

Spring 2017

Nursing

For Hartford Hospital nurses and alumnae of the

Hartford Hospital School of Nursing

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Hartford Hospital's Nursing Professional Practice Model



The Nursing Professional Practice Model was developed by nurses from across Hartford Hospital. It is a visual representation of the scope of nursing practice and nursing's role in enhancing the human health experience.

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Nursing

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On the cover:

Kristin Hardy, RN, Labor & Delivery



Messages From Executive Leadership



We Know Why We're Here

If I were to approach anyone in our hospital community and ask what Hartford Hospital's core values are, I suspect he or she could quickly name them: Excellence, Integrity, Caring

and Safety. We see them on signage, we discuss them in meetings and we filter our decisions through them. It's important to remember, though, that we embrace those values for just one reason: our patient.

The patient is the reason for *everything* we do. Whether it's adopting new practices, learning new skills, acquiring advanced technologies or—as happened last year—transitioning to a new electronic health record system.

So, just who is this patient who commands our best in all things every moment of every day? The patient is someone who, whatever their illness or injury, is a complete human being—a person with unique thoughts, feelings, fears, hopes, beliefs, experiences and more. They come to us for healing, and we know that's what we're here to provide. But let us never lose sight of this fact: We can fully meet the patient's needs only if we recognize and consider each one's unique attributes. When we connect with each patient on a human level, then we are truly doing our best.

Nurses are particularly adept at treating patients holistically, as the stories in this magazine show. You understand that every moment with a patient matters, especially when in that moment you are relating, not just to an illness, but to a fellow human being who needs the best you can offer.

Patients come to us at some of the most difficult moments of their lives. Thank you for respecting their humanity as you give them the very best of care.

Stuart K. Markowitz, MD, FACR
President, Hartford Hospital
Senior Vice President, Hartford HealthCare



Caring For Mind, Body And Spirit

It's fitting that the theme for Nurses Week 2017 is "Nursing: The Balance of Mind, Body and Spirit." Nurses must nurture their own well-being in order to give their best to patients. But nurses are

also called to care for the whole patient—mind, body and spirit.

Establishing therapeutic relationships with our patients is at the heart of nursing. Each of these nurse/patient relationships is unique, and each requires the foundation of trust. Our patients rely on the skill of the nurse to build and maintain trust.

One of our most pressing challenges today is how to thoughtfully integrate technology into our relationships with patients so that it enhances rather than disrupts human connection and trust. The information we have at our fingertips at just the click of a mouse should remind us of the extraordinary responsibility we have to strive to understand our patient holistically—not as a disease state, but as a unique human being. It is with that complex person that we must build and maintain the nursing relationship.

Sometimes this relationship is established quickly, as you'll see in the story of our Labor & Delivery nurse, whose critical thinking and caring saved lives. Other times it extends to families, as in the case of the Dialysis nurse who helped a sister be at peace with her brother's choices. Sometimes this connection forms a profound bond among all involved, as it did when the North 9 nursing team, with quiet grace and dignity, comforted their young patient and his family through a heart-wrenching experience.

These and other stories in this issue highlight the power of human relationships in nursing, reminding us of the sacred obligation we have to all those entrusted to our care.

Cheryl Ficara, RN, MS, NEA-BC
Vice President, Patient Care Services
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•• The **ADVOCACY/SCIENCE** Of Nursing

Two Lives Saved

Fast, skilled responses by nurses and others at Hartford Hospital led to a happy outcome for a mother and baby.

Hartford Hospital Labor & Delivery nurse Kristin Hardy, RN, was off duty and driving her car when she received an urgent phone call. It was the 15-year-old sister of Hardy's neighbor. The girl was understandably frantic. Her older sister, who was 34 weeks pregnant, had suddenly begun bleeding profusely, and her water had broken.

In her car at the side of the road, Hardy knew just what to do. After asking the younger sister key questions to triage the situation, Hardy says, "I told her to call 911 and that I'd call the hospital to let them know she was coming."

Hardy reached Resource Nurse Susan Hamilton, RN, just as the team was in its morning huddle. Hardy quickly relayed critical information: patient about 34 weeks pregnant, bleeding heavily, high risk, history of loss of twins at 21 weeks, cerclage (to keep cervix closed), baby breech, other medical conditions.

Hamilton immediately mobilized all the resources needed—operating room; attending obstetrician, anesthesiologist and pediatrician; nurses from surgery, anesthesiology and pediatrics; the NICU team; residents; OR technician and more.

When the ambulance arrived at the hospital just moments later, the team was ready. A rapid assessment revealed a dangerous situation. The patient was experiencing a complete placental abruption—the placenta had detached from the uterine wall—and the baby's heart rate was perilously low. The patient was rushed to the OR, where the team was ready. She was anesthetized and, within 10 minutes of arrival at the hospital, her baby was delivered via emergency Cesarean section. The 4-lb. baby girl was resuscitated by the NICU staff and was expected to do well.

About 40 minutes after she received that crucial phone call, something else appeared on Hardy's cell phone: a photo of a newborn baby girl.

Ready in Emergencies

The team was dealing with a life-and-death situation. Both



Kristin Hardy, RN, left, and Susan Hamilton, RN, helped bring about a happy ending to an obstetrical emergency.

mother and baby could have been lost. Every second was critical. Nevertheless, Hamilton says, the operating room was quiet and orderly throughout the process, and everything happened smoothly.

"We practice for these occasions," she says. "We do scenarios and work as a team, and it always pays off when the real thing happens. The outcomes were good for that reason."

Hardy's advocacy for the patient and her exemplary communication skills paved the way for a positive outcome. Since that day, people have commended her for all she did. But she takes it in stride.

"I've been doing this for almost 17 years, and I've been a charge nurse and OR coordinator, so I'm used to things like this," Hardy says. "You don't have time to panic. You know what you've got to do, and you just do it."

•• The **ETHICS/ART** Of Nursing

Comforting Donors' Loved Ones At Life's End

Nurses bring warmth and caring to families' most grief-filled moments.

Organ donors' families often say that even as they grieve, they take comfort in knowing that their loved one has given life to another person. Still, experiencing a loved one's death is unspeakably difficult. That's where a caring nurse can step in and ease the pain.

