

Disciplines

Nursing | Chaplaincy | Child Life | Medical Interpretation | Occupational Therapy | Physical Therapy | Respiratory Care | Social Work | Speech-Language Pathology

Patient Care Services Programs

Cancer Resource Room

Caring Headlines

Center for Global Health

Child Protection

Clinical Support Services

HAVEN Program

(Helping Abuse and

Violence End Now)

Information Ambassadors

International Patient Center

Ladies Visiting Committee

Retail Shops

MGH Quit Smoking Service

Patient Advocacy

Orthotics and Prosthetics

Patient and Family Lodging

PCS Diversity Program

PCS Management Systems and

Financial Performance

PCS Clinical Informatics

PCS Office of Quality & Safety

Volunteer Services

The Institute for Patient Care

- Center for Innovations in Care Delivery
- Maxwell & Eleanor Blum Patient and Family Learning Center
- Norman Knight Nursing
 Center for Clinical &
 Professional Development
- Yvonne L. Munn Center for Nursing Research



Friends and Colleagues,

We had a remarkable year!

Our work on Innovation Units has had an incredible impact on care delivery throughout the hospital. More than 5,000 clinicians and support staff are using smart phones to enhance communication, and more than 50,000 post-discharge phone calls have been made to check on patients after they've left the hospital. Virtually every indicator is showing a rise in patient satisfaction. During the most challenging of times—because of your resourcefulness and creativity—we're improving the delivery of care, containing costs and making our systems more efficient.

Many of our staff have been recognized nationally for their many contributions to patient care and for expanding our knowledge through research and certification. We were re-designated as a Magnet hospital this year. And, together we faced the unprecedented challenges of caring for the victims of the Boston Marathon.

Thank you for your commitment to our patients and families and for striving for excellence in all our endeavors each and every day.

Best.

Jeanette Ives Erickson, RN, DNP, FAAN

Senior Vice President for Patient Care and Chief Nurse

In recent years, it has been clear to most

Americans that healthcare could not continue on a business-as-usual track. The combined challenges of an aging US population, emphasis on enhancing patient safety, pressure to contain rising costs, and the passage of the Affordable Care Act signaled dramatic change was on the horizon.

In an effort to lead the change, in March 2012, MGH officially launched 12 Innovation Units. By September 2013, the Innovation Unit approach was rolled out to all inpatient units, and by year end, the results were very promising.

Guided by a newly developed "Patient Journey Framework," the Innovation Units were designed to be safe testing grounds for new care delivery advances and ideas that would readily demonstrate which proposed changes worked and which did not. The initiative focused on improving clinical outcomes, enhancing patient and staff satisfaction, and reducing costs and length of stay.



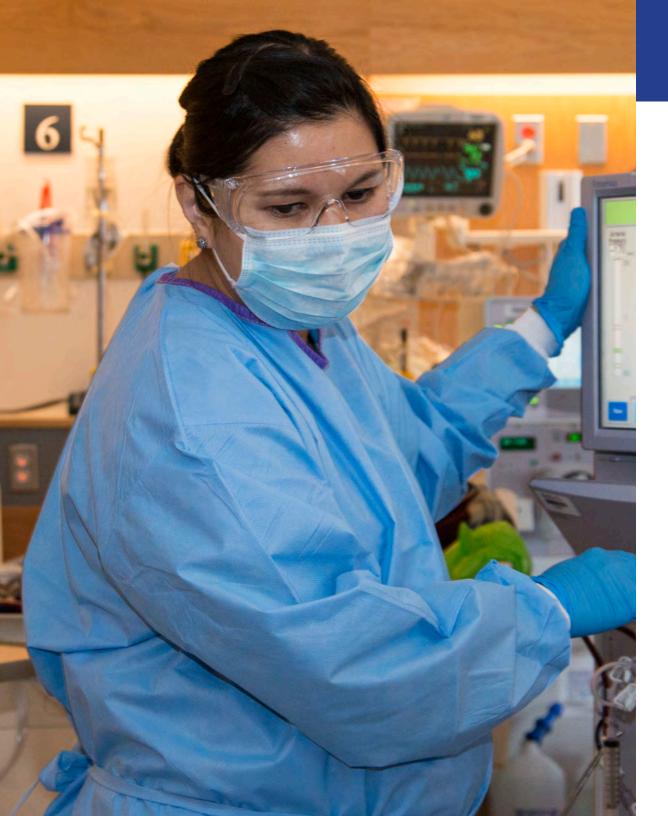


Key interventions

This massive redesign of care delivery began with Patient Care Services (PCS) leadership asking clinicians, leadership, and support staff throughout PCS and the larger hospital community for their input on how to efficiently, effectively and safely improve clinical outcomes, enhance patient and staff satisfaction, reduce costs, and decrease length of stay. The feedback—combined with the results of an extensive review of the most promising then-current research—resulted in a list of priority interventions. Over time, several interventions proved to be the key drivers of change at the front lines of care delivery:

- Relationship-based care—a theory, a philosophy, and an intervention that
 provides the foundation for the care delivered to patients and families, the
 interactions among colleagues, and the way staff regard themselves as
 individuals and caregivers. This philosophical emphasis ensured the patient and
 family remained at the center of every decision and action by the care team.
- **Domains of practice**—a deeper, across-the-board understanding of each discipline's domains of practice fosters enhanced interdisciplinary collaboration that maximizes the strengths and skills of all members of the care team.
- Attending Nurse (ARN), a new clinical role—manages the care of patients
 on a single unit throughout their stay, from admission through discharge.
 Attending nurses interact with the interdisciplinary team, the patient, and
 the family to ensure continuity and efficient care in a safe and responsive
 environment. The ARNs promote optimal patient- and family-centered care,
 identify and resolve barriers, and promote interdisciplinary collaboration among
 the entire team.
- **Estimated discharge date**—an estimated discharge date is recorded upon every patient admission to initiate planning for a smooth and safe transition.
- ARN business cards—provide contact information to establish a clear connection between the team and the patient and family to ensure access to and continuity of care.

- Welcome Packet—a "Patient & Family Notebook" provides important
 information about the team and invites input, helping to actively integrate the
 patient and family into the care plan; a "Discharge Envelope" becomes a place to
 centrally store important items such as prescriptions and educational materials,
 and also features a checklist that prompts discussion around key transition topics.
- **Daily interdisciplinary rounds**—provide a structured forum for the care team members to contribute to a patient-centered care plan.
- Purposeful hourly rounding—proactively anticipating certain care needs—pain, positioning, and personal hygiene—can go a long way toward keeping patients safe and comfortable. By bundling, or clustering, specific interventions together and performing them at regular intervals, nurses can make care more efficient and responsive to patients.
- Enhanced hand-over communication—employs a structured, reliable, and predictable hand-over process among caregivers during each care transition—a critical moment along the care continuum—to ensure all members of the team have a clear understanding of the patient's current condition, medical history, and care plan.
- Unit-based, best-in-class smart phone technology and desktop web applications—staff can send and receive instant messages and voice-call to support intraunit communication and improve patient satisfaction by bettering responsiveness and creating a quieter care environment.
- **Laptop computers**—specially programmed portable, wireless laptops to make access to, and dissemination of, information more efficient.
- Quiet hours—create dedicated blocks of time to enhance the healing environment and allow for patients to get some much needed rest.
- In-room patient white boards—standardized in-room whiteboards display key
 pieces of information, including the names of the patient's physician, nurse and
 other team members; the "goal for the day;" and space to note questions for the
 care team.



- Centralized electronic white boards—nursing station displays provide a highly-visible and centralized overview of key information across the unit that enhances the staff's ability to know patients and coordinate care.
- Follow-up discharge phone-calls—unit-based nurses call patients at home within 48 hours of being discharged as a way of supporting patients during their transition. The calls keep the line of communication open, giving patients and family members an opportunity to ask questions or raise any concerns.

Likewise, the units leveraged several newly-developed resources that help to address the needs of a growing multi-cultural, multi-lingual patient population. For example, culturegrams are written materials that provide information about a specific cultural group, which are considered within the context of their neighborhood characteristics, including cultural life, geographical challenges (such as transportation), and vulnerabilities (such as chronic diseases and social determinants of health). Unit-based Cultural Rounds are informal sessions where staff convene to discuss educational needs related to cultural diversity or concerns about equitable care.

The approach among the units was consistent: reduce variation wherever possible, implement evidence-based solutions, introduce and/or adapt technology to support practice, and foster exceptional care by ensuring that all members of the team practice to the full extent of their licensure. A newly-created Patient Journey Framework provided a blueprint for the work, illustrating the process of care before, during, and after hospitalization.

Outcomes

National evaluation

Across the board—through patient and staff surveys and focus groups—it is clear the Innovation Units are positively impacting the patient experience at MGH. Phase I units have been successful in decreasing average length of stay by 5.1% and sustaining that decrease over time. After accounting for differences in case mix, direct costs per discharge have declined. Readmissions on Phase I units have decreased slightly from 10% to 9%, while the rest of the inpatient units remained stable. Measures of patient experiences showed improvement on Phase I Innovation units at twice the rate of other units.

The most far-reaching patient survey results come from the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems), required for all hospitals across the country. It asks about key elements of the patient experience—nurse and physician communication, staff responsiveness, pain-management, cleanliness, quietness, and how well staff prepare patients for discharge. The survey asks patients to rate the care they received based on the frequency with which they experienced high-quality service, with a high rating linked to the consistency with which their needs were met. Some of the hospital's scores, including Nurse Communication, Discharge Instruction, Overall Rating of Care, and Likelihood to Recommend, are among the highest in the country.

The Innovation Unit initiative has had an incredible impact on the patient experience and survey results. At the end of 2013, the hospital's scores for nearly every HCAHPS domain had improved since the launch of Innovation Units. The majority improved at a significant rate, outpacing most other hospitals in the country. Of note, scores for cleanliness and quietness went up five points. Nursing Communication scores, which were already high, went up more than two points. Discharge Information, already well above the 90th percentile nationwide, went up another 1.5 points. Likewise, the hospital's already high "Overall Rating" and "Likelihood to Recommend" scores also improved.

2013 -Inpatient HCAHPS Results

Measure	2012	2013 Final Scores	2012- 2013 Change
Nurse Communication Composite	81.0	81.9	+.9
Doctor Communication Composite	81.6	82.5	+.9
Room Clean	72.9	74.5	+1.6
Quiet at Night	48.5	50.2	+1.7
Cleanliness/Quiet Composite	60.7	62.4	+1.7
Staff Responsiveness Composite	64.9	64.7	2
Pain Management Composite	71.9	72.3	+.4
Communication About Meds Composite	64.0	65.5	+1.5
Discharge Information Composite	91.2	91.8	+.6
Overall Rating	80.1	81.2	+1.1
Likelihood to Recommend	90.5	90.4	1

2013 Data Complete for Calendar Year 2013 All Scores reflect Top-Box % Date Pull: 2/18/14

58

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MGH evaluation

In an effort to better understand the impact of the Innovation Unit interventions, researchers from The Yvonne L. Munn Center for Nursing Research, gathered, measured and evaluated a variety of key quantitative and qualitative data.

Qualitative feedback from focus groups and surveys with staff highlighted specific themes:

- a palpable change in the organizational culture to respond to health reform needs
- the value of the new attending nurse role in care delivery
- the work has been challenging, but the impact on patient care is well worth it

Likewise, focused observations and interviews conducted with patients and staff, clearly demonstrated that Innovation Unit interventions were becoming part of the culture. Of those patients who were surveyed:

- more than 95% reported feeling included as part of the care team
- call bells were answered promptly 88% of the time
- they were asked about pain during hourly rounding 93% of the time, and
- if anything else was needed 96% of the time

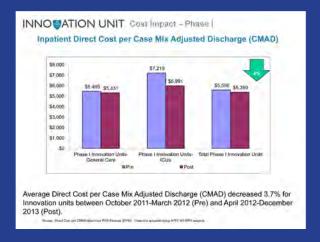
Of the clinicians who were surveyed:

- 100% were able to speak to the role of attending nurse
- more than 92% were able to share an example of relationship-based care
- 92% reported that interdisciplinary rounds were occurring at scheduled times on their units.

Additionally, every 18 months, the Staff Perceptions of the Professional Practice Environment Survey reports the perceptions of PCS clinicians regarding the strengths and weaknesses of the clinical practice environment at MGH. It is essentially a "report card" designed to evaluate clinicians'



Phase I units have been successful in decreasing average length of stay over time, resulting in a 5.1% decrease in aggregate over baseline.



overall satisfaction with the environment in which they practice. In 2013, more than 1,830 individuals or 42.3% of staff completed the survey, revealing the following findings:

- Clinicians continue to agree that the professional practice environment characteristics of Autonomy/Leadership, Control over Practice, Clinician-MD Relations, Communication about Patients, Teamwork, Handling Disagreement and Conflict, Internal Work Motivation, and Cultural Sensitivity, are important elements within the MGH practice environment.
- Overall, 86% of staff reported that they were satisfied or very satisfied working at MGH.
- More than 31% of clinicians (580) who responded to the survey provided additional written responses. In general, respondents reported:
 - they enjoy working at MGH
 - are proud of their contributions to patient care
 - want increased standardization around innovation strategies
 - value supportive leadership, teamwork and effective communication; and
 - are satisfied with their personal development and voice in advancing patient care

These evaluation efforts have helped us better understand the needs of our patients, families and colleagues and how to better meet those needs; identify objectives that are achievable and measurable; monitor progress more effectively and efficiently; and identify best practices.

Today, the work of the Innovation Units continues to be expanded and refined. Interventions that have been successfully trialed are being rolled out throughout the hospital. The ARN role is being further studied to better standardize the role, while still allowing for differences among units to accommodate their specific environments and patient populations. Staff continue to bring forward new ideas for improving care delivery that are then tested, evaluated and either abandoned or spread to other patient care units. Likewise, the lessons learned are being shared through articles in peer-reviewed journals, presentations at professional conferences, in books and even through the general media. Care delivery throughout the United States is on a new path, and the MGH Innovation Units are well positioned to lead the charge.



Marathon Monday

The third Monday in April annually marks the celebration of Patriots Day—the anniversary of the shot heard round the world—when a group of colonists defied great odds to claim freedom from tyranny. The day also traditionally marks the running of the Boston Marathon. In 2013, on a day that celebrates the human spirit and determination, triumphs small and large, we witnessed the unimaginable as our city and our neighbors fell victim to an act of terror. This tragic event shook our community—in fact, our nation—to its very core.

Yet somehow, in the aftermath, the tragic events that unfolded revealed a moving determination to "get through this together" that defines us as a people. A sense of community—a spirit of "Boston Strong"—emerged that defies the imagination.

The now iconic images from the Marathon's finish line show everyday heroes running toward the danger, toward the unknown, with the instinctual reaction to help a fallen stranger—a neighbor in distress. Makeshift tourniquets of belts and the clothing from fellow spectators helped stop the bleeding of the most severely injured. And in the neighboring medical tent, volunteer clinicians who just minutes before were treating blisters and hypothermia, were suddenly handling what could just as easily have been battle wounds.

