

2022 Nursing Annual Report

4

Karyn Book
Chief Nursing Officer and VP Patient Care Services
Penn Medicine Princeton Health

5

James Demetriades
President and CEO
Penn Medicine Princeton Health

6

A History of Excellence



7

Nursing-Sensitive Indicators

8-12

Princeton Medical Center Earns Third ANCC Magnet Designation



13

Nurses Develop New Nursing Professional Practice Model

14

Princeton Health Launches Institute for Nursing Excellence

15

Meeting the Need for Psychiatric Mental Health Nurses



16

Transitional Care Unit (TCU) Developed to Improve Patient Throughput

18-19

Princeton Health Develops an Internal Surgical Tech Training Program

20

Princeton Medical Center Offers New Cardiac Services



21

Princeton Medical Center Earns New Accreditation for Hip Fractures

22

Acute Rehab Unit Conducts Plan-Do-Study-Act (PDSA) Project for Fall Prevention



24-25

Nurses Conduct Systematic Review for Best Practices for Gender-Diverse Patients

26

Nurses Focus on Employee Wellness



27-29

Succession Planning

- 27 Christine Trusiani, BSN, RN-BC
- 27 Stacy Horowitz, BSN, RN-BC, CARN
- 28 Shelby Semple, MSN, RN, C-EFM
- 28 Erica Norris, BSN, RN
- 29 Tracy Kapoor, MSN, RN
- 29 Megan Yellareddigari, BSN, RN, CCRN

2022 Nursing Annual Report

30

Penn Medicine Studies Impact of Virtual Learning on New Graduate Nurses



32-33

Interprofessional Team Conducts Aspiration Prevention Quality Improvement Project

34

Nursing Professional Development Council Presents Nursing Grand Rounds

36-37

Clinical
Advancement
& Recognition
of Excellence
(CARE)
Advancements



38-40

Princeton Health Nursing and Clinical Support Staff Excellence Awards

42-43

Penn Medicine Nursing Clinical Excellence Awards



44

DAISY Winners



45-47

Completed and Ongoing Research in 2022

49

Nursing Residents Degrees

49

New Degrees

50-51

New Certifications

52

Poster Presentations

53

Podium Presentations

53

Published Articles







Karyn Book

Chief Nursing Officer and VP Patient Care Services Penn Medicine Princeton Health

As I reflect on the past year, I am so proud to have been selected for the role of chief nursing officer. It is an honor and privilege to lead our nursing team.

Princeton Health nurses excel in many areas — from quality metrics to compassionate care, and beyond. Now that workflows in the hospital have returned to a "new normal," our nurses have been once again out on the global stage sharing their research and novel approaches to patient care.

This year in particular has offered an opportunity to refocus our efforts on teamwork and on the nurse's role as part of an interdisciplinary care team. The outstanding patient outcomes that we continue to achieve are proof that nurses play an important part in every step of care delivery.

The Emergency Department Redesign that was completed this year includes a Transitional Care Unit (TCU), which aligns with our goal of bringing care directly to the patient. This new unit supports our commitment to ensuring that every patient receives appropriate care when it's needed most, and it has a positive impact on throughput in every unit of the hospital.

I am in awe of our nursing staff every day. I applaud those who have just graduated, those who are working diligently to earn accelerated degrees and new clinical certifications, and those who have made personal and professional growth a priority. Your efforts make all the difference for our patients, as well as for your co-workers.

In the coming months, together with Princeton Health leadership, we will be working to build nurse retention programs and to develop creative clinical pathways to recruit and retain the highest level of nurses to fill the gaps in staffing that we face in these trying times.

We will also develop innovative programs through the Institute for Nursing Excellence that provide nurses at all levels with the resources they need to achieve their goals, and to continue to make Princeton Health internationally known for excellence. We encourage our nursing staff to have an impact outside the hospital walls as well, serving in key positions in leading professional organizations.

I thank you again for the heights that you have reached this year, and I look forward to seeing what we will accomplish in the future.



James Demetriades

President and CEO Penn Medicine Princeton Health

It has been an exciting year at Penn Medicine Princeton Health, as nurses across our organization once again made significant contributions to our ability to provide exceptional patient care.

This year also brought extraordinary demands on our nursing staff. However, despite staffing shortages, our nurse leaders, clinical nurse educators, floor nurses, and clinical nurse specialists rallied together to drive innovation, educate the next generation of nurses, and take steps to advance their nursing careers so they can contribute to Princeton Health in new ways.

Princeton Health nurses realized many achievements this year, including continuing their tradition of excellence with a third recognition from Magnet® and receiving local, national, and international acclaim for published articles, as well as poster and podium presentations.

As an organization, we were honored with the NJ Biz Healthcare Heroes Award for our work on nurse and employee wellness, a program that is a key part of keeping us at the forefront of achieving better employee and patient satisfaction.

Looking to the future, the Institute for Nursing Excellence will develop programs to help foster highly skilled and empowered nurses to develop nurse-led quality initiatives and meaningful research that directly translate to better care at the bedside.

And, as the role of nurses — particularly nurse practitioners — continues to grow in increasingly acute ambulatory care settings, we recognize their impact on patient care will expand as well.

I appreciate each member of our nursing staff for their resiliency. For our part, Princeton Health leadership is committed to further enhancing our ability to provide a psychologically safe work environment where resourcefulness, candor, and debate are welcome, and nurses are encouraged to advocate for themselves and their patients, so challenging situations can become learning opportunities.



The dedicated nurses at Penn Medicine Princeton Health (PMPH) have been providing care to patients and the community for over a century. In the past decade, landmarks have included moving to a new, state-of-the-art facility in 2012; partnering with Penn Medicine in 2018; and navigating the "new normal" of healthcare among the continued challenges of the COVID-19 pandemic. Through it all, the nurses at PMPH have demonstrated a dedication to creating an excellent patient experience, driving optimal clinical outcomes, developing new knowledge and innovation, and advancing their own professional development.

Princeton Medical Center (PMC), the acute-care hospital division of the PMPH system, is a three-time ANCC Magnet® designated hospital, most recently navigating through the application process this year. Earning Magnet® designation reaffirms the hard work and dedication of the entire staff at PMC, and recognizes PMC's excellence in nursing services.

The nurses at PMPH have also contributed to initiatives that have led to numerous unit- and hospital-level recognitions, such as The Joint Commission's (TJC) Advanced Certification for Total Hip and Knee Replacement, TJC Perinatal Center of Excellence designation, and the American Association of Critical-Care Nurses (AACN) Beacon Award, among many others.

PMPH is dedicated to continuing to move the organization forward in our pursuit of excellence.

FACTS & FIGURES				
	Nursing Leadership	Direct Care Nurses	Non-Direct Care Nurses	TOTAL
NURSING	100.00	80.14	79.03	80.48 % BSN or Higher
	84.21	59.49	79.03	63.73 % Certified
HOSPITAL	319 Licensed Beds	192 Average Daily Ce		4.86 Average Length of Stay (days)

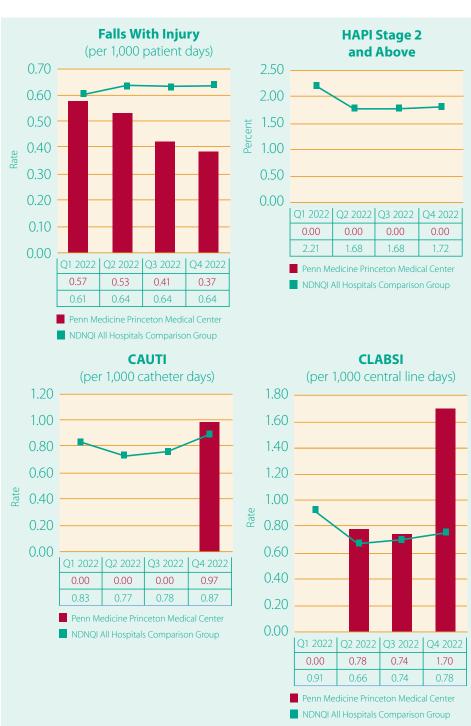
Nursing-Sensitive Indicators



Eligible units at Penn Medicine Princeton Medical Center (PMC) participate in the National Database of Nursing Quality Indicators (NDNQI) for reporting of nursing-sensitive indicators. NDNQI provides a national benchmark for PMC to compare to on a quarterly basis.

In 2022, PMC outperformed the NDNQI All Hospitals comparison group for all four quarters in the categories of falls with injury and hospital-acquired pressure injuries (HAPI), stage 2 and above. PMC outperformed in the categories of catheter-associated urinary tract infections (CAUTI) in three out of four quarters and central lineassociated blood stream infections (CLABSI) in two out of four quarters.

To address the rise in CAUTI and CLABSI, a number of initiatives are ongoing. A system-wide group of nurses and infection preventionists formed to review trends in hospitalacquired infections (HAIs) and to share best practices across the Penn Medicine system. Education was created and shared through Knowledge Link in the fall of 2022. Locally at Princeton, efforts also included introduction of a new product to replace urinary catheters in male patients, increased rounding by the Infection Control Team, and restocking of Prevantix wipes for central line care.



Princeton Medical Center Earns Third ANCC Magnet Designation



On March 17, 2022, nursing staff from across the organization gathered in the conference rooms to join a Microsoft Teams call with the American Nurses Credentialing Center (ANCC) Commission on Magnet to learn the decision of our application for re-designation. The

decision was made following a rigorous review of the Magnet application – a document detailing how Penn Medicine Princeton Medical Center (PMC) nurses met the over 100 rigorous standards of nursing excellence as outlined by the ANCC as defining a Magnet organization – and a three-day virtual site visit to validate the information presented in the application.



The virtual site visit was held January 5-7, 2022. During the visit, the three Magnet appraisers met with our nursing and interprofessional teams to discuss the work environment, quality outcomes, and patient experience initiatives. Featured sessions included meeting with our executive and nursing leadership teams, members of our Ethics Committee, community stakeholders, our shared governance council members, and many others. The appraisers also hosted breakfast and lunch sessions to meet with day-shift and night-shift nurses in a more casual setting to discuss their experiences at PMC. Unit tours were conducted with rolling iPads so the appraiser team could converse with the nurses and support staff in their actual work environment. In total, the team was able to meet virtually with almost 400 nurses and staff members. At the conclusion of the site visit, the Magnet appraiser team provided glowing reviews of everyone they spoke with.

