

VANDERBILT Nurse

Preparing for

DISASTER

What role should a university serve in the life of the surrounding community? This has been a central question asked by Vanderbilt's new Chancellor Gee in discussions with the faculty, staff, students and leaders of the community. The question is slightly rhetorical since the Chancellor is already firmly committed to enhancing Vanderbilt's service learning activities at the undergraduate and graduate levels.



"Service learning" consists of service-related activities that help meet the needs that the community identifies as important, as well as educational activities that enhance critical thinking

and reflection on those activities and needs. "Service learning" is not community outreach. Community outreach is a "text" used in a service learning experience.

The School of Nursing has a long history of outreach into the community and the concept is incorporated into the mission of the School. VUSN uses service learning as a teaching methodology from both a theoretical and experiential perspective, and the community is often used as one of the "textbooks" in a course.

The scope and depth of the School's commitment to service learning and the community was again made fully evident when I was recently invited by Chancellor Gee to present a synopsis of the School of Nursing's involvement in the community. Highlighted in my presentation were the following VUSN service learning activities:

- Community-Based NP Faculty Practices
- Vine Hill Community Center Clinic
- NP Psychiatric/Mental Health Services

- Campus for Human Development Respite Center – 23 beds for hospital discharged homeless men
- Disease Management/Medical Outcome Project
- Idealized Clinical Office Practice Project (Only NP clinic of 2 participating) – a project of the Institute for Healthcare Improvement

YWCA Domestic Violence Shelter

- Provided health care services to 345 women and 214 children since October 2000

NP School-Based Clinics

- Located in three Metro Nashville schools – Fall Hamilton, Taylor Stratton and Park Avenue

Kellogg Foundation Birth Center Project

- Establishing 5 birth centers throughout Tennessee and a shared "central business office"

Vanderbilt-Meharry Alliance Diabetes Management Project

However, service learning took on a whole new meaning after the events of September 11. The School has recently taken on the responsibility of creating the International Nursing Coalition for Mass Casualty Education. The activities of the Coalition, and its importance to today's society, are the focus of this issue's cover article.

Colleen Conway-Welch



The past and the future meet as students gather on the steps of VUSN's historic Godchaux Hall.

VANDERBILT
Nurse

Colleen Conway-Welch, *Dean and Nancy and Hilliard Travis Professor of Nursing*
Alice Parkerson, *Director of Development*
Allen Rosso, *Assistant Director of Development*
Sonia Fernández, *Alumni Coordinator*

Laurie Parker, *Editor*
Donna Pritchett, *Art Director*
Jenni Bongard, *Designer*

Joanne Lamphere Beckham, BA'62 • Neil Brake • Nelson Bryan, BA'73 • Shelton Clark, BA'85 • Lew Harris, BA'60 • Julia Helgason • Peyton Hoge • Dana Johnson • Jessica Pasley • Matt Scanlan • Clay Sturgeon • Philip Tucker • *Contributors*

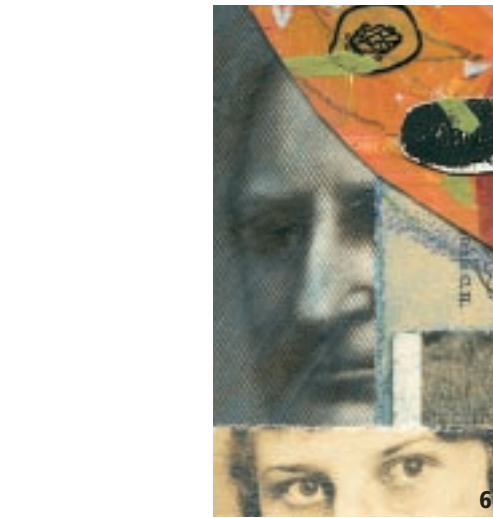
Anthony J. Spence, E'75, *Executive Director of Alumni Communications and Publications*

The *Vanderbilt Nurse* is published three times yearly by the Vanderbilt School of Nursing, 200-C Godchaux Hall, Nashville, TN 37240 in cooperation with the Office of Alumni Communications & Publications to inform alumni, students, parents, faculty and friends of the school about programs, activities and issues of interest. The editor welcomes letters and comments from readers. Correspondence, including letters to the editor and Class Notes, should be directed to the *Vanderbilt Nurse*, Office of Alumni Communications and Publications, VU Station B 357703, 2301 Vanderbilt Place, Nashville, TN 37235-7703, or by e-mail to laurie.parker@vanderbilt.edu. Address corrections may be sent to Alumni Coordinator, 206 Godchaux Hall, Nashville, TN 37240 or sonia.fernandez@mcm.vanderbilt.edu

Visit the Vanderbilt University School of Nursing's Web site at www.mc.vanderbilt.edu/nursing/

Vanderbilt University is committed to principles of equal opportunity and affirmative action.

© 2001 Vanderbilt University



In the Shadow of the Pyramids
Alumnus Mike Briley changes lives among the poor of Cairo

14



14

DEPARTMENTS

From the Dean	inside front cover
On the Cutting Edge	2
Around the School	4
Alumni News	16
Students	17
Class Acts	20
The Julia Hereford Society	inside back cover

ABOUT THE COVER:

Artist and Austin-Peay State University professor Billy Renkl creates three-dimensional, tactile collages made from old and out-of-print sources to convey his messages to the viewer. This collage includes depictions of actual bioterrorism agents, among other images.

FEATURES

The Battle Against Bioterrorism <i>VUSN leads the way for the world</i>	6
\$1.2 Million Grant Provides Expanded Health Care Services for Underserved <i>The Nurse-Managed Clinic Network expands its mission</i>	10



10

Today's Needs, Tomorrow's Solutions

Assistant Professor Melanie Lutenbacher finds new ways for VUSN to "connect the dots"

5



5

Nursing Shortage Proven to Endanger Patients



DANA JOHNSON

VUSN professor Peter I. Buerhaus (left) regularly makes national headlines with his groundbreaking studies of nursing and the changing health care system. The

results of his latest project, recently released by the U.S. Department of Health and Human Services, are gathering attention again: Buerhaus and his team of researchers have found a direct correlation between nurse staffing and patient health and survival.

The report's findings show that nurse staffing is strongly associated with the frequency of patient outcomes ranging from urinary tract infections to shock and upper gastrointestinal bleeding.

"We have provided credible evidence that nursing staff matter in what happens to patients. Perhaps the results will enable us to move health policy forward and make it possible to provide hospitals and nurses with the kind of resources that will enable them to enrich staffing levels to the point where the adverse patient outcomes we found can be reduced," said Buerhaus, senior associate

dean for research and Valere Potter Distinguished Professor of Nursing at VUSN.

The researchers, using data from more than 5 million patient discharges from 799 hospitals in 11 states, found that there were consistent relationships between various measures of nurse staffing and five adverse patient outcomes—urinary tract infections, pneumonia, shock, upper gastrointestinal bleeding and length of hospital stay.

The report also showed higher RN staffing was associated with a 3 to 12 percent reduction in certain adverse outcomes. Higher staffing at all levels of nursing was associated with a 2 to 25 percent reduction in adverse outcomes.

This study comes nearly one year after Buerhaus released a study in the *Journal of the American Medical Association* projecting that the pool of registered nurses will fall drastically by the year 2020. In comments about the impending shortage, Buerhaus said that consequences of the lack of staffing put patient care at risk.

"This is an emerging crisis," he said concerning the shortage. "Improving patient safety is a critical issue and our study puts the impact of staffing mix and levels before the nursing profession, hospital industry, insurers and policy makers," he said. "It now remains to be seen what they will do."

Nurses Needed—STAT

- American hospitals cope with a shortage of 126,000 registered nurses
- The average age of a nurse today is 45
- By 2010, the average age will jump to 50
- As baby boomers age, the need for nurses increases astronomically: By 2020, the nursing shortage is expected to total 400,000
- By increasing their nursing staff, hospitals could reduce the risk of patient complications by 12 percent and the risk of dying after surgery by up to 6 percent
- 42 percent of nurses surveyed had to deliver and retrieve food trays
- 34 percent were required to clean rooms and do other janitorial tasks
- Only 33 percent said that their unit had enough staff
- Only 35 percent described the care on their ward as excellent
- 23 percent of nurses surveyed were so frustrated with their jobs that they plan to quit within a year

—USA Today

Creative Approaches to Continuing Education

The Vanderbilt University School of Nursing is committed to promoting opportunities for nurses to enhance their expertise throughout their lifetimes. To meet this commitment, the School of Nursing has established an Office of Lifelong Learning. Through this venue, practicing nurses will have access to the latest information about professional nursing.

"You don't stop learning the day you graduate from nursing school," said Terri Urbano, associate dean for

"Because practice is changing so rapidly, there is an ongoing and exploding need for education. The response to both of these options has been tremendous," she said. "We are excited about the potential for growth."

Face-to-face conferences are being developed by VUSN in response to several needs. They provide an opportunity for nurses to network while learning about the latest in nursing practice and education.

They also provide an opportunity to foster and enhance relationships with alumni and preceptors. Finally, they are an opportunity to showcase the high quality, nationally recognized faculty that make VUSN a leader in nursing education.

Yet these types of conferences have some inherent barriers—costs, distance and difficulty getting away from job and/or family responsibilities. These have traditionally been deterrents to participation.

The development of online courses will reduce many of these barriers, Urbano said. Content for these courses is developed by VUSN faculty and is converted for online use by HealthStream, Inc., a nationally traded e-learning company with corporate headquarters in Nashville.

Vanderbilt University Medical Center and HealthStream have a contract that allows VUSN courses to be distributed to health care organizations through a business-to-business model. Additional distribution is also available through HealthStream's network of Web site partners including WebMD.

