



Closing In On Lung Cancer

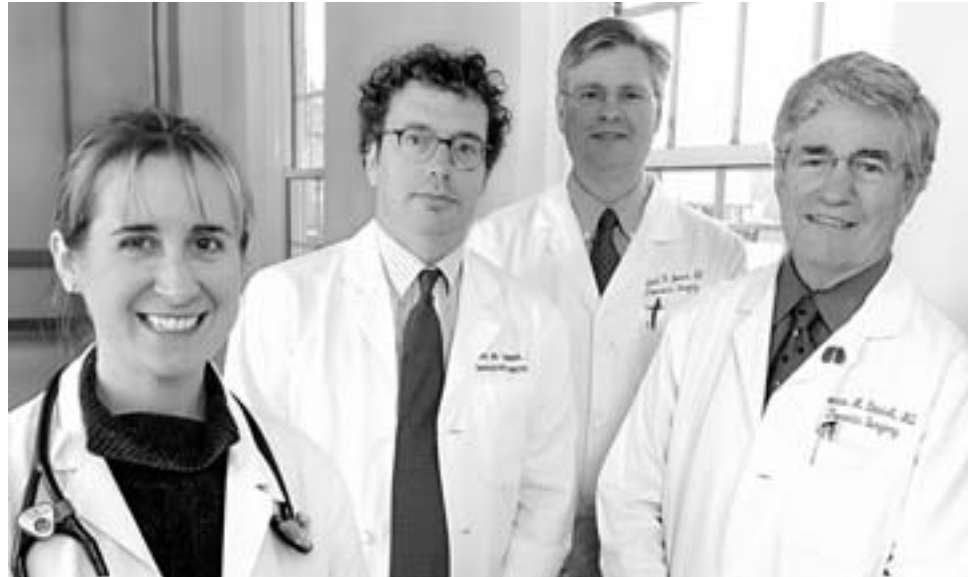
Several recent high-profile cancer cases have thrust lung cancer in the national spotlight. And deservedly so – no other cancer kills more Americans than lung cancer.

Though survival rates are still poor, recent research has led to better and earlier detection and more targeted therapies. UVa Health System is at the forefront of these advances.

For patients, this means access to innovations not offered elsewhere in Virginia. It also means the availability of a nationally respected group of lung cancer specialists. “Time is of the essence when battling lung cancer,” says UVa thoracic surgeon David R. Jones, M.D. “A quick and expert diagnosis and the latest treatments can make all the difference.”

Finding Lung Cancer Faster

Diagnosing lung cancer early is still challenging. CT scans often can spot smaller tumors than X-rays, but they can also detect abnormalities that are not cancerous, which require a biopsy. Invasive surgery has been the only way to determine whether a



At UVa Health System, a close-knit team including (left to right) Heidi Gillenwater, M.D., James Larner, M.D., David R. Jones, M.D., and Thomas Daniel, M.D., are employing powerful new drugs, radiation and imaging techniques in the war against lung cancer.

lung lesion is cancerous. In contrast, UVa is the only Virginia hospital offering an innovative technique that can both detect and biopsy a lesion as small as a pea. “We can reduce the number of invasive procedures and at the same time stage the tumor and determine if surgery is viable,” Jones says.

New Treatment Options, Fewer Side Effects

Few are diagnosed at a surgically treatable stage, though, making chemotherapy and radiation treatment a primary line of defense. But these drugs damage healthy cells along with malignant ones, causing significant side effects. UVa researchers are actively testing chemotherapy treatments that, in studies performed at UVa, reduced cancer cell growth with fewer side effects. UVa also introduced Virginia’s first tomotherapy technology, a highly targeted form of radiation therapy that more effectively kills cancer cells and in fewer sessions.

UVa also uses minimally invasive surgical techniques to reduce unnecessary trauma and spare healthy tissues. With smaller incisions, patients have less pain and fewer complications. “Whenever possible,” Jones says, “our surgeons perform these procedures because they’re safer and patients are less likely to have breathing difficulties.”

For more information, visit www.uvahealth.com or call 888-882-3435.

P.2 Innovative approaches to training nurses

P.5 Parents-to-be find answers

BP Enroll in a clinical trial (on back page)

When Disasters Strike, UVa Employees Respond

Dan Stone, R.N., MSN, who works in the Surgical/Trauma Intensive Care Unit, represents the sentiments of many UVa Health System employees who feel the call to help when natural disasters strike.

