

HARTFORD HOSPITAL

SPRING 2010

Nursing



Hartford Hospital Nursing

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Cover Photograph:

Sarah Hickey, RN, BSN (foreground),
of Bliss 8 prepares for bedside
rounding-report, as Joanne Repaci, RN,
also of Bliss 8, talks with a patient.

(Photograph by Lanny Nagler)



PHOTO: LANNY NAGLER

Sara Bradbury, RN, Emergency Department, cares for a trauma patient.



Hartford Hospital Nursing

For Hartford Hospital Nurses and Alumnae
of the Hartford Hospital School of Nursing

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Nurses Are at the Vanguard of Change

National Nurses Week marks a time each year when Americans stop to appreciate the great work done by this nation's 4 million nurses. Personally, I have a lot of strong reasons for respecting the nursing profession. I know firsthand how powerful your influence is in the life of a patient, and what a critical role you play in the healing process. You are an advocate for your patients, a listening ear, the caregiver. Your work defines what's best about Hartford Hospital.

As we move into the ranks of the country's top-decade hospitals, we are fortunate to have an outstanding nursing team at our side every step of the way. I've been impressed with the leadership role nurses are taking in moving our hospital toward our ambitious goal. You're truly our heart and soul.

H3W has given you a greater voice, and you know how to use it. Through H3W you've embraced the idea of hourly rounding and have put this patient-



Elliot Joseph, President and Chief Executive Officer, Hartford Hospital and Hartford Healthcare Corporation

pleaser to good use. We completed the most recent survey by the Joint Commission with high marks, largely because of the way you—and all staff members—have adopted the principles of H3W as your own. Speaking with one voice, the surveyors told us, the staff sings in unison. In so many ways, the nursing profession is at the vanguard of transformative change.

We are counting on you as we build for the future. Your passion, your energy, your enthusiasm and your commitment will help to propel us forward. As we recruit more nurses to sustain our growth, we will be looking for the talents and personal attributes that you have taught us to appreciate. Thank you for all that you do for our patients, and, equally importantly, thank you for all that you do for your profession.



It's All About the Teamwork

When I meet with new employees during their orientation process, I often refer to the three C's of patient care—Communication, Collaboration and Coordination. They are the basis for teamwork that exceeds our patients' expectations.

Nurses are familiar with using the three C's in their daily care. Utilizing the How Hartford Hospital Works (H3W) program in support of that practice is a fairly new concept.

It's been just over a year since H3W was introduced, and already I see positive changes in our Hartford Hospital culture. By putting the patient at the center of our transformation and focusing our leadership on that patient, we can continue to improve our quality of care, grow as an institution, maintain fiscal responsibility and achieve service and academic excellence.

Through the organized and facilitated departmental H3W workgroups, nurses are encouraged to communicate their ideas concerning issues that affect patient care and unit function, and it's working.

Outstanding examples of collaborative efforts between nurses



Linda Berger Spivack, RN, MSN, Vice President, Patient Care Services

and other members of their unit or other departmental groups are brought to my attention every day. Through coordinated efforts, problems are solved and patient satisfaction is met and even surpassed. It's inspiring to hear these stories.

Still, we have our challenges and a lot of work ahead of us. Nursing is an independent, autonomous profession in a collaborative, interdisciplinary practice environment. Embracing this empowering combination promotes clinical excellence. Nurses are accountable for their own practice while being engaged with the entire health care team. I believe that Hartford Hospital nurses exemplify this sense of balance.

Another aspect of H3W is the celebration and recognition of all the hard work being done. As we celebrate Nurse's Week this May, I'd like to congratulate those nurses who have earned their specialty certifications and those advancing their degrees. I'd also like to take this opportunity to thank all of our nurses for the fantastic care they provide to our patients. Hartford Hospital excels because you do.



2010 Nightingale Award Winners

You amaze us with your skills, impress us with your knowledge and move us with your compassionate care of your patients. You are scientists, caregivers, problem-solvers, teachers and respected partners. You are the nurses of Hartford Hospital. We salute each of you, and especially those of you chosen by your peers as 2010 winners of the prestigious Nightingale Award.

PHOTOS: KEVIN HAGAN



Ifeoma Mogor, RN
SURGERY



Mary Kate Parker, RN-BC, MS
CARDIOVASCULAR SURGERY



Cristin Chambers, RN, BSN
OPERATING ROOM



Nicki Larabee, RNC
WOMEN'S HEALTH



Jen Moller, RNC-OB, C-EFM
WOMEN'S HEALTH



Ann Flourde, RN, BSN
ORTHOPEDICS



Terry Kinsley, RN, CEN, BSN
EMERGENCY DEPARTMENT



Cynthia Belonick, APRN
THE INSTITUTE OF LIVING



Victor Durao, RN
MEDICINE



Susan Smith, RN
ONCOLOGY



Lisa Corbett, APRN
WOUND CARE



Janice Lepore, RN
CASE COORDINATION



Brenda Gelo, RN
CARDIOLOGY



Jeffrey LaBrode, RN, BSN
OPERATING ROOM



Justine Bedlack, RN
JEFFERSON HOUSE

HARTFORD HOSPITAL NURSES – NOTHING BUT THE BEST

Institute of Living Achievements

Jamie Buchanan, RN; David Nieske, RN; and **Lynn Roberts, RN**, have earned Adult Psychiatric Mental Health Nursing certification. **Penny Barnum Young, APRN**, has earned certification as a Clinical Nurse Specialist in Adult Psychiatric Mental Health Nursing. An article by **Ellen W. Blair, APRN**, and **Bonnie Szarek, RN**, titled "Osteoporosis: Awareness and Risk Factors in an Inpatient Geriatric Psychiatric Population: A Pilot Study" is being published in May 2010 in the journal *Issues in Mental Health Nursing*.

Palliative Care Certifications

Jennifer Dupuis, RN, and **Susan Smith, RN**, have earned their Hospice and Palliative Care Nurse certification. **Maryann Steed, RN, BSN**, completed her certification as a Hospice and Palliative Care Nurse educator (HPNA). She is one of eight HPNA-approved educators in Connecticut.

Vascular Surgery Presentations

Jennifer Nabors, RN; Monica Martins, RN; and **Megan Fuller, RN**, developed and

presented a PCA core program. Presentations included "Pin the Tail on the Incision" and "How Clean Are Your Hands?"

Cardiovascular Accomplishments

Quita Hall, RN; Meg Flaherty, RN; Julie Alvarado, RN; and **Mary Kate Parker, RN**, attained certification in Cardiovascular Nursing. **Cheryl Goldberg, RN**, attained certification as a Critical Care Registered Nurse. **Maria Vicuna-Rivera, RN**, received her Bachelor of Science in Nursing from the University of Hartford in 2009.

