Raiding the Medicine Cabinet

VUSN helps safely rid communities of expired prescription drugs

IN THIS ISSUE:
NEWS AROUND THE SCHOOL 4
HEALING THROUGH LITERATURE 14
ABOVE AND BEYOND 20
IN THIS ISSUE:

NEWS AROUND THE SCHOOL 4
HEALING THROUGH LITERATURE 14
ABOVE AND BEYOND 20
As a nurse practitioner specializing in acute care, Mark Gerdesmeier helps people through very difficult times. With his Vanderbilt University School of Nursing training, he knows he’s up to the challenge.

During his time as a Vanderbilt student, Gerdesmeier benefited from the LaJuan Furgason Memorial Scholarship Fund established by G.A. Furgason in memory of his daughter, LaJuan, BSN’67.

“There are a lot of people out there with big dreams and big hopes when it comes to education,” Gerdesmeier says. “Giving someone a boost to help them achieve that dream is a wonderful thing.”

If you’d like to support dedicated nursing students like Mark through scholarship endowment, please contact Sydney Haffkine at (615) 322-8851 or sydney.haffkine@vanderbilt.edu. You may also visit www.vanderbilthealth.org/givetonusring to learn more.
features

8 Raiding the Medicine Cabinet
Learn how VUSN helps safely rid homes, families and the community of expired prescription drugs

14 Healing through Literature
See how VUSN Alum and Jane Austen Scholar Christine Shih looks at literature through a nurse’s lens

20 Above and Beyond
Meet four recent doctoral graduates who are making an impact in research and practice

make connections@vusn

We want to reach out to you. Pick one or all of the ways below to stay in touch with your classmates, faculty and School:

Log on to Vanderbilt Nurse online to learn more and make comments on any of the stories in this issue at www.vanderbilt.edu/vanderbiltnurse or follow our blog at www.vanderbilt.edu/vanderbiltnurse/blog

Join more than 1,800 fans at www.facebook.com/vanderbiltschoolofnursing

Follow us on www.twitter.com/vanderbiltnurse

Submit your e-mail address to www.nursing.vanderbilt.edu/gogreen so we can send you quarterly electronic updates.

A Vanderbilt network of alumni, students and friends worldwide.
VuConnect
an online community. Are you connected? www.vuconnect.com

departments

2 Message from the Dean
Colleen Conway-Welch shares her vision for the academic preparation of advanced practice nurses

4 News around the school
Research, outreach, initiatives at VUSN and from Vanderbilt University Medical Center

7 Research news
Shelagh Mulvaney uses technology and creativity to help adolescents with diabetes

23 Class notes
Promotions, personal achievements, moves, marriages, babies, and the latest news from classmates

29 Photo gallery
Enjoy photos from Graduation and Pinning 2011
The School of Nursing’s fall semester is well under way, and it is always an exciting time for our faculty and staff to welcome a large group of very talented students to the school—close to 1,000!

We are pleased to announce the School of Nursing is now the largest professional school at Vanderbilt. Although we have grown, we remain constant in our mission to “value excellence and innovation in preserving and advancing the art and science of nursing in the scholarly domains of education, practice, research and informatics.” These values are pursued through personal interactions and the integration of technology, while embracing cultural and academic diversity.

Our vision is for VUSN to continuously reinvent itself in ways that distinguish the School among its peers, with an unparalleled focus on activities that benefit the community and society at large.

VUSN is responding to calls from the American Association of Colleges of Nursing and national nursing organizations such as the American Association of Nurse Practitioners, the National Organization of Nurse Practitioner Faculty, and the American Association of Nurse Anesthetists, to build the academic preparation of advanced practice nurses through the master’s to the doctoral level. The Institute of Medicine has issued a call to double the overall number of nurses with doctorates.

In fall 2008, we initiated the Doctor of Nursing Practice (DNP) program, as our second doctoral program. This fall, VUSN launched a new BSN to DNP program, where students earn an MSN degree as part of the program of study. Those who enter as prespecialty students, also have the option to earn their MSN to seamlessly progress to the DNP. Built upon the School’s internationally recognized advanced practice nursing programs, the DNP program provides an alternative to a research-focused doctorate with a focus on evidence-based practice, quality improvement and systems thinking.

The increasing complexity of the nation’s health care environment requires that advanced practice nurses develop expanded competencies to deliver patient care and provide leadership in complex health care environments based on the latest scientific evidence, use emerging technology and information systems to improve efficacy and evaluate outcomes as well as to implement quality and safety initiatives in small practices and across large health systems.

VUSN will continue to engage in meaningful ways in order to rapidly respond to changing health care environments and an evolving health care system. In the following pages of Nurse magazine, you will find some exciting examples of our many efforts.

Sincerely,

Colleen Conway-Welch, PhD, CNM, FAAN, FACNM
Nancy and Hilliard Travis Professor and Dean of the School of Nursing
colleen.conway-welch@vanderbilt.edu
Vanderbilt’s successful *Shape the Future* campaign, has transformed Vanderbilt University and the School of Nursing. Thank you for your support.

**by the numbers**

- Donors made 21 bequests totaling **$5,920,892**
- Total dollars raised through the campaign for the School of Nursing: **$12,721,152**
- $2 million was given to update technology and improve facilities, including the renovation of Godchaux Hall and the creation of the Frist Center for Informatics
- $8,579,494 was earmarked to establish innovative programs and expand research
- The challenge continues...
- $2 million Gifts at this level or higher may name an endowed chair
- $100,000 Gifts at this level or higher may name an endowed scholarship

**20** scholarships were created through gifts

**$31,161,824** Total dollars raised through the campaign for the School of Nursing

**$3,423,898** given in support of faculty

3 new endowed chairs established, which support VUSN leadership in national and international advocacy roles and bring the greatest minds to the faculty

$12,721,152 donated for student scholarships and financial aid

$5,920,892

$2,921,729
**“LAUGHING GAS” ADDED AS CHILDBIRTH PAIN CONTROL OPTION**

Vanderbilt University Medical Center started offering nitrous oxide this summer as a pain management tool for women during childbirth — joining only two other hospitals in the country offering this option.

Nitrous oxide, also called “laughing gas,” can be administered quickly by the patient, is widely known to rapidly ease pain and has been proven safe for both mothers and their babies.

“Childbirth is not a one-size-fits-all process,” said Frank Boehm, MD, professor of Obstetrics and Gynecology and vice-chair of the department. “Women deserve to have a wide variety of options available to them. Nitrous oxide is an option that takes the edge off of pain, and I think it may become a popular option for some women who give birth at Vanderbilt.”

---

**Crutcher Named to Key Post**

Terri Davis Crutcher, MSN, RN, has been named assistant dean for Clinical and Community Partnerships for Vanderbilt University School of Nursing.

Crutcher will work closely with Bonnie Pilon, DSN, RN, senior associate dean of Clinical and Community Partnerships, assisting with day-to-day operations and strategic direction initiatives for VUSN’s comprehensive network of faculty practice programs.

“Everything Terri touches seems to turn to gold, because of her tireless work and dedication,” said Colleen Conway-Welch, PhD, CNM, dean of VUSN. “She knows about quality improvement from practice and teaching perspectives and is the ideal person to fill this newly created position.”

Crutcher has held nursing management positions at Vanderbilt University Medical Center for more than 25 years.

She has been a faculty member at VUSN since 2000, when she was recruited as the first clinical director for primary care at Vine Hill Clinic, where she led the growth and renovation of that site through 2008. She is an assistant professor in the School’s Master of Nursing in the Health Systems Management major and has a track record as a successful grant writer.

Crutcher is also currently enrolled in the Doctor of Nursing Practice program at the Georgia Health Sciences University.
The odorless, tasteless gas is inhaled through a mask. For labor, 50 percent nitrous oxide and 50 percent oxygen are blended together by a specialized device.

The mixture is then self-administered by the mother through a mask or mouthpiece she controls. This nitrous oxide mixture is safe for both the mother and baby because it is eliminated from the body through the lungs, rather than through the liver. The 50-50 mix does not cause newborns to be groggy.

“Labor pain is subjective and highly individualized depending on the laboring woman,” said Michelle Collins, MSN, a certified nurse-midwife and assistant professor at Vanderbilt University School of Nursing. “So this is a wonderful way to provide a non-invasive option that provides pain relief for many women, particularly those who do not want an epidural or intravenous narcotics for pain.”

Nitrous oxide has many advantages including a quick response time. Most women experience its effects in less than one minute, and then it dissipates fully within five minutes after stopping use. It can be started and stopped at any point during labor, depending on the mother’s preference.

“A hallmark of using nitrous oxide in a labor environment is that the mother is able to self-administer via the mask,” said Sarah Starr, MD, an assistant professor of Clinical Anesthesiology who works with obstetrics patients. “This increases her sense of control over the dosage, over her pain and over herself during labor.”

At Vanderbilt, the provider and the patient decide together if nitrous oxide is an appropriate option. If so, it will be initiated by an anesthesia provider who will teach the patient how to self-administer.

During the first full month of the program, 35 women used nitrous oxide during labor at VUMC. Twenty-two gave birth using the gas as their sole method of labor analgesia and the remaining 13 used it during labor and then converted to an epidural further along in their labor. By way of comparison, at University of California San Francisco, which has used nitrous oxide as an option for 30-plus years, about half of their patients start with the gas and convert to epidurals.

Starr and Collins have presented about nitrous oxide at several national and regional conferences, and since offering the option at VUMC, many other hospitals throughout the country have expressed interest in pursuing the option for their own labor and delivery services.

