a change in the program or absence from the school for one or more semesters is anticipated, the student must file an approved change in program form with the adviser. The forms for programs of studies and subsequent changes are available from the Director of Student Affairs. Copies are to be filed with the adviser.

Part-time students must follow the planned part-time program of study. Students unable to enroll for six hours per semester must petition the Student Admissions and Academic Affairs Committee in writing for a waiver. Students enrolling for fewer than six hours per semester and those taking a leave of absence may be unable to take clinical courses in their planned sequence.

Students who wish to alter the required program of studies may petition to do so by giving justification for the request and proposing an alter-
native program of study, which must be approved by the academic adviser, specialty director, and Associate Dean.

Students who are on academic probation and who wish to alter their program of study must have the proposed program reviewed by the Student Admissions and Academic Affairs Committee.

Change of Course

Dropping a Course. The first five class days of the semester are allocated for necessary changes of course.

Courses may be dropped without entry in the final record within two weeks of the first day of classes. Courses may be dropped only after consultation with the student’s adviser and the course instructor. Dropping a course may affect the sequencing of the program of study and may change the student’s expected date of completion of course work.

Withdrawing from a Course. Students may withdraw from courses and receive the grade W (withdrawal) according to the date published in the University Calendar. If the course in question is a nursing course, the student will receive the grade W (withdrawal) if less than half of the course has elapsed. Students may not withdraw from a course after the published date in the University Calendar or after the course is half completed. If the course is taken outside the School of Nursing, grade regulations of the appropriate school will apply. A student must be in good academic standing to be eligible to withdraw from a course.

Audit Courses

Students may wish to audit courses in the School of Nursing for which they will receive no credit. Auditing courses requires registration and payment of tuition and is subject to the following conditions:

1. Consent of the instructor must be obtained.
2. The instructor sets the conditions under which a course may be audited. Failure to meet those conditions is justification for withdrawal of the audit designation.
3. Audits carry no credit.

Pass-Fail Courses

Only elective courses may be taken Pass-Fail. Grades of C or above are recorded as Pass.

The grade Pass is not counted toward grade point averages. The grade of F applies as in any other course; although an F earns zero hours, the hours attempted are counted in calculating the grade point average. A student who has a choice about taking a course for a grade or Pass-Fail may register on a Pass-Fail basis or may change to Pass-Fail basis within
one month of the first day of classes. After this time, one may change from a Pass-Fail to a letter grade basis according to the dates published in the University calendar, but not vice-versa.

No-Credit Courses

A student taking a course on a no-credit basis is required to attend class, take examinations, and do all the work of the course. The student’s grade is recorded with the notation that no credit toward graduation is received. No-credit courses do count in computation of the student’s academic load and in the computation of tuition.

Class Attendance

At the beginning of the semester the instructor will explain expectations for attendance and participation for a course and their influence on the evaluation process. It is expected that students will attend all nursing classes, laboratory sessions, and clinical experiences.

Course Load

The unit of measure of the student’s work load is the semester hour. All references to credit hours are semester hours.

The normal schedule for which basic tuition is charged is 12 to 16 hours per semester. A student who wishes to carry more than 16 hours must secure authorization from the Associate Dean before registration. Additional tuition will be charged for each hour over 16. Students who elect to attend the program part time must follow the planned part-time program of study. Part-time students must take a minimum of 6 hours.

Examinations

Examination policies are determined by the instructor. A record of all grades given during the course and all final examinations and major papers are kept on file by the instructor for one year following the conclusion of the course.

A final examination schedule for Bridge courses is issued for each term, allowing two hours for a final examination in each course. Each in-class final examination must be given at the time indicated on the schedule.

A number of alternatives to standard in-class examinations are permitted at the instructor’s discretion. These include take-home and self-scheduled examinations, oral examinations, and term papers. A course may have no final examination at all if there are adequate opportunities for evaluation during the semester. A take-home, self-scheduled, or oral examination should be approximately equivalent to an in-class examina-
tion. Final examinations must be conducted during the final examination period at the end of the seven-week module or at the end of the semester. Any student more than fifteen minutes late to an examination must present a satisfactory excuse. No student will be admitted after the first hour.

**Grade Reports**

Students are notified of mid-semester deficiencies by conference and in writing; copies of the notice are sent to the student’s faculty adviser and the registrar of the School of Nursing. Students receiving mid-semester deficiencies are encouraged to meet with the course instructor and their faculty adviser to identify resources available to assist in successfully completing the course.

A final grade recorded by the University registrar may be changed only upon written request of the instructor.

**Program Evaluation**

Students are expected to participate in program evaluation activities while enrolled in the program and after they have left Vanderbilt. These data will be used for research purposes only. Procedures to protect individual confidentiality will be followed.

**Leave of Absence**

Leaves of absence are granted for one semester or a maximum of one year. A student must be in good academic standing to be eligible for a leave of absence. Leave of absence forms are available from the office of the School of Nursing registrar. Students must attach a change in program form to the leave of absence form. Leaves must be approved by the academic adviser and the Associate Dean. Time spent on leave of absence is included in the total time taken to complete the degree. Since the program runs year round, students must take a leave of absence for any semester they are not in attendance. Students are ineligible for a leave of absence if they have a grade of I (Incomplete) or M (Missed a final examination) for the previous semester. At the end of the leave of absence, the student must notify the registrar in writing of the intent to return or not to return. A student failing to register at the conclusion of the stated leave period is withdrawn from the University and must reapply for admission unless the leave is extended by the Associate Dean. Those without authorized leave who do not register are dropped from the rolls and are not considered current students. If they wish to resume study in the School of Nursing, they must reapply for admission.
Alcohol and Controlled Substance Policy

Students are not allowed to attend class or clinical practice under the influence of alcohol or controlled substances. Students suspected of using such substances may be asked to submit to voluntary urine screening as a condition of progression. Additional information on student impairment is found in the University Student Handbook on policies concerning alcohol and controlled substances.

Practica and Preceptorships

All specialties have required practica and preceptorships; students and faculty share the responsibility for locating practica and preceptorship sites. Guidelines for selecting an appropriate site are available from the Specialty Director. Students register for a practicum or preceptorship at the beginning of the semester. Students must have an R.N. licence to register for a preceptorship. Preceptorship sites are selected based on how they fit with the specialty and the students. Sites may be located outside the Middle Tennessee area. Students are responsible for transportation and lodging associated with clinical experiences.

Transportation and Lodging

Students are responsible for their own transportation to and from all clinical facilities and field trips. Clinical sites in the specialty year are chosen for their ability to provide clinical experiences consistent with the specialty requirements and the mission of the school. Students should be prepared to travel as much as two hours each way to rural, remote, and underserved areas. Practica and preceptorships may be in out-of-state locations. Students are responsible for the cost of their travel and lodging.

Uniform Policy

Bridge students are required to have at least one uniform and one lab coat with the Vanderbilt University School of Nursing insignia sewn on the left sleeve. The School of Nursing encourages students to purchase uniforms and equipment after classes begin or purchase items from the VUSN Graduate Council. Vanderbilt uses several different institutions for clinical practice and the dress code varies for each.

A student identification badge, available through the School of Nursing, is always worn when the student is in the School of Nursing or the clinical area. Some clinical situations require a white laboratory coat, street clothes, or a hospital-provided uniform.

Accessory items needed are a watch with a second hand; bandage scissors; and a stethoscope. The only jewelry that may be worn in the clinical area is a watch, a wedding band, small earrings for pierced ears (maxi-
mum two per ear), and pins that designate professional organizations. Other visible body piercing will not be allowed in the clinical area.

The uniform for specialty-level students varies. The faculty designates appropriate professional apparel for students taking specialty nursing courses. Students in the clinical area are expected to be well groomed at all times.

Academic Standards

Good Academic Standing

Good academic standing is defined as both a semester GPA of 3.0 or higher, a cumulative GPA of 3.0 or higher, and no grade below C.

Completion of Program

Students admitted to the M.S.N. program through the Bridge component must complete all Bridge courses within three calendar years and the specialty curriculum within two calendar years. Leaves of absence are counted in this time frame.

Students admitted to a M.S.N. specialty with a B.S.N. must complete the curriculum within three calendar years. Leave of absences are counted in this time frame.

Grading System

All work is graded by letters, interpreted as follows:

- A+, A, A–: 4.0 grade points per semester hour
- B+, B, B–: 3.0 grade points per semester hour
- C+, C, C–: 2.0 grade points per semester hour
- F: 0.0 grade points per semester hour
- W: Withdrawal

Plus and minus points are not calculated into the grade point average in the School of Nursing. All F grades are counted in the computation of grade point ratios, unless the student repeats the course and earns a passing grade.

M: Missing a final examination. The designation M is given to a student absent from the final examination who has communicated with the instructor about the absence in advance. The grade F is given if the student could not have passed the course even by passing the final examination or if the instructor was not notified. The final examination must be taken at a time designated by the instructor. The grade M must be removed in the next semester or the grade will automatically be converted to F.

I: Incomplete. Students for whom an extension has been authorized receive the grade I, which stands until the work has been made up. The course coordinator or instructor who authorizes the extension confers with the student to establish a final time limit for completion of the miss-
ing work. Copies of the agreement are given to the student, the instructor, and the registrar of the School of Nursing. The grade I must be removed in the next semester or the grade will automatically be converted to F.

Essays, book reviews, papers, laboratory reports, etc., must be turned in no later than the last day a particular class meets or earlier if so specified by the instructor. The grade for work not done in compliance with this schedule is zero unless an extension has been granted. The student must present a petition for an extension to the course coordinator or instructor at least a day before the work is due, and the petition must be endorsed by the instructor.

**Repeat Courses**

Students enrolled in the M.S.N. program may repeat a course only with the permission of the Student Admissions and Academic Affairs Committee.

1. A course taken in the School of Nursing may not be repeated outside the school for credit toward the degree.
2. Nursing courses may be repeated only once.

Courses taken for a letter grade may not be repeated on a Pass-Fail basis, nor may a grade indicating withdrawal or incomplete work be counted in place of a letter grade. Only the latest grade counts in calculation of the grade point average and progress toward a degree.

Students enrolled in the specialist nursing component are required to earn a minimum grade of C in the research/theory component (308, 375, 376). Students who earn C grades in these courses, however, must have sufficient grade points to maintain a cumulative grade point average of B, or a 3.0 on a 4.0 scale.

Students who do not earn at least a B in a specialty course with a clinical component must repeat that course.

Students may repeat only one course one time. If a student makes below the required grade (B for courses with a clinical component, C for didactic courses) in another course, they will be dismissed. Courses taken for a letter grade may not be repeated on a Pass-Fail basis, nor may a grade indicating withdrawal or incomplete work be counted in place of a letter grade. Only the latest grade counts in calculation of the grade point average and progress toward a degree.

**Probation**

Students are expected to maintain a 3.0 grade point average each semester. The academic performance of students is reviewed at the end of each semester. Students are placed on academic probation unless they earn a 3.0 average each semester. A student who is not making satisfactory progress toward the degree will be dismissed if improvement is judged to be unlikely.
A student may be placed on probation only once during the entire program of study (Bridge and specialty). If the student’s record in another semester warrants probation, the student will be dismissed. A student who is not making satisfactory progress toward the degree may be dismissed from the School of Nursing or may be advised to go on leave of absence or withdraw. When a student is placed on or removed from probation, letters are sent to the student and the student’s adviser.

If a student cannot improve his or her grade point average because the needed course cannot be repeated in the following semester, the student will be continued on probation if satisfactory completion of the course will give the student a 3.0 grade point average.

**Progression**

To progress from the Bridge component to the specialist nursing component, students must (a) complete 42 hours of the generalist component with at least a C in each course, and (b) earn at least a 3.0 cumulative grade point average.

Most required nursing courses are sequential, and a student who fails to pass such a course cannot progress in the nursing curriculum. A student seeking a waiver of this policy must submit a written request to the Student Admissions and Academic Affairs Committee for an exception to the rule.

Students who earn less than a C in 308, 375, or 376 are not able to enroll in their final specialty clinical course until 308, 375, or 376 has been successfully repeated.

A student must be a registered nurse in order to register for the final clinical preceptorship.

As the School of Nursing is a professional school, the faculty may, for the purposes of evaluation, render opinion on the student’s total ability. A student’s promotion in the program is determined by the Student Admissions and Academic Affairs Committee at the end of each semester. The committee, on the recommendation of the student’s instructors, specialty coordinator, and/or academic adviser, promotes only those students who have demonstrated personal, professional, and intellectual achievement consistent with faculty expectations at the student’s particular stage of professional development. Students who are deficient in a major area or areas will be required to repeat course/clinical work or to complete additional efforts satisfactorily in order to remedy deficiencies. Students deficient in a major undertaking or who demonstrate marginal performance in a major portion of their work will be dismissed.

*RNs eligible for competency validation must complete 35 hours of the generalist component.*
Readmission

A student who has been dropped may apply to the Student Admissions and Academic Affairs Committee for readmission after an intervening period of not less than one semester. The committee will consider such cases on presentation of substantial evidence of a responsible and successful period of work or study during the intervening period. A former student having successfully completed a tour of duty in the armed forces will be classified in this category. There is no guarantee, however, that a student will be readmitted. This will depend on (a) the faculty’s evaluation of the likelihood of the applicant’s successful performance in succeeding work; (b) the competition of other applicants; and (c) class space available.

A student readmitted after having been advised to withdraw, or after having been suspended or dropped, is on probation during the first semester back in residence.

Student Complaint and Grievance Procedure

Faculty members welcome the opportunity to work closely with students to facilitate learning and assist in meeting course objectives. The student should first discuss any concerns regarding an instructor or a course with the instructor involved. If further discussion is needed, the student should contact the course coordinator. If the problem is still unresolved, the student should ask the Associate Dean for assistance.

Additional information on complaint and grievance procedures can be found in the Student Handbook.

Withdrawal from the University

Students planning to withdraw from the University should see the School of Nursing registrar to initiate proper procedures.

Eligibility for Registered Nurse (R.N.) Licensure

Students are eligible to apply to the National Council on Licensure Examination to become a Registered Nurse (NCLEX–R.N.) upon meeting the requirements specified by the Tennessee State Board of Nursing and upon recommendation by the faculty and the Dean, when the following requirements have been met: (a) completion of the bridge portion of the curriculum; (b) completion of 9 hours of graduate coursework required for the M.S.N.; (c) good academic standing (semester and cumulative grade point average of 3.0 or above); and (d) no grade below a C and no incomplete grades.

Students who are not successful on the first writing of the NCLEX–R.N. will be immediately withdrawn from courses with a clinical component. Once the R.N. license is obtained, the student may enroll in courses with a
clinical component. The program of study for full-time students will be altered because of delay in being able to participate in clinical courses. Additional semester(s) will be required to complete clinical courses.

Students who are not Registered Nurses are required to take examinations specified by the associate dean to prepare for the NCLEX–R.N. Students will be billed for the examinations through their student accounts.

**Change of Address and Telephone Number**

Students who change either their local or permanent mailing address or telephone number are expected to notify the School of Nursing registrar immediately. Candidates for degrees who are not in residence should keep the Nursing School registrar informed of their current mailing address and telephone number.

**Graduation**

Degree candidates must have satisfactorily completed all curriculum requirements, have passed all prescribed examinations, and be free of all indebtedness to the University.

**Commencement**

The University holds its annual Commencement ceremony following the spring semester. Degree candidates must have completed successfully all curriculum requirements with at least a 3.0 overall GPA and have passed all prescribed examinations by the published deadlines to be allowed to participate in the ceremony. A student completing degree requirements in the summer or fall semester will be invited to participate in Commencement the following May; however, the semester in which the degree was actually earned will be the one recorded on the diploma and the student’s permanent record. Students unable to participate in the graduation ceremony will receive their diplomas by mail.
DIRECT admission to the Master of Science in Nursing (M.S.N.) program requires graduation from an NLN–accredited baccalaureate program with an upper division major in nursing (B.S.N. degree). Applicants from unaccredited nursing programs will be considered on an individual basis.

Admission without a B.S.N. degree is possible via a generalist nursing Bridge component. Qualified students without a B.S.N. enter the Master of Science in Nursing Bridge, a M.S.N. program with multiple entry options.

The curriculum for the School of Nursing places great intellectual, psychological, motor, and sensory demands on students. In accordance with Vanderbilt’s non-discrimination policy, the Student Admissions and Academic Affairs Committee is charged with making individualized determinations of the ability of each candidate for admission to successfully complete the degree requirements.

**Admission to the M.S.N. Program with a B.S.N.**

Admission is based on the following factors:

1. **Undergraduate Grade Point Average.** It is recommended that applicants have at least an average of B in nursing and a cumulative average of B.

2. **Standardized Test Scores.** Applicants are required to have taken either the Graduate Record Exam (GRE) or the Miller Analogies Test (MAT) within five years of the application date.

   **Graduate Record Examination Aptitude Test.** The applicant should have a composite score of 1000 or above for verbal and quantitative portions. Those with scores below 1000 may be asked, upon faculty request, to provide additional evidence of aptitude. Applicants are reminded to take the test early to meet application deadlines, since it is often six weeks before scores are reported. Information on the GRE may be obtained by writing Educational Testing Service, Box 6000, Princeton, New Jersey 08541-6000, by calling 1-800-808-0090, or by visiting the web site at [http://www.gre.org](http://www.gre.org).

   **Miller Analogies Test.** It is recommended that the applicant have a score of 50 or above. Information on the Miller Analogies Test can be obtained from the Vanderbilt Psychological and Counseling Center, 300 Oxford House, 1313 Twenty-first Avenue South, Nashville, Tennessee 37212 or from the Psychological Corporation Control Testing Center, 555 Academic Court, San Antonio, Texas 78204-2498 (telephone [210] 921-8866 or [800] 622-3231).
Graduate Management Admission Tests (GMAT) are recommended for all students applying for the joint degree program (M.S.N./M.B.A.). The GMAT score may be submitted instead of a GRE or MAT score for M.S.N./M.B.A. applicants. Information on the GMAT may be obtained by writing GMAT, Educational Testing Service, Box 6103, Princeton, New Jersey 08541-6103, or by calling 1-800-GMAT-NOW.