Neuro-Trauma Accomplishments

Tammy Glynn, APRN, received her Gerontological Nurse Practitioner certification in 2009. **Jennifer Sakowski, RN**, graduated in August 2009 with her Master of Science in Nursing Education from the University of Hartford.

Emergency Department Distinctions

Anna Meyer, RN, earned her Master of Science in Nursing from the University of Hartford in 2009. **Terry Kinsley, RN**, earned her Bachelor of Science in Nursing, passed the Certified

Emergency Nurse credentialing exam and accepted a job as Nurse Educator of the Emergency Department.

Kerry Hernandez, RN; Anthony Miranda, RN; Shannon Clark, RN; Torrey Trzcienksi, BS, RN; and **Melinda Dolan, BSN, RN**, attained their certification in Emergency Nursing. **Mark Scalzi, RN**, earned his Critical Care Registered Nurse certification.

Gretchen Wolf, RN, MSN, presented "Neurological Emergencies" in Maryland in March 2010.

Danette Alexander, RN, MSN, completed the American Organization of Nurse Executives fellowship in 2009.

GI Department Certifications

Mary Schwab, RN; Angel Morales, RN; Michelle Day, RN; and **Jen Chicoine, RN**, have all earned certification as CGRNs (Certified Gastroenterology Registered Nurses).

LIFE STAR Distinctions

Congratulations to **Michael Frakes, RN; Lisa Graziano, RN; James Marcelynas, RN; Michael Sahjian, RN; Joyce Suave, RN;** and

continued on page 17

HARTFORD HOSPITAL NURSES *are* EVERYDAY HEROES



PHOTO: LANNY NAGLER

Cindy McGarvey, RN, BSN, North 12, talks with a patient's family.

Whether in Haiti or Hartford, nurses make a positive difference in people's lives.

When a devastating earthquake struck Port Au Prince, Haiti, in January, most buildings were reduced to rubble. Not even hospitals were spared. Despite the dangerous aftershocks, help quickly arrived from around the world. Hartford Hospital's own Sarah Bradbury, RN, was among those who responded.

Bradbury, an Emergency Department nurse, resided 30 miles outside Port Au Prince in a town called Cabaret. It had been one month since the earthquake, so the initial trauma was over, but Haitians were still sick and injured.

"The survivors were crying and scared," Bradbury stated.

They sought her assistance for new allergies, upper respiratory tract infections and palpitations.

"They were sleeping outside on the ground and on their porches," Bradbury stated. "They were too scared to go back into their houses because the government [representatives] told them they were not safe." ▶



Sarah Bradbury, RN, aided earthquake victims in Haiti.

A clinic was set up for three days, and nearly 300 people arrived on foot from the surrounding villages for care. Diagnostic equipment was not available. All Bradbury had with her was a blood pressure cuff, stethoscope, portable pulse oximeter and an oral thermometer. Sarah described it as a guessing game.

“It put my one year of Hartford Hospital Emergency Department experience to the test,” Bradbury stated. “I had to refer back to what I had seen in the past, tried to match up what I learned back home, with what I was observing in Haiti.”

When patients told Sarah their bellies hurt, she and her team had to rely on their highly advanced clinical assessment skills as their only diagnostic instruments. Fortunately, there was a fairly well-stocked pharmacy, thanks to the outpouring of donations from organizations around the globe.

“I took care of an 85-year-old woman whose heart rate was too fast to count,” Bradbury stated. “There was no way to actually find out what was wrong with her. I had some IV supplies, so I started a[n] [intravenous] line, gave her 2.5 liters of fluid and Reglan for nausea, and her heart rate went down to 110.”

Bradbury traveled to a village called Messier not knowing what to expect.

“The clinic was set up in a building with cracks in the cement from the earthquake, with not a door or window in sight,” Bradbury described. “Exam rooms were constructed with string and sheets. People were examined sitting in chairs.”

There were fewer resources than in Cabaret, and medications were brought in a suitcase.

“I expected earthquake victims, but instead there were many women with vaginal infections for one year and fungal infections to the scalps on young kids,” she said. “We had a 2-year-old present completely limp in his father’s arms with +2 pitting edema to his lower extremities.”

The medical team Bradbury worked with consisted of an Emergency Department doctor, a pediatrician, a neonatal intensive care nurse, a psychiatric nurse and a medical-surgical nurse.

“As soon as we could, one of the doctors and a nurse transported him to a hospital called Mission of Hope, who

refused the patient,” she stated. “So he was then transported to a hospital in Port au Prince.”

Bradbury originally wanted to go to see the country and do what she knew how to do—be a nurse.

“The great thing about being a nurse here is that I knew I could still be a nurse in a Third World country,” Bradbury stated. “People did not speak the same language; therefore, I was limited to smiling and saying that it would be OK.”

Bradbury left Haiti hoping she had made a difference and knowing there was not enough treatment to go around. It humbled Bradbury to see that people could face such devastation, despair and hardship with grace.

“No BlackBerrys, iPhones, Facebook or text messaging, but they are happy and never lost a smile,” Bradbury empathetically stated. “Nursing is universal, and I love that.”

DIFFERENCE

Bradbury made a difference in Haiti, just as she does here in the Emergency Department every shift. Hartford Hospital has a team of 1,300 bedside staff nurses who make a crucial difference in patients’ lives with their compassion, selflessness and commitment to coming back every single day. Despite the wonders of modern, technologically advanced medicine, patients would not survive without compassionate nursing care. Patients want immediate answers to questions such as “When can I eat?” “When can I see my loved one?” and “When can I get up out of this bed?” It is the bedside registered nurse, coordinating every aspect of their care, collaborating with the doctors, and communicating with all members of the health care team, who has a direct impact on the patient’s quality of life and experience here at Hartford Hospital.

Sue Gallagher, RN, has been at Hartford Hospital for 21 years. She currently works on Bliss 9 I, the cardiothoracic intensive care unit. Her patient, “Emily,” was a normal teenager eating a cheeseburger for lunch with her friends, laughing and talking about being accepted to the University of Rhode Island to study medicine. Suddenly Emily became violently ill. Her liver went into acute failure, and life, as her family knew it, changed forever.

Emily was admitted to the intensive care unit, subsequently intubated, and remained on life support for five weeks. The ICU team tried to work miracles to keep Emily alive while waiting for a liver transplant. So many times, when caring for her, Gallagher would just chit-chat to her, offer words of encouragement and pray she would not give up.

“Our patients become like family. I was like Emily’s second mother,” Gallagher stated. “I spent three hours detangling her hair one night and putting it in a braid. Having children of my own, Emily’s mom and I were able to share stories, laugh together and cry together.”

Emily’s condition rapidly deteriorated late one night. She was receiving every life-sustaining measure the intensive care unit could offer, including vasopressors to increase blood pressure, continuous venous-to-venous hemodialysis and a ventilator that was running at 100 percent. The ICU resident

asked Gallagher to speak with the family, for her bond with them was the strongest.