Thanks to the generosity of VUSN alumni who sent items to the School, some of VUSN’s historical memorabilia is now on display in the School’s Atrium and items will be rotated throughout the year. The first complete display features a cadet uniform of Elizabeth White Cleino, BSN ‘44. The red epaulets and cadet patch were worn on the uniform of Ann Moore Crain, BSN ‘47-A. The cover of Harper’s Bazaar magazine from November, 1943, depicts a nurse cadet winter uniform.

The background picture is Gloria Canady, VUSN freshman, shown modeling the summer outdoor uniform of the U.S. Cadet Nurse Corps. Elsie McGill Tinkler, BSN ‘47-A, is pictured in the oval frame wearing her winter cadet uniform.

and nurse corps membership card were issued to and donated by Virginia George, BSN ‘47-B.

Thanks to the generosity of VUSN alumni who sent in items to the School, some of VUSN’s historical memorabilia is now on display in the School’s Atrium and items will be rotated throughout the year. The first complete display features a cadet uniform of Elizabeth White Cleino, BSN ‘44. The red epaulets and cadet patch were worn on the uniform of Ann Moore Crain, BSN ‘47-A. The cover of Harper’s Bazaar magazine from November, 1943, depicts a nurse cadet winter uniform.

The background picture is Gloria Canady, VUSN freshman, shown modeling the summer outdoor uniform of the U.S. Cadet Nurse Corps. Elsie McGill Tinkler, BSN ‘47-A, is pictured in the oval frame wearing her winter cadet uniform.

and nurse corps membership card were issued to and donated by Virginia George, BSN ‘47-B.

The background picture is Gloria Canady, VUSN freshman, shown modeling the summer outdoor uniform of the U.S. Cadet Nurse Corps. Elsie McGill Tinkler, BSN ‘47-A, is pictured in the oval frame wearing her winter cadet uniform.

and nurse corps membership card were issued to and donated by Virginia George, BSN ‘47-B.
New system makes it easier for patients to monitor lymphedema

Without a way to effectively monitor and measure swelling in limbs, breast cancer patients with lymphedema can have difficulty with self-care and knowing when to seek treatment.

Vanderbilt University School of Nursing’s Sheila Ridner, PhD, RN, and her team hope to change that with a new study that could lead to objective measuring at home and improved self-care.

There are approximately 2.3 million breast cancer survivors in the United States and lymphedema, or swelling in the arm, occurs in up to 40 percent of those patients.

“People with diabetes have glucometers at home to measure their blood sugar, but right now, the only way patients with lymphedema can measure their arms is through water displacement – actually dunking their arm in water and measuring the water outflow or by holding a tape measure and trying to ascertain girth,” said Ridner. “These patients need a better way.”

Enter the two-phase grant Ridner secured from the National Institute of Nursing Research to develop a protocol for home monitoring using a bioelectrical impedance tool, a hand-held device that connects to a patient’s arms using electrodes and provides a measurement for extracellular fluid. The device will provide a lymphedema index ratio (L-DEX) ranging from 1 to 40.

The first phase is a developmental study to test and refine draft protocols for patient use and determine measuring schedules. During this phase, daily arm measurements will be collected for 10 days from women with and without lymphedema to compare swelling measurements.

“We really don’t know if the extracellular fluid varies more or less in an arm with lymphedema or without lymphedema. This will be the first time the measuring equipment is used over time in both populations to study this,” said Ridner.

The second phase is a small clinical trial of breast cancer survivors with lymphedema. Half will be randomized to use the measuring device for three months at home using the new protocol and sending back volume readings.

The other half will not use the measuring device. Both groups will document whatever they are doing for self-care and any lymphedema symptoms for three months. Any participants with increased arm swelling will be referred to the Vanderbilt-Ingram Cancer Center’s new Vanderbilt Lymphedema Therapy Clinic.

“We want to see if people who actually measure do more or less self-care, and we are going to follow economic issues such as arm infections and expenses for lymphedema treatment. Part of the patient frustration with self-care is that they can’t tell if it works or if self-care reduces arm problems,” said Ridner.

JHS AWARDS SCHOLARSHIP

Vanderbilt University School of Nursing’s Julia Hereford Society held its summer event at the home of Bob and Bette Sue McNeilly in June to honor this year’s JHS scholarship recipient, Amanda Rich Almond, and celebrate the group’s efforts in easing the financial burden of nursing students.

The society recognizes donors to VUSN, and was named for Julia Hereford, a 1936 graduate and the school’s dean from 1949 to 1965.

Almond, an adult nurse practitioner student, finished her coursework in August. She told the audience that her mother and several other relatives, who are all nurses, inspired her to pursue her advanced practice degree in nursing.

VUSN Breaks Records

Vanderbilt University School of Nursing welcomed its largest class ever – 486 students who are pursuing master’s, Doctor of Nurse Practice or PhD degrees.

The incoming class of master’s students includes 254 students with associate’s or bachelor’s degrees who are pursuing their masters in the science of Nursing degrees and 155 non-nurses who are participating in VUSN’s bridge program by taking three semesters of pre-specialty classes before beginning their formal master’s education. The Doctor of Nursing Practice (DNP) program has 65 new students and the PhD program has 12 incoming students.

“We treasure every single one of you,” said Colleen Conway-Welch, PhD, CNM, dean of the Vanderbilt School of Nursing, addressing the pre-specialty students last week. “You are choosing an extraordinarily rewarding career and you each bring your own experience and perspective to the school and to nursing.”

Pre-specialty nursing students Audrey Pyle, left, and Brittany Powell are among VUSN’s incoming class for Fall 2011.
Shelagh Mulvaney is on a mission to see how technology can help adolescents with diabetes. She is working on the development and testing of several systems and programs, and won’t stop until she and her colleagues can figure out ways to help teens better self-manage their health.

“Thanks in part to technology, we have many more options in terms of what we can do to educate and support young people outside the clinic and in between office visits,” said Mulvaney.

This VUSN assistant professor became interested in health behaviors of children with chronic illnesses while doing a clinical internship at the University of Vermont. She saw first-hand how much support teens needed in dealing with an illness, like diabetes, which can be perceived as a stigma by peers. That interest infused her post-PhD work at Vanderbilt University’s Peabody College and carried through to her current faculty appointment at VUSN.

As a pediatric psychologist, Mulvaney is interested in how to improve knowledge in the still-developing teen mind, problem solving, motivation and awareness — the essentials of diabetes self-care. She has collaborated extensively with Russell Rothman, MD, MPP, associate professor of Medicine and Pediatrics, and Kenneth Wallston, PhD, at VUSN to find answers for today’s teens coping with diabetes.

With National Institutes of Health funding, Mulvaney and her team were able to develop a website designed to improve self-management among adolescents with type 1 diabetes. A multidisciplinary team of diabetes professionals, researchers, young patients and volunteers wrote and edited six multi-media stories on common challenging self-care scenarios that adolescents face to allow interactions between parents, teens and clinicians.

The results showed improvement in glycemic control, problem solving and self-care adherence. The team increased the project’s scope to include adolescents with type 2 diabetes, which is in the pilot study phase, and in coming years is hoping to further expand to enhance technology-facilitated communication between teens and their parents.

“We have broadened our abilities to engage patients through storytelling and health narratives,” said Mulvaney. “The teenagers we work with are interested in the health narratives process, and it actually helps them to know they are helping someone else.”

In addition to the Web applications, she has developed and tested a text-messaging program for adolescents using mobile devices. Clinicians, teens and other diabetes professionals created hundreds of tailored text messages addressing the barriers to self-care faced by teens such as communication with family, social support and burn-out. The results showed improvement in glycemic control in the intervention group.

“With all of these technologies there is a lot of competition for patient attention. One text message we send is viewed in context with 50 other messages a teen might have received that day,” she said. “What we can do to improve attention to health is to create a motivational process around self-care with game-like elements, such as getting points or rewards.”

She is also working on a text message reminder system for medication management with Kevin Johnson, MD, in Vanderbilt’s Biomedical Informatics department, that will be embedded in myhealthatvanderbilt.edu, an electronic portal for patient records and information.

Mulvaney said although her work involves technology, its purpose is about reaching teens and improving health behaviors and health outcomes.

“The key is to leverage the ubiquitous nature of technology, the attention that technology already garners from young people, and integrate health and health behavior as a reason to use that technology,” she said.

While her work is focused on diabetes, she hopes it will also help patients with other chronic illnesses and will help better integrate patient centered care at the clinical level.

– KATHY RIVERS

For more information about this work, contact Shelagh.mulvaney@vanderbilt.edu
merica has a drug problem. But it’s not what you think; in fact this drug problem is probably happening in your community – even in your own home.

The problem is the accumulation of prescription drugs with no good plan for disposing of them. As the number of prescriptions continues to climb nationwide along with stockpiles of unused doses, people involved in public health and safety are beginning to see dangerous effects.

Carrie Plummer, MSN, instructor at the Vanderbilt University School of Nursing, says she became aware of the drug disposal problem when older patients would come into the Vanderbilt University Medical Center emergency department suffering from delirium. The suspected cause was often the improper use of their own prescribed medications.

“Families would bring in bags of all these prescription drugs, many of them expired. Or I would open a bottle in the emergency department and there would be three different doses of a medication in the same bottle,” Plummer said.