During the March 17 call, the Commission on Magnet announced PMC had demonstrated that all standards were exceeded, and PMC was awarded its third ANCC Magnet Designation. The commission also awarded PMC 11 exemplars, or examples of exemplary professional practice. Three exemplars were related to nurse certification rates, the percentage of nurses with a bachelor of science in nursing (BSN) or higher degree, and nurse satisfaction results that outpace national benchmarks. Additionally, PMC excelled in four nursing-related clinical outcomes, including prevention of falls that cause patient injury, hospitalacquired pressure injuries (better known as HAPI), central line-associated bloodstream infections (better known as CLABSI), and catheter-associated urinary tract infections (CAUTI). Finally, PMC was commended for exemplary performance in four







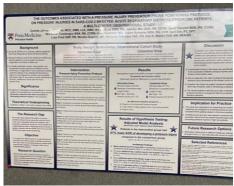
nursing-related patient experience measures: patient engagement, patient education, courtesy and respect, and careful listening.

To celebrate this momentous achievement, PMC sent a delegation of 57 nurses to the annual ANCC Magnet Conference in October 2022, held in Philadelphia, PA. During the conference, a recognition ceremony is held where members of newly designated and re-designated Magnet organizations are invited to walk across the stage to be cheered on by the almost 10,000 attendees. Along with the recognition ceremony, participants were encouraged to attend the many podium and poster sessions, which featured best practices from across the country, including two of our very own posters:

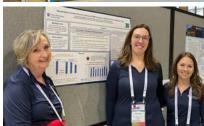
 "Standardized Checklist Process Improves STEMI Emergency Department Door-to-Balloon Times," presented by Jeannie Arena, MSN-Ed, RN (authored by Jeannie Arena, MSN-Ed, RN; Mindi Nahoum, MA,RN; Sandi Mariani, MSN,RNBC; Karen Sylvester, MSN, RN, CEN; Craig Gronczewski, MD, MBA; and Andrew Shanahan, MD)

"The Outcomes Associated with a Pressure Injury Prevention Prone Positioning Protocol on Pressure Injuries in SARS-COV-2 Infected Acute Respiratory Distress Patients: A Multi-Center Observational Study," presented by Karyn Book, MSN, RN (authored by Karyn Book, MSN, RN; Kari Mastro, PhD, RN, NEA-BC; Connie Johnson, MSN, RN, WCC, OMC, LLE, DWC; Jennifer Mac, BSN, RN, CCRN; Janet Viscomi, MSN, RN, CCRN; Mindaline Tanpiengco, BSN, RN, CCRN; Anna Westrick, MD; Karen Sylvester, MSN, RN, CEN; April Em, PT, DPT; Lopa Patel, DNP, RN; Monika Koganti, MD; and Nicholas Giordano, PhD, RN)













A special THANK YOU to Christine Trusiani, Jordan Mento, Alexus Fuentes, and Hubert Hsu. who served as guides for the Magnet appraiser team during the virtual site visit.

Thank you also to the Magnet champions who dedicated their time and efforts to help prepare the staff for the site visit: Chrystal Estevez, Maria Corabeth Reyes, Sheryl Smolensky, Barbara Johannes, Amanda Cucarese, Cassidy Bergeron, Patricia O'Donnell, Lavanya Reddy, Nicole Goldstein, Krista Fitzgerald, Mary Vasselli, Cordelia Schore, Maria Saia, Candice

Jones, Kristen Ochoa, Allison Yiacas, Taylore Chanillo, Megan Parise, Hannah Whiteside, Patrycia Mazzella, Lauren Malinowski, Jessica Gural, Jaclyn Zimmerman, Claire Abdill, Kelsey Sum, Rita Okyere, Alyson Klingler, Jillian Grassano, Alyssa Ryan, Kinjal Shukla, Marie Ferreira, Corinne Timberman, Tina Khiani, Kelly Duffy, Shelby Semple, Sarah Grassi, Amanda Ross, Dina Kenyon, Jackie Graciani, Taylor LaCorte, Lauren Schmid, Vanessa Kariger, Carol Schwab, Bernadette Flynn-Kelton, Tracy Rocco, Anna Clark, Katie Dajczak, Jeannie Arena, Kristyn Compitello, Donna Covin, Sophia Desrosiers, Christina Rossmann, Allison Healy, Nowai Keleekai-Brapoh, Wendy Luca, Juliet Marx, Sue Straszynski, and Ellen Winkle.



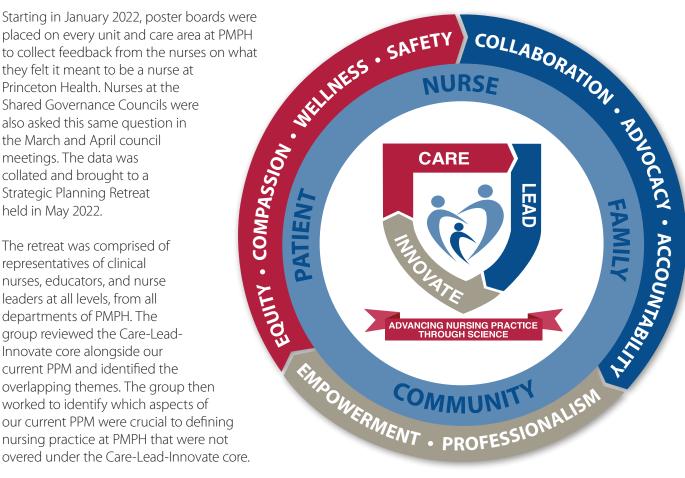
Nurses Develop New Nursing Professional Practice Model

To meet the ever-evolving needs of nursing at Penn Medicine Princeton Health (PMPH), a group was organized to develop a new Nursing Professional Practice Model (PPM). An organization's nursing PPM represents the beliefs, ideals, and vital functions of nurses, and supports them in their everyday practice. As PMPH continues to integrate with the Penn Medicine Health System, the decision was made to also align the PPMs across all entities using the common core of "Care-Lead-Innovate." PMPH was tasked with taking this core and enhancing it with the features and attributes that specifically define Princeton.

placed on every unit and care area at PMPH to collect feedback from the nurses on what they felt it meant to be a nurse at Princeton Health. Nurses at the Shared Governance Councils were also asked this same question in the March and April council meetings. The data was collated and brought to a Strategic Planning Retreat

held in May 2022.

The retreat was comprised of representatives of clinical nurses, educators, and nurse leaders at all levels, from all departments of PMPH. The group reviewed the Care-Lead-Innovate core alongside our current PPM and identified the overlapping themes. The group then worked to identify which aspects of our current PPM were crucial to defining nursing practice at PMPH that were not overed under the Care-Lead-Innovate core.



The group felt strongly that the Nurse-Patient-Family-Community care delivery model in our existing PPM needed to remain. Additionally, the following attributes of PMPH nurses were to be listed in an outer ring: Equity, Compassion, Wellness, Safety, Collaboration, Advocacy, Accountability, Professionalism, and Empowerment. After numerous design revisions, the above PPM was approved by the Nursing Professional Development Council in November 2022. The PPM was officially launched in March 2023.

Princeton Health Launches Institute for Nursing Excellence

In 2022, Penn Medicine Princeton Health (PMPH) launched the Institute for Nursing Excellence to foster highly skilled and empowered nurses to help lead the way in delivering high-quality clinical care across PMPH and in the community. The institute will build on PMPH's tradition of nurse-led quality initiatives and meaningful research that directly translates to better care at the bedside while providing the infrastructure and support needed for nurses at PMPH to accelerate healthcare transformation and improve outcomes. The goal of the institute is to provide a single, convenient place for access to coordinated support needed for advancement in professional and clinical practice, innovation, and research. The work funded through the institute aligns with the PMPH Nursing Professional Practice Model, Domains of Practice, and the American Nurses Association Code of Ethics for Nursing.

The institute contains three centers: Professional Development and Recognition; Clinical Practice; and Innovation & Research. The three centers of excellence are interlinked, and transformative drivers for innovation in care.

- **Center for Professional Development and Recognition:** supports programs to assist PMPH nurses with professional development, such as academic degree advancement, professional certification, advancement up the clinical ladder, and role advancement of support staff
- **Center for Clinical Practice:** supports initiatives aimed at guiding nurses through the process of translating evidence into practice, structures for transforming care at the bedside, and quality- and safety-focused evidence-based practice
- **Center for Innovation &** Research: provides the support and structures needed to accelerate innovative thinking in nursing and initiate research, including support for publication writing, statistical analysis and access to research librarian services

Institute for **Nursing Excellence**



The institute is led by a team that includes PMPH's chief nursing officer, direct care nurses, nurse administrators, patients, physicians, and representatives from the University of Pennsylvania's School of Nursing. Experienced nurse leaders will support innovation from concept through implementation, provide access to grant funding and scholarships, connect to industry experts, and mentor nurses along their career path.



The number of psychiatric mental health registered nurses (PMHRN) in the United States is low, with researchers noting a particular shortage of new graduates pursuing this field. Analyses of the nation's psychiatric mental health nursing (PMHN) workforce have called PMHRNs "an endangered species," and the reluctance of new nursing graduates to enter PMHN has been well documented over the last several years. Some of that reluctance centers on concerns about entering PMHN without experience in medical-surgical (MS) nursing.

New Nursing Graduates Interested in Psychiatric Nursing

Nursing students report that instructors and practicing nurses often discourage them from entering the PMHN field after graduation, in favor of gaining medical-surgical (MS) nursing experience. The message they receive is that they should initially enter MS nursing upon graduation, even if their primary interest is PMHN.

A seasoned PMHRN noted: "My instructors said, 'you need to go to med-surg. don't lose your skills.' They didn't even think about psychiatric nursing. It's just part of a rotation that nursing students have to get through. Students don't realize that they can go straight into psych."

Although there may not be evidence to suggest that PMHRNs should complete a minimal number of years in a MS setting, newly graduated

nurses (some of whom worked in other roles at Princeton House Behavioral Health (PHBH) during their nursing school career) have taken this message to heart and deferred a career in PMHN to get experience on MS units. To retain our newly graduated employees, and to attract new graduates to work at PHBH, in 2022, Penn Medicine Princeton Health Nursing Education developed a hybrid nursing residency that will allow students to pursue their interest in PMHN while they gain MS experience.

