

Boston University

OpenBU

<http://open.bu.edu>

BU Publications

The UH Nurse: University Hospital

1990

The UH Nurse: Fall 1990 v. 4, no. 2

<https://hdl.handle.net/2144/18078>

Downloaded from DSpace Repository, DSpace Institution's institutional repository



The University Hospital

THE
**U
H** Nurse

Volume #4 Number #2
Fall 1990

Publishing: It's a matter of commitment



Four nurses who publish regularly are Noreen Leahy, R.N., M.S.N., Charlotte Wilson, R.N., M.S.N., Cynthia O'Sullivan, R.N., M.S.N., and Joan Vitello, R.N., M.S.N., CCRN, C.S.

Nurses at the University Hospital not only face the challenge of caring for acutely-ill patients, but they also challenge themselves by researching, writing and publishing scholarly works. Because of the rigorous work required in publishing medical information, nurses often find themselves

spending their personal time on their articles or books.

For the year and a half that Noreen Leahy, R.N., M.S.N., spent on her book, *Quick Reference to Neurological Critical Care Nursing* (Aspen Publishing, Inc. 1990), her workday often didn't end when she finished her work as a clinical nurse specialist at the Hospital. Many times her day still wasn't over when she put her four children to bed. Driven by the desire to publish, Leahy sometimes worked around the clock.

Leahy, a clinical specialist in neurology, compares the

process of writing her first book to childbearing. "It's something you keep waiting for and waiting for. Sometimes you wonder if it will ever come." After many long months of writing in the middle of the night, on weekends, and during vacation time, Leahy's book is finally here and is being marketed to senior nursing students across the country.

Other nurses at UH share Leahy's commitment to publishing, but none are in it for the money—indeed, the nurses often suffer financial losses

in bringing their work to market. Nurses Joan Vitello, R.N., M.S.N., CCRN, C.S., and Cynthia O'Sullivan, R.N., M.S.N., recently co-wrote a chapter for an introductory critical care nursing book that explains hemodynamic monitoring. For two months, Vitello and O'Sullivan worked nights and weekends compiling the 95-page chapter. The fee they were paid by the publisher didn't even cover word processing costs.

So why do the nurses write? O'Sullivan, nurse manager for

continued on page 3

UH Nursing faculty take part in research network

A new program designed to get more nurses involved in research is under way at the University Hospital.

Each month, as many as 30 UH staff members, graduate students, and faculty members from Boston area nursing schools, meet in an open forum to discuss research that is in progress or is about to begin. The series, known as the "UH Nursing Research Network," provides a place where staff nurses or graduate nursing students can present their research topics and receive feedback.

"Our goal is to support the research of our people at UH, whether it is just helping out in the development of an idea or supporting an on-going project," says Diane Lancaster, R.N., M.S.N. "We're also hoping to work with more graduate students who might be interested in doing their research at UH." Lancaster, a clinical instructor in the

continued on page 3

Kathy Sullivan named winner of Peggy Cenci Award

story on page 7

Editorial: A Message from the Vice President for Nursing



*Dorothy A. O'Sullivan,
R.N., B.S., M.B.A.
Vice President for
Nursing*

After a national search, Dorothy A. O'Sullivan, R.N., B.S., M.B.A., has been selected to replace Karen K. Kirby, R.N., M.S.N., as Vice President for Nursing.

To my nursing colleagues:

I am delighted to be here with you as a part of this fine teaching hospital. Let me begin by telling you a bit about my background. I am a registered nurse who has earned her master's degree in business administration. For the past 15 years, I have worked at the Presbyterian Hospital in New York City, where my most recent position was executive vice president for nursing.

Some of you may be wondering about my approach and my nursing philosophy. First of all, I plan to go forward with the solid foundation set down by Karen Kirby, R.N., M.S.N., during her time here as vice president for nursing and carried forth so capably by Acting Vice President for Nursing Joan Russo, R.N., M.S. At present, it appears that the budget is in good shape, nursing recruitment is in good shape, and we are not facing a nursing shortage in Boston. If we do begin to see problems in staffing like the problems being experienced in other parts of the country, I plan to draw on my experience from New York to face the issue.

As for nursing philosophy, I believe that nursing is an integral part of any institution and that nurses have to be a part of an overall team. By that I mean nurses have to work with the rest of the hospital to help achieve specific goals and objectives. Fortunately, the Nursing Department here at UH has a tradition of such cooperation.