3. Official Transcripts. Applicants must submit one transcript from each post-secondary institution attended.

4. R.N. License. Current licensure in Tennessee is required at the time of registration except for students who have taken the licensing examination but have not received the results. Individuals admitted pending examination results are subject to immediate withdrawal from graduate (300-level) clinical courses if the examination is not passed. Once the license is obtained the individual may enroll in courses with a clinical practice component.

5. Letters of Recommendation. Three letters of recommendation are required.

6. Interview. An interview survey is required. An interview in person or by telephone may be required in certain majors.


8. Prerequisite Courses. An introductory course in statistics that includes descriptive and inferential statistical techniques is required for admission.

9. Health History. Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Hepatitis B vaccine, MMR vaccine, tetanus/diphtheria vaccine, varicella titer, and/or other appropriate immunizations to the Student Health Service before initial registration.

10. M.S.N./M.B.A. Program. Students applying for the joint degree M.S.N./M.B.A. program must apply and be admitted both to the School of Nursing and to the Owen Graduate School of Management. Application packets for Owen may be obtained by writing to the Office of Admissions and Student Services, Owen Graduate School of Management, Admissions Office, 401 Twenty-first Avenue South, Nashville, Tennessee 37203, or by calling (615) 322-6469.

Applicants may submit transcripts to the School of Nursing. Copies will be forwarded to the Owen Graduate School of Management.

Admission to the M.S.N. Program via the Bridge

The School of Nursing offers several options for entry into the M.S.N. program for applicants who do not hold a B.S.N. degree. Qualified applicants are eligible for admission in the following categories:

1. Entry with a non-nursing liberal education baccalaureate degree from an accredited college or university or through a formalized senior-
in-absentia program. Such applicants must complete prerequisites in human anatomy, human physiology, lifespan development, microbiology/bacteriology, nutrition, and statistics. Students enter the Bridge component where they complete 42 hours of generalist courses. They then complete a minimum of 39 hours in courses for a nursing specialty.

2. Entry with an associate degree in nursing or a diploma from an NLN–accredited nursing school with 72 semester or 110 quarter hours of transferable credit (see Prerequisite Courses below).

Registered Nurse students entering the Bridge component may validate competencies* for selected courses required at the Bridge level. After completing the 35–42 hours of Bridge level courses, they complete a minimum of 39 credit hours in a nursing specialty.

3. Entry with 72 semester or 110 quarter hours of prerequisite courses (see below). Students enter into the Bridge program. After completing 42 hours of Bridge courses, they complete a minimum of 39 hours in a nursing specialty.

**Prerequisite Courses**

**English (6 hours).** English composition, literature, or Vanderbilt courses designated with a “W” meet this requirement.

**Humanities (6 hours).** Humanities courses are those concerned with human thought, including literature, classics, drama, fine arts, history, philosophy, and religion. Technical or skill courses such as applied music or studio art are not acceptable as humanities courses.

**Statistics (3 hours).** An introductory course in statistics that includes descriptive and inferential statistical techniques is required. Math 127–128, Math 180, Math 233, or Psychology 2101P are the courses offered at Vanderbilt that fulfill this requirement.

**Social Sciences (9 hours).** Social Sciences include psychology, sociology, anthropology, political science, and economics.

**Natural Sciences (11 hours).** Natural Science courses in human anatomy and physiology (Nursing 210ab) and microbiology (Nursing 150) are required. Chemistry 101a–101b or Chemistry 102a–102b and Biological Sciences 110a–110b are strongly recommended but not required for admission.

**Lifespan Development (3 hours).** A course in lifespan development that includes birth through late adulthood is required. Psychology 221, Developmental Psychology; Human Resources 1000, Applied Human Development; Psychology 1630, Development Psychology, fulfills the lifespan development requirement.

**Nutrition (2–3 hours).** Nutrition must be taken as a prerequisite course. Nursing 231, Introduction to Nutritional Health, fulfills the requirement for nutrition.

*RN students must have a 3.0 GPA in the nursing courses from their ADN or diploma program to be eligible to validate competencies.
Electives (31–32 hours)

The remaining hours of prerequisites may consist of prior college-level nursing or elective courses, except physical education courses, pass/fail courses, courses with grades lower than C, courses taken at unaccredited schools, and nursing courses taken at diploma schools. Students entering with a baccalaureate degree in a field other than nursing must have as prerequisite courses: human anatomy and physiology; microbiology/bacteriology; statistics; lifespan development; and nutrition.

Admission Criteria

Admission to the Bridge program is based on the following factors:

1. Undergraduate Grade Point Average. It is recommended that the applicant have at least a B average in nursing and a cumulative average of B.

2. Standardized Test Scores. Applicants are required to have taken either the Graduate Record Examination, the Miller Analogies Test, or the Graduate Management Admission Test, as appropriate, within five years of the application date. See Admission to the M.S.N. Program with a B.S.N. for recommended scores and additional details.

3. Official Transcripts. Applicants must submit one transcript from each post-secondary institution attended.

4. Current Licensure. Registered Nurse students must be licensed to practice in Tennessee. Individuals admitted pending examination results are not eligible for credit by examination until licensure is obtained.

5. Letters of Recommendation. Three letters of reference are required.

6. Interview. An interview survey is required. An interview in person or by telephone may be required.


8. Health History. Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Hepatitis B vaccine, MMR vaccine, tetanus vaccine, varicella titer (students testing negative are required to be immunized), and/or other appropriate immunizations to the Student Health Center before initial registration.

Applicants who do not meet all the listed criteria will be considered on an individual basis.

Application Procedure

Application forms for the M.S.N. program may be secured from the Admissions Office of the School of Nursing. A $50 non-refundable fee is required when the application is submitted. Applications for the fall semester should be received by 15 February, for the spring semester by 15 October, and by 15 April for the summer semester. Applications received after the published deadlines will be accepted provided space is available. Admission decisions are made as soon as all application materials are received. A $200 non-refundable matriculation fee is required upon acceptance.
Applications are considered current for one year; accepted applicants who do not enroll during that time must reapply for admission. Students may apply for and be approved for one deferral of admission, not to exceed one year. After one year the student must reapply for admission.

Transfer Credit

Transfer credit is considered for post-baccalaureate courses taken elsewhere within five years of admission upon request on the application form. The specialty director approves transfer credit for specialty courses and/or elective courses. The Associate Dean approves transfer credit for research/theory courses. If courses are approved, a total of 6 semester hours may be transferred. No credit is awarded toward the degree for courses designated as prerequisite for admission.

Validation of Competency Process for Registered Nurses

Vanderbilt University School of Nursing recognizes the contributions of nurses from other types of nursing education programs by allowing RN Bridge students to demonstrate their knowledge through a process of validation. Completing the highest level course of a sequence will “validate” the mastery of the lower level courses. N235 and N236 may be validated by earning at least a C in N237. Six hours of electives are required if the student validates N235 and N236. If the student makes less than a C in N237, they will have to complete N235, N236, and N237, earning at least a C.

Registered Nurse students must have a 3.0 GPA in the nursing courses in their ADN or diploma programs to be eligible to attempt the validation process.

Credit by Examination

Registered Nurse students in the specialist component who are certified through a professional nursing organization in the area of specialty practice may obtain credit by examination for selected specialty courses. The credit by examination procedure will verify acceptable knowledge and skill attainment received through national certification at the specialist level. Credit by examination will be limited to a maximum of two specialty courses. Verification of the certification must be sent directly to the School of Nursing by the certifying agency before the student is eligible to register for credit by examination. Full tuition is charged for courses in which credit by examination is earned.

Other courses in the specialist component may be available for credit by examination as determined by the Curriculum Committee or upon petition to the Student Admissions and Academic Affairs Committee. Students may consult their faculty advisers for further information.
International Students

Vanderbilt has a large international community representing at least seventy-five countries. Most international students are enrolled in graduate and professional programs. The University welcomes the diversity international students bring to the campus, and encourages academic and social interaction at all levels.

**English Language Proficiency.** Proficiency in written and oral English is required for enrollment in an academic program. Applicants whose native language is not English must present the results of the Test of English as a Foreign Language (TOEFL) with the application, unless they have demonstrated competence while attending an American institution. International students transferring from unfinished degree programs of other universities in the United States should present TOEFL scores. The International TOEFL is administered at test centers throughout the world at different times during the year. Inquiries and requests for application forms should be addressed to TOEFL, Box 6151, Princeton, New Jersey 08541-6151 U.S.A. The minimum acceptable score on the Test of English as a Foreign Language is 550.

**English Instruction.** Applicants whose proficiency in English is low or marginal will be required to enroll in an English language program before beginning academic studies. Vanderbilt offers such a program at English for Internationals (EFI). Intensive, semi-intensive, or part-time English study is offered throughout the year. Non-credit enrollment in at least one academic course may be recommended while the student is improving proficiency in English. Academic studies for credit may begin after recommendation by EFI in consultation with the student’s academic adviser. For more information, write to EFI, Box 510 Peabody Station, Nashville, Tennessee 37203, U.S.A.

**Financial Resources.** To meet requirements for entry into the United States for study, applicants must demonstrate that they have sufficient financial resources to meet expected costs of their entire educational program. Applicants must provide documentary evidence of their financial resources before visa documents can be issued. Vanderbilt has no special funds allocated for financial assistance to international students.

The United States laws and regulations restrict the opportunity for international students to be employed. Students may be allowed to work only under special circumstances on a part-time basis or as a result of emergency financial need, and then normally only after the first year of study. Spouses and dependents of international students generally are not allowed to be employed while in the United States.

**Health and Accident Insurance.** International students, whether attending the University full time or part time, and their dependents residing in the United States are required to purchase the University’s international student health and accident insurance unless, in the judgment of the University, adequate coverage is provided from some other source. Information concerning the limits, exclusions, and benefits of this insurance coverage can be obtained from the Student Health Center.
Additional Requirements. Prior to admission, international applicants who are nurses must have taken the Commission on Graduates of Foreign Nursing Schools (COGFNS) examination and the Tennessee licensing examination. Information on the COGFNS may be obtained by writing the commission at 3624 Market Street, Philadelphia, Pennsylvania 19104, U.S.A., or by calling (215) 349-8767. The COGFNS exam is given in March, August, and November in forty-six locations worldwide, though not in Nashville. Information on the Tennessee licensing exam may be obtained from the Tennessee Board of Nursing; 426 Fifth Avenue, North; 1st floor, Cordell Hull Building; Nashville, Tennessee 37247-1010, U.S.A.; telephone (615) 532-5166.

Information. Assistance in non-academic matters before and during the international student’s stay at Vanderbilt is provided by the Office of International Services, Box 507 Peabody Station, Nashville, Tennessee 37203, U.S.A.

Student Classification

The following classifications apply to all M.S.N. students.

Regular Student. Enrolled full time or part time in the School of Nursing, having met admission requirements.

A full-time student in the program normally will enroll for a minimum of 12 and a maximum of 16 credit hours a semester. Students registered for thesis or master’s project (0–3 hours) are also defined as full time. Part-time students carry a minimum of 6 but fewer than 12 hours per semester.

Students entering the M.S.N. program with a B.S.N. degree must complete all degree requirements within three years of first enrollment. Students entering the M.S.N. through the Bridge component must complete all degree requirements within five years of first enrollment.

Special Student. Enrolled in one or more non-clinical Bridge or graduate courses but not working toward a master’s degree in the School of Nursing. A limit of 7 credit hours is permitted in this status. Successful completion of courses taken as a special student does not guarantee admission to the M.S.N. program.

To be considered as a special student, an applicant must submit a completed application form with transcripts and the non-refundable application fee at least two weeks before registration. Acceptance into a course is dependent upon availability of space and facilities after full-time and part-time students have been registered.

Registration as a special student requires approval by the Associate Dean. All University and School of Nursing regulations, including the Honor System, apply to special students. Special students who desire to change to regular student status should make application for admission to a specialty following regular procedures.
Financial Information

TUITION for 1999/2000 is $8,300 per semester (fall, spring, or summer session), for from 12 to 16 hours. Students enrolled for fewer than 12 or more than 16 hours are charged $692 per credit hour.

Rates for tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

The Master of Science in Nursing degree may be completed in three-semesters of full time study for students who enter with a B.S.N.; students admitted through the Bridge component complete the M.S.N. in six semesters. M.S.N. students attend fall, spring, and summer sessions.

The charge for students registered for zero hours of Thesis (N379) or Master’s Project (N377) is one-half (0.5) credit hour of the posted hourly tuition. Registration and payment of fees retains student status.

Students taking an incomplete or having a missing grade in a course register for zero hours until removal of the incomplete grade. The charge for each course in which an incomplete is recorded is one-half (0.5) credit hour of the posted hourly tuition. Registration and payment of fees retain student status.

Other Fees

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application</td>
<td>$ 50</td>
</tr>
<tr>
<td>Matriculation (nonrefundable)</td>
<td>200</td>
</tr>
<tr>
<td>Student activities and recreation fees</td>
<td>231</td>
</tr>
<tr>
<td>Computer laboratory fee</td>
<td>25</td>
</tr>
<tr>
<td>Laboratory fee for N210a</td>
<td>35</td>
</tr>
<tr>
<td>Laboratory fee for N210b</td>
<td>35</td>
</tr>
<tr>
<td>Laboratory fee for N245</td>
<td>75</td>
</tr>
<tr>
<td>Laboratory fee for N304 a</td>
<td>150</td>
</tr>
<tr>
<td>Laboratory fee for N304b</td>
<td>75</td>
</tr>
<tr>
<td>Laboratory fee for N304 c</td>
<td>150</td>
</tr>
<tr>
<td>Laboratory fee for N315</td>
<td>50</td>
</tr>
<tr>
<td>Laboratory fee for N315</td>
<td>50</td>
</tr>
<tr>
<td>Liability insurance coverage (per semester)</td>
<td>16</td>
</tr>
<tr>
<td>Student health insurance</td>
<td>730</td>
</tr>
<tr>
<td>Mosby Assess Test (non-R.N. only)</td>
<td>50</td>
</tr>
<tr>
<td>Occupational exposure assessment fee</td>
<td>40</td>
</tr>
</tbody>
</table>

Expenses for books and supplies will vary by specialty. Equipment such as tape recorders and diagnostic sets will be required for certain specialties.
Hepatitis B vaccine is available, at student expense, through the Student Health Service.

For information concerning tuition for the Ph.D. in Nursing Science, see the Graduate School Catalog.

Payment of Tuition and Fees

Tuition, fees, and all other University charges incurred prior to or at registration are due and payable at registration. All charges incurred after registration are due and payable in full by the last day of the month in which they are billed to the student. If payment is not made within that time, cancellation of V-Net (long distance telephone) access may result and additional charges to dining accounts may be prohibited.

Refunds of Tuition and Dormitory Charges

University policy for the refund of tuition and dormitory charges provides a percentage refund based on the time of withdrawal. Students who withdraw officially or who are dismissed from the University for any reason may be entitled to a partial refund in accordance with the established schedule shown below. Requests for refunds must be made before the last day of classes of the semester in which the student was enrolled. Students who register for more than 16 hours and later reduce their registration to 16 hours or fewer may be entitled to a partial refund of the extra tuition for hours over 16 in accordance with the same schedule.

Fall 1999 Withdrawal/Refund Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Dates</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>August 23–August 28</td>
<td>100%</td>
</tr>
<tr>
<td>Week 2</td>
<td>August 29–September 4</td>
<td>90%</td>
</tr>
<tr>
<td>Week 3</td>
<td>September 5–September 11</td>
<td>80%</td>
</tr>
<tr>
<td>Week 4</td>
<td>September 12–September 18</td>
<td>70%</td>
</tr>
<tr>
<td>Week 5</td>
<td>September 19–September 25</td>
<td>70%</td>
</tr>
<tr>
<td>Week 6</td>
<td>September 26–October 2</td>
<td>60%</td>
</tr>
<tr>
<td>Week 7</td>
<td>October 3–October 9</td>
<td>50%</td>
</tr>
<tr>
<td>Week 8</td>
<td>October 10–October 16</td>
<td>50%</td>
</tr>
<tr>
<td>Week 9</td>
<td>October 17–October 23</td>
<td>40%</td>
</tr>
<tr>
<td>Week 10</td>
<td>October 24–October 30</td>
<td>40%</td>
</tr>
</tbody>
</table>

No refunds after October 30, 1999

Spring 2000 Withdrawal/Refund Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Dates</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>January 12–January 15</td>
<td>100%</td>
</tr>
<tr>
<td>Week 2</td>
<td>January 16–January 22</td>
<td>90%</td>
</tr>
<tr>
<td>Week 3</td>
<td>January 23–January 29</td>
<td>80%</td>
</tr>
</tbody>
</table>
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**Tuition Payment Programs**

Tuition payment programs are available through the Richard Knight Tuition Payment Plans. Pamphlets describing these plans are available on request from the Office of Student Accounts or the Office of Financial Aid.

**Late Payment of Fees**

Charges not paid at the time of registration will be automatically deferred (the Office of Accounting may refuse to allow a deferment if in its judgment the deferment is unwarranted), and the student’s account will be assessed a monthly late payment fee of $1.50 on each $100 that remains unpaid after registration ($5 minimum). An additional monthly late payment fee will be assessed unless payment is received in full on or before the last day of the month in which the student is billed. Late payment fees will continue for each month thereafter based on the outstanding balance unpaid as of the last day of each month. All amounts deferred are due not later than 30 November for the fall semester, 30 April for the spring semester, and 31 July for the May and summer sessions.

**Financial Clearance**

Students will not be allowed to register for any semester if they have outstanding unpaid balances for any previous semester. No transcript, official or unofficial, will be issued for a student who has an outstanding debit balance at the time the transcript is requested; transcripts will be released when the account has been paid. Diplomas of graduating students will be withheld until all bills are paid.