Part of the problem is a notoriously high national rate of prescribing. According to the Kaiser Family Foundation, the United States averages 12 prescriptions per person. Tennessee has one of the highest prescription rates at 17 prescriptions per person. While many prescriptions are one-time orders for antibiotics, or pain medications that don’t get refilled, seniors with multiple chronic health conditions commonly take five or more medications daily. In a 2005 Kaiser survey, four of 10 senior citizens reported they did not take all the drugs their doctors prescribed for them because costs were too high, they didn’t think the drugs were helping them, or because they didn’t think they needed them. More than half of those with the highest number of prescriptions said they did not take all their drugs as prescribed.
“This is a generation that doesn’t like to waste and medications are very expensive, so even if a doctor replaces one medication for another or increases a dose, if there are pills left over from the last prescription, they feel they should hang on to it ‘just in case,’” Plummer said.

Plummer says she suspects the volume of medications stored in the average older adult’s home is quite high, increasing the risk of taking the wrong pill for the wrong thing or in the wrong way.

Meanwhile, Officer David Cole, the crime prevention officer for the Dickson Police Department (a distant suburb of Nashville) sees the same problem – but from a very different angle.

“We heard through the grapevine that young people would have these ‘skittles’ parties. Teens would go into a medicine cabinet and just take one or two pills from each bottle so it wasn’t noticed, and they’d put them all in a bowl and just start taking them,” Cole said.

Abuse of prescription drugs, especially by teens, is well documented. According to research by the Substance Abuse & Mental Health Services Administration (SAMSHA), for the first time, there are just as many new abusers (12 and older) of prescription drugs as there are for marijuana. The rate of teen abuse of prescription drugs in Tennessee is among the worst with the sixth highest abuse rate for painkillers in the nation.

Cole began to attend meetings of the Community Anti-Drug Coalitions Across Tennessee (CADCAT) in hopes of finding a way to deal with what his department viewed as the growing problem of prescription drug abuse in Dickson County.

Plummer came to CADCAT at the same time, pursuing her interest in the problem of drug disposal for her doctoral dissertation.

“There is a lot of research on non-adherence to medication regimens, but this is a different twist. I was realizing the problem was people had all these medications accumulating at home for a lot of reasons, and with no real option to dispose of them,” Plummer said.

For Cole, a ‘light bulb moment’ came when he watched coalition members demonstrating the tidy disposal of prescription medications by collecting and incinerating them.

“There was this lady from Florida with a table set up for something called ‘Operation Medicine Cabinet.’ I said to her, ‘I think there’s a reason God brought me here to this event today because what you have here is what we need in Dickson County,’” Cole recalled.

Cole asked members of the group how he could organize such an event in Dickson County. Plummer jumped at the opportunity to help.

“I had just started teaching a community health course. This would be a great service learning program for my students to take part in, and we could do some research at the same time,” Plummer said.

Plummer recognized it was necessary to have pharmacy students there if they were to collect data. Soon the event combined efforts of VUSN faculty and students, the Dickson Police Department,
Teen Prescription Drug Abuse

*Source: National Institute for Drug Abuse*

After marijuana, prescription and over-the-counter medications account for most of the top drugs abused by 12th graders in the past year.

Nearly half (47%) of teens who use prescription drugs say they get them for free from a relative or friend.

More than three in five (62% or 14.6 million) teens say prescription pain relievers are easy to get from parents’ medicine cabinets; half of teens (50% or 11.9 million) say they are easy to get through other people’s prescriptions; and more than half (52% or 12.3 million) say prescription pain relievers are “available everywhere.”

The majority of teens (56% or 13.4 million) agree that prescription drugs are easier to obtain than illegal drugs. (PATS, 2006)

David Lipscomb University pharmacy and Belmont University pre-pharmacy students and faculty, the Hamblin County Anti-Drug Coalition, community pharmacists and other business and faith-based partners.

The first drug disposal event was held on a hot day at a Kroger store parking lot in July 2010. Thousands of medications were collected, identified, counted and incinerated including one man who literally brought enough medications to fill an entire shopping cart – all by himself.

“The response floored me. The first year we had right at 75 pounds of pills and incinerated all those right there in the Kroger parking lot,” Cole said.

The second event, in April 2011, held in Horizon Medical Center’s parking lot, was equally successful. By then, Dickson’s 23rd Judicial District Anti-Drug Taskforce had bought an incinerator of its own. That day 49,000 doses of prescription and over-the-counter medications were collected with an estimated street value of $43,800. More than 5,000 doses of controlled substances were collected and destroyed, about 60 percent more than during the previous year’s event. Pills collected included tablets of painkillers, benzodiazepines, ADHD medications and sleeping pills.

“We saw it all,” said Plummer.

“One person dropped off over 300 pills of hydrocodone and 200 of morphine. Another turned in an expired pack of Russian thyroid medicine. Our oldest medication was a bottle of Iodine circa 1960.”

The process works like this: people drive to the disposal event and hand bags of old medications to police officers. By law, the only person who can “take back” certain medications that are considered controlled substances is an officer of the law. The officers then remove the controlled substances.

“This helps solidify the importance of educating patients on every level, following up with them and asking them what they do to dispose of their drugs.” JENNIFER TAYLOR
substances and run them through a specialized counting and logging system required by the state. The rest of the prescription and over-the-counter medications are handed to supervised nursing and pharmacy students. Each pill is identified, counted and logged before being placed in a metal container for incineration.

The logging and counting of the non-controlled substances is part of Plummer’s research, to learn more about both the prescribing practices of health care providers, and patients’ habits for taking them. Organizers focus on using this as a way to help get prescription drugs off the streets and out of the schools. And the events speak to environmental concerns as well, because the incineration process is highly regulated by the Environmental Protection Agency and is considered safer than other disposal methods. Medications may be harmful to the environment if flushed into the waste water system, or allowed to leach into the groundwater at a landfill.

According to a January 2010 survey by the Natural Resources Defense Council, 80 percent of samples taken from 139 streams in 30 states contained organic and pharmaceutical contaminants. Research is under way to determine the impact on human health as well as potential damage to ecosystems.

“This is a big issue. People kept asking us ‘what do we do when Uncle John dies from cancer and they all have these pills.’ In Dickson, we already have lawsuits about what leaches from the landfill into nearby water wells, and we don’t want people to flush them,” Cole said.

Jennifer Taylor, a Family Nurse Practitioner student, took part in the event this past spring. As a Dickson resident and parent of three young children, she found the experience to be among the most educational of her pre-specialty year.

“I was a little shocked, taken aback, because I thought Nashville would be the kind of city I would think about for a drug disposal event (instead of Dickson). That day we had a huge bag of morphine from a patient whose mother had cancer. When we asked some of the participants what age groups frequent their home, most said they had grandkids and teens in their home a lot,” Taylor said.

Taylor and her classmates say the drug disposal events teach them many lessons, but most importantly, they open their eyes to an issue that is right under their own noses, in fact, in their own medicine cabinets. Taylor says she has already changed the way she disposes of her own unused medicine (she used to flush them), and she will continue to watch the drug disposal issue from now on.

“It taught me a lot of things. There are certain medications that are prescribed too much and certain medications, like antibiotics, that people don’t finish or don’t take as prescribed. As a nurse, this helps solidify the importance of educating patients on every level, following up with them and asking them what they do to dispose of their drugs,” Taylor said.

Plummer, who recently got a crash course in the current regulations at a nine-week internship with the Office of National Drug Control Policy, says laws are changing to give communities better options for drug disposal. But at the moment, only police departments can take back controlled substances like painkillers and ADHD medications, and pharmacies are generally no better equipped to dispose of medications than regular citizens.

“This issue hits on public health and safety issues, environmental concerns, and it impacts people across the lifespan. These are at the core of my interests,” Plummer said. “People want to do the right thing, but there is no place to take these drugs. These events provide that.”

How to Safely Dispose of Drugs

Drug take-back events are happening more frequently across the country. We challenge you to take a hard look at the contents of your medicine cabinet, purse, wallet, dresser drawer or any place where you keep medicine. Chances are you have some expired medicines. If there isn’t a drug disposal event near you, follow these steps:

Office of National Drug Control Policy Federal Guidelines:

Do not flush prescription drugs down the toilet or drain unless the label or accompanying patient information specifically instructs you to do so.

Call your city or county government’s household trash and recycling service and ask if a drug take-back program is available in your community.

If a drug take-back or collection program is not available:

1. Take your prescription drugs out of their original containers.

2. Mix drugs with an undesirable substance, such as cat litter or used coffee grounds.

3. Put the mixture into a disposable container with a lid, such as an empty margarine tub, or into a sealable bag.

4. Conceal or remove any personal information, including Rx number, on the empty container by covering it with black permanent marker or duct tape, or by scratching it off.

5. Place the sealed container with the mixture, and the empty drug containers, in the trash.
LADY SUSAN

LETTER 12.

Sir Reginald De Courcy to his Son.

Parklands.

I know that young Men in general do not admit of any enquiry even from their nearest relations, into affairs of the heart; but I hope my dear Reginald, that you will be superior to such as allow nothing for a Father's anxiety, & think themselves privileged to refuse him their confidence & slight his advice. You must be sensible that as an only son & the representative of an ancient Family, your conduct in life is most interesting to your connections. In the very important concern of Marriage especially, there is everything at stake; your own happiness, that of your Parents, and the credit of your name. I do not suppose that you would deliberately form an absolute engagement of that nature without acquainting your Mother & myself, or at least without being convinced that we should approve your choice, but I cannot help fearing that you may be drawn in by the Lady who has lately attached you, to a Marriage, which to the whole of your Family near & near, must highly reprobate.