Meanwhile, less than 10 blocks away, the Mass General was coming together as never before in preparation for the expected casualties. The hospital called a "Code Disaster" that triggered a plan years in the making. Throughout the MGH community, beepers, cell phones, and overhead pagers sounded the call, uniting clinicians from all disciplines and staff from all areas of the hospital in an instant. "Everyone worked together

to achieve a level of efficiency and teamwork seldom seen in events of this magnitude," says Jeanette Ives Erickson, RN, DNP, FAAN, senior vice president for Patient Care and chief nurse. "It was truly a privilege to witness the MGH community as it rose to the challenge."

The Emergency Department (ED)—already actively treating 97 patients—
needed to be prepared to receive the incoming trauma patients. Doctors and
nurses shifted patients who could safely be moved from the ED's acute area.
Throughout the hospital, patients awaiting discharge were expedited and any
vacant beds or rooms were prepared for patients who needed to be admitted.
As the first of 39 victims arrived in the MGH ED, medical teams worked
swiftly and deftly to treat the traumatic injuries; nurses helped to stabilize
and comfort patients, push meds, and gather any basic information that
might help reunite them with their families. Respiratory therapists
quickly intubated patients, placed them on ventilators, and
monitored their breathing as they accompanied them to
surgery. Perioperative staff prepared multiple operating rooms
and readied teams to handle the severe trauma cases that were

At the same time, countless family and friends of the Marathon victims were searching the city for their loved ones. Staff from The Institute for Patient Care, Social Service, Psychiatry, Nursing, and Chaplaincy united to transform the Maxwell & Eleanor Blum Patient and Family Learning Center into an emergency family support center. "Family members and friends were either separated after the bombings or saw the news and were desperately trying to find their loved ones," says Brian French, RN, PhD(c), director of the Blum Center. "We did everything we could to provide information and comfort in those most difficult moments as they searched or waited for updated information."

heading their way.



Staff on the care units where the patients would ultimately be admitted—Bigelow 13 Burns/Plastics; Blake 12 ICU; Ellison 4 Surgical ICU; Ellison 6 Orthopaedics & Urology; Ellison 7 Surgical; Phillips 22 Surgical; White 6 Orthopaedics & Oral-Maxillofacial; and White 7 Surgery/Trauma—made preparations. Cooperation among various units ensured safe transitions without delay as ICU patients who were ready to be transferred to a general medical unit were moved. Rooms were cleaned and prepped. "Everyone everywhere wanted to jump in and help in any way they could," says Mary McAuley, RN, MS, nursing director of the Blake 12, Medical Surgical ICU. Throughout the hospital, off-duty staff volunteered to come in, staff from neighboring units extended offers of help to colleagues. Staff again came together with the sole purpose of doing all that they could for their patients and their families.

And as patients, families and staff began to move past the initial shock and medical urgency, the emotional impact of the tragedy began to surface. Many of the staff caring for some of the younger patients were of a similar age. They saw themselves in their own patients. As the extent of the patients' injuries became known, it became equally apparent how dramatically their lives would change. Despite the unfailing positive outlook of each patient—described by Ives Erickson as "the most resilient group I have ever met in my life"—the weight of the events took its toll, on the patients, on their families and on the staff. Social Service, Chaplaincy and the Employee Assistance Program (EAP) ensured that someone was assigned to each patient and unit involved in direct care of the Marathon patients to provide ongoing comfort and guidance.

The Mass General community then began to come together for one another to provide emotional support through prayer services, expressions of hope written on prayer trees in the MGH chapel, and musical offerings in the lobby. And when the MGH community learned that one of its own—Jessica Kensky, RN, a nurse on Lunder 10 Oncology—had been severely injured in the

bombing, the community once again rallied. Although Kensky was at another Boston hospital, her unit organized 24/7 coverage, ensuring that one of her colleagues was with her every single day of her hospitalization. And knowing she faced a prolonged recovery, members of the MGH community—fellow nurses, cafeteria workers, buildings and grounds and many other departments—collectively donated nearly four years of vacation and sick time to ensure she would continue to be paid throughout.

Likewise, there was a tremendous outpouring from the larger community to support the patients, families and staff in the wake of the bombings. Pizza deliveries were sent to the hospital from North Carolina and California. Local bakeries sent dozens of cupcakes to caregivers. Prayers, offerings of hope and of thanks poured in from individuals and organizations throughout the country and the world. Hundreds of origami "peace cranes" arrived by the boxes. Countless posters, cards, letters, and drawings lifted hearts and connected new neighbors across state lines. The New England Patriots came in and raised spirits. The Red Sox visited and made personal connections with patients, families and staff. Government officials stopped in—Governor Patrick, Congressman Kennedy, Senator Warren, and others. And we were honored when President Obama made time to visit the hospital, greet staff and talk one-on-one with each of our Marathon patients.

On a day in which we traditionally celebrate the human spirit and determination, triumphs small and large, we came together in ways unimaginable. We provided the best of care to our patients and their families when they were at their most vulnerable. We cared for one another—deeply and beyond the prescribed course. And we learned from one another—about our strengths and the power of the human spirit—the power of community. We rose up, one-by-one and as a whole. We bore witness to acts of kindness and generosity of spirit that brought comfort and joy where it was most needed. We are better for it, and we will never be the same.



Magnet redesignation "...is about transformational



At a special meeting held May 6, 2013—on the heels of a very challenging time in Boston and at MGH—Patient Care Services leadership learned of some good news. Executive director of the American Nurses Credentialing Center (ANCC), Karen Drenkard, RN, PhD, NEA-BC, FAAN, and chairperson of the Commission on Magnet, Patricia Reid Ponte, RN, DNSc, FAAN, NEA-BC, delivered the news in person that MGH had been redesignated a Magnet organization.

Above and beyond this prestigious designation, the ANCC recognized MGH with four exemplars recognizing documented nurse satisfaction that outperforms the national benchmark; structures and processes used to develop, expand, and/or advance nursing research; innovations in nursing practice; and, the degree to which the nursing and hospital community and the community at large—local, state, national and international—recognize the value of nursing within the organization

"Magnet is...recognition of highly collaborative, interdisciplinary teamwork," said Drenkard. "It's not just about nursing. It's about transformational change where patient care is the central focus—where everyone works together to meet the needs of the patient."

Magnet recognition is the highest and most prestigious international distinction a healthcare organization or hospital can receive for nursing excellence and outstanding patient care. It is considered the "Gold Standard" for nursing practice in all settings, and by extension, the highest standards of quality and safety in patient care. In 2003, MGH became the first hospital in Massachusetts to achieve Magnet recognition from the ANCC and was re-designated in 2007 and 2013.

change where patient care is the central focus..."

— Karen Drenkard, PhD, RN, NEA-BC, FAAN, executive director of the American Nurses Credentialing Center

"You are leaders of a community of those committed to a higher level of patient care," said Reid Ponte. "Magnet recognition is not an award; it is a credential that recognizes your team as having met and exceeded the criteria known to be synonymous with

positive patient outcomes, nursing satisfaction and patient satisfaction."

As part of the Magnet evaluation, hospitals must submit written evidence that addresses the five components of the Magnet Model: transformational leadership; structural empowerment; exemplary professional practice; new knowledge, innovations and improvements; and, empirical outcomes. The submission is then evaluated by a team of Magnet appraisers.

Organizations achieving a particular score or above are then visited by a Magnet appraiser team, which conducts a three-day site visit to ensure that the practice environment accurately reflects the evidence submitted.

Under the steady leadership of Marianne Ditomassi, RN, DNP, MBA, MGH submitted a whopping 5,024 pages of evidence

Although MGH clinicians live and breathe patient- and familycentered care every day, articulating their practice can feel foreign

(pictured) to the ANCC.

to some. To help prepare the MGH community for its site visit, an MGH Magnet Committee provided a variety of resources, including a robust web site on the Excellence Every Day portal, a Magnet Q&A pocket Resource

Guide; a Magnet Monday newsletter that focused on a new topic every week and a complementary weekly Magnet Lunch Forum that

featured presentations by subject matter experts

and was streamed to computers throughout the MGH; and distributions of Nursing Sensitive Indicators and outcomes (including quality indicators, patient satisfaction and staff satisfaction).

"The MGH community shined during its site visit," said Jeanette Ives Erickson, RN, DNP, FAAN,

senior vice president for Patient Care and chief nurse. "From curbside to bedside, from our neighborhood clinics to our Innovation Units, the Magnet appraisers saw a dedication to patients, families and one another that sets the highest standards of care."

"As a true learning organization, we are thrilled and honored to participate in the Magnet journey," said Ives Erickson. "More than being a wonderful opportunity to share our own practice, this process is an invaluable opportunity for us to learn about best practices throughout the world."

milestones



CPE 15th Anniversary

The Clinical Pastoral Education (CPE)

Program for Healthcare Providers at MGH marked its 15th anniversary. Designed to help integrate spiritual caregiving into clinical practice, more than 100 healthcare providers have gone through the program.

To mark the program's 15th anniversary, the Chaplaincy Department offered a special symposium on spirituality and health and held the inaugural Richard Clarke Cabot CPE lecture. In

the 1920s, MGH internist Richard Clarke Cabot, MD, and colleague, Reverend Russell Dicks, felt chaplains and caregivers needed education to effectively help the sickest patients and families move toward spiritual health and satisfaction with their hospital stay. The lecture was created to promote Cabot's values of action versus contemplation; the complementary relationships of clinicians and chaplains; treatment of the whole person; and to educate clinicians about their shared responsibility to honor and address patients' spiritual needs.

Featured speaker, Andrea Enzinger, MD, shared her research related to seeking greater understanding of the psychosocial and spiritual needs of patients with advanced cancer. CPE graduates, Sarah Brown, RN, and Darcy Roake presented a case study demonstrating best practices in collaborative caregiving. A interdisciplinary panel of healthcare providers spoke of the benefits of spiritual care and how it can heal both the patient and the healer. Several clinicians shared how they had established palliative care programs within their own settings as a result of their training in spiritual care.

The CPE Program for Healthcare Providers is supported by the Schwartz Center for Compassionate Healthcare and operated by the MGH Chaplaincy under the direction of Angelika Zollfrank, MDiv, BCC CPE supervisor.



ELSO honor

In 2013, MGH was designated a Center of Excellence by the Extracorporeal Life Support Organization (ELSO), an international consortium of healthcare professionals that

is dedicated to developing and evaluating therapies that support failing organs. ELSO recognizes extracorporeal life-support programs that distinguish themselves by promoting excellence and exceptional care in extracorporeal membrane oxygenation (ECMO). MGH was honored for its consistently high level of performance, innovation, satisfaction, and quality in delivering safe, evidence-based care.

This honor particularly recognizes the care provided by the hospital's respiratory therapists, perfusionists, and surgeons (Cardiac and Pediatric), and the nurses and intensivists of the Cardiac Surgical, Medical, Neonatal and Pediatric ICUs, and the Heart and Lung Transplant services.

MGH was also recognized for excellence in training, education, collaboration, and communication in supporting ELSO guidelines. Becoming a designated Center of Excellence signifies to patients and families that the hospital is committed to exceptional patient care and the highest standards of quality and safety. The MGH Extracorporeal Life Support program met or exceeded all requirements of the ELSO.

Speech-Language Pathology training a national model

In the typical model, graduate students who are doing their speech-language pathology clinical rotation can become narrowly focused on acquiring discipline-specific knowledge. In reality, the patients with whom they interact can present with a variety of medical conditions that directly impact a clinical assessment and recommendations. Recognizing an opportunity



to broaden the clinical maturity and knowledge of these students, the MGH Department of Speech-Language and Swallowing Disorders launched a program that is already gaining national attention.

Students in their second year of a two-year program, are now placed three days a week on clinical rotation with an inpatient speech-language pathologist (SLP). On the fourth day, the morning is dedicated to debriefing about their patient experiences with program coordinator Rebecca Inzana, MS, CCC-SLP. "The goal here is to open their eyes and minds to the whole patient, to foster their clinical thinking," says Inzana. The afternoons are spent in workshops designed to give the speech-language pathology students a broader foundation of clinical knowledge. Topics include cardiac, renal, pulmonary and immune systems, presented with an SLP perspective that helps the students understand the potential impact on a patient's language or swallowing abilities.

"The program helped me develop an invaluable foundation for clinical decision-making," says Shaina Sawyer, MS, CF-SLP, who was a student in the program's first rotation. "My subsequent transition to full-time work in the clinical setting was almost seamless."

Inzana will be sharing the successful model with colleagues from across the country via a poster presentation at the 2014 American Speech-Language-Hearing Association's Health Care & Business Institute.



National Nurse of the Year

MGH celebrated as Julie Cronin, RN, MSN, OCN, was named the national recipient of the 2013 Giving Excellence Meaning (GEM) Excellence Award for Clinical Inpatient Nursing by Nurse.com. The award recognizes nurses who demonstrate superior clinical knowledge and skill and apply them in ways that impact quality of care and patient outcomes. The award was formally presented at a ceremony in the hospital's Trustees Room, where Cronin was joined by family, friends, colleagues, and leadership of Nurse.com.

Cronin began her career at MGH as a Ghiloni Fellow in 2006, having earned the prestigious fellowship that gives nursing students an opportunity to explore oncology nursing. Today, she is the clinical nurse specialist on Phillips House 21, Inpatient Gynecology/Oncology, where she co-created a New Graduate Nurse Mentoring Program and partnered with a staff nurse and a doctorally-prepared Nurse Ethicist to implement monthly Ethics Rounds. Cronin also has led unit-based education on how to bring innovative ideas and care redesign recommendations from the staff nurse to the bedside through a program titled Care Innovations and Transformation, (CIT), sponsored by the American Organization of Nurse Executives, (AONE). The knowledge and outcomes from this innovative work have been shared both internally throughout the hospital and nationally through the grant program.

eBridge

In the spring of 2016, MGH will "go live" with Partners eCare, a new common electronic health record (EHR) system that will allow medical record sharing in real time. Partners eCare is being introduced Partners-wide and will span inpatient, outpatient, ambulatory, surgery, emergency, billing, scheduling, and patient portal activity.

The hospital's "eBridge" initiative—rolled out to clinical staff beginning December 2013 —is designed to help prepare the MGH community for this move to Partners eCare. This "bridge" to Partners eCare involves the electronic notes documentation software for nurses, physicians and other health professionals. For Nursing, eBridge involves the use of a template that is specifically designed to structure a plan of care concept along with the progress note. Ultimately, Partners eCare will employ a structured plan of care activity that will support a problem-oriented charting style. The Nursing template in eBridge begins the transition to this problem-oriented charting style, while communicating a plan of care for the patient and reflecting the nurse's assessment on the patient's progress. Once the clinical aspects of Partners eCare are up and running, eBridge will be phased out.

For more information, visit the eBridge portal page at http://www.mghpcs. org/eed portal/eBridge.asp.



was appointed director of PCS Informatics. Garber most recently served as chief nursing officer for Informatics at the Swedish

Medical Center, the largest non-profit health provider in Seattle, encompassing five campuses and more than 11,000 employees. There she supported clinical nursing practice through information technology and by aligning clinical standards, regulatory requirements, clinical education, and clinical-information technology. Her work around streamlining nursing care plans, admission screening, patient-education documentation, and progress notes earned national attention. She previously served as administrative director of Clinical Transformation, where she focused on making care more efficient.

Garber is an experienced educator, having served as director of Education, Communications, and Support and education manager for Clinical Information Systems. She was responsible for on-site support and communication strategies and designed, implemented, and managed education on the systemwide implementation during Swedish Medical Center's conversion to an integrated electronic medical record, an effort similar to the Partners eCare initiative.