For additional information about these courses, including fees and nursing contact hours awarded, call the Office of Lifelong Learning at (615) 936-2581.

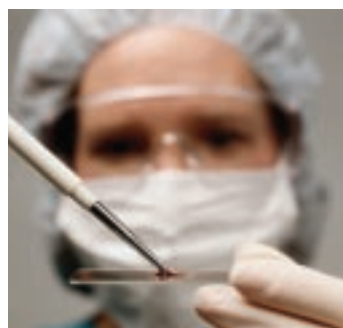


Clinical Research Series Opens New Career Path

The need for more trained clinical research professionals has prompted the School of Nursing to create a four-course series directed at the fundamentals of the clinical research process.

The Clinical Research Professional Development Series, offered twice a year, will assist nurses and other health care professionals in establishing or furthering their careers in clinical trial management as research coordinators, consultants, managers or educators.

"There are no formal programs at Vanderbilt or anywhere to train research professionals," said Debra Wujcik, director of Clinical Trials Training and Outreach at Vanderbilt-Ingram Cancer Center and project coordinator for the Clinical Investigations Program at



Meharry Medical College.

"There are review courses that help prepare people for certification exams, but there is nothing available to help train and update research professionals," said Wujcik. "The regulations and requirements are changing so quickly and extensively; it is unsafe to learn on the job. Through our

courses, we will reinforce the right way to do clinical trial management."

The courses are available as Continuing Education Units, as a post-master's certificate program or as an elective concentration in the Health Systems Management MSN program. In addition, applicants may also enroll on a course-by-course basis.

Each seminar is offered in a concentrated format

—24 hours of instruction over a four-day period, offering two graduate credit hours. An optional course, a 70–210 hour supervised practicum, is also available.

"This is definitely a new career path for the master's-prepared nurse," Wujcik said. "It opens up an additional pathway for specialization. Advanced practice nurses have the clinical, management, organizational and communication skills which are key qualities that clinicians and research facilities are looking for."

For more information about the new program contact Wujcik at Debbie.Wujcik@mcmail.vanderbilt.edu. To register for any of the courses, contact Karen Stevens, director of marketing and student recruitment and director of the Center for Career Planning and Placement by calling 322-3800.

ANP Curriculum Reflects Changes in Patient, Student Population

In an effort to meet the ever-changing demands of the health care environment, VUSN has enriched its adult nurse practitioner (ANP) program to include options in older adult health and special topics in cardiovascular health.

"We are trying to better meet the needs of the adult nurse practitioner in primary care by staying abreast of the options for advanced practice nurses and their interest in expanding their opportunities," said Linda D. Norman, assistant professor of nursing and senior associate dean for academics. "We are ahead of the trend by offering our adult nurse practitioner program in such a unique and exciting format."

"Adult nurse practitioners must be prepared to care for adults across the life span, which includes a growing aging population," said Leslie Coleman, ANP program director. "Therefore, the ANP program will provide focused content on the special needs of older adults. This will help students meet the demand for health care providers with a broad scope of practice."

Special topics in cardiovascular health will focus on disease prevention and primary care management, with a major emphasis on the risk factors of diabetes, hypertension and high cholesterol.

Not only has the curriculum been revised to meet market demands, but the format in which the program is offered has also been updated to meet the needs of a broader student population. The program will be offered in an optional, non-traditional format—in which classes are concentrated into blocks three to four times a semester with additional coursework completed via online conferencing or video-streaming.

"All of our graduates, regardless of the focus area, are adult nurse practitioners," said Coleman. "Having specific course content in a chosen focus area strengthens graduates' knowledge base and job opportunities."



DANA JOHNSON
Bonnie Pilon, DSN, RN

Pilon named American Academy of Nursing Fellow

The School of Nursing recently added its ninth current faculty member to the prestigious list of fellows of the American Academy of Nursing.

Bonnie Pilon, senior associate dean for practice at the School of Nursing, will be inducted into the Academy during the annual meeting slated for this fall.

"I am not usually speechless, but I am about this honor," said Pilon. "I am joining a group of extremely gifted and talented people. It's inspiring because I am becoming a part of such a high-achieving group. Being associated with those people drives you to contribute more to the field of nursing as well as to serve as a force to move nursing forward."

To become a fellow, nominees must display extraordinary commitment and contributions to nursing that far exceed the responsibilities of their employment and the potential for sustained contributions to the profession in the future.

"As a fellow of the AAN, I feel that I have been given my marching orders," said Pilon. "Academy nurses are socialized to be thought leaders for the profession. The AAN recognizes that the fellows are nursing's leaders. We all bear responsibility for demonstrating the value of nursing to society and advocating for the profession. That is something I take personally."

Spring Faculty Assembly

At their Spring Assembly, the faculty of VUSN honored their peers who exemplify the very best that the school has to offer its students. The following awards were presented:

The Dean's Award for Outstanding Service to Faculty and Students—Terry Capton-Snell, retired director of the Maternal Infant Care Program and director of Maternal Infant Care Nurse-Midwifery Services at General Hospital

The Dean's Award for Recognition of Faculty Achievement in Scholarly Endeavors—Melanie Lutenbacher, assistant professor of nursing and program director of the Pediatric Nurse Practitioner specialty

Ingeborg Mauksch Award for Excellence in Faculty Mentoring—Barbara Petersen, associate professor in nursing and program director of the Nurse-Midwifery Nurse Practitioner program

School of Nursing Excellence in Teaching Award (Teaching in the Lecture or Small Group Setting)—Margaret McGill, instructor in nursing, Nurse-Midwifery specialty

School of Nursing Excellence in Teaching Award (Teaching in a Clinical Setting)—Joan King, associate professor in nursing and program director of the Acute Care Nurse Practitioner specialty

School of Nursing Excellence in Teaching Award (Educational Innovation)—Donna McArthur, assistant professor in nursing and program director of the Family Nurse Practitioner specialty

Bridge Ceremony Faculty Awards

At the August 12 Crossing the Bridge Ceremony, the students honored those VUSN faculty members whom the students felt contributed most to their educations. Honors conferred were:

Julia Hereford Award

Catherine E. Reisenberg,
instructor of nursing

For the greatest contribution to student-faculty relations outside the classroom or clinic

Sara K. Archer Award

Michael W. Vollman,
assistant professor of nursing

For outstanding contributions in teaching, scholarship and student-faculty relations

Award for Excellence in Clinical Instruction

Karla S. Luker, instructor of nursing
For the greatest contribution to Bridge students in the clinical area

Shirley Titus Award

Judy Sweeney,
assistant professor of nursing

For the greatest contribution to classroom teaching of Bridge students

NAAC Honors Dean Conway-Welch

At the September meeting of the National Association of Childbearing Centers, Dean Colleen Conway-Welch accepted the 2001 NACC Public Advocate Award. This award, in its tenth year, is presented to the person NACC members feel has made the greatest contribution to the development of health policy at the regional and national level to promote cost-effective care alternatives.

Past recipients of the award include former Governor Lawton Chiles of Florida, California state senator Lucy Killea and Dr. Sidney Wolfe of the consumer advocacy group Public Citizen.

Today's Needs, Tomorrow's Solutions



NEIL BRAKE
Melanie Lutenbacher, assistant professor and director, Pediatric Nurse Practitioner program.

You think your job involves multitasking? Spend a day with Melanie Lutenbacher and learn the meaning of the term. Lutenbacher, who directs Vanderbilt's Pediatric Nurse Practitioner program, also serves on several of Nashville's health-care boards and agencies and finds a way, as she puts it, "to connect the dots."

"I'm an old public-health nurse," said Lutenbacher. "I'm

very much interested in what's going on in the community, and in really having our students out there and doing different things."

As though she were a case study of a left-brain/right-brain partnership, Lutenbacher is always conscious of the nursing school's tripartite mission of research, teaching and service. "If I'm going out to talk about a research project," she said, "in the back of my brain, I've still got that framework: OK, how can we incorporate teaching and involve students in this? And how can we deliver some sort of needed service? How can we integrate all these things together?"

Having to think creatively, of course, is key in a marketplace which forces health-care professionals to seek nontraditional solutions. "With our students, what we're trying to do is develop advance practice nurses who can move seamlessly from

setting to setting," she said.

Participation in the MIND (Middle Tennessee Interdisciplinary Instruction in Neurodevelopmental Disabilities) program helps train nursing students in the prevention of neurodevelopmental disorders. The program also makes treatment more accessible to children and their families.

"Students have that basic underpinning of primary care, but we also have an emphasis on kids with special needs," she said. "That has helped a number of our graduates craft positions where there have been no positions."

Lutenbacher has also helped create a number of new faculty practice sites. "Students can go in and provide service to a non-profit agency, for example, but in fact it's helping the population," she said. "They're not traditional clinic sites, but the students are devel-

"I'm very much interested in what's going on in the community, and in really having our students out there and doing different things."

oping clinical skills and critical thinking. It's a win-win situation: The students get a dose of real-life practicality, and it's also providing a lot of service to the community.

The program currently has 36 students and sufficient interest from many more prospective students. "We used to start with a lot of folks that were right out of high school. Now, many of the students come in with previous careers. We have teachers, psychologists, dentists and folks who've worked in many other areas."

Much of Lutenbacher's research has been used to support proposals and secure funding for new non-profit agencies set up to deliver coordinated care to victims of family violence. "[VUMC pediatrician] Bill Cooper and I have done a number of research projects in the area of youth violence. There are a lot more ties we're developing with some of our other

faculty and with some of the specialty clinics."

After seven years at Vanderbilt, Lutenbacher sees even greater things on the horizon. "Vanderbilt has a lot of opportunity, and there's so much potential," she said. "Chancellor Gee has such a strong interest in extending the university into the community, and for me, that's exciting, because it fits so well with what I've been doing all these years."—*Shelton Clark*

Faculty News

Professor Lori Cabbage, was awarded the Excellence in Teaching Award by the American College of Nurse-Midwives.