Organ donations are not common. Jami Tyska, RT, in-house donation coordinator at Hartford Hospital, says that only about 1 percent of those who die at a hospital meet the rigorous criteria. Most of those are patients who have been declared brain-dead. A mere 10 percent of the 1

percent are cases of donation after cardiac death, or DCD. These are cases where the patient is being sustained by artificial means. If exacting criteria are met, the family may decide to remove life support and allow death to take place. This must occur in the operating room so the organs can be procured within minutes after death. Family members often choose to accompany the patient to the OR to be present until death occurs.

The situation requires extreme sensitivity on the part of all involved, especially nurses caring for the patient in the

Comforting Donors' Loved Ones At Life's End

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ICU and those in the operating room. ICU nurses must transition from preserving life to letting life end naturally. OR nurses, unaccustomed to patient deaths and sorrowing families, are challenged to add another dimension of caring. Several Hartford Hospital nurses are examples of those who have risen to the occasion to support and comfort families.

Exemplars

Mario Rucci, RN, of Bliss 10I, experienced his first DCD case earlier this year. He met the patient's family on the morning of the day life support was to be withdrawn. He had many tasks to perform to prepare the patient, yet he recognized that the family needed him, as well.

"I wanted the family to have a good understanding of the patient's condition," Rucci says. "If they understand the patient's status, we can build on that and explain why we are where we are."

Rucci accompanied the patient to the OR to ensure the patient was comfortable throughout the process and so the patient's family would see a familiar face when they entered. He stayed with them throughout the process. The family later thanked Mario for the "respect and dignity" he showed their loved one in the last moments of his life.

"Even in situations like this, where you won't have a positive outcome, you are ultimately able to help people," Rucci says.

Joslyn Sorel, RN, also of B10I, had her first experience with DCD late last year. She, too, accompanied the patient and family to the OR. Even though she says the OR was a foreign environment and she felt some apprehension, she did what she could to comfort the family. She arranged equipment so they could hold the patient's hand and see her face, and she let them stay as long as possible after death occurred.

Sorel says she put her own anxiety aside for the sake of the patient and family.

"I think about what I would want," Sorel says. "You try to do your best. My heart went out to that family."

Jami Tyska says it's "culture shock" for some OR nurses to remain in the OR suite as the patient is dying. They are used to fixing patients' problems and returning them to their hospital beds, not being with them as they die. Yet some surgical nurses are able to leave their comfort zones and go out of their way for donors' families. Veteran OR nurse David Chicoine, RN, is one example. He arranges the operating room and the lighting so it looks less intimidating and families will feel comfortable. He makes sure he knows the patient's name, so he can refer to him or her by name when talking with the family. Recently, he arranged to play Allman Brothers music in the OR because he'd been told it was the donor's favorite. He stays in the room with the family through the dying process.

"I know they don't want to lose this person, but their loved one is going to give life to someone else," Chicoine says. "We're taking a death and turning it into something special for the family—giving them something they can hold onto."



Mario Rucci, RN, and Julie Beckham, RN, BSN, have stayed to comfort donor families in the operating suite.

Julie Beckham, RN, BSN, a newer operating room nurse, worked alongside Chicoine on the recent DCD case. Because it was her first, she didn't know what to expect. Preparing for it, she began by focusing on the technical aspects of what she would need to accomplish.

"But I realized there would be an emotional component, too," she says. "So I switched gears a little and decided to embrace one of the tenets of nursing—to be in the moment with the patient and family."

She stayed quietly by the family's side, offering tissues, placing her hand on the shoulder of the patient's significant other and, once, choking back her own tears.

Beckham says the experience was profound. But it became all the more so when, at the end of her 12-hour shift, she met the patient who was about to receive one of the donor's kidneys.

"It was a very emotional day for me," Beckham says. "I saw one person's tragedy, and then saw how it became another person's hope."

The Rose Ceremony

The art of nursing is evident in the care nurses provide to patients who are to be organ donors and to their families. Hartford Hospital reflects this sensitivity and caring through the annual Rose Ceremony. The ceremony honors those who have died and expresses gratitude to their families. The DonateLife flag is raised at the outdoor donor memorial. Indoors, the program includes sharing photos and memories of donors, speakers and music. Each family receives a rose and a candle in memory of their loved one's gift.

•• The ART Of Nursing

Caring From The Heart

Nurses united to comfort a young patient and his family in a tragic situation.

In late 2016, a 26-year-old man became a patient on North 9, Hartford Hospital's Neuroscience Unit. Davey had been diagnosed more than a year before with glioblastoma, an aggressive brain tumor. Davey had received excellent medical and surgical care in Boston over many months. He and his family had remained hopeful that his disease could be overcome. But while recovering from surgery at his parents' home in Connecticut for the holidays, he became extremely ill, was brought to the Hartford Hospital Emergency Department and admitted to N9.

Longtime Hartford Hospital nurse Christine Werner, RN, BSN, a friend of Davey's family, spoke with N9 clinical leader Melissa Strange, RN, BSN, about Davey. Werner knew the family would need guidance and support. Strange said that of course the nurses would take care of them. "It's what we do," she added.



Rebecca Rogers, RN, left, and Melissa Strange, RN, BSN, of the North 9 nursing team.

An athletic standout in secondary school and college, Davey had grown into a young man who loved sports, his job marketing Titleist golf equipment, and his life in Boston. He was personable and funny and had a host of friends. His sudden, devastating illness at such a young age was tragic.

Davey would be a patient on N9 for the next eight weeks, until his death in early February 2017. During that time, a profound bond formed among Davey, his family and the nurses who cared for him.

Professional, but Personal

Looking back, the nurses find it difficult to say what it was about Davey that elicited such strong feelings from them.

"He was so young. I wanted to care for him as if he were one of my own children," says Strange, whose children are about Davey's age.

"Davey's situation hit very close to home for a lot of us that work on North 9," says Rebecca Rogers, RN, who was Davey's night nurse. "He was 26, which is close in age to a number of North 9 workers. I felt like I was watching a friend progress through this horrible process."

Strange and Neuro-trauma Nurse Manager Mary Babcock, RN, MSN, NE-BC, oversaw Davey's care. They chose

which nurses would take care of him, based on each one's expertise, and selected similar people so there would be continuity of care. Once the family got to know a nurse, they made sure Davey would have that nurse again.

His nurses did all they could to help him and his family feel comfortable. They made a collage of Boston sports posters to put on his windowsill. At Christmas, a group of nurses placed a small, decorated tree in his room. They dressed him in his own clothes, rather than hospital gowns, and when he was able to communicate, let him choose which shirt and pants to wear.

"It was all about allowing him to make decisions for himself, no matter how small, for however long he could," says Rogers. "I didn't want to take that away from him."