“How could you not go? It was such a huge catastrophe,” Stone said about his month-long stint last January aboard the Mercy ship that brought medical help to Indonesia in the weeks after a tsunami devastated the area.

More recently, over 700 UVa Health System employees have requested to be placed on a list of volunteers, who may be deployed if requested by agencies assisting the

communities impacted by Hurricane Katrina.

Gabrielle Bergmann, a nurse practitioner in UVa’s La Clinica that provides health care to Spanish-speaking women, also spent time aboard Mercy off the coast of Banda Aceh, Indonesia – one of the areas hardest hit by the tsunami. Bergmann, Stone and about 200 other tsunami volunteers from the United States were personally thanked by President George W. Bush during a ceremony in July on the lawn of the White House.

“I decided to volunteer simply
See “Aiding Disaster Victims”
continued on page 4

Parents-To-Be Find Answers



Anne Peery, a UVa nurse and lactation consultant, demonstrates how to use a breast pump during a recent lunchtime forum at Northridge for soon-to-be working moms.

With concerns from safe medical practices to proper infant care, expectant mothers face anxiety in all shapes, sizes and forms.

“Have Lunch with an Obstetrician,” a series of informal lunchtime forums at Northridge on U.S. 250 West, gives parents-to-be a chance to assuage fears of the unknown. Sponsored by Women’s Health Services at the UVa Health System, the free sessions feature obstetrics and gynecology experts who field questions and stimulate discussion on various pregnancy-related issues. The hour-long forums are open to the general public and begin at 11:45 a.m.

Diane Sampson coordinates the program and lines up experts to talk about breastfeeding and the workplace, aches and pains of pregnancy, making the most of pediatrician visits, household safety for infants, and preparing for emotional and physical changes after a baby is born.

The forums typically draw about 10 to 18 people – a mixture of first-time and repeat visitors. Sampson believes the program’s success lies in its air of casual comfort. “It’s very informal,” she says. “We put the chairs in a circle and encourage a discussion with a give-and-take, seminar-like quality to it.”

Sampson uses her institutional knowledge to match topics that patients request with the best-qualified experts. She likes to bring in caregivers from a broad spectrum of disciplines.

“It’s been very interdisciplinary,” she says of the two-year program. “It

encompasses all of the UVa staff. I’ve really tried to make it a team effort.”

Among the regular presenters are lactation consultant Anne Peery, R.N., IBCLC; pediatrician Anne Ranney, M.D.; Emily Lyster, MSW, program director of SafeKids; and pediatrician John Schmitt, M.D., who leads a team of OB/GYN doctors at Northridge.

Schmitt’s “Is it Safe?” forum generates many questions on what women should and should not do during pregnancy. Exercise intensity, airline travel, alcohol consumption, changing cat litter boxes and eating sushi are among concerns that arise.

To prepare, Schmitt draws mostly from his years of experience. “The concept was something I thought would be helpful,” he says. “I spend virtually my entire work day answering those kinds of questions. The only difference is this is in a group forum.”

Part of his job is to separate truth from fiction. “I try to allay some fears and suppress some unfounded tales and myths that circulate among child-bearing women,” he says. “It ends up being just a really fun experience.”

Karen Woodson, who is expecting her first child in early fall, has attended three lunches since May. She’s learned something from each one, but found the session on pregnancy’s aches and pains particularly illuminating.

“I actually had several questions myself,” she says. “I found I wasn’t alone in that experience. That there were a lot of other women there in similar circumstances made it very comfortable to talk about. They had

Spotlight on Patient Safety

What Is a Universal Protocol and Why Is It So Important?

The Universal Protocol is a standard approach to verifying that the surgical team has the correct supplies and equipment to perform the desired procedure on the right patient. It allows the patient to be involved in the process and encourages active communication among team members, giving each member the responsibility to stop the procedure until any questions have been addressed and all team members are in agreement with the plan.

Nationwide, patients and health care teams are working together to prevent wrong-patient, wrong-site, wrong-procedure surgeries. Here at UVa, Irving Kron, M.D., chair of the Department of



Surgery, and Alan Matsumoto, M.D., division head of Interventional Radiology, Angiography and Special Procedures, have led the charge in providing a consistent message to doctors, nurses and technicians that taking a timeout immediately prior to starting an invasive procedure is time well spent to ensure safety. During the timeout, team members verify the patient’s identity, the specific procedure to be performed and that all needed equipment, supplies and images are available. The person performing the procedure verifies the site and the positioning of the patient.

