

Western Pennsylvania Hospital News

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Inside ...

From Secret Survivor to Active Advocate: Marina Posvar Gives a Voice to Cancer Survivors

by Elizabeth Pagel-Hogan



When Marina Posvar was going through treatment for her first diagnosis of cancer in 1994, she refused to appear on TV and would

only talk via phone when the media wanted to interview her about her diagnosis. The hot topic was the groundbreaking BRCA1 and BRCA2 research that estimated a person's cancer risk based on the presence of these genes. Even though Posvar tested negative for "the breast cancer gene" she was too concerned that people knowing she had cancer might impact her future employment and her health insurance.

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The Tortuoso Camino
By Michael W. Weiss, M.D.

I wonder if Guatemala missed "Pittsburgh" as much as Panama missed "Denver."



"Denver" is what the staff at a Panama hospital calls the Operation Walk medical team that, until this year, traveled from the Colorado city to the Central American country to perform joint surgeries on needy patients. In the Panama hospital's nursing units and operating rooms, the name Denver is spoken with reverence—the kind reserved for Nobel Prize winners, religious leaders and poet laureates.

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The University of Pittsburgh School of Nursing Holds the 13th Annual Cameos of Caring® Awards Gala

On Saturday, November 5, 2011, the University of Pittsburgh School of Nursing will host the 13th Annual Cameos of Caring® Awards Gala. This year 64 nurses will be honored, bringing the total number of Cameos of Caring recipients to 610 since the program's inception.

Each year, the awardees have shared their personal stories with us. Their stories have tugged at our hearts and inspired us. As you read about the 2011 awardees, you will learn about people who overcame great odds to become nurses and from people who seemingly were born to the profession; from nurses who help bring new lives into this world and from those who care for patients at the end of life; from nurses who care for our wounded warriors at home and abroad and from those who educate the next generation of nurses.

The awardees have many accomplishments, both large and small. One awardee has two nursing scholarship funds named in

her honor. One—the first person in her family to go to college—testified at a joint hearing of the Department of Justice and the Federal Trade Commission. Then in 2009, she took two nurse administrators and seventeen staff nurses to meet President Obama at the White House.

Each awardee found their calling in nursing, while entering the profession at different times and from various circumstances. Some were inspired at a young age, while others changed careers. Several of this year's awardees switched from business majors to nursing; one switched to nursing from politics; and one returned to school at the age 50 to become a nurse.

These stories touch our lives and our hearts, but what strikes us over and over and over is the spirit of nursing they reflect. In the words of one of our winners, "Nursing is the only profession I know of in which complete strangers allow you to become part of their world and share extraordinary mo-



ments in their lives." Nurses don't just treat diseases; they treat patients and their families. By listening and seeing the patient as a whole, nurses are able to identify what it takes to bring comfort and healing.

No matter what their story is, the 2011 Cameos of Caring Awardees embody the spirit of nursing. They are dedicated professionals who have set the standard for the profession and continue to forge new frontiers in the delivery of quality patient care.

For more information, visit www.cameosofcaring.nursing.pitt.edu or call (412) 624-4663 or e-mail jeb69@pitt.edu

See page 29 for list of awardees.

Improving American Health Care Through Better Public Understanding

An opinion piece by George A. Huber, JD, MSIE, MSSM



A Chinese proverb instructs that: "If you are planning for a year, sow rice; if you are planning for a decade, plant trees; if you are planning for lifetime, educate people". In health care it would follow that the better educated Americans are about their own personal health, and about the services available to them and how to pay for them when they have a problem, the better the health system will become over time from provider, financing and outcome

perspectives. Understanding and communication among the public, the patient, the health care professional, the payer, and the politician (the five P's) should also improve.

There are at least three levels of individual health care learning opportunities starting with personal health, fitness and prevention. This level is at least initially addressed by schools. The second level involves where to go for diagnosis, treatment and after care, and how to pay for them. This level is expected by government, as proposed through health care reform, to be fulfilled by health care providers and insurers. The third level is in many respects the most complex since it places all adults in the position

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Can Your Business Keep Playing the Waiting Game?

Two years ago, we came to the realization that *Western Pennsylvania Hospital News* had become irrelevant. Many of you went away, wary of seeing the same old stories issue after issue. We could have folded like other trade publications.

Instead, Hospital News came up with a new strategy. I took the time to contact advertisers and healthcare organizations to learn how we can improve.

We listened to you. So we made changes.

Today, we feature more relevant topics that could benefit your organization, particularly business-related topics such as accounting, management, finance and legal. We also just don't cover the hospital industry exclusively—we cover the whole continuum of care. We've broadened our reach to not only include healthcare professionals, physicians, and nurses, but hospital executives and department heads, insurance providers, attorneys and accountants, home care and nursing home administrators, healthcare students, university and allied health school professionals as well as suppliers of products and services to the healthcare arena.

We've expanded the reach of our authors. Experts from all over the country are now penning bylined articles. Also, a new social media column and a monthly section profiling the creative healthcare professionals among us were introduced in the past year.

The final piece of the puzzle was launching our revamped website at www.wphospitalnews.com and delving into social media. When you go to our website, you'll see an abundance of articles and news from the healthcare industry around the region. When you go to our Facebook, Twitter or LinkedIn pages, you'll see that we publish several messages per day to cast a wider net to make more people aware of each of you are doing in this region.

The result of our new strategy is that Hospital News reaches more readers than ever—40,000+ in print and 5,000+ on the web. Collectively, among the managerial and editorial staff, our social media connections are approaching 7,000.

As you can see, Hospital News has become relevant, both in print and online. We don't think of Hospital News as it used to be. Hopefully you don't either. Once again, we're now known as the other business publication in town—which we have everyone in the marketplace to thank. As a result of our efforts over the past two years, we're in a position to say that your messages are now able to get out through the traditional newspaper plus these other channels. More people are seeing your messages about your services and products.

But we didn't wait until the beginning of the year to make these new changes, or waited until a new fiscal season began. We started implementing these changes immediately. We didn't wait.