His nurses sensed when he was uncomfortable and provided medication and repositioning as needed. He seemed to enjoy massage, so they arranged for that. They looked after his heartbroken parents and asked to see photos of Davey before he'd become ill. They made sure to update his parents regularly on how Davey was doing.

"The family had to go home at night to rest, so somebody would sit with him, hold his hand, talk to him and reassure him that we were there with him," Strange says.

Family friend Christine Werner often came to N9 to spend time with Davey's parents.

"What I saw was so impressive—the caring and compassion," Werner says. "Maybe it's because I'm a nurse, but I could tell they were going above and beyond. ... This was definitely the art of nursing."

A Lasting Bond

About a dozen nurses and patient care assistants attended Davey's funeral. The church was packed with people. When Davey's father saw them, he ushered them to the front of the church to sit in the reserved section, because of what their care had meant to the family.

The shared experience of caring for Davey also strengthened the bonds among the nurses of N9, according to Strange.

"It brought us so much closer as a unit," she says. "We all shared a tremendous desire to do what was right for this man and this family. Our unit will never be the same."

A Mother's Thanks



Davey Hovey

"All of the Hoveys have a very special place in our hearts for the nurses, PCAs and administration on North 9. ... After a few days, we knew that Davey was in the best place, receiving the best care possible. The comfort that brought to us was truly a gift. It made a very difficult and sad situation a little more bearable. We will always be thankful for everyone on N9!" — Leigh Hovey

•• The ADVOCACY/ETHICS/ART Of Nursing

Coming To Terms With A Loved One's Choice

In addition to caring for their patient, nurses in the Outpatient Dialysis Unit helped his sister accept his decisions.

Frankie had led an active life and had recently retired. But around age 50, he experienced serious consequences of his diabetes. His family knew he was ill and had urged him to seek care, but he had resisted. By the time he came to Hartford Hospital, he had so many problems that he was hospitalized for quite some time.

When Frankie started dialysis treatment on Jefferson Building 8, the hospital's Outpatient Dialysis Unit, he was weak, blind, confined to a wheelchair and unable to care for himself. His mother and two sisters were his support system. When all efforts to restore his sight failed, "he became very depressed," says JB8 Clinical Leader Deborah Cofrancesco, BSN, RN, CNN. "He began to shorten his treatments and to skip treatments on a regular basis."

Nurses and doctors on the unit tried to help and educate him. One of his nurses, Lorna Gallardo, RN, would work to gain his trust. She encouraged him to continue his treatment by promising to check on him regularly throughout his treatment.

One of his sisters died, and his remaining sister was beside herself with worry. She tried everything to get her brother to keep his dialysis appointments, including taking a great deal of time off from her own job to accompany him. The dietitian tried to help with his diet. The social worker tried to help with psychological issues. Nursing tried to get him to come in and stay for his treatments. But he resisted. He chose to be designated as "Do Not Resuscitate."

Grieving the loss of her sister, caring for her mother and fearing the loss of the brother she loved, Frankie's sister felt overwhelmed.

"He was depressed and didn't want help, and his sister was getting burned out," Cofrancesco says.

Cofrancesco and Frankie's sister had many long talks. Cofrancesco explained that Frankie had all the information necessary, that these were his choices, that she (the sister) was doing all she could and was not to blame.

"She began to realize that her brother's choices were his to make," Cofrancesco says.

Finally, she resigned herself to accepting what Frankie wanted, telling Cofrancesco, "I know I'm going to lose him."

After her brother's death, Frankie's sister wrote a heartfelt letter to the JB8 team thanking them for all the "love, kindness, patience and care you gave to my brother."

"In chronic care, families often carry guilt," Cofrancesco says. It would seem that her efforts and those of her team relieved Frankie's sister of some of that burden.



Deborah Cofrancesco, BSN, RN, CNN, counsels a family member.

•• The ART Of Nursing

Looking After Each Other

Nurses led an initiative to let one of their own overseas know they care.

Jay Maltz, RN, BSN, had been in his new job on Conklin Building 5 for only four weeks when he learned that he and his National Guard unit were being deployed to Iraq. Duty called, and he had to go. Kristy Lachance, RN, BSN, nurse manager on CB5, hatched an idea: Why not arrange to send "care packages" to Maltz so he'd know his colleagues were thinking of him?

"We wanted to support American soldiers overseas and to let Jay know that even though he was here for only a few weeks, he was still part of our Hartford Hospital family," Lachance says.

The CB5 team loved the idea, and it soon spread to all the other medical units, the Women's Health outpatient unit and other areas. The hospital offered to pay for shipping, so monetary donations were used to buy more goods. Staff donated candy, snacks, Sudoku books, coloring supplies and more. In early November, Leroy Smith of the Supply Chain Management Department packaged and shipped all the items so they'd arrive just after Thanksgiving. In all, 23 packages went off to Iraq.

Maltz was delighted. He shared the packages' contents with his team, which included doctors, nurses and medics from the U.S. Army and Navy, Denmark and the United Kingdom. In an email to Lachance in early December, he described what the gifts meant to him and others.

"While we are learning a lot about medicine in austere environments and about our Coalition allies, we all do still miss home. The incredible variety of food, toiletries and entertainment you sent is humbling. To know that you went through so much personal cost in time and money to send us a slice of home reminds us why we are doing what we are doing. ... So, again, from the bottom of our hearts, thank you, Hartford Hospital family!"

Lachance says the project called attention to an important aspect of nursing. "As nurses, we put patients first and tend to forget about ourselves. Family and friends reach out to us, and we're there for them, too," she says. "This reminded us that we need to take care of each other, as well—body, mind and spirit."

•• The ADVOCACY/SCIENCE/ETHICS Of Nursing

Meeting Complex Patients' Needs

Knowledge, dedication and teamwork are critical.

Case managers help ensure appropriate, timely care for all Hartford Hospital patients. When a patient's needs are particularly extensive, Hartford Hospital's Complex Case Management Practice team steps in to meet the challenge. The majority of the patients the CCMP team works with are inside the hospital, but some patients need the team's unique set of skills and holistic care when they transition to the community.

This was the case with a young woman who suffered a severe stroke. She spent months at Hartford Hospital and Gaylord Specialty Healthcare. Her injury left her unable to swallow, stand or breathe on her own, and she has a permanent tracheostomy. The CCMP team had the responsibility of transitioning her from Gaylord to home and arranging for her care once there. The process demanded the attention, effort, organization and caring of the entire team.