“I told Emily’s mom, ‘I will do whatever you want me to do—chest compressions, push meds, anything—but it may not change the outcome,’” Gallagher empathetically stated. “She [mom] hugged me and thanked me for everything, but said it was time; I had to stop.”

Gallagher, who is always professional and composed on the nursing unit, was in tears along with her colleagues that night, as she shared this touching story.

“The patients keep me coming back every day,” Gallagher said.

COMPASSION

“Alex,” like Emily, had liver failure. He was on North 11 for months, too sick to go home. Alex became cranky and difficult after spending two weeks in the same bed. Kari Horton, RN, was Alex’s nurse every single shift she was on the unit.

“He was my favorite patient; he told me that he felt comfortable and safe in my care,” Horton stated. “His daughter said she wanted to be a nurse because of me.” Horton’s eyes lit up, and she was smiling ear-to-ear in speaking of Alex’s daughter.

Since Alex received a liver transplant, he has returned only once in two years.

“We see a lot of our transplant patients come back and say, ‘Look at me now,’ after they have lost weight, resumed daily activities and are fully functioning on their own,” Horton stated. “Patients come in on their death beds. You do not even think they will make it through the weekend, yet they leave so healthy we do not recognize them. Over the course of those few months, each of those patients becomes our family.”

FAMILY

After interviewing a variety of nurses, including Stephanie Woina, RN, from Center 10; Sue Carter, RN, from Bliss 10 ICU; and Cindy McGarvey, RN, of 20 years on North 12; the message was clear: It is bonds created with family that foster the love of bedside nursing.

“Everyone pitches in to get to know the patient and family—RNs, PCAs, residents, Nutrition and the entire health care team,” Carter stated. “We all try to build the patient’s spirit.”

Both Carter and Woina recounted stories of having game nights or watching movies with patients who had spent months in the hospital, too sick to go home. Carter smiled and stated, “You take the time to set up the lounge for dinner or a movie because you are doing it for the patients and families with whom you have become so close.”

“It is so rewarding when the entire family is supportive and appreciative of everyone’s care throughout the hospital stay,” McGarvey said. “There are so many touching patient stories



Chavella Campbell, RN, BSN, STAR Team

that keep our nurses at the bedside that it is hard to pick just one.”

Diane Hooper, RN, on Bliss 8 affirmed, “It is the human touch. The gratification I receive from going home knowing I made a difference in someone’s life. I make every one of my patients and families feel like they are my only one.”

Nancy Discenza, RN, and Darcie Shewokis, RN, of Bliss 5 agreed. “It is certainly not the hours, the pay or the schedule—it is the patients and families. We share very personal experiences with oncology patients—death and dying. We empower them to realize they can live with this disease.”

Discenza and Shewokis have been working with oncology patients here at Hartford Hospital for 21 years and 26 years respectively on the night shift, always with a smile and a laugh.

Discenza began to say, “There were these two potatoes . . .” She did not make it any further and had everyone around her laughing so hard that some were crying. In such a critical environment it is heartwarming to know that humor and happiness are portrayed to the outside world. ■

“... I make every one of my patients and families feel like they are my only one.”

Diane Hooper, RN

COMMUNICATE COLLABORATE COORDINATE

THE THREE C'S OF PATIENT CARE

Supported by the How Hartford Hospital Works (H3W) program, nurses are recognized for providing excellence in the three C's of patient care.

When the automatic doors to Bliss 7 ICU opened, two visitors swapped wide-eyed glances at each other. They seemed to anxiously acknowledge the beep-beep sound of the monitors that alerted them to the serious nature of the unit they were entering.

A surgical intensive care unit, Bliss 7 I admits some of the most critical and challenging patients at Hartford Hospital. Any expectations of a chaotic scene were set aside, this day, as nurses moved about the unit calmly, but with a sense of purpose. They know it takes the three C's—Communication, Collaboration and Coordination—to meet their patients' needs.

"We have 12 patients," Kim Murphy, RN, BSN, said. "We usually assign one nurse to two patients. A patient requiring a one-to-one is given that when needed."

Even with the low nurse-patient ratio, the ICU nurses rely on each other and other members of the team. Murphy helped

another nurse reposition a patient, called for an X-ray, consulted with the attending MD and checked on a nurse being oriented to the unit, all in under 10 minutes.

Kendra Riley, RN, was the nurse being oriented. She left an ICU at a smaller hospital to work in a unit that would challenge her.

"I wanted to learn more," she said, "and I certainly am doing that here."

Riley's preceptor, Christine Leffler, RN, although clearly busy herself, sat down with her to patiently review the care plan for their new transplant patient. No detail was too small as Leffler shared her experience and knowledge generously.

This level of communication, collaboration and coordination, expected on an intensive care unit, would seem more difficult to achieve on a step-down floor with a greater nurse-to-patient ratio.

Not so, according to Susanne Yeakel, RN, MSN, Nurse Manager of Bliss 8. She credited the How Hartford Hospital Works (H3W) program with providing the tools for nurses to practice the three C's, at that same level, on her unit. ➤



PHOTO: JANNY NABGER

Bliss 7 I team members (l-r) Katie Ortiz, RN, BSN; Nurse Manager Sue Williamson, RN, MHA; and Kim Murphy, BSN, RN, confer about a patient.

H3W began in the fall of 2008. Bliss 8 was included in the first wave of structured, facilitated unit meetings designed to improve quality of care, communication (3C's) and productivity.

Nurses comprise more than 1,300 of the hospital's 6,000 employees. Percentagewise, they are in a good position to implement these improvement goals.

With more than 90 employees on Bliss 8 working a variety of shifts and hours, Yeakel found it necessary to hold four or even five staff meetings per month to convey the H3W message.

"It's a process that takes a lot of time," Yeakel said, "but the benefits were everybody was doing the same thing, having the same structure, getting the same message and gathering ideas from all the staff."

The payoff has been that great ideas, communicated by staff members, have solved problems on their units and elsewhere in the hospital. Their ideas ranged from simple changes to more complex solutions.

One of the easier problems to solve had to do with the computers used in patient care. Although the screensaver reminds users that "hand hygiene saves lives," a readily available method to clean the keyboard in between uses was not handy. Brainstorming ideas lead to putting disinfectant wipes on the bottom of each computer cart. Problem solved.

"It was little things," Yeakel said, "that you didn't know, as a manager, that get in the way of people doing their jobs."

Nurses comprise more than 1,300 of the hospital's 6,000 employees.

A recent, more complex issue was solved by collaborating with the Dietary Department team. By listening to the concerns of the dietary staff, and voicing their own, both teams were able to identify best-practice barriers and remove them.

Since Bliss 8 is a surgical floor, nurses need to discharge patients by 11 a.m. in order to free beds for postoperative patients and those being admitted from the Emergency Department.