As a result of reinventing ourselves, we also launched two new digital publications, Pittsburgh Better Times (www.pittsburghbettertimes.com) and Grand Strand Boomers (www.grandstrandboomers.com). Pittsburgh Better Times highlights and profiles people who are divorced, separated, or widowed in a positive way and inspires others as they continue on with their lives. We feature educational and informative articles, as well as enriching and empowering stories about life, love, and leaps of faith.

Grand Strand Boomers focuses on the baby boomers who live, work and play in my favorite vacation destination, the Grand Strand region of South Carolina. Better Times has about 3,500 monthly website visitors, while Grand Strand, only three months old, is seeing 2,000 hits per month. Through a combination of our online platform and social media, we are reaching two distinct niche audiences, helping to further expand our brand.

Can you afford to wait to alter your business strategies?

I make several dozen phone calls a day to potential marketing partners and I hear many people say that they want to wait until the beginning of the year to become involved with Hospital News. I also ask about their social media initiatives. Again, people say they're waiting until the time is right. Some even refuse to participate in social media because they're afraid their customers may begin to badmouth them and they don't want the negative publicity.

If you have a business and you have customers, chances are your customers are already active in social media. If they want to say something negative about your business, they will. And if you're not active in social media, then you won't get a chance to respond and react. If those comments about your business on Twitter, Facebook, LinkedIn and even YouTube go unchecked, you'll hurt your business and lose out on potential customers.

If your customers are posting nice things about your business, you want to be able to react to that as well. If nothing else, you can simply write back, "Thank you. I appreciate the kind words." In turn, that person who took the time to say something nice about your business feels heard and appreciated. As a result, they're more likely to refer other people to you as well.

I understand that the economy has been bad and that's why many businesses are hesitant to try new things, like social media, or re-strategize. When there's a hurricane, people board up their businesses and hunker down. At some point, however, you have to remove those boards.

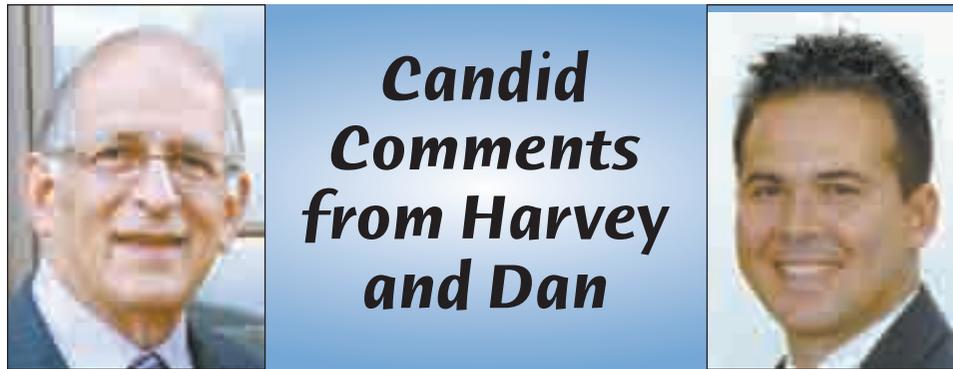
Things won't change by waiting it out. Take those boards down now. Otherwise, it could be too late.

At the very least, we strongly encourage you to get involved in social media. Social media is not going away. It will continue to evolve. Take a look at our social media channels and see what we're doing. Social media was critical in our transformation. It can be in yours too.

Many of our advertisers have been leveraging our social media channels to promote their messages. They see the immense value of using our platform as a bulletin board to share information with one another.

But see for yourself.

If you're on LinkedIn, Facebook, and Twitter, and you're trying to expand your con-



tacts, please invite me and Dan to connect with you through these channels.

Finally, be sure to check out our YouTube channel @hospitalnews and check out our video on how social media enhanced our brand. ↑

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How Pennsylvania American Water Uses Social Media to Connect With Customers



By Daniel Casciato

During the recent flooding in Central Pennsylvania, Facebook became an important tool for Pennsylvania American Water. First, it needed to dispense information quickly about a mandatory conservation for its Hershey customers. Secondly, it wanted to squash rumors that the customers there and in its Wilkes-Barre service area were hearing via local media and through the grapevine.

Being able to dispel rumors in real-time, answer questions from customers and provide updates increased its number of Facebook followers by 200 in one week. The spike in followers came at a good time: Pennsylvania

American Water announced that it will donate \$1 to the H2O Help to Others Program for each new Facebook or Twitter follower who liked its pages by October 15. The H2O Help to Others Program benefits low-income customers who may be having a hard time paying their water bill.

“Pennsylvania American Water is proud of our social media presence and the depth of information we provide customers through Facebook, Twitter and YouTube via status updates and short videos accessible through Facebook and YouTube,” says Josephine Posti, external affairs specialist for Pennsylvania American Water. “American Water’s overall social media presence is robust compared to other local utilities and is a benchmark nationally along with providers such as Florida Power & Light, ConEd in New York, or the DC Water and Sewer Authority.”

Water is critical for public health, essential to the hospitals and healthcare facilities in each of its service areas and information about service disruptions is essential, notes Posti.

“Social media has been a great tool in helping us provide real time information to our customers and the communities we serve,” she adds.

Posti was gracious enough to take the time to respond to our social media Q&A, the first in a series Hospital News is planning over the next 12 months.

WPHN: What role does social media play in an organization’s overall marketing and communications strategy?

Posti: An organization communicates to deliver a message and social media is necessary if an organization wants to talk to their audience where they are. Facebook and Twitter usage grows with the proliferation of smart phones and provide an easy-to-use platform to get customers information in real time.

WPHN: Tell us about some of the most common misperceptions organizations have about social media marketing.

Posti: A common misperception is that negativity can hijack a brand’s presence. Most people who take the time to follow a brand are advocates for the brand and the occasional negative comment can be a great opportunity for a brand to respond quickly and authentically, showing their responsiveness.

WPHN: What are some of the issues an organization could face without a successful social media strategy?

