

2007

ANNUAL REPORT

PATIENTS AND POSSIBILITIES



MASSACHUSETTS  
GENERAL HOSPITAL

PATIENT CARE SERVICES

# 2007

PATIENT CARE SERVICES

## DISCIPLINES

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Physical Therapy | Respiratory Care | Social Work | Speech-Language Pathology

## PROGRAMS

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*Caring Headlines*

CENTER FOR GLOBAL HEALTH

CHILD PROTECTION CONSULTATION TEAM

HAVEN PROGRAM – HELPING ABUSE  
AND VIOLENCE END NOW

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PATIENT AND FAMILY LODGING

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PCS INFORMATICS

PCS OFFICE OF QUALITY & SAFETY

READING DISABILITIES

SYSTEMS IMPROVEMENT

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· CENTER FOR INNOVATIONS IN CARE DELIVERY

· MAXWELL & ELEANOR BLUM PATIENT AND  
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· NORMAN KNIGHT NURSING CENTER FOR  
CLINICAL & PROFESSIONAL DEVELOPMENT

· YVONNE L. MUNN CENTER FOR NURSING RESEARCH

VOLUNTEER SERVICES

## *the MGH mission*

Guided by the needs of our patients and their families, we aim to deliver the very best healthcare in a safe, compassionate environment; to advance that care through innovative research and education; and, to improve the health and well-being of the diverse communities we serve.



Dear Friends and Colleagues:

2007 was marked by an extraordinary year of “Patients and Possibilities” for MGH Patient Care Services (PCS).

As we recall the many contributions to patient care, education, research and the diverse communities we serve, our impact is visible in virtually every setting and service and in every unit and department. While it would be impossible to list all of the many individual and collective achievements from throughout the past year, through “Patients and Possibilities”—the 2007 PCS Annual Report—we have captured many of the highlights. Appropriately, these begin with a focus on our patients.

Perhaps most significant, MGH continued to advance its commitment to keeping patients and staff safe, as evidenced by several significant initiatives. PCS Systems Improvement led an extraordinary hospitalwide effort to convert the hospital’s 2,000 large volume pumps to an advanced, high-tech model featuring “SMART” technology—a programmable mini-computer designed to support front-line staff nurses in providing more precise and safer medication administration. Likewise, to minimize the risk of physical injury to front-line clinicians, we began deploying new safe patient handling technology—ceiling and portable lifts—with great success, and with a long-term goal of 100 percent coverage on every unit. And we reached a remarkable goal of 90-plus percent compliance with the Centers for Disease Control guidelines for hand hygiene—believed to be among the best rates in the country. And, as we did so, we saw hospital-acquired infection rates such as methicillin-resistant *Staphylococcus aureus* (MRSA) continue to decline.

We also saw the promise of advances in care delivery—the validation of an important swallow screening tool developed by our colleagues in Speech, Language & Swallowing Disorders, and our selection for participation in the nationwide Transforming Care at the Bedside (TCAB) project. We witnessed many “firsts”—the appointment of an executive director of The Institute for Patient Care, director of the new PCS Office of Quality & Safety, and director of The Yvonne L. Munn Center for Nursing Research. We celebrated significant milestones—the ten-year anniversaries of both

Collaborative Governance and HAVEN (Helping Abuse and Violence End Now), the Social Services domestic violence advocacy program. And we saw breakthrough achievements—our inaugural Hausman Student Nurse Fellow, one of our social workers honored by the Kenneth B. Schwartz Center with its Compassionate Caregiver Award, and one of our own named a national “Nurse of the Year.”

Looking ahead, we continue to see the potential impact of an aging population on the healthcare system. The number of US adults over age sixty-five is expected to double by 2030, and at the same time the number of registered nurses in the US is shrinking as aging nurses are leaving bedside practice. In anticipation, we continued to think creatively about potential solutions. In 2007, the US Department of Health and Human Services awarded us a \$650,000 grant to support an innovative RN Residency Program: Transitioning to Geriatrics and Palliative Care. The goal is twofold: improve the nursing care delivered to older patients and extend the careers of experienced nurses at the bedside. Likewise, the Center for Integration of Medicine and Innovation Technology (CIMIT) awarded its first-ever grant to an MGH nurse to host a summit—“Coming of Age: Innovations to support the aging nurse”—to begin exploring possible solutions that will allow these nurses to stay at the bedside longer. Likewise, we began to ramp up efforts to promote geriatric interdisciplinary practice through several innovative approaches, including the hiring of a geriatric clinical nurse specialist for consultation to all clinicians.

Together, we are successfully advancing our mission of providing the best possible care to our patients and families, and for that I can only say, “Thank you.”

With admiration and respect,

A handwritten signature in cursive script that reads "Jeanette Ives Erickson".

Jeanette Ives Erickson, RN, MS, FAAN

Senior Vice President for Patient Care and Chief Nurse





“What we received was  
really total family care.”

To accomplish great things, we must not only act,  
but also dream; not only plan, *but also believe.*

ANATOLE FRANCE

## THE COMEBACK

**At age 16 Eddie Martin had it all:** He was a National Honor Society student and a three-sport varsity athlete in football, hockey and baseball at Silver Lake High School in Kingston, Massachusetts. He was a playmaker—the go-to guy—and college recruiters were starting to take notice. The football season had just ended with a big Thanksgiving Day victory, and Martin had been elected team captain. Now he was transitioning to hockey and was the team’s starting goalie. On December 7 he and his teammates raced from the classroom to a friend’s car to head to practice. Last to arrive and the car already full, Martin sat on the trunk for the short ride. It was a matter of seconds before he fell, the weight of his backpack forcing his head into the road and leaving him with a traumatic brain injury. He had entered the battle of his life.

EMTs moved Martin to a MedFlight helicopter poised alongside the nearby football field. Every minute mattered as they raced to MGH. Traveling north on the highway below, Ed and Karin Martin knew only that their son had been in a serious accident. When he arrived, clinicians immediately placed a drain to remove fluids from around his brain and minimize swelling. Too fragile for the OR, they moved him to the Pediatric Intensive Care Unit (PICU), where life-saving procedures began at the bedside, including inserting a bolt in his head to help monitor pressure in the brain. “We were struck by the remarkable calmness and focus of Eddie’s clinical team as they worked together to save his life,” recalls Karin. “But what we received was really total family care. Everyone kept us very involved, helped us understand what was happening, and taught us how to cope with this tragedy.”

For weeks, Martin’s world remained a web of machines, tubes, fluids, medications and alarms, with a team of nurses caring for him around the clock. During a particularly grim period, staff spent four hours calling repeat



codes on their patient. “Eddie’s was an especially intense case,” says Jennifer Garrity, RN, a PICU staff nurse. “We had to monitor him constantly for any signs of brain herniation, manage multiple IV drips for blood pressure support, swelling, heart rate, pain, and sedation to help preserve his brain.”

The family endured the painful uncertainty of their son’s outcome, hour by hour, week after week. Would he survive, and if so, in what condition? It was likely he would never speak or walk again. In a final, desperate measure to relieve pressure to his brain, surgeons removed pieces of his skull, temporarily storing them in his abdomen. Somehow, Martin survived the operation. And on Christmas Eve, it came time to end the weeks of uncertainty by bringing Martin out of his drug-induced coma.

The team prepared his parents and conversations with the social workers and chaplains—who had been by their side throughout—helped them process all they were hearing. But no one was prepared for what happened next: Eddie Martin opened his eyes, looked directly at his mother and said, “Mamma.” Their son was back. “It was our Christmas miracle,” says Karin. “We knew then he would make it.”

Martin began a rapid-fire recovery never before witnessed. Within days he was transferred to the general Pediatric Unit, where he thrived on a regular regimen of physical, occupational and speech-language therapy. Still too weak to sit up or brush his teeth, Martin, with the help of his clinicians, mapped out a game plan for recovery and set some big goals: return to school, attend the prom, and graduate on time with his class. He credits much of his subsequent progress to the clinical team that rallied to pull him through and helped him regain the basic functions he’d lost. And he also is grateful for the work ethic he had developed playing sports. “That’s where I learned to push myself to the limit,” he says.

Martin eventually transferred to Spaulding Rehabilitation Hospital for an expected three-month stay; he went home in just weeks and continued his astounding progress. He describes himself as being “back to normal.” Although the injury prevents him from ever playing contact sports again, he still works out and practices with his team mates, leading them from the sidelines. And as to the matter of his lofty goals, Martin eventually returned to school full time, attended the prom with his high school sweetheart, and this year graduated on time, with a 3.7 grade point average and an academic scholarship to Merrimack College. He plans to study physical therapy.





“We were struck by the remarkable calmness and focus of Eddie’s clinical team as they worked together to save his life.”

The goal of this innovative approach is to allow a level of continuity that typically has been out of reach for these patients.



It is our duty as men and women to proceed as though the  
limits of our abilities *do not exist*. PIERRE TEILHARD DECHARDIN

## AGAINST ALL ODDS

**Within the walls of an academic medical center** such as Mass General, complex patient cases are becoming the norm. Many of these patients not only have serious physical illnesses but also far-reaching psycho-social issues that further complicate their lives. When it comes to the most complex of these highly complex cases, the approach to care can resemble a made-for-TV drama—*CSI* or *Without a Trace*—a mystery to be solved. In these cases, MGH now turns to Team 5.

Started as a six-month pilot program in 2006, the goal of this innovative approach is to allow a level of continuity that typically has been out of reach for these patients. Team 5 consists of a multidisciplinary group of providers: an attending physician, nurse practitioners, a psychiatrist, a case manager and a social worker. The members are not assigned to a particular patient care unit or location within the hospital, but instead provide specialized care for specific patients throughout MGH, wherever the patient is located. Throughout a patient's case, the membership of the care team remains relatively constant.

"Team 5 patients are particularly comforted by seeing the same clinicians day after day," says Grace Good, APRN, BC, nurse practitioner. "And this continuity also provides team members with a valuable opportunity to really know these patients and to begin to sort through the complexity of their particular situations."

Team 5 recently worked with what for them is a classic referral: A woman in her fifties was admitted to MGH as a "Jane Doe." There was no medical history or information about this patient's living situation. Tests revealed that she had suffered a stroke, but the patient herself could provide no details. She was described as "homeless," had cognitive deficits, and over the course of a month was seen by Neurology, the Stroke Service, Physical Therapy, Occupational Therapy, Speech-Language Pathology, the Homeless

Service, Psychiatry, Nutrition and Food Services, and the Psychiatric Clinical Nurse Specialist Consult Service. After two months at the hospital, she was medically stable, but with so many details about her life still unknown, putting together an appropriate discharge plan presented a huge challenge. It was time for Team 5 to step in.

“The patients we see often have an array of psycho-social issues that can test the limits of traditional hospital care,” says Good. “In this case, setting up the appropriate supports and services outside of the hospital was critical to this patient’s overall healthcare plan.”

As members of Team 5 began to work intensively with the patient, clues about her background began to emerge. She claimed she had held a steady job in a downtown hotel for nearly 20 years. She had kept an apartment, but when her health failed she spent all of her savings, lost her apartment and moved in with a friend until that was no longer an option. She eventually became homeless. With only scant bits of information to go on, and after weeks of investigating, the Team 5 social worker struck gold: She managed to locate the patient’s former employer.

“Jane Doe” now had a name. From there, the team was able to find their patient’s medical records and other information that would help them craft a safe discharge plan. They focused on bringing all of the many vital pieces together. A speech-language pathologist reassessed the patient’s cognitive ability to help determine the level of support she might need in her new living situation. Karon Konner, MSW, LICSW, Team 5 social worker, and Kristin Sybertz, RN,BSN, ACM, case manager, began the arduous task of helping the patient secure funding for her future living situation, including securing a new Social Security card and filling out endless forms and applications. Konner also brought her to visit several assisted living facilities to allow the patient a voice in where she would ultimately live. A psychiatric clinical nurse specialist developed a behavioral plan with the patient’s nurses to support them as they helped the patient continue to make progress and transition from the hospital to a life beyond the walls of MGH.

In the end, Team 5 took over a highly complex case and managed to do for their “Jane Doe” what they do for so many other patients who might otherwise end up getting lost in the system: They gave their patient back her life.



Team 5 took over a highly complex case and managed to do for their “Jane Doe” what they do for so many other patients who might otherwise end up getting lost in the system: They gave their patient back her life.





“I never think of myself  
as being 83.”

Great things are not done by impulse,  
*but by a series of small things brought together.*

VINCENT VAN GOGH

## A HOMECOMING

**Domenic Marino sums up his current outlook on life** very simply: “I never think of myself as being 83.” Like many older adults these days, he maintains a pretty active lifestyle—he cooks, cleans, does the yard work, grocery shops and plays golf any chance he gets. As he describes it, “I’m blessed. I have a good life.”

Marino became a widower 25 years ago, shortly after retiring from the Marketing Department of the Prudential Insurance Group. Following his wife’s unexpected death, he looked for ways to fill the void and solitude that suddenly became his life. He bought a condo on Florida’s West Coast, socialized, made new friends and at age 58 took up golf and soon sported an enviable 11 handicap. At 83, he can shoot his age.

Last winter, Marino made his annual trek north to be with his family for the holidays. One morning, he awoke feeling especially tired; breathing became an effort. Two days later, his daughter called 911; her father’s health had taken a sharp turn. A team at the local hospital stabilized him and searched for a diagnosis. His was a complex case involving his heart and lungs, but there was no clear cause for his rapidly deteriorating health. Throughout the next month, an ambulance rushed Marino to the ER four different times. This fun-loving, active 83-year-old was failing before his family’s eyes.

Eventually, Marino arrived at MGH, where a team of clinicians rallied around the now fragile patient. Surprisingly, his multiple cardiac, pulmonary, blood and other test results were not exceptionally bad. A cardioversion procedure—essentially, a planned shock to the heart—reversed Marino’s irregular heartbeat, but still there were no signs of improvement in his overall health. Then suddenly Marino lost his ability to swallow. He began losing weight and grew weaker, became depressed and then catatonic.

“My father’s case was very complex,” says his daughter, Mary Doolan. “If he had been any place else, I think they would have decided they’d done all they could and sent him off to a nursing home. Not for one second did anyone at MGH treat him like an old man. They treated him like a whole person, and that’s what ultimately made him well.”



For much of his hospitalization at MGH, Marino was cared for on Ellison 16, General Medicine, the first inpatient unit at the hospital to pilot an evidence-based, geriatric-sensitive care approach.

According to Laurel Tenney, RN, a staff nurse on the unit, “Older patients have distinct needs, and we’re taking the latest research about their care and applying it at the bedside. Some strategies, although relatively simple to employ, can make a tremendous difference to the patient.” For example, clinicians need to be conscious of standing close to the patient, where they can be seen, or to the side if the patient has macular degeneration with only minimal peripheral vision. Older patients eat better when sitting in a chair versus in bed.

A team of ten staff nurses, the nursing director, clinical nurse specialist, geriatric specialist and a chaplain are leading the charge. This year, staff members traveled to a national conference that provided them with a better understanding of the basic principles of geriatric care. Staff education is being supported in a variety of ways, including hosting “Lunch and Learning” sessions, developing informational posters and holding bedside geriatric rounds. And core team members are mentoring other staff, promoting best practices and fostering a culture change on the unit.

Marino and his family noticed the specialized approach. “People listened to us—the people who knew him best, his family—to find out what my father was really like,” she continues, “Even more, they thanked us for our input, assuring us that it would influence how they went about doing their jobs.” It took some time and creativity to manage a variety of health issues Marino was battling, but eventually he was back ... and sitting on the edge of his bed, eagerly awaiting discharge and his next round of golf.



“If he had been any place else, I think they would have decided they’d done all they could and sent him off to a nursing home. Not for one second did anyone at MGH treat him like an old man.”



**“Hello Dolly!” star Carol Channing  
was on hand to mark the ten-year anniversary  
of the PCS Collaborative Governance Program.**

### **Collaborative Governance marks ten years**

Throughout the past decade, Collaborative Governance has played an integral role in shaping and advancing the practice of the various disciplines that comprise MGH Patient Care Services. The success of the program rests on its ability to shift clinical decision making from administrators to clinicians at the bedside. By empowering staff in this way, clinicians are positioned to use their knowledge, experience and commitment to provide the best possible care to patients and families.

Florence Nightingale once stated, “Great progress is largely contingent upon thoughtful reflection, dialogue and the creative use of worthwhile ideas.” In its first ten years, Collaborative Governance has demonstrated such progress, exerting far-reaching influence in transforming the PCS culture and the way we deliver care.



# *collaborative governance*

The work of the **Professional Development Committee** led to the creation of the PCS Clinical Recognition Program, the first-of-its-kind multidisciplinary advancement program. Clinical Recognition provides a formal way to acknowledge the expertise of clinicians, recognizing the valuable contributions made by staff at every level toward the common goal of excellence.

**The Patient Education Committee** has ensured that clinicians have timely access to a comprehensive array of patient-education materials—written in plain language and available in non-English translations. Patients today are far better positioned to make well-informed decisions about their care.

**The Nursing Practice Committee** has provided a means for translating evidence-based practice into policies, procedures, guidelines and standards, ensuring that staff have the right tools and the right technology in the right place at the right time.

**The Ethics in Clinical Practice Committee** has played a critical role in addressing the increasingly complex issues associated with care delivery, particularly those related to end-of-life care. As they have championed the hospitalwide implementation of advance-directive initiatives and advance care planning, they have served as vital advocates for patients and families.

**The PCS Quality Committee** has been influential in cultivating the robust culture of quality and safety now embraced throughout PCS and the hospital. The group has provided an early warning system for identifying patterns and practices that require specific attention in order to keep patients and staff as safe as possible.

**The Nursing Research Committee** has ensured that research remains an integral part of MGH nursing practice. This committee fueled the spirit of inquiry with its now famous “Did you know?” posters, the Nursing Research Journal Club and the launch of the Nursing Research Expo, held during Nurse Recognition Week.

**The PCS Diversity Committee** has advanced the PCS and hospitalwide diversity agenda, raising awareness about diversity-related issues and exploring the challenges of healthcare disparities. They have also partnered with The Norman Knight Nursing Center for Clinical & Professional Development to develop educational programs on cultural competence, ensuring care that is as meaningful as it is culturally sensitive.

**The Staff Nurse Advisory Committee** ensures open, two-way and ongoing communication between staff and leadership. The voices and participation of these staff nurses have informed critical nursing initiatives and addressed emerging issues in their earliest stages. The impressive success of the Staff Nurse Advisory Committee paved the way for the creation of two more advisory committees, one in Social Services and another in Physical and Occupational Therapy.

We are what we repeatedly do.  
Excellence then is not an act *but a habit.* ARISTOTLE

# 2007 MILESTONES

## INTRODUCING SMART PUMPS

Imagine facing this challenge: replacing every large volume intravenous (IV) infusion pump at MGH—some 2,000 pieces of high-tech equipment—over the course of just three days, with the assurance that every staff nurse would be trained in the new technology.

This summer the PCS Systems Improvement (SI) team led an extraordinary hospitalwide effort that accomplished this very task.

With a goal of supporting front-line staff nurses in providing more precise and safer medication administration, SI staff, clinical nurse specialists, and staff from PHS Contracting, Materials Management, and Biomedical Engineering converted the hospital's 2,000 large volume pumps to an advanced, high-tech model.