National Social Worker of the Year

Karon Konner, LICSW, an MGH clinical social worker, was named social worker of the year by the National Association of Social Workers (NASW). The award honors NASW members who exemplify the best of the profession's values and achievements, demonstrate outstanding leadership, contribute to a positive image for social work, and take risks to achieve outstanding results.

Konner completed her second field placement at MGH as a graduate student at Simmons School of Social Work, and she was hooked. While in most hospital settings, the primary responsibility of social workers is discharge-planning, at MGH, social workers are able to use their clinical expertise to help patients and families better cope with illness and disability.

Embracing this philosophy and approach, Konner has played a key pioneering role in MGH's 'Team 5', an approach designed to help a population of patients who require a higher level of interdisciplinary care and collaboration to fully meet their medical and psychosocial needs. The social worker is responsible for developing a cohesive picture of the patient's life that enables the team to develop effective treatment plans and ensure continuity of care.

Konner also serves as Social Services' conservatorship consultant and as part of the hospital's guardianship team, working with colleagues from the Office of General Counsel and Psychiatry to determine a patient's mental capacity and deciding on the best plan of care for patients.

Hausman Nursing Fellowship

an additional class of students.

Since its inception six years ago, the Hausman Nursing Fellowship to Advance Diversity has seen a marked increase in applications for qualified candidates. This year, Patient Care Services expanded the program to host

The Hausman Nursing Fellowship program was created to better meet the needs of the hospital's diverse patient population, to promote recruitment of minority nurses, and to provide opportunities for senior nursing students to work under the mentorship of minority nurse preceptors.

Funded by the Hausman family, the Fellowship offers students a rigorous six-week clinical experience. Fellows are assigned a minority nurse preceptor who supports and guides



participants in building a body of personal nursing experience. This year MGH attracted students from several schools, including Boston College, Simmons College, and Villanova University.

Ashley Lewis, a student at Pace University in New York, summed up the impact the program is having. "The Hausman Fellowship gave me what I could never have found or bought anywhere else—confidence, assertiveness and exposure to many, many different nursing skills."



was named director of
Patient Care Services
Management Systems and
Financial Performance.

She previously served as the director of Finance and Business Operations for the Weill Cornell Medical Center, PeriOperative Services Department, at New York-Presbyterian Hospital. There, she oversaw a budget of nearly \$80 million and was responsible for Central Sterile Processing, Materials Management, Equipment Services, Anesthesia Technicians, Billing and business operation needs of the department.

Previously, she served as a strategic sourcing manager in the Procurement and Strategic Sourcing Department at New York-Presbyterian, and as a strategic planning analyst for Globix Corporation, a provider of Internet infrastructure services for business customers. While studying for her Master of Business Administration (MBA), she was awarded a financial operations internship with the United Nations Office of Project Services (UNOPS), the project management arm of the U.N. system.



A career of distinction

Sally Millar, RN, MBA, veteran nurse leader and beloved colleague of so many in the MGH community, retired September 27, 2013, capping off a truly illustrious 45-year career. Serving most recently as director of PCS Informatics and interim director of PCS Financial Management Systems, Millar's leadership had at times included the MGH Office of Patient Advocacy, the Maxwell & Eleanor Blum Patient and Family Learning Center, and co-chairmanship of the MGH Clinical Policy and Records Committee and the Partners Confidentiality Program. In May, Millar was named the recipient of this year's Marguerite Rodgers Kinney Award for a Distinguished Career by the American Association of Critical-Care Nurses for her exemplary achievements. It's fair to say that Millar's contributions over the past four decades played an integral part in the success of Patient Care Services as it evolved into the cohesive, interdisciplinary entity it is today. It's also fair to say that Millar's retirement after 44 years at MGH, marks the end of an extraordinary and memorable era. Said Millar, "I look at my career as being part of an orchestra. I've been blessed to be surrounded by five-star cellists, violinists, drummers, harpists, and the like. They've made me who I am today. To me, this award honors the entire orchestra and the beautiful music we know as nursing practice."



Munn Grand Rounds

In an effort to bring frontline nursing research to the broader hospital community, The Yvonne L. Munn Center for Nursing Research initiated the Munn Nursing Research Grand Rounds. The inaugural offering featured updates from the nursing research scholars of the Connell Nursing Research Scholars Program, which is supported by funding from the William F. Connell family. Jeffrey Adams, RN, PhD; Paul Arnstein, RN, PhD, FAAN; Susan Lee, RN, PhD, NP-C; and Peggy Settle, RN, PhD,

discussed the evolution of projects they began in 2012, and their journeys to secure funding to continue their work. Adams' work focuses on nursing leadership influence over the professional practice environment; Arnstein's is on pain management with a special emphasis on older adults; Lee discussed an intervention bundle of family support in the ICU; and Settle is continuing her research on the impact of continuity of care on growth in premature infants.

The 2013 cohort includes Stephanie (Ball) Kwornik, RN, DNS; Sara Looby, ANP-BC, PhD, FAAN; Katherine Rosa, FNP-BC, PhD; and Mary Sullivan, ANP-BC, PhD. Ball and Sullivan are focusing on preventing hospital-acquired infection by testing nursing interventions. Looby is continuing her work with HIV+ women with a focus on symptom-management for HIV+ menopausal women. And, Rosa is developing methodologies to achieve pattern recognition in relationship-based care for those with chronic conditions.

Munn Nursing Research Grand Rounds will take place at least four times a year, with presentations focusing on nurse-led research initiatives. Presentations will vary in format to allow for dialogue and participation by other researchers and attendees.



Tara M. Tehan, RN, MSN, MBA, NE-BC, nursing director of the Neurosciences Intensive Care Unit at MGH, was named president-elect of the American Nurses

Association—Massachusetts (ANA-MA), formerly called the Massachusetts Association of Registered Nurses (MARN). She succeeded Gino Chisari, RN, DNP, director of The Norman Knight Nursing Center for Clinical & Professional Development at MGH.

As the incoming president of ANA-MA, Tehan will be responsible for working with the executive director and Board of Directors to establish the guiding principles, policies, and mission of the organization. MARN is a constituent member of the American Nurses Association (ANA) and is recognized as the voice of registered nursing in Massachusetts through advocacy, education, leadership and practice.



Outpatient PICC program launched

In 1980, the MGH IV Team began placing peripherally inserted central catheter (PICC) lines for inpatients. PICCs are a central line that can be used to deliver specific drugs, nutritional support and other intravenous (IV) fluids, and to draw blood. It is a particularly reliable device for delivering IV medications and fluids over the course of weeks or up to a year of therapy without requiring multiple needle sticks.

By 2011, the team was placing 4,500 PICC lines a year. Based upon an increasing demand, the team expanded PICC services to outpatients, and the program has continued to grow. As a result, hundreds of patients have required fewer repeated venipunctures; had a reduced risk of complications that are associated with central lines placed in neck or chest; and have experienced an improved on-time delivery of IV therapies.

All patients are treated in the Wang 3 Center for Perioperative Care (CPC), and the team of clinical experts in vascular access is trained in the use of cutting-edge technology. For more information about the Outpatient PICC Program, please visit the Central Lines portal at www.mghpcs.org/eed_portal/EED_centrallines.asp

Resource nurse forums

Unit-based resource nurses are responsible for helping nursing directors to coordinate unit-based activities. It is their responsibility to distribute a unit's resources in an ever-shifting environment of care. This spring, more than 200 resource nurses from a variety of patient-care settings attended the first in a series of leadership-development forums specifically designed to support staff in this important role.

A collaborative effort of nursing directors and clinical nursing supervisors, the Leadership Development Forum is meant to advance patient-centered care by supporting collaboration and communication. The curriculum includes an overview of patient acuity, the current healthcare environment, capacity-management, and CODE HELP—an MGH initiative designed to reduce overcrowding in the Emergency Department.

"The forum provided a great opportunity to discuss challenges and share best practices," says resource nurse Christie Majocha, RN. "It allowed us to better understand the factors that can contribute to delays and miscommunication between units and to talk about ways to overcome them."

Likewise, participants shared strategies for resolving conflict among staff, family members and patients. "Hearing different approaches helped me to think about ways I could address certain situations—how to deal with disruptive behavior, optimize C-BEDS utilization, maximize the support of nursing supervisors—while still being true to my values and abilities," Majocha added.

Feedback from participants was overwhelmingly positive, and plans are underway for more leadership development forums.



Roberta Raskin Feldman, RN, BA, MSN, After 35 years of distinguished service to MGH, professional development specialist, Roberta Raskin Feldman, RN, BA, MSN, has retired. At a reception in her honor, December 21, 2012, scores of well-wishers (and one simulation mannequin) came together to give her a heartfelt send-off.

Gino Chisari, RN, DNP, director of the Norman Knight Nursing Center, calculates that Raskin Feldman taught more than 50,000 students in the course of her career as professional development specialist and, prior to that, a clinical educator.

A graduate of the MGH School of Nursing, Raskin Feldman began her career as a staff nurse on the former Baker 8, served as a Basic Life Support instructor for 30 years, and participated on the Critical Care PCA Orientation Team. Her positive attitude, quick wit, and nurturing teaching style will be missed, but the MGH community wishes her well in the next chapter of her life.



Colleen Snydeman, RN, MSN, PhD(c), NE-BC, former nursing director for the Ellison 9 Cardiac ICU, was named director for the PCS Office of Quality & Safety. In her 31-year career at MGH, Snydeman has served in many roles, including clinical nursing supervisor, nurse manager for the Thoracic Surgery Unit, and nursing director for the Respiratory Acute Care Unit (RACU),

which she helped open in 2000. Largely due to Snydeman's leadership in the Cardiac ICU, MGH was one of seven hospitals in the region accepted into the American Association of Critical-Care Nurses Clinical Scene Investigator Academy, which supports staff nurses implementing evidence-based practice initiatives to improve patient outcomes.

Snydeman has a strong track record of enhancing quality and safety through her participation in system-wide improvements in codes, emergency response and rescue, education, and teamwork. She successfully created a unit-specific, multi-disciplinary team to deliver newly developed, highly specialized care for RACU patients. For the past seven years, she has co-chaired the MGH Code and Emergency Response Committee. She also co-chaired the MGH Rapid Response Implementation Committee, strengthening MGH's ability to respond quickly to patients with clinically-deteriorating conditions. She co-led the Physiologic Monitoring Criteria Task Force that created the current risk-assessment criteria for ECG and pulseoximetry monitoring. She also is co-chair of the Critical Care Clinical Operations Committee.



Waiting area renovation
The Grey Family
Waiting Area (GFWA) is a space where volunteers provide support to families waiting for news of a loved one who is

undergoing surgery. For many, this can be a particularly difficult and stressful time as they wait for updates. In an effort to create a more warm and comfortable space for the family and friends of patients, the Waiting Area recently underwent a complete renovation. Upgrades include new flooring, upgraded couches and chairs, computer desks, complimentary lockers for short-term storage, and new window treatments to soften the overall look and feel of the room. Other significant functional improvements—and stress relievers—include the addition of both area-wide wifi access and multiple wall and lamp-based electrical outlets for charging phones and laptops. According to the GFWA volunteers, the changes have been hugely satisfying.



Private suffering

Because pelvic floor-related issues are not often discussed outside of a clinical setting, help can be difficult to find. Patients often experience a "private suffering" that becomes an accepted part of life. Adults may experience

symptoms associated with a colostomy, prostatectomy, or childbirth, and children may suffer from chronic constipation. Patients' lives are hugely impacted, with many unable to travel or leave their homes because they have to remain near a bathroom, and others experiencing chronic and often debilitating pain.

This year, the addition of two full-time physical therapists to the hospital's Pelvic Floor Program, helped extend targeted care to hundreds of additional patients. The program is structured to thoroughly assess the patient, identify the problem, and develop a comprehensive and targeted treatment plan." Along with potential medical interventions, there is a huge educational component associated with many pelvic floor conditions," says Elizabeth Cole, PT, WCS, CLT-LANA, a senior physical therapist with the program. "Through a structured physical therapy approach, we're able to help patients manage a once uncontrollable condition that dominated their lives." Patients, once house-bound, have been able to return to activities they thought unimaginable—going back to work, traveling overseas, working out in a gym, and, in some cases, even walking again.

Patients are "trained" to correctly use muscles they previously never consciously had to think about. Therapy helps them to identify, target and strengthen these areas to improve function. More complex cases are managed by a team approach that might also include mental health or pain management services.

"We are seeing patients who have lost control of their most basic bodily functions," Cole says. "It's amazing to see the progress they can make through targeted therapy. What's better than seeing someone reclaim their place in the world?"

Restraint reduction

Occasionally, it is important to help a patient keep from harming themself or someone else, including their family visitors or caregivers. Because the use of physical restraints can present a safety concern, they are generally used only as a last resort.

Collaborative work among nurses and occupational therapists on the Blake 11 Psychiatric Unit has produced an effective, reliable approach that has reduced the need for physical restraints for patients with behavioral issues. The approach is focused on stimulating patients' senses—vision, hearing, taste, or proprioception—to produce responses that mitigate escalating behaviors. Examples of interventions designed to stimulate various senses include a large saltwater aquarium with brightly colored fish and coral; weighted blankets; koosh balls; colored blocks; puzzles; back and neck massagers; and relaxation tapes.

The interventions were initially identified by occupational therapists based on their assessment of and collaboration with patients. They identified certain interventions as calming and incorporated these into the patient's plan of care. Today, the interventions are standard practice on the unit and used regularly by nurses, patient care associates, psychologists, and physicians.

On Blake 11, patients are encouraged to self-select sensory activities that they find calming, which increases their effectiveness and leads to reduced restraint use. This work has become a central focus of the PCS Restraint Solutions in Clinical Practice Committee, which was instrumental in introducing the interventions to the Emergency Department's Acute Psychiatric Service. In response to the success of sensory interventions in psychiatry, the occupational therapy department created a Sensory Task Force to develop a plan for translating this approach hospitalwide to improve quality of care and participation of patients in their recovery.

The Mass General 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.