As part of the Hybrid Medical/Psychiatric Nursing Training Program, nurse residents participate in a 16-week orientation. They work on the Medical Neurology Oncology (MNO) unit for 10 weeks and then rotate to PHBH for six. Each new RN has nurse mentors on both services. At the end of the 16-week orientation period, their schedule rotates each month between MNO and PHBH. The program has been met with positive review thus far, and will continue to be offered as long as the need and interest exists.



Transitional Care Unit (TCU) Developed to Improve Patient Throughput

Shortly after moving to the Plainsboro location from downtown Princeton, Penn Medicine Princeton Health (PMPH) started experiencing throughput issues secondary to the capacity constraints in the new space. This was further compounded over the years, as we continued to grow and expand services in the area. This led to overcrowding, admitted patients boarding, and exorbitantly increased wait times within the Emergency Department (ED).

In the winter of 2021, the ED at PMPH began experiencing higher than anticipated patient volumes. This resulted in even more patients in the ED waiting room, along with a larger than normal amount of admitted patients boarding in the ED awaiting a hospital bed. With a concurrent surge in hospitalized COVID-19 patients, the hospital's length of stay increased, creating significant bed capacity challenges, and PMPH was often placing the ED on divert, thus making it difficult to adequately service the surrounding community as planned.

In response to this, PMPH began conducting hospital capacity huddles in 2022 to understand the daily throughput challenges, and then launched project teams to address the main issues. After a few months, PMPH partnered with Vizient to conduct a rapid transformation of the ED. The centerpiece was the creation of a virtual unit within the ED called the Transitional Care Unit (TCU). The TCU is comprised of an inpatient nursing

team separate from the ED nursing team, whose objective is to bring inpatient care to admitted patients holding in the ED. Once a decision to admit a patient has been made, and an inpatient physician has assumed responsibility for the patient, the ER nurse hands off to a TCU nurse, and the TCU assumes responsibility of the patient, signs off on and initiates any care that is needed, and completes necessary documentation, while the patient is waiting for a hospital bed.

In conjunction with this, the ED implemented a direct bedding process with the ED split into three tracks: 1) low acuity, 2) middle acuity, and 3) high acuity. Each track is designed to have teams of physician, nurses, and patient care technicians working in pods to deliver efficient patient care. Lastly, the redesign added an additional 35 treatment spaces to accommodate the increased volume of patients and to create the virtual transitional care unit. Outcomes continue to be monitored and adjustments made in order to ensure the TCU is able to meet staff and patient needs.

Mission

We provide exceptional, compassionate care to enhance the health of our patients, their families and our community.

Penn Medicine Princeton Health Develops an Internal Surgical Tech Training Program



For several years, the operating room (OR) struggled to fill vacant certified surgical technologist positions. In looking to solve this problem, the Surgical Services leadership and education team considered the recent success the OR had in recruiting new registered nurses (RNs) and non-OR RNs into the Association of Perioperative Registered Nurses (AORN) Perioperative Training Program, to see if the process could be replicated.

Based on the success with AORN, the team looked for similar programs aimed at training new or inexperienced surgical techs.

In spring 2022, the team learned of an online program—MedCerts—that would provide the didactic. They met extensively with MedCert and learned the elements of the program and student pathway. Each student would also have to log clinical experiences of >250 cases.

The team proposed a plan to senior leadership of creating six surgical technologists in training (STT) full-time equivalent (FTE) positions for the OR. Each STT would make a minimal base salary during the training period and move up to the certified surgical technologist (CST) rate upon successful completion of the program and passing

the certification exam. The proposed plan was an opportunity for individuals to establish themselves in a new profession without having to take time off from their current full-time employment in order to do so, as this is often a financial barrier to changing professions. Princeton senior leadership embraced the creativity and pathway to support employees in expanding their careers.

A flyer announcing the STT basic program opportunity and upcoming information session was emailed to all employees. There were over 72 applicants at the open house. Each applicant was required to complete an aptitude test, and based on the aptitude scores appointments were made for 15 employees to return and shadow in the OR to ensure they understood the scope of the role, the physical requirements, and the sometimes

graphic nature of OR work. Each applicant was scored on their interest, energy, and ability to undertake a surgical position.

Upon completion of the shadow day, each applicant was brought back for a team interview by leaders and OR staff. At this point, numerous tools were used to whittle down the applicants based on their actions during the shadow day. Lastly, each applicant's manager was sent a recommendation survey. All of these tools combined to help the team recruit our first class.

Classes began on August 22. The MedCert Program was designed to be completed online, with supplemental clinical experiences. The program was touted to be completed in four months. (A normal STT educational program takes nine to 12 months). It was believed that 40 hours a week devoted to the program would accelerate the process. After two weeks, it was determined that the online format was too much for most people, and efforts to supplement with clinical experiences were not enough to overcome the hurdles. The program was adjusted with input from the students and two previous scrub technologist training instructors. The revised program would consist of the MedCert portion, a clinical expert-led didactic portion, and demonstrations via a lab with supplemental clinical experiences once the individual successfully completed competencies necessary for their clinical experience. Additionally, to better suit the needs of the adult learner, the didactic format was changed to consist of two to four hours of online education, one to two hours of lab, one to two hours of didactic, and two to four hours of clinical work. These changes did the trick! The STTs were finally flourishing.

Lessons learned:

- The STT program needs to be six months. To give the program the needed attention and commitment, it cannot be rushed. Extended absences could not, unfortunately, be accommodated, but participants who needed leave were invited to return when they were able to, with a future cohort.
- There is a need to limit the number of **learners in the OR**. Initially, the AORN Periop 101 Program and STT Program started at the same time. However, accommodating that many students at one time makes it too difficult to ensure quality experiences for everyone. In the future, the programs will be staggered to protect the integrity of learning for all.
- **Burnout was not an issue.** Initial concerns of burnout among existing staff from onboarding and training so many new RNs and surgical techs at once proved, to the delight of all, to be unrealized. The enthusiasm and energy the new hires bring has proved that, thus far, it is sustainable.
- **Future support is important.** The influx of new RNs and STT graduates creates a gap of experience and time-learned wisdom. Future efforts will focus on supporting the teams and teaching critical thinking and resource availability. There is more to come in the future!



Princeton Medical Center Offers New Cardiac Services

Penn Medicine Princeton Medical Center (PMC) has been providing diagnostic cardiac catheterization services and emergency percutaneous coronary interventions (PCI) procedures for the past 25 years. In February 2021, the New Jersey Department of Health authorized community hospitals to be able to expand their services to include elective PCI procedures, effective May 2021. PMC applied for authorization to perform these elective PCI procedures and was awarded a license to do so as of August 2, 2022.

The news was positively received by nursing and medical staff, who were excited to be able to provide this expanded service for their patients. PCI, also known as coronary angioplasty, is a treatment available to open blocked arteries in the heart, thereby preventing or treating a heart attack. The procedure may be done on an elective, scheduled basis when the patient is free of symptoms, or it may be done on an emergent (primary) basis when the patient is having a heart attack. In either the elective or primary setting, it involves inserting a thin, pliable catheter into a major blood vessel of the arm (radial artery) or leg (femoral artery) and manipulating the tip of the catheter to the heart. Then a balloon or mechanical stent at the tip of the catheter is used to reopen blocked or partially blocked arteries and restore blood flow to the heart muscle.

Redesigns to the Cardiac Catheterization Lab and Interventional Radiology (IR) suites were completed in the in the fall of 2022 to meet the needs of the new service. In 2022, 35 elective PCIs were performed, and projections are that as many as 250 will be completed in the coming year.

Princeton Medical Center Earns New Accreditation for Hip Fractures



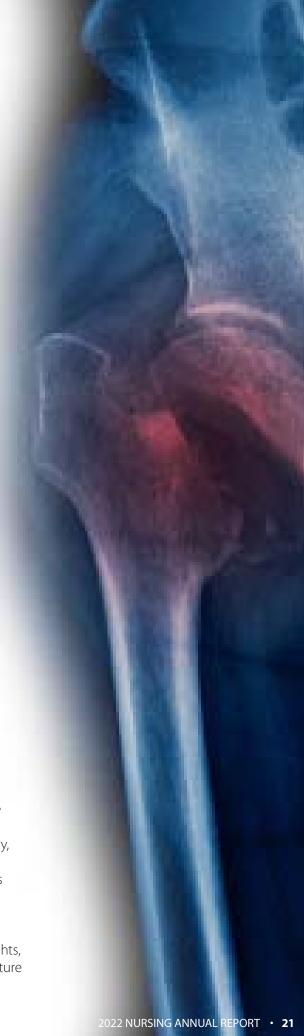
For the past several years, the hip fracture team at Penn Medicine Princeton Medical Center (PMC) has been working diligently to improve care and outcomes. Patients experiencing a hip fracture are often elderly, frail, and experience a decline in health follow the traumatic event. The interprofessional team, made up of orthopaedic surgeons, hospitalists, geriatricians, nurses, anesthesiologists, pain

management nurse practitioners, physical therapists, and pharmacists, has developed a program to ensure patients are expedited to surgery to reduce the risk of unfavorable outcomes. In addition to striving for surgery in under 24 hours from arrival at the hospital, the team also works to improve delirium prevalence, ensure appropriate use of blood transfusions, and aims to have patients return to their baseline living situation as soon as possible.

Since the team began working on improving hip fracture care, the discharge to home percentage has almost tripled, without a change in the overall length of stay. Average emergency department to operating room times also dropped substantially over the four-plus years since program began. The length of stay averages 5.4 days, compared to a national average of 6.4 days. Additionally, 100% of our hip fracture patients are co-managed by medicine or geriatrics, compared to 50% nationally.

The International Geriatric Fracture Society (IGFS) is an organization driving collaboration on the delivery of evidence-based patient-centered care for the treatment of geriatric or fragility fracture. (For more information, visit the IGFS website, at www.geriatricfracture.org/about). The IGFS offers program certification to help organizations decrease variability of care, increase quality, improve patient outcomes, and strengthen team dynamics. In addition to meeting program structure standards, performance improvement measures must reflect excellence across several metrics.

On December 8, 2022, an IGFS virtual site visit took place. Members of the interprofessional team presented the hip fracture program structure, highlights, and outcomes. The response was overwhelmingly positive, and the hip fracture program at PMC was award Premier-level certification.