The upgraded equipment features “SMART” technology—essentially a programmable mini-computer with built-in guidance systems to prevent over- and under-dosing of medication through an embedded electronic drug library that contains drug names, dosing units and limits for

a broad range of IV medications. The new system also provides a vital platform for future upgrades, including wireless capability to facilitate updates to the drug library and downloads of quality data and bar-coding features that will advance medication safety.



SMART Pump

Paving the way for the “overnight” conversion, the team designed an unprecedented educational initiative to ensure that the MGH nursing staff could take full advantage of the new technology. Staff from The Norman Knight Nursing Center for Clinical & Professional Development trained 91 percent of the MGH nursing staff—2,900+ nurses—over the course of three weeks, either on their unit or in well-attended super-user sessions. Unit-based staff champions were prepped to train the remaining nurses.



Senior vice president for Patient Care Jeanette Ives Erickson, RN; Norman Knight; and MGH president Peter Slavin, MD

#### A MILESTONE IN NURSING EDUCATION

This summer, the MGH Department of Nursing celebrated a landmark day in its history: the dedication of The Norman Knight Nursing Center for Clinical & Professional Development. This state-of-the-art facility is now one of the leading hospital-based nursing education centers in the country, featuring innovative orientation, training and continuing education programs; a variety of partnerships with academic institutions; clinical simulation training; a novel New Graduate Critical Care Nursing Program; and hundreds of continuing education programs designed to promote clinical excellence and professional development.

The Norman Knight Nursing Center embodies Jeanette Ives Erickson's vision and commitment to a culture of lifelong learning, and the foresight, commitment and generosity of local businessman and philanthropist Norman Knight, broadcasting legend and founder of Knight Quality Stations. It became their common goal to bring together the space, technology, talent and resources required to give new meaning to professional practice development.

The Center offers a springboard for nurses to share their clinical expertise, both within the walls of the MGH and around the world; a mechanism for educating the next generation of providers; a means for supporting the lifelong learning required of this dynamic profession; and, ultimately, the ongoing support nurses need to provide the best possible care to patients and families.

As Peter L. Slavin, MD, MGH president, noted, Mr. Knight has contributed to creating "a valuable resource for MGH nurses and clinicians, one that will support the professional development of generations of nurses for years to come."

**The Institute for Patient Care:**  
**International Visitors Program hosted**  
**131 international nurse visitor**  
**colleagues within 29 individually**  
**planned educational programs**  
**from the following countries: Belgium, Brazil, China,**  
**Israel, Japan, Singapore, South Korea, Spain, Thailand,**  
**the US and the United Kingdom ... as compared to**  
**98 visitors and 27 programs in FY 2006.**

All that is necessary to break the spell of inertia and frustration  
is this: *Act as if it were impossible to fail.* DOROTHEA BRANDE

#### MAKING PATIENT SAFETY INFORMATION AVAILABLE

Patients and their family and friends are important members of the care team. Everyone plays an important role on that team and in creating a healing environment for the patient. In 2007, MGH launched a new patient safety feature to complement its existing CarePages service. Through MGH CarePages, patients and families can update their entire circle of family and friends via their own personalized and secure web page. Now, each of these pages features a link to important information about patient safety, including taking and tracking medications, avoiding infection, visitor hand hygiene, and links to specific patient safety resources. Arming patients and families with critical information can be an important step in keeping patients safe.

#### AAN INDUCTS TWO MGH NURSES

This year, two MGH nurses—Diane Carroll, RN, PhD, FAAN (left), and Jeanette Ives Erickson, RN, MS, FAAN (right)—had the prestigious honor of being inducted as fellows of the American Academy of Nursing (AAN). The organization is comprised of many of the nation's top nursing executives, policy makers, scholars, researchers and practitioners.

Carroll has worked in cardiovascular nursing and research for more than 30 years, currently within the Yvonne L. Munn Center for Nursing Research at MGH. Her responsibilities include developing and expanding cardiovascular nursing research and mentoring colleagues with research questions that arise from their patient care practices. Carroll is widely published and has presented extensively both nationally and internationally. She is a Nurse Fellow in the European Society of Cardiology and a fellow in the American Heart Association.

Ives Erickson has served as MGH senior vice president for Patient Care since 1996. She has developed new measures to evaluate innovations that influence professional nursing practice including the Staff Perceptions of the Professional Practice Environment Survey, which is used to evaluate the professional practice environment. Currently, this instrument is being used by more than 25 healthcare institutions, in six countries. Ives Erickson is an instructor at Harvard Medical School, visiting scholar at Boston College, senior associate at The Institute for Nursing Healthcare Leadership and assistant professor at the MGH Institute of Health Professions. In 2007, she was appointed by the US Secretary of Health and Human Services to serve on the National Advisory Council on Nurse Education and Practice. Her international commitment to improving nursing practice in countries such as Iraq and Indonesia also contributed to her election to the Academy.



### INNOVATIONS TO SUPPORT THE AGING NURSE

By the year 2010, 40 percent of all current registered nurses are expected to retire, and the US Department of Labor and Statistics projects that the country will experience a shortage of more than 1 million nurses. By better supporting aging nurses in their practice, many may stay at the bedside longer, offering one solution to this pending crisis.

In the fall, The Center for Integration of Medicine and Innovation Technology (CIMIT) awarded its first-ever grant to a nurse to begin exploring possible solutions. Working with The Center for Innovations in Care Delivery at MGH, Marianne Ditomassi, RN, MSN, MBA, executive director of PCS Operations, organized an invitation-only summit called “Coming of Age: Innovations to support the aging nurse.” The event brought together nursing, academic and industry leaders to innovate around technology, environment of care and practice.

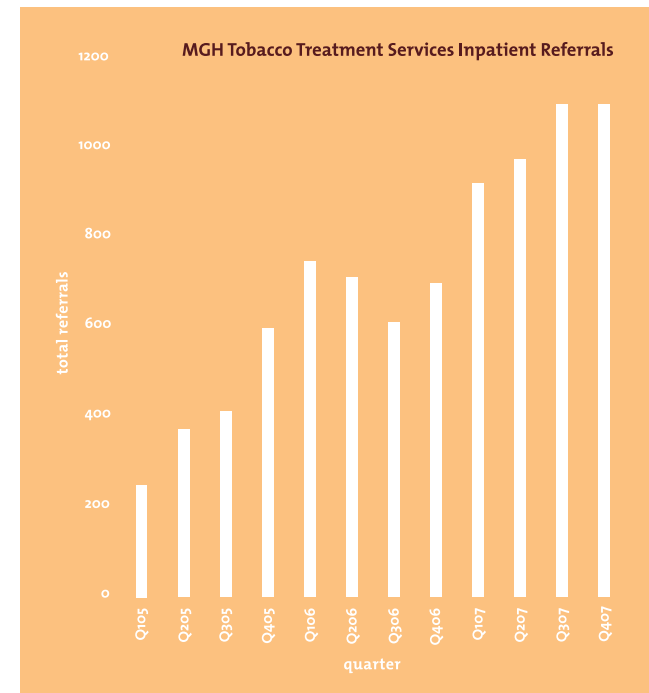
The proceedings from the event are being compiled and will be shared with healthcare and industry leaders as a way to drive the national agenda and create viable solutions.

### SERVICE AND SAFETY: TEAM USA

The Norman Knight Nursing Center for Clinical & Professional Development and Environmental Services welcomed more than 75 unit service associates (USAs) and their managers to Ruth Sleeper Hall for the inaugural session of Team USA. The new educational series was designed to update and review environmental cleaning procedures and other skills with USAs throughout the Department of Nursing.

The open-house-style offering included several interactive learning stations, allowing employees time to observe demonstrations, ask questions and get hands-on practice with various cleaning products, tools and procedures. The USAs learned about new flat mops, the suction canister liner system, safe bodily fluid cleanup, hazardous waste disposal, proper use of cleaning chemicals and the array of towel dispensers used throughout the hospital.

Unit service associate Pearline Morrison gave Team USA high praise, “It was very, very good. It gave us experience with things we need to know.”



*Smoking Cessation: 2007 marked a year of terrific growth for the MGH Tobacco Treatment Services (TTS). In January, many of the hospital's electronic admission templates added a field describing the patient's smoking status. Now an automatic referral is sent to the TSS whenever a patient is identified as a smoker. As a result, the number of MGH patients who receive smoking counseling has increased dramatically, up from 70 referrals a month to 70 a week.*





### IN MEMORY OF KATHRYN ANN BRUSH

MGH lost a dear colleague, friend and mentor, Kathryn Ann “Katie” Brush, RN, MS, CCRN, FCCM, a clinical nurse specialist in the Surgical Intensive Care Unit (SICU), who died at the end of 2007 following a brief illness.

Brush was widely recognized for her pioneering work within the patient safety movement and her humanitarian relief efforts. She was among the first members of the Patient Safety Improvement Corps (PSIC), a national partnership program formed in 2003 between the Agency for Healthcare Research and Quality (AHRQ) and the Department of Veterans Affairs (VA). Closer to home, she championed multiple initiatives within the SICU to improve the unit’s infection rates, and MGH is currently in the process of replicating her work throughout the hospital.

Among her many accomplishments, Brush was a member of the country’s International Medical-Surgical Response Team (IMSuRT), which provides triage, medical treatment, support for local clinicians and preparations for patient evacuation. In 2002, she was inducted as a fellow in the American College of Critical Care Medicine, only the 30th critical care nurse in the world to receive this distinction.

Katie Brush will be most remembered by her MGH friends and colleagues for her quick wit and her advancement of both the clinical nurse specialist role and clinical practice. She and her many contributions will be sorely missed.

### 60TH ANNIVERSARY

Respiratory Care Services this year celebrated its 60th anniversary, marking decades of development in the technical and clinical aspects of the profession. In the early days, oxygen tents, iron lungs and simple mechanical ventilators were used to support patients in respiratory distress. Today, microprocessor-controlled mechanical ventilators, extracorporeal membrane oxygenation (ECMO), and sophisticated oxygen and aerosol delivery systems are the standard.



*Standing behind original MGH iron lung during this year’s Respiratory Care Week celebration are respiratory therapists (l-r) Pam Brown-Early, RRT; Vincent Riggi, RRT; Christa Fournell, RRT; Le Tanya Taylor, RRT; and Deborah Chase, RRT.*

In 1959, 72 patients were mechanically ventilated outside the operating room. In 2007, more than 4,700 patients were mechanically ventilated, with an average of 83 patients receiving ventilator support on a daily basis. Staffing has increased from three oxygen technicians in the early days to more than 80 respiratory therapists today.

With increasing demand for respiratory care services, respiratory therapists are a critical part of the patient-care team within and outside intensive care units.



### DIRECTOR OF PCS OFFICE OF QUALITY & SAFETY APPOINTED

Keith Perleberg, RN, MDiv, was appointed the director of the new Patient Care Services Office of Quality & Safety.

Perleberg distinguished himself as the nursing director of Phillips House 20 and 21 after assuming that position in 2001, creating practice environments that are exceptionally focused on the patient and family and are known for interdisciplinary team work. Over the past few years, Perleberg has placed an increased emphasis on patient and staff safety and has taken a leadership role by sponsoring unit-based and interdisciplinary ethics forums and peer-to-peer teaching programs.

Recently, he served as the Magnet Redesignation Committee co-chair and has been very active in hospital-based committees, councils, teams and task forces, including the TB Safety Task Force, BSN Education Advisory Committee, Nurses Improving Care for Health System Elders (NICHE) Committee, Physician Orientation Task Force, Medication Reconciliation Project Team and Clinical Recognition Board.

Perleberg joined the MGH community in 1991 as a staff nurse in inpatient Psychiatry and served as the chair of the Department of Nursing’s Staff Nurse Advisory Committee from 1991 to 1994. In 1993, he assumed the role of interim nurse manager of inpatient Psychiatry.

*Be the change*  
you want to see in the world. GANDHI



#### NATIONAL NURSE OF THE YEAR HONORS

*Nursing Spectrum* magazine named MGH's Deborah Washington, RN, PhD(c), Patient Care Services (PCS) director of Diversity, its 2007 National Nurse of the Year in the "advancing and leading the profession" category. The publication's annual Nurse of the Year Awards recognize the extraordinary contributions nurses make to their patients, to one another and to the profession of nursing.

In 1995, Washington became the first PCS director of Diversity at MGH, and has since proven instrumental in leading various initiatives to advance diversity within the workforce and to translate cultural competence into practice. Among her many accomplishments, she co-designed the first culturally competent care curriculum at MGH, created our African American Pinning Ceremony, was awarded a fellowship in the inaugural class of the Health Research & Educational Trust (HRET) Cultural Competence Leadership Fellowship Program and was selected to participate in the 2007 Robert Wood Johnson Executive Nurse Fellows Program, a three-year advanced leadership program.

Through her inspiring vision and steadfast commitment, diversity has today become an integral part of the MGH culture.

9 different MGH nurses were named finalists in the 2007 *Nursing Spectrum* "Nurse of the Year" Awards—New England Region ... the most from one institution in any given year.

The categories and respective finalists include:

*Advancing the Profession* • Deborah Washington, RN, PhD(c), Director, PCS Director of Diversity

*Clinical Care* • Denise Morelli, RN, Staff Nurse

*Community Service* • Karen Holland, RN, Staff Nurse  
Gayle Peterson, RN, Staff Nurse

*Management* • Angelleen Peters-Lewis, RN, PhD, Nursing Director

*Mentoring* • Catherine Beisheim, RN, Clinical Nursing Supervisor  
Kathleen Carr, RN, Staff Nurse

*Teaching* • Brian French, RN, Simulation Program Manager  
Dorothy Jones, RN, EdD, FAAN, Director of The Yvonne L. Munn Center for Nursing Research

Jones and Washington each were named "Nurse of the Year" in the New England Region in their respective categories. Washington went on to win the national award (see story at left).

No act of kindness, no matter how small,  
is ever wasted. AESOP



*MGH Outfitters Opens: MGH president Peter Slavin, MD, (right) and senior vice president for Patient Care Jeanette Ives Erickson, RN (second from right), celebrate the opening of MGH Outfitters, the new retail store on the first floor of the Warren Building, with (l-r) JoAnne Ellison, director, Ladies Visiting Committee (LVC) Retail Shops; Pat Rowell, director, Volunteers, Interpreter, Information Desk Services and Liaison to LVC Retail Shops; and Jennifer Augustin, supervisor of MGH Outfitters. Missing from the photo is Kathy Rehm, vice chair, LVC. The new store offers scrubs, footwear, stethoscopes and other supplies geared to the medical community.*

#### MAXWELL BLUM'S LEGACY GROWS

For several decades, Maxwell V. "Mutzie" Blum built a reputation as a respected businessman, founding the Maxwell Shoe Company and turning it into a leader in the footwear industry. At the same time he was an active community leader, very involved in nonprofits, donating not only money but also his time and expertise. Maxwell and his wife Eleanor have been very generous to MGH over the years.

Sadly, Maxwell Blum died in 2003, but through his family his legacy of giving continues. In 2007, his wife and daughters made a major gift to the Social Services Department in the Cancer Center to name the Maxwell V. Blum Cancer Center Resource Room. Here his generosity helps countless cancer patients at a critical and very frightening time.

"Our father understood how important it is for patients to educate themselves," says his daughter, Betty Ann. "We know he would be enormously proud to have his name associated with such a worthwhile service."

Founded in 1995 and generously supported each year since its inception by Friends of the Massachusetts General Hospital Cancer Center, the Cancer Resource Room helps people better understand and cope with a disease that can, at times, seem overwhelming. The service averages 60 visitors per day to its Yawkey Center location and 45,000 visits per month to its website.



## PROMOTING ERGONOMIC SAFETY

As part of their work, nurses are naturally at risk for physical strain and injury. Fortunately, ergonomic technologies that reduce the risk of physical strain and injury in the delivery of patient care are becoming more widely available.

In an effort to eliminate or minimize the physical risk to front-line clinicians, MGH is deploying new, safe patient-handling technology with great success. In 2006, ceiling lifts were piloted in two inpatient care units. Nurses on the two pilot units gave the lifts a 9.7 out of 10 rating in areas such as quality, safety, efficiency, effectiveness in reducing injury and comfort in use. Likewise, they found that patient outcomes were positively impacted. Reports from one clinician in the Medical ICU suggest that the lifts have helped to improve skin integrity and pulmonary function. Nursing has also reported the increased frequency with which patients are able to be transferred out of bed.

Based on the successful pilot, MGH began installing lifts on inpatient care units in March 2007, with a goal of 100 percent coverage on every unit to increase the adoption of the equipment and have the equipment available for clinicians at all times. In 2007, MGH installed ceiling lifts in ten inpatient care units.

MGH will continue to install ceiling lifts in all inpatient units throughout the next two years as well as piloting portable lifts as an immediate option on units at lower risk.



## FIRST EXECUTIVE DIRECTOR OF THE INSTITUTE FOR PATIENT CARE APPOINTED

Gaurdia E. Banister, RN, PhD, joined the PCS leadership team as the first executive director for The Institute for Patient Care. The Institute includes The Norman Knight Nursing Center for Clinical & Professional Development, The Yvonne L. Munn Center for Nursing Research, The Maxwell & Eleanor Blum Patient and Family Learning Center, The Center for Innovations in Care Delivery, and a variety of programs, such as Clinical Recognition and Collaborative Governance.

Banister is responsible for advancing the Institute's new vision for interdisciplinary education and research, which is centered on a commitment to meeting patients' needs and advancing the professions.

She comes to MGH from Providence Hospital in Washington, DC—part of the Ascension Health System—where she served as senior vice president for Patient Care Services, overseeing nursing, pharmacy, respiratory, cardiac diagnostic and the sleep lab. She has been awarded fellowships in the Robert Wood Johnson Nurse Executive Program and the Johnson and Johnson Wharton Program in Management for Nurse Executives, and she is the recipient of numerous grants from a variety of funding sources, including Health Resources and Services Administration (HRSA).

## SCHWARTZ CENTER HONORS MGH SOCIAL WORKER

The Kenneth B. Schwartz Center this year named Barbara Moscovitz, MSW, LICSW, the winner of its ninth annual Compassionate Caregiver of the Year Award. She is the first social worker to earn the honor. The Center established the award in 1999 to recognize Massachusetts caregivers who display extraordinary compassion in caring for patients.

Moscovitz serves as the coordinator of Geriatric Social Work in the MGH Geriatric Medicine Unit; directs MGH Senior HealthWISE, a community benefit program that reaches out in countless ways to low-income and frail elderly in neighborhoods around MGH; and is in the beginning stages of creating the MGH Family Caregiver Support Center.

The daughter of an Alzheimer's patient under Moscovitz's care describes their family's social worker as being a lifeline. "She gave my mother such peace and helped our family find joy and connection during such a difficult time in our lives. She taught me life lessons that stay with me still: living in the moment, being present and understanding that even the smallest acts of kindness can make a difference."



# Now is the time.

MARTIN LUTHER KING, JR.



