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Correction: In the previous issue, Kristi Hendricks’ last name was misspelled in the excerpt from the speech she gave at the December ABSN graduation ceremony. Duke Nursing Magazine apologizes for the error.
Of all the aspects of my work, the one most encouraging to me about nursing’s future is the quality and commitment of our students. They exhibit extraordinary passion, creativity, and intelligence and are focused on reducing health disparities, caring for people at their most vulnerable hour, and strengthening the families and communities in which we live. They intend to change the world. They are multitalented and scary smart! In support of their ambitions, we must offer the highest quality educational programs possible. In this issue we focus on our students and the ways in which we are working to prepare them to lead into the future.

Consistent with Duke’s commitment to excellence, the School of Nursing embraces a tripartite mission of education, scholarship, and service. Of these three, however, our dedication to educational excellence rises above all other missions. Since 1932, when we opened the school, we have welcomed thousands of students to the Duke campus. When I was an 18-year-old Duke student, I was living away from home for the first time, and my understanding of the opportunities in nursing was, quite frankly, underdeveloped. Today our students come from a variety of educational and work backgrounds and are looking for a meaningful way to contribute to society.

In this issue of Duke Nursing Magazine, you will also read more about a new method of teaching that we call the “flipped classroom.” Nursing classes have often involved traditional lectures, where the instructors talk and the students listen. But inside the flipped classroom, the lectures are the homework and class time is for discussions or hands-on learning. This new approach benefits students by giving them an active role in their own learning. We’ll hear from students and faculty members, including Dr. Sharon Hawks and Dr. Alison Edie, how the flipped classroom works.

I hope you find this latest issue of Duke Nursing Magazine informative and gain insight into the school’s student population and how they continue to shape our school and the future of nursing and health care.

Catherine L. Gilliss, BSN’71, PhD, RN, FAAN
Dean and Helene Fuld Health Trust Professor of Nursing
Vice Chancellor for Nursing Affairs

Preparing Nurse Leaders

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In addition to educating students in almost every facet of nurse-led care, faculty members are working with students at all levels to encourage their curiosity by exposing them to research. We believe that learning about research and being exposed to the power of discovery will stimulate our students to consider careers in science. You will see how faculty members Dr. Sharron Docherty and Dr. Marilyn Hockenberry are collaborating with student researchers on patient-centered solutions.

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Kathleen S. Ashton, MSN’09, PhD, RN, is an assistant professor in the ABSN degree program. She joined the School of Nursing faculty in February 2013 and teaches the ABSN program’s adult health courses. Ashton has been a registered nurse for 32 years and has extensive experience as a provider of care to adult populations in acute care settings. Before coming to the School of Nursing, she was a staff nurse and unit educator in the Duke University Hospital Emergency Department, coordinator of the Nurse Residency Program at Duke Hospital, and a staff nurse in Duke Hospital Perioperative Services. She also served as a preceptor for newly licensed and experienced nurses. Ashton earned a bachelor’s degree in nursing science at Wilkes College in Wilkes-Barre, Pa. She earned a master’s degree in nursing education at Duke Hospital, and a staff nurse in Duke Hospital Perioperative Services. She also served as a preceptor for newly licensed and experienced nurses.

Margaret “Peggy” Bush, PhD, MBA, RPh, is an assistant professor with co-teaching responsibilities for the pharmacology courses in both the MSN and ABSN programs. She has more than ten years’ experience teaching pharmacology. Her research experience has focused on clinical drug development in the areas of oncology and hematopoietic growth factors. She has practiced as a pharmacist in both hospital and retail settings. She first joined the School of Nursing faculty in December 2012.

Bush earned a BS degree in pharmacy from The Ohio State University, an MBA in health administration at Cleveland State University, and a PhD in pharmacology from the University of California, Los Angeles (UCLA). She recently completed a graduate certificate in e-learning from North Carolina State University. Her professional interests include identifying pharmacology instructional strategies that engage learners and promote critical thinking through the use of problem-solving approaches.

In 2005, she received the Excellence in Teaching Award from Durham Technical Community College. Other honors include being inducted into Beta Gamma Sigma (Business Scholastic Honorary) in 1984 and the Rho Chi Society (Pharmacy Scholastic Honorary) in 1979.

Rémi M. Hueckel, MSN’96, DNP’11, CPNP-AC, is an assistant professor in the MSN and DNP degree programs. She is an expert clinician in the pediatric intensive care unit and a leader in patient safety and process improvement at Duke University Hospital, where she also holds a clinical appointment. As a clinical associate, Hueckel served as the clinical preceptor for acute care pediatric nurse practitioner (PNP) students, a course coordinator for the acute care PNP management courses. Currently, she teaches management courses for the pediatric acute care nurse practitioner specialty program and serves as laboratory instructor in the Pediatric Diagnostic Reasoning and Physical Assessment course. She first joined the School of Nursing faculty in 2013.

Hueckel earned a BSN degree from Purdue University. She earned an MSN degree as an adult nurse practitioner and completed postmaster’s certificates in the family nurse practitioner and acute care pediatric nurse practitioner specialties at Duke. She is a 2011 graduate of the Duke DNP program. Hueckel is board certified by the American Nurses Credentialing Center as a family nurse practitioner and as an acute care PNP by the Pediatric Nursing Certification Board (PNCB).

Hueckel’s clinical experience and interest in patient safety and emergency
response teams have allowed her to creatively integrate simulation into the Duke Acute Care PNP management courses and create opportunities for intra-professional collaboration between ABSN and Acute Care PNP students. She is the president-elect of the North Carolina chapter of the National Association of Pediatric Nurse Practitioners, serves on the Acute Care PNP Exam Committee of the PNCB, and is a reviewer for the Journal of Pediatric Health Care.

Devon Noonan, PhD, MPH, FNP-BC, is an assistant professor in the ABSN and DNP degree programs. She joined the School of Nursing faculty in 2013 and will initially teach the school’s Health Promotion course. She is a registered nurse and registered nurse practitioner with more than eight years of clinical practice in community health, occupational health, and pediatric/adolescent health settings. She received a BSN degree at Boston College, an MSN degree at Georgetown University, and an MPH and PhD at the University of Virginia.

Noonan’s research is focused on health promotion and cancer risk reduction in vulnerable populations. While at the University of Virginia, she received a fellowship from the American Lung Association and a small grant from Sigma Theta Tau to support her work on understanding alternative tobacco use methods in college students. She also received the Phyllis J. Verhonick Dissertation Award from the University of Virginia in 2010. She recently completed an NIH T32 fellowship at the University of Michigan School of Nursing.

Cheryl C. Rodgers, PhD, RN, CPNP, CPON, is an assistant professor in the MSN and DNP degree programs. Rodgers, who joined the School of Nursing faculty in 2013, has extensive clinical and research experience with pediatric bone marrow transplant patients. She is certified as a pediatric nurse practitioner and as a pediatric oncology nurse.

She earned a BSN degree from the University of Nebraska Medical Center in 1989, an MSN degree from the University of Texas Houston Health Science Center in 2000, and a PhD from Texas Woman’s University in 2009. Her dissertation focused on exploring the symptom experiences of children and adolescents during bone marrow transplant recovery. During a three-year, post-doctoral fellowship at Baylor College of Medicine, she developed and evaluated an early symptom management intervention for adolescent bone marrow transplant patients. At Duke, she will continue to develop her program of research focused on expanding symptom experience knowledge and exploring symptom management strategies.

Rodgers has served as a manuscript reviewer for pediatric and oncology journals and is a member of the Journal of Pediatric Oncology Nursing editorial board. She currently serves as a board member for the Association of Pediatric Hematology Oncology Nurses and the Oncology Nursing Certification Corporation.
Powell Honored For Commitment to Community Health

Dorothy Powell, EdD, RN, FAAN, associate dean for global and community health initiatives, was one of eight honorees during the 16th annual Cook Awards Ceremony and Dinner.

The Cook Awards are named in honor of Dr. Samuel DuBois Cook, Duke University’s first African-American professor, and recognize service to the university and community. This year the event also was part of the university’s nine-month commemoration of the 50th anniversary of black students at Duke. Andy Burness, one of Cook’s first students at Duke; President Richard H. Brodhead; and Ben Reese, vice president of Duke’s Office for Institutional Equity, offered remarks during the ceremony held in February.

As founder of the Office of Global and Community Health Initiatives, Powell has developed international and local opportunities for student cultural immersion. Her goal is to help students increase their cultural sensitivity and experience the challenges of health care delivery to vulnerable populations. Her international work has involved countries in the Caribbean, Central America, Africa, and parts of Asia. She has created ongoing bonds between the School of Nursing and organizations that serve homeless and other high-risk communities in Durham. In addition, Powell has increased opportunities for the economically disadvantaged and under-represented minorities in nursing at Duke.

Gilliss Receives Distinguished Alumnus Award

In April, Dean Catherine Gilliss received the University of California, San Francisco (UCSF) School of Nursing’s 2013 Jane Norbeck Distinguished Alumna Award. Gilliss earned a PhD from UCSF in 1983.