The Universal Protocol is used throughout the Medical Center and Clinics when an invasive procedure is performed. For more information, see Medical Center Policy 0250 and www.jcaho.org.

good solutions I used – and they worked.”

For information on OB/GYN issues and upcoming lunchtime forums, visit www.healthsystem.virginia.edu/women. To register, contact Diane Sampson at 434-924-9920 or des4v@virginia.edu.

UVa Health System has implemented two distinct programs that bring innovative approaches to the training and educating of nurses. The Clinical Nurse Leader and Nurse Residency programs are helping UVa maintain the highest standards of care amidst a shrinking pool of qualified nurses nationwide.

Generating Nurse Leaders

Nurses adept at leadership, critical thought, collaboration and care management are increasingly vital to the modern health care setting. The UVa School of Nursing embraces this “new nurse” concept as a pilot participant in the Clinical Nurse Leader (CNL) program. Developed by the American Association of Colleges of Nursing (AACN), CNL is a master’s program with a nursing major based on strong point-of-care leadership. UVa enrolled its first class of 22 students for the 24-month program this fall.

The CNL concept is based on three tenets beyond the scope of

Kathryn Reid, Ph.D., R.N., CCRN. Co-leaders Pam Dennison, R.N., MSN, and nursing administrator Leah Wacksman, R.N., MSN, helped design the program. They coordinate the practice partnership aspects, including the vital preceptor identification and training for student clinical experiences.

Each CNL student is paired with an experienced UVa nurse preceptor in clinical settings. “Historically, nursing education has moved from completely hospital-based to completely school-based training,” Hamric says. “We’re very excited that we are building on the

program and are as excited about teaching me as I am to learn from them,” she says.

The CNL program leaders chose students for their career and life experiences as well as educational backgrounds, Reid says. Picked from a pool of 106 applicants, the 22 finalists comprise a crazy-quilt of career paths and passions: a civil engineer, a studio artist, a self-described “computer geek,” a sociologist from Kenya – and even a dolphin trainer. “We have students with some very non-traditional backgrounds,” Reid says. “For a variety of reasons they were drawn to nursing.”



▲ Reba Childress, MSN, FNP, APRN, B.C., an assistant professor in the School of Nursing, assists nursing student Oscar John Orban as he practices drawing medication.

◀ UVa nursing students (left to right) Naomi Gorton, Becky Gamon and Tanya Bolden learn valuable patient-care skills during a hands-on demonstration overseen by instructor Amy Hiles, MSN, R.N., ANP, (second from left).

traditional patient care: use of evidence-based practices – decisions rooted in researched knowledge and critical analysis; ability to lead in a team environment; and ability to create changes in health care settings to improve patients’ experiences and outcomes.

UVa is one of 88 academic nursing schools partnering with 186 health care institutions to nurture the CNL role. Each entity takes an individualized approach to training within AACN guidelines. As president-elect of the AACN, School of Nursing Dean Jeanette Lancaster, Ph.D., R.N., FAAN, advocated UVa’s participation.

Ann Hamric, Ph.D., R.N., FAAN, carved UVa’s path with co-director

strengths of both with this preceptor-clinical faculty relationship.”

CNL students met their preceptors at a Sept. 14 luncheon in McLeod Hall. Student Becky Gamon enjoyed the opportunity to meet her mentors. “I was really impressed with the preceptors,” she says. “It’s amazing we’re going to be paired one-on-one with these outstanding nurses.”

The Louisa County native heard about the program from her sister, a fourth-year UVa nursing student. Gamon is confident she made the right decision to become a nurse rather than pursue an experimental psychology degree. “It’s so exciting to know that some of the world’s greatest nurses helped design this

Like Gamon, Tanya Bolden found the idea of earning a master’s degree in two years while gaining cutting-edge nursing skills too appealing to pass up. She hopes to put her exercise physiology degree from George Mason University to use in a clinical setting, and eventually start an obesity clinic.