*OR Nurses Honored: In a special "Salute to Nurses" supplement published in May, The Boston Globe honored a team of "core" nurses from MGH Operating Room (OR) 36, the hospital's burn OR. The honorees were selected from more than 200 nominees from throughout New England. Pictured (l-r) are Terry Leddy-Fitzgerald, RN; Elizabeth Viano, RN; Ann Doig, RN; and Linda Bracey, RN.*

## FIRST DIRECTOR OF NURSING RESEARCH APPOINTED



This year, Dorothy A. Jones, RN, EdD, FAAN, became the first director of The Yvonne L. Munn Center for Nursing Research. Dr. Jones is widely regarded as a prominent figure within the nursing research world. She has published and presented extensively, both nationally and internationally; is a professor of Adult Health Nursing at the William F. Connell School of Nursing at Boston College; and most recently served as a visiting professor at the University of Navarra in Pamplona, Spain.

No stranger to the MGH, Jones was first awarded staff privileges as a nurse scientist in the MGH Department of Quality Assurance, Research and Staff Development in 1988. Beginning in 2000, she worked as a senior nurse scientist, continuing her cultivation of nursing research and scholarship throughout the MGH Department of Nursing.

She set a fast pace for the Munn Center this past year, identifying the infrastructure and resources required to support nursing research at MGH and facilitating, implementing and evaluating a variety of innovative initiatives, including the launch of a Nurse Scientist Advancement Model for doctorally prepared nurses.

## VITAL SWALLOW SCREEN TOOL VALIDATED

Patients with neurological disorders, such as stroke or traumatic brain injury, often have swallowing problems related to the mouth or throat. This puts them at risk for aspiration and aspiration pneumonia. The mortality rates associated with this particular complication are quite high, particularly among stroke patients. In order to reduce their risk, it is critical to identify these patients as early in their hospitalization as possible.

This year, the MGH Department of Speech, Language & Swallowing Disorders introduced an important swallow screening tool that has now been validated for use by staff at the bedside. The screening can quickly and accurately determine whether newly admitted patients are at risk for aspiration before they are given food, fluids or medication by mouth. Patients who fail the screening test can then be referred to a speech-language pathologist for a complete evaluation.

The tool has been introduced on the MGH inpatient neuroscience units, which treat patient populations at higher risk for aspiration. A web-based training module that can be accessed via CD or the hospital's intranet ensures that nurses and physicians are properly trained to use this screening tool.



Only 9.7 percent of the nearly 2 million registered nurses in the US are minorities ... at MGH that rate is 9 percent.

#### STUDENT NURSE FELLOWSHIP

Stevenson Morency, a nursing student at the University of Massachusetts, Amherst, became the first recipient of the Hausman Student Nurse Fellowship. Funded by a donation from MGH patient Margaretta Hausman and established by the PCS Diversity Program, the fellowship program is designed to expand the diversity of the MGH nursing staff to better reflect the patient population and the population of the community as a whole. The fellowship gives recipients an opportunity to work with a minority mentor while developing essential skill sets needed to thrive in the workplace setting.

While at MGH, Morency spent ten weeks rotating between several patient care units, observing various roles and contributing to the delivery of care as possible. He shared that the fellowship proved a great way to gain exposure to different areas of nursing and learn to address particular challenges that may arise from being a minority nurse.

The Hausman Student Nurse Fellowship was created when Hausman noticed a need for increased diversity of the nursing staff. She wondered how the hospital might more effectively attract staff from various backgrounds to better serve their diverse patient population.

“We all find comfort being in familiar surroundings, interacting with people with whom we share something in common,” said Hausman. “This can be especially true when we’re at our most vulnerable.”

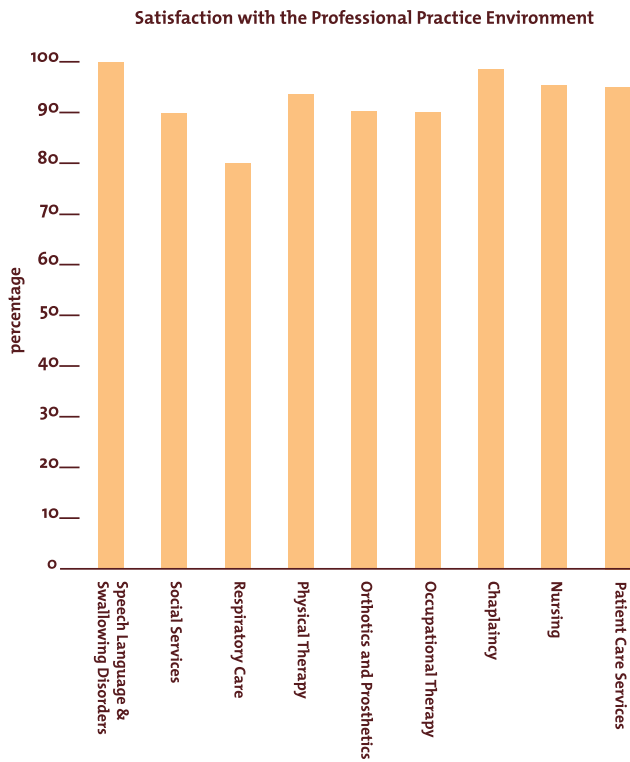
#### FACTS & FIGURES

Inpatient Beds	907
Admissions	46,748
Surgical Procedures	33,575
Length of Stay (days)	5.82
Observation Admissions	3,707
Occupancy	86.0%
Outpatient Visits	1,402,961
MGPO Visits	592,970
Clinic Visits	436,609
Health Center Visits	296,515
Emergency Department Visits	76,867

#### STAFF IN PCS

	Total	New Hires
Nursing	4,700	761
Chaplaincy	22	3
Occupational Therapy	38	11
Orthotics/Prosthetics	8	0
Physical Therapy	212	66
Respiratory Care Services	105	23
Social Services	126	15
Speech, Language & Swallowing Disorders	41	9
Combined Total	5,252	888





*PCS conducts a Staff Perceptions of the Professional Practice Environment Survey every 18 months obtain feedback from direct-care staff. The feedback is used to identify opportunities to improve the practice environment for clinicians.*

*This year's response rate of 61 percent was the highest ever, with an overwhelming 92 percent of respondents reporting being satisfied or very satisfied with the work environment at MGH.*



## TRANSFORMING CARE

The American Organization of Nurse Executives (AONE) announced this summer that MGH was selected to participate in a nationwide two-year Transforming Care at the Bedside (TCAB) project to improve patient care. Originally launched in 2003 by the Robert Wood Johnson Foundation and the Institute for Healthcare Improvement, 68 hospitals nationwide—six in Massachusetts—were selected to participate in Phase Three of the project. MGH is the only adult academic medical center in Massachusetts participating.

TCAB is a national program that engages nurses as leaders in driving care improvements at the bedside. The program provides nurses with tools and training to lead to improvements in the quality and safety of patient care on medical and surgical units, to increase the vitality and retention of nurses, and to improve the effectiveness of the entire care team. Nurses are positioned to develop interventions and design new processes that improve care and lead the delivery of care.

White 10 General Medicine, under the leadership of nursing director Amanda Stefancyk, RN, MSN, MBA, serves as the central TCAB site at MGH, and White 9 General Medicine, led by Sara Macchiano, RN, MS, MBA, is the project's control unit. Barbara Blakemey, RN, MS, FAAN, serves as the overall leader of the project, which is co-sponsored by The Center for Innovations In Care Delivery and Medical Nursing and will be ongoing through August 2009.

To affect the quality of the day, *that is the highest of the arts.*

HENRY DAVID THOREAU



### OT, PT AND HMS

In 2007, the MGH Occupational Therapy (OT) and Physical Therapy (PT) departments created a new observational learning experience for 44 first-year Harvard Medical students enrolled in “Patient-Doctor 2,” their first course in physical examination; the focus was on the musculoskeletal and neuro-muscular systems.

Through a new course enhancement, this year’s class became the first to partner with physical and occupational therapists as they cared for patients at MGH. The goal was to provide the medical students with opportunities for direct observation of physical therapy or occupational therapy examination procedures while educating them about the role of PT or OT in the acute care inpatient and outpatient settings.

The experience proved a big success and an eye-opener for the students, as one shared, “I didn’t understand how much interaction with the rest of the team took place around the patient’s treatment plan.” Another student added, “The level of detail of the musculoskeletal examination was amazing to watch.”

Based upon the enthusiastic feedback from the students, the Harvard program plans to continue the interdisciplinary collaboration with PT and OT to build these skills among future physicians.

### HAVEN CELEBRATES SERVICE AT TEN YEARS

HAVEN (Helping Abuse and Violence End Now)—Social Services’ domestic violence advocacy program—celebrated its ten-year anniversary in 2007. The launch of a new education and outreach campaign, titled “Is Your Relationship Affecting Your Health?” was a centerpiece of the celebration. Focusing on the health consequences of living with abuse, the campaign addresses the needs of victims and survivors, as well as caregivers, as they strive to improve the clinical response to domestic violence in the healthcare setting.

Since its inception, HAVEN has served more than 4,000 patients, employees, visitors and family members whose lives have been impacted by intimate-partner abuse. According to its mission, “HAVEN works as part of the broader movement to end intimate-partner abuse by improving and enhancing our healthcare response to patients, employees and community members who have been impacted by abuse.”

### FIRST NURSING RESEARCH EXPO HELD

The 2007 Nursing Research Expo featured interactive poster displays, opportunities for research consultation, educational booths and exhibits. Approximately 1,100 MGH staff and visitors attended this first-time offering.

Educational booths featured internal and external resources that support nursing research, such as the Nursing Research Committee, The Yvonne L. Munn Center for Nursing Research, the Clinical Research Program, the General Clinical Research Center, Sigma Theta Tau International and the Treadwell Library.

Through interactions with research investigators, posters came alive. Staff were eager to hear the clinical origins of studies and their applicability to their own nursing practice. Nurses from throughout MGH, including those in the Department of Nursing, MGH Institute for Health Professions, the MGH health centers, ambulatory practices, and as far away as the Clark House in Westwood, came to discuss clinical issues and research questions with doctorally prepared nursing experts.

The aim is that this new networking opportunity will fuel new research studies and ongoing mentorships with consultants and/or others identified through the event.



### LATINO NURSES DAY

This year, the Patient Care Services Multicultural Nursing Committee (MCN) marked a major milestone, hosting its first annual Latino Nurses Day. The MCN is comprised of nurses and administrators actively engaged in community outreach. The group provides mentorship and support to multicultural nurses and helps candidates navigate the obstacles encountered by clinicians educated in other countries as they try to become nurses at MGH. The inaugural event offered Latino clinicians within MGH Patient Care an opportunity to share experiences, discuss the importance of mentoring and reach out to other Latino members of the MGH community. Pictured (l-r) are Noelia Goytizolo; Claribell Diaz, RN; Kathleen Myers, RN; Yulhader Revere, RN; and Paula Restrepo, RN.

### JEREMY KNOWLES NURSING PRECEPTORS PROGRAM

Last spring, Jeremy R. Knowles, PhD, awoke in the Medical ICU at MGH with no memory of the prior five weeks. He had been lying unconscious due to pneumonia and sepsis, a result of a weakened immune system following chemotherapy treatments for prostate cancer.

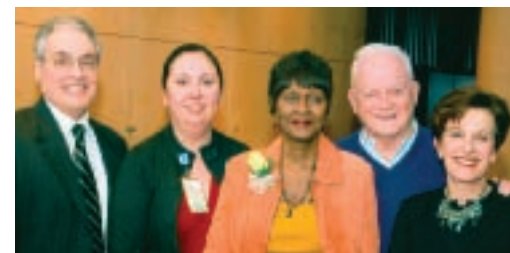
As his wife and children welcomed him back and filled in the blanks, they shared many stories, particularly those of the nursing staff's ongoing concern, care and attention, using a lengthy string of superlatives.

Timing being everything, Knowles, a Harvard University professor of biochemistry and former dean of Harvard's Faculty of Arts and Sciences, had recently retired from the board of Corning, Inc. When the board asked him to select a charity to which it would allocate a gift in honor of his years of service, he recalls, "My choice was obvious."

The resulting Corning gift of \$200,000 will establish the Jeremy Knowles Nursing Preceptor Program to fund the mentoring of new graduate nurses by experienced clinical nurses, passing valuable years of practice and experience on to the next generation of caregivers.

"As a biochemist, I might have imagined myself giving to research or a promising new drug," Knowles says. "But my experience at MGH showed me that what comes after the medicine and treatment is so critical."

Sadly, this spring Knowles lost his battle with cancer, but his gift will live on through the vital nursing preceptor program he helped launch.



Knight award recipient Edna Gavin (center), is pictured with (l-r) nursing director Tony DiGiovine, RN, BSN, BA; associate chief nurse Jackie Somerville, RN, PhD(c); award benefactor Mr. Norman Knight; and senior vice president for Patient Care Jeanette Ives Erickson, RN, MS, FAAN

### INAUGURAL KNIGHT SUPPORT EXCELLENCE AWARD

This year, Edna Gavin, patient care associate in the Bigelow 13 Burn Unit, became the first recipient of an important new honor for Patient Care Services, The Norman Knight Clinical Support Excellence Award. Gavin was recognized for embodying this new award's three criteria: patient advocacy, commitment to quality patient care, and compassion and caring.

Gavin began her career at MGH in 1969, and today is a highly respected member of the Burn Team, with clinicians and colleagues in virtually every role seeking her input about patients and their care. Tony DiGiovine, RN, BSN, BA, nursing director for the Transplant, Burn, Plastic and Reconstructive Surgery Unit, best summed up Edna's contributions. "When patients return to the Burn Clinic, it's Edna they seek out, most saying, 'I couldn't have made it without her,'" he said. "Having worked with Edna for 20 years, I can honestly say the same: 'I couldn't have done it without her.'"

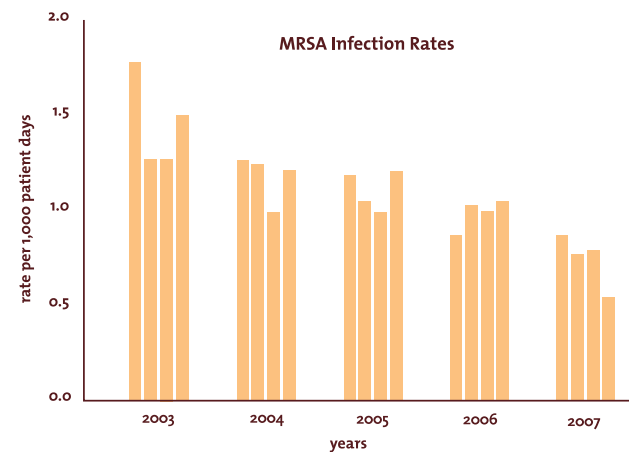
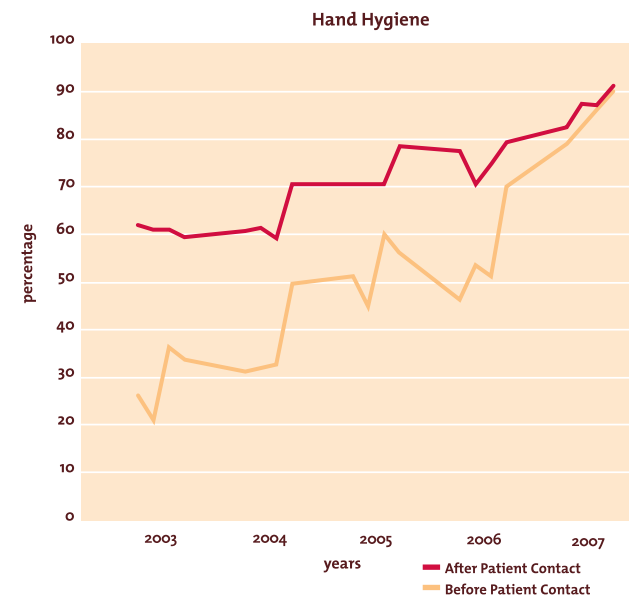
There is *always* a better way. THOMAS EDISON

#### HIGH FIVE FOR HAND HYGIENE

In 2002, the Centers for Disease Control changed its guidelines for hand hygiene, calling for altering practice nationwide. Educating staff and changing their behavior continues to pose a big challenge to all hospitals, where the environment is fast-paced and practice is engrained.

This year, MGH set a bold goal of achieving a 90 percent compliance rate with the CDC guidelines hospitalwide—across all disciplines and role groups. By the end of November, that high mark was realized, with 90 percent of staff disinfecting their hands before contact with the patient or the patient's environment, and 92 percent disinfecting after contact. These results are believed to be among the best hospital hand hygiene compliance rates in the country.

While good hand hygiene practices alone cannot fully protect patients from harmful infections, the improved practice has had a profound impact. Since 2003, compliance rates before contact have gone from 29 to 90 percent, and after contact has jumped from 62 to 93 percent. At the same time, a significant and sustained decrease in the rate of patients with hospital-acquired methicillin-resistant *Staphylococcus aureus* (MRSA) has also been observed. Between 2002 and 2007 the rate was cut by over half, despite a greater than twofold increase in the number of patients who arrive at MGH with MRSA.



If your actions inspire others to dream more, learn more,  
do more and become more, *you are a leader.*

JOHN QUINCY ADAMS

#### DIAZ EARNS GONZALEZ AWARD

Claribell Diaz, RN, staff nurse on the White 6 Orthopaedics Unit, and David Marquez of Police and Security and Outside Services, received the 2007 Ernesto Gonzalez Award for Outstanding Service to the Latino Community. The award is given annually to honor MGH employees who have made significant contributions to the experience of Latino patients, families and the MGH community at large.

Accepting the award before a standing-room-only crowd in the Thier Conference Room, Diaz told of her journey to become a nurse and her desire to answer the need for more Latino nurses in the Boston area. She said, “We have only scratched the surface in revealing what the Latino people can do and the value we bring to the healthcare community. Thank you for inspiring me. I am proud to be a Latino nurse at MGH.”



#### RN RESIDENCY PROGRAM DEVELOPED

The number of older US adults is expected to double by 2030, increasing the demand for nurses who have specialized knowledge in the care of older adults with chronic conditions and end-of-life needs. At the same time, the number of registered nurses in the US is shrinking, as aging nurses are leaving bedside practice.

In 2007, the US Department of Health and Human Services awarded Edward Coakley, RN, MEd, MA, MSN, director emeritus, The Center for Innovations in Care Delivery, a \$650,000 grant to support an innovative RN Residency Program: Transitioning to Geriatrics and Palliative Care. The goal is twofold: improve the nursing care delivered to older patients and extend the careers of experienced nurses at the bedside.

Throughout the next three years, a nine-month RN Resident Program will provide advanced education in geriatrics and palliative care to 45 RNs who have two to five years of medical/surgical nursing experience. A four-month RN Preceptor Program will enroll 45 RNs—age 45 and above—providing specialty education in geriatric and palliative care and grooming them to serve as clinical preceptors or mentors for the nurse residents.

As our aging population continues to place increased demands on the healthcare system, novel programs that leverage years of experience and newly acquired expertise will be vital to meeting the need of our patients as well as our nursing staff.

## INNOVATIVE ANTICOAGULATION PROGRAM

Once patients leave the hospital on anticoagulants, the ability of healthcare providers to fine-tune dosing and the patient's ability to stick to the treatment plan can prove challenging. In 2007, Health Workforce Solutions through a Robert Wood Johnson Foundation grant selected the MGH Anticoagulation Management Service (AMS) as an innovative care delivery model that seamlessly cares for these patients.