Jasmine Rivera, RN, BSN, BC, ACM, coordinated arrangements among Gaylord, the patient's family, Hartford HealthCare at Home, the Hartford Community Pharmacy, the Brownstone Adult Primary Care Clinic and the Hispanic Health Council. Rivera is bilingual, which was a great help in facilitating communications with the patient's exclusively Spanish-speaking family.

Michelle Wallace, BSN, RN, ACM, arranged for the durable medical equipment the patient would need, including respiratory equipment for both home and travel, nutrition equipment, wheelchair and bed. The undertaking required extensive communication among the CCMP team, Gaylord providers, the home care agency and others.

Debra Hernandez, MSN, APRN-BC, partnered with physicians and communicated with the patient's home health care nurse and family. She participated in the patient's primary care visits and will continue to be the medical liaison with the patient's physicians.

Rivera visited the patient's home before the patient was discharged to ensure it was safe and appropriate for the patient. The team also made sure the patient's caregiver was available 24/7 and adequately trained by Gaylord. Team members visited again just two days after the patient arrived home. All participate in family meetings and conference calls. When the patient had her first primary care appointment, Rivera and Hernandez were there to meet her, answer provider questions and translate.

The complexity of arrangements to be made and steps to be taken is daunting, but together, and in partnership with others, the CCMP team does everything necessary to meet this very complex patient's needs.

"We work as a team; that's the crux of it," Hernandez says. "We each have our expertise within the team, but we do overlap, and we rely on each other."

Beth Lawlor, MS, BSN, RN, CCM, CPHM, NEA-BC, director of Case Coordination, praises the team's exceptional coordination across many different settings.

"Because of this team's commitment to treating the whole person," Lawlor says, "they see beyond the hospital walls to ensure a holistic approach to meeting every person's needs by breaking down traditional barriers."



From left, Complex Case Management Practice team members Michelle Wallace, BSN, RN, ACM; Debra Hernandez, MSN, APRN-BC; and Jasmine Rivera, RN, BSN, BC, ACM.

•• The ART/SCIENCE Of Nursing

A Calming Gesture

Caring met science when a nurse's seemingly simple act relieved the anxiety of both a patient and her family member.

Danielle Loughrey, RN, BSN, was caring for an elderly woman who had come to the Emergency Department accompanied by her daughter. The patient was suffering from metastasized cancer. Until that day, she had been well-oriented mentally. But now she was confused and anxious.

"She and her daughter had planned to go shopping that day," Loughrey recalls. "The patient was very agitated. She kept repeating that she needed coupons so she could buy bananas."

The patient's daughter, who had never seen her usually strong, capable mother confused, was understandably upset, as well. Loughrey decided on a plan of care that she thought might ease the anxiety of both mother and daughter. She went to a computer, Googled "banana coupons," printed them and gave them to the patient. With the coupons in hand, the patient felt calmer—and so did her worried daughter.

"I knew I couldn't orient the patient or make her realize she was confused. That would have been more distressing for her," Loughrey says. "I tried to comfort her with what her reality was at the time."

There's considerable scientific evidence to support Loughrey's response, says Geriatric Nurse Practitioner Chris Waszynski, APRN. Several studies have shown that addressing the underlying needs of cognitively impaired patients and providing physical objects for patients to focus on can alleviate the patient's distress.



Danielle Loughrey, RN, engages a patient in the Emergency Department.

"To connect effectively with patients with cognitive impairment, the nurse must consider the patient's abilities and interests," Waszynski says. "The patient was calling out for coupons. The nurse entered the patient's reality and got the coupons, which made the patient happy. The important thing is to preserve patients' dignity while making them calm and happy."

Loughrey met those goals with her creative response.

•• The ADVOCACY/ART Of Nursing

Holistic Care Before And After Surgery

The Bone & Joint Institute offers integrative therapies to reduce anxiety and promote healing.

The Hartford HealthCare Bone & Joint Institute at Hartford Hospital provides patients with the most advanced surgical techniques and technologies. But its commitment to excellence doesn't end at the patient's body. The institute also offers a range of integrative therapies to promote mental and spiritual health.

The institute's director of nursing, Kim Hayes, MS, BSN, says the incorporation of integrative therapies and staff education on the subject expanded when a patient expressed an interest in Peggy Huddleston's Prepare for Surgery, Heal Faster program. The program helps patients learn mind/body techniques to prepare themselves mentally for surgery, have less pain and recover more quickly. The nursing team decided to embrace this and other integrative therapies and offer them to all patients.

"We saw a need to offer resources that allow us to provide a fuller range of care and meet many different patient needs," says Karen DePasquale, ADN, a nurse navigator at the institute. "These therapies can reduce pain and anxiety, increase range of motion, improve sleep and digestion and

increase circulation that promotes healing of tissue."

The team reached out to Hartford Hospital's long-established and highly respected Integrative Medicine Department and educated staff members on the resources.

In addition to the Huddleston program, the institute offers Reiki, massage therapy, music therapy and acupuncture. All except acupuncture are free of charge.

Support for the Care Continuum

At the B&JI, caring for patients begins well before the day of surgery. Multidisciplinary prospective patient rounds are held weekly. Participants discuss upcoming patients and plan for transitions of care.

To help ensure patients are physically and mentally ready for their orthopedic procedures, the institute provides a unique program called PREPARE (Procedure Related Education and Pre-Anesthesia Risk Evaluation). The program educates patients about what to expect before, during and after surgery. This is when dedicated PREPARE

Holistic Care Before And After Surgery

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PREPARE nurse Karen DePasquale, ADN, discusses options with patients before surgery.

nurses explain the integrative therapies available and ask if patients are interested in receiving them.

"I've never had a patient say they're disappointed that they had a therapy," DePasquale says.

Integrative therapies are available to patients immediately after surgery, as well. Susan Erwin, BSN, RN, a nurse in the post-anesthesia care unit, says some patients prefer not to receive narcotic medications for pain management and will request alternatives. She makes sure their requests are honored.

"My job is to advocate for the patient and help patients access whatever resources they feel they need and would get the most benefit from," Erwin says.

Erwin is very much in favor of the addition of integrative therapies to the B&JI's services.

"I think it's fabulous. It's a way for a traditional health care system to consider the patient as a whole," Erwin says. "Today's patients are looking for many different modalities to manage pain and anxiety. Helping them gain access to those services helps us take better care of our patients."