Lady Susan's age is itself a material objection, but her want of character is one so much more serious, that the difference of even twelve years becomes in comparison of small account. Were you not blinded by a sort of fascination, it would be ridiculous in me to repeat the instances of great misconduct on her side, so very generally known. Her neglect of her husband, her encouragement of other Men, her extravagance & dissipation, were so gross & notorious, that no one could be ignorant of them at the time, nor can now have forgotten them. To her Family, she has always been represented in softened colours by her benevolence of Mrs. Charles Vernon; and yet in spite of his generous endeavours to excuse her, we know that she did,
Christine Shih
cared for a range of patients —
adolescents in a student health center,
premature babies, elderly eye patients
and adults with leukemia — then
turned her attention to a different set:
the Elizabeth Darcys and Fanny Prices
populating the Regency-period
English countryside in classic novels
by Jane Austen.

By Leslie Hill
Illustration by Diana Duren
The Setting

Shih has always been self-taught when it comes to literature, and learned to read on her own at age 3. Reading became like breathing, literature like food, and even today Shih always has a small book of poetry tucked in her purse.

A music scholarship took her to Louisiana State University, but she quickly realized the music profession demanded a lot of competition for unpredictable rewards. A degree in behavioral psychology offered the practicality she was looking for, but that seemed to point to graduate school in psychology and Shih worried about being pigeonholed in mental health. Her future husband, Kent, had her talk with a friend who was doing her pediatric medical residency.

“She said ‘If I could do it all over again, I would have done a pediatric nurse practitioner master’s degree at Vanderbilt,’” Shih recalled. “It was because of the flexibility it could give me when I became a mother and flexibility over time because the nursing profession is unending.”

Shih took that advice to heart, enrolling in the Vanderbilt University School of Nursing bridge program in 1997 while her husband completed his residency in Internal Medicine at Vanderbilt University Medical Center.

It was at VUSN that Shih first saw an intersection between her new profession and her lifelong love of literature. Enrolled in a nursing theory course taught by Barbara Petersen, Ed., CNM, FACNM, now a professor emerita, Shih decided to write an interdisciplinary paper on author Louisa May Alcott and her experience as a Civil War nurse.

“I was reading a biography of Alcott at the same time I was taking this class, and I realized it was a very interesting time in her life. I wanted to write about her from the perspective of a nurse and how her literary interests might have been inspired by her actual life experiences.”

Though it wasn’t a typical subject for the class, Petersen encouraged Shih to run with the idea.

“You never realize when you are planting that seed. My philosophy of teaching has always been to serve as a coach and sounding board. The idea of pushing the edge is such a part of VUSN’s philosophy and how we got to be the wonderful place we are. When someone has a spark of idea, my belief is yes, go with it and see what happens,” Petersen said.

“They said ‘If I could do it all over again, I would have done a pediatric nurse practitioner master’s degree at Vanderbilt,’” Shih recalled. “It was because of the flexibility it could give me when I became a mother and flexibility over time because the nursing profession is unending.”

Shih took that advice to heart, enrolling in the Vanderbilt University School of Nursing bridge program in 1997 while her husband completed his residency in Internal Medicine at Vanderbilt University Medical Center.

It was at VUSN that Shih first saw an intersection between her new profession and her lifelong love of literature. Enrolled in a nursing theory course taught by Barbara Petersen, Ed., CNM, FACNM, now a professor emerita, Shih decided to write an interdisciplinary paper on author Louisa May Alcott and her experience as a Civil War nurse.

“I was reading a biography of Alcott at the same time I was taking this class, and I realized it was a very interesting time in her life. I wanted to write about her from the perspective of a nurse and how her literary interests might have been inspired by her actual life experiences.”

Though it wasn’t a typical subject for the class, Petersen encouraged Shih to run with the idea.

“You never realize when you are planting that seed. My philosophy of teaching has always been to serve as a coach and sounding board. The idea of pushing the edge is such a part of VUSN’s philosophy and how we got to be the wonderful place we are. When someone has a spark of idea, my belief is yes, go with it and see what happens,” Petersen said.

Petersen said it is often forgotten that nursing graduate school is a true scholarly endeavor.

“Sometimes we lose sight of that because we’re so focused on helping patients reach their potential. Though we emphasize nursing practice, it is based on evidence, research and study. We’re a graduate program in every sense of the
Because Austen never developed a Borderline personality but was surrounded by it, Shih said she developed an incredible eye for the disorder’s idiosyncrasies. A lesser-known work of Austen’s, “Lady Susan,” reads like a case study of a Borderline personality.

word, and we’re developing the ability to express, whether that is through writing, verbal communication, presentation skills or technology.”

Petersen encouraged Shih to submit the paper for publication, but she was busy preparing for her family and pediatric nurse practitioner board exams and a move to Baltimore. A seed was planted but in the wrong season of life.

The Plot Thickens

Shih kept reading voraciously but honed her skills as a practicing nurse, first at the Johns Hopkins University Student Health Center and then on the Johns Hopkins Cancer Center leukemia/hematologic malignancy team. She ran a pilot study treating people with leukemia in an outpatient setting, did Phase I and II research in hematologic malignancies, and taught other nurses and medical residents.

After returning to Nashville and the birth of her daughter in 2005, Shih made the decision to stop practicing and stay home to raise her.

“I have cherished being home to raise my daughter, and at the same time it has been challenging for me to ignore the wheels turning in my mind, thinking ‘What should I do next?’ That’s when I started thinking about writing again.”

In order to understand her family background, Shih also began an intense period of research into Borderline personality disorder, a condition characterized by unbalanced emotions, which leads to impulsive actions and chaotic relationships.

“I’m the child of two Borderline parents and always had a big question mark about my parents and what is wrong with them. Researching the Borderline brought a whole new understanding of personality to me.”

Then she was encouraged by a grief counselor to read a book that “opened up all my windows,” as Shih put it – “Understanding the Borderline Mother” by Christine Ann Lawson. In it, Lawson illustrates aspects of the Borderline personality using fairy tale stories like Cinderella, Snow White and Alice in Wonderland. Shih started making similar connections in her favorite novels – “Jane Eyre,” “Mansfield Park,” “Wuthering Heights,” and “Les Miserables.”

“It was like a light went on and I began to see the Borderline everywhere, especially in Jane Austen’s work,” Shih said.

For much of 2007 and 2008, Shih absorbed every bit she could on Borderline pathology in order to better ascertain its presence in literature.

“Consider a line. Above is dementia and below is sanity. A Borderline’s thoughts traverse that line like a sine wave, become abnormal, then normal, then abnormal, then normal. The resulting behavior creates confusing misunderstandings in the way they talk to people and treat them,” Shih explained.

This fluctuating thinking is the way a Borderline’s mind protects them from their great fear of abandonment, often followed by depression.

Point of View

In her research, Shih treats literary characters and their authors like living, breathing patients.

“Nurse practitioners apprehend something outside the norm and gather data through the assessment of that aberrancy. I view it as a scientific approach,” she said. “Borderline specialists will tell you it’s not difficult to identify Borderline behavior, but you have to know the pathology. That’s where years of exposure and experience come in, as a child of Borderline parents.”

Shih said one of the hallmarks of Borderline behavior is a continual pattern of abandonment. Think of the orphan Jane Eyre, living under her tyrannical aunt, or Heathcliff running away and vowing revenge when he mistakenly believes Catherine loves someone else.

Abandonment is glaringly present in Jane Austen’s own life, as Shih found in her biography and letters, leading her to believe Austen was the child of a Borderline mother.

From a few weeks after birth until the “age of reason” around age 2-4, Mrs. Austen had a village family raise seven of her eight children, basically making them foster children during their formative years.

Because Austen never developed a Borderline personality but was surrounded by it, Shih said she developed an incredible eye for the disorder’s idiosyncrasies. A lesser-known work of Austen’s, “Lady Susan,” reads like a case study of a Borderline personality.

“It’s a very thorough psychological profile. She gathers all the evidence and puts it out there in a very empirical, scientific way. She would have made a wonderful psychologist if she lived today. I would argue that she would be a novelist and a psychologist and would be a leader in both fields,” Shih said.

Lady Susan is an absolute villain, but she is an excellent actress, manipulator,
and “the most accomplished coquette in England,” enchanting those around her with her manners and wit, she said. She demonizes her daughter Frederica, saying she “was born to be the torment of my life” and “She is a stupid girl and has nothing to recommend her.” In actuality, Frederica is sweet, shy and absolutely terrorized by her mother.

In the novel, told entirely in letters, Lady Susan is hunting for a new husband for herself and one for her daughter. In the end, she is forced to marry the man intended for her daughter because everyone else has detected her schemes and abandoned her.

“This is Austen at her very best. She’s so razor sharp and doesn’t mess around. I’ve never read a psychological profile more interesting than Lady Susan,” Shih said.

**Character Development**

Little scholarship has been published on Lady Susan, with only one paper looking at the pathology of the titular character and diagnosing her as an anti-social personality. Shih disagreed because the essay did not address the mother/daughter relationship (the dominant relationship in the novel), which gives many of the necessary clues to enabling a proper diagnosis, and began to form her argument that Lady Susan was a psychological profile of the Borderline personality.

At the same time, around the end of 2008, Shih learned that the Jane Austen Society was holding a bicentennial conference at Austen’s home in Chawton, England, with the theme “New Direction in Austen Studies.”