Outpatient service actually begins in the hospital. A primary nurse is assigned to every anticoagulation patient and becomes accountable for that patient's initial assessment and ongoing plan of care. Immediately upon the patient's discharge, the AMS nurse begins working with health providers in the patient's community, monitoring the patient's anticoagulation with the immediate goal of managing the dosing. Once in the appropriate therapeutic range, the AMS nurse transitions the patient into a long-term maintenance program.

AMS nurses are automatically notified whenever one of their patients is admitted or discharged from the hospital. Because the nurse has an ongoing relationship with the patient and detailed knowledge about their care, this instantly puts the patient, nurse and physician all on the same, real-time page—reducing the potential for medical errors or adverse events. In-depth knowledge of the patients and their care is critical to the program's success.

AMS currently provides long-term outpatient anticoagulation care to some 4,000 MGH patients.

## EXTENDING OUR MISSION

Two years ago, Thomas Burke, MD, now director of the MGH Center for Global Health (CGH), gave a talk on global health at Harvard's Kennedy School of Government. Sitting in the audience was the First Lady of Zambia, an African country in the midst of a maternal and child health crisis. Following the presentation, she described her country's dire situation to Burke and asked if he could help. He knew he had to do something.

At a time when medical advances abound, 11.6 million mothers and children in Zambia remain near the bottom of the world's health indices. The life expectancy in Zambia is only 40 years. Thousands of women are dying during childbirth, and an alarming number of Zambian babies are dying before their fifth birthdays.

Recently, thanks to major grants from the Lynch, John and Katie Hansen Family and Cunningham Family foundations, the CGH launched the Maternal and Infant Health Initiative (MIHI) in Zambia. The program is working to improve the lives of women and babies within the country's Central Province, in the northern Kapiri Mposhi District, which has a population of 300,000.

The effort involves several long-term activities, including creating an advanced training and continuing education infrastructure for Zambian nurse midwives; upgrading targeted health and nonhealth facilities, such as modern birthing centers and "waiting houses" where expectant mothers can stay prior to delivery; and developing transportation strategies to increase access to quality care.

Already the program is saving lives.



*An MGH-led Maternal and Infant Health Initiative in Zambia is already saving lives.*







## PROFESSIONAL ACHIEVEMENTS • awards

### STATE AND REGIONAL

**Linda Bracey, RN**

Operating Room

*Boston Globe "Salute to Nurses" Award*

**Diane Carroll, RN, PhD, FAAN**

Yvonne L. Munn Center for Nursing Research

**Ellen Mahoney, RN, DNS, FGSA**

Yvonne L. Munn Center for Nursing Research

*Clinical Research Award, Alpha Chi Chapter,*

*Sigma Theta Tau International*

**Ann Doig, RN**

Operating Room

*Boston Globe 2007 "Salute to Nurses" Award*

**Jeanette Ives Erickson, RN, MS, FAAN**

Patient Care Services

*President's Award, Massachusetts Association of*

*Registered Nurses*

**Dorothy Jones, RN, EdD, FAAN**

Yvonne L. Munn Center for Nursing Research

**Deborah Washington, RN, MSN, PhD**

Patient Care Services Diversity

*New England Regional Winners,*

*Nursing Spectrum Excellence Awards*

**Therese Leddy Fitzgerald, RN**

Operating Room

*Boston Globe 2007 "Salute to Nurses" Award*

**Sally Millar, RN, MBA**

PCS Informatics, Patient Advocacy

*Massachusetts Organization of Nurse Executives*

*Partnership Award*

**Donna Perry, RN, PhD**

The Institute for Patient Care

*Distinguished Dissertation Award, William F.*

*Connell School of Nursing at Boston College*

**Elizabeth Viano, RN**

Operating Room

*Boston Globe 2007 "Salute to Nurses" Award*

### PATIENT CARE SERVICES

**Theresa Adjan-Vallen, RN**

Emergency Department

*Jean M. Nardini, RN, Nurse of*

*Distinction Award*

**Mary Billingham**

Central Resource Team

*The Anthony Kirvilaitis Jr. Partnership*

*in Caring Award*

**Ann Marie O'Donnell**

Central Resource Team

*The Anthony Kirvilaitis Jr. Partnership*

*in Caring Award*

**Kathleen Carr, RN, MSN, MBA**

Cardiac Intensive Care

*Norman Knight Preceptor of Distinction Award*

**Mary Jo Gonzales, RN, NP**

Pediatric/Hematology

*Marie C. Petrilli Oncology Nursing Award*

**Kathleen Killough, RN, BSN**

Orthopaedics

*Marie C. Petrilli Oncology Nursing Award*

**Corrina Lee, RN**

Respiratory Acute Care

*Stephanie M. Macaluso, RN*

*Excellence in Clinical Practice Award*

**Jane Loureiro, PT, MS, CLT**

Physical and Occupational Therapy

*Stephanie M. Macaluso, RN*

*Excellence in Clinical Practice Award*

**Paula Nelson, RN**

Labor and Delivery

*Stephanie M. Macaluso, RN*

*Excellence in Clinical Practice Award*

**Angela Sorge-McColgan, RN**

Cardiac

*Stephanie M. Macaluso, RN*

*Excellence in Clinical Practice Award*

**Staci Quinlan, RN**

Newborn Intensive Care Unit

*Orren Carrere Fox Award for Newborn*

*Intensive Care Unit Caregivers*

### MGH

**Penelope Herman, RN**

Obstetrics and Gynecology

**Susan Cahill, RN**

Labor and Delivery

**Jennifer Bernard, RN**

Labor and Delivery

*Molly Catherine Tramontana Award*

*for Outstanding Service and Patient Care*

**Jessica Jacavage, PT, MSPT**

Physical and Occupational Therapy

*Family Centered Care Award, MassGeneral*

*Hospital for Children*

### NATIONAL

**Constance Dahlin, RN, APRN, BC, PCM**

Palliative Care Service

*Advanced Practice Nurse of the Year,*

*National Board for Certification of*

*Hospice and Palliative Care*

**Dean Hess, PhD, RRT, FAARC, FCCP**

Respiratory Care Services

*Robert H. Miller, RRT, Award, National*

*Board for Respiratory Care*

**Dorothy Jones, RN, EdD, FAAN**

Yvonne L. Munn Center for Nursing Research

*Rose and George Doval Education Award, New*

*York University College of Nursing*

**MGH Neuroscience Intensive Care Unit**

*Outstanding Chapter of the Year Award,*

*American Association of Neuroscience Nurses*

**Norine O'Malley-Simmler, RN, BSN**

Cardiac Intensive Care Unit

*Circle of Excellence Award, American*

*Association of Critical-Care Nurses*

## PROFESSIONAL ACHIEVEMENTS • presentations

### STATE AND REGIONAL

**Joanna Akladiss, MS, OTR/L, CHT**

**Katherine Russo, OTR/L, CHT**

Splint Lab

*Tufts University, Medford, MA*

**Anne-Marie Barron, RN, PhD, CNS-BC**

Caring and Meaning: The Transformative Power of Compassion

*Cambridge Hospital, Cambridge Health Alliance*

Important Conversations on Difficult Topics

*Caring for Aging Parents Series, First Parish, Milton, MA*

**Anne-Marie Barron, RN, PhD, CNS-BC**

**Constance Dahlin, RN, APRN, BC, PCM**

Harlene Caroline, RN, MS

Dialogue on Caring and Comfort in the

Presence of Suffering at the End of Life

*Theta Chapter, Sigma Theta Tau, Quincy, MA*

**Elizabeth Bridge, MS, OTR/L**

Interactive Reasoning in Occupational Therapy

*Tufts University, Medford, MA*

**Deidre Buckley, RN, NP**

Brain Aneurysm Awareness: Outcomes

of Aneurysmal Subarachnoid Hemorrhage

Neuroscience Nursing: Innovations

Across the Continuum

*Boston Chapter of the American Association of*

*Neuroscience Nurses Conference, Randolph, MA*

**Gae Burchill, MHA, OTR/L, CHT**

**Suzanne Curley, MS, OTR/L, CHT**

Anatomy of Flexor and Extensor Tendons

Management of Flexor Tendon Injuries

Flexor/Extensors – Management

of Common Injuries

Splinting for Flexor and Extensor Injuries

*Tufts University, Boston, MA*

**Virginia Capasso, RN, PhD, APRN, BC**

Advances in Wound Care: What Really Works?

*Updates and Advances in Vascular and Endovascular Surgery, Boston, MA*

Case Based Workshop: Skin Ulcer

Management with Demonstration

Primary Care Internal Medicine:

Principles and Practice

*Harvard Medical School, Cambridge, MA*

Taking the First Steps...

Toward Your First RN Job

*Northeastern University Nursing Alumni*

*Association, Boston, MA*

Theory Panel – A Dialogue on Creating a

Community of Scholars in Relation to

Health as Expanding Consciousness

*Eastern Nursing Research Society, Providence, RI*

Update on Wound Care

*Harvard Medical School Vascular Surgery*

*Conference, Boston, MA*

**Diane Carroll, RN, PhD, FAAN**

Quality of Life in Implanted Cardioverter

Defibrillator Recipients: The Impact

of a Device Shock

*Sixth Annual Cardiovascular Nursing Conference,*

*North Shore Medical Center, Salem, MA*

**Daniel Chipman, BS, RRT**

New Modes of Ventilation

*22nd Annual Convention and Exhibition, Rhode*

*Island Society for Respiratory Care, Newport, RI*

Alternative Modes of Ventilation

*5th Annual Respiratory Conference, Cape Cod*

*Healthcare, Falmouth, MA*

Neonatal Intubation by RRTs – Three Years

Experience at Massachusetts General Hospital

*MSRC 30th Annual Meeting, Massachusetts*

*Society for Respiratory Care, Sturbridge, MA*

**Debra Christofi, RN**

**Jane Harker, MS, BSN, RN, CGRN**

**Ellen Silvius, BSN, RN**

Nursing Considerations in Endoscopic

Ultrasonography

*Endoscopic Ultrasonography LIVE-2007,*

*Boston, MA*

**Kathy Clair-Hayes, LICSW**

The Heart of the Matter, A Child's Experience

and the Developmental Impact of Cancer

*Strengthening the School's Response*

*When a Parent has Cancer Conference*

*Hurricane Voices and the Wellness*

*Community, Waltham, MA*

**Elizabeth Cole, PT, CLT-LANA**

**Casey Hagan, PT, DPT**

Lymphedema Etiology, Signs,

Symptoms and Treatment

*Partners Home Care, Waltham, MA*

**Suzanne Curley, MS, OTR/L, CHT**

Extensor Tendons – Management of Injuries

Extensor Tendon Anatomy –

Maintaining a Balance

*Tufts University, Medford, MA*

Professionalism

*Tufts School of Occupational Therapy,*

*Medford, MA*

**Amy Corveleyn, LCSW**

**Julie Berrett, LICSW**

Being On Your Own with Cancer

Young Adults Living with Cancer Conference,

I'm Too Young for This

*Mass College of Art, Boston, MA*

**Constance Dahlin, RN, APRN, BC, PCM**

The National Consensus Project and

National Quality Forum: Supporting Nursing

to Sustain a Culture of Palliative Care

*Norwood Hospital Nurses Day, Norwood, MA*

Coming 'Round Again:

Methadone at End of Life

*Joint Meeting of Boston Chapter of Hospice and*

*Palliative Nurses Association and the American So-*

*ciety of Pain Management Nurses, Braintree, MA*

**Regina Doherty, MS, OTD, OTR/L**

Ethics Education in the Entry-Level Occupa-

tional Therapy Curricula: A Pilot Study

*Massachusetts Occupational Therapy Association*

*Annual Conference, Westford, MA*

## PROFESSIONAL ACHIEVEMENTS • presentations

**Jean Fahey, RN, MSN, APRN-BC, CCRN, CNRN**

Comfort Care, a Catholic Perspective  
*Catholic Conference of Arlington Parishes Adult Education, St. Camilia's Parish, Arlington, MA*

Primary and Metastatic Brain Tumors  
*Cape Cod Healthcare, Society for Neuroscience, Hyannis, MA*

Neuroscience in a Nutshell, Neurological Anatomy and Physiology, Assessment and Neurological Diseases in the Acute Care Setting  
*Simmons College, Boston, MA*

Neuroscience Intensive Care: Severe Brain Injury, CNS Neoplasms, Stroke and Seizures Acute Stroke Care  
*Hallmark Health, Lawrence Memorial Hospital School of Nursing, Medford, MA*

**Catherine Griffith, RN, MSN, APRN, BC**  
Developing a Community of Scholars:  
Impact on Clinical Practice

*Eastern Nurses Research Society, Session Papers for Examining Professional Nursing Practice, Providence RI*

**Marion Growney, RN, MSN, ACNP**  
Minimally Invasive Spine Surgery: Treatment of Acute Compression Fractures in the Elderly  
*Nurse Practitioner Associates for Continuing Education, North Falmouth, MA*

Treatment of Compression Fractures and Metastatic Spine Lesions  
*Boston Oncology Nurses Society, Boston, MA*

**Carol Harmon Mahoney, MS, OTR/L, CH**  
Fracture Management  
*Tufts University, Medford, MA*

**Jeanette Ives Erickson, RN, MS, FAAN**  
Nursing Now and in the Future  
*Harvard Medical School, Introduction to Business and Management in Healthcare, Boston, MA*

**Marion Jeffries, RN, MSN, APRN-BC, FNP-C**

**Jacqueline Collins, RN, MSN, APRN-BC**  
**Lauren Kattany, RN, MS**  
**Erin Cox, RN, MSN, APRN-BC**  
**Jill Pedro, RN, MSN, APRN-BC**  
Developing a Bedside Teaching Tool to Assist the RN in Educating the Diabetes Mellitus Inpatient  
*National Teaching Institute 2007*

**Lauren Kattany, RN, MS**  
Current Issues in Healthcare Ethics  
*Winston Center for Ethics, Boston College*

**Susan Krupnick, MSN, APRN, BC, CARN**  
**Thomas Quinn, RN, MSN, AOCN**  
Building Partnerships to Address Pain Management in Persons with Addictive Illness  
*Annual Meeting of the Alliance of State Pain Initiatives, Boston, MA*

**Susan Lee, RN, PhD**  
Collaborative Governance Evaluation: Strategies to Improve Understanding  
*Eastern Nursing Research Society, Providence, RI*

**Colleen Lowe, OTR/L, MPH, CHT**  
Sensation and Sensibility  
Repetitive Stress Injuries in the Upper Extremity  
*Tufts University, Medford, MA*

**Kelly Macauley, PT, DPT, GCS**  
APTA: Working for You  
*North Shore Community College, Danvers, MA*

**Bessie Manley RN, MPA/HA**  
Luxury Medicine: When is Healthcare not Healthcare?  
*HealthCare 2007 Excellence, Efficiency and Economics Conference, Yale School of Management, New Haven, CT*

**Cynthia McDonough, RN, LNC, CPSN**  
Rigid Fixation and Perioperative Care of the Facial Reconstructive Patient  
*Northeast Chapter, American Society of Plastic Surgical Nurses, Boston, MA*

**Mary McKenna Guanci, RN, MS, CNRN**  
Increased Intracranial Pressure: Assessment and Management  
*Society for Neuroscience, Neuroscience 2007, Cape Cod Hospital, Hyannis, MA*

**Jackie Mulgrew, PT, CCS**  
**Alison Squadrito, PT, DPT, GCS**  
Management of the Acute Care Patient  
*St. Francis Hospital, Hartford, CT, and South Shore Hospital, Weymouth, MA*

**Georgia Peirce**  
A Culture of Safety: It's a Great Time to be a Librarian in Healthcare  
*Massachusetts Health Sciences Library Network Annual Meeting, Waltham, MA*

**Donna Perry, RN, PhD**  
Transcendent Pluralism and the Transcendental Method: A Progressive Method for Nursing Research  
Lonergan and Human Understanding in the Socio-Political Realm  
*Eastern Nursing Research Society Scientific Sessions Pre-Conference, Providence, RI*

**Monica Pessina, OTR/L, PhD**  
Introduction to Splinting Lecture and Workshop  
*Boston University, Sargent College of Health and Rehab Sciences, Boston, MA*

**Laurel Radwin, RN, PhD**  
Testing the Quality Health Outcomes Model in Cancer Care  
*University of Massachusetts Boston, Boston, MA*

Understanding Patient-Centered Nursing Care  
*Nursing Research and Evidence-Based Practice Day, Boston Medical Center, Boston, MA*

**Todd Rinehart, LICSW**  
Andrew Billings, MD  
Family Goal-Setting in the ICU Setting  
*Harvard Medical School Department of Continuing Education, Center for Palliative Care, Boston, MA*

**Ellen Robinson, RN, PhD**  
Clinical Trials and Nursing: A Dialogue on Patient Education, Access and Ethics  
*Boston Oncology Nursing Society, The Dana Farber/Harvard Cancer Center and Simmons College, Boston, MA*

**Ellen Robinson, RN, PhD**

Suzanne Hitchcock-Bryan, RN  
Elizabeth Tracey, RN, PhD  
Martie Carnie  
Margaret Hill, RN, MS  
Nancy Lee, RN, MS  
Clinical Trials and Nursing: A Dialogue on  
Patient Education, Access and Ethics  
*Simmons College, Boston, MA*

**Katherine Russo, OTR/L, CHT**

Combined Injuries of the Upper Extremity  
Dynamic Splinting Lab  
Splint Lab  
Evaluation of the Hand/Upper Extremity  
*Tufts University, Medford, MA*

**Teresa Vanderboom, RN, BSN**

Interventional Neuroradiology: An Overview of  
Stroke Prevention and Treatment Procedures  
Neuroscience Nursing: Innovations Across  
the Continuum  
*Boston Chapter of the American Association of  
Neuroscience Nurses Conference, Randolph, MA*

**Anne Viser, PT, DPT, ATC**

**Lisa Woodbury, ATC**  
Strength and Conditioning for the Female Knee:  
An Injury Prevention Program  
*Cambridge Rindge and Latin High School,  
Cambridge, MA*

**NATIONAL**

**Maura Ament, PT, DPT**

**Frances Behar, PT**  
**Danielle Bushey, PT, MSPT**  
**Diana Czulada, PT, DPT**  
**Jessica Jacavage, PT, MSPT**  
**Benjamin Maschke, PT, DPT**  
**Heather Markham, PT, DPT**  
**Karen McKenna, PT, MS**  
**Jennifer Miraglia, PT, MSPT**  
**Christine O'Donnell, PT, DPT**  
**Sheila Pallotta, PT, MSPT**  
**Poonam Pardasaney, PT, DPT, MS**  
**Angela Perrozzi, PT, DPT**  
**Kristen Quagliariello, PT, MSPT**  
**Zoya Reznik, PT, DPT**

**Kiley Steinriede, PT, DPT**

**Lesia Wilson, PT, DPT**  
Clinical Instructor Training and  
Certification Workshop  
*American Physical Therapy Association,  
Boston, MA*

**Paul Arnstein, RN, PhD**

Challenging Aspects of Evidence-Based  
Pain Management Nursing  
Revisiting Guidelines for Arthritis Pain:  
Safe Use of COX-2 Selective and  
Non-Selective NSAIDs  
*American Pain Society 2007 Meeting,  
Washington, DC*