Ideally, I would like to have a total R.N. staff, but I know that is not realistic in today's economy. Instead we have to look to other models, such as UH's Patient Care Technician (PCT), which allows the R.N. to do what she is best at doing, while providing other workers to help her do her job most efficiently. The PCT program here at UH is a successful model that many other institutions are studying, but we must continue to evaluate it and improve it in any way we can.

I was initially attracted to UH because of the strength of its Nursing Department. When I met with staff nurses, management staff and UH President J. Scott Abercrombie Jr., M.D., I knew this was where I belonged. There is a real sense of professionalism and teamwork that is evident here at the University Hospital.

And finally, I want to let you know that an important part of my management style is an open-door policy. I want to get to know each of you individually. Whether I can help out with a problem or provide information or consultation, please feel free to stop by and see me. I look forward to working with all of you!

Dorothy O'Sullivan, R.N., B.S., M.B.A.
Vice President for Nursing



Dorothy O'Sullivan, R.N., B.S., M.B.A., vice president for nursing, consults with staff on Atrium 7-West. At left is Natalie Dodson, the unit secretary; at right is Kelly Buis, R.N., B.S.N.

Dear Nursing Department Staff:

I am taking this opportunity to thank you for your support during my term as acting vice president for the department.

In my last editorial, I talked about strategic planning and the need to determine direction for the department. Goals and objectives are very important. However, equally important is having a highly motivated and qualified staff to help reach the goals that have been identified for the department. A director that I worked for in the past told me many times that "a manager or leader is only as good as the people who work for him or her." I have learned throughout the years just how true this statement is and I know that without each of you, the department would not be where it is today.

Again, thank you for your support. I am proud to have had the opportunity to be the leader of a superior department and a committed and professional staff.

Sincerely,
Joan M. Russo, R.N., M.S.N.
Acting Vice President, Nursing

Network

continued from page 1

Department of Nursing Education, came up with the networking concept and implemented the program in May. She says the series has been very well received and has proven beneficial to those involved.

In its September meeting, the group discussed starting a project proposed by PACU Nurse Manager Donna Rosborough, R.N., B.S., M.S., and PACU staff nurse Mary Sheehan, R.N., entitled "The Effects of Music Therapy on the Outpatient Surgical Client." In August, Nursing Instructor Lynn LaFond, R.N., M.S., presented her study on "Homecare for Ventilator Assisted Individuals."

The meetings are open to nurses, staff and graduate students. They attract participants from all units at UH and nursing faculty from the University of Massachusetts at Boston, Boston College, Massachusetts Bay Community College, Curry College, Salem State, and Northeastern University. Members from the national honorary society for nursing, Sigma Theta Tau, also attend the monthly forums.

For more information, contact Diane Lancaster, R.N., M.S.N., Ph.D. candidate, at 638-5823.

Publishing

continued from page 1

the SICU, says the simple feeling of accomplishment and contributing to a body of knowledge motivates her work. Charlotte Wilson, R.N., M.S.N., agrees. Wilson recently wrote a chapter for *Cardiovascular Diagnostic Tests* (Aspen Publishing, Inc.), which explains different diagnostic techniques that determine the

extent and severity of peripheral vascular disease. Susan Zorb, R.N., M.S.N., CCRN, a medical critical care specialist, is editing the book and expects it will be on the market within the next few months.

Wilson, a clinical nurse specialist in surgery, says that through publishing, the nurses provide the Hospital with a "win-win situation: We get a

'We get a great deal of satisfaction out of writing, and the Hospital gains recognition from our work'

great deal of satisfaction out of writing, and the Hospital gains recognition from our work." Vitello, a surgical critical care specialist, says beyond the personal satisfaction and recognition, the Hospital's administration truly appreciates the effort such writing takes. Vitello is currently studying how physicians view the needs of families of critical care patients. She expects to publish her results this winter.

Nurses at UH also work with researchers and writing professionals from other leading institutions to bring new information to the medical community. Last March, O'Sullivan published an article on the effects of regular turning on coronary artery bypass graft patients with two researchers from Thomas Jefferson University Hospital in Philadelphia. The article appeared in the March edition of *Critical Care Nursing Quarterly*.