•• The ETHICS/SCIENCE/ART Of Nursing

Accidental Friends

A nurse and her husband have a special bond with a patient whose life they helped save.

Leave it to a nurse and a State Trooper to rush to the aid of an accident victim. That's what Kristy Lachance, RN, BSN, and her husband, Trooper Bruce Lachance, did one morning last fall while driving to Hartford Hospital. Hearing of a nearby highway accident, they went to see if help was needed. It was. The driver was slumped in his seat, unresponsive. The couple broke the passenger-door window and together managed to get the unconscious driver out of the vehicle. Kristy Lachance assessed him and found no pulse, so began CPR on the spot. First responders administered two shocks using a defibrillator, and the patient, whom she later learned was James Steele, was whisked away by ambulance. A LIFE STAR transfer to Hartford Hospital would follow.

"He had arrested," Kristy recalls. "I really didn't think he'd make it."

Steele underwent hypothermia therapy to reduce the tissue damage that occurs after cardiac arrest. When he emerged from that therapy, tests showed multiple blocked coronary arteries. In early October, he had five-vessel bypass surgery.

Kristy checked on Steele in the ICU, and when he was moved to a step-down unit, stopped by to introduce herself. Steele's wife, Doreen, and their son were there and thanked her for what she'd done. Lachance promised Doreen Steele she'd visit her husband every day. She did, and the two became friendly. Steele asked to meet Lachance's husband, who was happy to stop in. Steele was able to return home in mid-October.



From left, Doreen Steele, James Steele, Kristy Lachance and Bruce Lachance at a ceremony at Hartford Hospital honoring the Lachances.

About six weeks later, Doreen called Kristy at home. She wanted to surprise James by having Kristy and Bruce come to their church to light the first Advent candle and be honored by James's family and their church community. It was a joyous celebration, and the two families remain in touch with one another.

"They're a great family," Kristy says, adding that James is doing well now. "You never know what's going to happen. We just happened to be in the right place at the right time."

Nightingale Awards

Please join us in congratulating Hartford Hospital's 2017 Nightingale Award recipients!

These Hartford Hospital nurses will be among those honored at the 15th Annual Hartford Regional Nightingale Awards for Excellence in Nursing Gala. The event, hosted by Hartford HealthCare at Home, will be held on Thursday, May 11, at 5:30 p.m. at the Connecticut Convention Center.



Deborah Bass, RN
Cardiac Surgery



Stephanie Kasek, BSN, RN, CCRN
Critical Care, Cardiology



Jasmine Rivera, BSN, RN, BC, ACM
Case Coordination



Ruth DeLallo, BSN, RN
Critical Care, Medicine



Angela Leininger, BSN, RN
Electrophysiology Lab



Ann Russell, MSN, RN, CCRN-K
Nursing Education



Jacqueline Dietrich, MSN, RN
Surgery



Julie Michaelson, BSN, RN
Clinical Informatics



Bianca Sharp, BSN, RN
Critical Care, Medicine



Christine Ghiglia, MSN, RN, CNM
Women's Health



Tiffany Otto, BSN, RN
Institute of Living



Michelle Wallace, BSN, RN, ACM
Case Coordination



Christine Hart, BSN, RN
Women's Health



Leah Philipp, MS, RN
Emergency Department



Charles (CJ) Zenzick III, BSN, RN,
CCTC
PreKidney Transplant

Nursing News & Notes

We congratulate these Hartford Hospital nurses on their recent achievements.

Bone & Joint Institute

Nicole Wagner obtained her MSN.
Krista Maloney obtained her MSN.
Leah Goldberg, RN, BSN, received her CNOR.

Cardiology/Cardiovascular Services

Heather Rackliffe, RN, BSN, and Jillian Parker, RN, BSN, of Center 10; and Cynthia Correa, RN, BSN, and Melissa LaBonte, RN, BSN, of Bliss 10E presented "Reducing Heart Failure Readmissions" at the Vizient/AACN Nurse Residency Program Annual Meeting, San Diego, California, March 2017.

Denise Sailor, RN, North 10, completed her bachelor's degree in nursing in February 2017.

Lisa Buckle, RN, Non-Invasive Cardiology, completed her bachelor's degree in nursing at Excelsior College in December 2016.

Case Coordination

Laura O'Connor, RN, BSN, behavioral health case coordinator, and Lisa Skowronek, RN, BSN, ACM-RN, IQCI, presented a poster, "Moving Toward a Safer Journey: Improving Transitions of Care for Behavioral Health Patients from Inpatient Medical to Inpatient Behavioral Health Settings," at the American Case Management Association National Conference in April 2017 in Washington, D.C.

Dawn Tranter, RN, BSN, utilization review case coordinator, earned her BSN from Western Governor's University in November 2016.

Bernadette Marshall, RN, BSN, MSN, case coordinator, earned her MSN from Western Governor's University in December 2016.

Julia Czarnecki, RN, BSN, ACM-RN, ACRN, case coordinator, earned her Accredited Case Manager (ACM) certification in March 2017.

Michelle Wallace, RN, BSN, complex case manager, was elected to a second term as secretary for the American Case Management Association Connecticut Chapter. She will serve a two-year term 2017-2019.

Rosanne Gregory, RN, BSN, case coordinator, was elected treasurer of the American Case Management Association Connecticut Chapter. She will serve a two-year term 2017-2019.

Maureen M. Zukauskas, RN, BSN, MS, ACM-RN, CPHM, was appointed membership chair for the American Case Management Association Connecticut Chapter, effective January 2017.

Clinical Informatics

Julie Michaelson, RN, BSN, received her BSN from Walden University in November 2016.

Emergency Department

Casey Chasse, RN, obtained Geriatric Resource Nurse certification.

Danielle Loughrey, RN, obtained Geriatric Resource Nurse certification.

April Loteczka, RN, graduated with her MSN-APRN from Simmons College in January 2017.

Claudia Ouellette, RN, obtained her Certified Emergency Nurse designation.

Medicine

Anna-Rae LeClaire, BSN, RN-BC, obtained her board certification in medical-surgical nursing from the ANCC on Jan. 12, 2017.

Heather Hatch, RN, and Kim Pantano, RN, were certified in December 2016 as Vascular Access Board Certified nurses.

Mary Kate Eanniello, DNP, RN, OCN, and Jeanne Kessler, RN, made a poster presentation, "Making Connections, Maximizing the NICHE Conference: Hartford HealthCare's GRN Journey to Obtain New Knowledge and Sustain Outcomes," at the NICHE (Nurses Improving Care for Healthsystem Elders) Conference in April 2017.