PROFESSIONAL ACHIEVEMENTS

PATIENT CARE SERVICES

Jessica Berry, RN

Oncology, Lunder 9
Marie C. Petrilli Oncology Nursing Award

Elizabeth Caraballo, OTA

Occupational Therapy Norman Knight Excellence in Clinical Support Award

Lisa Dovle, RN

Oncology, Phillips 21 Marie C. Petrilli Oncology Nursing Award

Cynthia Goodwin

Blood Transfusion Service Anthony Kirvilaitis Partnership in Caring Award

Rev. John Kearns

Chaplaincy

Stephanie M. Macaluso, RN, Excellence in Clinical Practice Award

Lisa Kensky Downes, RN

Oncology, Lunder 10 Marie C. Petrilli Oncology Nursing Award

Caitlin Laidlaw, LICSW

Social Services
Brian M. McEachern Extraordinary Care
Award

Jesse Mackinnon, RN

Oncology, Lunder 9 Norman Knight Preceptor of Distinction Award

Gabriela Montecinos

General Medicine, White 8 Anthony Kirvilaitis Partnership in Caring Award

Julie MacPherson-Clemets, RRT

Respiratory Care Stephanie M. Macaluso, RN, Excellence in Clinical Practice Award

Alexa O'Toole, RN

Newborn Unit, Blake 13 Stephanie M. Macaluso, RN, Excellence in Clinical Practice Award

Antonia Pucillo, RN

Oncology, Lunder 9
The Paul W. Cronin and Ellen S. Raphael
Award

Katherine Rosa, FNP-BC, PhD

Clinical Research Center, White 13 Connell Nursing Research Scholar Award

Michael Tady, RN

Medical Intensive Care Unit, Blake 7 Jean M. Nardini, RN, Nurse Leaders of Distinction

Pamela Tobichuk, RN, BSN

Case Management
Stephanie M. Macaluso, RN, Excellence in
Clinical Practice Award

Purris Williams, RRT

Respiratory Care Services
Mary Forshay Scholarship, MGH Patient
Care Services

MGH

Ryan Adams, RN

Medical Intensive Care Unit Nursing Appreciation Award, MGH Department of Medicine Residents

Jordan Hampton, RN, MSN, CPNP

Pediatric and Adolescent Medicine Donna Marie Grenier Excellence in Nursing Award

Susan Sannella, PT, DPT

Physical and Occupational Therapy, MGH Chelsea Shining Star Award, MGH Chelsea HealthCare Center

STATE AND REGIONAL

Mimi Pomerleau, DNP, RNC-OB

Obstetrics, Ellison 13 Rita P. Kelleher Award, William F. Connell School of Nursing, Boston College

NATIONAL

Julie Cronin, RN, MSN, OCN

Gynecology/Oncology, Phillips 21 Nursing Excellence GEM Award for Clinical Nursing, Inpatient, NURSE.com

Elizabeth Henderson, RN, MSN, MS

Burns Unit, Ellison 14 Nahoko Harada, ANP Angela Amar, RN, PhD, FAAN Article of the Year Award, Journal of Forensic Nursing Education

Rebecca Hill, DNP, FNP-C

EDOU, Bigelow 7; Short Stay Unit, Bigelow 12 Outstanding Capstone Award, School of Nursing, Duke University

Karon Konner, LICSW

Social Service

National Social Worker of the Year, National Association of Social Workers

Sally Millar, RN, MBA

Patient Care Services Clinical Informatics Marguerite Rodgers Kinney Award for a Distinguished Career, American Association of Critical-Care Nurses

Gavle Olson, MS, ATC, TPI-L3

Physical and Occupational Therapy Services

Most Distinguished Athletic Trainer Award, National Athletic Trainers Association

Blake Rainie, CNM, MS

Obstetrics and Gynecology Service Excellence in Teaching Award, American College of Nurse-Midwives

Elisabeth Stieb, RN, BSN, AE-C

Pediatric Ambulatory Clinic, Newton Wellesley Hospital 2013 Allied Health Professional Assembly Scholarship Travel Award, American Academy of Allergy, Asthma, and Immunology

INTERNATIONAL

Jeanette Ives Erickson, RN, DNP, FAAN Dorothy Jones, EdD, RNC, FAAN Marianne Ditomassi, RN, DNP, MBA Patient Care Services Administration

Fostering Nurse-Led Care: Professional Practice for the Bedside Leader, Best of Book Author Award, Sigma Theta Tau International

MGH Nursing History Committee

MGH Nursing at Two Hundred Nursing Media Award for Print, Honor Society of Nursing, Sigma Theta Tau International

STATE AND REGIONAL

Jeffrey Adams, RN, PhD

Innovation in Care Delivery

Mongan Institute for Health Policy, Boston,

MA

Understanding Influence as an Attainable Goal for Nurse Leaders: Utilizing the Theory of Goal Attainment in the Development of the Adams Influence Model (AIM)

King International Nursing Group,
Bennington, VT

Mary Amatangelo, RN, MS, ACNP-BC, CCRN

Women and Stroke 30th Annual Brain Injury and Stroke Conference, Concord, NH

Stroke Care: After Discharge Eighth Annual Brain Matters Conference 2013, Boston Chapter, American Association of Neuroscience Nurses, Waltham, MA

Paul Arnstein, RN, PhD, FAAN

Detecting and Treating Neuropathic Pain Neuropathic Pain: Diagnosis & Treatments Conference, Massachusetts Pain Initiative, Marlborough, MA

Paul Arnstein, RN, PhD, FAAN

Antje Barreveld, MD
Michele Matthews, PharmD
Jeffry Shaefer, DDS, MS, MPH
Interprofessional Pain Education for
Healthcare Professionals
Second International Conference on Opioids:
Basic Science, Clinical Applications and
Compliance, Boston, MA

Jean Ashland, PhD, CCC-SLP

Helping Premature Infants Feed: When to Stop and When to Go Social Work Staff, Fragile Beginnings, Jewish Child and Family Services, Waltham, MA

Marianne Beninato, PT, DPT, PhD

Measuring Patient-Centered Change: is a Score of +3 on the Global Rating of Change Scale a Valid Criterion for Minimal Clinically Important Difference (MCID)?

Annual Conference, Massachusetts Chapter, American Physical Therapy Association, Newton, MA

Christina Bethune, BSN, MHA

Structural Interventions for Stroke Risk Reduction in Atrial Fibrillation 23rd Annual Cardiovascular Nursing Conference, American Heart Association, Newton, MA

Barbara Blakeney, RN, MS, FNAP

Nursing-Many Roles-One Profession-Ready for the Future Annual Meeting, New Hampshire Nurses Association, Concord, NH

When What's Known Isn't So: Why "Mismatches" in Research and Practice Need Investigation
Keynote Address, 5th Annual Nursing
Research Evidence-Based Practice
Symposium: The Quest for Significance,
Kappa Tau Chapter, Sigma Theta Tau,
Burlington, VT

Andrea Bonanno, PT, DPT, GCS, CLT

Care of the Patient after Surgical Intervention for Head and Neck Cancer: An Interdisciplinary Educational Presentation Massachusetts Eye and Ear Infirmary, Boston, MA

Mary Bourgeois, PT, DPT, MS, CCS

Exercise for Patients with Pulmonary Hypertension

Education Forum for Patients and Caregivers, Pulmonary Hypertension Association, Cambridge, MA

Cheryl Brunelle, PT, MS, CCS, CLT Peripheral Artery Disease

Geriatrics Sourcing Interests Group Meeting, American Physical Therapy Association of Massachusetts, Waltham, MA

Amanda Bulette Coakley, RN, PhD Anne-Marie Barron, RN

Therapeutic Touch: the Intervention and the Research

Third Annual Integrative Nursing: the Art of Healing Conference, Boston Medical Center, Boston, MA

Gae Burchill, MHA, OTR/L, CHT

Flexor Tendon Anatomy and Physiology Management of Flexor Tendon Injuries Flexor Tendon Management Splinting Flexor and Extensor Injuries Department of Occupational Therapy, Tufts University, Medford, MA

Virginia Capasso, PhD, ANP-BC, CWS

Care of the Patient with Venous Disease Primary Care Conference, Nurse Practitioners for Continuing Education, Falmouth, MA

Science, Technology, Engineering and Mathematics (STEM) Careers Archbishop Williams High School, Braintree, MA

Kate Cederbaum, MSN, MA, PMHNP-BC Deborah Clark, RN, PMHCNS-NP Gail Leslie, RN, PMHCNS-BC, CNS Christina Stone, RN, PMHCNS-BC

Challenges Facing the Psychiatric Nurse 37th Annual Psychopharmacology Conference, Psychiatry Academy, Boston, MA

Patricia Chastain, PT, DPT

Physical Therapy for Children with Down Syndrome

Down Syndrome Program at Loveland, Lincoln, MA

Adi Chenki-Shapsa, LCSW

Ethical Questions about a Fetus and Mother on Life Support

The Harvard Ethics Consortium, Harvard Medical School, Boston, MA

Rana Chudnofsky, MEd Kathleen Miller, RN, PhD, AHN-BC

Expanding the Circle of the Mind Body Community

5th Annual Complementary & Integrative Therapies Expo, U-MASS Medical Center, Worcester, MA

Suzanne Curley, MS, OTR/L, CHT

Professionalism

School of Occupational Therapy, Tufts University, Medford, MA

Robert Dorman, PT, DPT, GCS

Comprehensive Clinical Reasoning Physical Therapy Center, Boston University, Boston, MA

Susie Essig, LCSW

Should We Respect a Delusional Patient's Refusal of Beneficial Medical Treatment? *Harvard Ethics Consortium, Boston, MA*

PROFESSIONAL ACHIEVEMENTS • presentations

Daniel Fisher, MS, RRT

Hyperbaric Oxygen and Mechanical Ventilation

Respiratory Care Alphabet Soup – Understanding the Regulations 36th Annual Meeting, Massachusetts Society for Respiratory Care, Sturbridge, MA

Vanessa Gormley, RN, MSN, CNRN Brain Injury: Surviving the Sympathetic "Storm"

Eighth Annual Brain Matters Conference 2013, Boston Chapter, American Association of Neuroscience Nurses, Waltham, MA

Dean Hess, PhD, RRT, FAARC, FCCP, FCCM

5 Things I Learned About Mechanical Ventilation in the Past 40 Years 36th Annual Meeting, Massachusetts Society for Respiratory Care, Sturbridge, MA

Carol Harmon Mahony, MS, OTR/L, CHT Management: Nursing Concerns Wrist Injuries Twelfth Annual Cardiovascular Con

Upper Extremity Rehabilitation Courses, Tufts University, Medford, MA

Jeanette Ives Erickson, RN, DNP, FAAN

The Importance of Nursing: Building a Strong Professional Practice Environment University of New England, Biddeford, ME

The Interprofessional Dedicated Education Unit: An Innovative Model of Teaching and Learning University of New England, Portland, ME

Behind the Scenes of Getting to Best: A Conversation with MGH Leadership Human Resource Leadership Forum, Waltham, MA

Colleen Lowe, MPH, OTR/L

Sensation and Sensibility Musculoskeletal Work Related Upper Extremity Disorders/RSI Department of Occupational Therapy, Tufts University, Medford, MA

Abigail MacDonald, MSW, LICSW

Emotional Considerations in Donor Conception and Surrogacy Arrangements

Donor Conception/Surrogacy Connect & Learn Seminar, RESOLVE New England, Children's Hospital, Waltham, MA

Mary McKenna Guanci, RN, MSN, CNRN

Posterior Reversible Encephalopathy: A PRESing Problem

Eighth Annual Brain Matters Conference 2013, Boston Chapter, American Association of Neuroscience Nurses, Waltham, MA

Endovascular Procedures in Stroke Management: Nursing Concerns Twelfth Annual Cardiovascular Conference, North Shore Medical Center, Peabody, MA

Leslie McLaughlin, MS, OTR/L

2013 Lead the Way Symposium: Innovative Occupation-Centered Practice with Children and Adolescents College of Health & Rehabilitation Sciences, Boston University, Boston, MA

Kathleen Miller, RN, PhD, AHN-BC Rana Chudnofsky, MEd

Expanding the Circle of the Mind Body Community 5th Annual Complementary and Integrative Therapies Expo UMASS Memorial Medical Center,

Worcester, MA

Kathleen Miller, RN, PhD, AHN-BC

Running a Community Wellness Center The Science of Resiliency Conference, Benson-Henry Institute and Harvard Medical School, Boston, MA

Joy Orpin, PT, DPT

The Dizzy Patient: Applying Concepts in Vestibular Rehabilitation to Patients Across the Spectrum from Those at Risk for Falls to the Higher Level Athlete
Bay State Physical Therapy, Northeastern
University, Boston, MA

Rev. John Polk, DMin, BCC

Chaplaincy: Hope Amidst Suffering Bishop's Convocation, New England Synod of the Evangelical Lutheran Church in America, Hartford, CT

Katherine Russo, OTR/L, CHT

Evaluation of the Upper Extremity School of Occupational Therapy, Tufts University, Medford, MA

Katrina Scott, MDiv, BCC

The Rise of the Religiously Unaffiliated Annual Meeting, Funeral Consumers Alliance of Eastern Massachusetts, Newton, MA

Religious Aspects at End of Life Summer Bioethics Program, Yale Interdisciplinary Center for Bioethics, New Haven, CT

Sharon Serinsky, MS, OTR-L

Occupational Therapy Needs of the Birth to Five Down Syndrome Population and the Evaluation Process Through the Infant/ Toddler Down Syndrome Program Down Syndrome Program at Loveland, Lincoln, MA

Colleen Snydeman, RN, MSN

The Quality of Healthcare: A Nursing Perspective Harvard School of Public Health, Boston, MA

Rosalie Tyrrell, RN, MS

Understanding and Leading a Multigenerational Workforce Keys to Healthcare Leadership Seminar, Organization of Nurse Leaders, Burlington, MA

Vincent Vacca, RN, MSN, CCRN Lisa Duffy, PhD, CPNP-PC, CNRN, MSCN Katelyn Sparks, RN, BSN, CNRN Stephanie Cusworth, RN, BSN Complicated Cases: Challenges in

Neuroscience Nursing Eighth Annual Brain Matters Conference 2013, Boston Chapter, American Association of Neuroscience Nurses, Waltham, MA

NATIONAL

Mary Amatangelo, RN, MS, ACNP-BC, CCRN

PostStroke Paradigm Women and Stroke National Primary Care Conference, Chicago, IL

Paul Arnstein, RN, PhD, FAAN Barbara St. Marie, GNP-BC, PhD

Understanding the Pharmacology of Addiction and Prescription Drug Abuse as Part of the ER/LA Opioid REMS: Achieving Safe Use While Improving Patient Care Regional Conference, Kentucky Coalition of Nurse Practitioners and Nurse Midwives, Lexington, KY Physiology and Pathophysiology of Pain What is Causing Prolonging and Amplifying Chronic Pain? 28th National Conference, American Association of Nurse Practitioners, Las Vegas, NV

Gain Control of Pain: An Interprofessional Model Managing Breakthrough Pain Across the Provider Continuum 24th Annual Clinical Meeting, American Academy of Pain Management, Orlando, FL

Stephanie Ball, RN, DNS, LTC

Clinical Research Nursing in the Military 5th Annual Conference, International Association of Clinical Research Nurses, San Diego, CA

Courtney Balliro, RN, BS

Best Practices in a Simulated Home Environment Study 5th Annual Conference, International Association of Clinical Research Nurses, San Diego, CA

Gaurdia Banister, RN, PhD

The Clinical Leadership Collaborative for Diversity in Nursing 41st National Black Nurses Association, Advancing the Profession of Nursing Through Education, Practice, Research and Leadership, New Orleans, LA

Caring for the Self: Keys to Leadership Success 2012-2013 Executive Development Series, The

American Association of Colleges of Nursing, Washington, DC

Barbara Blakeney, RN, MS, FNAP

Unlocking the Power of Innovation Innovation in Nursing Practice National Webinar, API Health Care

The Role of Equine Assisted Learning in Health Care

Innovation Learning Network Webinar

Unlocking Innovation at the Patient's Side

Webinar: American Nurses Association

Building Leading Practice Through Innovation

Keynote Address: Staff Conference, American Nurses Association, Washington, DC

Timothy Blue, MD Patricia Lally, RN, BSN

Recognizing Gastrointestinal Problems in Children and Adults with Autism: Strategies to Create a Positive Environment within the Endoscopy Suite
National Meeting, Society of
Gastroenterology Nurses and Associates,
Austin, TX