Posti: Any organization that needs to provide customers with real time information is at a disadvantage if they’re relying on mainstream media or their website to provide information. The platform provides an easy-to-use format for graphics, video, links, sharing and comments that can help tell your story.

WPHN: How can organizations better engage in social media?

Posti: Start following others in your space. See what kind of information they’re sharing, how you can share it with your followers and what their followers are reading. The reciprocity that social media encourages can result in healthy collaboration and sharing of information.

WPHN: How has Pennsylvania American Water used social media raise awareness?

Posti: Facebook and YouTube provide the perfect forum for us to create and upload short videos that easily explain some of our processes. Now, customers can see what the inside of their water storage tank looks like, learn how we detect leaks underground and find out what our scientists do in our labs every day to ensure a high level of water quality. We’ve also found social media to be extremely useful during emergency events. During the recent floods in Central PA, we were able to provide regular, frequent updates to customers about a mandatory conservation, to dispel rumors and to provide accurate information about the flood’s impact to our service areas.

WPHN: What are some of your favorite social media applications/tools?

Posti: We love the YouTube app for Facebook. Our customers have found our short videos to be very informative and they’ve been able to peek “behind the scenes” on the water treatment and delivery process.

WPHN: Many of us can’t find enough hours in the day, how do you find the time on social media, and more importantly manage it?



Posti: It’s a group effort. Our four-person external affairs team works collaboratively; we all have administrator privileges. When an emergency occurs we make sure someone is “on call” to monitor and update our social media presence.

WPHN: On a practical level, can a good social media strategy be outsourced, or does it need to be executed internally?

Posti: My point of view is that managing it internally allows an organization to provide more authenticity and to have an ear to the ground when their followers have concerns. There have been many times when a customer has brought an issue to our attention and we were able to identify the internal contact immediately, addressing their concern much more quickly than we would have if a third party were responsible.



Josephine Posti

WPHN: What things should we absolutely avoid in terms of social media posts and tweets?

Posti: Everyone—customers and organizations—needs to communicate in the same manner we’d talk to someone we bumped into at the grocery store. Bullying, defensiveness and profanity are all ineffective ways to get a point across or get a real response to a concern. If it doesn’t work in “real life” it doesn’t have a place in other venues like Facebook or Twitter.

WPHN: Is there anything else our readers should know that I didn’t ask about?

Posti: We started our Twitter and Facebook pages at the suggestion of a reporter. During a severe weather event, I was calling local media every hour to give them status updates and finally a reporter asked me if I could just Tweet the updates. We realized that an organization like ours needs to be in that space. The service we provide is critical to public health, fire safety, business and quality of life. People don’t realize how big a part of their life clean water is until it’s not there and our ability to provide real time updates has been welcomed by our customers, the communities we serve and the local media. We’ve found a great deal of reciprocity among those audiences: municipalities and media who re-post our updates and customers who share our answers to their questions with their friends. We’re currently running a promotion where we’ll donate \$1 for every new Facebook “Like” or Twitter follower to the H2O Help to Others program which serves low-income customers who are experiencing trouble paying their water bill. We’ve already doubled our followers and hope to triple them by the end of the promotion.

Josephine Posti has worked in public relations for most of her career, spending many years at Motorola before working for agencies (Burson-Marsteller and MARC USA). She even ran her own business, having served clients like Motorola, Technomics and Ascensium.

Today, she is very proud to facilitate external affairs for Pennsylvania American Water, the Commonwealth’s largest regulated water and wastewater service provider. Her responsibilities include public relations, crisis communications and community affairs for seven districts throughout Western Pennsylvania including Pittsburgh and Washington County.

Posti received her accreditation in public relations (APR) in 2003. This designation is a mark of distinction for public relations professionals who demonstrate their expertise and their commitment to the profession and its ethical practice. She has served on the board of the Pittsburgh Chapter of the Public Relations Society of America and also serves on committees within the American Water Works Association.

Outside of work, Post serves as president of Mt. Lebanon’s school board, is a Girl Scout leader and teaches religious education in her congregation.

For more information on Pennsylvania American Water, visit them on Twitter @paamwater or on Facebook at www.facebook.com/pennsylvaniaamwater.com. You can also find them on their YouTube channel @paamwater. 📺

HEALTH CARE From **Page 1**

of concerned citizens in trying to understand the major elements and their relationships to one another within the health care delivery and financing system itself. This kind of understanding is crucial to effective policy development.

This third level is in many respects the foundation for the other two levels. Unfortunately, the general electorate, most policy makers, media, and even some health care providers and insurers don't know enough about the overall health care system and its key components to help in making effective changes a reality.

In Western Pennsylvania a case which demonstrates this point involves the refusal of the dominant health care system, UPMC, to renew its long-term provider contract with the dominant health care insurer, Highmark. UPMC's reason for non-renewal is that Highmark is buying a provider health care system of its own, West Penn Allegheny, and will, therefore, compete with UPMC as an "integrated delivery and finance system", or IDFS, that is, an arrangement where providers and insurers are corporately linked. UPMC also has its own insurance company, however, UPMC does not want to contract with Highmark thus giving Highmark the opportunity to channel patients from UPMC to West Penn Allegheny.

Up until this point in time most people were happy with their insurance coverage and their doctors although there were complaints about the cost of insurance and the need for more competition among providers and insurance companies alike. These complaints were supported by the media and by politicians. This is also a classic example of being careful about what you ask for because it might just come true.

Under the current commercial contract between UPMC and Highmark, people with Highmark insurance are covered when they use UPMC physicians and hospitals. With some exceptions, such coverage will not exist when there is no contract between UPMC and Highmark, and people are concerned that they will be subjected to non-covered pre-existing conditions if they switch from Highmark to other insurance companies in order to have coverage to maintain their UPMC physicians and hospitals. One distasteful alternative is to just pay charges in order to use UPMC providers.