Another successful publishing partnership is that of UH's Director for Nursing Systems Paulette Starck, R.N., M.S., former Nursing Vice President Karen Kirby, R.N., M.S.N., former Acting Vice President Joan Russo, R.N., M.S., who worked with two Brandeis

University researchers. The five collaborated to address the global problem of the nursing shortage. *The Journal of Nursing Administration* has accepted their series of articles, which describes the implementation and evaluation of the Nurse Extender Model at UH.

Starck explains that in 1987, the Hospital was faced with a nursing shortage and soaring health-care costs. In response, the nursing administration designed a new role—the patient care technician (PCT). Nurses now have a technically-skilled partner to help them do their job. The opportunity to work in health care is often a precursor to PCTs entering nursing or another medical field.

"It's important to share some of the things we do," says Starck, "especially because we need to become more cost efficient. We can't afford to make the same mistakes twice." That commitment to improvement has helped the five co-authors through the two years it took to compile information for the articles.

Pat Ide, R.N., M.S.N., UH's director of Surgical Services, agrees it is vital to work together with other medical experts and to cut costs. "We [nurses at UH] have a high level of expertise that should be shared," says Ide, "Hospitals today pay huge sums of money to hire consulting firms. We have the resources right here and right now to solve problems."

Last year, Ide worked with three other nursing professionals to publish *Strategic Resources for the Operating Room Manager* (Association of Operating Room Nurses, 1989). She served as the editor for the manual, which is used as a problem-solving reference guide by operating room managers across the country.

Nurses who publish agree that writing a series of articles or a book over many long

months is far different from caring for a patient. Each has its rewards. Still, none of the nurse/authors at the Hospital is ready to write fulltime. As Vitello says, "When a patient says 'thank you,' or a family tells you you've made a difference, that's what nursing is all about."

For more information, contact Joan Vitello, R.N., M.S.N., CCRN, C.S., at 638-6274.

Beal Library to open

Thanks to the generosity of a former senior staff nurse at the University Hospital, nurses will soon have their own library on Collamore 4 (C-4). The new library was made possible by a gift from the late Gertrude Beal, R.N., a former staff nurse at UH, who left the bulk of her estate to the Hospital. UH President, J. Scott Abercrombie Jr., M.D., designated \$25,000 of the gift for a nursing library.

The Beal library will house nursing journals, texts, patient education materials and a computer. Until now, nurses had been using Boston University School of Medicine's Alumni Library.

Beal graduated from Massachusetts Memorial Hospitals School of Nursing (MMHSON) in 1931. In 1950, she left private nursing duty to join the Hospital as a staff nurse. Beal retired as senior staff nurse in 1967, but remained an active member of the MMHSON Alumni Association.

Beal died on May 30, 1988, in Taunton, Mass.

Profile: Sandy Snyder, R.N., discusses working on a medical-psychiatric unit

Sandy Snyder, a staff nurse in UH's medical-psychiatric unit, knew even when she was a Girl Scout growing up in Duxbury that she

wanted to be a nurse, but she didn't know she would become a psychiatric nurse.

When Snyder was graduating from Massachusetts Memorial Hospitals School of Nursing (MMHSON) in 1962, her director for Nursing recommended that she try psychiatry. Snyder says once she began working in the field, she knew she had found a specialty of great importance. "Some people aren't aware how bad emotional pain can be. We (psychiatric nurses) help patients cope with every-day stress and some heavy-duty stress," says Snyder, R.N., M.S., C.S.

Snyder says the rewards for a psychiatric nurse can come in small yet tremendous ways. A few years ago, she worked with a patient so depressed that she had become mute. Each morning, Snyder would wake the woman and wash her, all the while talking to her. The woman only nodded her head 'yes' or 'no'. "I would ask her to talk to me," said Snyder, "I would tell her I didn't know what she was feeling and that I couldn't help her if I didn't know what she was feeling." Despite Snyder's efforts, the woman would not speak to anyone.

However, one day when Snyder had returned from a week's vacation, she knew her perseverance and compassion had made a difference. The patient, who had been mute for weeks, finally looked at Snyder and said, "I missed you."

Snyder has worked for the University Hospital for 25 years. In addition to her solid clinical experience in psychiatric nursing, she also has a strong academic background in the field. While working full-time at UH, Snyder earned a master's degree in nursing, which enabled

her to teach at Boston University's School of Nursing (BUSON) for two years. She is also a clinical specialist in psychiatric nursing. "Teaching was a wonderful, exciting, challenging experience," reflects Snyder. "I worked with senior students who were very highly motivated."