“I want to build upon my leadership skills – not just in nursing but every aspect,” the Mississippi native says. “I also want to learn how to accept the challenges that come from being a nurse, and I want to be of service to people. If you have an opportunity to serve people, you need to do it.”

Easing Work Transition for New Nurses



Kristi Kimpel (center), MSN, R.N., Clinician III, resident facilitator in the Surgical/Trauma/Burn Intensive Care Unit, looks up patient information in the CareCast system with nursing residents Jennifer Dowell (left front); Loren Edwards; Janette Lloyd (back left); Allison Murphy and Susan Hall.

The first new graduates started in June, and others arrived in early October.

Fankhauser believes the new program is a sound investment. "It's pretty resource intensive," she says, "but supporting and retaining these new graduates are well worth the time and effort."

and mentoring new nurses, it makes a difference in how those nurses are able to function and how satisfied they are with the job. It has an impact on their choice to ultimately stay or leave."

Program coordinator Karen Fankhauser cites UHC statistics from the late 1990s that showed 25 percent of nursing graduates changing employment in their first year. "As a result of a survey in 1999, human resources [administrators] found the keys to successful retention included residency programs, clinical advancement programs and continuing education."

Along with UVa, 29 other university medical centers are participating in the UHC/AACN program. UVa is hiring a total of 43 BSN-prepared graduates into the initial program.

The UVa Medical Center is participating in a program designed to help new nurses transition from the learning environment to the clinical setting. Sponsored by the University HealthSystem Consortium (UHC) and the American Association of Colleges of Nursing (AACN), the Nurse Residency Program provides recent baccalaureate-level graduates an opportunity to work full-time at UVa for one year with an emphasis on orientation, mentoring and close staff support. A collaboration between the UVa Medical Center and the School of Nursing, the year-long program focuses on the following elements: development of effective decision-making skills related to clinical judgment and performance, providing clinical nursing leadership at the point of care, strengthened commitment to nursing as a professional career choice, formulation of an Individual Development Plan relating to a new clinical role, and incorporation of research-based evidence linked to practice outcomes. The nurse may continue working as a clinical nurse at UVa after a successful evaluation at the end of the year.

At other institutions across the country that have implemented this program, new nurses are reporting higher levels of perceived competency and overall satisfaction with nursing as a career choice. Residency Program adviser Kathryn Reid, Ph.D., R.N., says initial direction and guidance are crucial to a new nurse's long-term viability. "When you are starting a career, it takes a lot of time to get fully integrated into the nursing practice," she says. "Evidence shows that when hospitals put a lot of attention into orienting



Evidence

shows that when hospitals put a lot of attention into orienting and mentoring new nurses, it makes a difference in how those nurses are able to function and how satisfied they are with the job.

Kathryn Reid, Ph.D., R.N.

Running for a Cancer Cure



These peri-op nurses were among many UVa Health System employees who took part in the 2005 Charlottesville Women's Four Miler, which broke a fundraising record with more than \$100,000 going to the UVa Cancer Center's Breast Care Program. The event is hosted by Charlottesville Track Club and directed by Cynthia Lorenzoni, owner of Ragged Mountain Running Shop. The UVa peri-op nurses dubbed their team, "The CAN, Cans," and proudly wore t-shirts with their slogan, "We can CAN Cancer." Seven nurses trained for over 12 weeks and five nurses participated on event day, earning an overall 15th place. "All of us have been touched by cancer. We care for cancer patients and/or have had a personal crisis related to this devastating disease. It was pure dedication, a lot of sweat and team spirit that got us through that finish line this past September 3," says team member Adrienne Garo-White, R.N., MSN, of the Pre-anesthesia Evaluation and Testing Center.

From left to right: Joanne Bower, R.N., BSN, Adrienne Garo-White, R.N., MSN, Clara Winfield, R.N., Jamie Trapp, R.N., Barb Cruickshank, R.N., MSN.

[People & News]

Zhiyi Zuo, M.D., Ph.D., associate professor in the **Department of Anesthesiology**, is the 2005 recipient of the Presidential Scholar Award. The annual recognition goes to a member of the American Society of Anesthesiologists whose research and patient care judges consider exemplary. The native of China is working on two projects, funded by the National Institutes of Health,

that focus on stroke victims, and a third to improve the lives of Alzheimer's patients. Zuo will present his research findings to the American Society of Anesthesiologists in October at the award ceremony in Atlanta.