UPMC has responded by saying that it has contracted with four additional insurance companies which are not competing IDFSs, and which are available to provide consumer coverage for both UPMC and West Penn Allegheny health care providers. In fact, UPMC contends that what it intends to do is support the addition of much needed competition to the Western Pennsylvania health care market in the

form of two major IDFSs (UPMC and Highmark) rather than one, and the addition of four major insurance companies who can contract with both IDFSs. UPMC has also stated its willingness to address concerns about pre-existing conditions, at least until health care reform eliminates such provisions.

Understanding by the general public of this difficult situation is confounded by those people expected to be in the "know" and whose propaganda is intended to advance a political agenda rather than an educational one. One public health official commented that he seriously didn't realize that charitable non-profit hospitals could compete. Another state legislator intends to offer a bill to force binding arbitration between UPMC and Highmark even though the insurance commissioner believes that there is no statutory authority to intervene other than as a non-binding mediator. The newspaper advocates that since UPMC is tax exempt it "belongs to the community". Even if UPMC meets the letter of the charities law, the argument is made that it does not meet the spirit of the law by "pushing millions of patients off a cliff". Finally, UPMC's tax exempt status is being challenged in the media as is the use of subscriber generated surplus by Highmark to buy the West Penn Allegheny provider system.

Lack of understanding causes public reaction to be more susceptible to misinformation and fear rather than to more rational thinking. This is true whether the topic is national health reform or health care competition in Western Pennsylvania. Improving health care literacy is a continuous, long-term, uphill objective to accomplish. Perhaps some of the best educated people in America about health care are Medicare beneficiaries for reasons of maturity and experience.

The United States has more published research articles about health literacy than any other developed country. Yet, many of its outcome measures fall below those of a significant number of these countries. Perhaps there needs to be a greater push for transition from the bench to practice. Starting the various levels of learning process at earlier stages of life might make sense as well. In any case, it should be a top health care policy, and it should begin immediately. †

George A. Huber, JD, MSIE, MSSM, is Professor of Public Health Practice at the University of Pittsburgh.

Hospital News is always seeking your opinion pieces on any topic related to the healthcare sector. Please email Daniel Casciato at writer@danielcasciato.com with your ideas.



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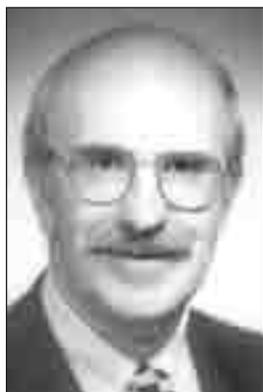


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COBRA Rules for Employers



By Joseph A. Vater, Jr.

When a health care employee is laid off or has an unemployed adult child who no longer qualifies as a dependent, the employer should expect that the employee's first question will be, "How can I make sure that my family has medical coverage?"

And employers with more than 20 employees such as most hospitals and other healthcare institutions, better be ready with answers.

All employers should make sure that they can explain to employees their options under the Consolidated Omnibus Budget Reconciliation Act (COBRA). COBRA is

a federal statute that requires group health plans which are sponsored by employers with 20 or more employees in the preceding year to provide a temporary extension of health coverage for individuals who were previously enrolled in an employer's health plan but no longer qualify for standard coverage. The plan offered to the individual under COBRA is the same as what is offered to similarly situated current employees. COBRA coverage is offered to the employee, his or her spouse and dependents under certain circumstances, including but not limited to:

- Voluntary or involuntary job loss;
- Reduction in hours worked so that the employee no longer meets the minimum requirement for standard coverage;
- Transition between jobs;
- Death of the individual carrying the insurance (benefits extended to qualified family members)
- Divorce or legal separation;
- Loss of dependent child status under the plan's definition.

Employers are responsible for notifying the group health plan administrator of a qualifying event regarding employment, such as an employee's job loss, reduced hours or death, within 30 days of the event. In personal situations regarding divorce or legal separation, it is up to the dependent to notify the group health plan within 60 days.

The employer is responsible for making sure that the initial summary plan description that is given to employees upon taking part in the group health plan includes a description about each plan participant's COBRA rights and benefits. If the summary plan description is not distributed to the employee within the first 90 days of coverage, the employer must make sure that a separate notice on COBRA benefits is provided within those 90 days. What employers sometimes neglect is an additional notice about COBRA that must be sent within 14 days of a qualifying event so that the individual can make an informed decision within 60 days about whether or not to select COBRA coverage.

Both the Department of Labor ("DOL") and the Internal Revenue Service ("IRS") may assess significant penalties for COBRA non-compliance. The IRS may assess an excise tax of \$100 per day per beneficiary (\$200 per day per family), up to \$2,500 per beneficiary. Additional penalties of up to \$15,000 may be assessed if the violation is more than minimal. The maximum penalty that may be assessed by the IRS is the lesser of \$500,000 or 10% of the health plan's cost in the prior year. The DOL has a penalty of \$110 per day per beneficiary. These assessments will be made against the employer and each person responsible for administering the benefits.

Employers should be prepared to answer questions about the cost of premiums for employees who are involuntarily terminated. The American Recovery and Reinvestment Act of 2009 provided a COBRA premium subsidy that covered 65% of the cost for those who were involuntarily terminated from employment for a period of up to fifteen months. Individuals had to qualify by May 31, 2010, and the Unemployment Compensation Extension Act of 2010 did not extend COBRA premium reductions. As of August 31, 2011, most individuals are responsible for the full cost of COBRA premiums.



COBRA administration is complex, and should be well understood by any health care employer. Health providers should regularly review their COBRA notices and procedures to ensure that they are in compliance with COBRA's requirements. If COBRA administration is handled in-house by employees, a procedures manual with forms should be considered. If the administration of COBRA is outsourced, employers should carefully review the qualifications of the entity who would be providing the COBRA administration and attempt to require that entity by contract to be liable for any penalties or assessments resulting from that entity's failure to comply with COBRA's requirements. Finally, managers, supervisors and human resources personnel should be trained to advise the person or entity responsible for COBRA administration of qualifying events as soon as possible.

Just as health care providers know the importance of getting the right medical care, it is equally important to make sure that all employees know their rights and options when it comes to paying for it. †

Joseph A. Vater, Jr., is an attorney with Meyer, Unkovic & Scott.