Acute Rehab Unit Conducts Plan-Do-Study-Act (PDSA) Project for Fall Prevention

In calendar year 2021, the Acute Rehab Unit identified an increase in falls, reporting a total of 16 incidents, one resulting in an injury. As a result, Megha Pandya, PT, DPT, CSRS, Lead Physical Therapist; Alyson Klinger, BSN, RN, CRRN, Night Shift Registered Nurse; and Michelle Dassa, BSN, RN-BC, Clinical Nurse Specialist; along with Director of Professional Practice, Strategic Planning and Magnet Allison Benziger, MSN, RN-BC; developed a falls reduction team and conducted a Plan-Do-Study-Act (PDSA) quality improvement project.

An interdisciplinary team was created since multiple disciplines are actively involved in patient care on the unit throughout the day. The team created a fishbone cause and effect diagram to help break down the underlying factors leading to falls and develop applicable interventions. The predominant trends identified in the data analysis were: patients sliding from the chair, patients falling while getting out of bed or a chair to use the bathroom, and patients who refused fall prevention assistance/ interventions from staff.

The team reviewed the literature to identify interventions that could be implemented to help reduce falls and falls with injury, and identified three priority interventions. The first intervention involved implementation of a new product—one-way directional slides—that could be used specifically to prevent patients from sliding and falling out of wheelchairs or recliners in healthcare settings, as the data analysis found that half of the falls occurred from chairs. Several slides were purchased for a trial. Purposeful rounding was a second intervention the team focused on to reduce falls. The practice of purposeful rounding is intended to proactively address a patient's needs, therefore reducing the risk of falls. The third intervention was weekly leadership rounding. Unit leadership rounded three times a week to re-educate patients on their individualized fall risk and identify potential barriers that could lead to a fall.

Over a two-week period in July 2022, every staff member from nursing, physical therapy and occupational therapy was educated individually on the proposed interventions. The three-month trial period ran from the beginning of August to the end of October 2022. During that time, the unit exceeded all expectations, with three consecutive months of zero falls. As a result, these interventions were incorporated into daily practice on Acute Rehab to continue the goal of reducing falls.

Vision

Lead the region in enhancing the health and wellness of each person, to serve through personalized, innovative care and education.



Nurses Conduct Systematic Review for Best Practices for Gender-Diverse Patients

The Center for Eating Disorders (CEDC) at Penn Medicine Princeton Medical Center (PMC) has an incredibly diverse patient population. As the nurses and other healthcare professionals work to provide the best possible care for their patients, they remain cognizant of any barriers to providing equitable care, in order to eliminate them. In 2022, the CEDC nursing team focused their attention on addressing barriers to treatment for gender-diverse patients.

The nurses engaged in a full-scope literature review about the state of and best practices for interpersonal, environmental, and structural components of gender-affirming care. Using the search terms "gender-affirming," "transgender," and "nursing," they found 48 articles published between 2016 and 2021, and selected 20 for a systematic review. The literature review revealed overarching themes of the need for patient-led care, the potential for delay of care when patients are faced with practitioners who demonstrate bias and perform micro-aggressions, and the need for increased education for healthcare workers regarding internal and external biases. Providing gender-affirming care includes using the correct patient name, asking questions pertinent to care, and validating the patient's gender identity. The current literature highlights a critical need for nursing to take a leadership role in encouraging staff self-reflection, assessment, and education to inform gender-affirming care.

The next steps CEDC plans to take include engaging in a comprehensive assessment of multi-disciplinary staff readiness to embrace culturally competent care for gender-diverse patients, and opportunities to provide more inclusive care for gender-diverse patients.

In November 2022. Corinne Timberman, BSN, RN, PMHN-BC, Assistant Nurse Manager, CEDC; and Amber Molineaux, BSN, RN, PMHN-BC; Clinical Nurse, CEDC: presented the results of the literature review in a podium presentation at the 48th Conference of the Transcultural Nursing Society. held at the Galt House Hotel in Louisville, KY.







Nurses Focus on Employee Wellness

The Nurse Wellness Committee was initially formed in April 2020 in the midst of the COVID-19 pandemic's first wave, to address the immediate physical and psychological needs of the nursing and support staff at Penn Medicine Princeton Health (PMPH). It quickly became apparent that just as COVID-19 lingered, so too did the need to address employee wellness. As a result, the Nurse Wellness Committee (2022 Chair Christine Trusiani, BSN, RN-BC) developed a newsletter that is sent out quarterly and outlines resources available at PMPH for employee wellness, including the Employee Assistance Program (EAP), Penn COBALT, and Wellfocused. The committee members also rounded on the units during both day and night shifts to provide education and support.

During the May 2022 Nurses Week celebrations, the committee sponsored "Wellness Wednesday," an entire day devoted to supporting nurse and employee wellness while at work. Wellness Wednesday consisted of rolling cart education provided to all inpatient and outpatient units (timed to roll through night and day shifts) and a Wellness Resource Fair. The rolling cart contained printouts of self-care recommendations (yoga, meditation, calming playlists, and outdoor places to disconnect from work) with QR codes to allow nurses access simply by scanning on their phones, as well as resource lists. The cart also had a la carte-style selfcare trinkets (chocolate, tea, scent inhalers, bubble wrap, etc.) for nurses to take when they felt they needed them. During the Wellness Resources Fair, representatives from the various mental health

resources, such as EAP, were available to provide information to staff. This event was well received and reached over 100 members of the nursing staff across the entire facility.

In August 2022, the Nurse Wellness Committee was recognized for their efforts at the NJBIZ Healthcare Heroes Awards ceremony. Marketing and Public Affairs worked with Christine to write the nomination for PMPH, which focused on the work of the Nurse Wellness Committee among the various organizational supports such as Penn COBALT, Wellfocused, and EAP, all aimed at promoting staff resilience. PMPH was one of by NJBIZ honorees in the category of "Workplace Wellness Heroes." Christine represented PMPH on stage to accept the award at a reception held in Somerset, NJ.

Succession Planning

Christine Trusiani BSN, RN-BC

started as a nurse resident in 2019, and was hired into the Acute Care of the Elderly (ACE) Unit at the completion of my residency. During my tenure at PMPH, I have had an active involvement in nursing shared governance. I've been the chair of the Clinical Practice Council, the co-chair of the Nursing Board, and was briefly the co-chair of the Penn Medicine Nursing Shared Governance Leadership Council. In 2020, I formed the Nurse Wellness Committee, a sub-committee of the Staff Nurse Advisory Council. These experiences combined to help me realize my passion for geriatrics, education, and shared governance.

During succession planning, I had a dual focus on leadership and education. My mentors, Allison Benziger, MSN, RN-BC, Director of Professional Practice, Strategic Planning; and Allison Healy, MSN, RN, GERO-BC, Professional Development Specialist, worked with me on a number of projects that focused on developing my skills in relation to my passions. I worked closely with Allison B. on our third Magnet re-designation. She helped me learn the process of writing a Magnet document and preparing the organization for site visit. I organized the Magnet champion meetings, created a newsletter, and served as a Magnet champion for the ACE Unit. During site visit, I was a virtual guide for the appraiser team. I also worked with Allison B. to plan and run a shared governance leadership retreat where we worked on the design of our new professional practice model and strategic plan.

While working with Allison H., I rounded on all patients on the ACE Unit, ensuring they and the staff had a smooth mechanism for communication, education and equipment. I addressed patient concerns in real-time and coordinated with the nursing staff to ensure everything was completed. I also led the unit, under Allison H.'s guidance, through the annual education on safe patient handling (SPH) and restraints.

The Succession Planning Fellowship was a great experience for me, as I was able to learn from two great mentors, all while making a difference for my peers and my patients.

Stacy Horowitz BSN, RN-BC, CARN

started at Penn **Medicine Princeton House Behavioral** Health in 2015 as an inpatient registered nurse straight out of school. I had always been interested in psychology, and was extremely fortunate to receive a nursing position in a field that I so greatly loved. Since starting at Princeton House, I had the opportunity of become a clinical nurse 3 in 2021, be selected for the Succession Planning Fellowship in 2022, and become a clinical nurse 4 in 2023.

My fellowship, in which I was mentored by Dr. Sonora Reynolds, Director of Patient Care, included projects such as a 12-hour shift pilot for our inpatient staff and facilitating employee orientation for new hires.

The Succession Planning Fellowship has been a very rewarding and humbling experience that I will truly appreciate as I continue along my nursing journey.

Succession Planning

Shelby Semple MSN, RN, C-EFM

Semple, and I have been with Princeton Health for the past five years. began as a RN resident and started my career on Labor and Delivery in 2018. In 2021, I was selected to be part of the Succession Planning Fellowship. Since then, I have transitioned to a clinical nurse specialist role for Maternal Child Health.

y name is Shelby

During my time as a succession fellow, I participated in many projects within the unit. One of my biggest achievements has been implementing the Interdisciplinary Mentorship Program for new graduates on Maternal Child Health. This program was created to help improve nursephysician communication and collaboration on the unit. As the nurses begin their orientation, they are enrolled in the mentorship program with an obstetrics provider. Over the course 12 weeks, the mentor and mentee develop a supportive working relationship to improve clinical confidence and job satisfaction.

We continue to monitor for improvements in working relationships and hope to expand this program to other nursing-physician disciplines.

Erica Norris BSN, RN

y name is Erica Norris, and I have been a registered nurse (RN) since 2014, earned my BSN degree in 2019. The journey to become a nurse has not been an easy one, but it has been my dream since I was a little girl. Suffering from a chronic illness my entire life (rheumatoid arthritis) piqued my interest in the medical world from a very young age. My determination to be more than my 'disease' was the driving force. Since becoming a RN, I have worked in a sub-acute rehabilitation facility, an emergency department, and, now, pre-admission testing.

During the succession planning journey, I have had so many new professional opportunities that I never had before. I attended the Magnet conference in Philadelphia in October 2022, which was a momentous experience. Meeting and listening to such experienced and highly accomplished nurses allowed me to truly understand how far I can potentially take my career.

During the succession planning process, I was paired with a wonderful mentor, Kristyn Compitello, MSN, RN, CMSRN, CPN, RNC-MNN, who is a nursing professional development specialist. She guided me through the process of creating educational materials and leading orientation and education initiatives for newly hired nurses. The project we worked on was to create an educational tool for the code carts throughout the hospital. It is a guick guide to what should be on and inside the code cart. It also identifies what to do during a code. I was able to use this tool during the skills fair, where I assisted in education at this station.