Perioperative Services

Keli Feathler, MSN, RN, received her CCRN.

Gretchen Wolf, MSN, RN, CNRN, CCRN, NRP, received CNRN and CCRN certifications.

Anna Fenn, RN, completed her BSN in October 2016 from University of Louisiana at Lafayette.

After passing her boards in January 2017, Karen Huggan-Davis, RN, transitioned from the role of certified surgical technologist to the role of RN circulator for the Heart and Vascular Institute operating room team.

STAR Team

Carolyn Considine, RN, received DNP from Quinnipiac University in October 2016.

Surgery/Transplant/Wound

Lisa Q. Corbett, DNP, APRN, CWOCN, graduated from Yale School of Nursing in May 2016 with a Doctor of Nursing Practice degree.

Invited speaker, American College of Wound Healing and Tissue Repair, Chicago, Illinois, Dec. 5, 2016.

Poster presenter, National Pressure Ulcer Advisory Panel, New Orleans, Louisiana, March 9, 2017.

Invited speaker, Symposium on Advanced Wound Care, San Diego, California, April 8, 2017.

Published paper, Corbett LQ, Funk M, Fortunato G, O'Sullivan DM. (2017) "Pressure Injury in a Community Population," JWOCN May/June 2017.

Michelle Day, BSN, MSN, RN, CGRN, will begin her term as SGNA (Society of Gastroenterology Nurses and Associates Inc.) president at the end of SGNA's Annual Course this May.

Debera Palmeri, RN, CCTC, received the 2016 Foundation Service Award from the Connecticut Division of the American Liver Foundation.

Women's Health

Jennifer Smith, RN, BSN, of N6 became certified in inpatient obstetrics.

Shonna Hatoum, RN, BSN, and Catherine Embriano, RN, BSN, both of N6, became certified as International Board Certified Lactation Consultants. RNs Laurie Bostiga (B6), Dena Phelps (B6), Toni Moreau (B6), Lindsay Collins (N6) Angela Delmonico (WHS STAR Team) and Patient Education Manager Cheri Cronin became certified as Lactation Counselors.



From The Alumnae Association President



When I entered Hartford Hospital School of Nursing in 1963, I was told—and soon realized—it would not be easy; but let me inform you, it was worth it. I love my profession. As of a few weeks ago, I finally fully retired from Hartford Hospital. That white brick structure has been part of my work/life world for almost 54 years. Writing my resignation letter was difficult enough,

but handing in my ID badge was the worst. Of course, there were times over the years when I felt underappreciated or dissatisfied, but now I realize how lucky I am to have had a workplace that made saying goodbye so difficult.

There is a generation gap in most workplaces, and that is true in nursing. Each of the basic four generations has different career expectations, values, traits, attitudes and working styles. I am happy to be part of a generation that planned to stay with one or two employers throughout their career, with satisfaction and security. In my

generation, nursing was a humanistic art. Today's nurses face the challenge of balancing that humanistic aspect of nursing with the technological resources that support patient care.

Bridging these generation gaps will continue to be necessary for a synergistic workplace. Happily, that took place everywhere I worked at Hartford Hospital. In the first few weeks of retirement, I felt I had lost the main basis of my identity. But I am now realizing that old nurses never die, they just go PRN. Every day I still find I touch a life or a life touches mine.

I am looking forward to our annual banquet in June and seeing all of you who represent great generations at Hartford Hospital. Our speaker's topic at the banquet is "Hartford Hospital in Motion: When Every Moment Matters."

Happy spring!

Betty Ann Vose Fusco, RN (HHSN '66)
President, 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 \$10 per year and include membership in the Alumnae Medical Fund. Members are eligible to apply for scholarships.

To join, simply mail your \$10 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 Betty Ann Fusco, president, at bafusco@cox.net; Pat Ciarcia, executive director of alumnae affairs, at patciarcia@snet.net; or visit www.HHSNalumnae.org. You can also write to the Alumnae Association of the Hartford Hospital School of Nursing, 560 Hudson Street, Hartford, CT 06106.

STAY CONNECTED! If your email address changes, please notify Pat Ciarcia.

Finding Her Niche

1974 Hartford Hospital School of Nursing alumna Betsy Gaudian, RN-BC, RD, CDE, never stopped exploring different nursing roles, learning new things and acquiring additional qualifications. All her experiences ultimately led her to discover a passion for diabetes education and a position she loves as the inpatient diabetes nurse clinician at Saint Francis Hospital and Medical Center.

“One of the golden opportunities a nurse has is the ability to practice in many different worlds,” Betsy says. She credits her training at HHSN with helping her explore nursing’s many different specialties.

In the years following graduation, Betsy worked in acute-care settings, nursing homes, home care and hospice. She earned a bachelor’s degree in allied health/clinical dietetics from the University of Connecticut and became a registered dietitian. She went on to become certified in community health/diabetes education and then obtain her Master of Science degree in nursing/community administration from UConn.

A pivotal moment came when a friend invited her to attend an intensive course designed to help people prepare to take the Certified Diabetes Educator (CDE) exam. “I had been a nurse for 25 years and the material presented went right over my head,” Betsy recalls. “There had been so many advances in diabetes that I wasn’t aware of. At that point, I decided I wanted to focus on diabetes.”

Betsy dedicated herself to learning everything she could on the subject, took the preparatory course and, in 2001, passed the very challenging exam to become a CDE. She became president of the Connecticut Alliance of Diabetes Educators. After her term, she was named the organization’s Diabetes Educator of the Year. All the while, she used her expertise in diabetes in her roles in the fields of home care, inpatient care, assisted living and hospice.

In 2013, Saint Francis engaged Betsy to help the hospital obtain Joint Commission certification in Advanced Inpatient Diabetes Care. Earning certification required the hospital to demonstrate



Betsy Gaudian, center, with the Diabetes Educator of the Year Award she received from the Connecticut Alliance of Diabetes Educators.

that it provided excellent, standardized care to all patients with diabetes, regardless of the reason for admission. Betsy tackled the rigorous process, instituted standardized practices, educated staff and more. Two years after she was hired, the hospital became only the 84th center in the United States to earn the much-sought-after certification.

Betsy says her ability to develop creative solutions has helped her succeed in her role. “I’m constantly challenged to invent new ways to reach and educate staff or to help a patient understand the self-care role.”