Patients need to be able to tolerate their diet before being discharged, but the breakfast trays were arriving at 9 a.m. This made it difficult to assess dietary tolerance and do all the other things necessary for an 11 a.m. discharge.

One concern voiced by the dietary personnel was that over-bed trays were not likely to be cleared earlier in the morning, slowing the meal distribution process.

A problem compounding the breakfast issue was that nurses had to make multiple calls to the dietary office with diet changes that had been ordered that morning. This consumed valuable time for both the nurses calling and for

Communication, Collaboration and Coordination Work

The 43rd Annual Meeting and Exposition of the American Organization of Nurse Executives was held this past April in Indianapolis, Ind. Hartford Hospital was represented there with a poster submitted by nurses from the Bliss 8 unit.

Sarah Hickey, RN, BSN, lead a committee that was chosen by AONE to work on a Transforming Care at the Bedside project. The committee began work on the project in October 2009 and members were delighted to be able to present their project results by April this year.

"There were 50 hospitals involved nationwide," Hickey said. "Every hospital [presented] something different."

For the Bliss 8 project, Hickey collaborated with Ryan Millbury, RN, BSN. They chose to focus on problems that occurred during the shift-to-shift report time.

"We found that our patients felt their needs weren't being taken care of during those times," Hickey said. "We had huge increases in call lights and the number of calls to the desk and to our nurses."

Giving report at the nurse's station meant staff members were often too far away from the patients to hear their beeping IV or to meet their physical needs.

"The way we corrected it," Hickey said, "was to give report at the bedside. The patients were able to meet their new nurse, put a face to the name and know that we are actually on the floor to take care of them."

Bedside rounding-report began with two nurses working opposite 12-hour shifts. Hickey made sure that her day shift was scheduled to coincide with Millbury's night shift. Together they rounded on all the patients in their care. They gave report outside the patient's room. Then both nurses entered the room to introduce themselves to the patient. They met any pressing needs and communicated care goals for that day to the patient.

White erase boards, hanging in all patient rooms, allowed the two nurses to write out the goals and specific diet for that patient and to review it with him or her.

"We're able to fix a beeping IV right away," Hickey said, "by being in the room. If they need pain medicine, we're able to say when we'll be back with it. At least they know they're going to be taken care of during report time."

The team developed a unit-specific survey to measure patient satisfaction during report periods. The survey asked five questions of both patients who had been rounded on and patients who had not been. Patients used a Likert scale to register their level of satisfaction. The data revealed an increased level of satisfaction among patients who had experienced the bedside rounding technique.

Pairing with a nurse on the opposite shift, sharing the same patients and visualizing the patient's needs by being at the bedside have expedited the reporting process.

"Getting out of work on time," Hickey said, "is a good benefit."

The whole staff is expected to benefit from the expedited, more personal bedside rounding technique, as the entire unit went "live" with this practice in April.

the dietary employees who were answering the calls and then preparing extra meal trays.

The collaborative solution to this issue was to have the night shift PCAs clear the over-bed tables so that trays could be distributed by 7:30 a.m.

They also devised a “contingency cart” containing 10 to 20 trays with a sampling of clear-liquid, full-liquid and low-residue diets that could be swapped out for patients who received a diet change that morning. That cart arrives on Bliss 8 at 7:30 a.m. as well.

“It was staff from different departments,” Yeakel said, “working through the process, identifying barriers and working out solutions.”

Since the changes were made in January, the daily calls to dietary went from 20 to none, and patients have been able to tolerate their diets earlier in the day. Yeakel said that her data showed a 3 percent increase in discharges before 11 a.m., with significant cost savings.

Most importantly, patient satisfaction has increased as a result of not having to wait for their meals to arrive.

Another H3W-generated project helpful in promoting the 11 a.m. discharge time was the shift-to-shift rounding-report initiative spearheaded by Sarah Hickey, RN, BSN.

“We thought that if we could make the patients happy by seeing us,” Hickey said, “and we could get their pain controlled, that would aid in their earlier discharge.”

It seems that Hickey and the staff of Bliss 8 have made a difference by utilizing the three C’s of interpersonal, interdepartmental and patient care.

“I think this is the best year, as a manager, I’ve ever had,” Yeakel said. “Everything seems to be coming together, and I think H3W has made a difference. The ideas generated from my staff have been great. They see a value in their ideas and working on the solution together.”

Back on Bliss 7 I, Leffler took a moment away from the technical aspect of her job to approach her patient’s wife. “Do you have any questions?” she asked warmly.

Having answered several questions, Leffler asked the woman for her cell phone number and assured her the staff would be in touch with any changes. A smile of relief washed over the woman’s face, knowing she would be able to communicate with her husband’s caregiver as needed. This seemingly small gesture on Leffler’s part meant everything to the patient and his family. It changed “satisfied” to “very satisfied.”



Kelly Kernan, RN, BSN (right), of North 11 discusses a plan of care with a patient and family member (left).

Research

Nurse's Research Aims to Improve Women's Lives and Health

For 21 years, Colleen Mellen, APRN, of the Urogynecology Division of Women's Health Services at Hartford Hospital has been helping women of all ages suffering from the discomfort of pelvic organ prolapse. Mellen, along with her colleagues Minita Patel, MD; David O'Sullivan, PhD; and Christine Lasala, MD, designed and implemented a research project entitled "The Impact of Pessary Use on Prolapse Symptoms, Quality of Life, and Body Image." A pessary is a silicon device used to support organs in the pelvic region that have prolapsed.

Mellen spearheaded this project, writing the proposal, gathering participants, fitting the pessary, educating the patients, creating the questionnaire and analyzing the results.

In the 2009 study, women with pelvic

floor disorders who sought Mellen's help and who were contemplating or awaiting a surgery, were of childbearing age or opted for medical management were fitted for a pessary. The objective was to evaluate whether use of a pessary would improve body image, affect symptoms or change participants' quality of life.

"In the past, people with this disorder used oranges, lemons or rocks to hold things up. We have certainly come a long way," stated Mellen.

One hundred four women eagerly signed up for the study. The team sent out surveys at three-, six-, nine- and twelve-month intervals to determine the effectiveness of the pessary placement.

Mellen has received 78 surveys back thus far at the three-month point, with

promising results. Women have felt considerably more comfort, and perception of body image has greatly improved. Mellen is eagerly awaiting results from the six-month follow-up.

Mellen began her career as a registered nurse in 1979 and went on to get her MSN and APRN in community health nursing. Practicing nurses such as Mellen can help improve the lives and health of our patients at Hartford Hospital. Grant money is available, and any nurse may apply. Hartford Hospital provides assistance to help nurses new to doing research through the process, beginning with proposal writing and the application to the IRB. It is research done by bedside nurses that contributes to evidenced-based practice.