When BUSON closed in 1988, Snyder resumed her full-time duties in the medical psychiatric unit at the University Hospital. In the early 1980s, the Hospital had converted the unit from a psychiatric unit to a combined medical-psychiatric facility. It is in this setting that Snyder teaches patients home-health-care techniques and provides counseling for emotional problems that might arise after an illness or operation.

Over her years spent in psychiatric nursing, Snyder has seen many changes. She points out that before health-care costs soared in the 1980s, patients who were in crisis had several months to recuperate. Today, the average length of stay at UH's medical-psychiatric unit is just three weeks. "The push today is for patients to take more responsibility right away. It used to be that long-term patients had the luxury of going at a slower pace. Now patients know it's a short-term stay, so their early participation is important."

Snyder says her long-term commitment to UH is due to several reasons, among them the fact that she genuinely loves nursing, she works with an excellent group of peers, and the Hospital treats its nurses with respect. "Nurses at UH are encouraged to contribute ideas and to become a part of change. Many engage in research and writing." Snyder is one of those writers;

in fact, she plans to publish a paper on the approach and manner in which the psychiatric unit was changed to a medical-psychiatric facility.

For all of these reasons, Snyder has remained faithful to UH since she graduated from MMHSON in the early 1960s. But she says what has kept her in her specialty is her patients. "Watching a low-functioning person pull out of a depression or psychosis and knowing that I had a role in that is the greatest reward. That may seem small to some people, but to me, it is extremely important."



Sandy Snyder, R.N., B.S., M.S., C.S.

For more information, contact Sandy Snyder, R.N., M.S., C.S., at 638-6500.

The patients can depend on her

Phyllis McKinzie goes above and beyond her duties required as a nursing assistant in the surgical unit on Atrium 6-East. The patients know if they need help making themselves look extra special, they can depend on McKinzie. She often helps female patients set their hair and apply make-up. In addition, she also collects clothing from staff members and distributes the items to homeless patients or patients who might be going to a nursing home.

McKinzie came to the University Hospital's training program for nursing assistants in 1968 and has worked for UH ever since. Nurse manager for the surgical unit, GERALYN SAUNDERS, R.N., M.S., praises McKinzie for her winning attitude and skill with patients. "Phyllis works extremely well with her patients. She takes the time to do the little things that make a difference," says Saunders.

McKinzie says she loves her position as a nursing assistant in the surgical unit. Most of her patients are elderly and are recovering from either kidney transplants or vascular surgery. "The people here become part of your family," says McKinzie, "I really enjoy working with the patients. They never stop saying 'thank you'. Their families never stop thanking you. It makes it all worthwhile."



Nursing Assistant Phyllis McKinzie with patient Marjorie Cary.

Massachusetts Memorial graduates: Their education still pays off

For Carol A. Thornton, R.N., C.N.A., the University Hospital is more than just her work place—it is where she was educated and where she has matured. "This is my home," says Thornton, who's been with the Hospital since she graduated from Massachusetts Memorial Hospitals School of Nursing in 1948. After the birth of five of her seven children, Thornton didn't expect to return to work, but admits now that she couldn't stay away very long. "One time, I called the Hospital hoping for a shift sometime, and the nursing supervisor on duty asked me if I could come in that afternoon!" laughs Thornton.

Thornton, now an evening nurse supervisor at the Hospital, belongs to an exclusive group: She is one of seven UH nurses who graduated from MMHSON and who work at the Hospital. The nursing school opened its doors in 1875 and enjoyed a strong reputation until it graduated its last class in 1962.

Judy Andersen, R.N., a member of the class of '62, has worked in the operating room at UH ever since her graduation. Andersen remembers that as a teenager from Brockton she thought that Boston "was on the other side of the world." But once she began studying at MMHSON, Boston became her second home. Andersen says she never considered working anywhere else. "My job has always been interesting and exciting," she says. "I don't want to sound slurpy about this, but we've given a lot to the Hospital, and it has given a lot back to us."