Shih knew she had a new direction in Lady Susan, but was anxious to apply.

“First of all, I’m an unknown without even a degree in English. And second of all, it was a totally out of the blue perspective on one of Austen’s lesser-known novels. But I thought if I can teach at Hopkins, then I have the ability to present new ideas in other scholarly environments.”

It was accepted, and Shih presented on the first day of the conference in June 2009, launching her new career among the literary elite.

Once Shih had a working draft of her essay she was thrilled to be able to reconnect with Barbara Petersen, who helped her prepare for the conference and even gave Shih a VUSN pin commemorating the school’s centennial.

“She wanted me to connect myself with the School of Nursing at the conference. It gave me an academic association that many scholars could recognize at the conference.”

Shih’s presentation was well-received, and she said people stopped her for the remainder of the conference to hear more about her ideas.

“I was surprised and intrigued to find a fully trained nurse giving a paper on Austen,” said Juliet McMaster, F.R.S.C., Distinguished University Professor Emeritus in the department of English and Film Studies at the University of Alberta. “Christine, I can see, is a highly qualified and gifted practitioner in her own profession, and so has more to give
in revealing Austen’s understanding of psychological patterns that weren’t even recognized in her own day, never mind given a name or assigned a treatment.

A Different Kind of Book Club

You will never find Shih in a coffee shop surrounded by thick books and scatted papers. She needs absolute quiet when she works, something that is at a premium when caring for a toddler. But now that her daughter has started kindergarten, Shih is hard at work on her next project, a book explaining Borderline personality disorder and its pervasiveness in literature.

When she’s not researching, Shih uses the healing elements of her nursing experience in a book club for other people with Borderlines in their life. Calling it “bibliotherapy,” the group reads fiction to learn more about the disorder and how to better interact with people afflicted by it.

“I’m using the relationships in Austen’s novels as the springboard into discussing our relationships with the Borderline. Through that, we work to develop a better understanding and empathy for the Borderline,” Shih explained.

“The sad part for the child of a Borderline is they really are isolated individuals. They feel like they live on an island. So the other interest in doing this group is to bring together children of Borderlines so that they have sound, strong friendships that literally take the place of their family relationships.

The group meets about once a month for a potluck supper and discussion at Shih’s home. They start the evening swapping recipes and catching up on each other’s lives. They are eager to discuss the assigned novel and share their opinions on the study questions Shih prepares for them, such as Does Lady Susan love her daughter? Which characters are like real people in their own lives?

Discussing the night’s novel inevitably leads the group members to drawing parallels in their own lives.

Shih is in her element helping the group make these connections and sharing her deeper knowledge of Austen’s life and work. She has amazing tidbits to share, that there are about 160 of Austen’s letters in existence and the writer spent about one-fourth of her budget on postage.

The group is growing exponentially, and Shih plans to create a workbook that other bibliotherapy groups could follow.

“My job has been to take the clinical understanding of the Borderline and move it into a general understanding of the Borderline that anyone can grasp, understand, be able to see and identify, and be able to work through.”

Epilogue

Though Shih would like to return to a clinical setting one day, she is focused on her book on the Borderline and also has ideas for novels and children’s literature.

Shih has presented essays at the Jane Austen Society of North America, The Jane Austen Society and The British Society of Eighteenth-Century Studies held annually at Oxford University, Oxford, UK. She plans to submit essay proposals for each conference on an annual basis, and in the near future hopes to broaden her scope of author work with the Bronte Society, the Dickens Society and the Society of Children’s Book Writers and Illustrators.

“My vision is that this is the beginning of a long engagement in literary criticism, and in Austen’s work in particular. I believe I’m the only nurse practitioner contributing to literature on an academic level, and I hope I’m developing the groundwork for how other nurse practitioners can enter the field and contribute,” Shih said.

Christine Shih’s Reading List

For a true picture of the Borderline personality

Lady Susan
Jane Austen

Mansfield Park
Jane Austen

Jane Eyre
Charlotte Bronte

The Custom of the Country
Edith Wharton

Wuthering Heights
Emily Bronte

Alice in Wonderland
Lewis Carroll

Jane of Lantern Hill
L.M. Montgomery

The Bell Jar
Sylvia Plath

Till We Have Faces
C.S. Lewis

Look Homeward, Angel
Thomas Wolfe

Note: Lady Susan (and many more novels) are available from Project Gutenberg at www.gutenberg.org
Anyone in the world of nursing knows it is a continuously evolving profession. As patient needs become more complex and health care reform overhauls take shape, who in the profession will lead the way? Many believe the answer is: doctorally-prepared nurses.

The problem is that fewer than 1 percent of all nurses hold a doctorate degree, whether it be research-focused or practice-focused. The good news is that institutions like Vanderbilt University School of Nursing offer the two most in-demand degrees, the Doctor of Philosophy (PhD) and the Doctor of Nursing Practice (DNP), and both programs are growing.

“Our profession desperately needs both,” said Linda Norman, DSN, RN, senior associate dean for Academics. “We need nursing researchers equipped with their PhD education and big questions to make full investigations using higher-level statistics and theoretical models and develop guidelines. We also need nurses with their DNP s to take that evidence-based research and apply it to their own practice on a consistent basis with methods to evaluate effectiveness.”

This fall, both VUSN doctoral programs welcomed their largest number of incoming students in the school’s history. The 12 new PhD students are preparing for a four-year journey toward becoming nurse scientists. The 65 new DNP students are looking to achieve the highest level possible in nursing practice to translate into their own clinical environments.

Solving Complex Problems
Quality improvement is practically Susie Leming-Lee’s middle name. This nursing administrator and 2011 DNP graduate was interested in quality improvement before it was a commonplace term in health care.

While she was pursuing her master’s degree in the VUSN bridge program in the late 1980s, she job shadowed with an executive at the Hospital Corporation of America (HCA). “He told me about this new thing called ‘quality improvement’ and said it would be spreading everywhere and would become part of daily life in health care,” she said.

That was her first of many experiences in the field of quality improvement. After earning her master’s degree, she worked at Vanderbilt then ventured out to learn about other organizations. She moved to HCA and then came back to Vanderbilt in 1998, joining the Center for Clinical Improvement, and has worked in Perioperative Services since 2004.

“You come to a point in your career and life when you feel you need to move to the next level and enrich your knowledge,” said Leming-Lee. “I’m a life learner. I love the idea of exchange...
and knowledge, and when I heard about the DNP, it was like they designed it just for me.”

Vanderbilt’s DNP program requires incoming students to have a scholarly project area to develop during the program. For Leming-Lee, it was applying the quality improvement system known as the Toyota Production System (TPS) Lean model, to the operating rooms in her division. This model is designed to identify and reduce eight types of waste – things like motion, delays, inventory and transportation – that add cost but not value. Lean is viewed as an innovative approach to improve safety, efficiency and effectiveness in the health care environment.

She saw the DNP as an opportunity to take her idea from conception through fruition, and perhaps figure out a relatively simple solution to some complex health care problems. Specifically, she wanted to improve surgical site infections rates in neurosurgery patients by reorganizing the environment and processes in five operating rooms at Vanderbilt University Hospital.

The approach included getting buy-in from multidisciplinary teams and ongoing training regarding the Lean methodology. Following the Toyota principles, the team simplified, cleaned and standardized everything in each operating room. Foot traffic patterns were redesigned to develop more effective pathways that would not encroach, for instance, on the sterile fields. The location of equipment was an important issue and re-worked many times over to ensure proper placement for frequency of use.

All of her work with the support of the surgical team members has helped significantly drop operating room infection rates and surgical complications.

“People think of innovations as big and disruptive, but sometimes it’s the small innovations that can make the difference,” she said. “An idea grows and it begins to change the culture, as it did within the Neurosurgery team.”

Leming-Lee confesses that she prefers to be in the middle of the work rather than watching from the sidelines. Her DNP has helped solidify her role on her team and win the ongoing support of her supervisor and colleagues.

“The DNP takes you to a different level of thinking, how you view nursing, how you view improvements,” she said.

– Kathy Rivers

Improving Health in Rural Communities

Alane O’Connor, FNP, who graduated from VUSN’s first DNP class in 2010, is using her degree to make a difference in her small community of Belgrade Lakes, Maine (population 1,000). She’s combining her interest in rural health with the knowledge obtained from her degree to help make her community a better place. On the faculty of Maine Dartmouth Family Medicine Residency, much of O’Connor’s work is devoted to treating opioid-dependent patients, including pregnant women.

Surprisingly, Maine leads the nation in the percentage of residents being treated for addiction to painkillers. “Maine has eight times the national average,” O’Connor said, adding there may be many causes, but the amount of narcotics available on the street and the failure to implement protocols that assure patients are taking their medications appropriately are both contributing factors.

O’Connor treats non-pregnant opioid-dependent patients with buprenorphine, an alternative to the synthetic narcotic methadone.

“The work logically extended into working with pregnant patients since women of childbearing age are not immune to addiction.”

Her practice includes 12 resident physicians and 10 other faculty members including physicians, nurse practitioner and physician assistants. She sees patients individually and has also developed a group medical visit that has been used as a model by other practices. O’Connor, an instructor in Community and Family Medicine at Dartmouth Medical School, teaches medical students and residents in both a one-on-one setting with patients and in larger lecture formats.