**Professional Liability Insurance**

Students will be automatically covered with professional liability insurance. Payment of premium is required of all enrolled nursing students at the time of registration. Payment of premium is required regardless of

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<table>
<thead>
<tr>
<th>Week</th>
<th>Dates</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 4</td>
<td>January 30–February 5</td>
<td>70%</td>
</tr>
<tr>
<td>Week 5</td>
<td>February 6–February 12</td>
<td>70%</td>
</tr>
<tr>
<td>Week 6</td>
<td>February 13–February 19</td>
<td>60%</td>
</tr>
<tr>
<td>Week 7</td>
<td>February 20–February 26</td>
<td>50%</td>
</tr>
<tr>
<td>Week 8</td>
<td>February 27–March 4</td>
<td>50%</td>
</tr>
<tr>
<td>Spring Break</td>
<td>March 5–March 11</td>
<td></td>
</tr>
<tr>
<td>Week 9</td>
<td>March 12–March 18</td>
<td>40%</td>
</tr>
<tr>
<td>Week 10</td>
<td>March 19–March 25</td>
<td>40%</td>
</tr>
</tbody>
</table>

*No refunds after March 25, 2000*
any other professional liability coverage the student might have, even for students taking only didactic courses. The policy covers only practice as a nursing student and does not extend to coverage of nursing practice outside of the student role.

The annual premium is payable in addition to tuition. Details of the policy are available at the University’s student insurance office, and students are encouraged to familiarize themselves with policy details and their responsibility in regard to insurance coverage.

**Activities and Recreation Fees**

The required student activities and recreation fees entitle students to use the facilities of Sarratt Student Center and the Student Recreation Center. The fees also cover admission to certain social and cultural events and subscriptions to certain campus publications. Specific information on these fees is published annually in the Student Handbook. By payment of an additional fee, students and their spouses may use their identification cards for admission to athletic events.

The student activities fee (Sarratt and University programs) and the student recreation fee will be waived automatically if the student is a part-time student registered for four or fewer semester hours, or if he or she resides, while a student, beyond an approximate fifty-mile radius from the campus as determined by zip code. Students who register late or students who wish to have fees waived due to exceptional circumstances must petition for a waiver through the Office of Campus Student Services, Box 6206 Station B, Nashville, Tennessee 37235. A $10 charge is assessed for processing the waivers of students who register late.

**Transcripts**

Academic transcripts are supplied by the University Registrar on written authorization from the student. A fee of $2 is charged for each transcript. Transcripts are not released for students with delinquent accounts.

**Thesis/Master’s Project**

Students who elect to complete a thesis or master’s project are required to register each semester from the time of committee and adviser selection until final approval of the completed thesis or project. Students who fail to register each semester are automatically withdrawn from the University and will have to reapply for admission.

Students completing a thesis are expected to provide two bound copies for deposit in the Medical School library.

Students who enter with a B.S.N. are required to complete their thesis or master’s project within three years of registering for their first course. Students who enter through the Bridge program are required to complete their thesis or master’s project within five years of their first registration.
Financial Aid

Financial aid is available from several sources for full- and part-time students. All of our partial scholarships are merit/need based. The amount of the scholarship is determined and awarded based on a combination of the incoming GPA of a student and the MAT or GRE score. Students must be enrolled full time (12 credit hours) in order to receive a scholarship award and must have no less than a 3.0 cumulative GPA.

Students do not apply directly to any of our scholarship benefactors. The Scholarship Committee chooses recipients based on filling the requirements of the funding source. For instance, some scholarships are to be awarded to minority students only. Some have been designated to be awarded to top students in specific specialties.

Three federal loan programs are available for nursing students: the Stafford subsidized and unsubsidized loans, offered through the bank of your choice, and the Federal Nursing Loan, which is distributed through Vanderbilt University on a funds-available basis. Eligibility for these loans is determined after submission of two forms, the CSS Profile Application and the Free Application for Federal Student Aid (FAFSA).

Subsidized Federal Stafford Loans are based on financial need determined from the results of the FAFSA and CSS applications, which must be completed each year. There is an $8,500 loan limit per application (divided between two semesters). Interest will begin accumulating after graduation. The aggregate maximum for a graduate/professional student is $65,500, including any Federal Stafford Loans made at the undergraduate level. Stafford Loans currently carry 8 percent interest, and payback begins six months after graduation.

Unsubsidized Federal Stafford Loans are available for students who do not qualify or who qualify for only a partial subsidized Federal Stafford Loan amount. The maximum loan limit per application is $10,000 (divided between two semesters). Interest starts accumulating at the beginning of the loan. The aggregate maximum for an unsubsidized Stafford for a graduate/professional student is $73,000, including any loans made at the undergraduate level. The unsubsidized loan currently carries 8 percent interest, and payback begins six months after graduation.

Federal Nursing Student Loans are awarded based on student eligibility and a funds-available basis. Federal Nursing Student Loans currently carry 5 percent interest, and payback begins nine months after graduation.

The School of Nursing Financial Aid Office sends financial aid packets, usually during the first week of February each year, that include all forms necessary to apply for federal loans, scholarships, and the school's own loan program. Contact the School of Nursing Financial Aid Office, Vanderbilt University, Godchaux Hall, Nashville, TN 37240-0008 for any forms needed.

Registered Nurse students are encouraged to explore funding available through various professional organizations and through tuition reimbursement benefits offered by their employers. Professional organizations
that may offer funding for graduate education include the Nurses’ Educational Fund, American Cancer Society, State Nurses Associations, and the National Association of Pediatric Nurses, Associates, and Practitioners.
Honors and Awards

Sigma Theta Tau

The Iota chapter of Sigma Theta Tau, international honor society of nursing, was installed at Vanderbilt University on 3 June 1953. Sigma Theta Tau is professional rather than social, and its purpose and functions may be compared to other honor societies. Sigma Theta Tau is a member of the Association of College Honor Societies.

Election to membership in the society is limited to students who have shown marked qualities of character, leadership, and ability in nursing and who have maintained a high scholastic average. Students in the direct entry M.S.N. program are eligible for membership after having completed 10 semester hours of the required curriculum. Students in the Bridge program are eligible for membership after having completed 22 hours of the required Bridge curriculum.

Founder’s Medal

The Founder’s Medal, signifying first honors, was endowed by Commodore Cornelius Vanderbilt as one of his gifts to the University. The Founder’s Medal is conferred annually upon the graduating student in the School of Nursing who, in the judgment of the faculty, has achieved the strongest record in the areas of professional and academic performance in meeting the requirements for the Master of Science in Nursing degree.

Amy Frances Brown Prize for Excellence in Writing

This prize is awarded each year there is a worthy candidate among the graduates of the School of Nursing. The selection is based upon papers submitted to meet course requirements in either the Bridge or specialist nursing component of the curriculum.

Honor Scholarships

Vanderbilt’s highly competitive Honor Scholarship program is based on academic merit. Three full Honor Scholarships are awarded each year in recognition of exceptional accomplishment and high promise in the field of nursing. Several partial honor- and need-based scholarships are also available.

Founder’s Medalist Clare Judith Thomson-Smith and Dean Conway-Welch
Full Scholarships

THE HAROLD STIRLING VANDERBILT (HSV) SCHOLARSHIP honors the memory of the great-grandson of Commodore Cornelius Vanderbilt and president of the University's Board of Trust from 1955 to 1968. The scholarship covers full tuition for three semesters. Selection is based on academic excellence and potential for contribution to the Nursing profession; financial need is not a criterion.

THE JULIA HEREFORD ALUMNI SCHOLARSHIP is awarded annually through the generosity of the Julia Hereford Society and the Julia Hereford Endowed Alumni Scholarship Fund. Recipients are selected by a committee of faculty members and alumni. Written application is required.

THE C. W. KEMPKAU SCHOLARSHIP is awarded to an outstanding Bridge student in each entering class. This scholarship continues through the second year of study, thus awarding the top entering student full support throughout his or her educational experience at Vanderbilt.

Partial Scholarships

THE BARNES SCHOLARSHIP was established by Mr. and Mrs. Mel Barnes and is awarded annually to a deserving perinatal student.

THE BURRUS MEDICAL SCHOLARSHIP FOR NURSES was established in 1987 by George R. Burrus, M.D., in honor of his daughters, Lisa, Kate, and Nan, who are Vanderbilt nurses.

THE LILLIAN CARY SCHOLARSHIP is awarded to an MSN student in the Family Nurse Practitioner Specialty. Selection is based on academic merit and financial need.

THE THOMAS CONE SCHOLARSHIP was endowed through a gift from Thomas and Charlotte Cone to be awarded annually to a worthy and needy student who is a single parent.

THE JOE C. DAVIS SCHOLARSHIP is supported by the Joe C. Davis Foundation. Preference is given to non-R.N. students returning to school via the Bridge program.

THE LA JUAN FURGASON SCHOLARSHIP is an endowed scholarship established by Mr. and Mrs. G.A. Furgason in memory of their daughter, a 1967 B.S.N. graduate of the School of Nursing.

THE GLASSOCK SCHOLARSHIP was established by Dr. Michael E. Glassock. Preference is given to R.N. students returning to school via the Bridge program.

THE DOROTHY S. GOLDSTEIN SCHOLARSHIP was established by Mrs. Goldstein and is awarded to minority students.

THE HALEY AWARD was endowed through a bequest from James H. Haley Jr. to help support a worthy student of the School of Nursing.

THE WILLIAM RANDOLPH HEARST ENDOWED SCHOLARSHIP FUND was established for minority students. It is awarded to minority students on the basis of merit and need.

THE FRANCES M. HOUSTON SCHOLARSHIP FUND was established by bequests from the estates of these two sisters, both Vanderbilt alumnae, and is supported by contributions from members of their family. It is awarded annually to a worthy and needy student.
THE LIZZIE MINOR HOUSTON SCHOLARSHIP was endowed through the bequest of George Houston in honor of his wife. It is awarded annually to a worthy and needy student. Preference is given first to students from Cannon County, Tennessee, and then to the surrounding counties of Coffee, Dekalb, Rutherford, Wilson, and Warren.

THE SAMMIE S. SHAPIRO-RACHEL S. KELLY SCHOLARSHIP was established by bequests from the estates of these two sisters, both Vanderbilt alumnae, and is supported by contributions from members of their family. It is awarded annually to a worthy and needy student.

THE ELIJAH NEVINS KIRKPATRICK SCHOLARSHIP is supported by the Frank Godchaux III family in memory of Mr. Kirkpatrick, a Vanderbilt alumnus and father of Mrs. Godchaux. It is awarded annually to student demonstrating both exceptional merit and financial need.

THE JENNIE WAMSLEY LONG MEMORIAL SCHOLARSHIP was established in 1996 by gifts from family and friends. The scholarship is to be awarded to a student in the Psychiatric Mental Health specialty.

THE MILAH P. LYN SCHOLARSHIP FUND was established in 1996 by a gift from Milah and Steven Lynn. This scholarship is to be awarded to worthy, needy students.

THE KATHLEEN SUZANNE NELSON SCHOLARSHIP FUND was endowed through a bequest from Dr. Robert A. Nelson, Jr., in memory of his daughter, a 1975 graduate of the school.

THE COLEMAN D. OLDHAM HONOR SCHOLARSHIP was endowed through a bequest from Coleman and Emma Oldham.

THE VALERE POTTER SCHOLARSHIP FUND was established originally by a gift from the late Valere Blair Potter. This scholarship is awarded annually to second year Bridge students demonstrating exceptional merit and financial need.

THE LAURA CATHERINE RANKIN MEMORIAL SCHOLARSHIP was established in Laura’s memory by her parents, Mr. and Mrs. Allan Rankin, family and classmates.

THE MILDRED REED HONOR SCHOLARSHIP was established by the bequest of Mildred Reed.

THE PAMELA RICHARDSON MEMORIAL SCHOLARSHIP was established in 1995 by her family and friends in her memory. Pamela Richardson was a VUSN student at the time she died. The scholarship will be awarded annually to a second year student demonstrating financial need and exceptional merit.

THE HILLIARD TRAVIS SCHOLARSHIP FUND is supported by the generosity of Mrs. Hilliard Travis and the late Mr. Hilliard Travis. Several awards are made each year to students in specialties that involve nursing care for children of any age, from neonate through adolescent.

THE JEANETTE AND LEON TRAVIS SCHOLARSHIP FOR NURSING AT ST. THOMAS HOSPITAL was established by Mrs. and the late Mr. Travis for nurses employed at St. Thomas Hospital to pursue the MSN degree at Vanderbilt University School of Nursing. Inquiries regarding this opportunity should be directed to Susan Russell at St. Thomas Hospital (615) 222-6800.
THE LETTIE PATE WHITEHEAD SCHOLARSHIP FUND is supported by the Lettie Pate Whitehead Foundation. The awards are given to first year female Bridge students from southern states.

THE ZELLE SCHOLARSHIP was established in 1995. This scholarship is awarded annually to nursing students specializing in chronic care with a focus on rehabilitation nursing.

THE FRANCES HELEN ZIEGLER TUNNELL GRADUATE HONOR SCHOLARSHIP was endowed through the will of this former dean of the School of Nursing and is awarded to a meritorious student with financial need.
Courses of Study

Explanation of Symbols

200-level courses are generalist nursing courses or upper-level pre-nursing courses.

300-level courses are specialist nursing courses.

The University reserves the right to change the arrangement or content of courses, to change the texts and other materials used, or to cancel any course on the basis of insufficient enrollment or for any other reason.

Pre-Nursing Courses

N150. Introductory Microbiology. This course presents a basic introduction to the microbial world with particular emphasis on the diversity of bacteria and of viruses. Morphologic and physiologic principles are explored as are the processes of pathogenesis and host defenses. The rational for the use of antimicrobial drugs is also examined. Bacterial genetics and recombinant DNA technologies are included. SPRING [3] Rossby.

210a–210b. Human Anatomy and Physiology I and II. Introduction to the structure and function of the human organism. Integrates the gross anatomical structure of the human body and its organ systems with microscopic structure, physiological function, and homeostatic mechanisms. Emphasis also on the clinical relevance of selected topics. Prerequisite: at least one semester of biology or chemistry. FALL, SPRING. [4–4] Alvin M. Burt III.


Generalist Nursing Courses and Electives

215 Foundations of Professional Nursing I This course is the first of a two course sequence addressing professional nursing. This didactic course introduces the student to professional nursing. Historical beginnings, the organization and structure of the profession professional identity and role development are explored. Building on this content, students are introduce to theories and models relevant to nursing. Using critical thinking, students will be introduced to clinical decision making strategies, theory development and research methods. With guidance, students will analyze and synthesize information from a variety of sources related to professional nursing. Fall [2]. Vollman & staff.

216. Professional Nursing Seminar. This course addresses the role of the professional nurse. The student will have the opportunity to explore the dimensions and responsibilities of the professional nursing role and apply legal/ethical concepts and critical thinking skills.
to selected case studies involving patients in a variety of settings. Prerequisite or corequisite: 215, 225, 245, 236, 246. SPRING. [1]. Staff.

217. Foundations of Professional Nursing II. This course is the second of a two-course sequence addressing professional nursing. Students will apply appropriate research findings into practice, analyze current developments in nursing and critique the impact of nursing care on clinical outcomes. Prerequisite: 215, 216. Corequisite: 237, 247. SUMMER. [3]. Bess.

218. Conceptual Basis for Nursing Practice. This course focuses on identification of the unique strengths/perceptions of each RN student and a development of an individualized plan for learning. The course assists RN students in identifying and developing strategies to foster critical thinking, lifelong learning, and nursing practice role development. Theory development and research are introduced as processes essential to the organization and development of nursing knowledge. Limited to RN students. FALL. [3] Bess.

219. Nursing Practice Seminar. This course addresses selected topics foundational to the nursing practice role. The student will have the opportunity to explore models of nursing practice, credentialing, certification, mentors, collaborative practice, and professional ethics. Limited to RN student. Prerequisite: 218. SPRING. [1] Bess.

225. Population Based Health Care. This course provides the student with an opportunity to explore population based health care principles of prevention, health maintenance and health promotion within the context of Healthy People 2000 [2010]. Notably, the course will focus on how these principles may be used to increase healthy lifespan, decrease discrepancies in health status and health outcomes for different populations and assure access to preventive services for all. It emphasizes epidemiologic principles and population based holistic health promotion/disease prevention as an integral part of populations at risk for illness, disability or premature death. Further, the course explores population based care models and environments in which health care is delivered: community agencies, neighborhoods/communities, schools, the family, and the workplace. Legislation and policy implications for primary, secondary, and tertiary care will be discussed. FALL. [3]. Taylor.

226. Health Care Systems I. This course is the first of a sequence of two courses addressing health care systems and related issues. The course provides information on the contemporary trends in the organization and delivery of health care to individuals, families, and populations. The impact of managed care and financial pressures on health care providers will be discussed, along with economic principles pertinent to the financial management of health care services. In addition, the course content covers effective case management, quality improvement, and outcome management. This course also provides an introduction to ethical and legal ideas and communication theory. SPRING. [3]. Brooking.

227. Health Care Systems II. This course is the second in a sequence of two courses addressing health care systems and related issues. The course content focuses on leadership and decision-making theory and a variety of managerial skills. The course also covers health care policy issues and financial strategies in the area of managed care. Analytical thinking regarding legal, ethical, policy, and managerial issues is promoted through didactic and specialty focused seminar experiences. Prerequisite: 226. SUMMER. [3]. Brooking.

235. Human Experience of Health and Illness Across the Lifespan I. This is the first of three didactic courses examining the human experience of health and illness across the lifespan—from infancy through senescence, including the childbearing cycle. The framework incorporates the following concepts and their influence on health and the response to illness: growth and development, gender, lifestyle, value systems, spirituality, ethnicity, environment,
and psychosocial, economic, and cultural issues. The impact of these factors on individuals, families, and aggregates/populations/communities will be explored. Basic concepts/knowledge of selected interventions, i.e. pharmacologic, perioperative, and mental health will be introduced. Selected health problems involving the cardiovascular, respiratory, integumentary, and endocrine systems will be presented; the epidemiology, pathophysiology, medical management (pharmacologic, non-pharmacologic, and surgical), and nursing management will be addressed. Health promotion, including primary, secondary, and tertiary, anticipatory guidance, and patient education will be discussed. Corequisite: 225. FALL. [5]. Staff.