Overall, succession planning has opened the doors to new experiences and allowed me to work with other departments throughout the hospital.

Succession Planning

Tracy Kapoor MSN, RN

am the assistant nurse manager at Penn **Medicine Princeton Medical Center's Emergency Department.** I have been an emergency room nurse for the past 10 years. I came to Penn Medicine almost five years ago, and I moved up to the assistant nurse manager role. I completed my master's degree, with honors, in executive nursing in 2022. As a nurse leader, I strive to deliver patient-centered care for the families of the community we serve. I also work diligently to elevate staff to higher levels that align with the mission of Penn Medicine. As healthcare is changing, I am proud to be part of a team that is working towards innovating and improving the care of our patients in the emergency room.

During the 2022 Succession Planning Fellowship, my primary project was to improve the downtime procedures in the Emergency Department (ED). I organized the downtime forms, clarified the proper procedures, and provided education to the staff. I created a downtime technical flowsheet for better communication among ED staff during downtime. I also presented to the Emergency Department Council about the need to create a triage form, as I discovered that we did not currently have one and it is a requirement. I developed the triage form to meet the needs of the state requirements and obtained all the needed Penn Medicine Princeton Health approvals for implementation.

Although my fellowship year has ended, work continues on this project, and I have been invited to be a "table leader" at the Information Services (IS) downtime workshop being held in Philadelphia April 2023.

Megan Yellareddigari **BSN, RN, CCRN**

y name is Megan Yellareddigari, and I worked on the Critical **Care Unit during my** participation in the Succession **Planning Fellowship.** My mentor was Kathy Ryan, MSN, RN-BC, Director of Patient Care Services and Orthopedic Service Line. I participated in senior leadership meetings, which gave me a deeper understanding of hospital operations. During our time together we discussed conflict resolution strategies and communication tips. I asked for the opportunity to meet different leaders in the hospital, which led me to working with the Career Advancement & Recognition of Excellence (CARE) Committee. I was able to meet with managers of different units to explain the program and my experience in order to help support them in promoting the clinical ladder to their nurses.

During my time in the fellowship, I was hired to become the Stroke Program Coordinator. My experience on my projects helped me immensely. I was able to leverage my connections gained through the program in my new role. I felt more comfortable in large meetings and was more confident in my ability to handle conflict.



Penn Medicine Studies Impact of Virtual Learning on New Graduate Nurses

While navigating the many challenges presented during the COVID-19 pandemic, Penn Medicine remained invested and determined to keep the momentum of hiring new graduate nurses into the system's Commission on Collegiate Nursing Education (CCNE) accredited Nurse Residency program. In order to do so, material that was previously taught in person pre-pandemic was strategically converted into a virtual version with online classroom learning. This was done to help keep staff and patients safe while navigating the unknown. The system was able to hire new graduate nurses as normal, and able to provide them with the support needed to help transition into their first professional roles.

The transition was smooth, but this new version of the residency program left some wondering what effect the COVID-19 pandemic had on the nurse residents and their program survey results. To determine the impact, the Penn system formed a team comprised of nurse leaders, educators, and clinical nurses to conduct a formal study. Allison Healy, MSN, RN-BC; Wendy Luca, MSN, RN, OCN; Andre J. Angelia, BSN, RN, CCRN; Karyn A. Book, MSN, RN; Sheila G. Kempf, PhD, RN, NEA-BC; and Kari A. Mastro, PhD, RN, NEA-BC, represented Penn Medicine Princeton Health (PMPH) on the team.

The study was designed as a cohort study, and compared nurse residents' perceptions of preparedness in traditional in-person versus virtual learning environments. Results found no statistically significant differences between these two groups over the course of a year. The study demonstrates that a virtual learning format can achieve comparable outcomes to a traditional in-person learning format to successfully transition newly licensed nurses into the profession.

"An Evaluation of Traditional Versus Virtual Nurse Residency Programs on New Graduate Nurses' Perceptions of Preparedness to Provide Safe Patient Care" was published by the Journal for Nurses in Professional Development in July 2022.

Values

Communication
Compassion
Collaboration
Excellence
Integrity



Interprofessional Team Conducts Aspiration Prevention Quality Improvement Project

Penn Medicine Princeton Health's (PMPH) interdisciplinary Sepsis Alliance Committee utilizes continuous quality improvement strategies to prevent sepsis not present on admission (NPOA) and reduce associated mortality. The baseline sepsis (FY2021) NPOA mortality rate was 5.60, above the hospital system's high performance goal of 5.10. The Quality Department identified that 13 out of 37 (35%) sepsis NPOA mortality cases were associated with an aspiration-related event. Moreover, the overall hospital aspiration pneumonia rate was 6.34, above the system goal of 3.29. To address this issue, an interprofessional team was formed in FY2022 to conduct an aspiration prevention quality improvement project. The goals of this project were to: 1) decrease preventable aspiration events related to sepsis NPOA mortality by 50%, and 2) decrease the hospital aspiration pneumonia rate per 1,000 discharges to 3.29 over one fiscal year.

Clinical and leadership stakeholders were queried to identify potential process-related contributory causes of aspiration. The most common finding was lack of staff and visitor awareness of patients at high risk for aspiration. This was addressed with a "back to the basics" approach. Unit champions were solicited with education focused on aspiration pathophysiology, risk factors, signs and symptoms, risk screening, and prevention strategies. New, brightly colored green signage for patient rooms was created that instructed visitors not to give patients any food or drink before communicating with the nursing staff. The signs also included speech/language pathology (SLP) recommendations for diet texture, feeding supervision, and patient-specific aspiration prevention interventions. Green dietary tray liners were introduced for patients on modified diets to indicate their aspiration risk. Dietary, rehabilitation services, pastoral care, and environmental services staff were also educated about the importance of aspiration prevention and their role in the process during patient interactions.

This project incorporated the Emergency Care Research Institute (ECRI) supported Total System Safety Approach by engaging leadership, staff, patients, and families to collaborate in aspiration prevention efforts. The core interdisciplinary team was comprised of nursing, quality, education, dietary, nutrition, and SLP. Other key stakeholders included respiratory therapists, providers, and residents. All new nursing hires shadowed SLP during orientation, where they learned to engage patients and families to perform aspiration risk assessments using an evidence-based tool. Nursing staff partnered with patients and visitors regarding both the signage and tray liners to open dialogue about aspiration prevention. Providers were also engaged through collaboration with the health information management and quality teams to conduct concurrent and postdischarge patient chart reviews of assessment and



documentation to verify aspiration POA vs NPOA status. This collaboration assisted providers with ensuring accurate documentation to support coding that was reflective of the care delivered.

Results demonstrated a significant reduction in hospital aspiration events over the fiscal year. Preventable aspiration events related to sepsis NPOA mortality decreased from 35% to 22%, representing a 37% decrease. The sepsis NPOA mortality rate decreased by 45%, from 5.60 in FY2021 to 3.07 in FY2022. The hospital aspiration pneumonia rate per 1,000 discharges decreased from 6.34 to 2.35, representing a 62.9% decrease and surpassing the project goal of 3.29. The core team continues to monitor monthly performance data and report to clinical and operational teams in the organization, as well as the enterprise Sepsis Alliance Committee. The project team won first place in the Quality Improvement Category at the 2022 Annual Penn Medicine Research and Evidence-Based Practice Conference. Congratulations to Grace Pugh, BSN, RN, CPHQ; Victoria Norton, BSN, RN; Nowai Keleekai-Brapoh, PhD, RN, NPD-BC; Karen Sylvester, MSN, RN; Craig Gronczewski, MD, MBA; Denise Dacey, RD; Jenny Cowell, MS, SLP; Jamie Hansen, MA, CCC-SLP; Sangita Verma, PT, DPT, MBA; and Arun Rao, MD, AGSF, FACP.

Nursing Professional Development Council Presents Nursing Grand Rounds

Since 2020, the Nursing Professional Development Council at Penn Medicine Princeton Health (PMPH) has been hosting a series of nursing grand rounds (NGR)—one-hour, virtual presentations on topics of interest, held at set intervals throughout the year. Continuing education credits are awarded to those who attend and complete the survey afterwards. During the council's regularly scheduled meetings, members submit proposals for topics and identify resources within and outside of the organization to present on them.

When initially instituted, nursing grand rounds were held quarterly, but due to the popularity of the events and feedback received on the surveys, the Professional Development Council decided at the end of the first quarter of 2022 to increase nursing grand rounds to a monthly event, excluding May due to Nurses Week, August due to summer vacations, and December due to the winter holidays. Nearly 300 nurses and healthcare professionals attended nursing grand rounds in 2022.

Featured Nursing Grand Rounds				
Month	Торіс	Presenters		
March	"Staying Grounded in Trauma-Informed Care"	Rebecca G. Boswell, PhD; and Corinne Timberman, BSN, RN, PMHN-BC		
April	"Safe House Project: Human Trafficking Training"	Brittany Dunn, Chief Operating Officer, Safe House Project		
June	"Moral Distress During Covid-19 and Beyond"	Aliza Narva, JD, MSN, RN, HEC-C		
July	"Accelerating Nursing Innovation"	Lynda Benton, Senior Director, Global Community Impact, Johnson & Johnson		
September	"Legal Considerations for Nursing Documentation"	Beth A. Hardy, Esq.		
October	"The Nurse as the Therapeutic Agent – Managing Psychiatric Patients in a Hospital Setting"	Cindy Talerico, BSN, RN-BC; and Marcia Nettingham, DNP, RN-BC, NE-BC		
November	"Sepsis Management: Timing is Everything"	Arun Rao, MD, AGSF, FACP; and Grace Pugh, BSN, RN, CPHQ		





Clinical Advancement & Recognition of Excellence (CARE) Advancements

The Clinical Advancement & Recognition of Excellence (CARE) Program is a robust career advancement ladder that places emphasis on professional development for clinical nurses who wish to grow and advance while remaining at the bedside in a clinical setting. The program evaluates nurses' scope of influence and impact throughout the organization. The greater a nurse's reach of influence or impact, the higher they advance in recognition.