Optimizing Opioid Therapy: Practice and  
Risk Management Techniques  
*Annual Meeting, American Society for Pain  
Management Nursing, Dallas, TX*

**Katie Binda, LICSW**

**Barbara J. Cashavelly, MSN, RN, AOCN**  
**Kathy Clair-Hayes, LICSW**  
**Karen Donelan, ScD**  
**Elizabeth Alterman, BS**  
**Peter Maramaldi, PhD, MPH, LCSW**  
Preventing Burnout Among Staff Supporting  
Interdisciplinary Teams in an Oncology Center  
*Society for Social Work Research - Bridging Disci-  
plinary Boundaries Conference San Francisco, CA*

**Gae Burchill, MHA, OTR/L, CHT**

Management of the Burned Hand  
*National Burn Conference, San Diego, CA*

**Virginia Capasso, RN, PhD, APRN, BC**

Cynthia Christensen, RN, MSN, CVN, ARNP  
Lillian Henry, RN, MSN, APRN, BC, CVN  
Alternatives to Caring for Home Bound  
Vascular Patients  
*Society for Vascular Nursing Convention,  
Baltimore, MD*

**Diane L. Carroll, RN, PhD, FAAN**

Collaborative Intervention Improves  
Adherence in Cardiac Elders  
*National Association of Clinical Nurse  
Specialists National Conference, Phoenix, AZ*

The Clinical Indications and the Evidence  
for Counseling Implanted Cardioverter  
Defibrillator Recipients  
*17th Annual Conference on Cardiovascular Nurs-  
ing, American Heart Association, Newton, MA*

**Daniel Chipman, BS, RRT**

Alternative Modes of Ventilation  
*5th Annual Fall Educational Symposium, Memorial  
Hermann Texas Medical Center, Houston, TX*

**Edward Coakley, RN, MSN**

Life/Work Planning Processes in Nurses  
50 Years of Age and Older at MGH  
and Two Other Sites  
*Biennial Convention of Sigma Theta Tau,  
Baltimore, MD*

**Mary Susan Convery, MSW, LICSW**

John Findley, MD  
Psychiatrists and Social Work Collaboration:  
Adapting the Biopsychosocial Model to Help  
Burn Patients  
*American Burn Association 39th Annual Meeting,  
San Diego, CA*

**Constance Dahlin, RN, APRN, BC, PCM**

Coding and Billing for MDs and APNs  
*Center to Advance Palliative Care Seminar II  
– Strengthening Your Palliative Care Program: A  
Level II Seminar for Growth and Sustainability,  
Orlando, FL*

Difficult Conversations

*Fox Chase Cancer Center Radiation Care  
Conference, Philadelphia, PA*

MD-RN Communication

*Clinical Practice Forum, Hospice and Palliative  
Nurses Association, Pittsburgh, PA*



## PROFESSIONAL ACHIEVEMENTS • presentations

Practical Management of Patients  
Dying at Home

Promoting Palliative Care Practice Nursing  
*Practical Aspects of Palliative Care, Boston, MA*

Reimbursement and Billing  
*Annual Assembly of the American Academy of Hospice and Palliative Medicine and the Hospice and Palliative Nursing Association, Salt Lake City, UT*

**Joanne Empoliti, RN, MSN, APRN, BC**  
**Kathleen Myers, RN, MSN APRN, BC**  
Safe Hand-offs of Patients: A JCAHO  
National Safety Goal

*Annual Congress of the National Association of Orthopaedic Nurses, St. Louis, MO*

**Tessa Goldsmith, MA, CCC-SLP**  
Impact of Lymphedema on Swallowing Function  
in Patients with Head and Neck Cancer  
*Truman Medical Center Lakewood,  
Kansas City, MO*

Management of Swallowing and Voice in  
Patients with Head and Neck Cancer  
*Baylor All Saints Medical Center,  
Fort Worth, Texas*

**Tessa Goldsmith, MA, CCC-SLP**  
**Audrey Cohen, MS, CCC-SLP**  
**Paige Nalipinski, MA, CCC-SLP**  
**Carmen Vega-Barachowitz, MS, CCC-SLP**  
Validation and Implementation of the MGH  
Swallowing Screening Tool  
*American Speech-Language and Hearing Association,  
2007 Annual Convention, Boston, MA*

**Jane Harker, RN, MS, BSN, CGRN**  
ERCP: Up the Duct Without a Paddle  
*33rd Annual Course, Society of Gastroenterology  
Nurses and Associates, (SGNA), Baltimore, MD*

Sedation and Monitoring: an Advanced  
Endoscopy Series Course  
*American Society of Gastrointestinal  
Endoscopy, Chicago, IL*

Jeanne Hathaway, MD  
**Denise Whall-Strojwas, RN**  
Facing Cancer and Partner Abuse:  
Patients' Experiences and Recommendations  
for Healthcare Providers  
*Family Violence Prevention Fund's National  
Conference on Healthcare and Domestic Violence  
San Francisco, CA*

**Dean Hess, PhD, RRT, FAARC, FCCP**  
Anatomy of the Ventilator  
*George Washington University, Cardiothoracic  
Surgical Critical Care 2007, Washington, DC*

Interdisciplinary Management of the  
Patient With a Tracheostomy or Ventilator  
*American Speech-Language-Hearing  
Association, Boston, MA*

Mechanical Ventilation for the Patient  
with COPD

Noninvasive Positive Pressure Ventilation  
Workshop; Noninvasive Ventilation  
Should be Used for All Forms of Acute  
Respiratory Failure

Pharmacological Prevention of VAP  
Patient-Ventilator Dys-synchrony  
*53rd Annual Meeting of the American  
Association for Respiratory Care, Orlando, FL*

Navigating the Course of Aerosol Delivery  
– the Road Less Traveled ...or More  
*American College of Allergy, Asthma, and  
Immunology, Dallas, TX*

Respiratory Care in 2020  
Breath-Actuated/Conserving Nebulizers are Best  
*Cleveland Clinic 2007 Lung Summit,  
Cleveland, OH*

**Sandra Hession, RN, BSN, CGRN**  
**Janet King, RN, CGRN**  
Colonic and Antroduodenal Motility: The Role  
and Responsibilities of the Clinical Nurse  
*33rd Annual Course, Society of Gastroenterology  
Nurses and Associates, Baltimore, MD*

**Ann Jampel, PT, MS**  
Transforming Clinical Education: Creating  
Academic and Clinical Partnerships  
*American Physical Therapy Association, Education  
Department, Alexandria, VA*

**Elizabeth Johnson, MSN, RN,**  
**AOCN, AOCNS**  
Intraperitoneal Chemotherapy  
and Ovarian Cancer  
*Oncology Nursing Society 32nd Annual  
Congress, Pre-Congress Instructional Session  
Las Vegas, NV*

**Robert Kacmarek, PhD, RRT, FCCM,**  
**FCCP, FAARC**  
Lung Recruitment: How, When, and to  
Whom: Determinants of Efficacy, and The  
NIV Mode on Critical Care Ventilators  
*Society of Critical Care Medicine Annual  
Meeting, Orlando, CA*

Lung Recruitment and PEEP  
Evidence-Based Medicine and the RT  
*Annual Meeting of the Alaska Society for  
Respiratory Care, Soldotna, AK*

Physical Rationale and Methods  
of Lung Recruitment  
*Annual Meeting of the American Thoracic Society,  
San Francisco, CA*

Tidal Volume Initially Should Not be  
6 mL/kg in Virtually All Patients With  
Respiratory Failure  
Recruitment Maneuvers Should Routinely be  
Used in the Management of ALI and ARDS,  
and Critical Hypoxemia  
*53rd Annual Meeting of the American Association  
for Respiratory Care, Orlando, FL*

**Adele Keeley, RN, MA**  
Merging Palliative Care in the  
Critical Care Unit  
*Institute for Family-Centered Care  
Conference, Portland, ME*

**Mary Larkin, RN, MS, CDE**  
**Virginia Capasso, RN, PhD, APRN, BC**  
Psychological Insulin Resistance: Measuring  
Barriers to Insulin Use  
*American Diabetes Association,  
Scientific Session, in Chicago, IL*

**Susan Lee, RN, PhD**  
From Concept to Institutional Change: Collab-  
orative Governance Members Make a Difference  
*Center for American Nurses LEAD Summit 2007,  
San Antonio, TX*

**Janet Madigan, RN, MS, CNA-BC**  
Policy or Politics: Will Reason Prevail?  
The Massachusetts Staffing Ratio Debate  
*American Organization of Nurse Executives 40th  
Anniversary Annual Meeting, Washington, DC*

**Peter Maramaldi, PhD, MPH, LCSW**  
Cancer Screening Barriers for Community-  
Based Hispanic and Caucasian Elders  
*53rd Annual Conference of the Council of  
Social Work Education, San Francisco, CA*

**Cynthia McDonough, RN, LNC, CPSN**  
Perioperative Nursing Considerations:  
Breast Reconstruction After Mastectomy  
Perioperative Nursing Principles of  
Autologous Flap Surgery  
*33rd Annual Convention, American Society of  
Plastic Surgical Nurses, Baltimore, MD*

**Mary McKenna Guanci, RN, MS, CNRN**  
Brain Freeze: Normothermia & Hypothermia  
in the ICU  
*Neuroscience Update Conference, Washington  
Hospital Center, Washington, DC*

Donation After Cardiac Death:  
Changing the Environment of Care  
*Emory Hospital, Atlanta, GA*

Hyperglycemia and Implications for the  
Neuroscience Patient  
*Emory Hospital, Atlanta, GA*

Hyperglycemia: Concerns for the  
Neuroscience Patient  
*Hershey Pennsylvania Medical Center, Hershey, PA*

**Mary McKenna Guanci, RN, MS, CNRN**  
**Ann Letendre, RN**  
Conversations at End of Life –  
Organ Donation  
*American Association of Neuroscience Nurses  
National Conference, Orlando, FL*

**Theresa Michel, PT, DPT, MS, DSc, CCS**  
Task Force for Development of Exercise and  
Physical Activity Guidelines based on the Best  
Available Evidence for Individuals with Type II  
Diabetes and Pre-Diabetes  
*American Physical Therapy Association,  
Alexandria, VA*

**Jackie Mulgrew, PT, CCS**  
**Alison Squadrito, PT, DPT, GCS**  
Management of the Acute Care Patient  
Englewood Hospital, Englewood, NJ  
Good Samaritan Wellness Center,  
Downers Grove, IL  
Holy Cross Hospital, Silver Spring, MD  
St. Edwards Hospital, Naperville, IL  
St. Peters Hospital, Albany, NY  
*University of Wisconsin Hospital and Clinics,  
Madison, WI*

**Mary Orencole, RN, MS, APRN**  
The Cost Effectiveness of Remote  
Monitoring for Patients With Heart Failure  
*The Heart Failure Society of America Annual  
Meeting, Washington, DC*

**Poonam Pardasaney, PT, DPT, MS**  
Strong for Life Program for Community-  
Dwelling Senior Citizens  
*Roybal Center for Enhancing Late Life  
Function, University of Illinois, Decatur, IL*

**Kristin Parlman, PT, DPT, NCS**  
The Use of Case Discussions to Facilitate  
Evidence-Based Practice in Acute  
Neurologic Physical Therapy  
*Combined Sections Meeting, American Physical  
Therapy Association, Boston, MA*

**Gayle Peterson, RNC**  
**Susan Lee, RN, PhD**  
Nursing Nirvana: Building a Cutting-Edge  
Work Environment Through Partnerships  
*Center for American Nurses LEAD Summit 2007,  
San Antonio, TX*

**Thomas Quinn, RN, MSN, AOCN, CHPN**  
Opioid Safety  
*5th Annual Detroit Medical Center Pain  
Awareness Symposium, Detroit, MI*

**Jennifer Repper-DeLisi, RN, APRN, BC**  
Development and effective implementation  
of behavioral plans in medical and psychiatric  
management of the behaviorally-challenging  
medical inpatient: An interdisciplinary  
approach. Academy of Psychosomatic Medicine  
*Annual Meeting, Amelia Island, FL*

**Ellen Robinson, RN, PhD**  
Sustaining Care of the Patient in the Context  
of Moral Distress/Futile Treatment  
Complexities in Decision Making for Persons  
with Disabilities Nearing the End of Life  
*14th Annual Collaborative Ethics Conference:  
Ethics of Caring University of California Los  
Angeles, Los Angeles, CA*

**Joseph Roche, RN**  
Various Topics, MGH Trauma and  
Disaster Institute  
*Advanced Disaster Medical Response, Rapid City  
and Sioux Falls, SD, and San Antonio, TX*

**Patricia Rosell, MSW**  
**Elizabeth Miller, MD**  
Feasibility of a Clinic-Based Adolescent  
Partner Violence Intervention  
*Family Violence Prevention Fund's National  
Conference on Healthcare and Domestic  
Violence, San Francisco, CA*

**Linda Steiner, PT, DPT, MS, OCS**  
Train the Trainer Exercise Program  
*Arthritis Foundation, Portland, OR*

Theodore Stern, MD, FAPM  
Rebecca Brendel, MD, JD  
**Karon Konner, MSW, LICSW**  
**Grace Good, RN, APRN, BC**  
**Jennifer Repper-DeLisi, RN, APRN, BC**  
Medical and Psychiatric Management of the  
Behaviorally Challenging Medical Inpatient:  
An Interdisciplinary Approach  
*Academy of Psychosomatic Medicine 54th  
Annual Meeting, Amelia Island, FL*

**Dawn Tenney RN, MSN**  
OR of the Future – Implications for Now;  
and Fixing the Problem of Scarce Personnel  
*American Association of Clinical Directors,  
Phoenix, AZ*

**Dawn Tenney, RN, MSN**  
Transforming the Practice and Work  
Environment for Perioperative Nurses  
*OR Manager, San Diego, CA*

## PROFESSIONAL ACHIEVEMENTS • presentations

Interventional Collaboration...One Organization's Collaboration Between the OR, CATH Lab Interventional Radiology Services to Support the Growth of Interventional Vascular Surgery  
*UHC Perioperative Services Council Meeting, Chicago, IL*

**James Zachazewski, PT, DPT, SCS, ATC**  
Rehabilitation of the Adolescent Athlete's Shoulder  
*Combined Sections Meeting, American Physical Therapy Association, Boston, MA*

Rehabilitation of Knee and Leg Injuries Hip and Groin Injuries; Functional Anatomy and Examination of the Lumbar Spine Core Instability and Stabilization Training  
*American College of Sports Medicine Team Physicians Course, San Diego, CA*

**Bonnie Zimmer, MSW**  
**Elizabeth Speakman, MSW**  
**James Heffernan, MBA**

What about the Men? Opportunities and Challenges of Engaging Men as Allies in the Healthcare Setting  
*Family Violence Prevention Fund National Conference on Healthcare and Domestic Violence, San Francisco, CA*

### INTERNATIONAL

**Dean Hess, PhD, RRT, FAARC, FCCP**  
Aerosol Delivery During Noninvasive Ventilation  
*16th Congress of the International Society for Aerosols in Medicine, Tours, France*

Anatomy of the Ventilator Noninvasive Positive Pressure Ventilation  
*Dongsan Medical Center, Daegu, Korea*

Graphics Monitoring – A Look Into the Lungs VILI – New Insights in Pathology, Implications in Treatment Identification, Quantification, and Management of Auto-PEEP  
*K. R. Hospital, Mechanical Ventilation 2007 Basics and Beyond, Bangalore, India*

Ventilator Modes, Old and New Monitoring Respiratory Mechanics Strategies for Mechanical Ventilation of Patients with Obstructive Lung Disease Prevention of Ventilator-Associated Pneumonia Noninvasive Positive Pressure Ventilation  
*University of Cairo, 7th Pulmonary Medicine Update, Cairo, Egypt*

What is Evidence-Based Respiratory Care and Why Should I Care?  
Advances in Mechanical Ventilation: First Do No Harm  
*Canadian Society for Respiratory Care Annual Congress, Montreal, Quebec, Canada*

**Jeanette Ives Erickson, RN, MS, FAAN**  
**Sheila Burke, RN, BSN**  
**Lin-Ti Chang, RN-BC, MSN, APRN-BC, CCRN**  
**Katherine Fallon, RN, BSN**  
**Angelleen Peters-Lewis, RN, PhD**  
Global Nursing Partnerships for Dealing with the Unexpected: Creativity, Culture and Collaboration  
*International Council of Nurses, Yokohama, Japan*

**Marian Jeffries, MSN, APRN BC, FNP-C**  
**Patricia Connors, MS, CS, NP**  
Communicating Nursing Practice: Common Problems Identified by MGH Staff Nurses and Clinical Nurse Specialists with Comparisons to CNS Throughout the United States  
*European Conference of ACENDIO, Amsterdam, The Netherlands*

**Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**

Closed Loop Ventilation Management of the Ventilator Withdrawal Process  
NIV: Dealing With Leaks Can the Lung be Recruited? Ventilator Settings Must be Added to Definition of ARDS  
Optimal Decremental PEEP  
*27th International Symposium on Intensive Care and Emergency Medicine, Brussels, Belgium*

History of Non-Invasive Mechanical Ventilation Critical Analysis of Mechanical Ventilators  
A Critical Analysis of ARDS Diagnostic Criteria NPPV in Hypoxemic Lung Disease  
*Second International Symposium on Mechanical Ventilation, Sao Paulo, Brazil*

Let's Agree on Definitions for ARE, ALI, and ARDS  
Searching for the Appropriate PEEP  
*12th International Conference on Mechanical Ventilation, Seville, Spain*

Lung Recruitment and the Setting of PEEP  
*Second International Master Course: Acute Respiratory Failure, Rotterdam, Netherlands*

Management of ARDS: Beyond the ARDSnet Protocol  
*Second International Master Course: Acute Respiratory Failure, Rotterdam, Netherlands*

Management of ARDS: Randomized Controlled Trials Lung Recruitment and the Setting of PEEP  
*British Columbia Society for Respiratory Care Annual Education Forum, Victoria, British Columbia, Canada*

Ventilator Management of ALI/ARDS and Lung Recruitment Patient-Ventilator Synchrony and Proportional Assist Ventilation  
*Japan Society of Respiratory Care Medicine Congress, Okayama, Japan*

**Lynda Tyer-Viola, RNC, PhD**  
The Doctoral Forum: A Strategy to Advance Nursing Science in the Clinical Setting  
*Sigma Theta Tau International Research Congress, Vienna, Austria*

**Lynda Tyer-Viola, RNC, PhD**  
Nursing's Social Responsibility for Global Health  
Focused discussion group with Dr. Inge Corless and Dr. Patrice Nicholas  
*Sigma Theta Tau International Research Congress, Vienna, Austria*

## PROFESSIONAL ACHIEVEMENTS • poster presentations

### STATE AND REGIONAL

**Jean Ashland, PhD, CCC-SLP**

**Cheryl Hersh, MA, CCC-SLP**

SLP's Role in Management of Pediatric

Dysphagia and Laryngeal Clefts

*2007 Annual Convention, American Speech-Language and Hearing Association, Boston, MA*

**Angela Ayre, CF-SLP**

Predictors of English Reading Skills in

Spanish-Speaking English Language Learners

*2007 Annual Convention, American Speech-Language and Hearing Association, Boston, MA*