236. Human Experience of Health and Illness Across the Lifespan II. This is the second of three didactic courses examining the human experience of health and illness across the lifespan—from infancy through senescence, including the childbearing cycle. The framework incorporates the following concepts and their influence on health and the response to illness: growth and development, gender, lifestyle, value systems, spirituality, ethnicity, environment, and psychosocial, economic, and cultural issues. The impact of these factors on individuals, families, and aggregates/populations/communities will be explored. Selected health problems involving the neurological (including selected mental health disorders with appropriate treatment modalities and settings), muscular/skeletal, gastrointestinal, genitourinary, sensory (ear, eye, and nose), lymphatic, hematologic, and reproductive (including maternity focus) systems will be presented. The epidemiology, pathophysiology, medical management (pharmacologic, non-pharmacologic, and surgical), and nursing management will be addressed. Health promotion, anticipatory guidance, and patient education will be discussed. Prerequisite 215, 225, 235. SPRING. [5]. Staff.

237. Human Experience of Health and Illness Across the Lifespan III. This is the third of three didactic courses examining the human experience of health and illness across the lifespan—from infancy through senescence, including the childbearing cycle. The framework incorporates the following concepts and their influence on health and the response to illness: growth and development, gender, lifestyle, value systems, spirituality, ethnicity, environment, and psychosocial, economic, and cultural issues. The impact of these factors on individuals, families, and aggregates/populations/communities will be explored. Selected health problems involving the neurological (including selected mental health disorders with appropriate treatment modalities and settings), muscular/skeletal, gastrointestinal, genitourinary, sensory (ear, eye, and nose), lymphatic, and hematologic systems will be presented. The epidemiology, pathophysiology, medical management (pharmacologic, non-pharmacologic, and surgical), and nursing management will be addressed. Health promotion, anticipatory guidance, and patient education will be discussed. Prerequisite: 236. SUMMER. [4]. Staff.

245 Foundations for Clinical Practice. This course is the first of a sequence of three clinical practice courses designed to provide the student with the opportunity to learn and practice the skills of assessment, patient care and care planning in a didactic classroom setting and a simulated laboratory and then in a clinical area for a variety of client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care settings will be utilized for practice. At the end of the course, the student, with maximum faculty assistance and guidance, will be able to analyze data, develop a basic plan of care, safely and accurately implement selected basic nursing interventions, and evaluate the plan’s effectiveness. Prerequisite and corequisite, 215, 225, 235. FALL. [5] Sweeney and staff.

246. Integration of Theoretical and Clinical Aspects of Nursing I. This course is the second of a sequence of three clinical practice courses. It is designed to provide the student
with the opportunity to learn and practice the skills of assessment, patient care, and care planning in a clinical area for diverse client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care settings will be utilized for practice. At the end of the course, the student with moderate faculty assistance and guidance will be able to analyze data, develop a plan of care, safely and accurately implement selected nursing interventions, and evaluate the plan’s effectiveness for physiologic and psychosocial health needs. Prerequisite and corequisite, 215, 225, 235. SPRING. [4]. Sweeney and staff.

247. Integration of Theoretical and Clinical Aspects of Nursing II. This course is the third of a sequence of three clinical practice courses. It is designed to provide the student with the opportunity to learn and practice the skills of assessment, patient care, and care planning in a clinical area for diverse client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care settings will be utilized for practice. At the end of the course, the student with moderate faculty assistance and guidance will be able to analyze data, develop a plan of care, safely and accurately implement selected nursing interventions, and evaluate the plan’s effectiveness for individuals and their families. Prerequisite: 236, 246; corequisite: 217, 227, 237. SUMMER. [4]. Sweeney and staff.

248. Clinical Applications. This course is designed to provide the student with the opportunity to learn and practice the skills of assessment in a classroom, laboratory setting, and then in a clinical area for a variety of client populations across the life span. The student's specialty population will be considered in the choice of health care setting utilized for practice. Limited to RN students. FALL. [3] Pierce.

249. Seminar in Integration of Theoretical and Clinical Aspects of Nursing. This course focuses on the relationship of critical thinking, problem solving, nursing process, and decision-making when planning care and identifying clinical outcomes. Using case studies, the RN student will: process assessment data, apply decision-making strategies, identify outcomes, and plan for evaluation. Limited to RN students. Prerequisite: 248. SPRING. [2] Bess.

249a. Integration of Theoretical and Clinical Aspects of Nursing IIA This course is an introduction to the scope and practice of community health nursing with a focus on the family. It emphasizes the promotion and maintenance of the health of diverse populations across the lifespan. The epidemiological process and the nursing process serve as the organizing framework for clinical interventions in the community. Social, cultural, economic, environmental, and ethical issues related to specific populations will be explored through community placements. Prerequisite: 225, 226, 248, 249. SPRING. [2] Fogel.

249b. Integration of Theoretical and Clinical Aspects of Nursing IIB. This course is an introduction to the scope and practice of community health nursing with a focus on the community. It emphasizes the promotion and maintenance of the health of diverse populations across the lifespan. The epidemiological process and the nursing process serve as the organizing framework for clinical interventions in the community. Social, cultural, economic, environmental, and ethical issues related to specific populations will be explored through community placements. Prerequisite: 225, 248, 249a. Corequisite: 226, 249. SUMMER. [2] Fogel.
Specialist Nursing Courses and Electives


303. Spanish for Primary Care Givers. This course introduces the nurse practitioner student to Spanish words and phrases that will be useful to them in a nurse practitioner setting. Emphasis is on the ability to communicate with the non-English-speaking Hispanic client in such primary care settings as pediatric, family planning, and adult health situations. SUMMER. [1] Salisbury.

304a. Advanced Health Assessment and Clinical Reasoning. This course is designed to expand upon the knowledge of basic assessment of patients/clients in a variety of health care settings. Induction is the core process used for teaching the principles of advanced assessment, beginning with a chief complaint and using clinical reasoning to generate a diagnosis and problem list. Advanced techniques in the examination of body systems to identify abnormalities and the need for further evaluation, pertinent diagnostic studies (laboratory and radiology), and differential diagnosis will be discussed. Laboratory time (two hours/week) will concentrate on demonstrating the complete examination of body systems. Prerequisite: admission to specialty. FALL. [2] Covington and Pierce.

304b. Advanced Health Assessment Applications. Advanced health assessments are used in newborn, pediatric, and adult patient populations. Diverse types of applications are used in expanding proficiency in history taking and health assessment techniques with specific populations. Synthesizing systematic and organized health assessments that are sensitive to developmental needs is emphasized. Health promotion and disease prevention are emphasized across the lifespan. Prerequisite: 304a. FALL [1] Staff.

304c. Advanced Neonatal Health Assessment. This course provides opportunities for students to develop the knowledge and skills needed to perform a comprehensive health and gestational age assessment. Data to collect when eliciting a health history, principles of performing a physical and gestational age assessment, diagnostic study interpretations, and examination techniques will be stressed in the didactic portion of the course. Critical thinking is emphasized as the basis for synthesis of knowledge regarding the performance of health histories, physical assessments, and identification of potential diagnostic tests for alterations in clinical findings. Emphasis is on deviations from normal assessment findings. A seven-week supervised clinical experience in the regular newborn nursery and neonatal intensive care unit will provide students with opportunities to perform health histories, health assessments, and gestational age assessments with both normal and preterm infants. FALL. [3] D’Apolito.

305. Theoretical Foundations of Family Nursing. Provides an introduction to family theories about family development, family systems, and family stress. Lectures and course readings provide the theoretical basis to promote family health, well-being of family members, and family unity. Lectures examine ways to apply family theories to nursing practice. Recommended: 308. SUMMER. [2] Staff.

306. Physiologic Foundations of Nursing. Normal physiological processes that serve as a foundation for advanced nursing practice courses are studied. Selected physiological processes are considered at biochemical, cellular, organ, and system levels. Emphasis is on interrelationships among physiologic processes throughout the body. FALL, SPRING, SUMMER. [3] Lancaster.
306b. Reproductive Physiology. Normal physiological processes of reproduction and changes during the maternity cycle that serve as a foundation for nurse-midwifery practice are studied. Selected physiologic processes associated with genetics, normal development of the products of conception, maternity cycle, and the implications for client adaptations and discomforts are examined in depth. FALL. [1] Burt.

307. Pharmacotherapy for Primary Care. The purpose of this course is to present optimal pharmacologic choices for common clinical conditions relevant to advanced practice nursing in primary health care. Emphasis is placed on indications for correct drug choice, pharmacological mechanisms in association with drug interactions, side effects, contraindications, and patient education. Discussion of clinical judgments in the management and evaluation of therapeutic strategies for individual clients will be included. An assumption is that all students possess a basic knowledge of pharmacology and primary care management. Prerequisite: Admission to specialty. Prerequisite or corequisite: 360 or 361 or permission of the instructor. FALL. [3] Covington.

307b. Clinical Neonatal Pharmacotherapy. This course provides nurses preparing for roles within the Neonatal Nurse Practitioner specialty with knowledge of the pharmacotherapeutics for common classifications of drugs used to care for neonates and infants. The physiologic action of selected prescription drugs, unexpected client responses, and major untoward effects encountered in diseases of the neonates are discussed. Emphasis is placed on indications for correct drug choice, usual dose, routes of administration, pharmacological mechanisms in association with drug interactions, adverse effects, contraindications for use are included. Discussion of clinical judgments in the management and evaluation of pharmacologic therapeutic agents for neonatal use are emphasized. SPRING. [3] D’Apolito and Gregory.

307c. Clinical Pharmacology for Acute Care Adult Nurse Practitioners. The purpose of this course is to establish a knowledge base for clinical judgments in the pharmacological management and evaluation for individual patients as related to the role of Acute Care Adult Nurse Practitioners. Drug interactions, incompatibilities, side effects, and contraindications will be discussed. Appropriate patient education will be integrated The assumption is that all students possess a basic knowledge of pharmacology. FALL. [3] Pierce.

308. Models/Theories in Nursing. This course helps students understand the rationale and use of theory as the basis for nursing practice. It involves an examination and evaluation of the assumptions, concepts, and propositions inherent in selected nursing and related discipline theories. FALL, SPRING, SUMMER. [3] R. Johnson.

310. Developmental/Neonatal Physiology. This course provides an in-depth examination of human genetics and embryologic development of the fetus. The mechanisms involved in cell division, ganetogenesis, and inheritance patterns are addressed. The structural and functional development of fetal systems during critical periods are emphasized. Normal and abnormal fetal development and alterations in physiology are explored. Clinical implications of alterations in structure and physiologic functioning are also addressed. FALL. [3] Rossby and D’Apolito.

311. Theoretical Foundations of Child Development. A focus on the theoretical basis for child development, emphasizing the development of the child as an individual within the context of family and society. Considers factors and techniques which facilitate or interfere with healthy development, as well as issues in developmental assessment and consultation. Students will develop competence in promoting positive child development through child and parent education and counseling. FALL. [2] Wofford.

312. Care of the Child with Special Health Needs: Theoretical and Research Foundations. The focus of this didactic course is on the nursing care of children with special health needs and their families. Students will examine concepts and theories from the psychosocial sciences and apply relevant research findings to design interventions for children of all
ages. Emotional components of care will be considered for children and their families, building upon knowledge developed in N311. An in-depth study of a content area of the student’s choice will be required. Prerequisite: 311. SPRING. [3] Staff

313. Advanced Topics in Child Health Care. The focus of this didactic course is on the management of selected acute and chronic conditions in children by the pediatric nurse practitioner. The pathophysiology of the condition will be delineated. A developmental perspective will be used in relation to the management of the condition, as well as in incorporating the primary care and health promotion needs of the child. Strategies to assist the child and family in adapting to chronic conditions will be discussed. Prerequisite: 312. SPRING. [3] Staff

314a. Practicum in the Care of Children with Special Needs. This is a precepted clinical practicum focusing on the management of special health needs in children. Clinical experiences will provide students with the opportunity for health assessment and formulation of a comprehensive plan of care for children with special health needs. Nursing strategies to educate and assist children and families in adaptation to special health needs will be discussed and implemented. Weekly clinical conferences will provide students with the opportunity to examine the role of the pediatric nurse practitioner in the care of the child with special health needs. Students will explore relevant resources/research and apply the findings to the care of children and families. Prerequisite or corequisite: 304, 306, 307, 311, 312, 360. SPRING. [2] Staff

314b. Advanced Pediatric Primary Care Preceptorship. The focus of this clinical practicum is on implementation of the pediatric nurse practitioner role in delivering primary care to children, including children with special health needs. The preceptorship provides a broad practice experience which allows for synthesis of knowledge and skills acquired in prerequisite and corequisite course work. Emphasis is on providing comprehensive care to children and families across a variety of practice settings in collaboration with other health professionals. At least one-half of clinical hours will be in primary care settings. Weekly clinical conferences will focus on professional role issues for pediatric nurse practitioners. Prerequisite: 314a. R.N. licensure required. SUMMER. [4] Staff

315a. Introduction to Advanced Practice Procedure. This course provides students with an introduction to the advanced practice skills commonly performed by neonatal nurse practitioners. A step-by-step practical approach is taken to describe the procedures. The theoretical basis, indications, and complications for these skills will be emphasized. Students will also become NRP (Neonatal Resuscitation Program) Certified as part of this course.. Prerequisite or corequisite: 304c, 316, 317a. FALL. [1] Jennings and Scott.

315b. Essential Components of Neonatal Intensive Care Nursing. This course gives students a concise presentation of essential intensive care nursery concepts, skills, techniques, and equipment necessary for completing direct bedside assessment and care of neonates in a safe manner. Students will have the opportunity to practice in the clinical area, under the supervision of a clinical faculty member, the skills presented in this course at the staff nurse level. SPRING. [2] Staff.

316. Theoretical Foundations of Neonatal Care. This course focuses on the theory and research related to the health status and care of neonates and infants. The course will also help students in the use of critical thinking to foster health promotion, primary prevention of illness, and health maintenance. Growth and developmental issues, sleep/wake cycles, crying, newborn laboratory screening, feeding, immunizations, safety, infant behavior, and common parental concerns will be addressed. Normal variations and minor disruptions in aspects of newborn and infant health will also be emphasized. Knowledge synthesized from this course will provide an essential working foundation for future neonatal/infancy nursing course work. Prerequisite or corequisite: 304c, 310. FALL. [2] Jennings.
317a. Neonatal Pathophysiology I. This is the first of two sequential courses that examine the pathophysiology and management of ill neonates/infants and their families. Theory and research form the basis for discussions of clinical assessment and restorative care. This course emphasizes the role of the advanced practice nurse in the care of high-risk neonates/infants. Perinatal risk factors associated with variations in neonatal health and functioning are also examined. Prerequisite or corequisite: 304c, 310, 316. FALL. [3] P. Scott.

317b. Neonatal Pathophysiology II. This is the second of two sequential courses that examine the pathophysiology and management of ill neonates/infants and their families. Theory and research form the basis for discussions of clinical assessment and restorative care. This course continues to emphasize the role of the advanced practice nurse in the care of high-risk neonates/infants. Integration of previous knowledge of embryology, physiology, pathophysiology, interpretation of lab data, radiologic findings, and collaboration with other health professions are emphasized. Prerequisite: 317a. Corequisite: 307c. SPRING. [4] D’Apolito.

318. Neonatal Practicum. Clinical practicum and seminars provide opportunities for developing advanced skills in the nursing care of critically ill and recovering neonatal clients. Experiences in facilitating and evaluating continuity of care across several settings are a major thrust. Students may work collaboratively with adjunct faculty members on unit-based research projects as part of practicum. Advanced practice nursing roles and expert skills are critically examined in clinical and individual conferences. Prerequisite: 315ab, 317b. SPRING. [4] Staff.

319. Neonatal Preceptorship. Intensive integration and synthesis of theory and clinical practice in Neonatal Nursing. Clinical preceptorship and individual conferences provide opportunities to further develop expertise relevant to the assessment and management of groups of neonates. Students may elect to take on a caseload in order to validate the outcomes of their care. Prerequisite: RN licensure, 317ab, 318. SUMMER. [6] Staff.


321. Psychosocial Aspects of Aging. Psychosocial theories of aging are critiqued. Students examine selected age-related transitions in cognitive developmental and social role and support. Pathophysiology, clinical presentations, interventions, and outcomes are identified. Legal, ethical, economical, social, and policy issues impacting older adults and their care are examined. Prerequisite or corequisite: 320. SPRING. [2] Decker.


323. Practicum in Aged Health Care II. Students apply the roles and functions of the gerontology nurse practitioner in a variety of settings. Students apply selected gerontologi-
cal and nursing theories in their care. Knowledge of health, disease processes, and principles of rehabilitation are used in assessing older adults, families, and caregivers. Students develop a comprehensive plan of care. Cultural, social, legal, ethical, and policy issues are considered. Students complete their practicum with a nurse practitioner or physician. Prerequisite and corequisite: 322 required for all GNP students. SUMMER. [3] Gillette.

324. Gerontological Nursing Practitioner Preceptorship. Students function in a variety of roles specific to gerontology nurse practitioners. Students apply knowledge of aging to promote health, to manage disease states, and to educate older adults, families, and caregivers. Collaboration with the interdisciplinary health care team in providing health care is emphasized. Students complete their practicum with an advanced practice nurse or physician. Prerequisite: 322, 323, and RN licensure. SUMMER. [4] Gillette and Decker.

326. Women's Health Issues. Examines major historical, political, and cultural influences on the health care of women in the United States. Offers students the opportunity to develop a woman-centered holistic philosophy of care, which in turn will be the central concept in their women's health nursing practice. Permission of the instructor required. Prerequisite: 327, 328, 330, and 331. SUMMER. [1] Salisbury.

327. Theoretical Foundations in Women's Health. Consistent with the emerging definitions of women's health and women's health practice, this course examines a full range of health issues unique to women. Women's health specialization includes prevention, the societal and political determinants of health, patient education, and reconceptualization of women's relationships with health care providers. Health assessment and maintenance as well as disease identification and treatment are presented on a wellness to illness continuum. Students utilize current research in women's health and identify potential research opportunities. FALL. [3] A. Moore.