“People often have strong opinions about patients with addictions – particularly those who are pregnant – and I think that the vast majority of these women are doing the very best they can for both themselves and their babies,” she said.
O’Connor’s scholarly inquiry in the DNP program at Vanderbilt centered on chronic disease in rural areas and showed that people who live in rural environments are more likely to be diagnosed with diabetes and coronary heart disease than those from urban areas—probably because many of the common risk factors for these conditions, including poverty, obesity and tobacco use, are more prevalent in rural communities.

Having a DNP degree has made it possible for O’Connor, the mother of two sons, 2 years and 7 months, to better balance career and family.

“My challenge right now is not a lack of opportunities to make a contribution, but a lack of time since it’s really important for me to spend time with my children,” she said. “Having the DNP offers more flexibility since I can work on research and quality improvement projects on my own timetable.”

She is currently working on identifying whether breastfeeding is related to the severity or duration of neonatal abstinence syndrome, when newborns are exposed to addictive, illegal or prescription drugs while in the mother’s womb.

“The DNP was perfect for me since I wanted to acquire the skills necessary to be a better clinician and public health advocate. You really need a multidisciplinary education and experience to have an impact on this increasingly complex health care system,” she said.

And O’Connor is definitely having an impact. She is part of a multidisciplinary task force drafting statewide guidelines for the treatment of opioid-dependent pregnant women and their infants and recently published a health policy paper focusing on how existing federal legislation potentially limits access to treatment for these patients.

Belgrade Lakes is only slightly larger than the rural Maine town in which O’Connor was raised. It had a population of 800.

“I always knew that I wanted to settle in rural Maine and raise my family here,” she said. “I am deeply committed to the health and well-being of the people of Maine.” – Nancy Humphrey

Fighting Childhood Obesity

Some say you can’t go home again. Sharon Karp’s decision to return to her Middle Tennessee roots to continue her education at Vanderbilt has made all the difference.

Karp grew up in Franklin, Tenn., and always thought she wanted to be a veterinarian. In high school, as she began to talk with her family about career plans, she learned there was a long history of nurses in her family and began to consider the opportunities of this profession.

“I had an interest in science and helping people. As I looked into nursing, I realized it was a good fit for my interests and an excellent foundation for many opportunities.”

She attended Xavier University and earned her BSN. Early on in her nursing education she realized she wanted to be a nurse practitioner to have “more tools in my belt.”

She entered Vanderbilt’s School of Nursing pediatric nurse practitioner program, earned her master’s degree and immediately went to work with a pediatrician in private practice in Georgia. While she enjoyed the continuity of a small practice, she began to feel frustrated by a disturbing trend she was observing.

“I saw how quickly the diet of infants and toddlers went from healthy to unhealthy. There was a disconnect between the advice we were giving mothers and what they were doing at home, and this increased their risk for problems like obesity and diabetes,” Karp said.

The desire to find an effective way to promote healthy feeding practices during early childhood is what led her back to the Vanderbilt School of Nursing to earn her PhD and develop her skills as a nurse researcher.

“I wanted the research skills that would help me evaluate our current feeding strategies, use this knowledge to develop new interventions and then test these new strategies in order to really make a difference in the lives of children.”

As a PhD student, Karp immersed herself in the research process as a research assistant on several projects. She also served as the project coordinator of a five-year clinical trial being conducted by her VUSN research mentor.

SHARON KARP, PHD

“I had an interest in science and helping people. As I looked into nursing, I realized it was a good fit for my interests and an excellent foundation for many opportunities.”
“I had the chance to really learn about the processes of a large research project right from the beginning. I was also able to develop relationships with clinicians and researchers across VU and the country,” she said.

Upon completion of her PhD in Nursing Science, Karp accepted a tenure track position as an assistant professor of Nursing at VUSN. She balances her time between developing her own program of research related to childhood obesity prevention, being a co-investigator on the clinical trial, working with graduate nursing students, and practicing as a pediatric nurse practitioner in the Division of General Pediatrics.

“The resources to help junior faculty succeed and the opportunity to collaborate with top-notch clinicians and researchers was unmatched at Vanderbilt,” she said. “It’s the best decision I ever made.” – Kathy Whitney

A Passion for Children

Two roads diverged in Terrah Foster’s life. She took the one less traveled, the route to nursing research, and couldn’t be happier.

As an undergraduate, Foster’s life revolved around her biology studies and commitment as a collegiate softball player. She entered VUSN’s pediatric nurse practitioner program to pursue clinical nursing, and with a master’s degree in hand, worked for three years in primary care for a pediatrician who became a clinical mentor.

“He would sometimes see 50 patients a day,” she said. “When he moved out of clinical practice into research, I didn’t understand why at first. Then I realized that his research would affect practice and he would end up touching even more lives.”

“I held onto that, and wanted to pursue my PhD in Nursing as the gold standard for a research doctorate,” she added. She completed her PhD at VUSN in three and a half years.

“It was work, but I don’t know I would really call it ‘hard’ because I enjoyed it. When you have this driving force of a topic that you are passionate about, it makes it easier,” said Foster.

Her dissertation examined associations among continuing bonds, coping and grief in bereaved parents and siblings who had experienced the death of a child to cancer.

“I’ve always had a passion for children at the end of life. They have joy about life that is different than other kids and it draws me to them,” she said.

Only two years into her research career, Foster’s star is rising. She quickly secured funding from the Robert Wood Johnson Foundation Nurse Faculty Scholars Program to develop a behavioral intervention for children living with cancer. Children are helping invent the activity by sharing their ideas for what would help other children in the future. Children and families are very willing to contribute, and the hope is the new intervention will help enhance life and reduce children’s suffering.

“I had been developing this study for a couple of years, worked on it all throughout my doctoral program, got it funded in September 2010, and then it hit me, ‘I’m going to finally carry this out,’” she said with a smile.

While moving forward on the RWJF grant, she has been doing a couple of simultaneous studies such as a survey of children’s hospitals across the country to explore current legacy-making services offered to pediatric patients with life-threatening conditions and their families. She admits that part of her mind is always thinking about writing the next grant and the submission process.

She also enjoys teaching in the research and theory series at VUSN’s master’s program and seeing students become interested in research or get a paper submitted for publication.

This pediatric clinician-turned-nurse researcher enjoys her career track and envisions her ultimate purpose.

“At my retirement speech, I would consider myself successful if I could look back and say I had mentored others to fill my role as a nursing scholar, teacher and leader.”

— Kathy Rivers
50s

Frances M. Edwards, BSN ’53, MSN ’76, received the Lifetime Achievement award at the Tennessee’s recent Salute to Nurses ceremony. According to her nomination, “no one in Tennessee has been more involved in promoting the health of Tennesseans and the welfare of registered nurses over such a long period of time than Frances Edwards.” She has worked in many capacities, from recovery room to class-room, but her passion is in the art of healing, especially through the use of alternative therapies such as Reiki and Healing Touch. She has also been a political advocate in many forums, from presidency of the Tennessee Nurses’ Association to presidency and/or chair of many community and national organizations.

70s

Sandy Coats Chase, BSN ’70, lives in Kingston Springs, Tenn., with three grown children, three grandchildren and a new German Shepherd puppy. She has returned to her love of horses and has two: a Chestnut great-grandson of Secretariat and a Percheron/Thoroughbred-cross mare. The family construction company, D.F. Chase, Inc., does work in 34 states and recently completed the restoration and reconstruction of the Opryland Hotel after the May 2010 flood.

Karen Ward, BSN ’70, MSN ’72, was named interim head of the Middle Tennessee State University (MTSU) School of Nursing in August. She was on the MTSU faculty from 1974 to 1981, and then left to pursue her doctoral degree in developmental psychology at Cornell University. She returned to MTSU’s nursing faculty in 1995. She gave a presentation at the 4th World Congress on Women’s Mental Health in Spain on March 19.

Leah Albers, BSN ’71, MSN ’74, PhD, received the Hattie Hemschmeyer Award at the American College of Nurse-Midwives (ACNM) 56th Annual Meeting & Exposition in San Antonio, Texas, in May. The “Hattie” is the College’s most prestigious award, awarded annually to an ACNM member who has been certified for 10 or more years and has made continuous outstanding contributions to midwifery and/or maternal-child health or contributions of historical significance to the advancement of midwifery, the ACNM or maternal-child health.

Joan King, BSN ’72, MSN ’75, PhD ’84, RN, ACNP-BC, was honored as a Fellow in the American Academy of Nurse Practitioners.

George W. Lindsay Jr., MSN ’78, retired in 2009 after 36 years in nursing and career experiences in med/surg, ob/gyn, critical care, trauma, education and working at various medical centers and Veterans Health Care Administration health care systems. His last position was Clinical Director, Education and Training at Veterans’ Administration Salt Lake City Health Care System. He thanks the many people who supported him throughout his career.

Mary Horn, BSN ’79, recently joined Catapult Health, which uses nurse practitioners at workplace screenings. The focus is hypertension, diabetes, lipid disorders, and weight and activity levels and the approach includes

Peggy Ingram Veeser, BSN ’71, EdD, FNP-BC, FAANP, was appointed Director of Nursing Program at Christian Brothers University, where she heads the new accelerated BSN program for registered nurses. She earned her Pediatric Nurse Practitioner certificate from the University of Virginia, Master of Science in Nursing from the University of Tennessee Health Science Center (UTHSC), and a Doctorate in Interdisciplinary Higher Education from the University of Memphis. Veeser retired in 2010 from UTHSC as professor emerita, after 32 years of teaching. She also founded and served as director for the UTHSC student and employee health services for more than 25 years.
collaborative behavior modification planning as well as pharmacological treatments.