Nurses are divided into four tiers of clinical practice. Clinical Nurse 1 (CN1) is considered a novice nurse with less than 15 months of experience. Clinical Nurse 2 (CN2) is any nurse with at least 15 months of experience. Transition from CN1 to CN2 is a required advancement. Clinical Nurse 3 and 4 incorporate that expanding scope of influence and are elective advancement tiers for nurses who desire additional professional development.

Each clinical nurse tier has its own job description and code, so nurses who advance are actually promoted to new roles within the organization. Clinical nurses are provided the opportunity to apply for advancement throughout the year, at quarterly intervals.

The following nurses advanced in the CARE program in 2022:

Clinical Nurse 3 Taylore Chanillo, MSN, APRN, FNP-C, CPN Clinical Decision Unit Sarah Dalby, BSN, RNC-OB, C-EFM Labor & Delivery Linda Farmer, BSN, RN, OCN Outpatient Infusion Maria Saia, BSN, RN, CNOR Ambulatory Surgery Center (ASC)





Princeton Health Nursing and Clinical Support Staff Excellence Awards

During Nurses Week each year, the dedicated nurses and support staff of Penn Medicine Princeton Health are recognized for their embodiment of the behavioral expectations (BE standards) of professionals and caregivers defined by the organization. Awards are also given in recognition of excellence in preceptorship and exceptional leadership. The highest honors are to be recognized as the Princeton Health Nurse of the Year and Support Staff Person of the Year. The nominations for these awards are read and voted on by nursing peers and leaders. The 2022 Princeton Health Nursing and Clinical Support Staff Excellence Award winners are as follows:

Nurse Winner

Support Staff Winner

BE Compassionate



Filomena Guiterrez, BSN, RN Clinical Decision Unit



Kristina Ullrich, MHA Eating Disorders Unit

BE Present



Victoria Norton, BSN, RN Acute Care of the Elderly Unit



Mary Shepherd, NA Acute Care of the Elderly Unit

BE Empowered



Rose Campbell, BN, RN Telemetry Unit



Deidre Loney, NA Acute Care of the Elderly Unit

BE Collaborative



Paul Yiacas, BSN, RN Emergency Department



Andrew Fejko, NA Acute Care of the Elderly Unit

BE Accountable



Joan Jaczko, BSN, RN Telemetry Unit



Keith Mayfield, NA Clinical Decision Unit

Nurse Winner

Support Staff Winner

Preceptor **Award**



Kristen Lapinski, BSN, RN Pre-Admission Testing (PAT)



Mia Sabo, NA Pediatrics Unit

Nurse of the Year



Alexander Opperman, BSN, RN Float Pool

Support Staff Person of the Year



Victoria McGovern, NA Telemetry Unit

Advanced Practice Nurse of the Year



Michael Katzman, MSN, RN, FNP-C, ONC, WCC Craigie Total Joint Center of Excellence

Leadership **Awards: Nurse** Leader of the Year and Physician(s) of the Year



Katrina Pfeiffer, DNP, RN, CPN Director of Clinical Informatics



Dr. Eileen Daly **Emergency Medicine**



Dr. Anish Sheth Gastroenterology





Penn Medicine Nursing Clinical Excellence Awards

Nurses at Penn Medicine Princeton Health are recognized annually for their contributions to the organization through the Penn Medicine Nursing Clinical Excellence Awards. Each award represents an aspect of clinical excellence. Nominations are read and voted for by nursing peers and leaders. The 2022 Princeton Health winners are as follows:

Lillian Brunner Award for Exemplary Practice

As an integral member of the Pediatric Unit, Katie participated in two Children's Hospital of Philadelphia (CHOP) Quality Improvement studies. Her years of experience shine through in her clinical understanding, allowing her to stay calm and collected in high-stress and high-acuity situations. Katie embodies our professional practice model by providing quality, compassionate, patient-centered care.



Katie McCurley, BSN, RN, CPN Pediatrics Unit

Diane **Lanham Award** for Leadership

Diana's diverse work and leadership experience contribute to the professional development of all staff in the Ambulatory Surgery Center (ASC). Her rapport with surgeons allowed the ASC to integrate a new recycling process that decreased waste and reduced healthcare costs while still ensuring the accessibility of critical equipment, supplies, and implants, providing a consistently high level of care.



Diana Paczkowski, BSN, RN, MAT Ambulatory Surgery Center

Helen **McClelland Award for** Research & **Innovation**

Charul was a co-investigator for a research project focusing on heart failure readmissions during the COVID-19 pandemic and patient self-care strategies approved by the systemwide Institutional Review Board (IRB) and accepted for publication. She recently completed her masters of science in nursing degree (MSN) and is onboarding as an advanced practice nurse (APN), focusing on the heart failure population to enhance care.



Charul Yadav, MSN, RN, AGPCNP-BC Heart Failure Coordinator

Roslyn Watts Award for Community/ **Patient/Family** Relationships

Karen cultivates a healing environment by collaborating with volunteer services to create an integrative therapy program offering massage, yoga, mindful movement, and reiki to cancer center patients. Her passion for wellness extends to her work in the community by hosting monthly prevention and screening events for the Princeton lunch crowd.



Karen Davison, BSN, RN, OCN Oncology Nurse Navigator

Victoria Rich **Award for Transformational** Leadership

Kathy has served in almost every leadership position since starting at Princeton in 1989. She led Princeton in achieving advanced certification in total hip and knee replacement, and, most recently, spine, receiving recognition from US News and World Report. Kathy was responsible for coordinating and implementing all phases of the Johnson & Johnson "Care for Today" research.



Kathy Ryan, MSN, RN-BC Director of Patient Care Services and Orthopedic Service Line



DAISY Winners

The DAISY Foundation's DAISY Award® for Extraordinary Nurses recognizes and honors nurses for the outstanding work they do for patients and families every day. Any nurse at Penn Medicine Princeton Health (PMPH) can be nominated by a patient, family member, or co-worker. The nominations are read by a team of nurse peers, and a winner is selected monthly. The 2022 DAISY Award® winners for PMPH are as follows:

Month	Name	Unit
January	No winner	
February	Dean Lucchesi, BSN, RN	Medical Neurology Oncology (MNO)
March	Chaneka Lawrence, BSN, RN	Surgical Care Unit (SCU)
April	Danielle Ciciyasvili, RN; and Gary Greenfeder, BSN, RN, CCRN, WCC (tied)	Acute Care of the Elderly (ACE) Critical Care Unit (CCU)
May	Kaitlyn Sze, BSN, RN	Telemetry
June	Bethany Conner, MSN, RN, C-EFM	Labor & Delivery
July	Kelly Mackey, BSN, RN, C-EFM	Labor & Delivery
August	Justyna Czerniak, BSN, RN	Medical Neurology Oncology (MNO)
September	Kaitlyn Stingel, BSN, RN	Acute Care of the Elderly (ACE)
October	Linda Farmer, BSN, RN, OCN	Outpatient Infusion
November	Jose Bueno Ventura, RN, PCCN	Critical Care Unit (CCU)
December	Lavanya Reddy, RN, CCRN	Pre-Admission Testing (PAT)

Completed and Ongoing Research in 2022

Study Title	Study Status	PI & Co-Pis
Patient- and Family-Centered Obstetrical Nursing Interventions and the Relationship with Successful Vaginal Delivery	Protocol Draft Stage	Ellen Winkle, MSN, RN Shelby Sample, MSN, RN Kari A. Mastro, PhD, RN Jennifer Hollander, MSN, RN Kelly Lamonica, DNP, RN
Description	Dissemination	

This **Research Study** will evaluate the relationship between patient- and family-centered interventions that nurses normally provide during the labor stages and the ability of the patient to successfully deliver their baby vaginally.

Study Title Study Status PI & Co-PIs The Effects of a Multiprofessional Prone Complete Kari A. Mastro, PhD, RN, NEA-BC

Positioning Team on Pressure Injuries, Skin Integrity, Oxygenation, and FIO2 Requirement in SARS-CoV-2 infected Acute Respiratory Distress Syndrome Patients

Kari A. Mastro, PhD, RN, NEA-BC Connie Johnson, MSN, RN Karyn Book, MSN, RN Jennifer Mac, BSN, RN, CCRN Janet Viscomi, MSN, RN, CCRN April Em, PT, DPT

Description Dissemination

This is a **Research Study** in which a new intervention was put into place to ensure that patients did not develop pressure injuries.

Publication: Johnson C., Giordano, N.A., Patel, L., Book, K.A., Mac, J., Viscomi, J., Em. A., Westrick, A., Koganti, M., Tanpiengco, M., Sylvester, K., Mastro K.A. (2022). *Pressure Injury Outcomes of a Prone-Positioning Protocol in Patients with COVID and ARDS*. American Journal of Critical Care, 31: p34-41.

News release: on AACN site: https://www.aacn.org/newsroom/penns-proning-team-adds-wound-care-specialist

Study Title Study Status PI & Co-PIs

Examining Trends in Heart Failure Admissions at One Academic Medical Center During the SARS-CoV2 Pandemic Complete

Brielle Hamilton, MSN, RN, CCRN
Kari A. Mastro, PhD, RN, NEA-BC
Deanna Gomez, BSN, RN
Karyn Book, MSN, RN
Charul Yaday, BSN, RN
Lisa Motavalli, MD, FAAC
Craig Gronczewski, MD, MBA
Sheila Kempf, PhD, RN, NEA-BC
Nicholas Giordano, PhD, RN

Description Dissemination

This is a **Research Study** that identifies factors contributing to a reduction in readmissions during the COVID-19 pandemic and describes the behaviors, treatments and self-care strategies that patients used to manage their heart failure (HF) symptoms at home. This study was submitted for publication and has also been accepted for presentation at a national conference. Additionally, the results of this study are informing a new program PMPH has developed in the community to support patients with HF care at home.

Publication: Hamilton, B., Yadav, C., Giordano, N., Kempf, S., Gronczewski, C., Mastro, K.A., Heart Failure (2021) *Heart Failure Readmission Reductions During the COVID-19 Pandemic: Behaviors, Treatments and Self-Management Strategies Used by Patients and Caregivers at Home.* Nursing Mangement, 2022, been p. 26-33.