328. Practicum in Women's Health I. In this practicum, students will apply knowledge from the companion course, Women's Health, to the primary care of women. Students will develop and refine skills in health/physical assessment and diagnosis and, with guidance, begin to formulate individualized plans off care. Students will gain understanding of the role of a women's health nurse practitioner and its collaborative relationship with other health care professionals. Prerequisite or corequisite: 304a-b, 306, 307, 361a-b, and 327. FALL. [1] A. Moore and Dadderio.

328d. Practicum in Women's Health for Nurse-Midwifery. Knowledge from companion course, Theoretical Foundations in Women's Health, is applied to actual care of the female patient. Students refine skills in health/physical assessment and diagnosis and, with guidance, begin to formulate individualized plans of care. Students gain the experience of utilizing the nurse-midwifery management process in meeting the primary health care needs of essentially healthy women across the lifespan. Students have the opportunity to consult and collaborate with other health care professionals. Prerequisite or corequisite: 304a–304b, 306, 306b, 307, and 327. FALL. [1] McGill.

329. Violence and Abuse: Impact on the Health Care System. Explores the prevalence of violence and abuse in the United States and the impact of violence and victimization on the health care system. Focuses on the research literature related to prevention, assessment, and intervention with offenders, victims, and families by the nurse and other health care providers in health care facilities and the community. The health care provider's responsibility to the criminal justice system is delineated. Interventions with the violent patient in health care facilities and protection of the health care professional are analyzed. Prerequisite or corequisite: 226 or consent of instructor. SPRING. [3] Laben.
330c/d. Theoretical Foundations of Ambulatory Obstetrics. Building on prior knowledge of an experience with women's health, students will begin to critically examine and evaluate ideas and research related to pregnancy and childbearing in the outpatient setting. This course focuses on advanced nursing and midwifery practice through the comprehensive assessment and case management of the childbearing family. Prerequisite or corequisite: 304a–b, 306, 307, and 361a–b. SPRING. [3] Daddario and McGill.

331a. Practicum in Critical Care Obstetrical Nursing I. Students apply knowledge gained in the companion course 332a; learn selected, advanced skills in monitoring/assessing the altered physiologic functions manifested during acute or critical illness of adults; and plan, implement and evaluate care of selected patients. Prepares the student for advanced nursing practice with critically ill, pregnant patients. Prerequisite or corequisite: 304a, 306, and 332a. SPRING. [2] Staff.

331c. Practicum in Ambulatory Obstetrics. In the second practicum, students apply advanced knowledge of normal physiology, pathophysiology, and psychosocial concepts to nursing care of families during the perinatal experience. Students focus on care of the childbearing family and learn specific components of advanced nursing practice from self-directed clinical experience with expert professional nurse/physician preceptors in a variety of settings. Prerequisite: 304a–b, 307, 327, 328, and 361a–b. Corequisite: 306 and 330c/d. SPRING. [4] Daddario and Moore.

331d. Practicum in Ambulatory Obstetrics for Nurse Midwifery. In the second practicum students apply advanced knowledge of normal physiology, pathophysiology, and psychosocial concepts to nursing care of families during the prenatal experience. Students focus on care of the childbearing family and learn specific components of nurse-midwifery and advanced nursing practice from clinical experience with guidance of expert professional nurse, nurse-midwifery, nurse practitioner, or physician preceptors in a variety of settings. Students have the opportunity to apply principles of teaching and learning in prenatal and primary care visits and to develop class objectives. Prerequisite: 304a–b, 306, 306b, 327, and 328. Corequisite: 307, 330c/d, and 361a–b. SPRING. [4] McGill.

332a. Theoretical Foundations of Critical Care Obstetric Nursing. This course will assist the student to develop an understanding of selected clinical concepts of adult critical care and integrate this knowledge with concepts of perinatal nursing. 332a focuses on the mother and fetus, offering education for advanced nursing practice with women/families experiencing an acute/critical illness or complex health care needs related to childbearing. Prerequisite or corequisite: 306. SPRING. [3] Baird.

334. Practicum in Women's Health Nursing. In the final practicum, students are given the opportunity to integrate knowledge and refine advanced practice skills by functioning in the nurse practitioner role. Selected preceptors will provide guidance and supervision to individual students. Prerequisite or corequisite: RN licensure, 304, 306, 307, 327, 328, 330, 331c, 365, 366, and 367. SUMMER. [5] Moore and Daddario.

335. Practicum in Intrapartum Nurse-Midwifery Care. This course is designed for students to examine the theory and skills which are the foundation for nurse-midwifery practice in intrapartum health care. Students will apply the nurse-midwifery management process to an identified clinical caseload of childbearing families during the intrapartal period. Prerequisite: R.N. licensure, 327, 328, 330, 331, 304, 305, 307, and 361a–b. SUMMER [3] Petersen.

336. Theoretical Foundations of Intrapartum Nurse-Midwifery Care. This course is designed for students to examine the theory and skills which are the foundation for nurse-midwifery practice in intrapartum health care. Students will apply the nurse-midwifery management process to an identified clinical caseload of childbearing families during the

337. Practicum in Postpartum and Neonatal Nurse-Midwifery Care. This course is designed to develop an advanced knowledge base in nurse-midwifery management of the essentially normal postpartum woman and the normal neonate. Students will integrate theories and research findings to develop strategies to manage women and newborns experiencing normal childbearing experiences. The nurse midwife will be able to facilitate parental-newborn family relationships and to manage collaboratively the normal postpartum woman and normal neonate with common deviations requiring interventions and/or follow-up. Students will have the opportunity to provide continuity of care to selected families during antepartum and intrapartum periods. Prerequisite: 304, 305, 306, 307, 327, 328d, 330, 331d, 338, 361a–b, and R.N. licensure; corequisite: 338. SUMMER [1] Staff.


339. Nurse-Midwifery Advanced Clinical Integration Experience. The nurse-midwifery role practicum is designed to allow the student an opportunity to assume the responsibility for the care and management of essentially normal women throughout the life cycle, focusing on the childbearing family. The course provides the opportunity for full-scope nurse-midwifery practice including primary health care of the essentially healthy woman. The students will focus on a comprehensive assessment of the family health system as the basis for effective delivery of health care. A variety of clinical experiences will include alternatives in traditional patient care management with the focus on the professional role of the beginning nurse-midwife. Prerequisite: 327, 328, 330, 331, 335, 336, 337, and 338. Prerequisite or corequisite: 384. FALL. [6] Petersen and staff.

340a. Theoretical Foundations of Episodic/Chronic Problems in Acute/Critical Care I. Explores, at an advanced level, the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected acute health problems. The course goals are met through didactic content and case study analyses. Each student demonstrates his or her ability to analyze, integrate, and synthesize pathophysiologic concepts for collaborative management of adult health problems. Prerequisite or corequisite: 304ab, 306. FALL. [3] King.


340c. Theoretical Foundations of Episodic/Chronic Problems in Acute/Critical Care III. nursing 340B explores, at an advanced level, the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic health problems in acute/critical care. The course goals are met through didactic content and case study analyses. Each student demonstrates his/her ability to analyze, integrate, and synthesize pathophysiologic concepts for collaborative management of adult health problems. Prerequisite or corequisite: 340b. SUMMER [3] King.
341. **Theoretical Foundations of Oncology Nursing.** Consists of didactic content related to the care of patients with neoplastic disorders. Enables the student to explore the roles of the oncology clinical nurse specialist, understand the pathophysiologic processes underlying oncogenesis, and evaluate the rationale for and the effects of current oncologic treatment modalities for various neoplastic disturbances. Emphasis is on the student’s ability to integrate the pathophysiological principles attributed to neoplastic alterations and how these interfere with treatment modalities. **SPRING. [3] Pierce.**

342. **Practicum in Acute Care Nursing.** 342 is designed to provide clinical experience in development and application of the roles of the acute care adult nurse practitioner. The clinical setting will be used for application and evaluation of nursing theory and pathophysiology and psychosocial concepts. The student will practice in clinical settings for a total of 280 hours. Clinical conferences will be held weekly and will focus on pathophysiology, diagnoses, and therapeutic management related to episodic/chronic problems in acute/critical care in the adult population. Prerequisite: 304ab, 306, 308, and 340a. Prerequisite or corequisite: 340b. **SPRING. [4] King and staff.**

343. **Acute Care Nurse Practitioner Preceptorship.** 343 is the final clinical preceptorship, and it is designed to provide clinical experience in and application and integration of the roles of the acute care adult nurse practitioner. The clinical setting will be used for application, synthesis, and evaluation of nursing theory and pathophysiological and psychosocial concepts. The student will practice in clinical settings for a total of 280 hours. Clinical conferences will focus on pathophysiology, diagnosis, and therapeutic management related to episodic/chronic problems in acute/critical care in the adult population. Prerequisite or corequisite: R.N. licensure; 304ab, 306, 307, 340a–b–c; and 342. **SUMMER [5] King.**

344. **Special Topics in Orthopaedics.** 344 explores the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic or critical orthopaedic health problems. The course goals are met through didactic content and case study analyses. Each student demonstrates his/her ability to analyze, integrate, and synthesize pathophysiologic concepts for collaborative management of adult orthopaedic problems. Prerequisite: 304ab. **SPRING. [2] Hodge.**

346a. **Nursing Care of the Patient Experiencing Basic Cardiac Dysrhythmias.** This elective course is designed to provide the student with the tools to interpret basic cardiac dysrhythmias. Major focus will be on recognition of the signs and symptoms of each rhythm disturbance and the collaborative management of each. Health care teaching will also be included. This course is a prerequisite to interpretation of advanced arrhythmias and 12-Lead EKG readings. **SPRING, SUMMER. [1] Sweeney.**

346b. **12-Lead EKG Interpretation.** This elective course is designed to provide the student with a systematic format to assess alterations in the cardiac electrical conduction system. Focus will be on the 12 Lead EKG changes in order to provide the student with knowledge to interpret the changes, to correlate nursing assessment findings, to anticipate complications, and to collaborate in the management of each patient situation. Prerequisite: 346a. Student must be in graduate standing. **SPRING, SUMMER. [2] Sweeney.**

347. **Nursing Management of the Rehabilitation Client.** 347 examines the theoretical bases needed for promotion of patient/client abilities in order to maximize individual and family resources following debilitating illness or injury. 347 also examines the role and impact of nursing care delivery in rehabilitation and long-term care settings. Prerequisite or corequisite for Acute Care Nurse Practitioner: 340C; 343. Prerequisite or corequisite for Geriatric Nurse Practitioner: 321; 322; 323; and 324. **SUMMER [3] Bach.**
348. Conceptual Foundations of Nephrology for Adult Acute Care Nurse Practitioners. This elective course consists of didactic content related to the care of adults with renal diseases, with emphasis on pathophysiology, assessment, diagnosis, and collaborative management of patients with acute and chronic renal failure. Concepts of hemodialysis, peritoneal dialysis, continuous renal replacement therapy, and renal transplantation are explored. The role of the acute care adult nurse practitioner in collaborative management is emphasized. Prerequisite: 304a–b, 306, 308, and 340a. Corequisite: 307c, 340b, and 342. SPRING [3] Lancaster.

349. Directed Study in Critical Care Nursing. Principles of critical care nursing are explored, examining specific assessment parameters and skills. The scientific rationale or physiological basis for each assessment parameter or skill is examined. In addition, identification of the need for each assessment parameter or skill, based on pathophysiology, implementation of the assessment parameter or skill, and the relevant criteria will be discussed. Possible complications and research related to each assessment parameter or skill will also be explored. The critical care nursing assessment parameters and skills will then be integrated into advanced nursing practice. Prerequisite: 340 or permission of instructor. SPRING. [1] King.

350. Models and Theories of Advanced Psychiatric Mental Health Nursing. This course provides core theoretical content in relation to advanced psychiatric mental health nursing. Students are introduced to the process of theory development and evaluation, and the role of these in advanced psychiatric mental health nursing practice. With this as a basis, Herriuck et al.'s (1991) conceptual model for providing a continuum of care frames the remainder of the course. This model includes Neuman’s systems model for nursing, Caplan’s levels of prevention of mental disorders, and concepts of differential therapeutics to delineate levels of care and the appropriate settings for the provision of that care. FALL [3] Sinclair and Thompson.

351. Theoretical Foundations and Practicum in Primary Psychiatric Mental Health Nursing across the Lifespan. This course provides the theoretical content and clinical practice for diagnosing, assessing, and intervening in functional and dysfunctional patterns of persons and their families throughout the life span. Content and experiential work related to practice skills are provided. Case material and clinical experiences provide the student with the opportunity to apply theory, practice assessment skills, implement interventions, and evaluate outcomes. Seminar discussions are led by faculty and/or students. Students have the opportunity to integrate theory and practice in supervised clinical experiences. Analysis of process dynamics and nursing interventions occurs during supervision. The student will work collaboratively with other members of the mental health team. Prerequisite or corequisite: 350 and 352. FALL. [4] Adams.

352. Biobehavioral Aspects of Psychiatric Disorders. Presents the theoretical basis for the biological and psychopathologic aspects of advanced practice in psychiatric–mental health nursing. Concepts from neurophysiology, neuropsychology, and social sciences are examined for their applications to practice. Major Axis I and Axis II disorders across the lifespan are studied, with emphasis on integration of theoretical knowledge for assessment and treatment. Proficiency in conducting a mental status exam and a neurological or developmental exam is achieved. Lectures and discussion are led by faculty and expert practitioners in various areas. FALL. [3] DeBaldo.

354. Theoretical Foundations of Psychiatric Mental Health Nursing with Groups and Families. This seminar course focuses on the mastery of concepts from group, family, and nursing theories which are the foundation for advanced psychiatric mental health nursing
Increasing emphasis is placed on group and family psychotherapy, consultation, and management. Emphasis is placed on the integration of related theories into practice and a nursing conceptual framework. Prerequisite or corequisite: 350 and 352. SPRING [2] Adams.

356abc. Practicum in Psychiatric Mental Health with Individuals, Groups, and Families. Course builds on the first advanced practicum course by expanding the student's ability to identify and apply concepts, theories, and principles to larger and more complex groups. In addition, the student gains skill in implementing planned intervention with individuals, families, and groups so that patterns in self and others are identified accurately and with regularity. Caseload management skills are further developed. Prerequisite or corequisite: 304a–b, 350, 351, 352, 354. SPRING. [2] Staff.

357. Theoretical Foundations of Systems in Psychiatric Mental Health. This lecture/seminar course focuses on the societal, legal and systems factors which influence advanced practice and the delivery of primary mental health care. Emphasis is placed on current practice issues including the evaluation of outcomes and legal, ethical, advocacy and policy issues related to mental health care. Application of standards and methodologies for utilization review, CQI and outcomes measurement are explored. This course provides the opportunity for students to synthesize previous coursework related to their professional role development as psychiatric mental health nurse practitioners. Strategies for marketing the role will be explored. Prerequisite or corequisite: 354 and 356. SUMMER. [2] Seidel.

358. Advanced Psychiatric Mental Health Nurse Practitioner Practicum III. This course provides the student with the opportunity to synthesize theory and Psych-NP proactive roles in selected settings. Increasing emphasis is placed on the critical analysis of clinical problems and needs of specialty populations. Students are able to function more independently. Prerequisite or corequisite: 350, 351, 352, 354, 356, 398, RN licensure, and all PMHNP courses. [4] Staff.

359. Women and Addiction. Enables the student to better understand, recognize, assess, and treat the problems of addiction in women. Addresses the nature of the problem, the way women grow and develop, family issues, intervention, prevention, treatment, and recovery. SPRING. [3] Hunt.

360. Theoretical Foundations of Child and Adolescent Primary Care Nursing. In this didactic course, knowledge is presented that is necessary for the practice of primary health care nursing of children and adolescents. Course content includes the principles of health promotion, disease prevention, and assessment and management of common primary health care problems in children and adolescents is delineated. The impact of the family on child an adolescent primary health care is emphasized. Prerequisite or corequisite: Graduate or post-graduate standing. 304a–b, and 304c. FALL. [3] Bradley and Liehr.

361a. Diagnostic Reasoning and Management in Adult Primary Care. A didactic course providing students with the knowledge of primary health care nursing of adults. Includes principles of diagnostic reasoning and management for common diagnoses in the adult population. The role of the advanced practice nurse as a provider of primary care for adults is delineated. Prerequisite or corequisite: 304a, 361b. FALL. [3] Coleman and Reeves.

361b. Seminar in Adult Primary Care. A seminar course providing students with a case presentation–based discussion of diagnostic reasoning and management of common diagnoses in the adult population. Small groups will include students and faculty members with the same specialty focus. Prerequisite or corequisite: 304a–b, 361a. FALL. [1] Staff.
362. Practicum in Primary Health Care of the Child. This course is a clinical practicum focusing on child health care with emphasis on health promotion, management of common health problems, and client education. Ad developmental approach is used in assessing the child and formulating the treatment plan. Learners will participate in a clinical rotation in pediatric health care settings which provide the opportunity for health assessment of the child and the formulation of a comprehensive plan of care. Learners will also participate in clinical conferences where various pathophysiological and psychological processes encountered with the child and his/her family will be discussed. The role of the nurse practitioner as a primary health care provider in a variety of pediatric settings will be examined. Learners will explore relevant resources/research related to child health care and apply findings to the care of clients. Prerequisite or corequisite: 304a, 304b, 304c, 307, 311, 312, 313, 360, and 365. SPRING, SUMMER. [2] Staff.

363. Practicum in Primary Health Care of the Adult. Clinical practicum focuses on adult health care, with emphasis on health promotion, management of common health problems, and client education. Learners participate in a clinical rotation in adult health care settings that provide the opportunity for health assessment of the adult and formulation of a comprehensive plan of care. They also participate in clinical conferences and discuss various pathophysiological processes encountered with adults and their families, as well as their psychological needs. The role of the nurse practitioner as a primary health care provider in a variety of adult settings is examined. Learners explore relevant resources related to adult health care and apply their findings to the client situation. Prerequisite or corequisite: 304ab, 306, 307, 361. SPRING, SUMMER. [3] Staff.