The award was established in 1984 to honor graduates who have made significant contributions to the nursing profession and have demonstrated service and/or leadership that contributed to the growth and development of the UCSF School of Nursing and/or the profession. The award is named for Jane Norbeck, an alumna from the master’s class of 1971 and PhD Class of 1975 and dean from 1989 through 2000.

New Web Site Launched

Duke University School of Nursing has a new web site. You can keep up with news about nursing education and research at nursing.duke.edu. You can also follow the school on Facebook, Twitter, Google Plus, Pinterest, LinkedIn, YouTube, and Flickr.

nursing.duke.edu
Beta Epsilon Celebrates 40th Anniversary

The Beta Epsilon Chapter of Sigma Theta Tau International Honor Society of Nursing celebrated its 40th anniversary on March 4. Speakers shared their history with the Beta Epsilon chapter for an audience of chapter members, nursing faculty, and Duke nursing students. Speeches included a welcome from the chapter president, Robin Knobel, PhD, RN and opening remarks from Dean Catherine Gilliss. Past chapter leaders who shared their Beta Epsilon experiences included: Mary Ann Peter, BSN’62, MSN’65, PhD, RN; Midge Bowers, MSN’90, DNP, RN, FNP-BC, AACC, and Dean Emeritus Ruby Wilson, EdD’69, RN, FAAN. A reception to mark the event followed the presentation.

Second History Volume Published

Duke University School of Nursing has published a second volume on the school’s history, Progress and Possibility, covering 1971-2013. This was one of the most challenging periods, when, in 1979, the school was targeted for closing. From the difficult challenges of this period, visionary leadership and new programs helped the school enjoy a remarkable turnaround. The publication was mailed to alumni in January and is available online at nursing.duke.edu.

Letters

“What a delight, and trip down memory lane, to open your magazine yesterday evening. For some odd reason, I started reading it back to front, and the pages became more and more familiar. There was my dear friend, Kathryn A. May outside Hanes House on p. 8. There was my student uniform on p. 7. Imagine my surprise to see my graduating class on p.4 and 5! I see myself, smiling away in the very back row on p.5.”

—Phoebe E. Bacon, BSN’74, MLS, MA
Commitment to Excellence Ceremony

On the night before Family and Friends Day, Duke University School of Nursing held its second annual Commitment to Excellence Ceremony for students in the Accelerated BSN program.

This year’s student address was delivered by Randi Simpkins, ABSN’13, who shared the story of her brother’s bicycle accident. “As he grappled with the pain … I was able to sit at his bedside and strengthen and empower him with stories of patients who I came into contact with week after week,” she said.

She told her fellow students their challenge today is no different than it was two centuries ago: “We must do all in our power to elevate the standard of our profession and the practice of our calling.”

Dean Catherine Gilliss made opening remarks, and assistant professor Kathleen M. Turner, MSN’93, DNP’12, RN, gave a brief history of the ABSN program at Duke before introducing Simpkins.

The Commitment to Excellence Ceremony is intended to foster a sense of community and establish a transitional experience to support nursing students as they begin their clinical rotations.
Family and Friends Day

More than 375 faculty, students, family, and friends gathered for this year’s Family and Friends Day in February. Each year, the event gives students in the Accelerated BSN program a chance to share with their loved ones what it’s like to be a nursing student at Duke. The informative and fun-filled day featured demonstrations in the school’s Center for Nursing Discovery; a class taught by faculty member, Michael Relf, PhD, RN, ACNS-BC, AACRN, FAAN; and face painting for the kids.

Merwin and Hockenberry Receive Distinguished Professorship Appointments

Elizabeth Merwin, PhD, RN, FAAN and Marilyn Hockenberry, PhD, RN, PNP-BC, FAAN, have been named to endowed professorships at Duke University School of Nursing. These appointments are in recognition of their distinguished contributions to nursing research and health care.

“Dr. Merwin and Dr. Hockenberry are distinguished and productive scientists whose work exemplifies the important discoveries being made by nurse scientists,” says Dean Catherine Gilliss. “They represent major resources to our field, and we are very pleased to have them at Duke helping to prepare the next generation of nurse researchers.”

Merwin is the executive vice dean of the School of Nursing. She will be named to the Ann Henshaw Gardiner Professorship in Nursing. Hockenberry is a professor of nursing and specialist in pediatric oncology. She will be named to the Bessie Baker Professorship in Nursing. The announcements were made at the annual Duke University dinner honoring distinguished professors in May. The professorships take effect July 1.

Merwin is a pioneer in the study of mental health service needs and delivery in rural communities. A highly regarded scholar, her work has shaped the field of mental health nursing and more broadly influenced interdisciplinary mental health care in underserved rural areas. Her research has used large datasets to generate core data for understanding the delivery of mental health care, understanding the challenges of mental health care providers in rural areas, shaping health care provider education and influencing policy decisions.

Hockenberry is an internationally known expert in pediatric oncology whose work focuses on the symptoms associated with childhood cancer treatments. A successful and prolific researcher and clinician, she has significantly contributed to understanding how to improve cancer care for children.

For more than two decades, Hockenberry has conducted studies to explore the most frequent and severe symptoms experienced by children during cancer treatment, including fatigue, mental and cognitive changes, sleep disturbance, pain, and nausea. She and her colleagues have developed predictive models identifying children at greatest risk for severe symptom toxicities that often inhibit optimal cancer therapy. She is now funded by the National Institutes of Health/ National Institute of Nursing Research to evaluate the influence of phenotypic responses assessed by cerebrospinal fluid (CSF) biomarkers of oxidative stress and inflammatory pathways on symptoms experienced by children with leukemia.

The Bessie Baker Professorship is named for the first dean of the School of Nursing, and the Ann Henshaw Gardiner Professorship is named in honor of the first instructor at the School of Nursing.
Autonomy for Nurses on the Health Care Team Ultimately Improves Care for Patients

I remember my first day of nursing school at Duke. Fifty-six Accelerated BSN students crowded into the cramped rented space on Ninth Street the program used before the beautiful new building was completed. Professor Judy Hays told us that a nurse’s responsibility is to advocate for our patient. In whatever setting we might practice, the focus on the patient remains the same. If something seems wrong, speak up, even if it means challenging a physician, an administrator, or a family member. This has been my touchstone, the foundation upon which I base my own practice, and has allowed me to understand nursing as what it is instead of what it is not.

It seems that unnecessary tension can result when doctors and nurses focus on their distinctions rather than their common goal of safe, high quality patient care. For example, when I practiced in an Emergency Department with an academic affiliation, our unit regularly saw the influx of medical residents, unfamiliar with our processes, leading to misunderstandings and unnecessary tensions in the workplace.

I proposed that because residents were transient while the nursing staff was constant, nurses could create a curriculum and orient new residents to the unit instead of relying on inconsistent or non-existent training by the attending physicians. “That’s DOCTOR’S work,” someone hissed at me. “They need to take care of themselves!” Instead of evaluating the suggestion on the basis of what could create a more collaborative and well-informed team environment and, ultimately, better care, my suggestion was dismissed as yet another example of potential exploitation of beleaguered nurses in the service of physicians.

I now manage multiple ambulatory care clinics, of which primary care is the major service provided. We have adopted the patient-centered medical home model, which requires registered nurses to use all of their critical thinking skills as they help manage care for their assigned panels. Each primary care team, which includes a provider, registered nurse, licensed practical nurse, and clerk, works together to ensure that patients have adequate access and follow up care, and that those with chronic illnesses are managed closely. As more health care settings and specialties adopt a team approach, I believe that we have a great opportunity to promote our profession and rethink the hierarchies that have “stove piped” professions and led to strained interprofessional interactions. The future success of health care demands that we work better and smarter, and breaking down old ways of interacting to create new understanding is an important first step.

Renée Beauclair Twersky, ABSN’06, PhD

Renée Beauclair Twersky, ABSN’06, PhD, is a health system specialist in the Ambulatory Care Service at the Durham Veterans Affairs Medical Center.

Campaign Progress

If you are interested in supporting the School of Nursing’s campaign, there are many opportunities, including named space in the new wing of the Christine Siegler Pearson building, as well as gifts to provide scholarships, endow professors, or provide research support or global health opportunities for students and faculty. Duke also offers planned giving options that can provide income and tax benefits, as well as options for giving through your estate. Please contact Fran Mauney, (919) 414-8908 or Sallie Ellinwood, (919) 385-3151, School of Nursing Development and Alumni Affairs.

Duke, Hopkins, and UAB Nursing Schools Collaborate on Florida Event

Dean Catherine Gilliss joined the deans of nursing from John Hopkins University and the University of Alabama at Birmingham at a luncheon program for alumni and friends in Jacksonville, St. Petersburg, and Naples, Fla., in January. Each program featured a panel discussion on Leading Innovation in Health Care and Nursing Education. Midge Bowers, MSN’90, DNP, RN, FNP-BC, AACC represented Duke.
Graduation 2013

This year’s graduation was once again filled with hugs, tears, and cheers as the School of Nursing awarded degrees on May 12 to 253 students representing the school’s Accelerated BSN, MSN, DNP, and PhD degree programs.