Lee Goldman, R.N., agrees. Goldman graduated from MMHSON in 1960, but left nursing in 1967 to raise a family. During that time, she remained connected to the Hospital through the MMHSON Alumnae Association, which she currently heads. The organization, which provides financial support for education and research, recently funded the building of the hospitality

suite on Preston 3 (F-3), and also provided funds for the Hospital's Interfaith Chapel relocation. For the past three years, Goldman has been working as a *per diem* nurse at UH's New England Regional Spinal Cord Injury Center.

All three graduates agree that they are able to do their jobs well today because of the solid education they received at MMHSON. Thornton says nursing school in the 1940s featured a hands-on approach with less of an academic focus than most schools today. She and the other 40 or so women in her class actually staffed the entire Hospital, working full-time on days, evenings and nights, and attending classes in between. At times, the students would work the 11 p.m. to 7 a.m. shift, catch a few hours sleep, and then report for a morning class. "We didn't know any other way,"

says Thornton. "People today would consider it tough, but we just did it."

Goldman says by the time she was in nursing school in the late 1950s, the mix of classes and patient work had changed. Nursing students spent a month or so in class and then about a month on the floors. "Older nurses told us we had it easy," says Goldman. "I might have been able to stay up partying all

night, but I don't know if I could have worked all night and then reported for class."

The one thing that all agree remained constant at MMHSON was the school's commitment to excellence, and the feeling that all of the students were part of a team working toward a common goal. Thornton recalls her classmates pitching in to help one another finish their work. "It was a demanding time. But because of those demands, everybody was very supportive of one another. No one went home until everyone was done."

For more information, contact Carol A. Thornton, R.N., C.N.A., at 638-5826.



Three UH nurses who graduated from Massachusetts Memorial Hospitals School of Nursing are, from left to right, Judy Andersen, R.N., Carol A. Thornton, R.N., C.N.A., and Lee Goldman, R.N.

Staff Notes

Appointments:

Diane Sarnacki, R.N., M.S.N., clinical nurse specialist, Oncology.

Rita Galvin, R.N., M.S., nurse manager, 7 West.

Katherine Cummings, R.N., acting nurse manager, 8 East.

Theresa Thornton, R.N., acting nurse manager, 7 West.

Susan Zorb, R.N., M.S.N., has been appointed to be ACCRN Region 1 CNS special interest group consultant.

Thornton Shepherd, former data management assistant for Nursing, has been appointed applicant analyst responsible for design and implementation for Omega function, the new Hospital Information System, in the outpatient areas.

Certifications: Advanced Cardiac Life Support (ACLS):

Mary Gaffey, R.N.
Jane Bosworth, R.N.
Eileen Cynamon, R.N.
Linda Koziak, R.N.
Brian Dean, R.N.
Kendall Kubilus, R.N.
Maureen Hughes, R.N.
Jack Gould, R.N.
Sheila Kaiser, R.N.

Certified Emergency Nurse (CEN):

Maureen McLaughlin, R.N., B.S.N.
Nancy Figueiredo, R.N.

American Critical Care Nurses Association (CCRN):

Michael Kyller, R.N.
Kathryn Sullivan, R.N., B.S.N.
Loretta Donald, R.N., M.S.N.

Medical-Surgical Nursing Certification:

Terry Branca, R.N.
Socorro Talamera, R.N.
Nancy Brandon, R.N., M.S.N.

Oncology Certification:

Mary Kate McConville, R.N., B.S.



Loretta Donald, R.N., M.S.N.

Graduations:

Carole MacKay, R.N.: B.S. in psychology from the University of Massachusetts/Boston.
Nancy Brandon, R.N.: M.S. in community nursing from Boston College.

Lectures and publications:

Kathy Gallagher, R.N.; **Susan Sweeney, R.N.;** and **Sara MacKenzie, R.N.**, wrote *Standard of Care for the Patient with Potential Injury Related to High Risk Falls*.

Eileen Mullaney, R.N., presented "Nursing Care Planning Segment of Challenge of Change: Documentation and Clinical Practice Workshop."

Diane Hackett, R.N., IV Therapy, provided education for staff regarding IV therapy standards.

Kathy Gallagher, R.N., B.S.N., is the author of the *Cardiothoracic Unit Preceptee's Manual*.

Jane Jansen, R.N., B.S.N., presented at the New England Area Renal Social Workers Seminar in June 1900—"Nursing Care for the Elderly Renal Patient in the Acute Care Setting."

Jacqueline Kelly Buis, R.N., B.S., recently instructed a CPR class.



Rita Galvin, R.N., M.S.