364. Primary Care Preceptorship. The preceptorship is a clinical course in which the learner implements the role of the nurse practitioner as a primary care provider. It builds upon the courses, 362, Practicum in Primary Health Care of the Child, and 363, Practicum in Primary Health Care of the Adult. The focus is on health promotion, patient education, and intervention in common health problems. Collaboration with other health care professionals in the provision of primary health care is emphasized. Prerequisite: 304a–b, 306, 307, 360, 361, 363, and RN licensure. SUMMER. [4] McEvoy and staff.

364b. Adult Nurse Practitioner Preceptorship. A clinical course in which the learner implements the role of the nurse practitioner as a primary care provider. Focus is on health promotion, patient education, and intervention in common health problems. Collaboration with other health care professionals in the provision of primary health care is emphasized. Students may select a clinical area of interest for this experience. Prerequisite: 304a–b, 306, 307, 360, 361a–b, 363, and RN licensure. SUMMER. [3] Staff.

368. Theoretical Foundations of Occupational Health I. This course introduces the principles of occupational health, including industrial hygiene, ergonomics, and toxicology, and their implications for occupational health nursing practice. The focus is on health in the workplace including workplace risk assessment and risk reduction. Emphasis also is on the assessment and primary care management of existing occupational illness, Nursing interventions to reduce risk, such as screening, biological monitoring., Case management, health promotion, and collaboration within the interdisciplinary occupational health team, are critically analyzed. Prerequisite or corequisite: Graduate or post-graduate standing. SPRING. [2] Staff.

369b. Occupational Health Nursing Practica II. This clinical practicum provides the student with an opportunity to implement the role of the occupational health/adult nurse practitioner independently and in collaboration with other health care professionals. Students are responsible for the management and delivery of occupational health nursing services and primary health care in occupational health settings. The course emphasizes the improvement, protection, and restoration of the health of employees and groups. Prerequisite: 363 and 361a–b, 369a–b, 368. Corequisite: 374. SPRING. [3] A. Johnson.

370. Independent Study, Non-Clinical. Content varies according to individual needs and interest. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student’s record. [Variable credit: 1–6 each semester]

371. Independent Study, Clinical. A program of independent study in a selected area of nursing practice under direction of a faculty sponsor. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student’s record. [Variable credit: 1–6 each semester]

372. Courses Offered Jointly with the School of Medicine. Schedule of courses available in the School of Nursing registrar’s office. Prerequisite: consent of the instructor. [Variable Credit]

373. Directed Study, Research. A program of study in a selected area of nursing research under direction of a faculty sponsor. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student’s record. For this course to fulfill a terminal degree requirement, the student must have 375 as a prerequisite and 376 as a prerequisite or corequisite. [Variable credit: 1–6 each semester]

374. Theoretical Foundations of Occupational Health II. This course is designed for advanced practice students who have successfully completed 368. The course will survey the history of occupational health nursing; critique current roles assumed by advanced practice nurses specializing in occupational health; investigate the complex legal and regulatory frameworks within which occupational health nurse practice; and analyze strategies for illness and injury, and provide quality primary care services to working populations. Students will also develop strategies essential to implementing health education and health promotion programs among adults and establishing independent practices. Prerequisite: 368. [2] Staff.

375. Research Methods. Uses scientific methods to analyze and reformulate nursing practice problems with emphasis on concepts of quantitative research design. Elements of research critique are taught to promote understanding of published nursing research and research utilization. SPRING. [3] Dwyer and staff.

376. Inquiry in Nursing. Focuses on the interrelationship between theory, practice, and science from the perspective of the advanced practice nurse. The nature of nursing as a practice-oriented discipline is discussed. Addresses approaches to knowledge generation and testing, including review of common scientific terminology, major research designs, and methods. Considers nursing’s disciplinary values and their relationship to science and practice, including ethical requirements for scientific inquiry. Processes of critical appraisal of scientific and clinical literature and of problem formulation in nursing are discussed. Prerequisite: 375. Corequisite: 308 and specialty level clinical course. SUMMER. [3] Carpenter and staff.

377. Master’s Project. Topic must be related to student’s specialty. Prerequisite: 375; prerequisite or corequisite: 376. [Variable credit: 1–3]
379. **Thesis.** Topic must be related to student’s specialty. Prerequisite: 375; prerequisite or corequisite: 376. [Variable credit: 1–3]


381. **Health Informatics.** Health informatics has been defined as the management and transformation of nursing data into health information and knowledge for the purpose of improving patient care. This course is designed as a survey course of health informatics with a particular focus on information systems for primary care settings, utilization of community health databases, and the use of databases for outcomes management. Students will address a clinical data management need in their specialty area with a database project. Depending on their specialty, students would use this project to organize-clinical information pertinent to individual patient care, the management of health care systems, or assessment of the health patterns of populations and aggregates. In addition, students will learn how to use databases to identify, operationalize, and track outcomes relevant to their advanced practice roles. SPRING. [3] Ozbolt.

382. **Health Systems Management.** This course will focus on establishing and implementing strategic initiatives based on the external environment in a variety of healthcare settings using defined business/management skills and processes. These settings will include managed care organizations, community-based clinics, group practices inclusive of physicians and physician/nurse practitioners, and elements within integrated delivery system. This course provides the foundation for managing in new settings with future course adding skills to this core inclusive of financial management, QI and outcomes measurement, informatics and leading through change. FALL. [2] Cook and Cooper.

383. **Continuous Quality Improvement and Outcome Measures.** Surveys the major conceptual leaders and theoretical underpinnings of the quality improvement movement. Special emphasis on service organizations. Students learn to apply quality improvement models in the workplace. Prerequisite or corequisite: graduate standing. FALL. [3] Norman.

384. **Leadership and Management.** Nurse-midwives, as advanced practice nurses midwives are viewed as potential national and international leaders and managers of clinical practice and health care. Integral to sound practice is the acquisition of frameworks of management which contribute to understanding interdisciplinary and intraorganizational as well as organizational relationships. Prerequisite or corequisite: Admission to midwifery program. SPRING. [2] Petersen.

385. **Health Care Financial Management.** Provides a basic introduction to accounting, finance, marketing, and health care economics. Students apply financial and marketing principles to health care management problems. Covers several financial analysis techniques, capital budgeting techniques, competitive strategies, and reimbursement issues. Students learn to use computerized spreadsheets to construct budgets and a business plan. A separate section offered to non-administration majors provides additional content related to the financial management of a community-based clinic. FALL. [3] Brooking.

386. **Management Practicum I.** Provides students with an opportunity to work closely with a manager in a variety of health settings. The student will be exposed to positive role modeling while contributing to the functioning of the health care agency. Student work on agency designated projects throughout the practicum. Prerequisite or corequisite: R.N. licensure. Health systems management students must have completed or be currently enrolled in all specialty courses except for 387, 389 and 391. MSN/MBA students must have completed or be currently enrolled in 380, 381, and 382. SPRING, SUMMER. [3] Staff.
387. Management Practicum II. Provides students with the experience of assuming a closely supervised managerial role in a health care agency or a managed care organization. Working with a health care manager in a setting of their choice, students will be actively involved in decision making processes and personnel relations in the agency. In a project designed to integrate and utilize student knowledge of leadership and management, and human relations processes of their assigned agency. Students will submit a paper for faculty review that incorporates quality improvement and change theory in suggesting methods of improving each of these processes. Prerequisite or corequisite: RN licensure. Health systems management students must have completed or be currently enrolled in all specialty courses and all core courses. MSN/MBA students must have completed or be currently enrolled in all required VUSN courses. SPRING, SUMMER. [3] Staff.

389. Population-Based Case Management Seminar. Case management methodology is explored from its earliest history in social work to the various models currently employed in health care. Comparisons are made among acute care, community-based, and insurance models. The development, implementation, and use of critical pathways to monitor and achieve outcomes of care is critically examined. Prerequisite or corequisite: graduate standing; completion of all theoretical foundation courses and at least one clinical course within the specialty for clinical students; completion of all theoretical foundation courses and N385 for health systems students. SUMMER. [2–3] Staff.

390. Writing for Publication. Elective course designed to help students understand the publication process and to improve scholarly writing abilities. Each student will prepare a manuscript and submit it to a selected nursing journal for consideration for publication. Students are encouraged to have a topic and target journal identified before the class begins. Offered on a Pass-Fail basis. SUMMER. [3] Lancaster.

391. Strategic Management for Health Care Enterprises. This course will focus on long term strategic issues that will affect the financing organization and delivery of health care services. Market-driven organizations/services are at the core of the course, with emphasis on designing as well as making operational strategy at the executive and middle management levels as individuals and as part of a team. Prerequisite or corequisite: all HSM courses. SUMMER. [3] Staff.

392. Interdisciplinary Foundations of Health Care. This course emphasizes nursing as well as other disciplinary perspectives that are foundational to the provision of advanced practice nursing in today's society. These disciplines and theoretical perspectives include health care policy, marketing, economics and health care finance, management theories, case management, outcomes management, conflict management theory, ethical decision making, and group theories/concepts applied to team functioning. This content is then contextualized and operationalized as it supports advanced practice nursing. Because of the importance of working collaboratively, students have the opportunity to observe and critique interdisciplinary teams. Students then develop strategies for enhancing team functioning. Prerequisite or corequisite: specialty level or permission of instructor. SPRING [2] Sinclair.

396a. Selected Topics in Physiology. 396a is a continuation of 306. It is offered as an elective course for those students who wish to study integrations among body systems and physiologic processes that were not presented in 306. Prerequisite: 306 or permission of the instructor. SPRING [3] Lancaster.

396c. Special Topics Nursing: HIV/AIDS. Consists of didactic content related to care of persons with HIV/AIDS. Enables the student to explore roles of the nurse in advanced practice HIV/AIDS arenas, understand the pathophysiologic processes underlying HIV infection, evaluate the rationale for the effects of current treatment modalities and analyze the interre-
relationships among the physical, psychosocial, spiritual, and political realms associated with the disease. Students taking the course for 3 hours credit will write an in-depth scholarly paper pertaining to an area of interest in HIV/AIDS nursing. SPRING. [1–3] Fogel.

**396f. Special Topics Nursing: Concepts of ER/Trauma Nursing.** Provides students with the knowledge base and skills necessary to render trauma care and provides a foundation for future learning. Essential evaluation, stabilization, and critical time management techniques will be discussed. Skills practice sessions, ambulance skills, and ER clinicals are included. Due to space limitations, preference will be given to students in the critical care specialty areas. Prerequisite: Specialty standing and RN licensure. Corequisite: 346 or prior knowledge of basic dysrhythmias. SUMMER. [3] King.

**396g. Analysis of Laboratory and Diagnostic Patient Data.** This elective course provides the student with the theoretical basis required to perform an in-depth interpretation of selected serum, urine, and radiologic diagnostic patient data. A variety of specialized test will also be included. Lectures and case studies will provide the student information to assist in developing a differential diagnosis and assessing effectiveness of interventions. Class discussions will examine ways to apply knowledge laboratory and diagnostic tests to a variety of clinical settings. Other information, such as cost and how to order tests, will also be included. Prerequisite: Completion of bridge year RN license, or permission of instructor. Prerequisite or corequisite: 306. SUMMER. [3] Pierce.

**397. Interdisciplinary Management of Pain.** Provides the student with an understanding of the multidimensional nature of pain across the lifespan. Students explore assessment and management of pain related to acute disease processes, chronic illness, and cancer, with emphasis on appropriate application of assessment and intervention strategies. Students identify and critically examine theories and research related to interventions for pain management. The roles of a variety of health care providers in managing pain will be addressed. Prerequisite or corequisite: 375 or consent of instructor. SPRING. [3] Wells.


### Doctoral Nursing Courses

**NRSC342. Theory Development in Nursing.** Examination and critique of structural components and processes used for theory building in nursing. Students examine nature of theory, theory development as a process, and the organization of knowledge for nursing. FALL. [3] LaMontagne. (Not offered in 1999)

**NRSC 351. Scientific Basis of Nursing Therapeutics.** Critical appraisal of the scientific basis for commonly used interventions in nursing care. Interventions pertinent to a nursing problem in the student’s field are selected for evaluation. Use of meta analysis, randomized trial and program evaluation research strategies are discussed. SUMMER. [3] Wells.

**NRSC 363. Human Responses in Health and Illness.** Critical analysis of factors known to influence human responses in health and illness states, using a broad stress and coping perspective as well as theoretical orientations guiding research on human health and illness. Students conduct a critical and reflective analysis of existing and emerging scientific knowledge in a chosen field of study. SPRING. [3] LaMontagne.
NRSC 365. Health and Environment. This course explores and critically analyzes the current theoretical and empirical approaches to understanding the interaction of health and environment in affecting individuals' health. Health behaviors that arise from persons and from environmental factors are discussed. Conceptualizations of health, health promotion behaviors, and prevention of disease are examined in an environmental context. FALL. [3] Lutenbacher.

NRSC 379. Special Topics in Nursing Science. Discussion of research and current developments of special interest to faculty and students. May be repeated for credit. FALL, SPRING, SUMMER. [Variable credit: 1-3] Staff.

NRSC 390. Independent Study in Nursing Science. Individualized study and reading in areas of mutual interest to the student and faculty member. Prerequisite: consent of instructor. FALL, SPRING, SUMMER. [Variable credit 1-3] Staff.

NRSC 392. Comparative Research Methods. This course provides an overview and comparison of quantitative and qualitative methods and designs for nursing research. The course is divided into two segments: the first covers general issues associated with the conduct and critical review of research; the second covers research designs associated with nursing and health-related research. FALL. [3] Staff.

NRSC 393. Quantitative Research Methods. In-depth analysis of quantitative research methods employed in nursing and health-related research, focusing on topics such as design, sampling, and instrumentation. An elementary knowledge of statistics is assumed. Students develop a research instrument and write a proposal to establish its psychometric properties. SPRING. [3] Wallston.

NRSC 394. Qualitative Research Methods. An overview of qualitative research methods commonly used in nursing and other health-related sciences. Course content includes discussion of philosophical orientation to qualitative methods, epistemology and the qualitative paradigm, appropriate application of methods such as grounded theory methodology, phenomenology, ethnography, and content/narrative analysis. SUMMER. [3] Dwyer.

NRSC 395. Research Practicum. This course provides students with exposure to and involvement in the research process. Learning activities are based on student need and interest and determined by the available faculty research programs. FALL, SPRING, SUMMER. [Variable credit 1-3] Doctoral Program Faculty.

NRSC 396. Writing for Publication. Designed to assist students with understanding the publication process and to improve their scholarly writing abilities. Students prepare a manuscript for submission to a peer-reviewed journal. SUMMER. [3] Lancaster.

NRSC 399. Ph.D. Dissertation Research
LOVELY ABRAHAM, Adjunct Instructor in Nursing
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MARY BUFWACK, Adjoint Assistant Professor of Nursing

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B.A., Wheaton [Illinois]  
Piney Flats, Tenn.

Mary Waldrop Nelson  
B.S.N., Tennessee [Knoxville]  
Nashville, Tenn.

Loretta Weckerly Netterville  
B.S., B.S.Nsg., North Dakota [Grand Forks]  
Grand Forks, N. D.

David Andrew Palm  
B.A., St. Meinrad; M.A., Indiana; M. Div., St. Meinrad School of Theology; M.A., Vanderbilt  
Los Angeles, Calif.

Anna Lyn Rabetoy  
B.S., California [San Diego]  
San Diego, Calif.

Sarah Margaret Reese  
B.A., Vanderbilt  
St. Louis, Mo.

Diane Elizabeth Rockwell  
B.S., Radford  
Charles Town, W. Va.

Carin Keesling Schofield  
B.S., B.S.N., Auburn  
Huntsville, Ala.

Lee Ann Schulz  
B.S., Marquette  
Schofield, Wis.

Irene Vivian Spence  
B.S., David Lipscomb  
Kingston Springs, Tenn.

Claudia A. Tate  
B.S., B.S.N., Austin Peay State  
Nashville, Tenn.

Stephanie Ann Williams  
B.S.N., Murray State  
Old Hickory, Tenn.

**Family Nurse Practitioner**

Todd Frank Ambrosia  
Columbia, Md

Sue Asher  
B.B.A., Texas [Permian Basin]  
Nashville, Tenn

Susan Leigh Ayers  
B.S., David Lipscomb  
Goodlettsville, Tenn

Margaret Jewett Bender  
B.S.N., Vanderbilt  
Nashville, Tenn.

Jakeelli Kimberly Bennett  
Arkadelphia, Ark.

Lynnette Leona Berggren  
B.S., Wisconsin [Green Bay]  
Green Bay, Wis.

Johanna Marie Bieberly  
Pukwana, S. D.

Julie Diane Bird  
B.A., LaGrange  
Watkinsville, Ga.

Patricia Glen Bryan  
B.S.N., Virginia  
Nashville, Tenn.

Cristi Lynn Campbell  
B.S.W., Missouri Western State; M.S.W., Missouri  
Cameron, Mo.
Karen Sue Campbell Madison, W. Va.
Anne Cannon Sparks, Nev.
Andi Elizabeth Cross Nashville, Tenn.
   B.S., David Lipscomb
Christine Ashburn Demers Thompson Station, Tenn.
   B.S., David Lipscomb
Bruce Graham Douglas Sydney, Australia
   B.S., Belmont
Linda L. Erlandson Philomath, Oreg.
   B.S., Oregon State
April Dawn Faircloth-Collier Antioch, Tenn.
   B.S., Belmont
James Eric Flener Versailles, Ky.
   B.S.N., Louisville
Carol Marie Foley Los Gatos, Calif.
   B.S., San Jose State
Robin Elizabeth Foutch Old Hickory, Tenn.
   B.S., Samford
Tanya Shea Goins Ledbetter, Ky.
   B.S.N., Murray State
Rebecca Lynn Hansen Berrien Springs, Mich.
   B.S., Andrews
Robyn Sue Hardin Nashville, Tenn.
   B.S., Pembroke State; M.A., Tennessee Technological
Deborah Payne Heuerman Fountain Valley, Calif.
   B.A., California [Los Angeles]
Laurin Brownlee Howell Nashville, Tenn.
   B.S., Rhodes [Tennessee]
Lani Akiko Kajihara-Liehr Nashville, Tenn.
   B.S.N., Tennessee [Memphis]
Nodira Jumshedovna Karimova Nashville, Tenn.
   B.S., Albertson
John Edward Killgore Nashville, Tenn.
   B.S., University of the South
Cynthia Ann Langford Nashville, Tenn.
   B.A., Oklahoma; M.Ed., Central State [Oklahoma]; Ph.D., Vanderbilt
Christopher Martin LeFave Cookeville, Tenn.
   B.A., Montclair State
Steve Thornton Leonard Memphis, Tenn.
   B.A., Samford
Sheri Diane Lewis Anderson, Ind.
   B.A., Taylor
Kimberly Jean Logsdon Clarksville, Tenn.
   B.S.N., Austin Peay State
Lara Christian Lovell Rockwall, Texas
Holly Cobb Lucenay Morristown, Tenn.
   B.A., North Carolina
Janice Marie Lynn Manchester, Tenn.
Wenhua Ma Charolotte, N.C.
   B.S.N., North Carolina [Charlotte]
Amy Marie Majchrowitz Racine, Wis.
   B.S., Wisconsin [Green Bay]
Denis Michael Malcolm
  B.A., Fordham
  New York, N.Y.