The ceremony included welcome remarks from Dean Catherine Gilliss and a commencement address by Karen Daley, PhD, MPH, RN, FAAN, president of the American Nurses Association. Tiffany Kelley, PhD’12, a September 2012 graduate, delivered the student address.

Among Kelley’s words of advice: “I ask each of you to think beyond today and continue to challenge yourself. Challenge what we know and challenge how we look at problems and challenge each other in an effort to advance health care for all.”
Kevin Momber
age: 30
first career: paralegal in Philadelphia
currently: CRNA student

Ellen Urbanowicz
age: 27
first career: clothing designer in Manhattan
currently: ABSN student
A FEW YEARS AGO in a top New York City fashion design firm, Ellen Urbanowicz sat across the table from Generation Y pop stars Jessica and Ashley Simpson, whose “Tween” clothing line was all the rage. Urbanowicz—then age 24—and fellow designers were charged with keeping the label fresh and edgy.

Urbanowicz had been in New York just a couple of years and had steadily risen up the ranks at The Jones Group. The New Jersey native was living in Manhattan and reveling in the excitement that the city and her demanding job provided. She was on her way to fulfilling a childhood dream of becoming a famous fashion designer—going from making clothes for her dolls to designing them for the stars.

One Friday night about a year later, while working on a line of clothes for Macy’s, a moral realization struck her. “We were at the office until 11 p.m. and people were freaking out about hem lengths and zippers. It made me think: This is just clothing. It’s not a life and death situation. I really felt I had lost touch with who I was and did not want to live the rest of my life like that.”

Meanwhile, near Venice, Italy, 23-year old San Diego native Anna Gonzales was making a good living as a professional water polo player. She traveled to new and interesting places and enjoyed free time with friends on sunny beaches. “It was a pretty good life,” she says. “I got to see a part of the world I never thought I’d get to see, and get paid to do what I loved.”

One problem, though: Gonzales knew that her time as a professional athlete was limited. Age and a recurring shoulder injury would eventually force her to quit, she reasoned. Gonzales sought a more substantive, rewarding future.

When an offer came to join a different professional water polo team—this one in Greece—she said no. “It was time to actually start my life,” she says.
For Urbanowicz and Gonzales, the choice for new careers was clear: Nursing.

CAREER REBOOT

Nursing as a second career is a growing trend in the United States and at Duke. That’s documented, in part, by the explosive growth of nursing schools offering accelerated bachelor of science in nursing (ABSN) degree programs, which require students to already have earned bachelor’s degrees, the majority of which are in non-health care disciplines.

The American Association of Colleges in Nursing (AACN) reports that in 1990, just 31 ABSN programs existed in the United States. Today there are about 250.

Duke University School of Nursing has enrolled former architects, teachers, business owners, and the like into its programs. Like Urbanowicz and Gonzales, some have renounced established careers that they found unrewarding. Nursing, they said, provides them with deep personal richness, humanitarian value, flexibility, and long-term stability.

The School of Nursing’s overall enrollment has nearly tripled in the last 10 years, growing from 398 full-and part-time students in 2003 to today’s 844. The current average age of all Duke nursing students is 34, for ABSN students it’s 28, further indications that women and men are rebooting their professional lives mid-career.

It makes for a diverse student cohort with myriad life experiences entering the workforce.

“For many recent college graduates and established professionals, nursing is attractive since it allows them the opportunity to obtain both personal and professional satisfaction—something frequently cited as missing in other jobs and professions,” says Michael Relf, PhD, RN, ACNS-BC, AACRN, CNE, FAAN, the School of Nursing’s assistant dean of undergraduate education.

Applications to all Duke University School of Nursing programs have more than tripled since 2007, when 453 prospective students applied. For the 2012-2013 school year, there were 1,398 applications.

According to the Online Journal of Issues in Nursing (OJIN), nursing students identified caring for others and contributing to the well-being of society as a major component of their decision to become nurses.

That certainly is true for Kevin Momber, a former paralegal at a large Philadelphia law firm. The current student in Duke’s Master of Science in Nursing degree program says he became disenchanted working in the legal system because “it felt like I was trying to game the system to make a lot of money for the firm’s partners. It was soul crushing. It wasn’t purposeful and meaningful. I knew I didn’t want to go on to law school.”

Over the past 10 years, men have made up 10 percent of the nursing student population at Duke, compared to the national average of 6 percent. The number of male nursing students in all of Duke’s nursing programs grew from 39 in 2003 to 107 this year. The AACN says the number of men entering nursing is slowly but steadily increasing.

After leaving the law firm, Momber returned home to Grand Rapids, Michigan and ran into a male friend who recently had completed an ABSN program there, was working as a nurse, and loved it.

“It was like a light bulb went on for me,” Momber said. “I didn’t grow up around nurses, so it wasn’t even on my radar. But I realized this is exactly what I wanted to do. I knew it would allow me to give back in so many ways.”

He earned an ABSN degree in Michigan, then was hired at Duke University Hospital in the Pediatric Intensive Care Unit.

“I chose Duke because I knew I would want to go back to school at some point, and I wanted to work at a big, respected medical center,” he said. “Being a nurse is so gratifying to me.”

R. John Repique, a student in Duke’s Doctor of Nursing Practice degree program, is vice president, chief administrative officer, and chief nursing officer for Mental Health Services at Jackson Health System in Miami. He comes to the Duke campus once a semester.

Unlike Momber, Repique was called to nursing at an early age.

“I’ve always been a nurse,” he said. “I came from a family of nurses. What I love about nursing is its focus on caregiving.”
Born and educated in the Philippines, he arrived in the U.S. in the early 1990s when a nursing shortage had hospitals recruiting overseas to fill positions. Repique worked at a state psychiatric hospital in Georgia for two and a half years, then became a psychiatric nurse in Maryland, where he earned a master’s degree at the University of Maryland.

From 1994-2000, Repique worked at Johns Hopkins, and in 2001 he moved to New York City to become a nurse manager, then director of behavioral health nursing/quality at New York Presbyterian/Weill Cornell Medical Center until 2008, when he moved to Miami and became Jackson’s first chief nursing officer for behavioral health services.

Seeking further personal and professional growth, Repique enrolled in Duke’s DNP program in 2011.

“I’m passionate about social and health policy issues,” he said. “In my current position I get to engage the community about mental health issues and access to care. I want to do more of that, and I hope to inspire younger nurses.”

MORE ENERGY AND FOCUS

The OJIN also reports that nursing school administrators said second-career nursing students typically bring a higher energy level and intensity of focus to their studies than younger students. They seek out challenges at work and are well suited to problem solving.

For former elementary school teacher Randi Simpkins, who graduated from Duke’s ABSN degree program in May, facing new challenges while serving others was a major motivator for her career change.

“Teaching was very fulfilling to me,” the 40-year-old mother of two teenagers says. “I think it came natural to me. I always challenged my students to push themselves to do more, but I got to the point where I wasn’t pushing myself.”

After nine years of teaching in Philadelphia, then Charlotte, she began exploring nursing. “Before long it was a no-brainer,” she says. “I knew that if I was going to become a nurse I needed to be an astute, efficient, and competent nurse. Duke was the only school I applied to, and my expectations have been surpassed.”

While Simpkins initially set out to “go outside my comfort zone and not work with children,” she eventually realized that pediatric nursing was her calling.

“Working in the clinical setting showed me that I have a natural ability with children,” she says. “I love them all—babies, toddlers, teenagers.” She hopes to stay at Duke and eventually continue her nursing education, possibly to become a nurse practitioner.

Unlike Simpkins, Urbanowicz, the former fashion designer, grew up surrounded by nurses, making her second career choice seem more direct. Her mother is a school nurse, and three of her aunts also are nurses. But it wasn’t until she helped to take care of her ill grandparents before they passed away that the seed of nursing as a career was planted. It germinated after leaving the fashion world.

Gonzales earned an undergraduate degree in kinesiology, and nursing was always an option she considered. She became interested in oncology after one grandfather died of leukemia and the other died of esophageal cancer. One of her grandmothers died of ovarian cancer. She started in Duke’s ABSN program in Fall 2012.

“I’m interested in pediatric oncology but am open to a lot of things,” Gonzales said. “In this program you’re thrown into a lot of different situations. I’ve thought about emergency room medicine or becoming a nurse anesthetist. There are just so many broad categories I can go into.”
or the first few minutes, the Managing Acute and Chronic Health Problems class looks pretty much like any other. Forty-five students sit behind long curved tables in the amphitheater-style classroom in the Pearson Building, while the professor, Alison Edie, DNP, RN, FNP, stands in the front of the class, going over some announcements.