Assistant Professor Geri Reeves, MSN'93, has joined the Diabetes Outcomes Project of the Meharry-Vanderbilt Alliance as the diabetes nurse expert. She works closely with each of the six clinics that serve this indigent population. Reeves will continue as a faculty member this fall and will move full time to this important grant project in the spring.

The Vanderbilt University Board of Trust has named **Judy Jean Chapman, BSN'63**, senior associate in emergency medicine, professor of nursing, emerita.

The Board of Trust also granted tenure to **Kathleen A. Dwyer**, assistant professor of nursing.

Dr. Frank H. Boehm, professor of ob/gyn and director of maternal/fetal medicine at VUMC and a member of the Julia Hereford Society, has published *Doctors Cry, Too: Essays from the Heart of a Physician* (Hay House, \$17.95).

PREPARING FOR DISASTER

VUSN LEADS THE WAY FOR THE WORLD IN MASS CASUALTY RESPONSE TRAINING

BY LEW HARRIS

Illustrations by Billy Renkl

A month before the terrorist attacks on the World Trade Center and the Pentagon, Vanderbilt University School of Nursing Dean Colleen Conway-Welch predicted the possibility of a terrorist attack in this country that would produce large numbers of casualties.

"It's not a question of *if* a mass casualty event will happen in the United States, but *when* it will happen," Conway-Welch noted, stressing a point of view that was shared by many terrorism experts around the world. Sadly, the events of Sept. 11—the worst terrorist attack ever on U.S. soil—proved how accurate her words were.

Conway-Welch experienced the effects of that day first-hand: Her plane landed at Reagan National Airport in Washington just moments after the attack on the Pentagon. As her taxi left the airport and turned towards Memorial Bridge, she saw the huge cloud of black smoke rising from the Pentagon.

"I knew immediately it was a terrorist attack," she said. "My worst fears came true."

Japan experienced a mass casualty event in 1995 with the bioterrorist attack on the Tokyo subway that killed 12 people and sent more than 5,000 others to local hospitals. That attack was the work of a religious cult, Aum Shinrikyo, which reportedly experimented with anthrax and botulism before deciding to use the nerve gas sarin in the assault. The cult may have attempted to obtain a quantity of Ebola virus during the outbreak in Zaire for use in a terrorist act, according to the National Research Council's book *Chemical*

and Biological Terrorism: Research and Development to Improve Civilian Medical Response.

Conway-Welch can envision a scenario in which small canisters of biological agents are simultaneously dropped from airplanes into packed professional football stadiums throughout the country. The fans would breathe a pathogen that is invisible, odorless and colorless.

"Suddenly there are hundreds of thousands of contaminated people," she said. "The subtleties and sophistication of terrorism are growing."

Earlier this year, Conway-Welch placed the nursing school in a leadership position in educating nurses about how to minister to victims of a mass casualty event by establishing the International Nursing Coalition for Mass Casualty Education (INCMCE). The new coalition, comprising a variety of national nursing, medical, military and educational accrediting bodies, and its parent body, the Center for Mass Casualty Education, are both headquartered at VUSN.

"I was asked by the DHHS Office of Emergency Preparedness to gather a group of nursing leaders from around the country to come together and look at the curriculum issues surrounding community health nursing and how the content of mass casualty events could be infused into that curriculum," said Conway-Welch. "I was also asked about the realities of making that happen, because faculty everywhere are coping with the need to

include new curriculum content into existing credit hours. Adding new information is always challenging."

Nursing and medical officials throughout the country have roundly applauded the formation of the coalition.

"For the 2.7 million American nurses and their international counterparts, the endeavors of the International Nursing Coalition for Mass Casualty Education are as historically pivotal in 2001 as the scientific papers of Florence Nightingale were in 1901," says Ann Sarkes of the National Domestic Preparedness Office. "The NDPO applauds the pioneering efforts of Dean Conway-Welch and the Vanderbilt University School of Nursing. They lead the way in Web-based education for nursing preparedness for mass casualty events, for current students and through continuing education. Neighbors, friends and communities turn to nurses for help in a mass casualty event, and VUSN is preparing them for that."

Making the task harder was the fact that there is no fully developed mass casualty nursing education program in the United States, according to Linda Norman, senior associate dean for academics at the School of Nursing.

"We realized we were quickly moving to an international arena as we began to look around and see if there were any other nursing programs doing something like this," Norman said. "There are isolated attempts to address this problem at several U.S. schools of nursing. We found that there is a program at the University of Ulster in Northern Ireland that offers a master's degree in disaster relief management. They are part of a consortium that includes universities in Spain, Finland and Sweden, and much of the content is a distance-based curriculum via the Internet."

Norman traveled to Ireland last spring to visit with the leaders of the University of Ulster program. She found that the program focuses more on teaching nurses and others who work with international aid organizations how to treat victims of natural disasters like floods and earthquakes. There is less focus on chemical or biological warfare, but a strong component in nursing issues in nuclear disasters.

"We are collaborating to learn more about chemical and biological weapons of mass destruction, and we have a lot to learn from them about how they teach the management of mass casualty disasters," Norman said. "There is a two-way learning effort going on."

When a mass casualty event like those of September 11 occurs in the United States, nurses at every level are called upon to employ emergency response skills. Though nursing has always been a part of the nation's emergency response system, many of the nation's nurses

have no training or experience with emergency preparedness, particularly as it relates to triaging and treating victims of weapons of mass destruction.

"The more education nurses have about mass casualty incidents, the more able they will be to respond as professionals and as citizens and to provide direct suggestions on what should happen in the event of a disaster," said Conway-Welch.

She convened the first meeting of the new coalition at VUSN in March. In addition to deans from academia, representatives attending were leaders and officials from the American Association of Colleges of Nursing, the National League for Nursing, the American Nurses Association, the Federal Bureau of Investigation's National Domestic Preparedness Office, the National Council of State Boards of Nursing, the two nursing education accreditation commissions, the U.S. Air Force, the Navy Nurse Corps, the U.S. Public Health Service and the American Academy of Nurse Practitioners.

"The only thing that could have made it worse would be if chemical or biological weapons [also] had been involved [that day]."

—Michèle Fluornoy, Senior Fellow of the Center for Strategic and International Studies International Security Program, regarding the September 11 attacks in New York and Washington.

"The meeting was quite successful," Conway-Welch said. "People acknowledged that in community health nursing, no matter the complexity of content, there was very little material about mass casualty events. People were interested in seeing how it could be infused into existing nursing curricula as opposed to adding extra courses."

Subsequent meetings were held in Dallas

and at the U.S. Public Service Noble Training Center in Anniston, Ala. The Noble Training Center is unique in that it is the only hospital facility in the U.S. devoted entirely to training health professionals for emergency response to weapons of mass destruction. Housed at what was formerly Fort McClellan, it includes a mock hospital environment where training, drills and experimentation can take place.

Also located at Fort McClellan is the Center for Domestic Preparedness, operated by the Department of Justice, which provides training for first responders and others. The Center includes a live chemical agent training facility where students wearing protective clothing and masks work in an area where sarin and other nerve agents are released under stringently controlled conditions.

Invited to the Anniston meeting, in addition to the various organizations represented in the initial meeting, were a number of experts in emergency medical response. These subject experts will advise and inform the coalition on various issues regarding weapons of mass destruction and their effects.

"These experts have been extremely helpful to us, and their number is growing," Conway-Welch said. "There is a whole world of experts on bioterrorism out there that I never knew existed until I became involved. The level of expertise of many of these people is mind-boggling."





DANA JOHNSON

VUMC staff going through decontamination showers during a bioterrorism drill last year. Nurses, especially emergency room nurses, would be among the first to recognize and treat victims of bioterrorism.

Among the experts is Judith LaRosa, a nurse and professor of preventive medicine and community health at the State University of New York Downstate. She has served on the Armed Services Epidemiological Board, which advises the assistant secretary of defense for health and the surgeons general of the Air Force, Army and Navy on a wide variety of military health issues, including the problem of post-Gulf War illness. LaRosa recently accepted a clinical faculty position at VUSN.

Another subject matter expert is Myra Socher, a principal in Disaster Planning International, which specializes in training, education and disaster planning for fire departments, emergency medical systems and hospitals. She has also accepted a clinical faculty appointment at the School of Nursing to assist the coalition.

A valued resource already on hand at VUSN is Professor Carol Etherington, whose areas of expertise include assisting and treating victims of violence and psychological trauma. Etherington has worked as a volunteer for Doctors Without Borders and serves on its U.S. board. In addition, she is involved with the International Red Cross and other relief organizations in such world trouble spots as Angola, Bosnia, Kosovo, Sierra Leone, Poland, Honduras and Tajikistan. She worked on the Thai-Cambodian border in the aftermath of the genocide perpetrated by the late Pol Pot, leader of the Khmer Rouge guerrillas blamed for the murder of two million Cambodians.

"My introduction to the true casualty aftermath of a biological or chemical warfare experience is very limited, but I got on board here because the aftermath of a mass casualty event, regardless of what kind of trauma, is

often the same," Etherington said. "The physical symptoms are different. I think one of the things that is so frightening about the potential for biological or chemical warfare, rather than attacks like we've seen recently, is the panic that will ensue. This is a unique situation because you can't see, touch or feel

many of these agents."

The coalition, from its inception, has also involved emergency room and infectious disease physicians, because they would be at the forefront of treating victims of a mass casualty disaster. The American College of Emergency Physicians released a report in June providing significant information about issues related to mass casualty.