Study Title	Study Status	PI & Co-PIs
The Effects of a Multidimensional Patient- and Family-Centered Diabetes and Eating Disorder Protocol (D&EDP) on the Patient's Ability to Manage their Diabetes and Eating Disorder Safely	Ongoing	Corinne Timberman, BSN, RN, PMHN-BC Lauren Firman, BSN, MHA, RN, CNML Robbi Alexander, PhD, APN, PMHNCNS-BC Kari A. Mastro, PhD, RN, NEA-BC
Description	Dissemination	
This is a Research Study that examines the effecti patient- and family-centered diabetes and eating d program that is currently in place at Penn Medicine Medical Center's Eating Disorder Unit (EDU).	isorder care	

Study Title	Study Status	PI & Co-PIs
Evaluation of New Graduate Nurse Preparedness: A National Study	Ongoing	Kari A. Mastro, PhD, RN, NEA-BC Nicholas Giordano, PhD, RN Sheila Kempf, PhD, RN, NEA-BC Beth Smith, MSN, RN, NPD-BC Rosemary Polomano, PhD, RN, FAAN
Description	Dissemination	n
This is a Research Study that examines the preparaduate nurses who participate in a 12-month rethe Vizient/AACN Nurse Residency Program. This national data responses of new graduate nurses Graduate Nurse Experience Survey, Nurse Resider Progression Survey and Overall Program Evaluation	esidency through study evaluates to the Casey-Fink ncy Program	

Study Title	Study Status	PI & Co-PIs
The Effects of COVID-19 Pandemic on New Graduate Nurse Perceptions of Preparedness to Provide Safe Patient Care: Learning in a Virtual vs. Traditional In-Person Environment	Ongoing	Allison Healy, MSN, RN-C Andre Angelia, BSN, RN, CCRN Wendy Luca, MSN, RN, ONC Karyn Book, MSN, RN Kelly Gallagher, MSN, RN, NPD-BC Beth Smith, MSN, RN, NPD-BC Sheila Kempf, PhD, RN, NEA-BC Nicholas Giordano, PhD, RN Rosemary Polomano, PhD, RN, FAAN Kari A. Mastro, PhD, RN, NEA-BC
Description		Dissemination
This is a Research Study that examined the effects of the COVID-19 pandemic on newly licensed nurses participating in the Vizient/AACN Nurse Residency Program and their perceptions of preparedness to provide safe patient care.		Publication: Healy, A., Luca, W., Gallagher, K., Angelia, A.J., Book, K.A., Smith, B., Renkema, A., Kempf, S., Giordano, N.A., Polomano, R., Mastro, K.A. (2022). <i>An Evaluation of Traditional versus Virtual Nurse Residency Programs on New Graduate Nurses' Perceptions of Preparedness to Provide Safe Patient Care</i> . Journal for Nurses in Professional Development, (accepted,: pending publication)

Study Title	Study Status	PI & Co-PIs
Exploring Best Practices in the Treatment of Severe and Enduring Anorexia Nervosa	Ongoing	Mindy Parisi-Cummings, PhD Robbi K. Alexander, PhD, APN, PMHCNS-BC Rebecca G. Boswell, PhD
Description	Dissemination	
This is a Research Study that explores the treatment best practices for individuals with severe and enduratives (SE-AN) to understand their treatment experses to treatment. The information gather will treatment for patients with SE-AN.	ring anorexia eriences and	

Study Title	Study Status	PI & Co-PIs
Mental Health Outcomes of Nurses During the COVID-19 Pandemic: (Compassion Fatigue, Job-Burnout, Secondary Tramatic Stress and Resilience)	Protocol Draft Stage	Nowai Keleekai-Brapoh, PhD, RN, NPD-BC Kari A. Mastro, PhD, RN Christine Trusiani, BSN, RN
Description	Dissemination	
This Research Study will evaluate the mental health outcomes of nurses throughout Penn Medicince and in the State of New Jersey and the demographic and environmental predictors of compassion fatigue, job-burnout, secondary tramatic stress and resilience.		

Study Title	Study Status	PI & Co-PIs	
U.S. Clinician Wellbeing Study	Ongoing	Linda H. Aiken, PhD, RN Karyn Book, MSN, RN	
Description	Dissemi	nation	
This is an international Research Study in which Penn Medicine Princeton Health is paired up with a European hospital in Denmark and is mentoring them to become a Magnet hospital.			

Study Title	Study Status	PI & Co-PIs
Improvements in the Nurse Practice Environment Effects on Job Enjoyment and Intent to Leave		Karyn Book, MSN, RN Jennifer Hollander, MSN, RN
Description	Dissemination	
This is an interventional study evaluating strategic improvements in the nurse practice environment to improve job satisfaction and reduce turnover.		

Nursing Residents Degrees

RN

SCU

SCU

Zachivett Rodriguez

Credentials:

Walter Rouba

Sabreen Sehgal

Credentials:

Credentials:

Julie Stokes

Credentials:

Credentials:

Ian Wood

Credentials:

Benjamin Woller

Unit:

Unit:

Unit:

Unit:

Unit:

Unit:

BSN, RN

BSN, RN

MNO

RN

FR

BSN, RN

BSN, RN

BSN, RN

BSN, RN

MNO

SCU

Tele

OR

March 2022 Cohort Michelle Ansona Cherie Martin Credentials: BSN, RN Credentials: Unit: OR Unit:

Andrew Aupperle Sydney McDonald Credentials: RN Credentials: ACE Unit: Unit:

Stephanie Barr BSN, RN Credentials: Unit: Tele

Jacqueline Buresch Credentials: BSN, RN Unit: OR

Alexa Cottrell Credentials: RN Unit: Tele

Doug McCord Credentials: BSN, RN Unit: FR

Lauren Emmons Credentials: BSN, RN Unit: OR

Gisell Guevara Credentials: RN Unit: OR

Heather Lonkert Credentials: BSN, RN Unit: ACE

August 2022 Cohort

Brianna Bartlett Credentials: BSN, RN Unit: MBU

Julianna Born Credentials: RN CCU Unit:

Noelle Carpenter Credentials: BSN, RN Unit: ER

Brianna Cooper Credentials: BSN, RN Unit: SCU

Jordan DeLange Credentials: RN **ACE** Unit:

Angelina Francheschini Credentials: BSN, RN Unit: CCU

Rebbeca Geddis Credentials: BSN, RN Unit: OR

Sarah Haynie Credentials: BSN, RN Unit: **Pediatrics**

Elizabeth Jasabe Credentials: MNO Unit:

Rachel Karousatos Credentials: BSN, RN Unit: Labor & Delivery

Margaret Kelly Credentials: RN Unit: Tele Jessica Lapolice Credentials: BSN, RN

Tele

Unit:

Elizabeth Lawson

Credentials: BSN, RN Unit: Tele

Ashley Marshall

Credentials: BSN, RN Unit: OR

Kelly McBride

Credentials: BSN, RN Unit: MNO

Audrey-Li McDowell Credentials: BSN, RN Unit: CCU

Jauw Montalbo Credentials: BSN, RN Unit: CCU

Mallory Mullen Credentials: BSN, RN Unit: Labor &

Delivery

Erica Otters BSN, RN Credentials: Unit: FR

Javce Palamattam Credentials: RN SCU Unit:

Pamela Palattao Credentials: Unit: OR

Credentials: BSN, RN Unit: FR

Credentials: BSN, RN Unit: MNO

Kerianne Rockhill Credentials: RN Unit: **ACE**

Samantha Samuels Credentials: RN SCU Unit:

November 2022 Cohort

Megan Cerone Credentials: BSN, RN Unit: Labor & Delivery

Samantha Couch Credentials: RN Unit:

ASC

Kylie Elder Credentials: BSN, RN Unit: MBU

Allyson Quay Credentials:

BSN, RN Unit: Wing 5

Brian Segueria Credentials: BSN, RN Unit: SCU

Kimberly Tran Credentials: BSN, RN Unit: CCU

New Degrees

Christina Brescia

Credentials: MBA, BSN, RN

Unit: Cardiac & Pulmonary Rehab
New Degree: MBA-Healthcare Management

Month: July 2022

School: Western Governor's University

Kesha Tégé

Credentials: MSN, FNP-BC

Unit: Penn Medicine Physicians

New Degree: MSN

Month: August 2022

School: The College of New Jersey

Danielle Kane

Credentials: DNP, APN, AGACNP-BC, CCRN

Unit: Critical Care
New Degree: DNP

Month: May 2022

School: Rutgers University

Katrina Pfeiffer

Credentials: DNP, RN, CPN
Unit: Clinical Informatics

New Degree: DNP

Month: August 2022 School: Post University

Lisa Wade

Credentials: BSN, RN, C-EFM

Unit: Administrative Coordinator

New Degree: BSN Month: May 2022

School: Western Governor's University

Christine Ziegler

Credentials: BSN, RN, C-EFM Unit: Labor & Delivery

New Degree: BSN

Month: December 2022

School: Western Governor's University

Meredith Lenhardt

Credentials: MSN, RN, CNOR
Unit: Operating Room

New Degree: MSN

Month: December 2022 School: Colby-Sawyer College Alexandra Vazquez

Credentials: MSN, RN, FNP-BC
Unit: Operating Room

New Degree: MSN Month: May 2022

School: Monmouth University

Johanna Dominguez

Credentials: BSN, RN
Unit: MNO
New Degree: BSN

Month: December 2022

School: Chamberlain University

Matthew Jaworsky

Credentials: BSN, RN
Unit: ASC
New Degree: BSN

Month: September 2022 School: Rider University

Erick Tejada

Credentials: MSN, RN
Unit: ASC
New Degree: MSN

Month: August 2022

School: Vanderbilt University

Michelle Ekiz

Credentials: BSN, RN
Unit: NICU
New Degree: BSN

Month: October 2022

School: Thomas Edison State University

Olufunke Ayetigbo

Credentials: MSN, RN, PMHNP
Unit: Float Pool
New Degree: MSN

Month: December 2022 School: Wilkes University

Kristyn Compitello

Credentials: MSN, RN, CMSRN, CPN, RNC-MNN Unit: Department of Education

New Degree: MSN
Month: March 2022

School: Chamberlain University

New Certifications

Alyssa Ryan

BSN, RN, GERO-BC, MEDSURG-BC Credentials:

Unit: ACF/CDU

New Certification: Gerontological Nursing,

Medical Surgical Nursing

Organization: American Nurses Credentialing Center

(ANCC)