Zhiyi Zuo, M.D.

Rosemarie Trapnell, RSW, a clinical social worker for the **Social Work Department**, is the Medical Center's August Employee of the Month. She was selected for her "very patient and understanding" approach. A colleague noted: "Rose works with the patients who are awaiting transplants and their families. She coordinates their pre-transplant care, transportation to the medical center, housing arrangements once surgery is scheduled and post-transplant care. ... She creates an atmosphere of quiet confidence that the patient's experience will be a positive one. ... Rose is never too busy to answer a question or help someone else resolve a problem with their work. Her enthusiasm and motivation spill over into community service, and she helps to coordinate various fund-raising events in the Charlottesville area."

"Best Nurse Manager" Honored
The nursing staff of Angio Interventional Radiology honored their nurse manager, Annette Silver, R.N., CMS, Clinician IV, for her untiring dedication to the department. (Silver is pictured on cover with Jim Amato, Radiology administrator, and Ginger Gilmer, R.N., BSN, Clinician II.) Silver took over as nurse manager of the angio department in August 2004 and immediately took ownership of making the department an even more efficient and enjoyable place to work. "From recruiting new staff to empowering current staff, Silver brings an energy and vitality to the everyday hustle and bustle. Her driven, purposeful and results-

oriented character is loved by all and she encourages her staff to take leadership within the department and throughout the institution," Gilmer says. To show their appreciation, the department's nurses presented Silver on Aug. 23 with a timepiece engraved with "Best Nurse Manager."

The paramedic program, **Medic 5**, is celebrating **15 years of valuable service**. Medic 5 was developed to provide acute emergency care to the patients and their family members of the University of Virginia Health System. The service employs more than 20 staff members, including nationally registered critical care paramedics and intermediates, and emergency medical technicians (EMTs). It has a fleet of five emergency ambulances, two wheelchair vans and two emergency response vehicles. Debra Perina, M.D., serves as operational medical director and Christopher O. Hucks supervises the program. Prior to Medic 5's inception, patients were transferred to and from clinics by crews with no medical training. Today, the emergency transport team provides coverage to the entire University Hospital facility and outlying UVa medical facilities, responding to more than 3,000 patient transports each year. The program also provides emergency transports from local hospitals to UVa as well as mutual aid for the Charlottesville-Albemarle Rescue Squad.

R. Edward Howell, vice president and chief executive officer of the Medical Center, and **Claudette Dalton, M.D.**, assistant dean and director of Community-Based Medical Education, accepted an award last month from the American



R. Edward Howell and Claudette Dalton, M.D.

Medical Association. The award recognizes UVa's innovative approaches to providing optimal care for communication-vulnerable patients, including those who have low literacy, are deaf, or do not speak English.

Jenn Oliver, director of human resources for the Department of Internal Medicine, is the **School of Medicine's Employee of the Month for August**. Oliver was praised for her organizational skills, ability to think through and improve processes, and keen awareness of the importance of her role in the faculty recruitment process. "You are considered a model for team work and a tireless work ethic," said Arthur Garson, Jr., M.D., M.P.H., vice president and dean of the School of Medicine.

Aiding Disaster Victims

continued from page 1

because the opportunity arose, and I couldn't NOT volunteer for something of this magnitude," says Bergmann, who started working at UVa last spring. "As the tsunami reports came in with death tolls in the hundreds of thousands, I started looking for organizations that would take volunteers to work over there, but most groups were telling people to send money. Then, magically, one night I received an email from the American Nurses Association 'urgently' recruiting nurses for Project Hope's joint venture with the Navy. ... I've done a lot of traveling and volunteering, but I can honestly say that this was one of the most

memorable and amazing experiences of my life."

Not surprisingly, Bergmann and Stone wanted to assist in the Katrina relief effort. However, work and family commitments kept them at home this time.

Due to the severity of the Hurricane Katrina disaster and the anticipated duration of the relief effort, the Medical Center has approved providing up to 80 hours of administrative leave to employee volunteers who are part of a sanctioned, documented relief effort. Employees who wish to volunteer should request administrative leave in writing from their manager. Before granting leave, managers will consult with their administrators to ensure that adequate coverage is maintained throughout the Medical Center.