At Vanderbilt, Dr. Corey Slovis, chair of the Department of Emergency Medicine and medical director of Metro-Nashville Emergency Medical Services, and Dr. Robin Hemphill of Emergency Medicine have worked closely with the School of Nursing to acquaint them with VUMC's emergency capabilities in the event of a disaster. Dr. William Schaffer, professor and chair of Preventive Medicine, and Dr. Bruce Gellin, director of IDSA/Vaccine Initiative, are also contributing their expertise.

"I knew immediately it was a terrorist attack. My worst fears came true."

—Dean Colleen Conway-Welch

The Vanderbilt University Medical Center Emergency Room has established two large decontamination showers that can quickly be lowered from the ceiling in an area just outside and adjacent to the ER. The showers would be used in the event of a mass chemical disaster. The FBI suggested the Emergency Room be equipped with such a facility several years ago because then-Vice President Al Gore was spending a significant amount of

time on the Vanderbilt campus and in Nashville, where his Campaign 2000 office was located.

Conway-Welch has also networked with Robert L. Ruth, central district manager of Emergency Management Strategic Healthcare Group at the Veterans Health Administration Hospital in Nashville. Ruth, in turn, introduced her to Dr. Kristi L. Koenig, director of Emergency Management Strategic Healthcare Group, VHA/VA, based in Martinsburg, W. Va.

"I agreed to help the dean look at the weapons of mass destruction data from our perspective as a subject matter expert," Ruth said. "We do the emergency response planning for all 173 VA Hospitals in the country, and we have people all over the country who work on emergency management issues. I told the dean that whatever expertise the VA could loan her in terms of our resources and capabilities, we would try to do. I am also interested in the coalition because weapons of mass destruction education could be very helpful to the nurses who work here at the VA."



Chemical weapons training at the Noble Training Center (photo courtesy of the Office of Emergency Preparedness)

Louisiana State University, through the auspices of the Office of Emergency Preparedness, has been brought aboard because of its strength in emergency medical first responders and in veterinary medicine. Animals, particularly cats, dogs, and birds, could be among the first to be impacted by chemical or biological warfare because of their smaller body size. A sudden rash of animal deaths could be a warning that humans

are vulnerable to a chemical or biological attack. VUSN is working closely with Dean Daniel Walsh of LSU's Division of Continuing Education (DCE) and Dr. Stephen Guillot Jr., the director of LSU's DCE Academy of Counter-Terrorist Education.

"Important work needs to be done in determining the core competencies for nurses and nursing education related to mass casualties. These need to be taught at the nursing school level and then as part of continuing nursing education and re-certification," Vanderbilt's Hemphill observed. "Dean Conway-Welch has gotten the people together who can make those decisions and then actually implement them."

Linda Norman said that following the initial meetings, mass casualty education began being integrated into more curricula across the country. On September 11, Norman was serving as a curriculum evaluator for a program being held at the Anniston site when she learned of the attacks. "We had just heard an FBI lecture on weapons of mass destruction," she said. "When the announcement came, most of the people in the class thought this was part of the program and that we were going to move into a mock response drill. It took us about 20 minutes to realize they weren't kidding."

Norman predicts that weapons of mass casualty education will be incorporated in the VUSN continuing education curriculum shortly. The continuing education unit will likely be offered over the Internet, as are other continuing education programs currently in place.

"In most states, nurses need a certain number of hours of continuing education in order to renew their licenses, and taking this course over the Internet would help them meet their obligations," said Conway-Welch, adding that the weapons of mass destruction curriculum content for nursing students may also have a significant Internet component.

"Due to recent events, we're moving forward much more rapidly, not only with the coalition, but also with restructuring our community nursing curriculum," she said.

Conway-Welch added that an application has been made for federal funding to support the VUSN-based Center and Clearinghouse for the INCMCE, which will be coordinated

by Terri Urbano, associate dean of the Office of Lifelong Learning at the School of Nursing. Urbano will also be in charge of coordinating the Internet portion of the continuing education program.

"These events in Washington and New York underline the overwhelming need to educate nurses about how to respond to mass casualty events," said Norman. "Nursing schools across the country need to provide mass casualty event training as part of their

regular curricula and as part of a nurse's continuing education. It's sad to say, but we have to accept that tragedies like these are probably not isolated events anymore." ♦



Baddest of the Bad

Which weapon of mass destruction, pound for pound, is the most lethal—chemical, biological or nuclear?

Although nuclear weapons remain the most massively destructive weapons that can be built, the biological agents—pound for pound—are the most deadly. In a 1993 Congressional Office of Technology Assessment report, "Proliferation of Weapons of Mass Destruction: Assessing the Risks," the government compared the hypothetical lethal impact of chemical, biological and nuclear weapons aimed at the Washington, D.C., metropolitan area.

Its shocking conclusion was that a small airplane dispensing about 220 pounds of anthrax spores on a clear, calm night would kill 1 to 3 million people in a 300-square-mile area.

A hydrogen bomb, on the other hand, would kill 570,000 to 1.9 million individuals under the same conditions, and would also threaten massive destruction of property. A chemical attack under similar conditions would kill between 3,000 and 8,000 citizens.

The same report also noted: "Biological warfare agents are easier to produce than either nuclear or chemical warfare agents because they require a much smaller and cheaper industrial infrastructure and because the necessary technology and know-how is widely available."

Although the figures would require an adjustment for inflation, one government analyst several years ago projected that the fatalities caused by a terrorist spending \$1,500 on creating a nuclear bomb would set an anthrax terrorist back by only a penny.

The six most deadly biological agents, according to Michael T. Osterholm and John Schwartz in their book *Living Terrors: What America*

Needs to Know to Survive the Coming Bioterrorist Catastrophe, are smallpox, anthrax, plague, botulism, tularemia and hemorrhagic fever. The threat of smallpox might seem unusual to the layperson, as it has been virtually eradicated through the use of vaccinations. However, due to the successful containment of the disease, no one has been vaccinated for smallpox since the 1970s. In the event of an outbreak of smallpox, everyone under age 30 would be at risk. Some people who were vaccinated years ago may have lost their immunity, as well. How deadly is smallpox? Approximately 500 million people died of smallpox in the last century alone.

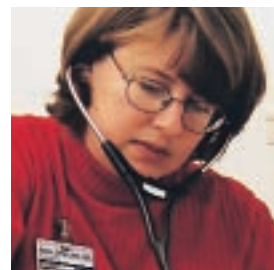
Margaret Hamburg, assistant secretary for Planning and Evaluation at the U.S. Department of Health and Human Services, may have best summed up the threats of terrorism in her 1999 congressional testimony:

"Terrorist attacks are intended to create some combination of illness, injury, suffering, death and economic loss—all of which increase the likelihood of behavioral, psychological and social disorder. Bioterrorism, with its implication of death arriving imperceptibly through the air we breathe, poses a new constellation of threats to the resilient human mind and to the power of both large and small communities to survive intact. In addition to the potentially massive number of physical casualties or deaths, bioterrorism, by threat or in fact, will create a devastating number of psychological casualties. A bioterrorist event is different from all other forms of terrorism in its potential to precipitate mass behavior responses such as panic, civil disorder and pandemonium. This is especially true if the bioweapon used is a communicable agent that spreads disease in successive waves of transmission."

\$1.2 MILLION GRANT PROVIDES

Expanded Health Care

SERVICES FOR UNDERSERVED



(top right) Allison DeHart, MSN'95, examines patient Jimmy Dorton at the Vine Hill Clinic.

(above right) Treating a playground injury at the Park Avenue School clinic

(middle right) DeHart

(bottom right) A sore throat is checked at Park Avenue.

BY JULIA HELGASON

Photos by Peyton Hoge

Bonnie Pilon, senior associate dean for practice, says she resorted to unorthodox means to obtain a grant to expand the School of Nursing's Nurse-Managed Clinic Network. "I didn't write the application in strict accordance with the rules, because it wouldn't have told the story," she said. "It wouldn't have explained our rich and amazing past. I had to make the reviewers understand that we have a well-established network and an impressive history of service," she said. "We know what we're doing."

The skeptics were convinced. In July, the School of Nursing was awarded \$1.2 million by the Health Resources and Services Administration (HRSA) Public Health Service, Division of Nursing, for the systematic, five-year expansion of its Nurse-Managed Clinic Network. HRSA is an agency of the U.S. Department of Health and Human Services.

Pilon doesn't view the grant in terms of dollars and cents. She sees it in terms of welcome relief for more sick, economically disadvantaged people: easier breathing for asthmatic children, regained independence for arthritic seniors, lowered anxiety for emotionally disturbed patients, emotional strength for women fleeing domestic violence, healthier newborns with normal birth weights, and the list goes on.

All those served by the practice network are in need. Most have few, if any, alternatives. Uninsured or under-insured, they may have Medicare or TennCare, but few have means of transportation. Friends or family willing to take them to doctors' appointments are at work during most doctors' office hours. Many transportation problems are eliminated when clinics are located near patients' homes. However, Vine Hill Clinic is not accessible

for all of the potential patients needing care. Expansion of the Nurse-Managed Clinic Network will make health care available to more people. The new grant will build on the network's established areas of care by providing:

- Primary care for low income, elderly or disabled persons in public housing projects
- Community health services including mental health services for minority and economically disadvantaged persons
- Primary care for impoverished children and their families through in-school clinics
- Prenatal care for an immigrant Hispanic community
- Primary care and mental health services for victims of domestic violence

But patients are only half the equation. Funding the practice clinic network also provides continuing education for nursing school faculty, learning laboratories for nursing students and sites for nursing faculty

to generate practice hours needed to renew their professional certification. The network is an effective, efficient way to stretch community dollars, Pilon said.