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How You Can Help Patients Who Can't Work

By Dennis Liotta, Esq.



In this troubled economy, the Social Security Administration is being barraged with benefit claims. Jobs are few and far between for relatively healthy workers, but what about people who suffer from a physical or mental condition that prevents them from working?

Social Security disability (SSD) benefits are the answer. However, applying for SSD benefits is a long and complicated process. After all of the time and effort involved in the application process, there's no guarantee of a reward - the government denies over 3/4 of all claims, even when patients deserve them.

As a healthcare professional, you may encounter people with disabilities who are overwhelmed and desperate for resources. It's stressful enough to deal with a serious medical condition, let alone no paycheck coming in and bills piling up. You can help guide the people in your care on how to navigate the system.

WHO IS ELIGIBLE

If a patient can answer "yes" to the following questions, they may be eligible for SSD benefits:

- Do you have a severe physical or mental condition that prevents you from working?
- Do you have a disability that prohibits you from working in any capacity - not just in the job you held previously?
- Has your disability lasted - or is expected to last - for at least one year? Or, is the disability life-threatening?
- Do you have an earnings record that shows you have paid into the Social Security system within the past five years? People with a limited or nonexistent work history may be eligible for Supplemental Security Income benefits (SSI).

APPLYING FOR SSD BENEFITS

To get started, contact the Social Security Administration at 1-800-722-1213, visit www.ssa.gov to file online, or make an appointment at a local Social Security District Office. The SSA reviews medical records provided by you or other health-



care providers, as well as the patient's monthly earnings, his or her condition(s), and other information.

Patients can apply for benefits as soon as they become disabled. If they are approved, SSD benefits don't kick in until the sixth full month of disability. Because the claims process takes at least 120 days and up to two years to appeal a denied claim, I recommend applying as soon as possible. In fact, at our law firm it's not uncommon to represent someone for a personal injury claim and at the same time, help them to apply for SSD.

If approved, SSD payments are retroactive from the date a healthcare professional evaluates a patient as disabled. Money is based on average top earnings over the past 15 years of work history.

Nothing can happen without a diagnosis and proof that the patient suffers from a disability severe enough to prevent him or her from working. Also, it's critical that patients attend their medical appointments. And this is key: encourage them to follow through with their treatment plan.

NEXT STEPS IF A CLAIM IS DENIED

If a patient talks with you about applying for SSD or SSI benefits, remind him or her that the government denies the majority of claims. But this does not mean they should give up. While anyone can represent themselves at an appeal hearing, they should consider contacting an experienced attorney to help them navigate the system.

It's important to know that there is a 60-day window to appeal a denied claim. You can reapply after that time period, but the process starts all over again. The process for appealing the denied SSD claim includes a hearing, which can take up to two years. Typically it takes a judge several months to issue a decision. If a patient disagrees with the judge's decision, he or she can move on to the Appeals Council. The last possibility is to pursue a case in Federal Court, which requires the assistance of an attorney.

As a medical professional, being knowledgeable about the system can help you understand the nuances of government agencies that provide financial support for Americans, enable you to connect with a patient's medical situation, and ultimately even help them improve their quality of life. †

Attorney Dennis Liotta, a partner at the law firm of Edgar Snyder & Associates, has over 20 years of experience and helps people with physical and mental disabilities get Social Security disability (SSD) benefits. For a comprehensive overview of SSD, visit www.EdgarSnyder.com.

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From Secret Survivor to Active Advocate: Marina Posvar Gives a Voice to Cancer Survivors

by Elizabeth Pagel-Hogan

When Marina Posvar was going through treatment for her first diagnosis of cancer in 1994, she refused to appear on TV and would only talk via phone when the media wanted to interview her about her diagnosis. The hot topic was the groundbreaking BRCA1 and BRCA2 research that estimated a person's cancer risk based on the presence of these genes. Even though Posvar tested negative for "the breast cancer gene" she was too concerned that people knowing she had cancer might impact her future employment and her health insurance.

The research study, conducted while Posvar was in treatment at Georgetown Lombardi Comprehensive Cancer Center in Washington DC, focused on the Ashkenazi Jewish population, but according to the National Cancer Institute, the implications of testing positive for these suspected cancer-causing genes were widespread and alarming. The Health Insurance Portability and Accountability Act (HIPPA) wouldn't come into existence for another two years, so genetic information in someone's medical records was fair game for employers and health insurance agencies, and almost certainly cause for denying coverage. Even today, HIPPA doesn't protect this information from being accessed by life insurance, disability insurance and long-term care insurance.

Posvar's feelings about publicity and her cancer experience are at the opposite end of the spectrum today. Now a two-time breast cancer survivor, she has a leading role as a volunteer advocate in the American Cancer Society's Cancer Action Network for Pennsylvania and works at Hillman Cancer Center in the Gumberg Family Patient and Family Resource Center as a Patient Navigator.

"Being a survivor does makes me uniquely positioned," Posvar states. "I can listen, comfort. Sometimes I'll say, 'I know, I've been in your shoes.' All of sudden the person realizes that I really do get what they are saying."

Her treatment and employment experience has paralleled the changes in the cancer experience in general. She joined Hillman Cancer Center in 2002, right before it opened.

"Originally I was to help the patients but was also helping with volunteers and with development," recalls Posvar. After a year or two, Dr. [Ronald] Herberman, then the Director, wanted to establish a patient navigator program. "I did a lot research on how to implement navigation but it's different everywhere. In some cases it's a social worker, helping people who are underserved and uninsured. Then there are nurse navigators who will coordinate everything and help the patient through their treatment, but the time required is intense."

Posvar and four volunteers who help when they can complete over 700 monthly courtesy calls to new patients and families.

"They are coming to Hillman for the first time, either unsure why they are coming or having just been diagnosed. They are coming to this huge place, this 'cancer place' and so many are just freaked out about coming, we call and try to make them feel not lost."

Lost was how she felt during her first diagnosis.