**Anne-Marie Barron, RN, PhD, CNS-BC**

**Amanda Bulette Coakley, RN, PhD**

**Rona Earl, RN**

**Ellen Fitzgerald, RN, MS**

**Elizabeth Johnson, RN, MSN, AOCN**

**Dorothy Jones, RN, EdD, FAAN**

**Mirta Leyva-Coffey, RN**

**Ellen Mahoney, RN, DNS, FGSA**

**Ann O'Sullivan, RN, OCN**

**Jacqueline Somerville, RN, PhD(c)**

**Laura Thorley, RN**

An Exploration of Factors that Facilitate the

Integration of Therapeutic Touch in Nursing

Practice on an Inpatient Oncology and Bone

Marrow Transplant Unit

*Eastern Nursing Research Society, Providence, RI*

**Diane Carroll, RN, PhD, FAAN**

**Sally Rankin, RN, PhD, FAAN**

Collaborative Intervention Improves Adherence

in Cardiac Elders

*19th Annual Scientific Sessions, Eastern Nursing*

*Research Society, Providence, RI*

**Catherine Griffith, RN, MSN, APRN, BC**

**Mary Larkin, RN, MSN, RN, CDE**

**Chelby Cierpial, RN, MSN, APRN, BC**

**Victoria Morrison, RN, PhD, CIC**

**Catherine O'Malley, RN, MSN, CNOR**

**Virginia Capasso, RN, PhD, APRN, BC**

MGH Nursing Research Committee,

Develops Innovative Subcommittee

Structure for Succession Planning

*Magnet Session, Eastern Nurses Research Society,*

*Providence RI*

**Cynthia Ann LaSala, MS, APRN**

Impacting Patient Care Outcomes and the

Role of the Clinical Nurse Specialist, (CNS):

Evaluation of Staff Nurse Perceptions of High

Frequency Patient Problems

*2007 Spring Quarterly Meeting, Massachusetts*

*Organization of Nurse Executives, Natick, MA*

**Jane Miller, RN, BS, OCN**

**Joanne LaFrancesca, RN, MN, AOCN**

**Susan Lee, RN, PhD, APRN-BC**

**Yawkey 8 Infusion Team**

Relationship-based Nursing, Quality, and

Outcomes Among Ambulatory Oncology

Patients: Preliminary Findings

*Eastern Nursing Research Society, Providence, RI*

**June Williams, MA, SLP**

**Neila Altobelli, BA, RRT**

**Susan Gavaghan, RN, MSN, CNS**

**Marian Jeffries, RN**

Multidisciplinary Tracheostomy Quality

Team in the Acute Care Setting

*2007 Annual Convention, American Speech-*

*Language and Hearing Association, Boston, MA*

### NATIONAL

**Kate Barba, RN, APRN, MS, BC, GNP**

**Andrea Bonanno, PT, DPT, GCS**

**Diane Carroll, RN, PhD, FAAN**

**Sheila Golden-Baker, RN, MS, BC, CRRN**

**Grace Good, RN, MSN, ACNP, BC**

**Mary Ellen Heike, RN, MMHS**

**Jennifer Lassonde, BA**

**Barbara Moscovitz, MSW, LICSW**

**Alison Squadrito, PT, DPT, GCS**

Staff Survey Using Geriatric Institutional

Assessment Profile

*10th Annual NICHE Leadership and*

*Users Conference, New York, NY*

Antonia Blinn, CHES

Carol Champigny

Lillian Chenell, FNP/PNP

Marjorie Crabtree, FNP

**Jordan Hampton, RN, CPNP, MSN, MSED**

Mary Lyons

Cindy Marti, MPH

Mary Jo McCarthy, MAT

Lorraine Murphy, MSN, MPH, CPNP

Sarah Rulnick, MPH

Angelica Vera

Jhana Wallace, MPH

Massachusetts School-Based Health

Center Awareness Day: From State

House to School House

*2007 Annual National School Based Healthcare*

*Convention, Washington, DC*

**Andrea Bonanno, PT, DPT, GCS**

**Diane M. Heislein, PT, DPT, MS, OCS**

Effect of Exercise on Quality of Life and Func-

tional Performance for Patients Undergoing

Treatment for Gastrointestinal Cancer

*Combined Sections Meeting, American Physical*

*Therapy Association, Boston, MA*

**Sheila Brown, RN, BSN, OCN**

**Donna Stamatis, RN, BSN, OCN**

Development of a Teaching Tool for

Patients Receiving Brachytherapy and

Non-Radiation Nurses

*Oncology Nursing Society Congress, Las Vegas, NV*

Annabel Chen Tournoux, MD

Veena Nandigam, MD

François Tournoux, MD

Jorge Solis-Martin, MD

David McCarty, MD

**Mary Orencole, RN, MS, APRN**

Maureen Hames

E. Kevin Heist, MD

Stephanie Moore, MD

Marc Semigran, MD

Jeremy Ruskin, MD

Jagmeet Singh, MD

Michael Picard, MD

Severe Left Ventricular Dilation is Associated

With Lack of Long-term Clinical Response to

Cardiac Resynchronization Therapy

*American Heart Association Scientific Sessions,*

*Orlando, FL*



## PROFESSIONAL ACHIEVEMENTS • poster presentations

**Chelby Cierpial, RN, MSN, APRN, BC**  
**Sioban Haldeman, RN, MSN, APRN, BC**  
**Judy Silva, RN, MSN**

Improving Safety for the Anti-Coagulated  
Patient Falls Prevention and Medication  
Administration

*National Teaching Institute of the American  
Association of Critical Care Nurses, Atlanta, GA*

Kay Fangerow, SPHN

**Jordan Hampton, RN, CPNP, MSN, MSEd**

Aisha Moore, MPH

Community Outreach Workers

*2007 Annual National School Based Healthcare  
Convention, Washington DC*

**Susan Gavaghan, RN, MSN, APRN, BC**

Readmission Rates after Discharge from the  
Respiratory Acute Care Unit

*Nursing 2007 Symposium, Orlando, FL*

**Dean Hess, PhD, RRT, FAARC, FCCP**

Claudia Crimi, MD

Lorenzo Berra, MD

Alberto Noto, MD

Ulrich Schmidt, MD, PhD

Luca Bigatello, MD

H. Thomas Stelfox, MD, PhD

A North American Survey of the Determinants  
of Tracheostomy Decannulation

*Annual Meeting, American Association for  
Respiratory Care, Orlando, FL*

**Elizabeth Johnson, MSN, RN,**

**AOCN, AOCNS**

Oncology Nurses' Perceptions of Patient  
Problems Encountered in Care

*32nd Annual Congress, Oncology  
Nursing Society, Las Vegas, NV*

Yafen Liang, PhD, MD

William Kimball, PhD, MD

**Robert Kacmarek, PhD, RRT,**  
**FCCM, FCCP, FAARC**

Warren Zapol, MD

Yandong Jiang, PhD, MD

Nasal is More Efficient Than Oral-Nasal

Ventilation During Induction of

Anesthesia in Adults

*Annual Meeting, American Society of  
Anesthesiology, Chicago, IL*

**Barbara Levin, RN, BSN, ONC, LNCC**

Can You Hear What I Hear

Untangling Charlotte's Web

*4th Annual Patient Safety Conference:*

*Surveillance Through Nursing's Eyes*

*University of Pennsylvania, Philadelphia, PA*

**Michele Lucas, MSW, LICSW**

The Evolution of the Support Group:

Creating Ways to Offer Emotional Support  
to Patients Despite Their Geographic and  
Time Constraints

*Association of Oncology Social Work Conference,  
Portland, OR*

**Kelly Macauley, PT, DPT, GCS**

**Jacqueline Mulgrew, PT, CCS**

Implications in Managing Patients with a

Ventricular Assist Device

*Combined Sections Meeting, American Physical  
Therapy Association, Boston, MA*

**Andrew Marchese, RA**

**Daniel Chipman, BS, RRT**

Pedro De La Oliva, PhD, MD

**Robert Kacmarek, PhD, RRT, FCCM,**  
**FCCP, FAARC**

Triggering and Initial Gas Delivery: The

Babylog vs. ICU Ventilators in the Neo-Mode

*Annual Meeting, American Association for  
Respiratory Care, Orlando, FL*

**Jennifer Mello, MS, CCC-SLP**

Fiberoptic Swallowing Evaluation

in Acute Burn Patients

*2007 Annual Convention, American Speech-  
Language and Hearing Association, Boston, MA*

**Laurel Radwin, RN, PhD**

Howard Cabral, PhD

Leslie Chen, BS

Factor Structure of Four Scales to Measure

Outcomes of Patient-Centered Nursing Care

*Annual Research Meeting 2007, AcademyHealth,  
Orlando, FL*

**Barbara Roberge, PhD, APRN, BC**

**Ellen Mahoney DNS, RN**

Changing the Hospital Trajectory for

Older Adults. The Importance of Identify  
Pre-Hospital Risk

*Gerontological Society of America, (GSA),  
San Francisco, CA*

Ulrich Schmidt, MD, PhD

Jean Kwo, MD

**Dean Hess, PhD, RRT, FAARC, FCCP**

Luca Bigatello, MD

H. Thomas Stelfox, PhD, MD

Tracheostomy Tube Malposition in Patients

Admitted to a Mechanical Ventilation

Weaning Unit

*Annual Meeting, American Society of  
Anesthesiologists, Chicago, IL*

Ulrich Schmidt, MD, PhD

Kanya Kumwilaisak, MD

Edward Bittner, MD, PhD

Edward George, MD, PhD

**Dean Hess, PhD, RRT, FAARC, FCCP**

Effects of Supervision by an Attending Anes-  
thesiologist on Complications of Emergency

Airway Management

*Annual Meeting, Society of Critical Care  
Medicine, Orlando, FL*

**Linda Steiner, PT, DPT, MS, OCS**

Partnership for Service Learning: Building

Bridges Between Elder Communities, Academic

Institutions, and National Organizations

*Community Engagement Conference, Coalition  
of Urban and Metropolitan Universities,*

*Baltimore, MD*

**June Williams, MS, CCC-SLP**

**Neila Altobelli, BA, RRT**

**Susan Gavaghan, RN, MSN, APRN,**

**BC, CCRN**

**Marian Jeffries, RN, MSN, APRN, BC, FN-C**

Establishing a Multidisciplinary Tracheostomy

Quality Team in the Acute Setting

*2007 Annual Convention, American Speech-  
Language and Hearing Association, Boston, MA*

### INTERNATIONAL

**Diane Carroll, RN, PhD, FAAN**

**Colleen Gonzalez, RN, MSN**

Visiting Preferences of Cardiovascular Patients

*7th Annual Meeting, Council of Cardiovascular  
Nurses and Allied Professionals, European Society  
of Cardiology, Manchester, England*

Annabel Chen Tournoux, MD

Veena Nandigam, MD

François Tournoux, MD

Jorge Solis-Martin, MD

David McCarty, MD

**Mary Orencole, RN, MS, APRN**

Maureen Hames

E. Kevin Heist, MD

Stephanie Moore, MD

Marc Semigran, MD

Jeremy Ruskin, MD

Jagmeet Singh, MD

Michael Picard, MD

*(continued)*

Assessment of Mechanical Dyssynchrony  
During Dobutamine Infusion May Improve  
Identification of Responders to Cardiac  
Resynchronization Therapy  
*International European Conference on  
Echocardiography, Euroecho, Orlando, FL*

**Caitlin Mann, RN, BS, NICU**  
Parental Perceptions of Longitudinal  
Outcomes Research  
*39th Biennial Convention, Sigma Theta Tau  
International, Baltimore, MD*

**Jeanne McHale, RN, MSN**  
**Beth Nagle, RN**  
**Monique Mitchell, RN, MS**  
**Gail Alexander, RN, BSN**  
Theodore Stern, MD  
Using Interdisciplinary Simulation to Promote  
the Assessment and Management of a Patient  
With a Change in Mental Status  
*International Meeting on Simulation in  
Healthcare Society for Simulation in Healthcare,  
Orlando, FL*

**Beth Nagle, RN**  
**Jeanne McHale, RN, MSN**  
**Gail Alexander, RN, BSN**  
**Ellen Mahoney, RN**  
Enhancing the Confidence of New Graduate  
Nurses Using High Fidelity Simulation,  
Didactic Lecture, and Hands on Practice  
*International Meeting on Simulation in  
Healthcare, Society for Simulation in Healthcare,  
Orlando, FL*

## CLINICAL RECOGNITION PROGRAM

The MGH Clinical Recognition Program serves as a formal way to recognize excellence in practice, encourage professional development and build a diverse community of reflective practitioners within Patient Care Services.

Applicants work with their directors and clinical specialists to analyze their practice relative to clinician-patient relationship, clinical knowledge and decision-making, teamwork and collaboration and movement (for Occupational Therapy and Physical Therapy professionals). Criteria within these themes define four levels of clinical practice: Entry, Clinician, Advanced Clinician and Clinical Scholar.

## 2007 ADVANCEMENTS

### ADVANCED CLINICIAN

**Van Abreu, RN**  
**Kelli Anspach, RN**  
**Sara Beth Asekoff, RN**  
**Immacula Benjamin, RN**  
**Robyn Bigelow, RN**  
**Marilyn Brier, LICSW**  
**Melissa Caron, SLP**  
**Tracey Carroll, RN**  
**Gail Carson-Fernandes, RN**  
**Catherine Cleary, RN**  
**Morgan Cole, PT**  
**Helen Conforti, RRT**  
**Kara Connor, RN**  
**Kelly Cruise, RN**

**Leslie Delisle, RN**  
**Lorraine Drapek, RN**  
**Kathleen Egan, RN**  
**Jacqueline Emond, RN**  
**Andrea Hennigan, RN**  
**Yi Lin Kuo, RN**  
**Hilary Levinson, RN**  
**Cristina Matthews, RN**  
**Robin Mirante, SLP**  
**Kristin O'Donnell, RN**  
**Ashley Rokosz, RN**  
**Kathryn Sabo, RN**  
**Jeanne Savoy Elliott, RN**  
**David Scholl, RN**

**Debra Shaw-Davis, PTT**  
**Tara Stadelman-Cohen, SLP**  
**Donna Stamatias, RN**  
**Patricia Tamaro, RN**  
**Liz Warren, RN**

### CLINICAL SCHOLAR

**Jean Baker, RN**  
**Rachel Bolton, RN**  
**Kathleen Boyle, RN**  
**Marybeth Bronson, LICSW**  
**Denise Dreher, RN**  
**Donna Furlong, RN**

**Diane Gay, RN**  
**Dinah Gilburd, LICSW**  
**Jeanne Giovino, RN**  
**Kelly Hartnett, RN**  
**Deanna Kovalski, RN**  
**Ines Luciani-McGillivray, RN**  
**Celine Mani, RN**  
**Julie Mccarthy, RN**  
**Margaret Munson, RN**  
**Ann Quealy, RN**  
**Carol Shea, RN**  
**Kelly Trecartin, RN**  
**Joy Williams, RN**



## PROFESSIONAL ACHIEVEMENTS • appointments

### STATE AND REGIONAL

**Anne-Marie Barron, RN, PhD, CNS-BC**  
*Visiting Nurse Scholar, Cambridge Health Alliance  
President-Elect, Faculty Senate, Simmons College  
Member, Directors of the Corporation for the  
Henry B. Martin Fund, Inc., Swift Charity,  
Milton, MA*

**Mimi Bartholomay, RN, MSN, AOCN**  
*Member, Board of Directors, Programming  
Committee, The Kenneth B. Schwartz Center*

**Diane Carroll, RN, PhD, FAAN**  
*Adjunct Associate Professor,  
Northeastern University  
Visiting Scholar, Boston College*

**Barbara Chase, RN, RN, APRN, BC, ANP**  
*Member, Advisory Board, Stoeckle Center  
for Primary Care Innovation  
Co-founder and Co-chair, Simmons Graduate  
Nursing Alumni Association  
Adjunct Faculty, Simmons School  
for Health Studies*

**Robert Dorman, PT, DPT, GCS**  
*Member, Geriatric Care Panel, Agency for  
Healthcare Research and Quality*

**Abby Folger, PT, DPT**  
*Member, Membership Committee, Massachusetts  
Chapter, American Physical Therapy Association*

**Jane Harker, RN, MS, BSN, CGRN**  
*President, New England Society of  
Gastroenterology Nurses and Associates*

**Jeanette Ives Erickson, RN, MS, FAAN**  
*Clinical Professor of Nursing, Massachusetts  
College of Pharmacy and Health Science,  
School of Nursing  
Chairperson, The Promise of Nursing for  
Massachusetts Initiative, Johnson & Johnson  
Member, Harvard Humanitarian Initiative  
Executive Committee, Harvard University*

**Janet King, RN, CGRN**  
*Member, Board of Directors, New England  
Society of Gastroenterology Nurses and Associates*

**Peter Maramaldi, PhD, MPH, LCSW**  
*Teaching Associate, Harvard Medical School,  
Department of Psychiatry, Brigham and  
Women's Hospital  
Member, MCHB Training Grant Advisory  
Committee, Harvard School of Public Health  
Associate Professor and Harford Faculty Scholar,  
Simmons School of Social Work*

**Donna Murphy, RN, BS, CPHQ**  
*Past President, Chairperson, Bylaws/  
Nominating Committee, Massachusetts  
Association of Healthcare Quality*

**Gayle Peterson, RN, C**  
*President, Massachusetts American Society of  
Pain Management Nurses*

**Thomas Quinn, RN, APRN, MSN,  
AOCN, CHPN**  
*Member, Board of Directors, Connecticut  
Coalition to Improve End-of-Life Care*

**Christopher Robbins, RN, CGRN**  
*Treasurer, New England Society of  
Gastroenterology Nurses and Associates*

**Julie Thayer, RN**  
*Chair, Governance Committee, Theta at  
Large Chapter, Sigma Theta Tau*

### NATIONAL

**Paul Arnstein, RN, PhD**  
*Member, Education Advisory Committee,  
American Pain Society*

**Kathryn Brush, RN, MS, CCRN,  
CCNS, FCCM**  
*Member, Board of Directors, National  
Association of Clinical Nurse Specialists*

**Diane Carroll, RN, PhD, FAAN**  
*Fellow, American Academy of Nursing*

**Constance Dahlin, RN, APRN, BC, PCM**  
*Circle of Life Award Committee Member,  
American Hospital Association  
Task Force Member, Editor, Domain Series, and  
Chair, Revision Task Force, National Consensus  
Project for Quality Palliative Care  
National Faculty Member for End of Life Nursing  
Education Consortium*

**Ann Haywood-Baxter, MDiv, BCC**  
*Member, Advisory Council, Pediatric  
Chaplains Network*

**Imam Talal Eid, ThD**  
*Member, U.S. Commission on  
International Religious Freedom*

**Nancy Goode, PT, DPT, MS**  
*Member, Editorial Advisory Board, "Today in PT"*

**Jeanette Ives Erickson, RN, MS, FAAN**  
*Fellow, American Academy of Nursing  
Member, Advisory Panel, PBS Video Series,  
"Remaking American Medicine"  
Member, Advisory Panel, "Licensed to Care  
– Nursing in the 21st Century"  
Member, National Advisory Council on Nurse  
Education and Practice, U.S. Department of  
Health and Human Services  
(continued)*