Nurse-Managed Clinics

The cornerstone of the nurse-managed network is Vine Hill Community Clinic, offering a full range of family practice services. The 3,400-sq. ft. clinic occupies the entire second floor of Vine Hill Community Center at 625 Benton Ave. There are eight examination rooms and three mental health consultation rooms in addition to the reception area and administrative and clerical space. Vine Hill Towers, located just across the parking lot from the clinic, is a subsidized apartment building for elderly and disabled people, many of whom rely on the clinic for primary care. The clinic operates at full capacity, logging over 8,000 patient visits a year.

The grant provides for additional patients and for additional hours of mental health

"...we come to work knowing we're making a difference in people's lives."



Thousands of patients from throughout Middle Tennessee rely on the Vine Hill Clinic for primary health care. The vast majority of those patients do not have private insurance and are enrolled in TennCare or Medicare.

services. "Trouble is we don't have any space to expand," said clinic director Terri Crutcher, MSN, RN. Rather than expanding into additional space, the clinic will grow in the temporal dimension—opening four hours on Saturdays and remaining open until 8 p.m. on weekdays. Crutcher is the clinic's first full-time director. Pilon said Crutcher was handpicked for the job based on her competency, dedication, good humor and patience.

The clinic, staffed by nurse practitioners, opened in Vine Hill Towers in 1991 with a grant from the W.K. Kellogg Foundation. It moved to its present location in the summer of 2000 by virtue of VUSN's funding of \$250 thousand in construction and renovation costs. In addition to expanding the Vine Hill Clinic, the grant provides for three additional clinics operating part-time in three HUD-funded buildings: Parthenon Towers, 301 28th Ave N; Hadley Park Towers, 2901 John Merritt Blvd.; and Madison Towers, 591 North DuPont Ave.

School Clinics

The School of Nursing established its first school-based practice clinic at Fall-Hamilton Elementary School in 1995 as a satellite of Vine Hill Clinic. A second school clinic was opened at Taylor Stratton Elementary School in 1998. Clare Sullivan, coordinates the school clinic program. On an average day in the 1999-2000 school year, the two clinics administered 45 scheduled medications and procedures, Sullivan said. Most were for chronic diseases: asthma, attention deficit disorder, depression, diabetes, sickle cell anemia and seizure disorders. "The chronic conditions we see at school clinics used to cause high rates of absenteeism," Sullivan said. "We've been able to make a positive impact by overseeing the children's medication and by educating the children and their families about their illnesses and treatment. Children must be healthy to learn, and children



Nurse practitioner GeorgeAnne Raines cares for a young patient at the Park Avenue School clinic. The school clinics serve as the sole source of health care for many children. Clinic staff had already treated more than 150 illnesses or injuries during the first two weeks of the school year.

“Children must be healthy to learn, and children must learn to be healthy.”

must learn to be healthy,” she said.

In addition to chronic conditions, school nurse practitioners also saw children with various acute complaints: ear, nose and throat ailments; head lice; abdominal pain or stomach upset; and injuries. These four categories of illness were treated in double digits during the 1999–2000 school year.

Clinic staff follows carefully any health-related barrier to learning. In consultation with family, health professionals and teachers, nurse practitioners develop an individualized health plan for each child.

For example, last year clinic nurses met a bright and personable Mexican boy enrolled in an English as a Second Language class. His

teachers were concerned because the child was exceedingly small for his age—below the fifth percentile in height and weight. His family spoke little English and had no insurance. Through an interpreter the parents agreed to a physical examination of their son. The exam revealed blood in the child's urine. The clinic's medical preceptor arranged a consultation with a pediatric nephrologist. The clinic's nurse practitioners helped the parents apply for TennCare and the boy is now receiving treatment.

It is no wonder that parents' approval rate for the clinics is high. The children, for their part, see clinic staff as friends and confidants. The clinics have reduced absenteeism not just for the school children, but also for their working parents. Teachers report more attentive students.

School health programs offer the most practical and efficient way to bolster the general health of students and their families, Pilon said. "Schools are the center of the social structure for the student and a significant source of interaction for parents. Through contact with one child, the school health provider is positioned to influence health behaviors of the entire family."

The HRSA grant expands the network's base to a third school, Park Avenue Enhanced Option School, with an additional 2,558 clinic visits projected for this school year. According to clinic director GeorgeAnne Raines, she had already treated more than 150 student cases in the first two weeks of school.

Domestic Violence Shelter

In addition to various physical ills, most women at the YWCA's domestic violence shelter have suffered years of physical and emotional abuse. Nearly all will need counseling as they struggle to find a semblance of normal life. Their need for mental health services has been obvious to Charlotte

Covington, BSN'69, MSN'89, since she opened a pilot practice clinic at the shelter. "Both the women and their children have a lot of issues, a lot of emotional baggage," Covington said. In their fight for survival, the women's health care and that of their children often have been neglected. Many of the children suffer from Post-Traumatic Stress Syndrome. Though the women are relieved to have escaped, they are worried, tense and jittery. Fear continues to rule their lives. The road ahead seems fraught with unknown perils. Many mothers also need help with parenting skills. Substance abuse is not uncommon.

"I so wanted them to have access to counseling," Covington said, "but we couldn't even pay for routine lab work."

The HRSA grant will provide much-needed on-site mental health services at the shelter one day a week, as well as money for medications, Pap smears and STD testing.

When Covington first started the clinic, she expected to be busy with injury care and acute care issues. Instead, much of her time is spent on school physicals for the children. A physical exam is a condition of admittance to Metro schools. Since Covington does the exams at the shelter, mothers do not need to leave the shelter and risk discovery.

"Prior to VUSN's being a part of the shelter services, there were no options for these women and children," said Covington. "If medical care was needed, either they chose not to seek help, went to the ER or sought out their private physician, and that's not an option if insurance is covered through the spouse and a bill would be mailed home.

"The clinic is a good example of how we can take health care to people where they live or work," Covington said. "Sometimes you just have to take it to the community because they cannot always come to you."

Nurse-Midwifery Services

Nurse-midwives see pregnant women at Vine Hill Clinic one day a week, falling far short of the demand for their services. Through their experiences at Vine Hill, they identified a group whose need is little short

Conversation Transforms a Life

About five years ago a young woman came to Vine Hill Clinic complaining of severe joint and muscle pain. Nurse practitioner Allison DeHart was assigned to her case. As DeHart examined the new patient, she engaged the woman in conversation. The patient, Brenda Evans (not her real name), responded hungrily to DeHart's friendly overtures.

The 38-year-old woman revealed that she lived in a nearby halfway house for recovering drug addicts. As much as she wanted to stay straight, she feared her gnawing pain might drive her back to substance abuse.

"I've described this pain to every doctor I've seen lately, and I've seen plenty," Evans said. "But they don't believe me and they send me away. They think I'm desperate for drugs and that I invented the pain to get a prescription."

DeHart looked at Evans. Their eyes met. DeHart read the pain in the taut lines of the woman's face and in her tired eyes.

"Brenda," DeHart said, "I believe you."

Vine Hill Clinic has access to consultation with Vanderbilt physicians. DeHart sent Evans to Vanderbilt for diagnostic work. Tests confirmed that Evans suffered from rheumatoid arthritis. She

was given the treatment she needed.

Almost immediately, Evans' symptoms abated. In the months that followed, she returned to Vine Hill Clinic for scheduled checkups. DeHart and other clinic staffers perceived a Cinderella-like transformation. No longer a frail, distraught woman, Evans was becoming a glowing, self-confident and purposeful individual. Evans credits DeHart with playing fairy godmother.

Eventually Evans decided to return to the classroom to acquire a marketable skill. She graduated in due course, receiving certification as a Licensed Practical Nurse.

Evans invited her friends on the Vine Hill staff to the ceremony. "We wouldn't have missed it," Dehart said. "We were so very proud of her. And she said we belonged there, because she couldn't have made it without us."

Five years after her initial visit to Vine Hill Clinic, Evans works as an LPN in a local nursing home. A sober, reliable man has entered her life. Her arthritis still flares up, and she sometimes she walks with a bit of a limp. Yet now she walks with her head held high.

All because Allison DeHart paused to listen and to hear.

of desperate—the growing number of immigrant Hispanic women.

"Can you imagine finding yourself pregnant in a foreign country where you have almost no assets and don't even speak the language? It can be very scary," says nurse-midwife Jacqui McMillian-Bohler, CNM, MSN. That is why the School of Nursing has assigned McMillian-Bohler and other Spanish-speaking nurse-midwives to this population.

"Speaking their language makes a huge difference," McMillian-Bohler said. "It reduces risks and anxiety for our patients. If we didn't speak Spanish, we couldn't even get a case history without an interpreter."

The nurse-midwives would like to locate a prenatal clinic in the Woodbine area, in Nashville's largest Hispanic neighborhood. This is what Pilon had in mind when she wrote the HRSA grant application. Funding

for the clinic has been approved, but site-selection has not been finalized, Pilon said.

It is not surprising that satisfaction is high among the nurse network's patient population, but staffers give their own job satisfaction top ratings. Back at Vine Hill Clinic, Terri Crutcher sums it up this way: "No, it's not always easy. But we come to work knowing we're making a difference in people's lives. And that's not a burden; that's a privilege." ♦



IN THE
shadow
OF THE PYRAMIDS



Michael Briley (right) with VU benefactor Dr. Bob Sauder. Sauder helped finance Briley's first trip to Egypt, paying for airfare and medical supplies, before making the journey himself.