"I didn't know what I was facing. I didn't know what I was up against. I asked the nurse what I should expect from the chemo and even she couldn't tell me," Posvar remembers. But she wasn't going to kiss life goodbye.

"I remember at Lombardi I had to walk through pediatric oncology to get to my treatment area. I would be dreading it, feeling sorry for myself. Then I would see these kids with no hair, running around smiling and laughing, and I would get strength." Later, Posvar would participate in community events that collected toys for the treasure box in that same pediatric unit.

"I had no guidance, no education. But sometimes

you have to be your own advocate. I would go and park myself in the bookstore and just read. I know now there was information from places like the American Cancer Society but no one shared it with me."

Posvar did eventually learn about some supportive services, and now chooses to spend a lot of her free time on the legislative advocacy forefront.

"I am not politically inclined. But I didn't realize how much healthcare and the patient experience is in great part determined by our government," Posvar said. "I also didn't know how approachable our elected officials are. Whether or not you like the affordable healthcare act, there are things that are directly related to the experiences of people with cancer."

Posvar feels the legislation to help people with cancer and the services like a Patient Navigator are showing improvement in the right directions. But there are always people that are missed.

"So much is up to the patient; how much help do they want. I can be available, saying hello, visiting them in treatment, but if someone doesn't want to ask for help, you can't force them," Posvar said. "Sometimes all I can do is start talking. I learn about their needs through the caregiver sharing how stressed out everyone is. But often they don't know the services that are available, the therapists and social workers we have. They don't ask."

When they do ask, she is ready to help. Posvar has



Marina Posvar presenting an award to Congressman Mike Doyle at an event in 2009 for his work supporting legislation to help people with cancer.

taken on many tasks, like yelling at taxi services that kept people waiting, finding accommodations for families that needed temporary lodging and accepted huge dogs, and finding a wheelchair for a family with virtually no money to transport their loved one at the end of his life.

"It's so complicated. I wish i could reach more people," Posvar says.

For more information, visit www.acscan.org.



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Ron Miller—Moving Forward and Finding A New Normal

By Daniel Casciato

Everyone has their own special way of moving on following the loss of a loved one. For Pittsburgh resident Ron Miller, 67, staying active has helped him discover his new normal following the loss of his wife of 35 years, who passed away in May 2003. As president of Administrative Resources, Inc., a holding company and half owner of Amerinet, a large group purchasing organization for healthcare facilities,



Ron Miller

Miller occupies his days and some nights by continuing to work full time.

“While living in St. Louis, my job at the time required a fair amount of travel so I was gone a lot and didn’t spend much time at my home there,” recalls Miller. “No matter what you do—whether it’s work or a hobby—it’s important to stay active. The more you can do to occupy your time, the better it is.”

Miller and his wife, the parents of two daughters and grandparents to four grandchildren, had moved from Pittsburgh to St. Louis about the same time she became ill.

“Pittsburghers don’t like to move out of Pittsburgh—it was kind of an oddity for us as well,” says Miller. “So we always looked at this as a temporary move and wanted to move back to Pittsburgh eventually. We rented a house for a year before we decided to build. Once we did, we wanted to make the most of it. St. Louis is a lot like Pittsburgh, culturally and sports-wise. People are very friendly and joining

The Hope Bible Church helped with the transition.”

Miller called his wife an inspiration to himself and to others.

“She was always very encouraging and pushed me,” says Miller. “She had a lot more faith in me than I did at times—encouraging me to go back to school and earn my degree, and then my masters degree after that. She was the person who motivated me the most.”

His wife’s illness progressed and she passed away in St. Louis. During this difficult time in his life, Miller’s family and their friends provided comfort.

“But it’s a lot like when you lose a job—your friends move on to deal with their own life issues and you are left pretty much on your own to cope with the loss,” says Miller. “It’s just a natural progression. Misery doesn’t really attract company and people tend to shy away. But we also weren’t living in St. Louis for that long before she passed, so our circle of friends was small. The church was a big support for both of us during her illness and then to me as I dealt with her loss.”

His wife’s death didn’t stop Ron in his tracks although at times he felt it might. While they had a long and successful marriage, he wanted to continue to live life to the fullest.

“It’s easy to get depressed and dwell on things you can’t change, but you have to try to motivate yourself and move on,” he says.

In fact, four years ago, Miller took his oldest grandson, who was 10 years old at the time, on a 10-day trip to places neither had been in the United States.

“My grandson flew in by himself to St. Louis and then we flew to Las Vegas to spend a night there and onto the Hoover Dam; over the next several days we drove more than 1200 miles through Nevada, Utah, Arizona, Wyoming and toured several national parks including Yellowstone, Canyonlands and Arches,” says Miller, adding that they also visited the Grand Canyon via a train ride from Williams, Arizona.

“Most of the things that we did were things that I had never done,” he says. “So that was exciting for both of us. I’m planning a similar trip right now with my 9-year old grandson who is excited to take the journey after hearing so much about it from his older brother.”

To stay active and so he could spend even more time with his daughters and grandchildren, Miller decided to move back to Pittsburgh three years ago. If his health allows for it, Miller says he hopes to also take a cross-country trip with his two youngest grandchildren who are currently seven and four years old respectively, when they also turn 10.

“We’ll see what happens!” he says.

To learn more about Ron Miller’s business, visit www.amerinet-gpo.com. †

One in Six

By Nick Jacobs



The poverty level statistics came out a few weeks ago, and things haven’t been this bad since 1993. Look to your left; look to your right. About one in every six of us is now considered to be living below the poverty level. In 1993, the average new house was \$113,000, the average income was \$31,230, the average car was \$13K and tuition at Harvard was at \$23,500. By 2010 you could nearly double every one of those numbers except the average family income which was only \$50,000. (Instead of the \$62,500 it should have been.)