Education

Many Opportunities for Registered Nurses

Hartford Hospital is entering into its busiest recruitment season, hiring both graduate and experienced nurses. The opening of nine additional step-down and eight intensive care unit beds in May and June respectively, coupled with the general increased volume throughout the hospital, has created new opportunities for registered nurses.

For the newly graduated student nurse, our Graduate Nurse Residency Program is in its third year of operation. This program provides a structured first-work experience that promotes professional growth and development of the resident nurse. Partnering with a registered nurse preceptor in a work/study environment, the resident nurse increases his or her competency in caring for the adult, acute-care, medical-surgical patient. Once the resident nurse completes the nine-week orientation program, he or she continues to participate in eight monthly presentations and peer group support meetings with other newly graduated nurses. These structured activities are designed to foster strong collegial relationships and support the nurse during integration into unit, department and hospital initiatives.

External Education Calendar for the spring, summer and early fall 2010:

May 13 noon – 1:15 p.m.	Institute of Living Annual Nurses' Week Grand Rounds: Post-Traumatic Stress Disorder Due to Childbirth Speaker: Cheryl Beck, DNSc, CNM, FAAN Hartford Room, Commons Building
June 2 7:30 a.m. – 3:45 p.m.	Women's Health Services 3rd Annual Perinatal Symposium Education and Resource Center
June 2 1:30 – 2:30 p.m.	Institute of Living Contemporary Nursing Issues: Reducing Caregiver's Stress and Behavioral Disturbances in the Patient with Alzheimer's Disease Speaker: Kelli Phillips, RN, BSN Donnelly 3 North, Donnelly Building
Sept. 27 and 28 Daily	Kimberly-Clark Education Bus Hospital Acquired Infections
Oct. 8 8 a.m. – 4 p.m.	14th Nursing Research Alliance Conference: The Value of Nursing in Achieving Patient Outcomes Speaker: Sharon Eck Birmingham DNSc, RN Education and Resource Center

The hospital continues to support nurses as they complete requirements for professional certifications. The hospital is pleased to be the host site for the National Certification Corporation's Paper and Pencil Certification Exam on Sept. 24, 2010. The NCC provides core and nurse practitioner certification in women's health, neonatal and obstetric nursing. Contact Susanne Brown at 860-545-1306 for testing information.

Focus on Alumnae

Message from the President



Many Changes Ahead in Health Care

2010 brings with it numerous issues related to health care in our society. Health care reform has moved to the forefront of the political arena. There are differing views on how improvements can be implemented and much uncertainty about how the new law will affect us personally and professionally, now and in the future.

One potential effect will be a huge investment in health information technology. The medical community is developing and using computerized medical records. These electronic medical records (EMRs) or electronic health records (EHRs) will definitely be in our future. Some still resist their use, fearing lack of privacy and risk of medical data somehow becoming public information. In reality, there are many benefits to the EMR. According to a recent issue of the *New England Journal of Medicine*, they have been shown to reduce diagnostic errors. They make organizing and accessing a patient's history, physical examination and tests easier and provide easy documentation of issues and ongoing problems requiring assessment. The EMR seems to be a better approach to managing problem lists and keeping things from "slipping through the cracks." We can only hope that these electronic medical records will provide a more reliable, efficient, yet content-rich system that will aid in prevention and diagnosis.

The computer is an important tool in our quest for improved health care, but so is the registered nurse. In a bit of distressing news, the National League for Nursing's annual survey of all nursing programs in the United States found slowing growth. The demand for admission to undergraduate nursing programs continued to outstrip supply as of 2008. In that year, more than 119,000 qualified applicants were turned away. Reasons for this include lack of clinical placement settings and the high cost associated with nursing education. In the area of post-licensure programs, the problem most often cited was the shortage of faculty. Nursing continues to have an unresolved problem.

On a more upbeat note, the Alumnae Association of the Hartford Hospital School of Nursing has remained active this past year. We have achieved our goal of donating funds to many worthy charities. We made donations to the Simulation Center at Hartford Hospital, the Hartford Paralympic Chairs for Champions (providing wheelchairs for sports), the American Red Cross for Haiti earthquake relief, the Iwo Jima Memorial (New Britain), the Multiple Sclerosis Foundation and the Multiple Myeloma Research Foundation. If any association member would like to suggest a worthy charity for consideration in the future, please contact a board member.

As a community service, several members have volunteered to recite the Nightingale Pledge at the funeral of deceased graduates. This gesture has proven to be a touching moment and very appreciated by the family at a sad time.

As in the past, our organization continues to reinstate members to the Alumnae Association of the Hartford Hospital School of Nursing as well as the Bed Fund. We continue to grow!

Karen Stinson Mazzarella

Karen Stinson Mazzarella, RN, BA (HHSN '69)

The Board of the Alumnae Association of the Hartford Hospital School of Nursing

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Join Your Alumnae Association

Become one of the more than 600 HHSN graduates who belong to the Alumnae Association of the Hartford Hospital School of Nursing. Membership dues are only \$30.00 per year. Members are eligible to apply for the Alumnae Bed Fund and scholarships.

To join, simply mail your \$30 non-tax-deductible check (payable to the Alumnae Association of HHSN Inc.) to the address below, along with your full name, class year, mailing address, telephone number and e-mail address.

For more information, please contact Karen Stinson Mazzarella, President, at kmazzar@ccmckids.org; Pat Ciarcia, Executive Secretary, at patciarcia@snet.net; or visit our Web site at www.HHSNalumnae.org. You can also write to the Alumnae Association of the Hartford Hospital School of Nursing, 560 Hudson Street, Hartford, CT 06106.



They Call Her Many Hearts



HAMILTON ARCHIVES AT HARTFORD HOSPITAL

Marilynn Roberge (Malerba), 1974

Leave it to a nurse to make history. This summer, Lynn Roberge Malerba (HHSN '74) will become the first woman in 300 years to be inducted as Chief of the Mohegan Tribe of Connecticut.

Lynn, who had a 23-year career in nursing, is currently Chairwoman of the Mohegan Tribal Council, which is the governmental arm of the tribe. Her appointment as chief will be for life. The chief's role provides continuity and stability for the tribe over time. While the chief works closely with all the tribe's elective bodies, there is no cut-and-dried job description for the position.

"Each chief defines his or her role by the times they find themselves in," Lynn says. "I will work with tribal governing bodies and chat with members to determine what my priorities will be."

The Mohegan Tribe operates the Mohegan Sun casino, hotel and entertainment complex in southeastern Connecticut. The enterprise employs nearly 10,000 people. The tribe itself has 1,800 members.

Lynn's family has been active in tribal leadership for decades. Her mother was on the tribal council for 30 years, including the years during which the tribe obtained federal recognition and developed the casino. Lynn's great-grandfather was Chief Matagha, who headed the tribe from 1937 to 1952.

Tradition calls for each chief to choose a Mohegan name. Lynn has chosen Mutáwi Mutáhash, which means "Many Hearts."