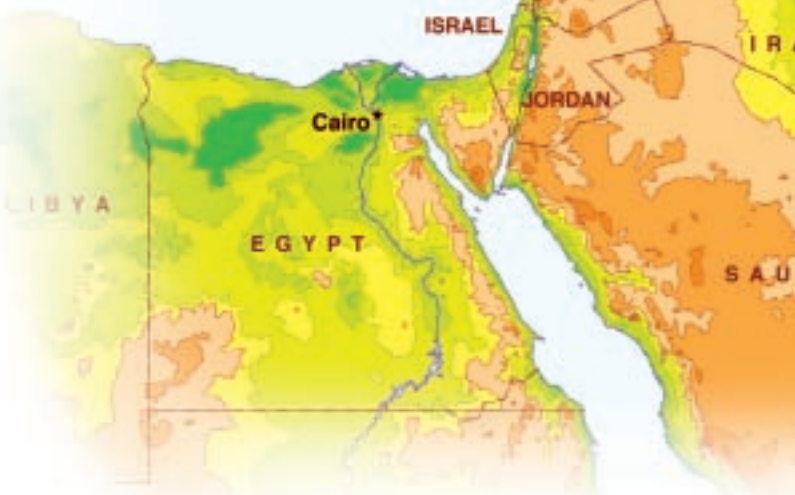
BY SHELTON CLARK

Links to the past are a common theme in Michael Briley's life. Briley, MSN'94, still carries the weathered black leather bag that his mentor, Dr. Robert Tucker, carried. Although Briley now works as chief clinician for TransSouth Healthcare and as director of clinical practice at the Tucker Clinic, both in his hometown of Jackson, Tenn., he enjoys having a daily reminder of the man who inspired him. But a past even more distant has always beckoned to Briley.

"Since I was a kid, I've always been fascinated with Egypt," said Briley. "My folks set up an account at the bank for me specifically for a trip to Egypt, because I always said that I wanted to go." Mowing lawns and working at the local JCPenney during his teens, then getting a job as an orderly during his undergraduate days at Freed-Hardeman College helped him accumulate the funds, though he didn't know how or when he would get there. His time at VUSN helped Briley's dream become a reality. A Church of Christ congregation in Nashville's Crieve Hall neighborhood helped him organize his first trip to Egypt in 1992.

"I went to Egypt not knowing anyone," he said. "I had some contacts over here [in America], and they in turn talked to their friends who were native Egyptians in Cairo. I wanted to know what I could do to be of service to them because I have always been interested in their country and their culture." Egypt has a surfeit of insulin-dependent diabetes, due in large part to genetic factors and diet. This was the first problem Briley had the chance to combat. "They needed insulin, oral hypoglycemic drugs, printed diet information, lancets," Briley said. "One of my contacts was the director of the hospital in Cairo and he helped me get through customs."

"There is a lack of medical care, especially in southern Egypt."



Each year since then, he has returned for 10 days, often taking Vanderbilt friends and colleagues. "Most recently, Bob Sauder went with me." Sauder is a Jackson physician and Vanderbilt benefactor who not only financed Briley's VUSN education, but also paid for the airfare and medicines for Briley's first trip to Egypt.

"We gave a lot of thiamin and other vitamin injections. We were in a place called Sahara City, which is a very poor area near the Pyramids. There is a nun there who has sort of taken the role of Mother Teresa for that area. She has all these children with no family that she's raising.

"I've taken clothes, shoes—I've even taken some treats, since they don't have good quality chocolate there—just to build a bridge," Briley said. "My nursing skills come in handy for assessment purposes, being aware of diseases and knowing how to treat them, and my advance practice teaching and experience at Vanderbilt and then in the field for seven years have really come in handy. It's definitely a Third World country, and I now have a greater appreciation for what I have. I'd like to say these trips are a selfless venture, but they're a selfish one also, as I derive so much pleasure from meeting the people there and being able to help them.

"I often see adults now who were small children when I made my first trip, and I do think that they have lived healthier lives and have grown up disease-free because of the teaching we provided. They look forward to my coming back, and now with the advent of the Internet, we keep in contact by e-mail. Their standard of living is a little higher because of what we've taught them, such as keeping their sugar under control, or alternating injection sites for their insulin shots."

Briley said that roughly one in four Egyptians are diabetic, with many families having more than one diabetic member. "For my trip in '97, we did a lot of beta-cell transplants, which are more successful in Egypt than they are in the U.S." Infant mortality, too, is a problem, primarily in the rural areas of Luxor and into the Sudan. Briley estimates the infant mortality rate to be 30 to 40 deaths for every thousand births.

Sanitation, is a constant problem. "Kids play in drainage ditches, and you'll see hunks of meat in markets that have flies all over them," Briley said. Parasitic infections such as belharsia, which afflicts the liver, are rampant. "There is a lack of medical care, especially in southern Egypt," Briley added. "If you're in southern Egypt and you need surgery, they have to fly you by helicopter to Cairo."

In May of 1996, Briley was part of a group that bought the Tucker Clinic from its namesake physician, who had served Southside High School in Jackson when Briley was growing up. Before he passed away in October of that year, Tucker gave his black bag to Briley. Now, Briley's work in Jackson has come full circle, as the Tucker Clinic has moved to a site across the street from that same Southside High School.

Though he won't make it to Egypt this year (partly due to the expansion of his hometown Tucker Clinic), Briley still plans to return. Even before the events of September 11, tensions in the region also played a part in Briley's decision to wait on his next trip. "I was really touched by all the e-mails I got on September 11. I got e-mails from professors at the University of Cairo and other contacts over there, both Muslims and Coptic Christians, with condolences and to show their support. They were appalled; they just considered the whole thing an atrocity. They are all standing with us."

Although his next journey to the Land of the Pharaohs will have to wait, Briley looks forward to the possibility of having two new traveling companions join him—VUSN Dean Colleen Conway-Welch and her husband, Ted. ♦



Reunion 2001 a Great Success

Reunion 2001 in June was a tremendous success. Mary Munding, dean of the School of Nursing at Columbia University in New York, spoke to alumni, students, and faculty about “Educating Advanced Practice Nurses for the New Millennium.”

The annual reunion luncheon and awards ceremony was held at the University Club, where distinguished alumni Leanne Busby, MSN’87; Catherine Garner, BSN’76, MSN’82; and Elizabeth Dayani, BSN’71, MSN’72, were honored for their contributions to

nursing and their communities. Alumni toured the Vine Hill Clinic, the only VUSN clinic run exclusively by advanced practice nurses, which offers primary care to children, women’s health and midwifery and mental health services.

The Nursing Reunion festivities ended with an Alumni Association meeting on Saturday and breakfast at the University Club. Then Nursing alumni were free to join alumni from the other schools for an all-alumni luncheon and gala dinner dance.



PEYTON HOGE

Dean Colleen Conway-Welch, Columbia University School of Nursing Dean Mary Munding and Libby Dayani, BSN’71, MSN’72, president of the Julia Hereford Society



(top) Class of 1961 reunion luncheon at Poppy Pickering’s house. (above) VUSN Quinks from left to right: Marcy Rhodes Alford, Nancy Harney McDaniels, Jeanette Collins Sharp, Judy Sorensen Ferguson, Poppy Pickering Buchanan, Ginny Ritter McQueen, Judy Osborne Kiger, Sue Philbin Walsh.



PEYTON HOGE

VUSN Quinks: Rachel Beverly Gibb, BSN’43, Janice Feagin Olson Britton, BSN’44, and Mary Huntley Childre, BSN’43 at the Reunion luncheon



New Alumni President Takes Office

Another important Reunion activity was the election of Elizabeth Farrar, MSN’93 (Acute Care NP), as President of the Vanderbilt University School of Nursing Alumni Association. Farrar was voted in by the

Alumni Association Board of Directors and will serve for two years. After her graduation from VUSN she served as assistant professor of nursing at Winona State University in Rochester, Minn., and most recently as adjunct professor of medical/surgical nursing at Cumberland University in Lebanon, Tenn. Farrar now lives in Birmingham, Ala., with her husband and children.

Do You Know These Women?

Do you recognize this picture? We’d like to identify these young woman and add this photograph, as well as any you’d like to share with us, to our photo archives. The Office of Alumni Communications and Publications is collecting alumni photographs in any form—snapshots, slides, Polaroids, transparencies, tintypes, color or black and white. If you are willing to part with your photos of VUSN events or activities, please keep us in mind. We’ll put them to good use. From time to time, we will also ask for your help in identifying people and events in photos already in our files. Mail your photos—or your answers—to the *Vanderbilt Nurse*, Office of Alumni Communications and Publications, VU Station B 357703, 2301 Vanderbilt Place, Nashville, TN 37235-7703; or e-mail any questions to laurie.parker@vanderbilt.edu or call (615) 322-4624.



PEYTON HOGE

Courtyard Dedication

Years of dedication were honored October 19 when the main entrance of the old School of Medicine was renamed the Judy Jean and John E. Chapman Quadrangle.

Both Judy Jean, BSN’63, and her husband John have devoted their lives to health care education at Vanderbilt. Judy Jean served as interim dean of the School of Nursing from 1982–1983 and interim chair of the Department of Family and Community Health from 1984–1986. She is currently a senior associate in emergency medicine at the School of Medicine and was recently named professor of nursing emerita by the Board of Trust.

John Chapman served as dean of the medical school for more than 25 years and graduated more than two-thirds of the school’s living graduates. He stepped down in March to assume the post of associate vice chancellor for Medical Alumni Affairs.

Chancellor Gee and Dean Conway-Welch were among the many who braved the intermittent rain for the ceremony and the unveiling of several new sculptures that now grace the Quadrangle lawn.

Graduation

Of the 233 VUSN students granted their diplomas at May's graduation ceremony, several students received distinguished awards as well as honors in their specialties.

Sandra Rosalba Ermini and Gina L. Tschanz received the Amy Frances Brown Prize for Excellence in Writing, and John Mario Gotelli received the Luther Christman Award for Clinical Excellence in the Bridge Year.