But before long, you notice something a little different. Edie doesn’t give a lecture, and although she has invited two guest faculty members—Ann Mosher, MPH, FNP-BC, and Les Harmon, MSN’97, DNP’12, RN, ANP-BC, AAHIVS—to lead parts of the two-hour session, neither of them delivers anything remotely like a lecture either.

To be precise, neither of them delivers a lecture during the class. In fact, the students have all seen a lecture by each of them—but online, before class. They’ve also taken a quiz testing their understanding of the concepts presented in those recorded lectures—but again, they did that and turned it in before class, too, not after it.

**WELCOME TO THE “FLIPPED” CLASSROOM.**

Edie is one of several professors in the School of Nursing experimenting with the flipped classroom model, which also is being used, in various incarnations, by dozens of professors throughout the wider university.

In a flipped classroom, rather than lecturing to students in class and then testing them, the instructor gives them the same information by way of online lecture or readings or some combination, prior to class time. Often they take an online quiz, also prior to class. Then, in the classroom, the students do activities designed to help them put into practice the concepts they learned before they arrived.

In this particular session, Mosher and Harmon presented a series of case studies, with symptoms and family histories, and the students, working in small groups, had

**BY DAVE HART**
to determine what questions to ask, come up with the most likely diagnoses, and formulate treatment plans.

“What we do in class is what really gets them ready to do it out there, in their clinical work,” Edie says. “You need some core concepts, definitely. You have to have a strong foundation of knowledge. But how do they get that content? Does it have to be me standing in front them with a Powerpoint and telling them? If I spend two hours in class doing that, we don’t have time for any of those activities you saw, the activities that require them to do the work of reasoning their way to answers.”

ACTIVE LEARNING
Flipping isn’t really a new concept; individual instructors in various disciplines have used variations of it for years. What is relatively new is identifying it as a specific educational model based on some basic principles, and using it in areas that have traditionally relied far more heavily on the classic lecture method.

“Some people have been doing it all along,” Edie says. “In a lot of liberal arts classes, students read the material first and then come to class and discuss it; you don’t necessarily have professors who stand in front of the class and lecture about it. But what is unique, maybe, is using it in the hard science courses, where students have long felt they have to be verbally lectured to in order to get the content.”

At Duke, where flipping is one of a number of innovative educational approaches, much of the impetus came from a series of workshops and programs conducted last year by the Center for Instructional Technology. Many of the professors who have embraced the concept combine it with another fast-growing educational practice known as Team-Based Learning, which emphasizes students collaborating in groups to solve problems.

Proponents say the new approach benefits students by giving them a more active role in their own learning. Under the lecture model, a professor might describe how he or she solved a particular problem, Edie says. The flipped approach, by contrast, requires students to solve the problems themselves. Rather than being passive recipients of information, they come into class prepared—they hope—to do their own critical thinking.

“I’m trying to help them develop the reasoning process so they can think, ‘OK, how am I going to figure this out? What are my questions, what are my resources?’” she says. “Because that’s the thought process you have to have when you get into the clinic.”

The flipped model allows faculty to play a more engaged role, too.

“This puts students at the center of learning, rather than faculty,” says Sharon Hawks, DNP’10, CRNA, who began using the flipped model in the fall of 2012. “I don’t use class time lecturing. I use it to be a guide and a resource, to answer questions, to help them learn to make their own judgments. That’s the true value of faculty. So they’re getting the best of me. We’re learning together. They’re teaching each other.”

Hawks said her experience thus far has been that the flipped model opens up new avenues of understanding for both students and teacher. The pre-class quizzes, for example, reveal where gaps in understanding lie, and those gaps can be addressed immediately.

“It’s important for students to know what they don’t know,” she says. “This way I can give them immediate feedback on that, and we can work it out. It encourages discussion, and a much higher level of discussion. It’s fun, and I think we’re all learning more.”

CRITICS AND CONVERTS
Flipping a classroom is not easy. It requires a substantial investment of work by both faculty and students ahead of time.

“It takes a tremendous amount of time, preparation, and energy,” Edie says. “It hasn’t decreased my workload at all. And it really requires students to do the preparatory work. They can’t slide by.”

Edie didn’t announce on the first day of her Managing Acute and Chronic Health Problems class that she was flipping it; she didn’t want the students to feel like guinea pigs. She simply spelled out how things were going to work and told the students how she expected the unusual format to help them learn the process of clinical reasoning.

They did not all buy into the idea, at least not at first.

“I was one of the biggest critics,” says NP student Ryan Ress. “This was something I’d never been exposed to, and yes, there
was a little anxiety. But I actually really enjoy it. It helps that we can get the information in a formal lecture at home, and then we come in here and piece it together."

The flipped classroom is indeed a different way of teaching and learning, and it’s not necessarily well suited to all subjects and all classes. Edie acknowledges that some students still aren’t thrilled with it. But she believes it will help them when they begin their clinical work.

“They’re nervous, because they’re getting ready to go out and see a patient, listen to their story and try to decide what’s wrong and how to treat it,” Edie says. “That’s when they want the comfort of a classroom that says, ‘OK, I’m going to tell you everything you need to know. Write it down, and you will know what to do.’ And it just doesn’t work that way. That’s not the reality.”

Even those students who have had some difficulty adjusting to the flipped model say they’ve found it a valuable learning tool. FNP student Neha Desai said adjusting to her first flipped classroom was a significant challenge, especially considering her experience under the classical lecture model growing up in India.

“I like it,” Desai says. “I don’t love it. And I think the reason I don’t love it is because it’s so new to me. I’ve had most of my education in India, where students were expected to listen and never speak. To go from that to this, where I’m thinking, ‘Wait, you’re not going to talk at all? I’m going to do the talking?’ was uncomfortable at first. But I do think this way is more practical. It’s a lot more work, but you’re thinking more. Of course things make sense when someone is saying them. But it’s when you say it yourself that it really clicks in.”

That is precisely the point, Hawks says. She said student responses to a post-course evaluation after her first flipped class in the fall 2012 semester indicated that her students had learned at least as much as they would have in a traditional classroom environment. Moreover, they appreciated learning to reason their way to solutions themselves, which may be the most important lesson of all. In the operating room, there is no lecturer to give students the correct answer.

“Several of them said, ‘I had to teach myself,’” Hawks says. “I loved that answer. Because that is what adult learning is all about.”

◆
Eliminating health inequalities that result in premature deaths and illnesses could save more than $1 trillion, said Former Surgeon General David Satcher, MD, PhD, during the 6th Annual Global Health Lecture at Duke University School of Nursing.

Citing a study that explored the costs of health inequalities, Satcher said that health disparities cost the United States $1.24 trillion a year. In his presentation, “Defining the Path to Global Health Equity,” Satcher discussed policies and current health issues facing society, including access to mental health, disease prevention, and even the current debates restricting sugary beverages.

More than 300 people attended the keynote lecture held at the School of Nursing, and Satcher’s lecture was webcast live for local and national viewers. The speech can be watched in its entirety at [tinyurl.com/Satcher](http://tinyurl.com/Satcher).

Satcher is currently the director of the Satcher Health Leadership Institute at the Morehouse School of Medicine in Atlanta, Ga. In 1998, he was sworn in as the 16th surgeon general of the United States. He also served as assistant secretary for health in the Department of Health and Human Services from February 1998 to January 2001, making him only the second person in history to have held both positions simultaneously.

During his speech, Satcher encouraged collaboration between policy and science leaders. As an example of what can happen when these leaders don’t work together, he cited a policy that mandated physical education in schools where students receive free meals. While the policy was adopted, the schools were unable to implement the classes because they did not have the funds to hire the teachers they needed.

“We have policies that are not consistent with the science and research we do,” he said. “And then we have practices that are not consistent with the policies. How do we get the right policies in place, and how do we get those policies implemented?”

Satcher challenged the audience to see that changes often take a long time and that many people do not value science as highly as they do.

“For some, deeply held beliefs are much more important than science and what they have been taught since childhood is more important than science,” he said. “Now, you can throw your hands in the air in frustration, but persistence is the key.”

During his visit to Duke, Satcher also attended a special luncheon with 10 students from the schools of medicine and nursing and Trinity College. The students were the chosen winners of an essay competition on “Making the Elimination of Health Disparities a Personal Priority.” An essay written by ABSN student Catherine Pheasant was among those chosen.

The luncheon gave the student essay winners a unique opportunity to personally talk with the former surgeon general about eliminating global health disparities.

**Satcher Delivers Global Health Lecture**

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Harriet Cook Carter Speaker Calls for Greater Focus on Veterans’ Health Care

Linda Schwartz, DrPH, MSN, RN, a Vietnam War veteran and an advocate for veterans and their families, spoke during the 50th annual Harriet Cook Carter Lecture in February, at Duke University School of Nursing.

Schwartz served as a nurse during the war and is now head of the Department of Veterans Affairs in Connecticut as well as an advisor to the U.S. Department of Veterans Affairs. Speaking to an audience of students, health care professionals, faculty, and staff, Schwartz said less than 20 percent of all veterans use the services of Veterans Affairs medical facilities or clinics, and health care professionals need to start identifying veterans among their patients.