One of my favorite comparisons has always been that Harvard’s tuition was right around \$40,000 and the cost to keep a prisoner in jail for one year is about \$45,000. If you extrapolate the number of people in prisons based on the entire population of the United States, it works out to about one in every 31 adults. Between 2.3 million and 2.4 million Americans are behind bars. America incarcerates nine times more people than Germany and 12 times more people than Japan. That adds up to nearly \$104 billion dollars a year in U.S. prison costs alone.

The folks on Wall Street and in Washington D.C. who so cunningly helped to put us into this financial mess are, by and large, NOT in prison, and the percentage of prisoners that are minorities is staggering. An estimated sixty-eight percent of prison inmates were members of racial or ethnic minority groups. Are our prisons full because our minorities are bad people, or are they full because their jobless rate is 40% higher than that of Caucasians?

We’re also spending about \$700 billion on defense with the rest of the world combined spending nearly that same number. At \$1.4 trillion a year, that adds up to \$236 per capita worldwide on defense, and we still have 24,000 nuclear missiles lying around; enough to blow up the planet plenty of times.

According to the World Bank, over 1 billion people live in conditions of extreme poverty and 15-20 million people are starving every year. I saw another

set of figures today regarding food subsidies in the United States. It wasn’t a figure indicating our generosity toward these one billion poor people, it was that between 1995 and 2010, our Congress voted to provide \$260 billion to continue agricultural subsidies. Okay, maybe some of that makes sense, but what about the \$17 billion that is going to subsidize ingredients that eventually become hydrogenated fats.

We are an obese country and we continue to finance high fructose corn syrup and hydrogenated fats so that our obesity, diabetes and heart disease epidemics go on uninterrupted. Or is this about some really BIG businesses with some really good lobbyists?

Maybe it’s time to look at things a little differently? We all know that testosterone makes us physically strong, but it also makes us more aggressive and competitive. This testosterone overload has continued to result in war and violence being accepted as the normal way to settle things, and, except for the economic benefits of war, we also know that war is just crazy!

We’ve seen time after time that if you are brutal and retaliatory with people, they will learn to hate and fear you. If you give people love, compassion and respect they will eventually return the compliment. Maybe we should take a break from all of this running the world stuff and focus on doing the best that we can for the HUMAN race. Maybe we should walk the talk of our religious leaders for a change.

We ran a hospital like that for over a decade and it prospered and grew. This concept is neither rocket science nor brain surgery. It’s the most uncommon of things in our current culture, common sense. We cannot change the human condition – but we can change the condition under which humans live and work!” †

Nick Jacobs, international director for SunStone Consulting, LLC, is known as an innovator and advocate for patient centered care. With 22 years in health care management, he is author of the health care book, “Taking the Hell out of Healthcare” and the humor book, “You Hold Em. I’ll Bite Em.” Read his blog at healinghospitals.com.

Testing the Cloud



By Dan Joe Barry

Cloud computing has now passed the stage of hype to reality. More and more health-related organizations are realizing the benefits of remote hosting of IT services rather than local IT management, especially as managing and operating IT networks and services is not getting any easier.

Managing IT networks requires a broad set of competencies in a growing number of technologies and products. It therefore makes sense that these competencies are centralized in larger data centers providing cloud services to a number of smaller enterprises for which IT is not a core competency.

Larger data centers also means larger installations with higher-speed interfaces as well as an obligation to maintain service availability. This requires extensive test and management capabilities to ensure service “up-time”. However, will test and management of cloud services differ from how they are performed today? What are the special challengers that cloud service providers face in this regard?

CHALLENGES OF TESTING AND MANAGING CLOUD SERVICES

The first and fundamental challenge of providing cloud services is service availability. If enterprise customers are to adopt cloud services rather than maintaining local installations, they must be convinced that they can access the services and data that they need whenever they need them without experiencing undue delays. The cloud service must look and feel as if it is local despite the fact that it is hosted remotely.

This leads to the second challenge of service assurance. How can the cloud service provider assure timely delivery and even service availability when it does not control the data communication connection between the cloud service and the enterprise customer? Does the data communication provider have the monitoring infrastructure in place to assure Service Level Agreements (SLA)? Does the cloud service provider have the monitoring infrastructure in place to assure the services provided?

The final challenge is service efficiency. Efficiency in all its aspects from cost, space and power efficiency to efficient and scalable delivery of services using virtualization, efficient servers and high-speed interfaces. In this regard, the accompanying monitoring infrastructure must also follow the same principles.

TESTING TO MEET CLOUD SERVICE CHALLENGES

From a testing perspective, there are a number of layers one can address:

- The Wide Area Network (WAN) providing data communication services between the enterprise customer and the cloud service – fundamental to service assurance and testing of end-to-end service availability
- The data center infrastructure comprising servers and data communication between servers (LAN), where service availability and uptime of this equipment is key as well as efficient use of resources to ensure service efficiency
- The monitoring infrastructure in the data center that is the basis for service assurance which itself needs to be efficient
- The individual servers and monitoring appliances that are based on servers that must also follow efficiency and availability principles to assure overall service efficiency and service availability

TESTING END-TO-END

The first test that can be performed is testing end-to-end availability. At a basic level, this involves testing connectivity, but can also involve some specific testing relevant for cloud services, such as latency measurement. Several commercial systems exist for testing latency in a WAN environment. These are most often used by financial institutions to determine the time it takes to execute financial transactions with remote stock exchanges, but can also be used by cloud service providers to test the latency of the connection to enterprise customers.

This solution requires the installation at the enterprise of a network appliance for monitoring latency, which could also be used to test connectivity. Such an appliance could also be used for troubleshooting and SLA monitoring.

Typically the cloud service provider does not own the WAN data communication infrastructure. However, using network monitoring and analysis appliances at both the data center and the enterprise, it is possible to measure the performance of the WAN in providing the data communication service required. The choice of WAN data communication provider should also be driven by the ability of this provider to offer performance data in support of agreed SLAs. In other words, this provider should have the monitoring and analysis infrastructure in place to assure services.