School of Nursing Specialty Awards were presented to:

Acute Care Nurse Practitioner
Richard James Johnson, III

Adult Nurse Practitioner
Nikki Harris Wood

Family Nurse Practitioner
Jason Adam Armstrong

Gerontological Nurse Practitioner
John Mario Gotelli

Health Systems Management
Delia Ruth Nickolaus

Neonatal Nurse Practitioner
Libertad Orellana Raibstein

Pediatric Nurse Practitioner
Allison Elisabeth Lasiter

Psychiatric-Mental Health Nurse Practitioner
Deora K. Johnson

Women's Health Nurse Practitioner
Amy Elizabeth Freeman Williams

Pinning Ceremony

Chancellor E. Gordon Gee joined alumna Nancy Travis, BSN'47, and other honored guests on August 12 as the VUSN faculty honored the 225 graduates who received their professional nursing pins at the 73rd annual Pinning Ceremony. The pins are given to students who have completed the academic and clinical requirements necessary for their Masters of Science in Nursing degrees. In addition to their pins, several students received special honors in their areas of study:



PEYTON HOGE



PEYTON HOGE



PEYTON HOGE



PEYTON HOGE

(top right) Chancellor Gee addresses the 225 students honored at the 2001 Pinning ceremony. (above right) Robert Dickinson, RN, bestows a pin on his son, Robert. The elder Dickinson has been a nurse for 35 years. (above left) Sister Agnes-Marie Hughes, Acute Care Nurse Practitioner Specialty Award Winner, accepts her pin. (above) Chancellor Gee and VUSN graduate Nancy Travis, BSN'47.

Acute Care Nurse Practitioner
Sister Agnes-Marie Hughes

Adult Nurse Practitioner
John Scott Jackson

Family Nurse Practitioner
Margaret Anne Schlosser

Gerontological Nurse Practitioner
Regina Lynn Christiansen

Gerontological Nurse Practitioner
Pamela Jennings

Health Systems Management
Marcos A. Fernandez

Neonatal Nurse Practitioner
Denise Carole Case

Pediatric Nurse Practitioner
Carl Anthony Anderson

Psychiatric-Mental Health Nurse Practitioner
Ramona Phelan Scarborough

Women's Health Nurse Practitioner
Dalisa Barquero



PEYTON HOGE

Ada Smith, BSN'47, with first year students at the Dean's New Student Picnic Aug. 27.

Founder's Medalist Driven to Succeed

BY JESSICA PASLEY

It's a good thing Leah Akers-Bell likes to drive. In her two years of study at the Vanderbilt University School of Nursing, she put more than 65,000 miles on her car.

All of this to earn her MSN in Midwifery.

"I entered the program in August 1998, through the Bridge Program," Akers-Bell said. "I was attracted to the VUSN program because it allowed me to commute home to Indiana on weekends."

Akers-Bell, 42, was able to live with her aunt in Madison, a community less than 10 miles from the school, and focus her weekdays on her studies. Weekends were dedicated to her family more than 200 miles away.

"Instead of going through a move, my family just had to deal with the trauma of Mom being gone throughout the week. Most weekends I was able to get home," she said. "Sometimes it was just for 24 hours; other times it was for 48 hours."

"One night, barely three weeks into the program, I called my husband in the middle of night to tell him I was heading home. He told me to stay put, it was all going to be OK," she said, recalling the fears of separation. "I was able to work through that tough question. We all survived."

Akers-Bell did more than just survive. She was able to complete the seven-semester program with top honors. During May's graduation ceremonies, she was named the Founder's Medalist for the School of Nursing, as well as the outstanding student in the Nurse-Midwifery specialty. The Founder's Medal is conferred annually on the student who, in the judgment of the faculty, has achieved the strongest record in the areas of professional and academic performance.

"Receiving that award really blew me away," Akers-Bell said. "It still seems like a dream. It was enough for me to know that the school felt I was of the caliber to be considered."



DANA JOHNSON

Founder's Medalist Leah Akers-Bell receives her diploma from Dean Conway-Welch

A View of VUSN 2001

Number of students enrolled (total) 426

Full-Time	332
Part-Time (includes 42 special or non-degree seeking students)	95

Areas of Specialization

Acute Care Nurse Practitioner	57
Adult Nurse Practitioner	29
Family Nurse Practitioner	93
Health Systems Management	19
Neonatal Nurse Practitioner	26
Nurse-Midwifery	36
NM/FNP Dual Focus	9
Psychiatric-Mental Health NP	45
Pediatric Nurse Practitioner	34
Women's Health NP	30
Special (Non-Degree Seeking)	42

Women 88%
Men 12%

Minority Enrollment

Asian	5
African American	20
Hispanic	15
International	2
Other	16

Todd F. Ambrosia, MSN'98, has been selected as a Special Envoy to the Foreign Medical Service of the State Department, Office of Medical Services. As part of a special team of six physicians and nurses from the University of Maryland faculty, he has traveled to U.S. embassies worldwide to educate clinicians who provide health care to overseas diplomats and their families. He has recently completed missions in Tunis, Tunisia, and Pretoria, South Africa. Upcoming trips are slated for Asia and Australia. All missions are under State Department orders, initiated by Secretary of State Colin Powell.

Deborah Smith Armstrong, BSN'72, successfully defended her dissertation "Emotional Distress and Prenatal Attachment in Pregnancy After Perinatal Loss" and received her PhD in Nursing from the University of Kentucky. She has recently accepted a faculty appointment at the University of Louisville School of Nursing.

Stewart Bond, Post-Master's '95, was awarded a \$100,000 scholarship for his doctoral work in oncology at University of North Carolina.

Nancy Bowers, BSN'78, published *The Multiple Pregnancy Sourcebook* with McGraw-Hill in April.

Eunice Moe Brock, BSN'41, has returned to the Chinese village where she was born to missionary parents 82 years ago. She was recently named Honorary President of Liaocheng International Peace Hospital. Brock is now making plans for England's Dr. Harry Oldfield to visit the hospital to demonstrate Polycontrast Interference Photography, which displays the energy fields of the body through the use of computer imagery.

Patricia Glen Bryan, MSN'98, and Francis Marion "Frank" Bass III were married March 25, 2001. They live in Nashville.

Gina Bullington, MSN'93, has joined Horizon Medical Center in Nashville as director of emergency services.

Rhonda Blades Brown, MSN'96, teaches anatomy, physiology and health/wellness at Brentwood Academy in Brentwood, Tennessee.

Sandy Campbell, BSN'69, in addition to owning a seminar company, is working with Largo Medical Center on a special nurse recruiting and retention project.

Barbara Chandler, BSN'75, took time out from her work as a Pediatric Nurse Practitioner in Atlanta to travel to Gujarat, India, in February to help survivors of the area's massive earthquake. Working out of a tent clinic in Adhoi, she and the other mission volunteers saw patients around the clock for more than two weeks. Before coming home, Chandler traveled to Dhaba, Bangladesh, to visit fellow Vandy grads **Cheryl Shephard Schroeder, BSN'75**, and her husband, Don Schroeder, BE'75, who work as missionaries there.

McLean Cherry, MSN'94, has worked as a women's health care NP at the San Miguel Nursing Clinic and the Telluride Medical Center since 1998. She is finishing post master's work at the University of Colorado Health Sciences Center as an FNP.

Cathy Gordon Cutler, BSN'80, and her husband, Jim, are the proud parents of daughter Katherine Elizabeth, born September 8, 2000.

Linda Dial, BSN'80, has joined the Comprehensive Breast Care Center at Nashville's Baptist Hospital as its clinical coordinator. She will be providing education, referrals and support to women diagnosed with breast cancer and to their families. Dial was previously center coordinator for Response Oncology, Impact Center of Middle Tennessee.

Connie Klinefelter Dickey, MSN'90, is a gerontological nurse practitioner and provides education to families of gero-psych patients at Baptist Hospital in Knoxville, Tenn.

Laura Walsh Forrest, BSN'86, received her MSN from Hahnemann University in May and is currently employed as a pediatric nurse practitioner near Philadelphia, Pennsylvania.

Candace D. Fruin, BSN'94, MSN'95, married James D Stefansic, MS'96, PhD'00, on June 23, 2001. Candace works as assistant nurse manager of the neonatal intensive care unit at Vanderbilt University Medical Center and James is a neuro-imaging engineer at the Vanderbilt Research Center.

Nancy Glenn Maloney, BSN'58, has retired as professor emerita of nursing from Luther College in Decorah, Iowa. She is enjoying spending winters in the sun in Arizona.

Aubrey Paquin, MSN'00, has joined Pediatric Associates of Franklin as a board certified pediatric nurse practitioner.

Carrol Smith, BSN '64, is a full-time doctoral student at the University of Illinois at Chicago where she has been working for the past six years. She received a T-32 pre-doctoral training grant for three years of study in the area of Primary Health Care. Her main focus will be lesbian health care, especially lesbian domestic violence.

Judith Heffron Sweeney, BSN'70, MSN'75, was named associate professor in nursing at VUSN and received her Vanderbilt chair for 25 years of service this spring. She is also first year level director for the School. Her daughter, freshman Cara Acklen Sweeney, is the fourth generation of Sweeney's family to attend Vanderbilt.

Bob Wilkinson, MSN'96, married wife Sheila on March 23, 2001. After a honeymoon in Maui, the couple returned home to Marion, Kentucky. Bob works as a nurse practitioner at the Burkhardt Rural Health Clinic in nearby Salem.

Sarah Smith Zacharias, MSN'92, and her husband Eric, MD'93, are proud to announce the birth of daughter Katherine Kline, born June 11. Their son, Luke Harrison, celebrated his third birthday on July 31.

In Memoriam

Barbara "Biddie" Massenburg Alexander, BSN'53, of Dillon, Colorado, July 18, 2001.

Nezzie S. Allgood, BSN'40, of Madison, Mississippi, November 11, 2000.