TAKE NOTE

How clinical trials benefit you

At the University of Virginia Health System, clinical trials are taking place every day. Because of this, UVa is an environment of care where learning, discovery and innovation flourish. And it is our patients — today and in the future — who reap the rewards, whether or not they participate in a trial. Please call the trial coordinator to enroll confidentially or for additional information.

Advancing health care through clinical trials

Overactive Bladder Study

Healthy adults ages 65 and older are needed for a research study. Overactive bladder symptoms include frequency and urgency with or without wetting accidents. The purpose of the study is to gain additional understanding regarding safety and effectiveness of medication for overactive bladder. Seven office visits over 3 1/2 months are required. Study-related insert exams, tests and experimental medication are provided at no charge. Compensation for travel is provided. Primary Investigator: William Steers, M.D. HIC #11781(L), UVa Urology, **Pat Battle, CRC, 924-5649**

Effects of Salt on Blood Pressure

Men and women, ages 18 to 70, and generally healthy, normal weight to moderately overweight, are needed for a study involving the effects of salt on blood pressure. Participants will have limited genetic testing done and if selected for the study will have: a physical exam, EKG, chest X-ray, blood and urine tests, two weeks of prepared food and will be given \$100 after completing the study. HIC #11494(L), UVa Endocrinology, **Cindy Schoeffel, M.D., 924-1634, cds2t@virginia.edu, lowerbloodpressure.org**

Type 2 Diabetes Study

Men and women, ages 18-70 with type 2 diabetes and currently taking insulin, are needed for a study investigating the effect of timing of mealtime insulin on weight. Ten visits over one year required, and compensation is

\$40 per visit, payable at completion of study. Glucose monitoring supplies and study medications are provided. HIC #11354(L). UVa Endocrinology, **Shirley Fleishman, R.N., CDE, 243-5652** or sf9v@virginia.edu

Exercise Training Study

Male and female adults, ages 18 to 85, who have a waist circumference greater than 40 inches for males or greater than 35 inches for females are invited to participate in a 16-week exercise training study. Eligible participants will receive information regarding their body composition; physical fitness, function and performance; cholesterol, blood pressure, markers of vascular inflammation and function; glucose metabolism; quality of life; and cognitive function. In addition, participants will receive 16 weeks of supervised exercise training and dietary recommendations at no cost to the subject. Participants will be asked to complete two outpatient visits and two 2-3 day inpatient overnight admissions to the UVa General Clinical Research Center (GCRC) and will receive \$300 on completion of study. HIC #11145(L). Center for the Study of Complementary and Alternative Therapies. **Brian Irving, M.S., 243-8677, bi9n@virginia.edu**

Arthritis Study

Adults ages 50 and older who have been diagnosed with osteoarthritis of the knee are needed for a study to find out whether electrical stimulation reduces knee pain. Study involves 18

visits over 12 weeks. Questionnaires will be completed monthly. Study intervention with the device is provided at no cost. Participants will be paid \$200 after completing the study. HIC #11630 (L), UVa Center for the Study of Complementary and Alternative Therapies, **Jewel Holmberg, 924-0113, jrh4n@virginia.edu**

MRI Lung Study

Healthy volunteers ages 45 to 75 who have never smoked and have no respiratory allergies are needed for a lung study. Participants receive an MRI of the lungs using an investigational drug (hyperpolarized helium), a chest X-ray, physical exam, EKG, lung function test and lab tests. Study-related tests and drugs are provided at no charge. Compensation is \$50 for completion of the study. HIC #8973(L). UVa Radiology, **Doris Harding, R.N., 924-9603 dah6y@virginia.edu**

ADHD Study

Volunteers ages 8 to 12 without ADHD are needed for an ADHD study. Participants will have an EEG and complete questionnaires. The test results from those without ADHD will be compared to those with ADHD to increase understanding of this condition. Study-related tests provided at no cost. Compensation is a \$25 gift certificate for completion of the study. HIC #11465 (L), **UVa Psychiatry, Carolyn Runyon, 924-9526, cfr9r@virginia.edu**

Send trial submissions to linktrials@virginia.edu.



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the **LINK** newsletter



BREAKING NEWS

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At knowledgegelink.healthsystem.virginia.edu, the exclusive website for UVa Health System employees, you'll find: • **Headline News** • **Employee Perks** • **Information** to help you manage your life, career and money • **And a wealth of information** so you can be an informed employee.

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