“The question every health care provider needs to ask is ‘Did you serve in the military?’ and then help connect them to the services they need,” Schwartz said.

The issues affecting veterans also impact their families; Schwartz mentioned that one million children have had at least one parent deployed for active duty. Schwartz asked the audience how many of them have had family members deployed more than once. Several hands stayed in the air as she asked whose family members had been deployed twice, three times, or even as many as five times.

“We are still trying to understand the effect of multiple deployments and how it influences the family,” she said. “This is a game-changing moment in health care for veterans in the U.S. You are going to be the first line of identifying who are these folks, what are their needs and the needs of their families.”

Schwartz also said veterans want their providers to give honest answers and simply stated facts. She encouraged them to leave politics at the door—don’t judge, don’t let pity or anger influence interactions—and tap into the veteran’s inherent strengths.

“These are people who are survivors of a hostile atmosphere, and they have qualities that you want to build on, where they can learn how to help themselves,” she said.
Eleanor “Ellie” Schildwachter McConnell, BSN’76, MSN’78, PhD, RN, GCNS-BC

Eleanor McConnell may not have realized it at the time, but her sister’s efforts to push her to learn to read and write at age 3 instilled some valuable lessons that were much greater than the simple words young Ellie managed to scribble on the girls’ blackboard. Those early teachings lay the groundwork for a lifelong love of learning and have since served as a constant reminder that you can’t go it alone when it comes to succeeding in life.

“No one does anything of substance without support,” McConnell. “The awards and the support allow you to continue to push forward.”

An associate professor at the School of Nursing, McConnell has focused her career on advancing the care of the aged, in particular, conducting research aimed at solving some of the complex health problems presented by a rapidly aging population.

McConnell is a senior fellow with the Duke Center for the Study of Aging and Human Development and a clinical nurse researcher and core investigator in the Geriatric Research, Education, and Clinical Center at the Durham Veterans Affairs Medical Center. She also directs the Duke Center of Excellence in Geriatric Nursing and serves as co-director of the Duke Geriatric Education Center.

She first joined Duke in 1988 after having held several faculty positions at the University of North Carolina at Chapel Hill. Prior to that, she was director of nursing at Carol Woods Retirement Community in Chapel Hill.

Her academic interests include frailty in the elderly, the role of the physical and caregiving environment in promoting function, and implementation science. Her currently funded work focuses on factors that influence the implementation of evidence-based interventions to prevent functional decline in very frail older adults, with a particular interest in improving care for older adults who have cognitive impairment.

She is a co-investigator on a randomized trial testing two different educational approaches to implementing evidence-based falls prevention in long-term care, funded by the Department of Veterans Affairs (VA) Health Services Research and Development Service and the National Institutes of Health. She served as co-chair of the VA’s Dementia Warning Signs Workgroup and currently serves as principal co-chair of the VA’s Dementia Education and Training Committee.

In 2008, McConnell was named a distinguished practitioner in the National Academies of Practice and received the Ewald Busse Award from the North Carolina Division of Aging and Adult Services for her contributions to shaping aging policy in the state. In 2010, she was named a Fulbright Senior Specialist to consult with faculty at the University of West Indies, Mona, on the development of advanced practice nursing programs in geriatrics. In addition to her scientific publications, McConnell co-edited the pioneering and internationally recognized textbook, *Matteson & McConnell’s Gerontological Nursing: Concepts and Practice*, now in its third edition.

McConnell earned a BSN degree and an MSN degree from Duke and a PhD in nursing from UNC-Chapel Hill.
Barbara Brod Germino, BSN’63, MSN’68, PhD, RN, FAAN

Early in her nursing career, Barbara Germino witnessed many patients and their families struggling to cope with a cancer diagnosis. She says at the time “we knew very little about the experiences of survivorship and how people dealt with it.” These experiences had a lasting impact on her research career and put her on a path to spend decades investigating ways to better help nurses guide cancer patients and their loved ones through some of life’s most difficult and uncertain moments.

“Cancer has a major impact on individuals, families, and the community,” she says.

Currently research professor in the School of Nursing at the University of North Carolina at Chapel Hill, Germino has focused her research on the impact of cancer on patients and their families from diagnosis to survivorship and into the final phases of life.

Over the years, she has collaborated with other UNC nursing faculty members and multidisciplinary teams of researchers from nursing, psychology, social work, statistics, and economics. With Merle Mishel, PhD, RN, FAAN, Kenan Professor at UNC-Chapel Hill, their team conducted clinical trials of psycho-educational nursing interventions designed to manage the uncertainties that are part of the cancer trajectory for patients and families and received ongoing federal funding for their work from 1993-2010. These theory-based interventions were designed to help manage uncertainty and improve knowledge, coping, and various aspects of quality of life for patients newly diagnosed with breast and prostate cancer, patients and partners making initial cancer treatment decisions, and long-term survivors of breast cancer.

In an early study with Sandra Funk, PhD, a professor at UNC-Chapel Hill, their team interviewed families of newly diagnosed cancer patients in their homes, and found that many of the families’ concerns centered on managing the illness and its effects and the struggle to find meaning during the chaos of dealing with cancer.

Germino continues to publish work with her UNC colleagues. Their most recent project involves the translation of an uncertainty management intervention for younger African American and Caucasian breast cancer survivors into a web-based format for distribution to a national survivor organization.

Early in her career, Germino was an instructor and assistant professor at Duke University School of Nursing and spent three years as an assistant professor at UNC. She also held appointments at Kodiak Island Hospital in Alaska, the University of South Florida in Tampa, and the University of Washington in Seattle. After earning a PhD, she returned to UNC as an associate professor and later became a professor. In 1984, she was named the Carol Ann Beerstecher-Blackwell Endowed Chair of Thanatology in UNC’s School of Nursing, a position she held until her retirement in 2006.

Germino was one of a group of faculty who planned and implemented the PhD program at UNC, and she has served on 33 master’s and 26 doctoral degree committees, chairing 11 doctoral dissertations before retiring from teaching.

She received both BSN and MSN degrees from Duke and a PhD in nursing science from the University of Washington in Seattle.

“Cancer has a major impact on individuals, families, and the community,”

- Germino
When Ginny Lang first became a volunteer at the Nearly New Shoppe in 1983, she was more than happy to help ring up customers or sort donated items for Duke University Medical Center’s well-known thrift shop. But anything beyond that hadn’t crossed her mind. “I had no aspirations to be in charge of anything,” she says.

Fast-forward to three decades later, and not only is Lang in charge of the Nearly New Shoppe, but her advocacy of the shop and the fundraising group that oversees it has played a pivotal role in helping numerous Duke nursing and medical students finance their educations.

Lang is the current president of the Medical Faculty Wives, which has served both the Duke and Durham communities for the past 45 years. Founded in 1968 by 18 wives of School of Medicine department chairs, the Medical Faculty Wives group raises funds for student scholarships, primarily through its flagship fundraiser, the Nearly New Shoppe.

Although Lang first volunteered for the Nearly New Shoppe in 1983, she had learned of the organization’s importance to the medical community at Duke long before, having graduated from the School of Nursing only a year before the group was founded. Remembering Ethel Wyngaarden Teer and the other “founding moms” of the Medical Faculty Wives group and their devotion to student scholarships and the Durham community, Lang did not hesitate to take on a larger role when the group asked her to become its chairman in 1990 and president in 2010.

Today as president, Lang oversees the day-to-day operations of the shop and manages three and a half paid staff and 75 to 100 volunteers. She herself volunteers two days a week, collecting money and helping customers, many of whom she knows by name.

The shop reached a milestone in 2012, breaking the $1 million mark in scholarships awarded to Duke medical students in a single year. The scholarship fund balance is now more than $4 million with a market value of nearly $14 million. Each year, the Medical Faculty Wives Scholarship Fund generates from $750,000 to $1 million for medical student scholarships.

Lang credits the efforts of the staff, volunteers, and the local community for the success in raising these funds and playing a major role in keeping student debt at Duke below the national average.

In recent years, the Medical Faculty Wives created a scholarship fund for the School of Nursing, to which they have donated an additional $428,000.

Lang’s commitment to Duke started immediately after earning her degree. She served in leadership positions for the School of Nursing’s alumni association and continued to serve in such roles throughout the 1970s and into the early 1980s. Notably, she oversaw the association as the School of Nursing underwent a major transition when it ended its bachelor’s degree in nursing program in the 1980s.

In addition to the schools of medicine and nursing and the Nearly New Shoppe, Lang also dedicated many years as a volunteer for Durham Academy and the Ronald McDonald House of Durham.

After earning a BSN degree from Duke in 1967, Lang spent the early part of her career working part-time as a family planning nurse in the obstetrics and gynecology clinic at Duke University Hospital.
Not long after taking on the role of Duke University Hospital’s first director of nursing in the early 1980s, Mary Ann Peter asked her husband, a Duke cardiologist, for suggestions on how best to orient new medical interns. His advice: “Tell them nurses run the place.” She says, at the time, “we both laughed, but I think (the interns) found it was true.”