Betsy has been invited to discuss Saint Francis’s achievement at the annual meeting of the American Association of Diabetes Educators this summer in Indianapolis.

Speaking from the perspective of her 40-plus-year career, Betsy encourages new nurses to feel free to try new specialties and to get as much education as they can while they’re young.

“I want them to know there are great opportunities in many different fields,” she says. “Search for your dream. Dream to be the best—and you will be!” •

A Look Back

A Woman Of Her Time

Hazel Arnold Mather (HHTS '28) demonstrated an independent streak when, in 1925 at age 18, she left her family's farm in Oxford, Connecticut, to enter the Hartford Hospital Training School for nurses. Her mother had died when Hazel was young, and her father, according to Hazel's daughter Susan Mather Falvo, was a "grumpy old farmer" who didn't believe unmarried daughters should leave home. Nevertheless, Hazel used a monetary award she'd received and set off for Hartford.

"She absolutely loved it," Susan says of her mother's time at HHTS. She excelled in her studies, made lifelong friends among fellow students and young doctors and, on graduating, accepted a full-time position at Hartford Hospital. She went on to be head nurse on her unit.

"She was a professional, working woman," Susan says. "She was ahead of her time in that regard. She was very successful in her profession."

Hazel married in 1941 and, in keeping with society's customs at the time, gave up the profession she loved to be a wife, homemaker and the mother of three children.

"It wasn't until I got older that I realized she missed being a nurse and didn't like being home," Susan says.

Still, Hazel found ways to pursue her calling. When her children were hospitalized—and always at Hartford Hospital—for surgery or child-birth, she'd obtain permission from the hospital, don her uniform and cap, and serve as their private duty nurse.



Hazel Arnold, HHTS 1928

When neighbors in Wethersfield needed injections or wanted health advice, she was there for them.

As her children went off to college, Hazel returned to her first love: being a nurse. She worked as a school nurse at the Loomis Chaffee School in Windsor and at the Masonic Home in Wethersfield. In her 60s, she took a refresher course and went back to Hartford Hospital, working in a unit in the Conklin Building. She was granted an extension that allowed her to work at the hospital until she was almost 70. When she retired, she was presented with a commemorative HHSN chair, which her daughter now treasures.

Hazel joined the Wethersfield-Rocky Hill Professional Nurses Association and enjoyed attending its meetings. Younger nurses she'd known chauffeured her there and back.

In the meantime, her family grew. Susan says Hazel was "a terrific grandmother" to her six grandchildren. "She was a very caring, loving person and would do anything they wanted—take them to movies or out to lunch," Susan recalls. "They loved her." Hazel lived long enough to become a great-grandmother.

As Hazel grew much older, she required nursing-home care. Her daughter says she was content at the facility, although somewhat indignant about how little direct patient care was provided by RNs.

Hazel died in 1994 at age 87. Like so many women of her era, her choices were influenced by society's expectations. But she never lost that independent streak or her determination to practice the profession she loved. •



Hazel Arnold Mather in the early 1970s with her grandchildren.

Alumnae **The Pillbox**

CLASS OF 1954



From left, **Lois Roden Dragone**, the late **Joyce Lanz Gross** and **June Perret Noble**.

June Perret Noble, **Joyce Lanz Gross** and **Lois Roden Dragone**, fondly known at the “3 J’s,” have faithfully attended the Alumnae Banquet since their 50th anniversary in 2004. The group was responsible for the 55th, 57th, 59th and 60th reunions, with help from classmates **Claire Gworek Eddy**, **Joyce Woods Sadlak** and **Carol White**. Sadly, **Joyce Lanz Gross**, who had been battling multiple illnesses, passed away in November 2016. Their small group will miss her greatly.

CLASS OF 1957



Anne Ofiara Greiner submitted this photo, entitled “Takes His Medicine,” to the *Nursing* magazine. It was taken July 4, 1957, and published in the *Hartford Courant*. This 19-month-old and 17 other children spent the 4th of July holiday in the pediatric ward at Hartford Hospital. The little boy found that taking his “medicine” (ice cream and cookies) from nurse Anne Ofiara wasn’t bad at all.

Jill Stackpole Ghi and her classmates will be celebrating their 60th anniversary this June. Jill hopes to have a good turnout and fun party.

CLASS OF 1958

Patricia Rinaldi is president of the Wethersfield-Rocky Hill Professional Nurses Association, which recently celebrated its 75th anniversary. The celebration was held at the Chowder Pot in Hartford, Connecticut. Twenty-seven current and former members of the association, as well as guests and local public officials, attended the celebration. **Phyllis Weiner DeMaine '67** was the chairperson for the event.



The Wethersfield-Rocky Hill Professional Nurses Association celebrates its 75th anniversary.

CLASS OF 1959

Ardell Schmidt Patterson is looking forward to her class’s 60th reunion in two years (2019). She asks that her classmates communicate with her about what they’d like the celebration to be. She can be reached at Ardellpatterson@gmail.com, 850.492.6332 or 5549 Navaho Dr., Pensacola, FL 32507.

As noted in the autumn/winter 2016 issue of *Nursing*, **Anne Peterson Jennings** passed away in 2016. The Nightingale Tribute was said at her memorial service.

Carol Paterno Pacinda retired in 2015 as case manager for Texas Foster Children. She has a son with ALS who was diagnosed in 1996 and has surprised the whole Texas community, as he is still doing well despite multiple limitations.

CLASS OF 1960

Patricia Tencza Reig is still taking pastel painting lessons to improve her skills. She is retired and enjoying life. She keeps in touch with her fellow nurses whenever she can.



Christmas pastel painting by **Patricia Tencza Reig '60**.



Bear pastel painting by **Patricia Tencza Reig '60**.

CLASS OF 1961

Anita Resnick Gold just retired after 55 years. She says it will be an adjustment but she is looking forward to it.

CLASS OF 1962

Linda Arle Duval and her husband are busy volunteering, enjoying family time with delightful grandkids, participating in church activities, traveling closer to home, and having good health and good friends. She and her husband recently welcomed their great-grandson.

Carol Drumm Ferik is busy watching her granddaughters become young ladies. The girls are involved in multiple school activities, and their enthusiasm is contagious.

CLASS OF 1963

Regina Gudleski Gosselin was pleased to receive her 25-year HHSN charm for membership in the Alumnae Association. She says that getting her RN from HHSN was the best first adult thing she did in her life. She is still working part time. Her nursing career has been a "life saver."