**Rita Krolak**, MSN ‘79, and husband, Pat, live in Dover, Mass. They have three children, Pat, Karen and Mike, and three grandchildren: Max, 9, Madeline, 5, and Hamilton, 8 months. She has worked in research for the past 22 years at Boston University and the Veterans Administration, including The Pregnancy Health Interview Study, a large birth defects study, at Boston University's Slone Epidemiology Center.

**80s**

**Julie Isaacson**, MSN ‘81, lives in Jonesboro, Ark., with husband, Michael, a practicing cardiologist. They have two children -- Erick, an anesthesia intern at the University of Illinois, Chicago, and Locke, who is pursuing a dual master's program with an MBA from the Walton College of Business and an MPS from the Clinton School of Public Service. Julie is an associate professor at Arkansas State University where she teaches critical care theory and clinical rotations in the BSN program. She is active on many university committees and is co-chairing the university's Higher Learning Commission self-study.

**James Pace**, MSN ‘81, MDiv ‘88, joined the faculty of the New York University College of Nursing in January 2011. He was appointed the Associate Dean of Undergraduate Programs in September, and oversees a diverse student population of more than 850 baccalaureate students and 125 full- and part-time faculty. He also serves as an assisting priest in the Episcopal Diocese of New York at the Church of St. Mary the Virgin, Times Square.

**Julie Bomberger Lindley**, BSN ’83, RN, director of Health Services, Grapevine-Colleyville Independent School District, was recognized by the Colleyville Chamber of Commerce as the first recipient of the Grapevine-Colleyville Independent School District Employee of the Year.

**Suzanne Baird**, BSN ’84, MSN ‘95, left VUSN to accept a new position at Texas Children’s Hospital and a faculty appointment at Baylor College of Medicine in Houston, Texas. While at VUSN, she was a champion of clinical placements, setting up the systems needed for the enormous number of clinical contracts.

**Becky Borman Berrens**, BSN ‘88, MSN, works at Cincinnati Children’s Hospital Medical Center as an Education Specialist II, in the Division of Child and Adolescent Psychiatry. She is married to Jamie Berrens, and they have five children, ages 8-17.

**D. Elizabeth Jesse**, MSN ’88, PhD, CNM, is an associate professor of Graduate Nursing Science at the School of Nursing and assistant professor of Obstetrics & Gynecology for the School of Medicine at East Carolina University. Jesse was awarded a $640,742, three-year grant from the National Institute of Mental Health to develop a public health program to reduce the risk of antepartum depression.

**Susan Moseley**, MSN ’88, DNP, ’11, RN, NE-BC, is the administrative director for Vanderbilt Medical Group Nursing & the Center for Advanced Practice Nursing and Allied Health. She passed the American Nurses Credential Center Nurse Executive Certification exam in January, and has a wedding planned for November.

**90s**

**Donna Herrin-Griffith**, MSN ‘91, RN, NEA-BC, CENP, FACHE, accepted a new position as Senior Vice President / Administrator and Chief Nursing Officer for Martin Memorial Health System in Florida.

**Karen Larimer**, MSN ’91, is director of Research for the Midwest Heart Foundation. She earned her PhD in the spring from Loyola University Chicago, Niehoff School of Nursing. Her dissertation was titled

**Mary Hyndman**, BSN ’83, completed her first year at Dallas Theological Seminary on her way to earning her master's degree in Biblical Counseling. She and husband, Peter (BE ’80 pictured above left), have three children. Pete, VU ’07, pictured above right, earned his law degree from the University of Texas at Austin in May 2010, and works for Jackson Waller in Dallas. Jenna received her BA from the University of Arkansas in May 2009 and her master's degree in Social Work from University of Texas – Arlington, in May. Daughter, Aimee, is a junior at Coppell High School and has completed her first novel, part of a trilogy.
“Community Assessment of Cardiovascular Risk and Health Among People of Mexican Descent in Berwyn, Illinois.”

Donna K. Ayers, MSN ’00, LTC, completed a post-masters in Family Health in 2008, and Psych Mental Health in May at University of Texas Health Science Center, Houston. She owns DKA Management, LLC, works at Tomball Walk-In Clinic and for Team Health at Southeast Memorial Hermann Emergency Department and was recently promoted to Lieutenant Colonel in the U.S. Army Reserves.

Diana Ruzicka, MSN ’93, RN, was one of the nurses featured in the 2011 Calendar of the National Museum of the United States Army for the 110th anniversary of the Army Nurse Corps. She worked locally with the Madison County Red Cross in the aftermath of the tornado that struck Alabama in April. In May, she and her husband welcomed home their eldest daughter, the first civilian female aerospace engineer to deploy to Afghanistan. Ruzicka continues to work on her Master in Theology degree and enjoys retirement in the Huntsville, Ala., area.

James (Randy) Post, MSN ’95, LTC, successfully defended his dissertation research titled “The Relationship of Lower Extremity Bone Mass on Body Mass Index in the NHANES Adolescent Population.” Upon graduating from the PhD program at the University of Tennessee Health Sciences, he will be transferred to San Antonio where he will be stationed in an army research unit.

Connie Chenosky-Miller, MSN ’97, FNP-BC, CDE, BC-ADM, started her DNP at the University of Northern Colorado in Greeley, Colo., and accepted a graduate assistant position in the School of Nursing. She has also taken a new position at Montfort Family Clinic, a community health center that is closer to home and school. Her family welcomed its second grandchild, Adilyn Marie, on Oct. 16, 2010.

Angela Wilson-Liverman, MSN ’99, presented several sessions at the American College of Nurse-Midwives Annual Meeting in June 2011 including: “Exam Prep Workshop,” “Midwives in Medical Education: The Who’s, Why’s, and How’s,” “When Diet is Not Enough...When and How to Initiate Medication in Your Gestational Diabetic Patient,” and “Is 42 Weeks too Long? An Update on Post-term Pregnancy Management.”

2000s

Todd Griner, MSN ’00, manager of patient care services at Vanderbilt University Medical Center, was the recipient of the Rebecca Clark Culpepper Education and Mentorship Award during Nurses Week 2011.

Nancy Hollingsworth, MSN ’00, MBA ’00, was named president and chief executive officer of Saint Agnes Medical Center in Fresno, Calif. She had served as the interim president and CEO since February, and has a long history at the Medical Center having worked there as an oncology nurse and manager of patient resources in the 1980s.

Shae Whittington Uden, MSN ’00, and Jim Uden welcomed a baby girl, Morgan Ainsley, on Easter Sunday, April 24. Morgan weighed 7 pounds, 12 ounces and was 20.5 inches long. She was welcomed by brother Whit, 5, and sister Molly, 2.

Lorrie Cuartas, MSN ’01, APRN, MPH, MSN, WHNP-BC, lives in Cape Girardeau, Mo., where she works at Saint Francis Medical Center’s Cape Care for Women. She just completed her post-graduate degree at the University of Missouri-Columbia as a Family Nurse Practitioner.

Deanna Pilkenton, MSN ’02, with VUSN instructor, Maria Overstreet, presented “Debriefing: A Critical Communication Method Midwifery Educatiors/Preceptors Can Use to Solidify Student Learning” at the American College of Nurse-Midwives Annual Meeting in June 2011.

Nichole Berglund-Clark, MSN ’04, owner of Hope Medical Clinic in Clinton, Ark., added another nurse practitioner in February.

Julie Berkau Hutchison, MSN ’04, ACNP-BC, RN, married David Hutchison in October 2010. She serves as a nurse practitioner in the Orthopaedic Trauma Department at Vanderbilt.

Candace Riehl, MSN ’04 and

Kristin Eckland, MSN ’05, ACNP, pictured in the center, recently returned from a six-month stay in Bogota, Colombia, and is publishing two books: “Bogota! A Hidden Gem Guide to Surgical Tourism,” and “The Thoracic Surgeons: Bogota, Columbia.”
Founders Medalist ’05, received the Preceptor Award which was selected by Vanderbilt University School of Nursing Midwifery faculty.

Cynthia Malowitz, MSN ’05, NP-C, Owner/President, Bay Area Quick Care, PLLC, provides a clinical preceptor site for nurse practitioner students from Texas A&M – Corpus Christi and Baylor University. Malowitz was one of five people who testified before the Texas Legislature for several bills that would have granted nurse practitioner independence.

Carrie Plummer, MSN ’05, one of VUSN’s ANP faculty, just returned from a summer internship with the White House Office of National Drug Control Policy, the group charged with establishing policies, priorities and objectives for the country’s drug control program. Read more about Plummer’s work on page 8.

Dorothy J. Dunn, MSN ’06, PhD, APRN, FNP-BC, AHN-BC, Clinical Faculty and Family Nurse Practitioner from the Christine E Lynn College of Nursing at Florida Atlantic University, has accepted a tenure track appointment as assistant professor for the School of Nursing at Northern Arizona University in Flagstaff, Ariz. There, Dunn will continue her work on compassion energy by joining the newly formed Social and Behavioral Science Compassion Project interdisciplinary team.

Christy Lucas, MSN ’07, and husband, Nick, announced the birth of Emma Jane, born May 11, 2010, in Memphis, Tenn., weighing 8 lbs., 7 oz.