She chose the name, she says, "for all the hearts I've cared for in the past, all the hearts I hold in my hand today, and all the hearts I have yet to meet."

Each chief also chooses a distinctive symbol or "mark." Lynn's includes elements representing family members, the Earth and the tribal heritage.

The heart is an appropriate symbol for Lynn, both as an individual and as a nurse. She chose to go into nursing "because I wanted a profession that had an impact on people's lives in a very personal way." She chose the Hartford Hospital School of Nursing because she liked the size of the school and the balance of didactic and clinical education.



Lynn's mark as Chief Mutáwi Mutáhash

At HHSN, she enjoyed the camaraderie of being part of a group of people all working for a common purpose. Her best friend to this day is someone she met in nursing school, Donna Maloney Prue (HHSN '74).

After graduating, Lynn worked on a med-surg floor at Lawrence & Memorial Hospital, then in the medical ICU at Hartford Hospital. When she was offered a management position at Lawrence & Memorial, she returned to the New London hospital, where she stayed for 21 years. She progressed from Nurse Manager on the telemetry unit to Director of Cardiac and Pulmonary services. Her responsibilities included the cardiac care, intensive care and telemetry units; the respiratory floor; the cardiac catheterization lab; cardiac rehabilitation; respiratory therapy; the pulmonary lab; and the EKG department.

"I was responsible for multiple disciplines as well as the entire service line for both areas of expertise," Lynn says. "It was a position I found very rewarding."



Lynn Malerba today

Lynn continued her education, earning a BSN from St. Joseph College in 1983 and a master's degree in public administration from the University of Connecticut in 2008.

In 1997, she accepted a position as Executive Director of Health and Human Services for the Mohegan Tribe. She spearheaded efforts that created an array of housing, health care, wellness and youth programs designed to strengthen the tribal community.

Lynn says her education and experience as a nurse helped prepare her for her leadership roles with the tribe in a couple of ways.

"As a nurse, you have to think critically about what you're doing, be analytical, use data to make good decisions, and then go back and evaluate those decisions," she says.

Lynn adds, "The strength of nursing education is developing the ability to connect at a very human level with whoever you're dealing with, meet them where they are, understand their perspective and work together to achieve mutually beneficial end results. I think that's what nurses do best."

Although she is the Mohegan Tribe's first lifetime chief, Lynn notes, there have been many strong women who have played vital roles in the life of the tribe.

"I hope I bring honor to those women who worked to keep our culture, traditions and government together," she says.

Classmates Across Time

HAMILTON ARCHIVES AT HARTFORD HOSPITAL



Patricia Alvord (Rhodes)
1959



Pat Rhodes today

Patricia Alvord Rhodes graduated from the Hartford Hospital School of Nursing in 1959 and was a practicing nurse for more than 40 years before she learned that a relative, Sarah Letitia Harrison, had been a member of the school's class of 1894, when it was known as the Hartford Hospital Training School for Nurses.

"My mother's youngest cousin called me one day in 2002 and said that, while cleaning out the attic, she'd found an old cardboard tube," Pat recalls. "Inside was Sarah Harrison's diploma from the Hartford Hospital Training School for Nurses. Knowing that I'd graduated from the same school, she thought I'd like to have it."

The 108-year-old diploma proved to be in near-perfect condition. Pat had it professionally framed with archival materials. When she returned to Hartford last year for her 50th

class reunion, she presented the framed certificate to the Hamilton Archives at Hartford Hospital, where it is on display today.

Pat hadn't known of Sarah Harrison previously, but discovered that Sarah was her maternal great-grandfather's sister-in-law. A little more research, including a look into former Director Ethel Brooks' history of the school, *A Long Way*, turned up a few facts about this early nurse.

Sarah was born in New Brunswick, Canada, around 1866 and was one of eight children. She entered the Hartford Hospital Training School on June 4, 1892, and graduated on June 17, 1894.

"The school didn't hold graduation ceremonies until 1895," Pat notes, "so Sarah received this beautiful diploma, but had no ceremony."

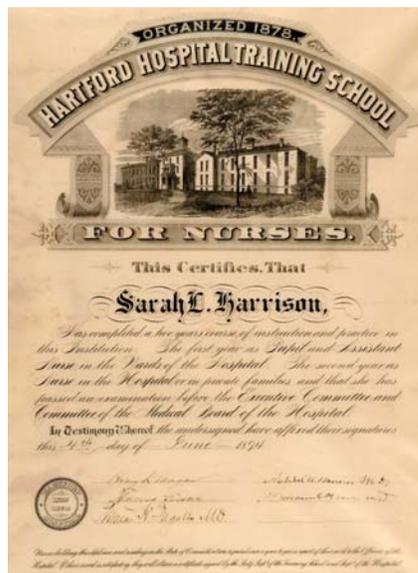
From June 1894 to June 1895, Sarah was the Assistant Matron under Persis M. Plumer, Lady Superintendent of the school. In late 1895, Sarah went to New York City to take an eight-month postgraduate course at the New York Cancer Hospital, which would later become Memorial Sloan-Kettering Cancer Center. She returned to the training school and in 1898 was Night Matron under Lady Superintendent Elizabeth Friend.

Pat's mother, Annette Fairweather Alvord, recalled that Sarah had nursed Annette's family during the influenza epidemic of 1917 and 1918.

Pat herself enjoyed a decades-long nursing career, working in a variety of capacities in locations across the country, most recently in Texas. She retired in 2006.

"I loved nursing," Pat says. "I especially loved working in the neonatal intensive care unit at St. David's Hospital in Austin. Of everything I did, the NICU was my favorite job."

Thanks to a fortunate discovery, a family connection and Pat's appreciation for history, her fellow alumna and one of the Hartford Hospital Training School's earliest graduates will never be forgotten.



Sarah Harrison's 1894 diploma



Sarah Harrison (top right) with Pat's mother, Annette (front left) and Annette's sister, circa 1921

HAMILTON ARCHIVES AT HARTFORD HOSPITAL

PHOTO: KEVIN HAGAN

Class of 1941

Isabel Warley Baldauf lives in Roanoke, Va., in a life care facility (independent living unit) with her husband, Richard. They live within four miles of their daughter Nancy and her husband, grandsons and two great-grandchildren.

Charlotte Upham Curtis lives in the Bradley Home in Meriden, Conn.

Christine Webster Rogaleski lives with her husband, Bill, in a retirement home in River Oaks in Englewood, Fla. Her daughter Susan and husband live nearby. She has one great-grandson and another due in 2010.

Clelia Venditti Whitlock lives in a condo in Dallas, Texas.

Class of 1948

Norma B. Marshall and her classmates have not met for several years but correspond via e-mail. **Carol Ryder Beatson** now lives with her daughter in Southington, Conn. The rest of the members of their small class remain in their homes.