*Founding Member and Inaugural Chairperson,  
CNO Research Council, Health Workforce  
Solutions, LLC*

**Donna Jenkins, RN, MS, CNA, BC**  
*Nurse Manager Fellow, American Organization  
of Nurse Executives*

**Elizabeth Johnson, RN, MSN,  
AOCN, AOCNS**  
*Member, Nominating Committee, Oncology  
Nursing Society  
Member, Advanced Oncology Nursing  
Certification Committee, Oncology Nursing  
Certification Corporation*

**Peter Maramaldi, PhD, MPH, LCSW**  
*National Research Mentor, Geriatric Social Work  
Initiative, Gerontological Society of America  
Member, National Advisory Board, Lifelong  
Access Libraries  
Consulting Editor, Health & Social Work*

**Charles McCorkle, MSW, LICSW**  
*Honorary Clinical Instructor, Smith College  
School for Social Work*

**Cynthia McDonough, RN, LNC, CPSN**  
*Member, National Certification Task Force,  
American Society of Plastic Surgical Nurses*

**Theresa Michel, PT, DPT, MS, DSc, CCS**  
*Member, American Physical Therapy Association*

**Peter Moran, RN, C, BSN, MS, CCM**  
*President, Case Management Society of America*

**Janet Mulligan, RN, MS**  
*Member, Advisory Board, Association for  
Vascular Access*

**Donna Murphy, RN, BS, CPHQ**  
*Member, Leadership Council, National  
Association for Healthcare Quality*

**Gail Pisarcik Lenehan, RN, EdD,  
FAEN, FAAN**

*Member, Board of Directors, Emergency  
Nurses Association*

**Mimi Pomerleau, RN**

*Member, Board of Directors, Association of  
Women's Health, Obstetric and Neonatal Nurses*

**Gayle Peterson, RN, C**

*Member, House of Delegates, American  
Nurses Association*

**Thomas E. Quinn, MSN, RN,  
AOCN, CHPN**

*Member, Editorial Board, Pain Management  
Nursing, American Society for Pain  
Management Nursing*

*Trainer, End-of-Life Nursing Education  
Curriculum in Oncology*

*Trainer, Generalist Clinical Review, Hospice and  
Palliative Nurses Association*

**Laurel Radwin, RN, PhD**

*Member, Abstract Review Panel, 2007 Academy  
Health Interdisciplinary Research Group on  
Nursing Issues Program*

**Amanda Stefancyk, RN, MSN, MBA**

*Nurse Manager Fellow, American Organization  
of Nurse Executives*

**INTERNATIONAL**

**Jeanette Ives Erickson, RN, MS, FAAN**

*Member, CNO-Dean Advisory Council, Sigma  
Theta Tau International*

*Member, Communication Expert Panel, Joint  
Commission International Center for Patient  
Safety, The Joint Commission and Joint  
Commission Resources*

*Senior Nurse Consultant, Mentor for Chief  
Nurse, Project Hope, Basrah Children's  
Hospital, Basrah, Iraq*

**Peter Maramaldi, PhD, MPH, LCSW**

*Member, World Council of Alumni Members,  
International House New York*

**NURSE SCIENTIST ADVANCEMENT MODEL**

The MGH Nurse Scientist Advancement Model for doctorally prepared nurses is designed to provide all nurses with the opportunity to contribute to the development of nursing knowledge. The model delineates three levels of nursing research expertise: associate nurse scientist; nurse scientist; and senior nurse scientist, and is highly adaptable to meet the needs of each clinician or researcher.

**2007 ADVANCEMENTS**

**ASSOCIATE NURSE SCIENTIST**

**Susan Lee, RN, PhD, NP-C**  
**Christina Graf, RN, PhD**  
**Donna Perry, RN, PhD**

**NURSE SCIENTIST**

**Virginia Capasso, PhD, APRN, BC**  
**Amanda Coakley, RN, PhD**  
**Barbara Roberge, RN, PhD**  
**Lynda Tyer-Viola, RNC, PhD**  
**Patricia Arcari, RN, PhD**  
**Ellen Robinson, RN, PhD**

**Paul Arnstein, RN, PhD**

Chapter “Pain Management” in *Fundamentals of Nursing: Concepts, Process and Practice*  
8th Edition  
Prentice Hall

**Anne-Marie Barron, RN, PhD, CNS-BC**

Chapter “Margaret Newman’s Theory and Research Method: A Case Illustration” in *Nursing Knowledge Development and Clinical Practice*  
First Edition  
Springer Publication

**Kathryn Beauchamp, RN, MSN, CCRN, CCNS**

Chapter “Discharge of the Pediatric Patient” in *AACN Procedure Manual for Pediatric Acute and Critical Care*  
First Edition  
Elsevier

**Virginia Capasso, RN, PhD, APRN, BC  
Erin Cox, RN, MS, APRN, BC**

**Sharon Bouvier, RN, MS**  
Chapter “Carotid Artery Disease” in *Primary Care: A Collaborative Practice*  
3rd Edition  
Mosby

**Diane Carroll, RN, PhD, FAAN**

Barbara Riegel, DNSc, RN, CS, FAHA, FAAN  
Chapter “The Impact of Cardiac Disease on Psychological State” in *Cardiac Nursing: A Companion to Braunwald’s Heart Disease*  
Saunders Elsevier

**Constance Dahlin, RN, APRN, BC, PCM**

Chapter “Reimbursement” in *Core Curriculum for the Advanced Practice Hospice and Palliative Nurse*  
First Edition  
Kendall Hunt Publishing

**Constance Dahlin, RN, APRN, BC, PCM**

**Jean Fahey, RN, MSN, APRN-BC, CCRN, CNRN**  
**Noreen Leahy, RN, MS, CS**  
Chapter “Neurological Conditions” in *Core Curriculum for the Advanced Practice Hospice and Palliative Nurse*  
First Edition  
Kendall Hunt Publishing

**Brian French, RN, MS**

**Miriam Greenspan, RN, MSN**  
Chapter “The Preceptored Clinical Experience” in *Innovative Teaching Strategies in Nursing and Related Health Professions*  
4th Edition  
Jones and Bartlett

**Alice Gervasini, RN, PhD**

Dianne Danis, RN, MS  
Joseph Blansfield, RN, MS, NP  
*Handbook of Clinical Trauma The First Hour*  
Mosby

**Maryjane B. Giacalone, MS, ANP, ACNP-CS**

Randall Zusman, MD  
Chapter “Hypertension” in *Primary Care: A Collaborative Practice*  
3rd Edition  
Mosby

**Maryjane B. Giacalone, RN, NP**

Marc Semigran, MD  
Chapter “Integrating Inpatient and Outpatient Heart Failure Management” in *Heart Failure: A Practical Approach to Treatment*  
First Edition  
Mc-Graw-Hill Professional

**Barbara Levin, RN, BSN, ONC, LNCC**

Nancy Morris, RN, PhD, APRN, BC  
Chapter “Complications in Orthopaedics” in *Core Curriculum for Orthopaedic Nursing*  
6th Edition  
Pearson

**Mary McKenna Guanci, RN, MS, CNRN**

**Constance Dahlin, RN, MS, APRN, BC, PCM**  
Chapter “End of Life Concerns in the Critical Care Setting” in *Core Curriculum for the Advanced Practice Hospice and Palliative Care Nurse*  
First Edition  
Kendall Hunt

**Theresa Michel, PT, MS, DSc, CCS**

Susan Pierce, PT, MPT, CDE  
Rhonda Barr, PT, MA, CCS  
Mary Jane Myslinski, PT, EdD  
Pamela Scarborough, PT, MS, CDE, CWS  
Chapter: “Exercise in Type II Diabetes” in *Physical Fitness for Special Populations*  
American Physical Therapy Association  
APTA PSFP Pocket Guides

**Patricia Mian, RN, MS, APN-BC**

Chapter “Crisis Intervention in Trauma” in *Handbook of Clinical Trauma The First Hour*  
4th Edition  
Mosby

**Amy Orroth, OTR/L, CHT**

**Monica Pessina, OTR/L, PhD**  
Chapter “Burn Injuries” in *Occupational Therapy for Physical Dysfunction*  
6th Edition  
Lippincott, Williams and Wilkins

**Poonam Pardasaney, PT, DPT, MS**

Chapter “Rehabilitation Program Development: Clinical Decision Making Prioritization”  
(continued)

and Program Integration” in *Scientific Foundation and Principles of Practice in Musculoskeletal Rehabilitation*  
Volume 2  
Saunders/Elsevier

**Mary Jo Perley, RN,  
Constance Dahlin, RN, APRN, BC, PCM**

**Jean Fahey, RN, MSN, APRN, BC, CCRN, CNRN**  
Chapter “Management of Complex Life-Limiting Progressive Illness Neurological Conditions” in *Core Curriculum for the Advanced Practice Hospice and Palliative Nurse*  
First Edition  
Kendall Hunt Publishing

Ruth Purtilo, PhD

**Ellen Robinson, RN, PhD**

Jean Kwo, MD  
Paul Montgomery, PhD  
**Marion Phipps, RN, MS, FAAN**

**Judith Sullivan, RN, MS**

**Angelika Zollfrank**  
**Mary Zwirner, MSN, MSW, LICSW**  
*Maintaining Compassionate Care: A Companion for Families Experiencing the Uncertainty of a Serious and Prolonged Illness*  
Print House

**Kathleen Walsh**

Karen Zander, RN, MS  
*ED Case Management*  
First Edition  
HCPPro Publishers

**James Zachazewski, PT, DPT, SCS, ATC**

David Magee  
William Quillen  
*Scientific Foundations and Principles of Practice in Musculoskeletal Rehabilitation*  
First Edition  
Saunders/Elsevier

## ARTICLES

### **Paul Arnstein, RN, PhD**

Lessons from Mrs. Tandy: Learning to “Live With” Chronic Pain

*Topics in Advanced Practice Nursing*

### **Paul Arnstein, RN, PhD**

Qaseem Chou

Vincenza Snow, et. al.

Diagnosis and Treatment of Low Back Pain: A Joint Clinical Practice Guideline from the American College of Physicians and American Pain Society

*Annals of Internal Medicine*

William Benedetto, MD

### **Dean Hess, PhD, RRT, FAARC, FCCP**

Elise Gettings, RN

Luca Bigatello, MD

Hanna Toon, MD

William Hurford, MD

Ulrich Schmidt, MD, PhD

Original Research Study: Urgent Tracheal Intubation in General Hospital Units: An Observational Study

*Journal of Clinical Anesthesia*

### **Kathryn Brush, RN, MS, CCRN, CCNS, FCCM**

Abdominal Compartment Syndrome  
*Nursing 2007*

### **Kathryn Brush, RN, MS, CCRN, CCNS, FCCM**

### **Elise Gettings, RN, MPA, CRRN**

Elizabeth Van Cott, MD

William Hurford, MD, FCCM

Outcome of Postoperative Critically Ill Patients With Heparin-Induced

Thrombocytopenia: An Observational

Retrospective Case-Controlled Study

*Critical Care*

### **Diane Carroll, RN, PhD, FAAN**

Teri Lundgren, RN, PhD

Yoshimi Fukuoka, RN, PhD

Sally Rankin, RN, PhD

Bruce Cooper, PhD

Yvonne Munn, RN

Cluster Analysis of Elderly Cardiac Patients Prehospital Symptomatology

*Nursing Research*

### **Diane Carroll, RN, PhD, FAAN**

Sally Rankin, RN, PhD, FAAN

Bruce Cooper, PhD

The Effects of a Collaborative Peer Advisor/Advanced Practice Nurse Intervention

*Journal of Cardiovascular Nursing*

### **Diane Carroll, RN, PhD, FAAN**

Sally Rankin, RN, PhD, FAAN

Mending Hearts

*Advance for Nurses*

### **Diane Carroll, RN, PhD, FAAN**

Fukouka Yoshimi, RN, PhD

Sally Rankin, RN, PhD, FAAN

Systematic Bias in Self-Reported Annual Household Incomes Among Unpartnered

Elderly Cardiac Patients

### **Applied Nursing Research**

### **Daniel Chipman, BS, RRT**

Maria Caramaz, PhD, MD,

Erico Miyoshi, PhD, MD

### **Joseph Kratochvil, RRT**

### **Robert Kacmarek, PhD, RRT, FCCM,**

### **FCCP, FAARC**

Original Research Study: Performance

Comparison of Fifteen Transport Ventilators

*Respiratory Care*

J. Randall Curtis, MD, MPH

Deborah Cook, MD

Tasnim Sinuff, MD, PhD

Douglas White, MD

Nicholas Hill, MD

Sean Keenen, MD

Joshua Benditt, MD

### **Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**

Karin Kirchoff, RN, PhD

Mitchell Lev, MD

Original Research Study: Non-Invasive Positive Pressure Ventilation in Critical and Palliative Care Settings: Understanding the Goals of Therapy

*Critical Care Medicine*

Francisco Dominguez, MD

Dalliah Black, MD

Akemi Kawaguchi, MD

### **Catherine O'Malley, RN, MSN, CNOR**

Kevin Hughes, MD, FACS

Elastic Stay Hooks and Self-Retaining Retractor Technique for Mastectomy Skin Flaps

*Surgery*

### **Robert Dorman, PT, DPT, GCS**

### **Jacqueline Mulgrew, PT, CCS**

Minimally Invasive Hip Arthroplasty versus Traditional Hip Arthroplasty Surgery:

Early Functional Outcomes and the Impact on the Frequency and Duration of Acute

Care Physical Therapy

*Acute Care Perspectives*

### **Marie Egan, RN, MS**

Warren S. Sandberg MD, PhD

Auto Identification Technology and Its Impact on Patient Safety in the

Operating Room of the Future

*Surgical Innovation*

Oleg Evgenov, MD, PhD

Daniel Kohane, MD, PhD

Kenneth Bloch, MD

Johannes-Peter Stasch, PhD

Gian Volpato, MD

Evangelia Bellas, MS

Natalia Evgenov, MD

Emmanuel Buys, PhD

Mark Gnoth, PhD

Amanda Graveline, MS

Rong Liu, MD, PhD

### **Dean Hess, PhD, RRT, FAARC, FCCP**

Robert Langer, D.Sc

Warren Zapol, MD

Original Research Study: Inhaled Agonists of Soluble Guanylate Cyclase Induce Selective Pulmonary Vasodilation

*American Journal of Respiratory & Critical Care Medicine*

Betty Ferrell, PhD, FAAN

### **Constance Dahlin, RN, APRN, BC, PCM**

Margaret Campbell, RN, PhD, FAAN

Judith Paice, RN, PhD, FAAN

Pam Malloy, RN, MN, OCN

Rose Virani, MHA, RNC, OCN

End of Life Nursing Education Consortium (ELNEC) Training Program – Improving

Palliative Care in Critical Care

*Critical Care Quarterly*

### **Jean Fahey, RN, MSN, APRN-BC, CCRN, CNRN**

High Dose Methotrexate and Primary

Central Nervous System Lymphoma

*American Journal of Neuroscience Nursing*

Henry Fessler, MD  
**Dean Hess, PhD, RRT, FAARC, FCCP**  
 Review: Does High-Frequency Ventilation Offer Benefits Over Conventional Ventilation in Adult Patients With Acute Respiratory Distress Syndrome?  
*Respiratory Care*

Henry Fessler, MD  
 Stephen Derdak, DO  
 Niall Ferguson, MD,  
 David Hager, MD  
**Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**  
 B. Taylor Thompson, MD  
 Roy Brower, MD  
 Original Research Study: A Protocol for High-Frequency Oscillatory Ventilation in Adults. Results From a Roundtable Discussion  
*Critical Care Medicine*

**Catherine Griffith, MSN, APRN, BC, CNS, CCRN**

**Mary Larkin, MSN, RN, CDE**  
**Chelby Cierpial, MSN, APRN, BC, CNS**  
**Elise Gettings, RN, MPA, CRRN**  
**Virginia Capasso, RN, PhD, APRN, BC**  
 Creating More Than Just a Journal Club: How to Start and Sustain a Forum for Nursing Research  
*American Nurse Today*

**Debra Guthrie, RN, CRNI**  
**Denise Dreher, RN, CRNI**  
**Margaret Munson, RN, CRNI**  
 What You Need to Know About PICCs, Part 1  
 What You Need to Know About PICCs, Part 2  
*Nursing 2007*

**Dean Hess, PhD, RRT, FAARC, FCCP**  
 Review: The Mask for Noninvasive Ventilation: Principles of Design and Effects on Aerosol Delivery  
*Journal of Aerosol Medicine*

Review: Airway Clearance: Physiology, Pharmacology, Techniques, and Practice  
*Respiratory Care*

**Dean Hess, PhD, RRT, FAARC, FCCP**  
 Henry Fessler, MD  
 Review: Should Noninvasive Positive-Pressure Ventilation be Used in all Forms of Acute Respiratory Failure?  
*Respiratory Care*

**Dean Hess, PhD, RRT, FAARC, FCCP**  
 H. Thomas Stelfox, MD, RRT  
 Ulrich Schmidt, MD, PhD  
 Editorial: Noninvasive Positive-Pressure Ventilation: A Silver Bullet for Extubation Failure?  
*Respiratory Care*

**Marian Jeffries, RN, MSN, APRN, BC, FNP-C**  
**Rechelle Townsend, RN, AD**  
**Emily Horrigan, RN, BSN, RNC**  
 Combating Lung Cancer  
 Helping Your Patient Combat Lung Cancer  
*Nursing 2007*

**Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**  
 Editorial: Noninvasive Positive Pressure Ventilation in Post-Operative Hypoxemic Respiratory Failure – With a Helmet  
*Respiratory Care*

**Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**  
 Richard Kallet, RRT, MSc  
 Review of the Literature: Should Recruitment Maneuvers be Used in the Management of ALI and ARDS  
*Respiratory Care*

A. Murat Kayner, MD  
 Jacob Mathew, Pharm D  
 Margaret Hudlin, MD  
 Dan Gingras, RRT  
 Ray Ritz, RRT  
 Michael Jackson, RRT

**Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC**  
 Marin Kollef, MD  
 Original Research Study: Attitudes of Respiratory Therapists and Nurses About Measures to Prevent Ventilator Associated Pneumonia: A Multicenter, Cross-Sectional Survey Study  
*Respiratory Care*

Baruch Krauss, MD  
**Dean Hess, PhD, RRT, FAARC, FCCP**  
 Review: Capnography for Procedural Sedation and Analgesia in the Emergency Department  
*Annals of Emergency Medicine*

**Mary Larkin, MSN, RN, CDE**  
**Catherine Griffith, MSN, APRN, BC, CNS, CCRN**  
**Virginia Capasso, RN, PhD, APRN, BC**  
**Chelby Cierpial, MSN, APRN, BC, CNS**  
**Elise Gettings, RN, MPA, CRRN**  
**Kathleen Walsh, RN, PhDc**  
**Catherine O'Malley, MSN, RN, CNOR**  
 Promoting Research Utilization Using a Conceptual Framework  
*Journal of Nursing Administration*

**Cynthia LaSala, RN, MS, CNS**  
**Patricia Connors, RN, RNC, MS, WHNP**  
**Jill Taylor Pedro, RN, MSN, APRN-BC, ONC**  
**Marion Phipps, RN, MS, CRRN, FAAN**  
 The Role of the Clinical Nurse Specialist in Promoting Evidence-Based Practice and Effecting Positive Patient Outcomes  
*The Journal of Continuing Education in Nursing*