Patient Care Technician Seminar Faculty:

Joan M. Russo, R.N., M.S.N., acting vice president, Nursing;
Nancy McAward, R.N., MMHS, senior nursing director;
Gail DeLaney-Woolford, R.N., M.S., senior nursing director;
Gary Hill, M.S., recruitment manager;
Cynthia O'Sullivan, R.N., M.S.N., nurse manager; Program Coordinator;
Sarah C. Wilcox, B.A.

Staff Members who passed State Nursing Boards:

Lori B. Watka, R.N.
Kate Bourke, R.N.



Joe Karbowski, R.N.

Mary Bushika, R.N.
Noel Giard, R.N.
Sheri Panasuk, R.N.
Maria Tamagna, R.N.
Trisha Weir, R.N.
Maria Gregory, R.N.
Joseph Karbowski, R.N.
Nancy McSweeney, R.N.
Kristin Murphy, R.N.
Melinda Fielding, R.N.
Kristyn O'Brien, R.N.
Kim Cussimano, R.N.
Diane Yifru, R.N.
Cathy Foster, R.N.
Ann Kelley, R.N.

Review of Literature

Quick Reference To Neurological Critical Care Nursing by Noreen M. Leahy, Aspen Publishers, Inc. 1990.

The inaugural volume in the Aspen Series of Quick References to Critical Care is authored by Noreen M. Leahy, R.N., M.S.N., CNRN, neurology clinical nurse specialist at the University Hospital.

The series editor, Joan Vitello, R.N., M.S.N., CCRN, C.S., also a clinical nurse specialist at UH, was very wise to begin with this text. Leahy's style is straightforward and clear. She takes the



Susan Zorb, R.N., M.S.N.
 (photo by Bradford F. Herzog)

Kathy Sullivan is winner of Peggy Cenci Award

Kathy Sullivan, R.N., B.S.N., of the Coronary Care Unit/Progressive Care Unit, has been named the 1990 winner of the Peggy Cenci Award. The award is given each year by the Nursing Department to one nurse who is highly respected by his or her colleagues and who is willing to take extra steps to comfort a patient, family member or fellow staff member.

"When I was in high school I wanted to be a teacher, but there were no teaching jobs at the time," says Sullivan.

"This sounds awful, but I went into nursing because there was a demand for nurses. I really grew to like the job."

Sullivan began her nursing career at Lawrence Memorial Hospital in Medford, Mass., after she graduated from that hospital's school of nursing in 1976. Five years later, she joined the University Hospital's Surgical Oncology Unit, and for the past three years, Sullivan has been work-



Kathy Sullivan, R.N., B.S.N.

ing in the CCU/PCU.

Sullivan earned her bachelor's degree in nursing from Emmanuel College in 1988 while working full-time at the Hospital. She often fills in as charge nurse in the CCU/PCU and has worked as a preceptor, orienting and supporting new employees.

Sullivan is certified in

Advanced Life Support and has taught programs to her colleagues.

"What I like best about the CCU is the willingness of the staff to work together and share their experience," says Sullivan. "And I've learned an

immense amount from staff nurses that I could never have learned in class."

Sullivan's professionalism and willingness to give her all led her nurse manager, Roberta Speroni, R.N., to nominate her for the award. "Kathy is well-liked, is extremely conscientious, and is a highly respected member of the CCU/PCU staff. She is an excellent nurse who has well-developed clinical skills, and she is seen as a resource nurse in our unit," wrote Speroni.

Sullivan also received glowing nominations from several peers, among them, Kelli Ann Thomas, R.N., "Kathy is truly respected and loved by her peers. She's a sincere and caring person. She fits all the descriptions mentioned for the Peggy Cenci Award. We in the CCU would love to see Kathy receive this very special award...She is a very special person!"

The ideals behind the Peggy Cenci Award

She was a very good person, a very good nurse; she had faith in people, she kept the faith.

Simply put, that is the essence of the person in whose honor the Peggy Cenci award was founded. The award is presented yearly to the nurse who best personifies the qualities Peggy embodied.

The chosen nurse is elected by peer vote. Think of that for a moment. The award says to the Medical Center community that this is the nurse who best practices the art and spirit of nursing. This is the nurse elected to be at the bedside of other nurses. In this world of technology and science, we can find a nurse who aggressively practices the art of caring—spiritually and physically. Nominations for the award are affirmations of the esteem that nurses hold for fellow nurses.