Now retired, Peter spent the majority of her career at Duke, where she not only influenced interns but also left a lasting mark on patients and the nurses who care for them.

Peter worked in nursing at Duke University Hospital for 24 years, first as a rehabilitation clinical specialist and then as a nursing administrator. Highlights of her administrative roles at Duke include leading the development of the pioneering Quality Assurance Program in Nursing from 1974-1978, which is believed to be the first of its kind in the United States. As a result of her work in quality assurance, Peter co-authored with more than 350 Duke nurses the nationally recognized book, *Guidelines for Nursing Care*, which was translated into Japanese.

In 1978, as preparations were being made for the 1980 opening of Duke North Hospital, Peter became the hospital’s first director of nursing. In 1988, she played a role in the establishment of the Friends of Nursing program. Her encounter with a grateful patient led the patient’s family and a group of Duke nurses to fund the program. The Friends of Nursing, which serves to recognize and honor nurses for their excellence in practice and to provide stipends and lectureship programs for staff development, is now celebrating its 25th year. In 1991, a Friends of Nursing award was named in Peter’s honor, annually recognizing a nurse’s work at the Duke Heart Center.

While proud of her achievements, Peter is quick to point out that much like the process of writing *Guidelines for Nursing Care*, it has taken a great deal of support from numerous colleagues, family, and others to accomplish her goals. “On my epitaph I want it to say, ‘She knew good people,’” she says.

In 1992, Peter received a PhD in education from the University of North Carolina at Chapel Hill, which led to a faculty position in the UNC School of Nursing graduate program.

After her retirement in 2004, she increased her commitment to the community in Durham and Orange counties, serving in leadership roles on numerous boards and committees. Peter’s work with Durham Technical Community College included serving as vice chair of its board of trustees from 1991-2004 and as chair from 2004-2012. She currently is co-chair of the Duke Friends of Nursing advisory committee. Other organizations in which she has held leadership roles include the N.C. Heart Association, Orange County Nursing Homes, the Orange County Department on Aging, and Orange County Senior Care. She also has served on three boards dedicated to historic preservation.

In addition to a PhD from UNC, Peter holds BSN and MSN degrees from Duke University School of Nursing.
Back in 2004, Sharron Docherty, PhD, RN, CPNP-AC/PC received her first National Institutes of Health (NIH) research grant, a Research Enhancement Award, intended to stimulate research in schools that provide baccalaureate or advanced degrees but that haven’t been major recipients of NIH support. The grant required that student involvement be written in from the outset, and the thought of mentoring a student while conducting her own research seemed daunting, says Docherty, associate professor of nursing. “Having to be responsible for someone else’s goals, when I was a novice researcher, that seemed like a juggling act,” she says.

But Docherty found that she liked working with students. In fact, a master’s student who worked on that first project ended up becoming a paid research assistant after she met her coursework research requirement. Now Docherty can’t imagine conducting research without students. “They bring a fresh perspective,” she says. “By the time the grant starts, you are so familiar with it that you get such tunnel vision. Then a student will come in with fresh eyes and ask a question, and you’ll say, ‘Well, why did we do it that way?’ You’ll see things that you didn’t see before.”

Currently Docherty works with six students on a four-site, NIH-funded study; she is the investigator for the Duke site. The overall principal investigator is Marilyn Hockenberry, PhD, RN, PNP-BC, FAAN, professor of nursing. In children undergoing leukemia treatment, the project tracks and measures common side effects of chemotherapy, using simple questionnaires, and looks for immune-system markers and genetic variants that may be more prevalent in children who experience the most severe symptoms. “Now that 90 percent of children with leukemia survive with treatment, we can focus on targeting the most toxic therapy to those with high-risk disease and lowering the toxicity of the therapy for the others. We want to limit their symptom distress and help to ensure that they come out the other end of treatment still thriving,” Docherty says.

The researchers aim to enroll 60 children at the Duke site. With half of those children, Docherty will conduct qualitative interviews to find out how they perceive their symptoms. “Their perception of the symptom experience will help us understand the quantitative data,” Docherty says. “One of the things we know about kids with cancer from our previous studies is you can have two kids with similar levels of symptoms, but when you talk to them about the challenges it brings to their life, they will have very different experiences.”

Megan Winkler, a first-year student in the Duke Nursing PhD program who works on the project, welcomes the chance to learn about all the moving parts of a large, multi-site study. “My personal nursing career has been much more clinical based, so I haven’t had the chance to participate in research,” she says. Winkler discovered she was interested in research while an undergraduate at Indiana University “I had a couple of research classes that I loved, and the rest of my classmates really didn’t,” she says. “That’s when I started realizing I’m a little different than other people.”

After becoming a pediatric nurse practitioner and teaching in a BSN program, Winkler is beginning to write a grant proposal for her own future research project. She plans to examine how interactions between mothers and daughters affect obesity rates in African American girls, a population that has been understudied, she says. When she conducted a literature review of studies...
Research coordinator Angel Barnes works with children participating in a study about side effects of chemotherapy. Students shadowing her learn about all the issues that can arise during a large research study.
looking at factors that lead to obesity for African-American girls, only nine articles used that population as the primary sample. “Everything else had them embedded in these larger samples, and not everyone used the same measures. So these girls are kind of hidden from view, but they’re the group with the most prevalent obesity,” she says.

Other students working on Hockenberry’s and Docherty’s project include ABSN student Beth Kelley. She joined the project to get experience in data collection and qualitative interviewing. “I’d been exposed to research when I got my master’s degree in rehabilitation counseling, but it was mostly doing literature reviews or synthesizing research results once someone had already collected the data,” she says. When Kelley approached Docherty about working on the project, she was surprised at Docherty’s interest in her individual needs. “I expected to be handed a list and told these are the things I need you to do. But when I walked into her office, the first thing she said to me was ‘What are your goals? It’s been great to work with her,” Kelley says. She also relishes the chance to work with an established researcher such as Hockenberry. “For me, being new to the field of nursing, and working with someone like Marilyn Hockenberry, who wrote our pediatric textbook, it’s just mind-blowing.”

Colleen McLaughlin is a pediatric nurse practitioner who has worked for seven years with clinical trials in Duke’s pediatric blood and bone marrow transplantation program. She’s earning a doctor of nursing practice (DNP) degree online while working full time and welcomes the chance to learn as much as she can about conducting research. She works on the Hockenberry/Docherty project to earn credit for a research elective. “It is an opportunity to see how a multi-site study works, and all the complexities that go with it,” she says.

The students have received training in qualitative interviewing from Docherty so they can assist with that as enrollment increases. Another valuable experience, they say, has been shadowing research coordinator Angel Barnes, MA, as she works out all the issues that arise when conducting a large, multi-site study. When you’re shipping cerebrospinal fluid (CSF) samples to another state for genomic sequencing, how do you ensure you don’t lose all your samples if there’s a shipping error? How do differences in run time and equipment affect the CSF samples? “On paper, it looks simple: we collected CSF samples. But the first time, it took us more than an hour to run one sample through the centrifuge and prepare it for shipping,” Winkler says. “We are getting a glimpse into the ‘how-to.’”

As a side activity, Winkler is working with Hockenberry on a paper analyzing the body mass indexes of children with leukemia over time, using a database from one of Hockenberry’s other studies. “That paper will combine her studies on leukemia in children with my interest in childhood obesity,” Winkler says. “That’s one of the great things about the faculty here—they really do want to help you meet your personal goals, while still having help with their projects.”

None of this may have happened for Winkler if she hadn’t had that first exposure to research as an undergraduate. That’s why the School of Nursing makes it a priority for students of all levels to get research experience. “We just don’t have enough nurses interested in doing research,” Winkler says. “It’s so important that at our entry-level degree, we’re getting really good exposure to research to see what we could do, if we wanted to do it.”
1940s

Katie Adams Hodge, BSN’43, RN, was honored with the 2013 Lifetime Achievement Award of the Spartanburg, S.C., Regional Foundation. The award was presented on April 6, a day that was also proclaimed Katie Hodge Day by Spartanburg Mayor Junie White. Hodge, who has been called a “stick of dynamite” and a “force of nature” for her fundraising and communication abilities, is an emeritus member of the foundation. She served as the first executive director of the foundation, was on the board of trustees, and was the first female board chair. She was instrumental in raising $3.3 million for the Walter and Rose Montgomery tower at Spartanburg Regional Hospital, $2 million for the Gibbs Cancer Center, and $6 million for the Hospice House. Hodge, who is also an artist, taught nursing at Duke University School of Nursing for five years. She met her late husband, G. Byron Hodge, MD, HS’47, at Duke, and they were married in Duke Chapel. They moved to Spartanburg in 1948 and had three children, G. Byron Hodge, Jr., MD’78, John Adams Hodge, T’77, P’12, and Susan Hodge Irwin, B’83. Katie has three grandchildren, including one Duke alumnus, John Adams Hodge II, E’12.