Maureen Lynch, RN, MS, APRN, BC, PCM, AOCN  
**Constance Dahlin, RN, APRN, BC, PCM**  
 The National Consensus Project and Quality Forum Preferred Practices in Care of the Imminently Dying: Implications for Nursing  
*Journal of Hospice and Palliative Nursing*

**Mary Lussier-Cushing, RN, APRN, BC**  
**Jennifer Repper-Delisi, RN, APRN, BC**  
 Monique Mitchell, RN, APRN, BC  
 Barbara Lakatos, RN, APRN, BC  
**Fareeda Mahmoud, RN, APRN, BC**  
**Robin Lipkis-Orlando, RN, APRN, BC**  
 Is Your Medical/Surgical Patient Withdrawing from Alcohol?  
*Nursing 2007*

**Mary McKenna Guanci, RN, MS, CNRN**  
 Janice Hinkle, RN, PhD, CNRN  
 Acute Stroke Review  
*Journal of Neuroscience Nursing*

**Patricia Mian, RN, MSN, APN-BC**  
**Susan Warchal, RN**  
**Susan Whitney, RN, BS**  
**Joan Fitzmaurice, RN, PhD**  
**David Tancredi, MD**  
 Impact of a Multifaceted Intervention on Nurses' and Physicians' Attitudes and Behaviors Toward Family Presence During Resuscitation  
*Critical Care Nurse*



**Theresa Michel, PT, DPT, MS, DSc, CCS**

Physical Therapy for Obesity  
*Today in Physical Therapy*

**Kathryn Pazola, RN, MSN, CPON**

Reflections On a Day in Room 400  
*Oncology Times*

**Carolyn Pelley, BS, RRT**

Jean Kwo, MD

**Dean Hess, PhD, RRT, FAARC, FCCP**

Case Report: Tracheomalacia in an Adult With  
Respiratory Failure and Morquio Syndrome  
*Respiratory Care*

Pat Reid Ponte, RN, DNSc, FAAN  
Greer Glazer, RN, CNP, PhD, FAAN  
Emma Dann, RN, GSN, OCN, CAN-BC  
Kathleen McCollum  
Anne Gross, RN, MS, CNAA

**Rosalie Tyrrell, RN, MS**

Patricia Branowicki, RN, MS, CNAA  
Patricia Noga, RN, MBA, CNAA, BC  
Marion Winfrey, RN, EdD

Mary Cooley, RN, APRN, BC, PhD  
Suzelle Saint-Eloi, RN, MS

Carolyn Hayes, RN, PhD, CNAA  
Patrice Nocoals, RN, DNSc, MPH, ANP

**Deborah Washington, RN, PhD(c)**

The Power of Professional Nursing  
Practice – An Essential Element of Patient  
and Family Centered Care  
*The Online Journal of Issues in Nursing*

**Laurel Radwin, RN, PhD**

**Mary Hackel, RN**

Christine Saba, RN  
Joanne Garvey, RN  
Amber Schrantz, RN

Abstract: Cancer Patients' Trust in  
Oncology Nursing Care  
*Oncology Nursing Forum*

**Laurel Radwin, RN, PhD**

Gail Mallory, RN, CNAA  
Watch for the Implementation of the  
Patient-Reported Outcomes Measurement  
Information System  
*ONS/Advanced Research Special Interest  
Group on-line newsletter*

**Laurel Radwin, RN, PhD**

Rita Suhonen, RN, PhD  
Lee Schmidt, RN, PhD  
Measuring Individualized Nursing Care:  
Assessment of Reliability and Validity of  
Three Scales  
*Journal of Advanced Nursing*

Kenneth Steinberg, MD

**Robert Kacmarek, PhD, RRT, FCCM,  
FCCP, FAARC**

Review of the Literature: Should Tidal  
Volume be 6 mL/kg PBW in Virtually All  
Patients With Acute Respiratory Failure  
*Respiratory Care*

**Lynda Tyer-Viola, RNC, PhD**

Obstetrical Nurses Attitudes and Care  
Intentions Regarding HIV-positive  
Pregnant Women  
*Journal of Obstetrics and Gynecology  
and Neonatal Nursing*

Joel Weissman, PhD

Jeffrey Rothschild, MD, MPH

Eran Bendavid, MD

Peter Sprivulis, MBBS, PhD, FACEM, FACHI

E. Francis Cook, ScD

R. Scott Evans, PhD

Yevgenia Kaganova, PhD

Melissa Bender, MD

**JoAnn David-Kasdan, RN, MS**

Peter Haug, MD

*(continued)*

Jim Lloyd, BS

Leslie Selbovitz, MD

Harvey Murff, MD, MPH

David Bates, MD, MSc

Hospital Workload and Adverse Events  
*Medical Care*

Jesus Villar, MD, PhD

Lina Perez-Mendez, MD, PhD

Carlos Flores, PhD

Nicole Maca-Meyer, PhD

Elena Espinosa, MD, PhD

Arturo Muriel, MD, PhD

Rubin Spanguesa, MD

Jesus Blanco, MD, PhD

Mercedes Muros, PhD

**Robert Kacmarek, PhD, RRT, FCCM,  
FCCP, FAARC**

Original Research Study: A CXCL2  
Polymorphism is Associated With Better  
Outcome in Patients With Severe Sepsis  
*Critical Care Medicine*

Jesus Villar, MD, PhD

Lina Perez-Mendez, MD, PhD

Jose Lopez, MD

Javior Belda, MD, PhD

Jesus Blanco, MD, PhD

Inaki Saralegin, MD

Fernando Suarez-Sipmann, MD, PhD

Julia Lopez, MD

Santiago Lubillo, MD, PhD

**Robert Kacmarek, PhD, RRT, FCCM,  
FCCP, FAARC**

Original Research Study: An Early PEEP/FIO2  
Trial Identifies Different Degrees of Lung  
Injury in ARDS Patients  
*American Journal of Respiratory and Critical  
Care Medicine*

**Maria Winne, RN**

Nurses' Perceptions of Working With  
Students in the Clinical Setting  
*Nurse Educator Journal*

**Loren Winters, RN, MSN, APRN,  
BC, WHNP, OCN**

**Karleen Habin, RN, BCCS, MPH  
Joan Gallagher, RN, EdD, APRN,  
BC, AOCN**

Aromatic Inhibitors and Musculoskeletal  
Pain in Patient With Breast Cancer  
*Clinical Journal of Oncology Nursing*

**Susan Wood, RN, BC, APRN**

**Mary Lavieri, RN, CCRN, MS**

**Tracey Durkin, RN, BS**

What You Need to Know about Sepsis  
*Nursing 2007*



PROFESSIONAL ACHIEVEMENTS • **volunteer hours**

MGH is fortunate to have more than 1,200 volunteers each year who provide countless and valuable services to patients and staff throughout the hospital. They can be found in a variety of settings, from greeting patients when they first arrive at MGH to escorting them to transportation after discharge. Although the volunteers come from all age groups, backgrounds and experiences, they share a commitment to making a difference at MGH. In 2007, many volunteers reached significant milestones for the total number of hours they have served the MGH community.

500+

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Phyllis Anzalone  
Mary Avery  
Janice Belleville  
Steven Berke  
Julia Bishop  
Walter Borer  
Joanne Callahan  
Charles Calvin  
Cynthia Calvin  
Kathy Carolan  
Maryellen Denning  
Frederick Earthrowl  
Priscilla Farias-Monge  
Andrea Gargiulo  
Beatrice Grigorian  
Barbara Jankowski  
Jibrin Kama  
Maura Killalea  
Michi Kondo

Margaret Lanoix  
Eleanor Maciolek  
Gina Mei  
Lou Mitchell  
Susan Noonan  
Ellen O'Connor  
James Pratt  
Jane Pratt  
Elizabeth Quinn  
Mickey Randazza  
Lisa Rhoades  
Nathaniel Rosenberg  
Andrea Sahin  
Joann Scoppettuolo  
Debra Simpson  
Louise Smith  
Chantha Toeum  
William Toomey  
Janet Urdang

1,000+

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Jacqueline Cressey  
Dominique Davenport  
Anne Lee Doig  
Robert Dunn  
Evelyn Elston  
Robert Fitzsimmons  
Nancy Fraser  
Gerald Garber  
Mina Goldberg  
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Elaine Grollman  
Mary Ellen Halliwell  
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Elaine Kwiecien  
Peter Lawless  
Mary Martin

Jill Martuza  
Josephine Masucci  
Rose McCabe  
Rita McDonald  
Ann McNamara  
David Moccia  
Debby Morrison  
John Morrow  
Virginia Needham  
Francis Norton  
David O'Brien  
George E. O'Brien  
George L. O'Brien  
Christine Perry  
Annie Pham  
Adeline Polese  
Claire Rochefort  
Donald Rosenthal  
Peggy Scott  
Janet Shipman  
Anne Smith  
Eileen Sullivan  
Rene Thomson  
Irene Trainor  
Haydee Vasquez  
Ann Wallace  
William Weiland  
Robert Williams  
Marilynn Yaremchuk  
Ellen Zellner

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Patty Austen  
Kay Bander  
Gaylen Bent  
Kelly Clark  
Ellen Connell

Phoebe Coues  
Dulce Maria de Borbon  
Louise Fletcher  
Bradley Herscot  
Bette Hutchins  
Virginia Kaneb  
Duncan MacDonald  
Sharon Murphy  
Cronin O'Leary  
Margo Quinlan  
Marie Rotti  
Ronald Surabian  
Carlos Villafuerte  
William Webster  
Elisabeth Weitzel

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Joyce Ciffolillo  
Lynn Duff  
Joan Epstein  
Bobbi Evans  
Anne Hill  
Carolyn Hirsch  
Carmela Kupchaunis  
Joan Litchfield  
Charles McCarthy  
Mimi McDougal  
Gail Mitton  
Robert Nelson  
Diana Richardson  
Elizabeth Slocum  
Margaret Wilkie  
William Zadroga

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Norris Branscombe  
Nancy Buckley  
Yvonne Dello Russo  
Mary Hearne  
Rona Matisoff  
Susanne Potts  
Kenneth Quinlan  
Kathy Rehm

5,000+

Sally Cave  
Karen MacDuffie  
Margaret Pluszczewski  
William Terranova

6,000+

Caroline Blake

8,000+

Katherine Baker  
James Gillespie

9,000+

Dory Howard  
Paula O'Keefe

10,000+

Lois Cheston

11,000+

Lucy Burr

15,000+

Joan DeGuglielmo  
Eleanor Hackett

25,000+

Sally Taylor

## PROFESSIONAL ACHIEVEMENTS • 2007 school affiliations

### SCHOOLS OF NURSING

#### **AD Programs**

Bunker Hill Community College  
Lawrence Memorial/Regis College  
Quincy College  
Roxbury Community College

#### **BSN Programs**

Boston College  
Curry College  
Emmanuel (RN to BSN)  
Endicott College  
Fitchburg State College  
Johns Hopkins University  
Northeastern University  
Regis College  
Rivier College (RN to BSN)  
Salem State College  
Simmons College  
St. Anselm  
University of Mass., Amherst  
University of Mass., Boston  
University of Mass., Dartmouth  
University of Mass., Lowell  
University of New Hampshire  
University of Southern Maine  
University of Vermont  
University of Wisconsin (On-Line BSN)

#### **Graduate Nursing Programs**

Boston College  
MGH Institute of Health Professions  
Northeastern University  
Regis College  
Salem State College  
Simmons College

University of Connecticut  
University of Mass., Boston  
University of Mass., Worcester  
University of New Hampshire  
University of Rhode Island  
Yale University

#### **Other Programs**

American Red Cross: Nursing  
Assistant Program  
Bunker Hill Community College:  
Patient Care Assistant Program  
Delaware County Community College, PA:  
RN First Assistant

### SCHOOLS OF ALLIED HEALTH

#### **Social Work**

Boston College  
Boston University  
Leslie College  
Salem State College  
Simmons College  
Smith College

#### **Physical Therapy**

Boston University  
MGH Institute of Health Professions  
Simmons College

#### **Occupational Therapy**

Boston University  
University of New Hampshire  
Tufts University

#### **Speech Language Pathology**

Boston University  
Emerson College  
College of the Holy Cross  
Indiana University  
McGill University  
MGH Institute of Health Professions  
Northeastern University  
Purdue University

#### **Respiratory Therapy**

Massasoit Community College  
Northern Essex Community College  
Bunker Hill Community College

## *Advancing Our Mission*

### STRATEGIC GOALS

*Through the Patient's Eyes* Seek the patient's voice to improve the care experience

*Following the Evidence* Achieve and sustain evidence-based quality indicators

*Handle with Care* Decrease patient and staff injuries through the use of safe patient-handling practices

*Lean & Clean* Provide a clean and clutter-free environment for our patients and staff

*Team PCS* Enhance teamwork to achieve excellence in care delivery

### GUIDING PRINCIPLES *The following values guide our work:*

- We are ever alert for opportunities to improve patient care; we provide care based on the latest research findings.
- We recognize the importance of encouraging patients and families to participate in the decisions affecting their care.
- We are most effective as a team; we continually strengthen our relationships with each other and actively promote diversity within our staff.
- We enhance patient care and the systems supporting that care as we work with others; we eagerly enter new partnerships with people inside and outside of the Massachusetts General Hospital.
- We never lose sight of the needs and expectations of our patients and their families as we make clinical decisions based on the most effective use of internal and external resources.
- We view learning as a lifelong process, essential to the growth and development of clinicians striving to deliver quality patient care.
- We acknowledge that maintaining the highest standards of patient care delivery is a never-ending process that involves the patient, family, nurse, all healthcare providers and the community at large.

### VISION AND VALUES

As nurses, health professionals and Patient Care Services support staff, our every action is guided by knowledge, enabled by skill and motivated by compassion. Patients are our primary focus, and the way we deliver care reflects that focus every day.

We believe in creating a practice environment that has no barriers, is built on a spirit of inquiry and reflects a culturally-competent workforce, supportive of the patient-centered values of this institution.

It is through our professional practice model that we make our vision a demonstrable truth every day by letting our thoughts, decisions and actions be guided by our values. As clinicians, we ensure that our practice is caring, innovative, scientific and empowering, and is based on a foundation of leadership and entrepreneurial teamwork.

## NURSING DIRECTORS

Suzanne Algeri, RN, BSN, MSM  
*Neuroscience*

Cristina Bethune, RN, BSN  
*Electrophysiology Lab*

Sharon Bouvier, RN, MS  
*Vascular Surgery*

Nancy S. Bryant, RN, MSN, ANP-BC  
*Medical Walk-in Unit*

Susan Caffrey, RN, MSN  
*Labor and Delivery*

Theresa Capodilupo, RN, MSN  
*Surgery/Trauma*

Barbara Cashavelly, RN, MSN, AOCN  
*Cancer Center*

Coleen Caster, RN,C, MN, FNP  
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Judith Catalan, MS, APRN-BC, ACNP  
*Cardiac Surgical Intensive Care*

Scott Ciesielski, RN, MS  
*Post Anesthesia Care*

Tony DiGiovine, RN, BSN, BA  
*Burn, Transplant, Plastic and  
Reconstructive Surgery*

Linda Duggan-Johnson, RN, BSN  
*Massachusetts General Medical Group*

Darryl DuVall, CRNA, MS  
*Anesthesia*

Beth Ellbeg, RN, MS  
*Pre Admission Testing Area*

Ellen Fitzgerald, RN, MS  
*Oncology /Bone Marrow Transplant*

Marion Freehan, RN, MPA/HA, CNOR  
*Endoscopy*

Alice Gervasini, RN, PhD  
*Trauma & Emergency Surgery*

Susan Gordon, APRN, BC  
*General Medicine*

Kathryn Hall, RNCS, NP-BC, MS  
*General Clinical Research Center*

Marie Henderson, CNM, MSN  
*Midwifery*

Maryfran Hughes, RN, MSN  
*Emergency Services*

Donna Jenkins, RN, MS, CA N-BC  
*Thoracic Surgery*

Stacy Hutton Johnson, RN, MS, MBA  
*General Medicine*

Adele Keeley, RN, MA  
*Medical Intensive Care*

Linda Kelly, RN, BSN  
*Outpatient Gynecology*

Ann Kennedy, RN, BSN, MS  
*Neuroscience*

Joanne Lafrancesca, RN, MN, AOCN  
*Oncology Infusion*

Mildred LeBlanc, RN, BSN  
*Radiology*

Annette Levitt, RN, MS  
*Surgical Clinic*

Robin Lipkis-Orlando, RN, MS, CS  
*Psychiatry*

Sara Macchiano, RN, MS, MBA  
*General Medicine*

Bessie Manley, RN, MPA, HA  
*Surgical*

Catherine Mannix, RN MSN, OCN  
*Radiation Oncology*

Carol Mannone, RN, MSN  
*Internal Medicine Associates*

Mary McDonough, RN, MSN  
*Urology & Enterostomal*

Sharon McKenna, RN  
*Interventional Cardiovascular Therapy*

Brenda Miller, RN, MSN  
*Pediatric Intensive Care and Pediatric  
Ambulatory Care*

Susan Morash, RN, BSN, MA  
*General Medicine*

Lisa Morrissey, RN, MBA, CNOR  
*Main Operating Rooms*

Walter Moulaison Jr., RN, MSN, MBA  
*Anticoagulation Management Services*

Janet Mulligan, RN, MS  
*IV Therapy*

John Murphy, RN, MS  
*Neuroscience Critical Care*

Kathleen Myers, RN, MSN, APRN,  
BC, ONC, CA N  
*Orthopaedic*

Hiyam Nadel, RN  
*Ambulatory Obstetrics and MGH West OB/GYN*

Peg Nelson, RN, BSN, ACRN  
*Infectious Disease*

Judy Newell, RN, BSN  
*Pediatrics*

Claire O'Brien, RN, BSN, MBA, CNOR  
*MGH Orthopaedic Ambulatory Surgery Center*

Sylvia Perry, RN, MS, ANP  
*General Medicine*

Lori Pugsley, RN, BSN, MEd  
*Family & Newborn*

Janet Dauphinee Quigley, RN, MSN  
*Same Day Surgical Unit*

Maureen Schneider, RN, MS, CPHQ  
*Central Resource Team, Clinical Supervisors*

Peggy Doyle Settle, RN,C, PhD(c)  
*Newborn Intensive Care*

Judith Silva, RN, MSN  
*Cardiac Interventional Unit  
Interim, Cardiac Surgical Stepdown*

Colleen Snyderman, RN, MSN  
*Cardiac Intensive Care*

Amanda Stefancyk, RN, MSN, MBA  
*General Medicine*

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*Renal*

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*Cardiac Step-Down*

Susan Tully, RN, BSN  
*Surgical Intensive Care*

Maria Winne, RN, MS  
*General Medicine and Respiratory Acute Care*

## EXECUTIVE TEAM

Jeanette Ives Erickson, RN, MS, FAAN  
*Senior Vice President for Patient Care  
and Chief Nurse Executive*

Gaurdia Banister, RN, PhD  
*Executive Director, The Institute for Patient Care*

Paul Bartush  
*Co-Director, Volunteer, Interpreter, Information  
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