Meredith Bosley O'Dea, MS, CCC-SLP Audrey Kurash Cohen, MS, CCC-SLP Erin Daly, MS, CCC-SLP Caitlin Fitzgerald, PT, DPT Trish Zeytoonjian, MSN, RN An Innovative, Team Based Model of Interprofessional Education: The "IPDEU" at Massachusetts

National Convention, American Speech and Hearing Association, Chicago, IL

General Hospital

Jeff Chambers, RN

A Collaborative Approach to Disaster EMS Week, St. Luke's Warren Hospital, Phillipsburg, NJ

Lynn Collier, RN, BSN Marjorie Voltero, RN, BSN, CGRN

How to "Fire Up" an Intergenerational GI Workforce to Transition to an Electronic Record National Meeting, Society of

Gastroenterology Nurses and Associates, Austin, TX

Lorraine Drapek, FNP-BC

Snapping Out Liver Metastases 38th Annual Congress, Oncology Nursing Society, Washington, DC

Ellen Fern, RN, BSN Janet King, RN, BSN, CGRN

Aiming Higher . . . Creating a Brighter Tomorrow with pH Best Practices Ignite Your Potential to Understanding Normal Esophageal Motility and Abnormal Manometry Findings National Meeting, Society of Gastroenterology Nurses and Associates, Austin, TX

Marion Freehan, RN, MPA/HA, CNOR Ellen Silvius, RN, BSN

Aiming High with a Vision for a State of the Art Pediatric Focused Endoscopy Suite

National Meeting, Society of Gastroenterology Nurses and Associates, Austin, TX

Peter Greenspan, MD Denise Lozowski, RN, MSN, CPPS

Agreeing On, and Implementing, Clinical Standards Across Practice Sites Creating Connections Conference, Childrens Hospital Association, Orange County, CA Tessa Goldsmith, MS, CCC-SLP Justin Roe, PhD, Cert., MRCSLT

Point-Counterpoint: Prophylactic or Reactive Tube-Feeding? Implications for Swallowing Following Radiotherapy for Head and Neck Cancer National Convention, American Speech and Hearing Association, Chicago, IL

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM

What is Evidence-Based Medicine and Why Should I Care?
5 Things I Learned About Mechanical Ventilation in the Past 40 Years
New York Society for Respiratory Care,
Syracuse, NY

Modes of Noninvasive Ventilation and Mask Interfaces Employed International Society for Aerosols in Medicine, Chapel Hill, NC

Is There a Role for New Ventilator Modes? 5th Critical Care Symposium at Long Beach Memorial, Long Beach, CA

What is Evidence-Based Medicine and Why Should I Care?

11th Optimizing Mechanical Ventilation Conference, Duke University, Durham, NC

Respiratory Mechanics Annual Meeting, American Thoracic Society, Philadelphia, PA

Jeanette Ives Erickson, RN, DNP, FAAN Emerging Presence of Power as Knowing Participation in Change and Professional Practice

Society of Rogerian Scholars, New York, NY

PROFESSIONAL ACHIEVEMENTS • presentations

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

Ventilator Waveforms 2013 Annual Meeting, New York State Thoracic Society, Valhalla, NY

Ventilator Associated Events: The New Approach to VAP Surveillance, and ARDS in Children: Incidence, Mortality and Ventilatory Management 20th Annual Enok Lohne MD Memorial Conference, Fresno, CA

New Reporting Mechanism for VAP, and PAV and NAVA: Effect on Patient-Ventilatory Synchrony 33rd Annual Symposium of the Maryland/ DC Society for Respiratory Care, Ocean City, Maryland

Management of ARDS: ARDSnet vs. Open Lung Approach vs. High Frequency Oscillation Cox Health Fifth Midwest Mechanical Ventilation and Critical Care Conference, Branson, MO

Options to Manage Refractory Hypoxemia After Oscar/Oscillate, and ALI/ARDS: Future of Extracorporeal Gas Exchange Lung Summit: Advances in Pulmonary Medicine, Critical Care Medicine and Mechanical Ventilation, Cleveland Clinic,

Cleveland, OH

Lung Recruitment Maneuvers for ARDS, NIV and Skin Breakdown Patient-Ventiatory Synchrony and **NAVA**

Americian Association for Respiratory Care, Annual Conference, Anaheim, CA

Adele Keeley, RN, MA Julie Cronin, RN, MSN, OCN Michelle Connolly, RN, BSN, OCN Katie Fauvel, RN, BSN Beth Morrissey, RN, BSN Year 1 of the Phillips 21 CIT Journey Annual Conference, Care Innovations and

Susan Lee, RN, PhD, NP-C AgeWISE: Magnet CNO Annual Meeting, Watson Caring Science Institute, Orlando, FL

Transformation, Tampa, FL

AgeWISE: A Story of Transformation Through Caring Science International Caritas Consortium, Chicago, IL

AgeWISE: Generalist Training for RNs in Geropalliative Care National Seminar, Center to Advance Palliative Care, Dallas, TX

Mary Larkin, RN, MS, CDE Musculoskeletal Complications in Type 1 Diabetes 73rd Scientific Sessions, American Diabetes Association, Chicago, IL

Bernice Macintyre, CHE Joanne Rowley, RN, MSCS, HNB-BC Enhance/Wellness: Health Clinics and Community Centers Extend Primary Care to Improve Health Outcomes Aging in America Conference, Chicago, IL

Mary McKenna Guanci, RN, MSN, CNRN Posterior Reversible Encephalopathy: A PRESsing Problem National Conference, American Association of Neuroscience Nurses, Charlotte, NC

Targeted Temperature Management: Normothermia Annual Conference, National Teaching Institute, American Association of Critical Care Nurses, Boston, MA

Barbara McLaughlin, RN, MSM, CCM Kathleen Walsh, RN, PhD

Innovative Emergency Department Observation Unit, Case Management in a Tertiary Setting, The Little Unit that Could National Case Management Conference, American Case Managers Association, San Diego, CA

Karen Miguel, RN, MM-H

Enhancing Teamwork and Communication, the Art and Challenge of Changing Culture Annual Conference, Society of Interventional Radiology and Association of Vascular and Interventional Radiographers, New Orleans, LA

Bhavini Murthy, MD, MPH Kathleen Miller, RN, PhD, AHN-BC Darshan Mehta, MD, MPH Efficacy of an Acupuncture Program at the MGH-Wellness Center Think Local, Act Global: Best Practices 141st Annual Meeting and Exposition, American Public Health Association. Boston, MA

David Nolan, PT, DPT, MS, OCS, CSCS

Management of the Foot and Ankle Complex Annual Conference, New Hampshire Chapter, American Physical Therapy Association, Manchester, NH

Mary Orencole, MS, ANP-BC

Orlando, FL

How to Evaluate Patients Before and After CRT Therapy Annual Meeting, Heart Failure Society of America,

Front Line Health Care Workers Panel Advocacy Summit: Save the Children,

Mimi Pomerleau, DNP, RNC-OB

Washington, DC

Patricia Simpson, RN

A Commitment to Engagement: A Health Center Hub for Community Resilience Through Emergency Management National Association Conference for Community Health Centers, Chicago, IL

Nancy Sullivan, MBA, CMAC Making the Link Between Payment Reform and Daily Case Management Practice

Annual Case Management Conference, American Case Management Association Meeting, San Diego, CA

David Thomas, PhD Paul Arnstein, RN, PhD, FAAN Chris Herndon, PharmD Beth Murinson, MD, PhD Improving Pain Education in Medical, Pharmacy, Nursing, and Dental Schools in the United States 32nd Annual Scientific Meeting, American Pain Society, New Orleans, LA

Carmen Vega-Barachowitz, MS, CCC-SLP

Dee Adams Nikjeh, PhD, CCC-SLP R. Wayne Holland, PhD, CCC-SLP 2014 & Beyond: Health Care Coding & Reimbursement for SLPs National Convention, American Speech and Hearing Association, Chicago, IL

Carmen Vega-Barachowitz, MS, CCC-SLP Audrey Kurash Cohen, MS, CCC-SLP Reframing SLP Practice in Acute Care: An Expanded Consultative Model for Today's

Health Care Environment National Convention, American Speech and Hearing Association, Chicago, IL

Carmen Vega-Barachowitz, MS, CCC-SLP
Dee Adams Nikjeh, PhD, CCC-SLP
R. Wayne Holland, PhD, CCC-SLP
Timothy Weise, PhD, CCC-SLP
Rules & Tools for SLP Coding, Billing &
Documentation
National Convention, American Speech and
Hearing Association, Chicago, IL

Carmen Vega-Barachowitz, MS, CCC-SLP Swathi Kiran, PhD, CCC-SLP Cara Stepp, PhD, CCC-SLP Denise Ambrosi, MS, CCC-SLP Peggy Perry, MS, CCC-SLP The Next Frontier in Rehabilitation: Connected Care Using Tablets, Cloud-Computing & Other Technologies National Convention, American Speech and Hearing Association, Chicago, IL

INTERNATIONAL

Jeffrey Adams, RN, PhD Kelly Grady, RN, PhD Defining a Nursing Research Agenda in a Community Hospital Video-conference, Hamilton, Bermuda Julie Berrett-Abebe, MA, MSW, LICSW

Secondary Traumatic Stress as an Occupational Hazard for Social Workers/ Aid Workers: Identifying Risks and Implementing Protective Practices 18th Biennial International Consortium for Social Development Conference — Opening New Frontiers in Social Development: Facing Opportunities and Challenges, Kampala, Uganda

Amanda Bulette Coakley, RN, PhD

The Effect of Therapeutic Touch on Biobehavioral Stress Markers in Vascular Surgical Patients

European Conference on Integrative Medicine, Berlin, Germany

Elizabeth Campbell, RN, BSN, CRNI

Videoconference: Best Practices in Reducing Central Line Associated Blood Stream Infections

Continuing Medical Education Department, Bermuda Hospitals Board, King Edward VII Memorial Hospital, Bermuda

Lin-Ti Chang, DNP, RN-BC, ANP-BC, CCRN

Closing the Gap of Health Disparity by Improving Access to Health Education and Wellness for Elder Chinese Residents Living

in the Boston Community 25th Quadrennial Congress, International Council of Nurses, Melbourne, Australia

Lin-Ti Chang, DNP, RNP, ANP-BC, CCRN

Evaluation of Mass Casualty Incident Education to Guide Disaster Responder Preparedness

24th International Nursing Research Congress, Bridge the Gap Between Research and Practice Through Collaboration, Sigma Theta Tau International Honor Society, Prague, Czech Republic

Maureen Hemingway, RN

Roy Phitayakorn, MD Emil Petrusa, PhD Integrating Technical and Team Training Skills in an In-situ OR

Society in Europe for Simulation Applied to Medicine, Paris, France

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM

Role on Noninvasive Ventilation in the Ventilator Discontinuation Process How to Select the Best PEEP Patient-Ventilator Synchrony 2nd Latin American Congress of Respiratory Therapy, Santiago, Chile

Can an ARDS Patient be Ventilated Awake? Weaning and Heart Failure
The Role of NIV in Weaning
5 Things I Learned About Mechanical
Ventilation in the Past 40 Years
3rd International Symposium on Critical
Pulmonary and Advanced Respiratory Care,
Buenos Aries, Argentina

Outcome Measures in Airway Clearance
Do Protocols of Weaning Make a Difference?
Optimizing Aerosol Therapy: Body
Positioning and Ventilatory Pattern
Bedside Assessment: When the Problem is the
Ventilator Set-up
ARIR 2013, Genova, Italy

Monitoring Respiratory Mechanics During Mechanical Ventilation Liberation from Mechanical Ventilation Noninvasive Ventilation – 2013 Update XVI Foro Internacional de Medicina Crítica, Ventilación Mecánica, Sepsis y Tópicos Selectos Mexico City, Mexico

Jeanette Ives Erickson, RN, DNP, FAAN Leadership Influence on Professional Nursing Practice and Quality of Care The King's Fund, London, England

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

Discontinuing Ventilatory Support Open Lung Approach vs: ARDSnet Tabl, Alveolar Recruitment and Decremental PEEP

Patient-Ventilator Synchrony Surveillance of Ventilator Associated Events

Technical and Clinical Application of NIV 33rd International Symposium on Intensive Care and Emergency Medicine, Brussells, Belgium

Epidemiology of ARDS: Is there a Reduction in Morbidity and Mortality Mechanical Ventilation: Past, Present, and Future High Frequency Ventilation

High Frequency Ventilation How to Optimize Patient-Ventilator Interaction

III International Symposium on Mechanical Ventilation of Rede D'Or Sao Luiz, Rio De Janeiro, Brazil

Lung Protective Ventilatory Strategies Should be Applied to Patients of All Ages Are Modes of Assisted vs. Controlled Ventilation Lung Protective The Impact of NAVA on Patient-Ventilator Synchrony in Pediatric Patients, and Lung Recruitment Maneuvers can be Applied to Pediatric Patients 10th International Symposium on Neonatal and Pediatric Mechanical Ventilation, Sao Paulo, Brazil

PROFESSIONAL ACHIEVEMENTS • presentations

Management of ARDS: The Open Lung Approach vs. The ARDSnet,
Selection of Modes of Mechanical
Ventilation
Lung Protective Mechanical Ventilation
ECMO in Respiratory Failure
Weaning from Mechanical Ventilation:
State of the Art, and
Non-Invasive Ventilation
9th International Symposium on
Respiratory Diseases (ISRD) in China
Forum, Shanghai, China

Barbara Moscowitz, MSW, LICSW

Embracing Active Aging
Fast Forward—Innovations for Graceful
Aging, Tan Tock Seng Hospital, Republic of
Singapore

How I Made it Happen, Developing an Idea and Making it Real: MGH Senior HealthWISE

Factory Health Alliance Scientific Meeting

Eastern Health Alliance Scientific Meeting 2013, Innovation Symposium Track, Changi General Hospital, Republic of Singapore

Colleen Snydeman, RN, MSN

Quality and Safety: A Foundation for Nursing Success Hamad Medical Center Conference, Doha, Qatar

Sarah Tremblay, MS, CCC-SLP

Pediatric Feeding and Swallowing Disorders Pediatric Feeding and Swallowing Therapy Approaches Operation Airway: Pediatric Airway Surgical Mission, Quito, Ecuador

PROFESSIONAL ACHIEVEMENTS • poster presentations

STATE AND REGIONAL

Gail Alexander, RN Beth Nagle, RN Jeanne McHale, RN, MSN

Using Simulation to Prepare Nurse Residents and Inexperienced Critical Care Nurses to Staff a Newly Opening **ICU**

Emerging Trends Impacting Acute/ Critical Care Nursing Leaders Program, co-sponsored: Greater Boston Chapter of American Association of Critical Care Nurses, and Regis College School of Nursing, Science and Health Professions, Weston, MA

Virginia Capasso, ANP-BC, PhD, CWS Sheila DeCastro, RN, BSN, MS Christine Pontuso, RN, BSN Alicia Wierenga, FNP, MSN Barbara Blakeney, RN, MS, FNAP Donna Hudson-Bryant, RN, BSN Patricia Kelly, ANP-BC, MSN

Keratin Products in the Treatment of an Unusual Acute Surgical Wound with Tendon Exposure New Nurse Practitioner Conference, Newton, MA