Class of 1950

Irene Sakmar O'Day has been actively petitioning for health care reform by rallying at the state Capitol and working with the "Health Care 4 Every 1" organization. She is a charter member of the Shoreline League of Democratic Women, a political and social fellowship organization with a focus on issues important to women of all ages. Their signature event is an annual Green Life Style Fair which promotes the latest developments in energy conservation and environmental issues.

Marjorie Zenobi Spitzel resides in South Florida and enjoys "surfing the Net." She gets back to Connecticut at least once a year at the family cottage in Old Lyme.

Sally Tuttle has a 10-month-old puppy that keeps her moving. The puppy, which is part poodle and part shih tzu, is named Sugah and is a constant care/training mission. The puppy visits patients in an area nursing home. Sugah is a joy to the residents and never fails to cheer them up!



Sugah, a nursing home delight

Class of 1955

Carmella DiPasquale Kenney recently attended the wedding of her youngest son, who was married in Hungary. Carmella and her husband also became great-grand parents in August when their only granddaughter had a baby boy.

Class of 1958

Patricia Rinaldi recently was honored at Hartford Hospital's Pinning Ceremony for completing 5,000 hours of volunteer work.

Class of 1959/1963

Sue Jones Renelt '59 and **Joan McIntyre Noble '63** recently discovered that they live a few streets away in lovely Pawleys Island, S.C. They hooked up immediately for cocktails at Sue's (with husbands in tow) and quickly realized they looked good for their "young" age. They each are very busy and, with great fun, remembered their days at Hartford Hospital. What a small world this is!

Class of 1961

Priscilla (Pat) Torrey August would like to remind her classmates that 2011 is their 50th anniversary, and she wants everybody to call or e-mail her with their current address, e-mail and lifestyle. Also, please include suggestions for what to do to celebrate.

Barbara Hickey Wilcox of Alexander, N.C., and four of her classmates and close friends celebrated a mini-reunion in August 2009. Classmates included: **June Werdelin Roncarti** of Manchester, Conn.; **L. Jean Reynolds** of Arlington, Va.; and **Lois Sharp Pabst** of Tolland, Conn. The event was held at Jean's family's summer cottage at Twin Lakes in Connecticut, where Jean grew up. They had a wonderful time sharing memories of their days at HHSN. In October 2009 **Barbara Hickey Wilcox** and **Elaine Hennig Stebbins** enjoyed a get-together at the Biltmore Estate in Ashville, N.C., near Barbara's home in Alexander.



*Elaine Hennig Stebbins and Barbara Hickey Wilcox
of the Class of 1961*



(l-r): **June Werdelin Roncarti, L. Jean Reynolds, Lois Sharp Pabst and Barbara Hickey Wilcox** of the Class of 1961

Class of 1962

Irene Hallgren Anderson, MSA, RN, COHN-S/CM is a clinic manager in occupational medicine at the New England Baptist Hospital in Boston, Mass. She has four grandchildren who are a source of joy for her. A few years ago, she became interested in photography, which has become an inspiring hobby. A lot of her work is displayed at the hospital.

Linda Arle Duval, in her retirement, substitutes as a school nurse and works at flu clinics. She and her husband travel to Florida in the winter and, this past year, enjoyed family time with their children on Cape Cod and in Catskill, N.Y.

Carol Drumm Ferik and her husband have traveled quite a bit this past year. Trips included traveling through the Blue Ridge Mountains of Virginia as well as trips to Annapolis, Md., and Atlantic City, N.J. They also visited their daughter in Michigan. Their daughter Beth is an Associate Professor at her medical school at Michigan State University, and she recently became certified as a da Vinci robotic surgeon.



Picnic get-together of members of the Class of 1962
Back row (l-r): **Linda Arle Duval and Patricia Conforti Masucci**. Front row (l-r): **Fran Bidorini Ganguli, Rosemary DeAngelis, Patricia Andreana Ciarica and Carol Drumm Ferik**

Class of 1963

Regina Godelski Gosselin works three to four days a week for Prometric. Her duties include administering written tests and clinical evaluations of hands-on skills for candidates taking the Certified Nursing Aide test in the state of Florida. She has been involved in Judo for 10 years and has a rank of first degree black belt. She also helps as an assistant instructor for Judo. Prior martial arts experience includes Moo Duk Kwan-Tang Soo Do, a traditional-style Korean Karate.

Class of 1965

Dianne Cull Litchfield would like members of the class of 1965 to attend the Alumnae Banquet this year, since they will be celebrating their 45th anniversary.

Class of 1966

Members of the Class of 1966 get together once a month for lunch and have a great time. Those who meet are: **Eunice French Ecker, Sue Hilton LaTulippe, Alpie Plikaitis Junghans, Gail Pendleton Rapoza** and **Betty Ann Vose Fusco**. Anyone who would like to join them, please call Gail, Alpie or Betty Ann.

Class of 1967

Marilyn Folcik, RN, MPH, CPHQ, CLNC, is retiring from Hartford Hospital after spending 34 years there. For the past 15 years she has been the Assistant Director for Quality and Evaluation within the Department of Surgery.

Class of 1969

Jean Bajek is not currently working in nursing but continues to renew her CPR certification and fulfill her continuing education requirements to maintain her Florida RN license. She works full-time at CVS Pharmacy and has three grandchildren, one of whom was just born in October.

Karen Stinson Mazarella, Pediatric Cardiology Clinical Care Coordinator at Connecticut Children's Medical Center, was a recipient of the 2010 Nightingale Award for Excellence in Nursing.

Class of 1970

Hope Lennartz recently worked with Haitian orphans during the Haiti earthquake disaster.

Class of 1976

L. Vanle Mathurin Sickle is a school nurse at Rondout Valley High School in Accord, N.Y. She is also an EMT-B, 1st Lieutenant with the Marbletown First Aid Unit and Assistant Fire Chief with the Marbletown Fire Company.



In Memoriam

We honor the memory of alumnae of the Hartford Hospital School of Nursing who have passed away and others who have touched our lives.

1935 Eunice Petremont Flannery	1946 Edith Hyde Thompson	1957 Gail Francis Jordon
1936 Edith Tychsen Nilson	1949 Roberta Roche Ford	
1939 Madeline Rich Shapera	1950 Ethel Goldstein Sharasheff	John K. Springer Chief Executive Officer of Hartford Hospital, 1974 - 1989
1940 Jane Weigold Carbone	1953 Anna Machernis Krawiec	
1941 Edith Mello Tobin	1954 Jane Anderson Conroy	

Let Us Hear from You!

We would love to receive photos and news from HHSN alumnae. Please mail information to the Alumnae Association of the Hartford Hospital School of Nursing, 560 Hudson Street, Hartford, CT 06106 or e-mail patciarcia@snet.net.