Richard Anthony Mann, Jr.
  B.S. in Nurs., South Carolina
  Prosperity, S.C.

Jessica Elizabeth Mayer
  B.A., Vanderbilt
  Nashville, Tenn

Jennifer Lynn McCann
  B.S., Northern Illinois
  Bristol, Ind.

Gary F. McGuire
  B.A., Berry; M.S., Tennessee State
  Nashville, Tenn

Jacqueline Fitzgerald McMorris
  B.S., Tougaloo; M.S., Jackson State
  Woodville, Miss

Suzanne Mills
  B.S., Christian Brothers
  Olive Branch, Miss.

Amy Lynn Minert
  B.A., Macalester
  Flint, Mich.

Mark Andrew Murr
  B.S.N., Louisville
  Louisville, Ky.

Pamela Anne Nelson
  B.S., Alabama [Birmingham]
  Nashville, Tenn.

Elisia Acker Nunn
  B.A., California [Davis]
  Sunnyvale, Calif.

Melissa Ott
  B.S., Pittsburgh; B.S.N., Belmont
  Nolensville, Tenn.

Karen Lee Pitman
  B.S.N., East Carolina
  Jacksonville, N.C.

Natalie Ann Pitts
  B.S., in Nursing, Alabama [Birmingham]
  Nashville, Tenn.

Deborah Lynn Pollak
  B.A., Maryland [College Park]; B.S.N., Salisbury State
  Indianapolis, Ind.

Deborah K. Pulley
  B.S.N., East Carolina
  Lebanon, Tenn.

Natasha Irene Pyles
  B.S., Wheaton [Illinois]
  Chicago, Ill.

Amy Marguerite Riddle
  B.S.N., Tennessee [Chattanooga]
  Manchester, Tenn.

Heather Katherine Robb
  B.A., Memphis State; M.P.H., Tulane
  Memphis, Tenn.

Krista Fretwell Roscoe
  B.S., Portland
  Boring, Oreg.

Gregory Kyle Rybczyk
  B.S.N., Mid-America Nazarene College
  Nashville, Tenn.

Ann Michelle Sack
  B.S., James Madison
  Nashville, Tenn.

Chad Christopher Scott
  B.S., Freed-Hardeman
  Lexington, Tenn.

Wenifer Carroll Shelden
  B.S., Virginia Commonwealth
  Brentwood, Tenn.

Amy Julia Small
  B.S., Evansville
  Monroe City, Ind.

Maria Agnes Essien Smith
  B.S., Fayetteville State
  Nashville, Tenn.
Angela Marie Snyder
    B.S.N., Middle Tennessee State
Leah Beth Solooki
    B.A., Indiana; B.S., Massachusetts
Kathleen Gabrielle Sterioff
    B.A., Vanderbilt
Clare Judith Thomson-Smith
    B.S.N., Cumberland
Joann Lee Tiesler
    B.S., Berry
Heidi Jill Udouj
    B.A., Vanderbilt
Megan King von Gremp
    B.S., Vanderbilt
Patricia Anne Whitman
    B.S., Northern Colorado
Kimberly Michele Williams
    B.S.N., Tennessee
Keith Raines Wilson
    B.S.N., South Alabama

Gerontological Nurse Practitioner

Darlene Ferreira Anderson
    B.S.N., Belmont
Shawn Fitzgerald Brigance
    B.S., Park; B.S.N., Avila
Lauren Jessica Eck
    B.A., Allegheny
Karen Gillette
    B.S.N., University of Arkansas for Medical Sciences
Kathleen Anne Heyden
    B.A., California [San Diego]; M.B.A., San Diego State; B.S., New York
Amy Elizabeth Hughson
    B.S., Saint Mary’s College [Indiana]
Brenda Lee Jenkins
Marti Lea Kyle
Lisa Carol Latto
    B.S.N., Arizona State
Viva B. O’Brien
    B.S.N., Belmont
Ginger Dawn Scoggin
    B.S.N., Tennessee State
Anjanette Aliano Smith
Pauline Paige Warren
    B.A., Saint Leo; M.S., Troy State

Murfreesboro, Tenn.
Indiana, Ind.
Indianapolis, Ind.
Rochester, Minn.
Old Hickory, Tenn.
Kingston Springs, Tenn.
Nashville, Tenn.
Bentonville, Ark.
Nashville, Tenn.
Smyrna, Tenn.
Ridgetop, Tenn.
Franklin, Tenn.
Leawood, Kans.
Sulphur, Ky.
Nashville, Tenn.
Houston, Texas
Erin, Tenn.
Gainesville, Mo.
Nashville, Tenn.
Nashville, Tenn.
Anchorage, Alaska
Nashville, Tenn.
Hueytown, Ala.
Tullahoma, Tenn.
Health Systems Management

Wynette Samantha Brusch  Madison, Tenn.
    B.S. Tuskegee

Marilyn Diane Davis  Nashville, Tenn.
    B.S.N., Tennessee State

Bruce Graham Douglas  Sydney, Australia
    B.S.N., Mississippi College

Don Franklin Douglass  Nashville, Tenn.
    B.S.N., Tennessee State

Dawn Marie Fitzpatrick  Nashville, Tenn.

Jodi Lynn Fritch  Coppell, Texas
    B.S.N., Vanderbilt

Agnes Dale Hooper  Madison, Tenn.
    B.S.N., Vanderbilt

Nettie Sue Hurst  Tiptonville, Tenn.
    B.S.N., Memphis State

Donna Lee Miller  Nashville, Tenn.
    B.S., Texas

Carol Meadows Parsons  Franklin, Tenn.
    B.S.N., Belmont

Neonatal Nurse Practitioner

Allison Sophia Ankuta  Greenwood, S.C.
    B.A., Clemson

Georgina Burrows Cowan  London, England
    B.A., Davidson

Mary Eva Dye  Williamsburg, Ky.
    B.S., Western Kentucky

Cornelia Bridget Hite  Clarksville, Tenn.
    B.S.N., Tennessee

Cathleen Marjorie Hughes  Houston, Texas
    B.A., Loretto Heights; B.S.N. North Carolina [Charlotte]

Rebecca Jane Jackson  Norfolk, Va.
    B.A., Boston College

Kristen Margaret Milano  Cummaquid, Mass.

Terri Azlin Pounders  Etta, Miss.
    B.S., Mississippi State

George Franklyn Stockman IV  Columbus, Miss.
    B.S. in Nursing, Alabama [Birmingham]

Eric Jason Sullivan  Jasper, Ala.
    B.S., Birmingham-Southern

Elizabeth Cooper Thompson  Atlanta, Ga.
    B.S., Presbyterian

Christina Irene Treppendahl  Jackson, Miss.

Suzanna Vangemereren  Lawrence, Kans.

Tracy Dawn Vaughn  Kingsport, Tenn.
    B.S., East Tennessee State
Nurse-Midwifery

Susan Marie Brown
B.A., Dayton
Hudson, Ohio
Patricia Ann Detzel
B.S.N., Cincinnati
Nashville, Tenn.
Susan Marie Lewis
B.S.N., Tennessee State
Nashville, Tenn.
Megan Crawford McKain
B.S.N., Tennessee
Nashville, Tenn.
Margaret Helen McKinney
B.A., St. Olaf
Santa Rosa, Calif.
Laura Leigh Redden
B.S., Southern College Optmtry
Crossville, Tenn.
Meredith Kay Schrader
B.A., St. Olaf
White Bear Lake, Minn.
Elizabeth Pointer Smith
B.A., Grinnell
Santa Rosa, Calif.
Royal Denise Thompson
B.A., Minnesota [Duluth]
Old Hickory, Tenn.

Occupational Health/Adult Nurse Practitioner

Richard Dean Campbell
B.S., Missouri Western State
Cameron, Mo.
Chris James DeMent
B.A., B.S., Northeast Louisiana
West Monroe, La.
Kristen Michelle Massey
Lafayette, Ind.
Katherine Janes McLeod
Rochester, Minn.

Psychiatric-Mental Health Nurse Practitioner

Elizabeth Kay Dolfie
B.S.N., South Alabama
Franklin, Tenn.
Sandra S. Feren
B.S.N., Medical College of Georgia
Nashville, Tenn.
Rene Allen Love
B.S.N., Valdosta State
Ashland City, Tenn.
Lynette Gay Markham
B.S., Tennessee State
Hendersonville, Tenn.
Laci Rae Patton
B.A., Auburn
Nashville, Tenn.
Kari Elizabeth Reeves
B.A., Western Kentucky; B.S.N., Belmont
Memphis, Tenn.
Nile Lorraine Remsing
B.S.N., Michigan
Baxter, Tenn.
Paula A. Sanders
B.S.N., Central Florida
New Smyrna Beach, Fla.
William David Smith
B.S., Vanderbilt
Madison, Tenn.
Shannon Wells Taylor
B.S., Vanderbilt
Columbia, S.C.
Pediatric Nurse Practitioner

Leigh Baker Cooper
  B.S.N., Oklahoma Health Sciences Center  Norman, Okla.
Kimberly Foster Isenberg
  B.S., David Lipscomb  Hendersonville, Tenn.
Chanin P. McClurkin
  B.S., Wofford  Spartanburg, S.C.
Carrie Elaine Nease
  B.S. in Nurs., Ohio State  Hendersonville, Tenn.
Kim Kinghorn Steanson
  B.S., Texas Woman’s  Pegram, Tenn.

Women’s Health Nurse Practitioner

Jessica Markel Abernathy
  B.S.N., Villanova  Fredericksburg, Va.
Deborah Lynn Andrews
Leah Katherine Barker
  B.A., Rhodes  Franklin, Tenn.
Julie Brandon Barrett
  B.S.N. Belmont  Nashville, Tenn.
Stacy Dean Blackburn
  B.S.N., Mississippi  Picayune, Miss.
Deborah Lynn Booth
  B.A., North Carolina  Garner, N.C.
Amy Marie Butler
  B.S., Vanderbilt  Nashville, Tenn.
Jennifer Wineland Craft
  B.A., Rhodes  Memphis, Tenn.
Judy Diane Fichter
Dawn Marie Fitzpatrick
  B.A., Tennessee  Nashville, Tenn.
Carol Rae Flesher
  B.S., Tennessee  Gridley, Ill.
Kasi Lea Genereux
  B.S.N., Utah  Nashville, Tenn.
Cara Susan Gentile
  B.S., Vanderbilt  San Francisco, Calif.
Rebecca Smith Goldwasser
  B.S.N., Memphis State  Cincinnati, Ohio
Crystal Lynn Gutzke
  B.S., Centre  Memphis, Tenn.
Judith A. Hafeman
  B.A., Governors State; B.S.N., McKendree  Carbondale, Ill.
Eris Marie Headd
  B.S., Morris Brown  San Mateo, Calif.
Patricia Lee Heasty
Alexandra Kalafatis
  B.A., North Carolina  
  Kiawah Island, S.C.
Sumira Simjee Kemp
  B.A., California State [Fullerton]  
  Westminster, Calif.
Yocheved Lin Lauwick
  B.A., Yeshiva  
  Long Beach, N.Y.
Jessica Rose Manke
  B.A., M.A., John Hopkins  
  Nashville, Tenn.
Terri Lynn McFarland
  B.A., California [Los Angeles]  
  San Mateo, Calif.
Amie Elizabeth Miano
  B.A., Asbury College  
  Madison, Ala.
Jenna Marie Morey
  B.S., Vanderbilt  
  Encino, Calif.
Jill Pierce
  B.A., Hampshire  
  Nashville, Tenn.
Erin Annette Alexander Reese
  B.S., Vanderbilt  
  Nashville, Tenn.
Tracey Lee Robinson
  B.S., Vanderbilt  
  Nashville, Tenn.
Julia Lorraine Russell
  B.S., Vanderbilt  
  Plainsboro, N.J.
Laura Holmes Rutledge
  B.S., Alabama  
  Brentwood, Tenn.
Susan Raylene Saunders
  B.S., Vanderbilt  
  Gallatin, Tenn.
Susan Claire Shasteen
  B.S., Vanderbilt  
  Huntsville, Ala.
Tammy L. Shipley
  B.S., Vanderbilt  
  Nashville, Tenn.
Kimberly Rice Simcox
  B.S., M.P.H., Tennessee  
  Rogersville, Tenn.
Stacy Lee Smith
  B.A., Wake Forest  
  Fort Worth, Texas
Suzanne Jean Terry
  B.S., New Hampshire [Durham]  
  Center Barnstead, N.H.
Susanna Clare Trabue
  B.S., Vanderbilt  
  Nashville, Tenn.
Mindy Leigh Viana
  B.S., Southeast Missouri State  
  Sarasota, Fla.
Norma Biaylock Wall
  B.S., Vanderbilt  
  Dickson, Tenn.
Kimberly Dawn Waltrip
  B.S.N., Southeast Missouri State  
  Nashville, Tenn.
Vanderbilt University Hospital
The Vanderbilt Clinic

Vanderbilt University Hospital
MARK L. PENKUS, M.D., Executive Director and Chief Executive Officer,
  Vanderbilt University Hospital
DAVID POSCH, M.D., Chief Operating Officer, Vanderbilt Medical Group
JOHN S. SERGENT, M.D., Chief Medical Officer, Vanderbilt Medical Group
MARILYN A. DUBREE, M.S.N., R.N., Director of Patient Care Services and Chief Nursing Officer
PAUL MILES, M.D., C.Q.O., Center for Clinical Improvement
ADRIENNE AMES, M.S.N., C.F.N.C., Associate Hospital Director
BRYAN S. BRAND, M.H.A., Associate Hospital Director
SUSAN M. ERICKSON, M.P.H., R.N., Assistant Hospital Director
LISA MANDEVILLE, M.S.N., R.N., Assistant Hospital Director
CHARLOTTE B. ROGERS, M.B.A., O.T.R., Assistant Hospital Director
BETTY AKERS, Administrative Director, Primary Care Medicine
JOHN MCDONALD, Administrative Director, Surgical Specialties
GREG CATT, M.B.A., Administrative Director, Children's Hospital Outpatient
CAROL ECK, B.S.N., M.B.A., R.N., Administrative Director, Cancer Center
LEE FLEISHER, Administrative Director, Behavioral Health
LAUREL FUQUA, M.S.N., R.N., Administrative Director, Medicine
NANCYE R. FEISTRITZER, M.S.N., R.N., Administrative Director, Perioperative Services
GEORGIA MCCRAY, M.B.A., C.M.P.E., Administrative Director, Ophthalmology
ROBIN MUTZ, M.P.P.H., R.N.C., Administrative Director, Women's Center
TERRELL SMITH, M.S. in Nursing, R.N., Administrative Director, Children's Hospital
ROBIN STEABAN, M.S.N., R.N., Administrative Director, Cardiology
STEVE MOORE, Administrative Director, Orthopaedics

The Vanderbilt Clinic
JOHN S. SERGENT, M.D., Chief Medical Officer
RHEA SEDDON, M.D., Assistant Chief Medical Officer
DAVID POSCH, M.D., Chief Operating Officer
RACY PETERS, M.S.N., R.N., Director of Common Systems
DORIS QUINN, Ph.D., Director of Quality Education and Measurement
JAMES SNELL, M.D., Institutional Compliance Officer
JERRY BATTE, Director of the Vanderbilt Medical Group Business Office
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(The Executive Director of the Hospital and Clinic and the Deputy Chairman of the Hospital Medical Board are ex-officio members of all standing and special committees.)


PHYSICIANS HEALTH COMMITTEE.  Cynthia Turner-Graham, Chair.  Doyle Graham, Andrew Spickard, Jr., George Bolian, Stephen S. Entman, Charles Beattie, Gerald B. Hickson, Mary I. Yarbrough, Seenu Reddy, Kelly Blair, Peter R. Martin

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Vanderbilt University Hospital and The Vanderbilt Clinic: Leading the Way in Medicine

From its founding almost a century ago, Vanderbilt University Hospital has grown into the present extensive medical center complex, housing some of the most renowned medical specialists and the latest in medical technology. Although Vanderbilt is home to Nobel laureates and is a recognized center for research in all phases of medicine, it retains the compassion and caring that has underscored its philosophy since its inception.

Vanderbilt University Hospital

Designed to accommodate every patient need, the eleven-story hospital places the latest in technology in an aesthetically pleasing environment.

The skill of Vanderbilt medical and nursing teams is maximized in a setting that promotes quality patient care through efficiency of design. Medically related areas are grouped so patients needing specialized care can be served to the best advantage, as in the Neuro Care Unit. The hospital’s lower floors house the Emergency Department, serviced by special elevators that convey patients directly to the operating rooms, labor and delivery, ancillary services such as EEG and EKG, and radiology.

Each of the inpatient towers has a nursing core, so no room is far from a nurses’ station. A central area, connecting the two patient towers, contains elevators, conference rooms, and waiting areas for visitors.