Mary Susan Convery, MSW, LICSW Developing a Secondary Traumatic Stress-Informed Organization Trauma-Informed Care Conference: Innovative Practices Across Partners Healthcare, Brigham and Women's Hospital, Boston, MA

Julie Cronin, RN, MSN, OCN

Family Member's Perceptions of Most Helpful Interventions During End of Life Care of a Loved One Eastern Nursing Research Society, Boston, MA

Using Rapid Cycle Change to Positively Influence the Culture of a Unit Nursing Research Symposium, Kappa Tau, Burlington, VT

Gayle Hoisington, LICSW

HAVEN: Helping Abuse and Violence **End Now**

Trauma-Informed Care Conference: Innovative Practices Across Partners Healthcare, Brigham and Women's Hospital, Boston, MA

Jeanette Ives Erickson, RN, DNP, FAAN Jeffrey Adams, RN, PhD Marianne Ditomassi, RN, DNP, MBA Dorothy Jones, EdD, RNC, FAAN Three Instruments to Evaluate the Professional Practice Environment Eastern Nursing Research Society, Boston, MA

Marian Jeffries, MSN Christine Gryglik, RN, PhDc Diane Davies, RN, BSN Sheila Knoll, RN, BSN

Chest Tube Dressings: Outcomes of Taking Petroleum-Based Dressings Out of the Equation on Air Leak and Infection Rates

National Teaching Institute Conference, American Association of Critical Care Nurses, Boston, MA

Caitlin Leonard, LICSW

Revere High School Youth Empowerment Trauma-Informed Care Conference: Innovative Practices Across Partners Healthcare, Brigham and Women's Hospital, Boston, MA

Beth Nagle, RN Jeanne McHale, RN, MSN Gail Alexander, RN Barbara Cashavelly, RN Maria Winne, RN

Simulated Bedside Emergencies for the Acute Care Nurse Practitioner Emerging Trends Impacting Acute/Critical Care Nursing Leaders Program, co-sponsored by the Greater Boston Chapter of American Association of Critical Care Nurses and Regis College School of Nursing, Science and Health Professions, Weston, MA

NATIONAL

Jeffrey Adams, RN, PhD Stacey Hutton Johnson, RN, PhD(c) Developing the Leadership Influence

over Professional Practice Environments Scale (LIPPES): Quantifying Nursing Administrative Practice American Organization of Nurse Executives,

Denver, CO

James Barone, RN

Maureen Hemingway, RN, MHA, CNOR Maureen Mullaney, RN, BSN, CNOR Charlene O'Connor, RN, MSN, CNOR

Creating Workflows to Enhance Surgical On-Time Starts

60th Annual Congress, Association of Perioperative Registered Nurses, San Diego, CA Elizabeth Campbell, RN, BSN, CRNI

Mentoring Graduate Nurses to the Intravenous Therapy Nursing Specialty Annual Seminar, League of Intravenous Therapy Educators, Association for Vascular Access, Farmington, PA

Virginia Capasso, ANP-BC, PhD, CWS Sheila DeCastro, RN, BSN, MS Christine Pontuso, RN, BSN Alicia Wierenga, FNP, MSN Barbara Blakeney, RN, MS, FNAP Donna Hudson-Bryant, RN, BSN Patricia Kelly, ANP-BC, MSN

Keratin Products in the Treatment of an Unusual Acute Surgical Wound with Tendon Exposure

Symposium on Advanced Wound Care, Denver, CO

Kaitlyn Ceglarski, RN, BSN Carol Corcoran, RN, BSN, CNRN

Continuous EEG Monitoring: A Bedside Nurses Approach

National Conference, American Association of Neuroscience Nurses, Charlotte, NC

Christopher Chenelle, BS

Jun Oto, MD, PhD Demet Sulemanji, MD Daniel Fisher, MS, RRT Robert Kacmarek, PhD, RRT, FCCM, FCCP, **FAARC**

Evaluation of the Hamilton Medical IntelliCuff Versus Manually Setting ETT Cuff Pressures During Simulated Mechanical Ventilation

Annual Meeting, American Association for Respiratory Care, Anaheim, CA

PROFESSIONAL ACHIEVEMENTS • poster presentations

Christopher Chenelle, BS

Demet Sulemanji, MD David Berger, MD Geng Li, MD Jingping Wang, PhD, MD Mazen Maktabi, MD

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

Yandong Jiang, MD, PhD
Short-Term Succinylcholine Infusion
During General Anesthesia May Not
Result In Clinically Significant
Phase II Block
Annual Meeting, Society of Anesthesia and
Sleep Medicine, San Francisco, CA

Lyndsey Farrow, RN, BSN Cynthia McDonough, RN, CPSN, CNOR

Anne Marie Austin, RN, BSN Jane Ouellette, RN, MHA, CNOR Lisa Morrissey, RN, MBA, CNOR

Time to Transplant 60th Annual Congress, Association of Perioperative Registered Nurses, San Diego, CA

Marion Freehan, RN, MPA/HA, CNOR Jason Gendreau-Visco, RN, BSN June Guarente, RN, MS, CGRN Lisa Henderson, RN, BSN Denise Lozowski, RN, MSN, CPPS Lisa McDonald, RN, BSN Ellen Silvius, RN, BSN Lorraine Walsh, RN, BSN Pamela Wrigley, RN, MS, CNS Patricia Lally, RN, BSN Tanya Medvedoff, RN Kathy Sherbourne, RN, MS, CPNP

A Standardized Nursing Curriculum to Ensure Competency of Nurses for Pediatric Patients in Procedural Areas National Meeting, Society of Gastroenterology Nurses and Associates, Austin, TX

Hazel Gould, RN, MBA Laura Nigbor, RN, BSN

Waking the Sleeping Giant 60th Annual Congress, Association of Perioperative Registered Nurses, San Diego, CA

Alan Goostray, RN, CNOR Susan Porter, RN

Cross Training: An Education Plan 60th Annual Congress, Association of Perioperative Registered Nurses, San Diego, CA

Ryan Griffin, NP

Integration of Behavioral Health and Primary Care: Needs Assessment and Pilot Intervention

Annual Conference, American Psychiatric Nurses Association, San Antonio, TX

Kathryn Hall, APRN-BC, MS

Development of Nursing-Sensitive
Indicators for the Clinical Research Setting
Annual Conference, International Association
of Clinical Research Nurses, San Diego, CA
Maureen Hemingway, RN, MHA, CNOR
Kristen Provost, RN, BSN, CNOR
Marguerite Kilfoyle, RN, BA, BSN
Implementation of an Intraoperative
Resonance Magnetic Imaging Suite
60th Annual Congress, Association of
Perioperative Registered Nurses,
San Diego, CA

Cheryl Hersh, MA, CCC-SLP Jean Ashland, PhD, CCC-SLP

Meg Simione, MA, CCC-SLP
Lynette Holmes, MS, CCC-SLP
Margaret Bergmann, MS, CCC-SLP
Developing Regional Grand Rounds:
Advancing Collaborative Practice
National Convention, American Speech and
Hearing Association, Chicago, IL

Jennifer Hovsepian, RN, MSN Cheryl McGah, RN, MSN Claire O'Brien, RN, MBA, CNOR, NE-BC

Postoperative Teaching, Preoperatively OR Manager Conference, National Harbor, MD

Kellyann Jeffries, MSN, ANP-BC

Inpatient Oncology Discharges: Interdisciplinary Approach to Improving Quality, Communication, and Efficiency Advancing Care Through Sciences Conference, Oncology Nursing Society, Dallas, TX

Adele Keeley, RN, MA
Linda Kelly, NP
Julie Cronin, RN, MSN, OCN
Sarah Stowell, ARNP, WHNP-BC
Michelle Connolly, RN, BSN, OCN
Beth Morrissey, RN, BSN
Kristen Nichols, RN, BSN
Katie Fauvel, RN, BSN
Sanae Kishimoto, MPH
Developing a Post Discharge Phone

Call Team

Annual Conference Care Innovations as

Annual Conference, Care Innovations and Transformation, Tampa, FL

Ryan Millager, MS, CCC-SLP Alina Carter, MS, CCC-SLP Laura Ferriero, MS, CCC-SLP Ellen Kelly, PhD, CCC-SLP

Two Cases of Reemergent Stuttering in Parkinson's Disease

National Convention, American Speech and Hearing Association, Chicago, IL Paige Nalipinski, MA, CCC-SLP
Nashifa Hooda, MS, CF, SLP
Alex Johnson, PhD
Laura Ball, PhD
Anthony Guarino, PhD
ALS Speech & Swallowing Severity Scales
& Their Application to Telemedicine
National Convention, American Speech and
Hearing Association, Chicago, IL

Jun Oto, MD, PhD Christopher Chenelle, BS Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

Yandong Jiang, MD, PhD Validation of Feasibility and Functionality of a Video-Laryngoscope Equipped with Ventilation Feature Annual Meeting, American Association of Respiratory Care, Anaheim, CA

Susan Riley, PT, MS, DPT, PCS

Hip Range of Motion and Gross Motor Function and their Relationship to Age in Children with Hutchinson-Gilford Progeria Syndrome

Combined Sections Meeting, American Physical Therapy Association, San Diego, CA

Joanne Rowley, RN, MS, CS, HNB-BC

Bernice Macintyre

Enhance Wellness: Health Clinics and Community Centers Extend Primary Care to Improve Health Outcomes Annual Conference, ASA: Aging in America, Chicago, IL

Susan Sargent, RN, MSN, CNOR Maureen Hemingway, RN, MHA, CNOR

Susan Haneffant, RN, BSN

James Cusack, MD

Perioperative Care of the Patient Undergoing Cytoreductive Surgery with Hyperthermic Intraperitoneal Chemotherapy

60th Annual Congress, Association of Perioperative Registered Nurses, San Diego, CA

Lara Traeger, PhD
Justin Eusebio, MA
Elyse Park, PhD, MPH
Jennifer Repper-DeLisi, RN, MSN
Michelle Jacobo, PhD
Mary Susan Convery, MSW, LICSW
William Pirl, MD
Psychological Skills Training for
Managing Difficult Patient Encounters:
Results of a Pilot Randomized
Controlled Trial for Oncology Nurses
10th Annual Conference, From Psychosocial
Oncology to Oncology Supportive Care
Services: New Evidence, Standards and
Models for Patient Centered Care,

Huntington Beach, CA

Kathleen Vanvorst, RN, BSN, CCRN Mary McKenna Guanci, RN, MSN, CNRN

A Novel Approach to MRI Travel: Improving Quality and Safety National Conference, American Association of Neuroscience Nurses, Charlotte, NC

Susan Wood, RN, MSN, APRN-BC Susan Morash, NR, BSN, MA, NE-BC Kitman Tsang, RN, MSN Priscilla McCormack, RN, MSN, APRN-BC

Enhancing the Role of the Nurse in Code Status Discussions to Improve Quality of Care and Decrease Moral Distress Ethics of Caring: Second National Nursing Ethics Conference, Los Angeles, CA

Angelika Zollfrank, MDiv, BCC

Michael Balboni, PhD
Adam Sullivan, MS
Tracy Balboni, MD, MPH
Is Spiritual Care from Nursesand Physicians
Appropriate at the End of Life? Predictors
for Attitudes of Appropriateness Among
Patients, Nurses, and Physicians
Annual Meeting, American Society for Bioethics
and Humanities, Atlanta, GA

INTERNATIONAL

Laura Grace Goergen, RN, BSN

The Future of Research Data Capture: Electronic Handheld Documentation to Support Nursing Practice 5th Annual Conference, International Association of Clinical Research Nurses, San Diego, CA

Joanne Hughes Empoliti, RN, MSN Amanda Bulette Coakley, RN, PhD Christine Donahue Annese, RN, MSN Kathleen Myers, RN, MSN Sharon Bouvier, RN, MS

Exploring Nursing Practice Interventions that Affect the Sleep Experience of Hospitalized Adults

European Conference on Integrative Medicine,

European Conference on Integrative Medicine, Berlin, Germany

Megan Keating, RN, BSN

The Delicate Dance That is The Art of Nursing

Biennial Convention, Sigma Theta Tau International, Indianapolis, IN

Mary Larkin, RN, MS, CDE Kerry Grennan, RN, ANP-BC, CDE

Closed-loop Glucose Control: Capturing the Patient Experience 5th Annual Conference, International Association of Clinical Research Nurses, San Diego, CA

PROFESSIONAL ACHIEVEMENTS • appointed & elected positions

STATE AND REGIONAL

Jeffrey Adams, RN, PhD

Member, Research Committee, Organization of Nurse Leaders – Massachusetts and Rhode Island

Member, Affiliated Faculty, the Mongan Institute for Health Policy

Visiting Scholar, William F. Connell School of Nursing, Boston College

Edward Burns, BA, RRT

Chairman, Board of Respiratory Care Department of Health Professional Licensure, Massachusetts Department of Public Health

Diane Carroll, RN, PhD, FAAN

Member-at-Large, Board of Directors, Eastern Nursing Research Society

Constance Dahlin, ANP-BC, ACHPN, FAAN

Member, Massachusetts Comprehensive Cancer Advisory Committee

Erin Daly, MS, CCC-SLP

Adjunct Clinical Instructor, Department of Communication Sciences and Disorders, School of Health and Rehabilitation Sciences, MGH Institute of Health Professions

Daniel Fisher, MS, RRT

Vice President, Massachusetts Society for Respiratory Care

Abby Folger, PT, DPT, CCS

Chair, Cardiovascular and Pulmonary Special Interest Group, American Physical Therapy Association of Massachusetts

Tessa Goldsmith, MA, CCC-SLP

Adjunct Clinical Instructor, Department of Communication Sciences and Disorders, MGH Institute of Health Professions

Marisa Iacomini, LICSW

Member, Board of Directors, Massachusetts Maternity and Foundling Hospital Corporation

Rebecca Inzana, MS, CCC-SLP

Clinical Instructor, Voting Faculty, Department of Communication Sciences and Disorders, MGH Institute of Health Professions

Jeanette Ives Erickson, RN, DNP, FAAN

Member, the Mongan Institute for Health Policy Advisory Council

Co-Chair, Lunder-Dineen Health Education Alliance of Maine

Instructor, Obstetrics, Gynecology and Reproductive Biology, Harvard Medical School

Clinical Assistant Professor, Adjunct Faculty, MGH Institute for Health Professions

Clinical Professor of Nursing, Massachusetts College of Pharmacy and Health Sciences School of Nursing

Visiting Scholar, Boston College School of Nursing

Chairperson, MGH Center for Global Health Advisory Committee, Massachusetts General Hospital

Member, Board of Trustees, MGH Institute of Health Professions, Inc.

Member, Nursing Archives Associates, Boston University

Member, National Consensus Project on Compassionate Care Steering Committee, Massachusetts General Hospital Schwartz Center Co-Chairperson, Host Committee, Celebration of Women in Health Care, Kenneth B. Schwartz Center

Member, Harvard Humanitarian Initiative Executive Committee, Harvard University

Member, Greater Boston Aligning Forces for Quality Initiative Planning Grant Community Council

Member, Greater Boston Aligning Forces for Quality Initiative Planning Grant Planning Group

Co-Chair, Host Committee, Celebration of Women in Healthcare, Kenneth B. Schwartz Center

Member, Harvard Humanitarian Initiative Executive Committee, Harvard University

Member, Board of Directors, The Institute for Nursing Healthcare Leadership

Member, Board of Directors, The Benson-Henry Institute for Mind Body Medicine

Chairperson, Chief Nurse Council, Partners Healthcare System, Inc.