Request for HHSN Nursing Pins

We often receive requests for a replacement HHSN nursing pin. Since they are no longer made, the only way we can get one is if an alum is willing to donate her pin to the Alumnae Association. We would then give the pin to the alum who is requesting it. If you are interested in donating your pin for this purpose, please contact Pat Ciarcia at (860) 563-2005 or patciarcia@snet.net.



“The Caregiver,” a bronze statue of a student nurse, stands in the Meditation Garden on the campus of Hartford Hospital. The statue honors the 99-year history (1877-1976) of the Hartford Hospital School of Nursing. University of Hartford professor Lloyd W. Glasson of New York City and Cromwell, Conn., sculpted the statue, which was made possible by the efforts of the Alumnae Association of the Hartford Hospital School of Nursing.

Give a Lasting Gift

Your contribution today will make a difference to our nursing education program. Mail your gift to Hartford Hospital, Fund Development, 80 Seymour Street, Hartford, CT 06102. You can act now and show your commitment to nursing education forever by including Hartford Hospital and/or the Alumnae Association of HHSN Inc. in your estate plans. For more information, please contact Carol S. Garlick, vice president, philanthropy, at (860) 545-2162 or cgarlic@harthosp.org.

Alumnae Accomplishments

A Tradition of Education and Community Service

It was October 1941. War was raging in Europe. The attack on Pearl Harbor that would bring the United States into the conflict was two months away. In Wethersfield, Conn., a group of nurses got together and formed the Wethersfield Graduate Nurses Association. The group was dedicated to ongoing nursing education and service to the community. A year later, a similar group in Rocky Hill joined with them, and the Wethersfield/Rocky Hill Graduate Nurses Association was born.

During the war years that followed, members of the group were active in community service, volunteering at air raid shelters, teaching first aid and more.

The group, now called the Wethersfield/Rocky Hill Professional Nurses Association and open to any registered nurse, has upheld the tradition of learning and community service on which it was founded. Many alumnae of the Hartford Hospital School of Nursing have been and continue to be members of the association. Longtime member Patti Rinaldi, RN, (HHSN '58) is one of them. She has served on numerous committees and has been the group's president since 2002.

The first hour of every monthly meeting is dedicated to an educational program designed to help members stay abreast of changes in medicine and in nursing. Invited speakers are often from Hartford Hospital.

To promote community health, the association participates in

health fairs and offers flu vaccination clinics through the Central Connecticut Health District. This past season, association members provided more than 7,000 vaccinations in the four towns served by the district: Wethersfield, Rocky Hill, Berlin and Newington. At Patti Rinaldi's recommendation, clinic volunteers must hold a current license and carry liability insurance.

The association runs a free medical equipment loan service for Wethersfield residents, providing walkers, wheelchairs, bath chairs and other items. It also supports food banks in Wethersfield and Rocky Hill and makes annual donations to both towns' Health and Human Services Departments.

The group supports tomorrow's nurses through its scholarship program. Since launching the program in 1949, it has awarded more than 140 scholarships amounting to more than \$44,000. Undergraduate scholarships are awarded when the student matriculates into a nursing program. Two years ago, the association began awarding scholarships to nurses working toward their master's degrees in nursing education, in an effort to help address the shortage of nursing faculty.

When it began 69 years ago, the Wethersfield/Rocky Hill Professional Nurses Association was one of several such groups in the state. Today, 60 members strong, it is thought to be the only group of its kind.

"I think that makes us pretty unique," says Patti Rinaldi.

Nursing News and Notes *continued from page 3*

Susan Thibeault, RN, for their authoring of a multitude of research publications in the *Air Medical Journal*, exceptional poster presentations of their research at conferences around the country and their contributions to upcoming critical care textbooks.

James Marcelynas, RN, earned his Certified Registered Nurse Anesthetist in May 2009.

Samantha VanVoorhis, RN, became a Pediatric Fundamentals of Critical Care Instructor.

Transplant/Dialysis Certifications and Publications

Angelica Hay, RN, obtained her Medical-Surgical board certification in 2009 in addition to **Valerie Borgeson, BSN, RN**, and **Cheryl Grieco, RN**, who obtained national certification exams to become a Certified Nephrology Nurse and Certified Dialysis Nurse, respectively.

Deborah Cofrancesco, BSN, RN; Elisa Domenichini, RN; and Karen Robbins, MS, RN, published an article entitled "Kidney Disease Part 1: Early Detection Can Delay Progression." **Deborah** and **Karen** published a second article entitled "Kidney Disease, Part 2: Understanding Dialysis." **Karen** presented in April 2009 at the American Nephrology Nurses Association National Symposium in California.

Christine Ceccarelli, MS, MBA, RN, PhDc, has completed research entitled "Factors Affecting State Policies for Home-Based Long Term Caregivers" and has presented a variety of lectures across the country.

Kim Alleman, APRN, presented a lecture at the Nephrology Nurse Day Luncheon entitled "New CKD-MBD Options: Individualize the Treatment Plan to Your Patient." **Kim** has assumed the position of Northeast Vice President of the American Nephrology Nurses Association.

PACU Certifications

Kerri Atchison, RN, and **Elda Marcylenas, RN**, earned their Critical Care Registered Nurses certification. **Louise Honiss, RN**, obtained certification as a Peri-Anesthesia Nurse and obtained Basic Life Support instructor status.

STAR TEAM Achievements

Geneva Beresford, RN, graduated from American International College with a Bachelor of Science in Nursing in May 2009.

Women's Health Services Accomplishments

Michelle Connor, RNC; Sara Garcia, RNC; and Denise Puia, RNC-INO, have all earned certification in Electronic Fetal

Monitoring (EFM), and **Carrie Ferrindino, RNC**, passed the Inpatient Obstetrics (INO) credentialing exam.

JoAnne Auger, RN, and **Robin Gilbert, RN**, received Master of Nursing degrees from the University of Hartford in 2009.

Libby Brinkley, RN, was inducted into Sigma Theta Tau-Nursing International Honor Society.

Janice Cousino, RN, MSN, completed the American Organization of Nurse Executives fellowship program in 2009.

APRN Recognition

Danette Guertin, APRN, presented a lecture, "Who Wants to Be a Device Expert?" at the Heart Rhythm Society Annual Scientific Sessions, and **Jean Stielau, APRN**, presented a lecture on Urinary Tract Infections at Hartford Hospital's Geriatric conference.

Angel Rentas, APRN, earned certification from the International Board of Heart Rhythm Examiners (IBHRE).

Christine Waszynski, APRN, received the Health Care Hero Award from the Connecticut Hospital Association, the President's Award from the New England Association Directors of Healthcare Volunteer Services and the APRN of the Year award from the Connecticut Advanced Practice Registered Nurse Society in 2009.



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HAMILTON ARCHIVES AT HARTFORD HOSPITAL

Nurses at work in the community – Visiting nurses gather in front of the Health Station of the Gurdon W. Russell Settlement House in 1921. Dr. Russell was an early president of Hartford Hospital and of its Medical Staff.