Patient-centered care, a result of the collaborative efforts of medical, nursing, and other health care professionals, is the cornerstone of the hospital’s mission. This approach led to the reorganization of clinical delivery into Patient CareCenters for Behavioral Health, Cancer, Cardiology/Cardiothoracic Surgery, Children’s Hospital, Medicine, Ophthalmology, Orthopaedics, Primary Care, Surgical Services, Transplant, Trauma, and Women’s Services. Each center is led by a physician/administrative team that designs care to meet the needs of patients.
Level I Trauma Center and Emergency Department

Vanderbilt University Hospital operates the only Level I Trauma Center in Middle Tennessee. It is one of five in the state. The 20-bed Emergency Department provides care for patients of all ages and is the entry point for 30 percent of hospital admissions. A Pediatric Emergency Department opened in 1997 to offer emergency care and urgent care services in a specialized child/family-focused environment.

LifeFlight

The LifeFlight air medical transport service provides quick access to medical care in emergencies. The rooftop helipad and elevator provides rapid access to the emergency department, operative services, and intensive care units. The service operates within a 150-mile radius of Nashville and is staffed by a team of fully certified pilots and specially trained nurses. The 24-hour dedicated dispatch center is located in the Emergency Department.

Vanderbilt Children’s Hospital

The fourth, fifth, and sixth floors of the University Hospital make up Vanderbilt Children’s Hospital, designed to meet the special needs of children. This facility provides a complete range of medical services and treatment for children from birth through adolescence.

Founded in 1970 with a small staff and limited space, it has grown to 160 beds and a staff of nearly 500. Recognized nationwide for excellence in the treatment of infants and children, Children’s Hospital is a comprehensive facility encompassing a nursery and neonatal intensive care unit, pediatric intensive care and step-down units, surgical units, pediatric emergency department, and the Junior League Home for long-term care. Parents are encouraged to remain with their children, and Children’s Hospital maintains facilities allowing them to do so in comfort.

Children’s Hospital serves as a referral center for the region. More than half its patients come from outside Nashville, some from distant states and other countries. Children’s Hospital is also an important educational resource for medical students and residents in pediatrics and pediatric surgery.

The Newborn Emergency Transport Program is a consultation and transport service for newborns requiring critical care transport (Angel) to the Vanderbilt Children’s Hospital neonatal intensive care unit or Back Transport (Cherub) from the NICU to a community hospital for continued care. The service area for these ground ambulances is approximately a 100-mile radius of Nashville. Approximately 300 newborns are transported each year by each ambulance.
The combined concentration of pediatric research, education, and patient care has led to new medical techniques and discoveries. Children’s Hospital was one of the first hospitals to use artificial ventilation on a newborn. Procedures allowing cardiothoracic surgery for infants were pioneered at Vanderbilt. Other discoveries have resulted from research in nutrition, infant metabolism, and infectious diseases. Additional centers of excellence in Children’s Hospital include a kidney center, the Junior League Lung Center, and the Child Development Center.

The Vanderbilt Clinic

In 1996, the services of Vanderbilt University Hospital and the Vanderbilt Medical Group were reorganized into patient care centers representing the major categories of care delivered at Vanderbilt. This realignment centers around meeting the needs of our patients, creating a stronger partnership among physicians and managers, and making decisions closer to the point of impact. The patient care centers are as follows:

- Cardiology/Cardiac and Thoracic Surgery
- Cancer
- Women’s
- Emergency
- Children’s
- Perioperative
- Surgery
- Behavioral Health
- Medicine
- Ophthalmology

Day Surgery Center

Day surgery is ideal for many patients who require relatively brief procedures with limited anesthetic and surgical risks. Such operations are performed without overnight hospitalization, decreasing the cost but not the quality of care. The center provides excellent facilities for these procedures, including four operating suites, each with laser capabilities. Adjacent recovery suites and private patient rooms further promote the recovery of the day surgery patient.

A new ambulatory surgery facility recently opened, with eight operating rooms, two procedure rooms, and the necessary recovery and holding rooms. This new facility will enable the Medical Center to meet the growing needs in ambulatory surgery.
Additional Services and Facilities

Burn Center

The Vanderbilt University Burn Center is a twenty-bed specialized facility dedicated solely to the treatment and rehabilitation of burn victims. A highly trained multidisciplinary team of burn specialists provides the latest methods for treating and caring for the burned adult or child. The Burn Center is on the fourth floor of the Round Wing in Medical Center North.

Annette and Irwin Eskind Biomedical Library

Opened in 1994, the four-story library provides an abundance of work stations where faculty, staff, and students can tap into ever-expanding online information services. The library’s Information and Education Services Division provides assistance in all aspects of information retrieval, transfer, and management.

Medical Center East

The newly expanded Medical Center East houses Vanderbilt’s Surgical Pavilion, Pediatric Ophthalmology, Perinatal Services, the Eye Center, the Children’s Hospital Outpatient Center, and the Primary Care Center.

The Vanderbilt Bill Wilkerson Center for Otolaryngology and Communication Sciences

The Vanderbilt Bill Wilkerson Center for Otolaryngology and Communication Sciences was created on July 1, 1996. The consolidation of the Bill Wilkerson Center for Hearing and Speech and the Vanderbilt Department of Otolaryngology provides a new level of care to patients with otolaryngologic and communications diseases or disorders. The Center is one of the nation’s few communication disorder centers with expertise in clinical medicine, education, and research.

The E. Bronson Ingram Cancer Center

The E. Bronson Ingram Cancer Center comprises more than 1,000 doctors, scientists, and nurses throughout the medical center campus. The Center includes the Henry-Joyce Cancer Clinic and Clinical Research Center; the A. B. Hancock Jr. Memorial Laboratory; the Francis Williams Preston Laboratories of the T. J. Martell Foundation; the Infusion Center, a state-of-the-art facility for outpatient chemotherapy; several inpatient units within Vanderbilt University Hospital and Vanderbilt Children’s
Hospital; and more than 100 research labs, as well as eleven high-tech shared research facilities. The Center also serves as the hub of an affiliate network that links more than a dozen hospitals in Tennessee, Alabama, and Kentucky.

The Vanderbilt Page-Campbell Heart Institute

The Vanderbilt Page-Campbell Heart Institute was established on January 25, 1999. The Heart Institute is a joint venture between Vanderbilt University Medical Center and the Page-Campbell Cardiology Group. It is a freestanding, state-of-the-art facility where comprehensive, clinical heart care is available to patients in a convenient, outpatient environment. The Heart Institute houses the largest cardiology practice in the state of Tennessee, as well as some of the most highly specialized cardiologists in Middle Tennessee.

The Vanderbilt Psychiatric Hospital

The Vanderbilt Psychiatric Hospital is a full service, 88-bed psychiatric hospital. Specialized services are offered to children, adolescents, and adults. The hospital includes specialty units that focus on chemical dependency, attention deficit disorders, affective disorders, sexual abuse, post traumatic disorders, and geropsychiatry. Day programs and intensive outpatient programs are offered.

The Vanderbilt Subacute Care Unit

The Subacute Care Unit is a 25-bed unit that is licensed as a nursing facility. It is designed to care for patients who are no longer in need of the intense level of acute care services in the hospital, but are not ready for care in the home and need more intensive care than provided in a traditional nursing facility.

Subacute care requires the coordinated services of an interdisciplinary team, including physicians, nurses, social workers, and physical, occupational, and speech therapists. Care does not depend heavily on high technology monitoring or complex diagnostic procedures and instead focuses on the rehabilitative potential of the patients.

Kim Dayani Human Performance Center

The Kim Dayani Human Performance Center, housed in a contemporary 25,000-square-foot facility, is dedicated to achieving the balanced, healthy lifestyle that promotes the body’s greatest potential. The center conducts educational, treatment, and research programs in health promotion, with special emphasis on exercise, nutrition, weight management, smoking cessation, stress reduction, fitness testing, cardiac and or-
thopaedic rehabilitation, and rehabilitation from other chronic diseases. Through its internships and institutes, the center also trains health professionals in the fundamentals and applications of wellness and disease prevention. Vanderbilt faculty, staff, and medical students are eligible to use Dayani’s full-service fitness center, which includes a swimming pool, indoor track, weight machines, cardiovascular exercise equipment, aerobics classes, and massage therapy.

Vanderbilt Home Care Services

Vanderbilt Home Care Service is a comprehensive home care program that offers skilled nursing, home health aids, social work, physical therapy, occupational therapy, speech pathology, and home infusion services. Specialty programs include pediatrics, behavioral health, and perinatal and enterstomal care.

Rehabilitation Services

The primary objective of Rehabilitation Services is to provide comprehensive medical evaluation and treatment programs that help restore physical, social, and vocational capabilities to people with severe physical or cognitive disabilities. This goal is accomplished by offering physical therapy, occupational therapy, speech therapy, social work, nursing and medicine, training in independence techniques, emotional adjustment, pre-vocational evaluation, and post-discharge planning, which includes close liaison with family and community resources. Vanderbilt University Medical Center has two resources for these services.

Stallworth Rehabilitation Hospital, opened in 1993, is the only free-standing facility of its kind in Middle Tennessee. The 80-bed hospital provides both inpatient and outpatient rehabilitation services to adults and children who have suffered strokes, head or spinal cord injuries, or have other orthopaedic or neurological diseases requiring rehabilitation. The hospital contains the Junior Chamber of Commerce Clinic Bowl Gymnasium, which is specially designed for handicapped sports, including basketball, volleyball, and indoor tennis. The Vanderbilt Center for Multiple Sclerosis is also housed in the hospital.

The Stallworth Rehabilitation Center, located in The Vanderbilt Clinic concentrates on the outpatient rehabilitation needs of patients, specializing in treating persons who do not require hospitalization but benefit from such therapeutic interventions as occupational, physical, or speech therapy. This segment of the Clinic serves children and adults with orthopaedic, neurological, and post-surgical needs, both acquired and developmental, and works closely with caregivers to increase independence and promote the wellness concept. Specialty services offered only in Mid-
dle Tennessee include driver evaluation and training, augmentative communication device assessment and treatment, and wheelchair seating systems evaluation.

**Vanderbilt Arthritis and Joint Replacement Center**

This multi-specialty research and clinical program for patients with arthritis and rheumatic diseases provides a unique training opportunity for Vanderbilt medical students.

**Vanderbilt Sports Medicine Center**

Located in McGugin Athletic Center, the Sports Medicine Center is the site of treatments, research, and education for all types of sports-related and orthopaedic injuries in student, amateur, and professional athletes.

**Vanderbilt Laser Center**

The Vanderbilt Laser Center encompasses nearly all available clinical lasers and many of the latest innovations in medical laser technology. Vanderbilt physicians, often in collaboration with the medical laser industry, are involved in developing and refining advanced techniques using lasers. Training in the use and safe handling of the laser and laser-related equipment is offered, from basic procedures to the most advanced techniques. Such instruction includes a thorough understanding of laser physics and laser-tissue interactions. Indications for laser use and a complete laser didactic session, including complications and contra-indications, precedes hands-on training with the laser.

**Special Programs**

In addition to the special services listed throughout this catalog, Vanderbilt University Medical Center supports many programs in which medical students can receive invaluable experience, including:

- Airway Stenosis Service
- Biliary Disease Consultation and Treatment Center
- Center for Facial Nerve Disorders
- Photon Stereotactic Radiosurgery
- Vanderbilt Asthma, Sinus, and Allergy Program (ASAP)
- Vanderbilt Transplant Center
- Vanderbilt Voice Center
Programs in Allied Health

Vanderbilt University Hospital conducts training programs in five technical areas of allied health professions.

Program in Cardiovascular Perfusion Technology

The Vanderbilt University Medical Center Program in Cardiovascular Perfusion Technology provides a sixteen-month didactic and clinical training course that prepares the graduates for positions as cardiovascular perfusionists in open heart surgery programs. Students receive instruction in anatomy and physiology, pharmacology, pathology, and perfusion technology.

This program in cardiovascular perfusion meets the criteria established by the American Board of Cardiovascular Perfusion and is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The program is directed by the Department of Cardiac and Thoracic Surgery. The program is coordinated and supervised by an education director, medical advisor, program director, and clinical instructors.

Following satisfactory completion of both the coursework and the clinical perfusion experience, a certificate of completion is awarded. Graduates of the program are candidates for certification by the American Board of Cardiovascular Perfusion. Course credits are not transferable.

A Bachelor of Arts (B.A.) or Bachelor of Science (B.S.) degree from an accredited college or university is a minimum requirement. Previous college level coursework must include one year of chemistry and one year of physics, as well as coursework in anatomy and physiology.

Completed applications must be received by 1 February, and student selection will be completed by 1 April for the fall semester, beginning in September. Acceptance is based on scholastic and professional background, reference evaluations, and personal interviews.

Dietetic Internship Program

The forty-four-week Dietetic Internship Program is designed for the generalist practitioner. It provides an opportunity for practical experience in food service systems management, acute and ambulatory nutritional care, and community nutrition.

Through diverse learning opportunities provided by Vanderbilt’s Department of Nutrition Services and specialty units and several area hospitals and community agencies, the dietetic intern achieves an understanding of the dietitian’s role in a variety of settings.

Program applicants must have a baccalaureate degree from an accredited college or university and have completed didactic requirements established by the American Dietetic Association. Upon completion of the
dietetic internship, the intern will be eligible to take the national registration examination to become a registered dietitian.

Program in Medical Technology

The Program in Medical Technology is an NAACLS–accredited program designed to provide extensive didactic and practical training in laboratory medicine. The program runs from June to June each year and is composed of a six-month “student laboratory” in a classroom setting and a six-month clinical practicum in the Vanderbilt clinical laboratories. Students receive theoretical and technical training in immunohematology (blood banking), hematology, clinical chemistry, immunology, microbiology, and laboratory supervisory and management skills. Emphasis is on a thorough understanding of theoretical concepts and problem solving. Upon completion of the program, students receive a certificate of training and are eligible for all state and national licensure or certification examinations.

Students from affiliated colleges and universities may enter the program after completion of the junior year and the prerequisite courses. These students will receive the baccalaureate degree from their college or university upon successful completion of the program. Students from non-affiliated institutions may apply, with affiliation agreements completed upon acceptance. Students who have baccalaureate degrees and have met the prerequisite requirements may also apply. Applicants holding foreign degrees are required to have transcript evaluations and to pass the TOEFL exam.

Applications should be submitted several months in advance of the application deadline, 1 January, to assure sufficient time for processing information and scheduling interviews.

Program in Nuclear Medicine Technology

The twelve-month training program in clinical nuclear medicine methodology is designed primarily for students who have completed a minimum of three years of pre–radiologic technology work in an accredited college or university. The program prepares graduates for certification as nuclear medicine technologists. Students receive training in atomic and nuclear physics, radiochemistry, patient care and nursing, radiation safety, radiobiology, instrumentation, and computer applications, as well as clinical nuclear medicine (both imaging and in vitro). Students must successfully complete the lecture series and clinical laboratory rotations that are integral parts of the program. Students are also expected to develop certain educational and administrative skills to prepare them for future supervisory positions.

The program is approved as the fourth year externship in a baccalaureate degree program at Austin Peay State University in Clarksville, Ten-
nessee, and Belmont College in Nashville. In addition, on completion of the program, a certificate will be awarded from the Division of Allied Health at Vanderbilt.

The nuclear medicine program is accredited by the Joint Review Committee for Nuclear Medicine Technologists (JRCNMT), and graduates are eligible for national certification examination.

Admission requirements:

- Satisfactory completion of three years of college credit at an accredited college or university, including the following:
  - **Chemistry.** A minimum of 8 semester hours or equivalent of general chemistry
  - **Physics.** A minimum of 12 semester hours or equivalent of general physics
  - **Mathematics.** A minimum of 6 semester hours or equivalent of college algebra and statistics. Calculus and analytic geometry are also recommended
  - **Biology.** Approximately 24 semester hours or equivalent, including human anatomy and physiology, hematology, medical microbiology, immunology and serology, and bacteriology
  - **Computer Science.** A minimum of 6 semester hours or equivalent of introduction to computer science and FORTRAN IV programming

- A minimum overall grade point average of 3.0 (4.0 scale) is recommended. Averages above 2.5 will be considered
- A baccalaureate degree or eligibility for that degree at the completion of clinical training
- Good moral character, pleasant personality, ability to relate to patients

Qualified applicants from any accredited college or university are eligible for admission. Complete applications must be received by 15 March preceding the expected date of admission. Student selections will be completed by 15 April. Selection is based on scholastic background, references, personal interview, and motivation.

**Other Health Profession Programs**

**Internships in Nursing**

These six-month training programs are designed to train Registered Nurses in specialty areas such as operating room nursing, oncology nursing, pediatric intensive care nursing, general medical-surgical nursing, obstetrical nursing, and emergency nursing. Interns are linked with pre-
ceptors for clinical training and do guided independent study in their specialty. Upon completion of the internship, Registered Nurses will have the in-depth knowledge and the well-developed skills required to care for the patient population served by the specialty.

Program in Hearing and Speech Sciences

The M.A., M.S., and Ph.D. degrees in Hearing and Speech Sciences are offered by the Vanderbilt University Graduate School. See the Graduate School Catalog for current program information and course listings.

The program of studies leading to the master’s degree requires five semesters of academic and clinical preparation, including a 10-week clinical or research externship. The program is both ESB and PSB certified by the American Speech-Language-Hearing Association, with degree requirements meeting and exceeding those required for ASHA certification. Practicum sites include the Bill Wilkerson Center, Vanderbilt University Medical Center, John F. Kennedy Center, VA Medical Center, and several other hospitals in the Nashville metropolitan area.

Preparation for the doctoral degree includes a minimum of two years of academic course work, research competency demonstrated through two projects, and the dissertation. Research interests of the faculty include basic and applied psychoacoustics, speech perception and production, child language acquisition and disability, and audiological management. The division supports a number of research laboratories, including an anechoic chamber, and maintains a MicroVAX II computer and three PDP-11 computers.
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Ophthalmology

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Oral Surgery

SCOTT BRADLEY BOYD, Chief
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Pathology

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Surgery

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Thoracic Surgery

DAVIS C. DRINKWATER, Chief
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Urology

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Pope, IV, John C.
Sewell, Robert A.
Smith, Jr., Ernest Ross
Warner, John J.
# House Staff

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<td>Suhail Hazim Allos, M.B., Ch.B.</td>
<td>5 Chief</td>
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