Audrey Kurash Cohen, MS, CCC-SLP

Adjunct Clinical Instructor, Department of Communication Sciences and Disorders, MGH Institute of Health Professions

Mary Sylvia-Reardon, RN

Member, Divisional Board, End-Stage Renal Disease Network of New England

Stacey Sullivan MS, CCC-SLP

Board of Directors, Member and Treasurer: Massachusetts Chapter, Huntington's Disease Society of America

Tara Tehan, RN

President-Elect, Massachusetts Association of Registered Nurses

Carmen Vega-Barachowitz, MS, CCC-SLP

Member, Board of Trustees, Bunker Hill Community College

Deborah Washington, RN, PhD

Member, Executive Council, State of Massachusetts, American Association of Retired People

Jessica Wilson, PT, DPT

Treasurer, Cardiovascular and Pulmonary Special Interest Group, American Physical Therapy Association of Massachusetts

NATIONAL

Jeffrey Adams, RN, PhD

Member, Editorial Board of Advisors, Journal of Nursing Administration

Associate Editor, International Journal of Nursing Knowledge

Member, Editorial Review Board, CIN Computers, Informatics and Nursing

Member, Editorial Review Board, Military Medicine

Paul Arnstein, RN, PhD, FAAN

Member, Clinical Practice Guideline Committee, American Pain Society

Member, Interagency Pain Research Coordinating Committee, National Institutes of Health, and U.S. Department of Health & Human Services

Gaurdia Banister, RN, PhD, FAAN Fellow, American Academy of Nursing

David Browning, MSW, LICSW

Faculty Member, Professional/Problem Based Ethics Program, Center for Personalized Education for Physicians

Martha Garlick, PT, MS, DPT, CCS

Member, Payment and Policy Committee, American Physical Therapy Association of Massachusetts

Goals Champion, Payment and Policy Committee, American Physical Therapy Association of Massachusetts

Legislative Committee Member, American Physical Therapy Association of Massachusetts

Member, Board of Directors, American Physical Therapy Association of Massachusetts

Federal Affairs Liaison, American Physical Therapy Association of Massachusetts, to the American Physical Therapy Association

Michelle Gurel, RN, BSN

President, Endocrine Nurses Society

Catherine Harris, RN, MSN, CNS

Member, National Committee on Clinical Practice, Emergency Nurse Association

Caitlin Healy, RN, BSN

Member, National Committee on Clinical Practice, Emergency Nurse Association

Jeanette Ives Erickson, RN, DNP, FAAN

Member, National Advisory Committee, Future of Nursing Scholars Program, Robert Wood Johnson Foundation

Alternate, Commission on Magnet Recognition Program, American Nurses Credentialing Center

Member, Operational Review Team, National Institutes of Health Member, National Advisory Council on Nurse Education and Practice, Health and Human Services Administration

Member, Nurse Leadership Association, Robert Wood Johnson Executive Nurse Fellows Program

Member, Editorial Review Board, Online Journal of Issues in Nursing

Nicholas Merry, RN, BS, CCRN, CEN, EMT-B

Member, Disaster Nursing Panel, American Nurses Credentialing Center

Kristin Parlman, PT, DPT, NCS

Founder and Vice Chair, Neurologic Special Interest Group, American Physical Therapy Association

Christopher Robbins, RN, BSN, CGRN

Vice Speaker of the House of Delegates, Board of Directors, Society of Gastroenterology Nurses and Associates

Colleen Snydeman, RN, MSN

Member, Advisory Committee, Care Coordination Quality Measures Panel, American Nurses Association

INTERNATIONAL

Jeffrey Adams, RN, PhD

Treasurer, Executive Board, NANDA International

Jeanette Ives Erickson, RN, DNP, FAAN

Visiting Professor, Huashan Hospital/Fudan University, Shanghai, China

Member, Kappa Zeta-at-Large Chapter, Sigma Theta Tau International Board Member, Durant Fellowship for Refugee Medicine, Massachusetts General Hospital

Member, Editorial Review Board, Worldviews on Evidence-Based Nursing, London, England

VOLUNTEERS

Mass General is fortunate to have more than 1,600 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 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 Mass General. In 2012, many volunteers reached significant milestones for the total number of hours they have served the hospital community.

100 +Majed Abbas Amin Ahmed Wahidul Alam Thalia Aleman Hassan Alshehri Gail Arbuthnot Scarlet Artruc Lilv Barnard Avnil Bereket **Jonathan Bernard** Maggie Beverly Deb Blake Kris Boelitz Leah Boylan Allison Braly Colleen Cannistraro

Eve Carr

Brent Cham

Waiin Cheang

Teresa Cheng

Brett Coleman

Erica Costanzo

Christine David

Benny Deluca

Rose Delvoix

Alison Crisp

Heather Casavecchia

Wendy Demille Danielle DePalo Laura Dickerson Michael Dworkin Maureen English Don Fitzgibbons Kathryn Foos Joseph Fuchs Karleny Galan Haydy George Katelynn Getchell Kathie Glew David Han Jane Havcox Yiou He Chris (Min sung) Hong Tracv Hu Alex Hu Mvlenska Hubert Glory Hyppolite Mary Jacewicz Alvin Jeon Nia (Dasul) Jin Shawn Iin **Jennifer Johnson** Helen Kagan Catherine Kang Joanne Kennedy Phillip Kim

Jillian King Will Kuang Sita Kugel Desmoulin Katherine Latson Jaclyn Lee Eesac Lee Mu Leong Kellie Loftus Elias Loucagos Trinh Mac Karen Macgillivary Nancy Marglin Christina Matulis Sabrina McDonnell Lucy McIntosh Amanda Meppelink Carol Meyers Xiaoli Mi Iean-Luc Monestime Scott Morin John Morris Lin Mu Dexter Newcomb Andrew Nguyen Sona Nichols Cashel O'Brien Elizabeth O'Connor Colin Ogilvie

Sean Olbert Gabili Ortiz Paola Ortiz Garcia Christine Pak Samira Panjaki Eleni Papadopoulou Kosta Papathanasiou Mitul Patel Kayvon Pedram Richard Pokorny Osher Rechester Catherine Riccio Marcy Rosenzweig Eric Ross Mulrica Saint Cyr Diana Sanchez Mary Io Savino Rob Sawver **Julieta Scheffler** Barbara Schreur Bhaumika Shah Stephanie Shain Syona Shetty Lori Slavin Al Spagnolo Bianca St. Louis Carol Steele Camilla Sutter Dulal Talukdar Melissa Taormina Ed Tausevich Carlota Taylor Marijke Taylor Punita Thadhani Andrew Tokumi Lisa Torchiana **Justin Tran Ieff Ulman** Heidi Van Sarah Vencloski Andy Vo Zova Volkova Linh Vuong Alicia Wagner Karen Wasserman Lisa Weisman Katie Westlund

Priscilla White

David Wu

500 +Marcia A. Barron Jane Castiglioni David Castiglioni Rosemary Dantona Liliana Difabio **Justin Eusebio** Magali Garced Iodie Grossman Michael Heller William Herbert Crystal Hoffman **Janet Hutchison** Katie Larsson Virginia Meskell James Modano Janet Moriarty Caesar Nuzzolo Pamela Oswald Louis Samantha Powell Kimberly Reynolds Michael Rogers Toni Rogers Frederique Schutzberg Elizabeth Spellios Tony Wohl Judy Wohl 1,000 +Wendy Bazari George Brennan

1,000 + Wendy Bazari George Brennan Charley Davidson Jean Elkins Jeannette Galvin Gayle Gordon Kyoko Kato Isabel King Elizabeth Kross Lilly Manolis Pasquale Micciche Jane Moyer Martha Pierce Michael Powers Leslie Saltzberg Jack Schnelle Claudia Tupanjanin

2,000 +
Janice Belleville
Joanne Callahan
Robert Fitzsimmons
Paul Katz
Joel Lesser
Mary May
Kevin McElroy
Peter Webster
Ellen Zellner

3,000 + Ellen Connell Catherine Kwesell Virginia Needham

4,000 +
Bobbi Evans
Bradley Herscot
Rose McCabe
Deborah Morrison

5,000 + Elaine Kwiecien

6,000 +
Kay Bander
Norris Branscombe
Kevin Currie
Peggy Scott

8,000 + Bill Lauch

9,000 + Patricia Austen

10,000 + Margaret Wilkie

CLINICAL RECOGNITION PROGRAM

The Mass General 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.

2013 ADVANCEMENTS

Advanced Clinician

Theodora Abbenante, RN Janet Actis, RN Christen Auvil, RN Catherine Benacchio, RN Annette Brien, RN Daniel Charest, RRT Emilia Comerford, RN Caroline Connell, RN Elizabeth Costigan, RN Jane D'Addario, RN Kristina Dunlea, PT Vicki Gamez, RN Ann Geary, RN Karen Hall, RN Julie Hannigan, RN Patricia Harron, RRT Donna Jordan, RN Kristen Kingsley, RN Carolyn LaMonica, RN Bridget Lyons, RN Julie MacPherson-Clements, RRT Nicole Martinez, RN

Jennifer McAtee, OTR/L
Valerie McCarthy, RN
Leslie McLaughlin, OTR/L
Cynthia Meglio, RN
Stefanie Michael, RN
Vita Norton, RN
Sarah Ouelette, RN
Saira Saleem, RN
Emily Shell, RN

Clinical Scholar

Julie Berrett-Abebe, LICSW

Mary Bourgeois, PT
Gail Carson-Fernandes, RN
Alissa Evangelista, PT
Susan Finn, RN
Elzbieta Gilbride, RN
Eric Hanson, LICSW
Jennifer Healy, RN
Mary Pomerleau, RN
Paula Restrepo, RN

BOOKS AND CHAPTERS IN BOOKS

Paul Arnstein, RN, PhD, FAAN

Chapter: Analgesics Advanced Practice Nurse Pharmacology (Accessed Online)

Daniel Chipman, BS, RRT

Jean Kwo, MD

Chapter: Respiratory Failure, Mechanical Ventilation and Weaning The MGH Review of Critical Care Medicine

Jeanette Ives Erickson, RN, DNP, FAAN Dorothy Jones, EdD, RNC, FAAN Marianne Ditomassi, RN, DNP, MBA

Fostering Nurse-Led Care: Professional Practice for the Bedside Leader from Massachusetts General Hospital Sigma Theta Tau International

Mary McKenna Guanci, RN, MSN, CNRN

Chapter: Cranial Nerve Diseases Clinical Practice of Neurological and Neurosurgical Nursing 7th Edition

Margaret Stockley, RN Lorrie Jacobsohn, RN, MSN, PMHCNS-BC

Inner Knowledge: Harnessing the Senses for Peace, Balance and Health CreateSpace Independent Publishing Platform

ARTICLES

Jeffrey Adams, RN, PhD Nikolay Nikolaev, MS Jeanette Ives Erickson, RN, DNP, FAAN Marianne Ditomassi, RN, DNP, MBA Dorothy Jones, EdD, RNC, FAAN Identification of the Psychometric Properties of the Leadership Influence over Professional Practice **Environments Scale** Journal of Nursing Administration

Jeffrey Adams, RN, PhD

Influencing the Nursing Commitment to Workforce Satisfaction and the Origins of Magnet: An Interview with Dr. Michael Evans Influencing the Development of Leaders: An Interview with Dean Terry Fulmer Journal of Nursing Administration

Paul Arnstein, RN, PhD, FAAN

The Future of Topical Analgesics Postgraduate Medicine

Paul Arnstein, RN, PhD, FAAN Keela Herr, RN, PhD, FAAN

Risk Evaluation and Mitigation Strategies for Older Adults and Persistent Pain Journal of Gerontological Nursing

Stephanie Becker, MD Adrianus Bot

Suzanne Curley, MS, OTR/L, CHT

Jesse Jupiter, MD David Ring, MD A Prospective Randomized Comparison of Neoprenes vs. Thermoplast Hand-Based Thumb Spica Splinting for Trapeziometacarpal Arthrosis Osteoarthritis and Cartilage

Marianne Beninato, PT, DPT, PhD

Vvoma Parikh, PT, MS Laura Plummer, DPT, MS, NCS Use of the International Classification of Functioning, Disability and Health as a Framework for Analyzing the Stroke Impact Scale-16 Relative to Falls Physiotherapy and Practice (Accessed Online)

Britta Brueckmann, MD Jose Villa-Uribe, BS Brian Bateman, MD Martina Grosse-Sundrup, MD Dean Hess, PhD, RRT, FCCM, FCCP, **FCCM**

Christopher Schlett, MD, MPH Matthias Eikermann, MD Development and Validation of a Score for Prediction of Postoperative **Respiratory Complications** Anesthesiology

Claudio Brusasco, MD, PhD Francisco Corradi, MD, PhD Maria Vargas, MD, PhD Mario Bona, MD, PhD Francisco Bruno, MD Mario Marsili, MD Fernando Simonassi, MD Giogio Santori, MD, PhD Pedro Severgnini, MD Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

Paolo Pelosi, MD, PhD In Vitro Evaluation of Heat and Moisture **Exchangers Designed for Spontaneously** Breathing **Tracheostomized Patients**

Respiratory Care

Diane Carroll, RN, PhD, FAAN The Effects of Intensive Care Unit Environments on Nurse Perception of Family Presence During Resuscitation and

Dimensions of Critical Care Nursing

Invasive Procedures

Julie Cronin, RN, MSN, OCN Adele Keelev, RN, MS Barbara Blakeney, RN, MS, FNAP

Transforming a Unit: The Impact of Care Innovation and Transformation Promoting Change and Empowering New Leaders

American Organization of Nurse Executives, "The Voice"

Patricia Dykes, RN, DNSc Diane Carroll, RN, PhD, FAAN Ann Hurley, RN, DNSc

Angela Benoit, BComm Frank Chang, MSE Rachel Pozzar, RN, BSN Christine Caligtan, RN, MSN Building and Testing a Patient-Centric Electronic Bedside Communication Center Journal of Gerontological Nursing

Jonathan Elmer, MD
Peter Hou, MD
Susan Wilcox, MD
Yuchiao Chang, PhD
Hannah Schreiber, BA
Ikenna Okechukwu, MD
Octávi Pontes-Neto, MD, PhD
Ednan Bajwa, MD, MPH
Dean Hess, PhD, RRT, FCCM,
FCCP, FCCM

Laura Avery, MD
Maria Alejandra Duran-Mendicuti, MD
Carlos Camargo, Jr., MD, DrPH
Steven Greenberg, MD, PhD
Jonathan Rosand, MD
Daniel Pallin, MD, MPH
Joshua Goldstein, MD
Acute Respiratory Distress Syndrome
After Spontaneous Intracerebral
Hemorrhage
Critical Care Medicine

Erica Edwards, RN Lisa Davis Despotopulos, RN Diane Carroll, RN, PhD, FAAN Interventions to Support Family Presence in the Cardiac Intensive Care Unit Clinical Nurse Specialist

Daniel Fisher, MS, RRT
Dhimiter Kondili, BS
June Williams, MS, SLP
Dean Hess, PhD, RRT, FCCM, FCCP,
FCCM