1950s

Edith Moore Nichols, N’55, recently moved into a retirement facility in La Mesa, Calif., where she is enjoying a variety of activities, including Wii bowling and bus trips to interesting places. She was a public health nurse and school nurse for 25 years. Her husband Paul F. Nichols, PhD’58, passed away last summer. She has two sons and two grandchildren.

Nancy Van Metre Boozer, BSN’58, retired from nursing in 1996 and now works in a hospital setting practicing Reiki with patients and student nurses. She also practices reflexology, biofeedback, Psych-K, and matrix energetics. She lives in Towson, Md.

Edna Quinn, N’58, BSN’60, is retired and living in Portland, Maine, but she still provides care and support for family and friends with health problems. Her husband Thomas L. Erskine passed away in 2011. She has two sons and nine grandchildren.

1960s

Cynthia Kreider Bowyer, BSN’63, of Montville, N.J., is a retired primary care nurse practitioner. She is traveling, painting watercolors, enjoying her grandchildren, and loving leisure.

Carole Frey LeBar, BSN’63, MSN’69, continues working part time in her psychotherapy practice. Her husband John A. LeBar, EdD, recently retired from Duke as an associate professor in the Department of Health, Physical Education, and Recreation. They have four children and several grandchildren and live in Durham.

1970s

Barbara Curtis Davis, BSN’73, MSN’90, of Rio Grande, N.J., married Thomas Peacock on October 15, 2011. She is retired from her position as clinical educator at Crest Haven Rehabilitation and Nursing Center and is enjoying married life, traveling, and relaxing.

Anne Armstrong Griffin, BSN’73, said she still loves being a full-time nurse after practicing for 40 years in a variety of positions. She currently works in a small community hospital in rural Pennsylvania, mainly in the emergency room, but also in the newborn nursery. She and her husband Duane have two children—a high school junior and a college junior. She stays active outside of nursing by kayaking, going to the gym, and walking her dog. They live in Lewisburg, Pa.

Sindy Wiley McCrystle, BSN’73, is a clinical assistant professor at UNC School of Medicine in the program based in Charlotte. She teaches geriatrics, home care, palliative care, and health systems integration. She also is the director of the Division of Aging for the Carolinas Health Care System. In 2008, she was elected to the Academy of Educators at the UNC School of Medicine and remains the only nurse practitioner inducted into the academy. She and her husband Tom have two children and live in Charlotte.

Christine Zahnisser, BSN’73, retired from public health service in 2001 after 22 years as a nurse epidemiologist at the U.S. Centers for Disease Control and Prevention (CDC). She has worked as a consultant at the CDC for the past 12 years, most recently on an international training project focused on maternal mortality and reproductive health for sub-Saharan Africa. She will try...
Death Brings New Light to Life

by Nicholas L. Robbins, ABSN’09, RN, CCRN

At some point in our lives we all search for something more. For me, I am in constant search of adventure, knowledge, experience, and opportunity. That search led me to an international volunteer trip from which I have just returned. I spent the first two weeks of March 2013 with Floating Doctors, a medical non-profit organization in Bocas del Toro, Panama. Since its inception in 2009, Floating Doctors’ vision has always been different than that of many other tropical non-profit medical relief groups. Their goal is not only to provide immediate health care but more importantly to make sustainable change. In doing so, the organization is committed to supporting these communities in many capacities other than just health care. Their vision is much like mine: create a lasting effect. I have never wanted to look back on my life and know I missed an opportunity to create a lasting memory.

Shortly after I arrived in Panama, it came to the attention of the Floating Doctors that two residents of the local “Asilo” (a community home for the elderly and ill), had died a week earlier. Due to recent governmental budget cuts, their bodies had remained in the local hospital’s morgue. It quickly became clear that our group needed to help. Within hours, the group started building caskets, and I volunteered to help prepare the deceased’s bodies for a funeral.

On this tropical morning, the warmth of the air was as comforting as the embrace from a loved one. But as I walked into the frigid morgue, a coldness struck deep in my gut. I told myself that I had done this countless times before, and this should be no different. As a nurse, early in my career I learned to adjust to a different role each time I worked with a different patient. Often I have to extend beyond my comfort zone, placing my emotions to the side, to achieve the outcomes that are in the best interest of the patient. In my experience, working with a patient who is dying or the family of a recently deceased patient may be the most intimate and unique experience we will ever have, not only as nurses, but as human beings. The emotions are intense enough that we often use a euphemism to discuss death, to create a more comfortable environment.

But, this time was different. I had never worked with a person who had died ten days prior. With a fellow nurse from Texas, a Physician’s Assistant from Santa Fe, and a medical student from London at my side, we gently washed the bone-chilled bodies. I found myself searching to create a mental “euphemism” to protect my emotions from experiencing the reality. However, despite the attempt, all of my experiences with death began flooding my mind. I continued to remind myself that this was one of those “out of your comfort zone” experiences, yet I struggled to contain the tears that had been welling in my eyes. Despite my effort to create
my protecting euphemism, there was no escaping the reality; death is and will always remain, death. I found myself lost in trying to deal with an emotion I had never experienced before and one I do not believe I will ever be able to put into words.

Since I have returned from my trip, I have spent time trying to understand that emotion and have finally realized that it is not supposed to be understood but represents a glimpse of the larger picture of life. It was meant to remind me that there is a world beyond the intensive care unit walls where I work day in and day out. This world holds lessons that can only be found through interacting with them. The emotions we feel when we allow our courage to push the limits is precisely what creates the memories. Those emotions are what motivate my search for more adventure, deeper knowledge, further experience, and larger opportunity. My trip with Floating Doctors and the interaction I experienced with death achieved everything I needed to remind myself of the larger picture and certainly to create a lasting memory.

Death shed a new perspective about life I had not understood until now. It is our responsibility as nurses and people to reach for things you never knew you wanted or needed. The world is filled with opportunities to experience something new. To quote Matt Damon in the movie We Bought a Zoo, “Sometimes all you need is twenty seconds of insane courage...and I promise you, something great will come of it.”

For the last few months of 2012, a 125-pound cow painted half Duke blue and half Carolina blue grazed just outside Tobacco Road restaurant in downtown Durham. For that, thank Hilary Gibbons, ABSN’09, MSN’12—at least partially. A nurse practitioner at UNC Lineberger Comprehensive Cancer Center by day, Gibbons likes to draw and paint for fun in her spare time. So of course she said yes when her good friend JoAnne Goodwyn asked her to help paint a cow.

The cow was one of 79 designed by amateur and professional artists and positioned around public spaces in Raleigh, Durham, and Chapel Hill, N.C. as part of North Carolina CowParade 2012, which was both a public art event and a fundraiser for North Carolina Children’s Hospital.

Goodwyn and Gibbons were asked to work with the theme, “Which Shade of Blue are You?” That’s the slogan that the cow’s sponsor, Keystone Bank (now Bank of North Carolina) uses for their Blue Savings Account, which they use to raise money for the children’s hospitals at both Duke and UNC. So a cow showcasing the Duke-Carolina rivalry seemed a natural. Gibbons painted the Duke side, and Goodwyn was in charge of the UNC side. “She’s a huge Carolina fan, and I’m a Duke fan,” Gibbons says. The two sides of the cow were divided by a depiction of Tobacco Road.

To complete their cow, the friends spent about six weeks painting for a couple of hours almost every evening after work. “We’re good friends, so it was good company, and both of us love to paint,” Gibbons says.

About 60 of the cows were auctioned off after their extended parade. Goodwyn’s and Gibbons’ cow sold for $5,500. Befitting their theme, the proceeds were split between North Carolina Children’s Hospital and Duke Children’s Hospital. “Our cow was the only one that benefited both hospitals,” Gibbons says.

– ANGELA SPIVEY

Hilary Gibbons and a friend painted this cow as a part of a public art exhibit, raising $5,500 for the children’s hospitals at both Duke and UNC.
retirement again this fall and looks forward to reconnecting with Duke classmates, having time for travel and new adventures, and improving her photography. Zahniser participated in the Duke alumni mission trip to Haiti in May 2012, which she says was a fascinating experience. She lives in Atlanta, Ga., with her husband, David Word, E’72, and 16-year-old daughter Kate. Her son, Jake Zahniser-Word, T’10, lives and works in Washington, D.C.

Phoebe Edwards Bacon, BSN’74, serves sick children and their families in her capacity as librarian for the Children’s and Family Resource Library at Johns Hopkins Hospital in Baltimore, Md. Over the span of 15 years in nursing, she earned a BA and an MA in political science. She left nursing in 1992, earned an MLS and served as a teacher and librarian for 19 years.