CLASS OF 1964



Sandy Brown Jerbert, Joan O'Connell Guntulis, Caryl Hockenberry Donovan and **Janet White Jerome** have been getting together for dinner every month since their 50th anniversary. They wanted to rekindle the friendships they made while at HHSN and have had a wonderful time sharing their lives.



Caryl Hockenberry Donovan has found a new calling since retiring from 48 years of pediatric nursing. She is known as Mrs. Claus and can be found at Wickham Park, helping Santa greet all the kids during the Christmas season.

Alumnae **The Pillbox**

CLASS OF 1966



Carol Burnham, left, and **Betty Ann Vose Fusco**.

Betty Ann Vose Fusco went up to Heublein Tower recently and donated the HHSN cape given to her at the banquet in June by a member of the Class of 1947. It was quite a memorable morning. She was ashamed to admit that she had never been up there. As shown in the above picture, "Hepatitis" has been refurbished, but not to the original white. A member of the Friends of Heublein Tower described the Heublein family's summer home, which is being renovated. The cape will go in the Hartford Hospital Room when that room's renovation is completed.



Alfie's "Hope"

Alicia "Alfie" Plikaitis Junghans crafted "Hope" and donated her to a multiple myeloma charitable auction in Los Angeles where "she" went for \$500. Alfie says the best part of "Hope" is that she can never get cancer!

CLASS OF 1968

Marilyn Smithson Borrelli and **Patty Kamay Teta** remind their classmates that their class will be celebrating its 50th anniversary in 2018. They want to make it a very memorable occasion so are starting to plan early. They hope to have a wonderful turnout at the Alumnae Banquet. The tentative plan is to get a block of rooms at a hotel so they can reminisce and party after the banquet. Please contact either Marilyn or Patty if you plan to attend, even if it is tentative. Please pass on the information, and if you are interested contact either Patty Kamay Teta at pat552@yahoo.com or Marilyn Smithson Borrelli at msborrelli1@gmail.com.

CLASS OF 1969

Jean Bajek took an auto trip from Panama City Beach, Florida, to Connecticut for her granddaughter's high school graduation party, which was also Jean's 68th birthday. She says that the greatest birthday gift was being with all three of her children and all four of her grandchildren. She continues to enjoy retirement near the beach and enjoys stable health.

CLASS OF 1973

Rosemary DiLeo Fleming recently retired from Kaiser Permanente in California after 33 years as an OB/GYN nurse practitioner. She is planning to move back to Connecticut, as California never felt like home to her.

CLASS OF 1975

Karen Bowman Denowitz joined her husband in retirement last July, and they drove to Wyoming to work at Yellowstone National Park for two and a half months. Karen worked at the historic Old Faithful Inn in the gift shop. It was an extremely busy season due to the Parks Centennial, but they had the opportunity to meet wonderful people from all over the world. On days off they hiked and experienced the beauty of the park and surrounding areas. She describes it as an awesome experience!

Alumnae Comments

Beginning with this issue of Nursing, we will have an Alumnae Comments section. If you have any thoughts you'd like to share regarding any issue, please contact Pat Ciarcia at patciarcia@snet.net.

“Sheila Rowel '67 noticed that the nursing pin displayed in the fall edition showed the year organized as 1878. The correct date is 1877. We tried to find out why some classes said one date and other classes said another. We even checked with Steve Lytle, archivist emeritus, who said, “I don't think that mystery was solved in the whole time I was Archivist at HH.” He suggested that the HHTS was founded in October 1877, which was the beginning of the 1878 fiscal year, so the “founding date” might have been interpreted as 1878. It appears that pins of earlier classes (1933, 1937, 1949) said 1878, but those of later classes were changed to 1877. If anyone has information about this, please contact us.” – Pat Ciarcia

“I recently received my fall Nursing magazine and especially enjoyed the ‘Loving Gift’ story. The problem is it sounds like I died by saying ‘the family of Joan L. Roberts donated her pin’! I donated my HHSN pin last year as I didn't feel a sentimental attachment to it and thought another graduate would. Was very pleased to know Ms. Bartholomew was so thrilled to receive it during a pinning ceremony by her granddaughter. What I do feel sentimental about is the friendships I made and the very special memories I hold dear.” – **Joan Roberts Petersen '70** [The editors apologize for the misunderstanding.]

“Thank you for adding to the joy of my 80th birthday by publishing my story (Autumn/Winter 2016). I Xeroxed copies of the ‘Loving Gift’ and included it in all my Christmas cards. I have received several comments about the article – joy shared is joy multiplied.” – **Janice LaBelle Bartholomew '56**

“I am late in getting back to you to thank you for the HHSN pin. I love it and the fact that it comes from an older alumna means so much to me. Thank you again for remembering me.” – **Odila Schoenborn '75**

“My family and I very much appreciated the words in the fall magazine memorial for our mom, **Avis Warren Butler '44**, who passed away July 27, 2016. It was sad but the words were lovely.” – *Jayne Marsh, daughter*



IN MEMORIAM

Muriel Soule Shreve '43
Ruth Ruff Griswold '46
Anna Scira Connell '52
Diane Habershon Dorval '53
Marilyn Ericson Moore Osborne '53
Joyce Lanz Gross '54
Jayne Mossman Kenefick '54
Adelaide Bzullak LaBraico '54
Carolyn Abrahamson Krohn '57
Janice Hylwa Lyons '57
Marjorie Collins Wallace '57
Gail Paterno Williams '62
Charlotte Parker Roberge '63
Judith Chagnot Simpson '63
Judith Goolsby Gorski '65
Aleta Thurgeson Begley '68
Kathleen Mandi Baker '74

Honorary HHSN Alumna
and Bandleader
Sam Pasko

PHYSICIANS

Arnold Case, MD – OB/GYN
Anthony Fons, MD – Psychiatry
Daniel Elliott Mack, MD – OB/GYN

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 replacement HHSN nursing pins. Because they are no longer made, the only way we can get a pin is if an alum is willing to donate one to the Alumnae Association. We would then give the pin to the requesting alum. If you are interested in donating your pin for this purpose, please contact Pat Ciarcia at 860.563.2005 or patciarcia@snet.net.

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 at Carol.Garlick@hhchealth.org.



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Balancing body, mind and spirit – Hartford Hospital School of Nursing students exercise in the gymnasium of the D. Newton Barney Educational Building. The gym, which opened in 1931, provided fun and relaxation for student nurses after a busy day on the nursing units.

Photo courtesy of The Hamilton Archives at Hartford Hospital