Edward Bittner, MD, PhD Ulrich Schmidt, MD, PhD Tracheostomy Tube Change Before Day 7 is Associated with Earlier Use of Speaking Valve and Earlier Oral Intake Respiratory Care Daniel Friedman, MD
Guarav Upadhyay, MD
Robert Altman, MD
Mary Orencole, RN, MS, NP
Conor Barrett, MD
Theofanie Mela, MD
E. Kevin Heist, MD
Jagmeet Singh, MD
The Anatomic and Electrical Location of the Left Ventricular Lead Predicts
Ventricular Arrhythmia in Cardiac
Resynchronization Therapy
Heart Rhythm

Jennifer Garces, CRNA, DNAP
Brittney Wallace, CRNA, DNAP
Anesthesia Considerations in the Older
Adult Patient
OR Nurse 2013

Corin Gigler, RN, BSN, CACP Walter Moulaison, RN, MSN, MBA

Anticoagulation Management Service: Overseeing Patient Compliance Within the AMS

Web Site of the Anticoagulation Forum, Anticoagulation Centers of Excellence

Marie Elena Gioiella, LICSW Lisa Scheck, LICSW

A Hospital Social Work Response to the Boston Marathon Bombings Health, (NASW Specialty Practice Sections Newsletter) Lauren Gray Gilstrap, MD
Rajeev Malhotra, MD
Donna Peltier-Saxe, RN, MSN, ACM
Eliana Pineda, BS
Catherine Culhane-Hermann, RN
Nakela Cook, MD, MPH
Carina Fernandez-Golarz, MD
Malissa Wood, MD
Abstract: Community-Based Primary
Prevention Programs Decrease the
Rate of Metabolic Syndrome Among
Socioeconomically Disadvantaged Women
Journal of Women's Health

Maureen Hemingway, RN, MHA, CNOR Lisa Morrissey, RN, MBA Development of a Complex Multidisciplinary Orientation Program AORN Journal

Maureen Hemingway, RN Marguerite Kilfoyle, RN

Safety Planning for Intraoperative Magnetic Resonance Imaging AORN Journal

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM Dhimiter Kondili, BS Edward Burns, RRT Edward Bittner, MD, PhD

Ulrich Schmidt, MD, PhD
A 5-Year Observational Study of LungProtective Ventilation in the Operating Room:
A Single-Center Experience
Journal of Critical Care

Dean Hess, PhD, RRT, FCCM, FCCP, FCCMNoninvasive Ventilation for Acute Respiratory
Failure
Science and Evidence: Separating Fact
from Fiction

Respiratory Care

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM

B. Taylor Thompson, MD Arthur Slutsky, MD Update in Acute Respiratory Distress Syndrome and Mechanical Ventilation 2012 American Journal of Respiratory and Critical Care Medicine

Caitlin Hicks, MD
Milena Weinstein, MD
May Wakamatsu, MD
Samantha Pulliam, MD
Lieba Savitt, NP-C, RN-C, MSN
Liliana Bordeianou, MD
Are Rectoceles the Cause or the Result of Obstructed Defecation Syndrome? A
Prospective Anorectal Physiology Study
Colorectal Disease

Rebecca Hill, DNP, FNP-C Allison Vorderstrasse, ACNP, PhD

Barbara Turner, DNSc, FAAN
Katherine Pereira, DNP, FNP
Julie Thompson, PhD
Screening for Depression in Patients with
Diabetes: Addressing the Challenge
The Journal for Nurse Practitioners

Amy Israelian, ANP, BC Laura Long, RN, PhD

Care of Patients with Deep Inferior Epigastric Perforator Reconstruction Plastic Surgical Nursing

Jeanette Ives Erickson, RN, DNP, FAAN Reflections on Leadership Talent: A Void or an Opportunity? Nursing Administration Quarterly

PROFESSIONAL ACHIEVEMENTS • publications

Jeanette Ives Erickson, RN, DNP, FAAN Marianne Ditomassi, RN, DNP, MBA Theresa Gallivan, RN, MS Keith Perleberg, RN, MDiv Mary Jane Costa, RN, PhD

A Case Study: A Leader's Commitment to Transparency and Accountability Through a Serious Patient Harm Event Journal of Hospital Administration

Alan Jacobson, MD
Barbara Braffett, MS
Patricia Cleary, MS
Rose Gubitosi-Klug, MD, PhD
Mary Larkin, RN, MS, CDE
The Long-Term Effects of Type 1 Diabetes
Treatment and Complications on HealthRelated Quality of Life
Diabetes Care

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

Mechanical Ventilation Competencies of the Respiratory Therapist in 2015 and Beyond Respiratory Care

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

Jesus Villar, MD, PhD Management of Refractory Hypoxemia in ARDS *Minerva Anesthesiology*

Richard Kallet, MS. RRT Teresa Volsko, MHHS, RRT **Dean Hess, PhD, RRT, FCCM, FCCP, FCCM**

Respiratory Care Year in Review 2012: Invasive Mechanical Ventilation, Noninvasive Ventilation, and Cystic Fibrosis Respiratory Care Jagdesh Kandala, MD
Guarav Upadhyay, MD
Robert Altman, MD
Kimberly Parks, DO
Mary Orencole, RN, MS, NP
Theofanie Mela, MD
E. Kevin Heist, MD
Jagmeet Singh, MD
QRS Morphology, Left Ventricular
Lead Location, and Clinical Outcomes
in Patients Receiving Cardiac
Resynchronization Therapy
European Heart Journal

Yahoung Liu, MD, PhD Aliang Wang, MD, PhD Andrew Marchese, MS Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

Yandong Jiang, MD, PhD Jet or Intensive Care Unit Ventilator During Simulated Percutaneous Transtracheal Ventilation: a Lung Model Study British Journal Anesthesiology

Laura Lux, RN

Tammy Gravel, RN, MSN Put a Stop to Bullying New Nurses Nursing2013

Abigail MacDonald, LICSW

John Petrozza, MD Coping with Infertility on Mother's and Father's Day RESOLVE New England Shelley Magill, MD, PhD
Michael Klompas, MD
Robert Balk, MD
Suzanne Burns, RN, RRT
Clifford Deutschman, MD
Daniel Diekema, MD
Scott Fridkin, MD
Linda Greene, RN, MPS
Alice Guh, MD, MPH
David Gutterman, MD
Beth Hammer, MSN, RN
David Henderson, MD

Nicholas Hill, MD

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM

Teresa Horan MPH
Marin Kollef, MD
Mitchell Levy, MD
Edward Septimus, MD
Carol Vanantwerpen, BSN, RN
Don Wright, MD, MPH
Pamela Lipsett, MD
Developing a New, National Approach
to Surveillance for VentilatorAssociated Events
Critical Care Medicine

Annette McDonough, RN, PhD Lea Ann Matura, RN, PhD Diane Carroll, RN, PhD, FAAN New Pharmacologic Treatment for Familial Hypercholesterolemias Nursing for Women's Health

Mary McKenna Guanci, RN, MSN, CNRN

Ventriculitis of the Central Nervous System Critical Care Nursing Clinics of North America JoAnn Mulready-Shick, EdD, RN, MSN, CNE, ANEF Kathleen Flanagan, PhD Gaurdia Banister, RN, PhD, FAAN Laura Mylott, RN, PHD, ANP-BC Linda Curtin, RN, PhD, CCRN Evaluating Dedicated Education Units for Clinical Education Quality Journal of Nursing Education

Jane Murray, MBA Laura Carr, PharmD Jessica Smith, RN, MS

Abstract: Interventions to Improve the Coordination of Care and Reduce Readmissions: Discharge Nurse Role and Pharmacist Involvement on a Medicine Pilot Unit American Journal of Medical Quality

Timothy Myers Suzanne Bollig, RRT Dean Hess, PhD, RRT, FCCM, FCCP, FCCM Respiratory Care Year in Review 2012: Asthma and Sleep-Disordered Breathing

Respiratory Care

David Nathan, MD
John Buse, MD
Steven Kah, MD
Heidi Krause-Steinrauf, MS
Mary Larkin, RN, MS, CDE
Myrlene Staten, MD
Deborah Wexler, MD
John Lachin, PhD
GRADE Study Research Group
Rationale and Design of the Glycemia
Reduction Approaches in Diabetes:
A Comparative Effectiveness Study
(GRADE)
Diabetes Care

David Nolan, PT, DPT, MS, OCS, CSCS

Effect of Increased Iliotibial Band Load on Tibiofemoral Kinematics and Force Distributions: A Direct Measurement in Cadaveric Knees Journal of Orthopaedic & Sports Physical Therapy

Shilpa Ojha, MBChB Jean Ashland, PhD, CCC-SLP Cheryl Hersh, MA, CCC-SLP

Jyoti Ramakrishna, MD Christopher Hartnick, MD Type 1 Laryngeal Cleft: A Multi-Dimensional Diagnostic and Management Algorithm Accessed Online: JAMA Otolaryngology Pedi Surg

Jun Oto, MD, PhD Christopher Chenelle, BS Andrew Marchese, MS Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

A Comparison of Leak Compensation in Acute Care Ventilators During Non-Invasive and Invasive Ventilation: a Lung Model Study Respiratory Care

Jun Oto, MD, PhD Christopher Chenelle, BS Andrew Marchese, MS Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

A Comparison of Leak Compensation During Pediatric Non-Invasive Positive Pressure Ventilation: a Lung Model Study Respiratory Care Donna Perry, RN, PhD

Peace Through a Healing Transformation of Human Dignity: Possibilities and Dilemmas in Global Health and Peace Advances in Nursing Science

Transcendental Method for Research with Human Subjects: A Transformational Phenomenology for the Human Sciences Field Methods

Beyond Negotiation: Combatants for Peace and Authentic Subjectivity in the Israeli-Palestinian Conflict The Longergan Workshop Journal

Effective Purpose in Transnational Humanitarian Health Care Providers American Journal of Disaster Medicine

Mimi Pomerleau, DNP, RNC-OB Cultivate Passion in Your Practice with the 4 Rs Nursing for Women's Health

Denise Richards, MSN, FNP, CDE Mary Larkin, RN, MS, CDE

Elaine Javier, BS Terri Casey, RN, BSN, CDE Margaret Grey, DrPH, RN, FAAN Learning Needs of Youth with Type 2 Diabetes

The Diabetes Educator Journal

Fatima Rodriguez, MD, MPH
Clemons Hong, MD, MPH
Yuchiao Chang, PhD
Lynn Oertel, RN, MS, ANP
Daniel Singer, MD
Alexander Green, MD
Lenny Lopez, MD, MDiv
Limited English Proficient Patients and Time
Spent in Therapeutic Range in a Warfarin
Anticoagulation Clinic
Journal of the American Heart Association

Janet Sobel-Meadow, RN, CCM Working in a Hospital-Based Geriatric Care

Management Practice *Inside GCM*

Shawna Strickland, PhD, RRT Bruce Rubin, MD Gail Drescher, MA, RRT Carl Haas, MS, RRT Catherine, O'Malley, RRT Teresa Volsko, MHHS, RRT Richard Branson, BR, RRT

Dean Hess, PhD, RRT, FCCM, FCCP, FCCM AARC Clinical Practice Guideline: Effectiveness of Nonpharmacologic Airway Clearance Techniques in Hospitalized Patients

Respiratory Care

Demet Sulemanji, MD Andrew Marchese, MS Mark Wysocki, MD, PhD Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

Adaptive Support Ventilation With and Without Setting: a Prospective, End-Tidal CO2 Closed Loop Control Versus Multicenter Validation Conventional Ventilation Intensive Care Medicine Intensive Care Medicine

Lara Traeger, PhD
Elyse Park, PhD, MPH
Nora Sporn, BA
Jennifer Repper-DeLisi, RN, MSN
Mary Convery, MSW, LICSW
Michelle Jacobo, PhD
William Piri, MD, MPH
Development and Evaluation of Targeted
Psychological Skill Training for Oncology
Nurses in Managing Stressful Patient and
Family Encounters
Oncology Nursing Forum

Jesus Villar, MD, PhD
Robert Kacmarek, PhD, RRT, FCCM,
FCCP, FAARC
Modern Critical Care Medicine from
China: an Ancient Civilization

Critical Care Medicine

Jesus Villar, MD, PhD Lina Perez-Mendez, PhD Jesus Blanco, MD, PhD Juan Anon, MD Luis Blanch, MD, PhD Javior Belda, MD, PhD Antiono Santos-Bouza, MD Rafeal Fernandez, MD, PhD Robert Kacmarek, PhD, RRT, FCCM, FCCP, FAARC

Spanish Initiative for Epidemiology, Stratification, and Therapies for ARDS (SIESTA) Network. A Universal Definition of ARDS: the PaO2/ FiO2 Ratio Under Standard Ventilatory Setting: a Prospective, Multicenter Validation Study Intensive Care Medicine

PROFESSIONAL ACHIEVEMENTS • publications

Jesus Villar, MD, PhD
Robert Kacmarek, PhD, RRT, FCCM,
FCCP, FAARC
What is New in Refractory Hypoxemia?
Intensive Care Medicine

Jesus Villar, MD, PhD
Demet Sulemanji, MD
Robert Kacmarek, PhD, RRT, FCCM,
FCCP, FAARC
The Acute Respiratory Distress
Syndrome: Incidence and Mortality,
Has It Changed?
Current Opinion Critical Care

Kathleen Walsh, RN, PhD Barbara Blakeney, RN, MS, FNAP Nurse Presence Enhanced Through Equus Journal of Holistic Nursing

Executive Team

Jeanette Ives Erickson, RN, DNP, FAAN Senior Vice President for Patient Care and Chief Nurse

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

Debra Burke, RN, MSN, MBA Associate Chief Nurse

Leila Carbunari, RN, MEd Director, International Patient Program

Deborah Colton Senior Vice President for Strategic Communication, MGPO/PCS

Marianne Ditomassi, RN, DNP, MBA Executive Director, PCS Operations and Magnet Recognition

Theresa Gallivan, RN, MS Associate Chief Nurse

Annabaker Garber, RN, PhD Director, Clinical Informatics

Marie Elena Gioiella, MA, MSW, LICSW Director, Social Service

Antigione Grasso, MBA Director, PCS Management Systems and Financial Performance

Robert Kacmarek, RRT, PhD, FCCM, FCCP, FAARC Director, Respiratory Care Services

Robin Lipkis-Orlando, RN, MS, PMHCNS-BC *Director, Office of Patient Advocacy*

Wayne Newell Director, Volunteer and Information Associate Services

Anabela Nunes, MBA

Director, Medical Interpreter Services

Rev. John Polk, DMin, BCC *Director, Chaplaincy*

George Reardon, MBA

Director, Clinical Support Services

Susan Sabia *Executive Editor*, Caring Headlines

Colleen Snydeman, RN, MSN, PhD(c) Director, PCS Office of Quality & Safety

Michael Sullivan, PT, DPT, MBA Director, Physical Therapy and Occupational Therapy

Dawn Tenney, RN, MSN Associate Chief Nurse

Carmen Vega-Barachowitz, MS, CCC-SLP Director, Speech, Language & Swallowing Disorders

Deborah Washington, RN, PhD Director, PCS Diversity Program

Kevin Whitney, RN, MA, NEA-BC *Associate Chief Nurse*









2013 Patient Care Services Annual Report