Mary Gamble, BSN'36, of Knoxville, Tennessee, October 9, 2000.

Norma Sims Gomilla, BSN'46, died this spring in Hammond, Louisiana.

Bessie Kate Baldwin Haggerson, BSN'49, died in Tempe, Arizona, of a massive heart attack on May 4, 2001. She is survived by her husband, Dr. Nelson Haggerson, BA'49.

Colleen Kragelund Benson, BSN'63, of Laverne, California, spring of 2001.

Jean Corlette Hall, BSN'81, of Bradenton, Florida, died of breast cancer January 28, 2001.

David Mackersie, MSN'00, of Tullahoma, Tennessee, died in February, 2001.

We wish to acknowledge the generosity of those who made gifts to the Julia Hereford Society from July 1, 2000 to June 30, 2001

Mr. William J. Anderson III
Mr. & Mrs. Robert Ash
Ms. Corinne Barfield, MSN'97
Mr. & Mrs. H. Lee Barfield
Dr. & Mrs. Edward Beason
Mr. & Mrs. Harold Bernard
Dr. & Mrs. Stanley Bernard
Dr. & Mrs. Frank Boehm
Mrs. Marjory Boyles-Hopkinson
Mr. J. Michael Briley, MSN'94
Mr. Jamie Scott Brodie, MSN'78
Dr. & Mrs. Alvin Burt
Mr. & Mrs. Sam Christopher
Mr. & Mrs. Joel & Charlotte Covington, BSN'69, MSN'89
Ms. Mary Coward, BSN'59
Mr. & Mrs. Tony & Amy Cox, MSN'94
Dr. & Mrs. John & Elizabeth Dayani, BSN'71, MSN'72
Mr. & Mrs. Steven & Robin Diamond, MSN'78
Mr. & Mrs. Gene Douglas
Ms. Marilyn Dubree, MSN'76
Dr. & Mrs. William & Frances Edwards, BSN'53, MSN'76
Dr. & Mrs. Irwin Eskind
Dr. & Mrs. Jeffrey Eskind
Ms. Carol Etherington, MSN'75 & Mr. Joe Fossick
Dr. & Mrs. Alan & Carolyn Fruin, BSN'66
Dr. Steven Gabbe & Dr. Patricia Temple
Mr. & Mrs. Ralph & Virginia George, BSN'47, MA'72
Mr. & Mrs. Charles Godchaux
Mr. & Mrs. Frank Godchaux III
Dr. Anne Godfrey, BSN'42
Mr. & Mrs. Paul & Carolyn Gottlieb, BSN'60
Dr. & Mrs. John & Gay Greer, BSN'74
Dr. & Mrs. Laurence Grossman
Mr. & Mrs. Richard & Sheryl Gudaitis, BSN'79
Ms. Sally Jo Hale, BSN'76
Mr. & Mrs. H. Rodes Hart
Mr. & Mrs. J. Michael Hayes
Mr. & Mrs. Robert Henderson

Mr. & Mrs. Lawrence & Virginia Hjalmarson, BSN'76
Mr. & Mrs. Burton Hummell
Mrs. Martha Ingram
Mr. Donald Jacobson & Dr. Margaret Jacobson, BSN'54, MSN'58, PhD'65
Dr. & Mrs. Harry Jacobson
Mrs. Marjory Jones, BSN'75
Mr. Robert Laben & Dr. Joyce Laben
Mrs. Martha Larsen, BSN'48
Mr. & Mrs. Robert & Jeanne Latimer, BSN'75
Mr. & Mrs. Ronal & Marsha Lentz, BSN'74
Mr. & Mrs. C. Stephen Lynn
Mr. & Mrs. William & Mary Mandeville, Jr.
Mr. & Mrs. Charles N. Martin
Dr. Donna McArthur, MSN'77
Dr. & Mrs. Paul McCombs
Ms. Jane McEvoy
Dr. & Mrs. Henry McGill, BSN'47
Mrs. Margaret McGill
Mr. & Mrs. Paul Moran
Dr. & Mrs. Charles & Virginia Myer, BSN'75
Nashville Nephrology Associates
Mr. & Mrs. Edward Nelson
Mr. & Mrs. Charles Nichols
Mr. & Mrs. D. Craig & Sally Nordlund BSN'74
Mr. & Mrs. Don Norman
Dr. & Mrs. Thomas & Charlotte Norwood, BSN'66
Dr. & Mrs. Richard & Susan Oliver, MSN'90
Mr. & Mrs. Godfrey Parkerson
Mrs. Nancy Peterson
Mr. & Mrs. Terry Postlewaite
Mr. Phillip Postlewaite
Mrs. Evelyn Ragland
Mr. & Mrs. Richard Ragsdale
Dr. & Mrs. Allan Rankin
Mr. & Mrs. Robert Richardson
Dr. & Mrs. Roscoe Robinson
Drs. Martin Sandler & Glynis Sacks
Dr. & Mrs. Rama & Annette Sastry, BSN'62
Dr. Karen Schumacher, BSN'71
Dr. Calvin Shaffer, BSN'73
Mrs. Elizabeth Shapiro
Mr. & Mrs. George Shwab III
Mr. & Mrs. Stephen Silverman
Mr. Wesley Slayden & Dr. Rita Slayden, BSN'74

Mrs. Madison Smith, BSN'47
Dr. & Mrs. Stephen & Lisa Staggs, BSN'78, MSN'88
Col. & Mrs. Frederick and Linda Stephen, BSN'70
Hon. & Mrs. Matthew & Judith Sweeney, BSN'70, MSN'75
Mr. & Mrs. Earl Swensson
Mr. & Mrs. Barry & Joann Thompson, BSN'63
Dr. & Mrs. W. Phillips Tinkler, BSN'47
Mrs. Jeanette Travis
Mrs. Nancy Travis, BSN'47
Dr. & Mrs. Richard Treadway
Mr. & Mrs. Bronson & Nancy Trevor, MSN'97
Mr. & Mrs. Jack Turner
Dr. & Mrs. Jan Van Eys
Dr. Ken Wallston
Mr. Ted H. Welch & Dean Colleen Conway-Welch
Mr. Albert Werthan
Mr. & Mrs. Bernard Werthan Jr.
Lettie Pate Whitehead Foundation
Mr. Bob Wilkinson, MSN'96
Mr. & Mrs. Joseph & Elsie Willard, BSN'42
Dr. Doreen Wise, BSN'68
Mr. & Mrs. Bruce Wohlfeld

Following is a listing of Julia Hereford Society Lifetime Members. Lifetime status is gained through cumulative gifts of \$100,000 or more.

Dr. & Mrs. Frank Boehm
Mr. & Mrs. Thomas Cone
Dr. & Mrs. Thomas Frist
Mr. & Mrs. G. Furgason
Mr. & Mrs. Charles Godchaux
Mr. & Mrs. Frank Godchaux III
Mr. & Mrs. Burton Hummell
Dr. & Mrs. Allan Rankin
Mr. & Mrs. Robert C. Richardson
Mrs. Jeanette Travis
Mrs. Nancy Travis, BSN'47
Mrs. Jean Wheeler, BSN'55
Lettie Pate Whitehead Foundation
Mr. & Mrs. Robert Zelle

Following is a list of Julia Hereford Society Heritage Circle members. Membership is verified through bequest documentation.

Mr. Douglas R. Arrington, MSN'88
Dr. & Mrs. Allan Bass, BSN'40
Mr. & Mrs. Stephen & Virginia Betts, MSN'71, BE'68, MS'72
Dr. & Mrs. Frank Boehm
Ms. Virginia Crenshaw, BSN'42, EdD'61
Mrs. Virginia L. Davis, BSN'65 MSN'70
Mr. G.A. Ferguson
Mr. & Mrs. Ralph George, BSN'47, MA'72
Dr. & Mrs. Michael E. Glasscock III
Mr. & Mrs. Frank Godchaux III
Ms. Dorothy Kent, BSN'59, MSN'68
Mr. Robert Laben & Dr. Joyce Laben
Dr. Thomas Payne
Dr. Karen Schumacher, BSN'71
Mrs. Elizabeth Shapiro
Mr. Ruth E. Sholars, BSN'54, MSN'70
Mrs. Kathryn S. Skinner, BSN'56
Mrs. J. Paul Slayden Jr., BSN'42
Mrs. Madison Smith, BSN'47
Dr. & Mrs. Kent Sorensen, BSN'78
Dr. Bertram E. Sproffkin
Mrs. Nancy Travis, BSN'47
Ms. Betty Ann Voigt, BSN'47
Dean Colleen Conway-Welch
Mrs. Jean Wheeler, BSN'55

Vanderbilt University
VU Station B 357703
2301 Vanderbilt Place
Nashville, TN 37235-7703
Address service requested

Nonprofit Org.
U.S. Postage
PAID
Nashville, TN
Permit No. 1460

www.mc.vanderbilt.edu/nursing

Invest IN THE Future



Through a planned gift to the
Vanderbilt University School of Nursing,

You can

- Help a researcher find a cure
- Build the best facilities for nursing education possible
- Provide state-of-the-art materials that allow students and faculty to remain in the forefront of the rapidly changing world of health care
- Offer students the opportunity to learn from some of the finest minds in nursing
- Give a student the chance to realize a dream

You can make it happen through a planned gift to the Vanderbilt University School of Nursing. To find out how, please contact

Adele Franzblau
Director of Planned Giving at Vanderbilt
2014 Broadway, Suite 350
Nashville, Tennessee 37203
(615) 343-3113
plannedgiving@vanderbilt.edu
www.vanderbilt.edu/alumni/giving

MAILING INFO

Vanderbilt University School of Nursing
206 Mary Ragland Godchaux Hall
461 21st Avenue South
Nashville, TN 37240
www.mc.vanderbilt.edu/nursing