Nancy Lee Anderson Moore, BSN’77, lives in Charlottesville, Va., where she is an elementary school nurse. She and her husband, Richard E. “Rick” Moore, T’77, a juvenile and domestic relations district court judge, have two grown daughters. One served in the Peace Corps in Africa (Cameroon) after college and is now finishing graduate school in forestry, and the other served in AmeriCorps after college and is now pursuing a nursing degree.

Nancy Ann Koch Schmid, BSN’78, recently accepted the associate director of patient care services/nurse executive role at the Coatesville Veterans Affairs Medical Center in Coatesville, Pa. She has worked for the Department of Veterans Affairs for 33 years and has accepted several assignments at various VA medical centers in the Northeast. She is currently looking for housing in the Philadelphia area and would love to connect with classmates who are located there. Her husband, Bob Schmid, E’77, is still working in the Syracuse, N.Y., area and hopes to find employment in the Philadelphia area soon. Contact Nancy at Nancy.Schmid@va.gov.

Cynthia Church Wark, BSN’79, started her own business, Healthcare Information Consulting LLC, in Chester, Md., after retiring from federal service as a nurse officer in the U.S. Public Health Service and then working in the private sector. Last year, she completed several events, including a triathlon, 65-mile bicycle ride, and a half-marathon. She also plays cribbage and has competed in several tournaments.

Catherine Parsons Emmett, BSN’81, received her PhD in aging studies from the University of South Florida in December 2012. She works at Suncoast Hospice in Pinellas County, Fla.

Laura Hunger Kahn, BSN’83, of Philadelphia, Pa., enjoys a “hybrid health care career”—practicing nursing in an inpatient setting with women who have eating disorders and teaching healthy eating cooking classes to young families in an urban, inner-city setting. “It is very exciting to see Duke University School of Nursing excelling in the field of medicine in ways that are exceptional and top notch,” she writes.

Barbara Anne Vogelsang, MSN’94, passed the American Nurses Credentialing Center’s Nurse Executive-Advanced Board Certification Exam in
October 2012. She is the clinical services director of Perioperative and Maternal Child Health Services at the Kaiser Permanente San Francisco Medical Center in San Francisco, Calif.

2000s

Laurel Teutenberg Davison, MSN’00, has joined the University of Missouri-Columbia School of Medicine Department of Neurology as a nurse practitioner with the stroke team. The hospital is in pursuit of Comprehensive Stroke Center certification. Davison is also preparing to build a new house and is enjoying the company of her 3-year-old daughter.

Paige Raabe Gump, MSN’08, and her husband, William Gump, MD, HS’09, welcomed twins, Natalie Claire and Catherine Daphne, on Sept. 27, 2012. The family lives in Louisville, Ky.

Ruth Ramsey Fletcher, BSN’44, of Charlotte, N.C., died March 31, 2013. She was 92. Fletcher was an avid fan of Duke basketball and loved history and nature. For more than 50 years, she served in the music and children’s ministries at her church and sang in several church choirs including the choir at Duke Chapel. She is survived by three daughters, four grandchildren, and four great-grandchildren.

Frances Byrd Lovell, BSN’45, of Charlotte, N.C., died January 22, 2013. She was 89. Lovell met her husband, William “Bill” Figgatt Lovell, T’42, MD’45, at Duke. Over the years, while Bill practiced as an allergist, she worked as a mother and homemaker and was engaged in many volunteer activities. The couple also opened a dairy farm and later transitioned to growing strawberries, blackberries, and corn. Lovell was predeceased by her husband, son, and daughter. She is survived by four grandchildren and two great-grandchildren.

Lenna Schnoor Manry, N’49, of Redwood City, Calif., died December 30, 2012, after a long illness. She was 86. After graduating from Duke, Manry raised a family and worked as a supervising surgical nurse at Kaiser Hospital in Redwood City until retirement. She was preceded in death by her first husband, Dr. Ernest E. Schnoor. She is survived by her husband, Dr. Clayton H. Manry, a sister, two sons, and two grandsons.

Nell Perkins Bethany, BSN’50, of Tuscaloosa, Ala., died April 26, 2013. She was 85. She and Joe Bethany Jr., MD’52, were married in 1953. They then moved to Eutaw, Ala., in 1960 and remained there until moving to Tuscaloosa in 2003. She was a charter member of Capstone College of Nursing Board of Visitors. Bethany is survived by her husband Joe, three daughters, and seven grandchildren.

Susanne “Sue” Lynas Moulton, BSNEd’51, died November 19, 2012, at Croasdaile Village in Durham. She was 95. Early in her career, Moulton worked in New York City as a registered nurse at Bellevue Hospital and later as a public health nurse in Harlem. While taking classes at New York University, she collaborated on a series of research studies that later were used by Jonas Salk in his work on the development of the polio vaccine. She was commissioned as a second lieutenant in the U.S. Army Nurse Corps during World War II. She was predeceased by her husband of 67 years, John Moulton, who was CEO of Watts Hospital in Durham for many years. She is survived by four daughters, six granddaughters, five great-granddaughters, and two great-grandsons.

Rachel McCaskill Rogan, N’52, of Greeleyville, S.C., died at Agape Hospice House in Columbia on December 14, 2012. She was 82. Rogan worked for several years as a private-duty nurse at the old Kingstree Hospital and Clarendon Memorial Hospital in Manning. She later served as assistant director of the Williamsburg County School Health Program. After thirty years of service as a utilization/case management director, she retired from Clarendon Memorial Hospital. She was preceded in death by her husband, Thomas Stanislaw Rogan Jr. She is survived by three children, seven grandchildren, and three great-grandchildren.

Laura Gatewood Sudduth, N’53, of Newton, N.C., died April 12, 2013. She was 81. Sudduth was a registered nurse and supervisor of nursing at Winshow Hospital in Danville, Va., Danville Memorial Hospital, and Catawba Valley Medical Center. She is survived by three children, seven grandchildren, and six great-grandchildren.

Margarita Sherertz Messersmith, N’54, of Silver Spring, Md., died November 22, 2012. She was 81. She is survived by her husband, Donald H. Messersmith, four children, six granddaughters, five great-granddaughters, and six great-grandsons.

Ruby Gilbert Barnes, N’56, EdD, of Cary, N.C., died April 30, 2013. She was 94. Dr. Barnes’s 50-year career in nursing education included teaching at UNC-Chapel Hill, East Carolina University, and Atlantic Christian College. She developed the continuing education program at ECU School of Nursing and helped develop, teach, and direct the MSN program at UNC-Greensboro. In 1985, she retired as professor and director of the MSN
program at UNC-Greensboro and was later named a professor of nursing, emeritus. She was preceded in death by her husband of 19 years, William Norman Barnes Sr. She is survived by her sister, Grace McBryde; one stepson; two step-grandchildren; and seven step-great-grandchildren.

**Katherine “Katy” Keller Maultsby, BSN’57**, of Burlington, N.C., died March 27, 2013, after three years of declining health. She was 78. Maultsby taught nursing at Nash Technical Institute and Alamance Community College. She also enjoyed a 50-year nursing career in Albemarle, Rocky Mount, and Burlington, including working as assistant director of nursing at Alamance County Hospital. Following her retirement, she worked part time in student health at Elon University. She is survived by her husband of 56 years, Thomas N. Maultsby; four sons; a daughter; a brother; and 10 grandchildren.

**Susan Hunsche Heil, BSN’59**, of Spokane, Wash., died April 24, 2013. She was 75. Her career included working as a staff and surgical recovery nurse in Cincinnati, Ohio; New York, N.Y.; and Browns-Mills, N.J., and as a stay-at-home mother. She also worked in clinical research for 15 years. She was a three-time survivor of breast cancer. Heil is survived by her husband, Lt. Col. (Ret.) James R. Heil, two children, and two granddaughters.

**Alice Avett Haas, BSN’66**, died at her home in Rancho Cordova, Calif., on March 27, 2013, from cancer. She was 68. Haas spent most of her career with Kaiser Permanente, working as a neonatal intensive care nurse, an infection control coordinator, and a nurse recruiter. She is survived by her high school sweetheart and husband of 47 years, John Thompson Haas, three daughters, six grandchildren, and two brothers.

**Katharine Brooke Stebbins, BSN’75**, of Concord, N.H., died April 3, 2013. She was 59. Most of her career was spent working in the health care and early childhood field as a nurse, in public health for the state of New Hampshire, and for the Children’s Place in Concord. She also worked as a television reporter. Brooke is survived by two daughters, her mother, and three sisters.
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The School of Nursing celebrated the installation of the final steel beam of the 45,000-square-foot new wing of the Pearson Building on April 5, 2013. Before the ceremony, Dean Catherine Gilliss invited students, faculty, and staff to sign the beam and leave their mark on the new addition, slated for completion in February 2014. The $20.2 million building will help meet the needs of a growing faculty and student body.

Raising the Beam

Greg Warwick, AIA, chief architect, Duke University Health System; David Bowersox, MBA, associate dean, finance and administration, Duke University School of Nursing (DUSON); Dean Catherine Gilliss; and Mitchell Vann, CFM-LEED AP, director, facility operations, DUSON