The award is an honor, a covenant of faith.

Submitted by:
Phyllis Davis, R.N.,
Nursing Supervisor

broad topic of neurological critical care nursing and breaks it down into components that are accessible and readily understood.

The review of neuroanatomy and neurophysiology in Chapter 1 is accompanied by many useful illustrations that neatly complement the text. This chapter lays the groundwork for the subsequent chapter on neuroassessment. Critical care nurses will find Leahy's clear approach to this subject refreshing. I particularly enjoyed the chapter on

Neurodiagnostic Procedures for its inclusions of both patient-teaching information and nursing implications.

This text certainly lives up to the expectations of a quick reference. It is extremely easy to find information on specific topics. The chapter headings employ the terminology commonly used by critical care practitioners. The content is concise and well-written.

All in all, Leahy has created an extremely useful text that should take its place in every critical care unit's reference library.

* CHRISTOPHER, IRENE
* BUSM
* L12
*
*

5

Non Profit Org.
U.S. Postage
PAID
Boston, Mass.
Permit No. 3469

IV Nurses at UH

One important, but sometimes unnoticed, group of nurses at the University Hospital is the IV nursing team. The task that makes up the IV nurse's job is a difficult one because no one, including the nurses themselves, likes needles. "I always cringe when I put the IV in," reflects IV Therapy Coordinator Mary Landrum, R.N., B.S.

UH's evening IV nurse, Marie Donahue, R.N., agrees that no IV nurse feels good about inserting intravenous lines, but knowing they can insert the needle in just one try helps them do their job. Donahue adds that many times patients who are afraid of the needles become upset with the IV nurse. "But you just have to remember that the patient is hating the needle, not you," says Donahue.

Donahue is one of six nurses who make up the IV team at the University Hospital. Landrum, who's been an IV nurse for 16 years, manages the group. Theirs is a fast-paced and varied job. Each nurse on the day shift starts and changes IVs on 35 to 40 patients. The evening nurse sees between 25 and 30 patients.

An IV nurse at UH is not done with her job once the IV is in place. They often serve as a second pair of eyes when monitoring a patient's recovery. "Sometimes an IV nurse will spot an extremity that's beginning to swell or a rash that's starting to develop before we do," explains a nurse in orthopedics. "Because they are seeing the patient only once a day or every other day, it's easier for them to spot small changes that might be happening." Staff nurses also ap-

preciate the IV nurses' support and help at the bedside, answering phones, and simply lending a sympathetic ear to patients.

Landrum explains that hospitals began hiring IV nurses about 15 years ago because a skilled team can cut down on the incidence of infections, can decrease the use of central lines, and often put patients at ease. However, financial problems have forced many hospitals to eliminate IV nurses. "It's a technique that's easy to learn," says Landrum, "but getting good at it is difficult." That is a lesson hospitals have learned the hard way. In fact, some have already rehired the IV nurses they let go.

Charles Thistle, a recent patient at UH, says that he feels the IV nurses are second only to surgeons in their importance to patients. He points out that not all hospitals are fortunate enough to have such specialists. "But even with an IV nurse, you're still going to feel the needle. The difference is you know she's going to put it in quickly and properly."

"No matter how good we get at this, we're still dealing



IV Therapy Coordinator Mary Landrum, R.N., B.S., chats with a patient.

with needles," explains Landrum. "That's why we have to want to do our job and do it well." Thistle and many other patients at UH say the Hospital's IV nursing

team has achieved that end.

For more information, contact Mary Landrum, R.N., B.S., at 638-5752.

The UH Nurse is published by the Department of Nursing at The University Hospital, 88 East Newton Street, Boston, MA 02118-2393. Newsletter Coordinator: Nancy McAward, R.N., M.M.H.S., senior nursing director. Executive Editor: Dorothy A. O'Sullivan, R.N., B.S., M.B.A., vice president for nursing. Editorial Advisory Board: Gail DeLaney-Woolford, R.N., M.S., senior nursing director; Anita King, R.N., assistant director, nursing systems; Susan Zorb, R.N., M.S.N., C.N.S. Inquiries may be directed to the Department of Nursing, (617) 638-8900. The UH Nurse is produced by the Boston University Medical Center's Office of Publication Services, Owen J. McNamara, director. Writer: Linda M. Ciampa.