Elizabeth Gross

Credentials: BSN, RN, MEDSURG-BC

ACE

New Certification: Medical Surgical Nursing

Organization: American Nurses Credentialing Center

Alicia Paige

Credentials: BSN, RN, PCCN Unit: Telemetry

New Certification: Progressive Care Certified Nursing American Association of Critical Care Organization:

Nursing (AACN)

Megan Parise

Credentials: RN, WCC Unit. Telemetry

New Certification: Wound Care Certified

National Alliance of Wound Care and Organization:

Ostomy (NAWCO)

Kelly Clark

Credentials: BSN, RN, GERO-BC

New Certification: Gerontological Nursing

Organization: American Nurses Credentialing Center

(ANCC)

Jessie Twerdak

Credentials: BSN, RN, GERO-BC, MEDSURG-BC

Unit:

New Certification: Medical Surgical Nursing

American Nurses Credentialing Center Organization:

(ANCC)

Katerina Martinez

Credentials: BSN, RN, CCRN

Unit:

New Certification: Critical Care Certified Nursing American Association of Critical Care Organization:

Nursing (AACN)

Sarah Devlin

Credentials: BSN, RN, CCRN

New Certification: Critical Care Certified Nursing Organization: American Association of Critical Care

Nursing (AACN)

Maria Saia

Credentials: BSN, RN, CNOR

New Certification: Certified Perioperative Nurse

Organization: Competency Credentialing Institute

Julia Vanzini

Credentials: BSN, RN, CCRN

CCU

Critical Care Certified Nursing *New Certification:*

Organization: American Association of Critical Care

Nursing (AACN)

Angela Gaite

Credentials: BSN, RN, MEDSURG-BC

SCU Unit:

New Certification: Medical Surgical Nursing

Organization: American Nurses Credentialing Center

(ANCC)

Kesha Tégé

Credentials: MSN, FNP-BC

Unit: Penn Medicine Physicians *New Certification:* Family Nurse Practitioner

American Nurses Credentialing Center Organization:

(ANCC)

Danielle Kane

Credentials: DNP, APN, AGACNP-BC, CCRN

Unit: Critical Care

New Certification: Adult-gerontology Acute Care Nurse

Practitioner

Organization: American Nurses Credentialing Center

(ANCC)

Amber Parker

Credentials: BSN, RN, CEN, CPAN

Unit: PACU

New Certification: Certified Post Anesthesia Nurse American Society of PeriAnesthesia Organization:

Nursing (ASPAN)

Ellen Winkle

Credentials: MSN, RNC-OB, C-EFM, EBP-C Unit: Department of Education

New Certification:

Evidence Based Practice Certification Helene Fuld Health Trust National Organization:

Institute for EBP in Nursing and

Healthcare

Eileen Catinello

Credentials: BSN, RN, OCN

MNO

New Certification: Oncology Certifed Nurse Organization: Oncology Nursing Certification

Corporation

Meredith Lenhardt

Credentials: MSN, RN, CNOR Unit: Operating Room

New Certification: Certified Perioperative Nurse Organization: Competency & Credentialing Institute

Alexandra Vazquez

MSN, RN, FNP-BC Credentials: Unit: Operating Room *New Certification:* Family Nurse Practitioner

Organization: American Nurses Credentialing Center

(ANCC)

Rebekah Backes

Credentials: BSN, RN, PED-BC Unit: Pediatrics

New Certification: Pediatric Nursing Certification

Organization: American Nurses Credentialing Center

(ANCC)

Mary Voorhees

Credentials: MSN, RN, CNOR Unit: Operating Room

New Certification: Certified Foundational Perioperative

Nurse

Organization: Competency & Credentialing Institute

(CCI)

Vanessa Petition

Credentials: RN, C-EFM Unit: Labor & Delivery

New Certification: Electronic Fetal Monitoring

Organization: National Certification Corporation (NCC)

Chinonye Nkemka (Chi)

Credentials: BSN, RNC-OB, C-EFM Unit: Labor & Delivery

New Certifications: Electronic Fetal Monitoring and

Inpatient Obstetric Nursing

Organization: National Certification Corporation

(NCC)



Poster Presentations

Creating the Perfect Fit

Author(s): Judy Kelly, BSN, RN, WCC, OMS; Ramez Juha, MD, FACS

Conference: Wild on Wounds Location: Hollywood, FL

Changing the Concentration

Author(s): Megan Parise, RN, WCC; Alexis Casano, BSN, RN, PCCN; Sophia Desrosiers, MA, MSN, RN;

Taylor LaCorte, BSN, RN, WCC

Conference: Wild on Wounds Location: Hollywood, FL

Standardized Checklist Process Improves STEMI Emergency Department Door-to-Balloon Times

Author(s): Jeannie Arena, MSN-Ed, RN; Mindi Nahoum, MA, RN; Sandi Mariani, MSN, RN-BC;

Karen Sylvester, MSN, RN, CEN; Craig Gronczewski, MD, MBA; Andrew Shanahan, MD

Conference: ANCC Magnet Conference

Location: Philadelphia, PA

The Outcomes Associated with a Pressure Injury Prevention Prone Positioning Protocol on Pressure Injuries in SARS-COV-2 Infected Acute Respiratory Distress Patients: A Multi-Center Observational Study

Author(s): Karyn Book, MSN, RN; Kari Mastro, PhD, RN, NEA-BC; Connie Johnson, MSN, RN, WCC, OMC,

LLE, DWC; Jennifer Mac, BSN, RN, CCRN; Janet Viscomi, MSN, RN, CCRN; Mindaline Tanpiengco, BSN, RN, CCRN; Anna Westrick, MD; Karen Sylvester, MSN, RN, CEN; April Em, PT, DPT; Lopa Patel, DNP,

RN; Monika Koganti, MD; Nicholas Giordano, PhD, RN

Conference: ANCC Magnet Conference

Location: Philadelphia, PA

Utilizing M4E Gap Analysis and International Collaboration Towards Establishing a New Shared Governance Model

Author(s): Allison Benziger, MSN, RN-BC; Karyn A. Book, MSN, RN; Jackie Keane, MSN, RN, NPD-BD; Caroline Stewart,

MSHI, RN; Cheryl Reinking, DNP, RN, NEA-BC, DipACLM; Patrick Nieulandt; MSN, RN; Claudia Peeters, RN;

Sandra Maes

Conference: ANCC Magnet4Europe Learning Collaborative

Location: Cork, Ireland (virtual attendance)

The Impact of Smart Pumps and EHR Interoperability Technology on Intravenous Medication Errors

Author(s): Katrina Pfeiffer, DNP, RN, CPN

Conference: Penn Medicine Nursing Research & Evidence-Based Practice Virtual Conference

Location: Virtual

Examining Trends in Heart Failure Admissions at One Academic Medical Center During the SARS-CoV2 Pandemic

Author(s): Brielle Hamilton, MSN, RN, CCRN; Charul Yadav, BSN, RN; Deanna Gomez, BSN, RN; Nicholas Giordano,

PhD, RN; Lisa Motavalli MD; Sheila Kempf, PhD, RN, NEA-BC; Karyn Book, MSN, RN; Craig Gronczewksi

MD; Kari Mastro, PhD, RN, NEA-BC

Conference: NYU Langone Health 25th Annual Nursing Research Conference

Location: New York, New York (NYULH)

Podium Presentations

Published Articles

Changing the Concentration

Presenter(s): Megan Parise, RN, WCC
Conference: Wild on Wounds
Location: Hollywood, FL

A Lesson in Cultural Humility: Examining Best Practices for Care for Gender-Diverse Patients

Presenter(s): Corinne Timberman, BSN, RN,

PMHN-BC

Amber Molineaux, BSN, RN,

PMHN-BC

Conference: 48th Transcultural Nursing Society

Annual Conference

Location: Louisville, KY

Hoping for a Miracle: Palliative Care... The Beginning

Presenter(s): Sue Straszynski, DNP, RN, C-EFM,

RNC-OB, CPLC

Bernadette Flynn Kelton, BSN, RN,

PCE, IBCLC, RLC

Conference: 23rd International Perinatal

Bereavement Conference

Location: Denver, CO

I'm Acredited, Now What? Keeping Up on the Standards in Between Visits

Presenter(s): Donna Post, BSN, CBN

Conference: American College of Surgeons (ACS)

Quality and Safety Conference

Location: Chicago, IL

More than One Way to Wrap a Joint

Presenter(s): Michael Katzman, MSN, RN, FNP-C,

ONC, WCC

Conference: Wild on Wounds Location: Hollywood, FL

Creating the Perfect Fit

Presenter(s): Judy Kelly, BSN, RN, WCC, OMS

Conference: Wild on Wounds Location: Hollywood, FL

An Evaluation of Traditional Versus Virtual Nurse Residency Programs on New Graduate Nurses' Perceptions of Perparedness to Provide Safe Patient Care

Journal: Journal for Nurses in Professional

Development

Author(s): Allison Healy, MSN, RN-BC

Wendy Luca, MSN, RN, OCN

Kelly Galagher, MSN, RN, NPD-BC, NEA-BC

Andre Angelia, BSN, RN, CCRN

Karyn A. Book, MSN, RN

Beth A. Smith, MSN, RN, NPD-BC

Angela Renkema, MPH, BSN, RN, NPD-BC,

RN-BD, CPH

Sheila G. Kempf, PhD, RN, NEA-BC Nicholas Giordano, PhD, RN

Rosemary Polomano, PhD, RN, FAAN Kari A. Mastro, PhD, RN, NEA-BC

Association of Time to Rapid Response Team Activation with Patient Outcomes Using a Range of Physiological Deterioration Thresholds

Journal: Critical Care Explorations
Author(s): Oscar J. L. Mitchell, MD

Oscar J. L. Mitchell, MD Stacie Neefe, BSN, RN

Jennifer Ginestra, MD, MSHP William D. Schweickert, MD

Scott Falk, MD

Gary E. Weissman, MD, MSHP Donna Covin, MSN, RN, CNL

Justine Shults, PhD

Benjamin S. Abella, MD, Mphil Michael G. S. Shashaty, MD, MSCE

The Relationships Between Diabetes Self-Care, Diabetes Time-Management, and Diabetes Distress in Women with Type 2 Diabetes Mellitus

Journal: Science of Diabetes Self-Management

and Care

Author(s): Lisa Summers-Gibson, PhD, RN,

NEA-BC, CDCES