Angel Epstein, MSN ’08, was the guardian for two WWII veterans who traveled with Volusia Honor Air Flight 7 for a day in Washington, D.C. on May 14. The Army and Navy 90-year-old veterans were treated to a day at the World War II Memorial, Tomb of the Unknown Soldier, Marine, Air Force, Vietnam and Korean monuments and a lunch in the room where the Watergate hearings were conducted. The Deland Rotary of Florida’s goal is to take all remaining World War II vets to see their memorial.

Stephanie Nipper, MSN ’08, and her family recently moved back to Middle Tennessee after living in Hilo, Hawaii. She works as a family nurse practitioner at Minute Clinic, and loves it.

Mary Agnes Andreano, MSN ’10, RN, CHPN, CCRC, started the VUSN PhD program this fall and is the online MSN program coordinator at Ohio University School of Nursing.

Mary Elizabeth Parks, MSN ’07, and Timothy Hugh Scott Jr., were married April 2 at the Wrightman Chapel in Nashville. Mary works as a nurse practitioner at Wellness Solutions Inc. Timothy works at Impact Media Studios and Tim Scott Productions as a production engineer and songwriter. The couple resides in Nashville.

Melissa Willmarth, MSN ’05, DNP ’10, was the 2011 winner of the Kitty Ernst Award which is one of the highest honors bestowed by the American College of Nurse-Midwives (ACNM). She is the fourth Vanderbilt certified nurse-midwife to have received the Kitty Award in the last six years. Willmarth has worked as a registered nurse and a certified nurse-midwife, and has been a faculty member at the University of Cincinnati since 2006. She currently serves as coordinator for the university’s nurse-midwifery and women’s health nurse practitioner programs. Pictured L to R: Julia Philippi, MSN ’99, VUSN faculty member and 2005 Kitty Ernst winner; Melissa Willmarth, MSN ’05, DNP ’10, 2011 winner; Tonia Moore-Davis, VUSN faculty and 2010 winner; Francie Likis, MSN ’94, VUSM faculty and 2009 winner.

Hollie Tamez, MSN ’10, lives in Hemet, Calif., and is the Meaningful Use Coordinator at Riverside Community Hospital, which she describes as a “fantastic position with the flexibility I had been praying for.” Thanks to support from the hospital chief nursing officer, Tamez is ready to help the center meet all Stage I objectives.
and Erik Adamczyk were married on Oct. 30, 2010, in Historic Cedarwood in Nashville. Former VUSN faculty member Jim Pace conducted the ceremony.

IN MEMORIAM

Ellen Adair Sallee, BSN ’40, died Jan. 11 in Wilmington, Del.

Virginia P. Crenshaw, BSN ’42, died Jan. 14 in Albuquerque, N.M.

Martha Eleanor Becker (Elly) Becker, BSN ’43, died April 19 in San Rafael, Calif.

Helen Weatherman Booth, BSN ’47A, died March 16 in Pulaski, Tenn.

Beatrice Evelyn Szabo Rogers, BSN ’47B, died July 19 in Florence, S.C.


Phyllis Lange Bateman, BSN ’61, and VUSN Founder’s Medalist, died April 5 in Franklin, Tenn.

Anita Taylor Davis, BSN ’74, died July 12 in Nashville.

Julie Caldwell Huffman, BSN ’77, died July 4 in Graham, Texas.

Joann F. Barber, MSN ’77, died Aug. 1 in Chattanooga, Tenn.


Linda Williams Brown, BSN ’80, died March 19 in Huntsville, Ala.

Verna A. McLaughlin, MSN ’97, died May 14 in Algood, Tenn.

Christopher Todd Lewis, MSN ’01, died on May 26 in Carthage, Tenn.

Kathy Lynn Carmichael, MSN ’05, died on May 29 in Edmond, Okla.

Teri Jo Prosser Lynch, MSN ’08, died on March 23 in Shelbyville, Ill.

SEND ALUMNI NEWS AND PICTURES TO
Susan Shipley
VUSN Director of Classes and Alumni Relations
Vanderbilt University Medical Center
2525 West End Ave., Suite 450
Nashville, TN 37203
susan.shipley@vanderbilt.edu
(615) 936-3046
Toll Free: (800) 288-0028

VISIT US ON THE WEB
www.vanderbilt.edu/vanderbilt
nurse

Luther Christman, PhD, RN, dean of the Vanderbilt University School of Nursing from 1967 to 1972, died at his home in Chapel Hill, Tenn., on June 7 at the age of 96.

Dr. Christman came to Vanderbilt as a national leader in nursing and a fellow of the Academy of Nursing. His appointment at Vanderbilt made him the first male dean of a nursing school in the country. Considered an innovator of new models of nursing practice and education, Dr. Christman made significant and often controversial changes in the curriculum and structure of the school.

At the time of his arrival, the undergraduate program was small, the graduate program was unaccredited and few faculty had doctoral degrees. His efforts were directed toward unifying education and service. He endorsed moving all non-clinical activities to Vanderbilt University Hospital administration.

He embraced the concept of joint appointments between the school and hospital to provide a professional model of care to nursing staff and students. He spearheaded a revised curriculum based on transforming basic science into practice. He hired more doctorally prepared faculty and changed the faculty and administrative reporting structure.

Dr. Christman left Vanderbilt in 1972 to become the first dean of Rush University College of Nursing and vice president of Nursing Affairs at Rush-Presbyterian-St. Luke’s Medical Center. At Rush, he continued efforts to integrate practice, education and research in nursing until his retirement in 1987.

Throughout his career, he remained a controversial figure, a strong supporter for the recruitment of male nurses and is known as one of the most honored and awarded professionals in the history of American nursing.

VUSN Alumni Association Eskind Alumni Digital Library Project

We have good news for VUSN alumni!

Through an arrangement with the Eskind Biomedical Library (EBL) and the Vanderbilt Medical Alumni Association (VMAA), our VUSN alumni can now enjoy free limited access to the Alumni Digital Library (www.mc.vanderbilt.edu/diglib/alumni). While the library cannot provide access to subscription journals and databases, it has collected links to free opportunities for continuing education, consumer health, government and other resources, including some open access journals. Access to the alumni ProQuest Health and Medicine Complete subscription is also available through the VMAA’s agreement with ProQuest and provides a wide range of health care information from dissertations to governmental and cultural archives to news.

If you would like to access these resources, simply email the VUSN Alumni Association office at alumninursing@vanderbilt.edu or Susan Shipley at susan.shipley@vanderbilt.edu or call (615) 936-3046 for a confidential passcode and username.

None of this would be possible without the generous help of the Vanderbilt Medical Alumni Association, and Ann Price, MD, and we are deeply grateful for this opportunity given by our medical colleagues.
Spring and summer are busy times at the School. More than 100 graduates came back for the Vanderbilt University Commencement and VUSN Academic Hooding Ceremonies on May 13, and nearly 260 students marked the completion of their coursework with the VUSN Pinning Ceremony held on Aug. 7.

To see more pictures visit Vanderbilt Nurse online at www.vanderbilt.edu/vanderbiltnurse.

1. DNP graduates smile for the camera from the bleachers inside Memorial Gym. Front Row, L to R: Linda Beuscher, Candace Harrington and Carol Callaway-Lane; Back Row, L to R: Deb Marcus, Robin Schier and Renee Collins

2. Dean Colleen Conway-Welch poses for a picture with Donna Garay and her son during the hooding ceremony on Branscomb Quadrangle.

3. VUMC’s Marilyn Dubree, MSN ’76 and chief executive nursing officer, and Dean of the School of Medicine, Jeff Balser, MD, PhD, vice chancellor for Health Affairs, line up for the hooding ceremony processional.

4. Morgan Stone received this year’s School of Nursing Founder’s Medal.

5. Celeste Lewis, left, and Brandi Quinn were all smiles at Vanderbilt University School of Nursing’s pinning ceremony.

6. Dean Conway-Welch presents Nina Connell with the VUSN pin.

Photography by Susan Urmy
Get a check from Vanderbilt!
Establish a charitable gift annuity with Vanderbilt and we’ll pay you for life.

**BENEFITS ON A $10,000 SINGLE-LIFE CHARITABLE GIFT ANNUITY**

<table>
<thead>
<tr>
<th>Age</th>
<th>Annuity rate</th>
<th>Yearly payments</th>
<th>Tax deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>65</td>
<td>5.3%</td>
<td>$530</td>
<td>$2,516</td>
</tr>
<tr>
<td>70</td>
<td>5.8</td>
<td>$580</td>
<td>$3,178</td>
</tr>
<tr>
<td>75</td>
<td>6.5</td>
<td>$650</td>
<td>$3,839</td>
</tr>
<tr>
<td>80</td>
<td>7.5</td>
<td>$750</td>
<td>$4,447</td>
</tr>
<tr>
<td>85</td>
<td>8.4</td>
<td>$840</td>
<td>$5,285</td>
</tr>
<tr>
<td>90</td>
<td>9.8</td>
<td>$980</td>
<td>$5,938</td>
</tr>
</tbody>
</table>

*minimum age of 65 and gift amount of $10,000. Deductions as of October 2011.

**How it helps you**
- Fixed payments for life
- Immediate income tax deduction
- Partially tax-free payments
- Possible capital gains tax savings

**How it helps School of Nursing**
- Scholarships
- Research funding
- Faculty chairs
- Other priorities

Learn more by contacting Linda Ray Miller in Vanderbilt’s Office of Planned Giving at (615) 343-3113, (888) 758-1999 or plannedgiving@vanderbilt.edu. [www.vanderbilt.edu/alumni/plannedgiving](http://www.vanderbilt.edu/alumni/plannedgiving)