FROM REACTION TO SERVICE ASSURANCE

Network monitoring and analysis of the data center infrastructure is also crucial as cloud service providers need to rely less on troubleshooting and more on service assurance strategies. In typical IT network deployments, a reactive strategy is preferred whereby issues are dealt with in a troubleshooting manner as they arise. For enterprise LAN environments, this can be acceptable in many cases, as some downtime can be tolerated. However, for cloud service providers, downtime is a disaster. If customers are not confident in the cloud service provider’s ability to assure service availability, they will be quick to find alternatives or even revert to a local installation.

A service assurance strategy involves constant monitoring of the performance of the network and services so that issues can be identified before they arise. Network and application performance monitoring tools are available from a number of vendors for precisely this purpose.

THE POWER OF VIRTUALIZATION

One of the technology innovations of particular use to cloud service providers is virtualization. The ability to consolidate multiple cloud services onto as few physical servers as possible provides tremendous efficiency benefits by lower cost, space and power consumption. In addition, the ability to move virtual machines supporting cloud services from one physical server to another allows efficient use of resources in matching time-of-day demand, as well as allowing fast reaction to detected performance issues.

One of the consequences of this consolidation is the need for higher speed interfaces as more data needs to be delivered to each server. This, in turn requires that the data communication infrastructure is dimensioned to provide this data, which in turn demands that the network monitoring infrastructure can keep up with the data rates without losing data. This is far from a given, so cloud service providers need to pay particular attention to the throughput performance of network monitoring and analysis appliances to ensure that they can keep up also in the future.

Within the virtualized servers themselves, there are also emerging solutions to assist in monitoring performance. Just as network and application performance monitoring appliances are available to monitor the physical infrastructure, there are now available virtualized versions of these applications for monitoring virtual applications and communication between virtual machines.

There are also virtual test applications that allow a number of virtual ports to be defined that can be used for load-testing in a cloud environment. This is extremely useful for testing whether a large number of users can access a service without having to deploy a large test network. An ideal tool for cloud service providers.

Bringing virtualization to network monitoring and analysis

While virtualization has been used to improve service efficiency, the network monitoring and analysis infrastructure is still dominated by single server implementations. In many cases, this is because the network monitoring and analysis appliance requires all the processing power it can get. However, there are opportunities to consolidate appliances, especially as servers and server CPUs increase performance on a yearly basis.

Solutions are now available to allow multiple network monitoring and analysis applications to be hosted on the same physical server. If all the applications are based on the same operating system, intelligent network adapters have the ability to ensure that data is shared between these applications, which often need to analyze the same data at the same time, but for different purposes.

However, for situations where the applications are based on different operating systems, virtualization can be used to consolidate them onto a single physical server. Demonstrations have shown that up to 32 applications can thus be consolidated using virtualization.

By pursuing opportunities for consolidation of network monitoring and analysis appliances, cloud service providers can further improve service efficiency.

FROM PASSIVE HOSTING TO ACTIVE PROVISION OF SERVICES

Testing of cloud services, or more specifically, service assurance, availability and efficiency, will separate the amateurs from the professionals in the cloud service arena. The days of passively hosting virtual machines on a best effort basis are gone. Assuring the availability of services using efficient infrastructure and active network monitoring and analysis will ensure that enterprise customers will never look back once they have moved to the cloud. †

Dan Joe Barry is VP of Marketing at Napatech. For more information, visit www.napatech.com.

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Brother's Brother Foundation Helping Others Around the World

by Kathleen Ganster

When news of a natural disaster hits, often the name of a local foundation reaching out to that area soon follows – the Brother's Brother Foundation.

Brother's Brother Foundation is a Pittsburgh-based non-profit that serves areas of need with both life-saving and life-enhancing supplies, according to Luke Hingson, president.

Brother's Brother was in the local news following the earthquakes in Haiti and Japan, but this year alone, they have served folks in need in over 50 countries and additionally, have also helped to supply medical relief missions to foreign countries.

"We send about about 100-120 ocean-going container loads of medical equipment and supplies to different parts of the world each year," said Hingson, "We also send smaller medical packages with 300-plus volunteer medical teams that we work with a year."

According to Hingson, most of these groups are from Pennsylvania.

Brother's Brother was founded in 1958 by Hingson's father, Robert, a medical doctor. "My father and a group of doctors realized that we have so much in this country and perhaps they could use some of their resources to help others," he said.

Dr. Hingson was a doctor at Magee Women's Hospital and after he retired, worked at the foundation until he retired in 1981. Luke Hingson took over as president.

"I grew up at my father's knee and knew the organization well. When I graduated from college, I went to work there," he said.

Decades later, the mission of Brother's Brother remains the same, to help others in need by supplying excess medical supplies and textbooks from the U.S. to other areas.

According to Hingson, Brother's Brother works with other organizations around the globe, although most – 75 % said Hingson - are in the Western Hemisphere.

"There are several reasons for this. It is cheaper to get supplies to somewhere that is physically closer, the communication systems are better and we have a great deal of sponsorship and partners in these areas," he said.

They also tend to work with areas struck by natural disasters as opposed to crisis



Medical Director, Dr. Chip Lambert, in Haiti shortly after the 2010 quake.

such as civil wars.

"With natural disasters, there are usually still systems in place and the people aren't moving like they may be in a civil war, so we can get supplies in and get them to the right people," he explained.

The Philippine American Medical Society (PAMS) of Western PA, Inc. is one organization that works with Brother's Brother.

According to Tina Florendo Purpura, a board member and the Medical Mission Coordinator, the partnership was formed about ten years ago when the Brother's Brother Foundation supported PAMS by the procurement of surgical instruments to be used during their annual medical and surgical missions to the Philippines.

In addition to obtaining medical supplies, said Purpura, Brother's Brother assists with the transportation of donated goods and storage.

"Brother's Brother Foundation has supplied PAMS with supplies from hospital beds to anesthesia machines, and many other items in the 'need list' letter from the medical directors of the sponsoring hospitals in the Philippines," she said.

"With their help, we have been able to provide adequate care in a third world country which is considered as first class treatment by the underserved and poverty stricken patients," she said.

Those partnerships with other non-profits and organizations along with the donations from hospitals, nursing homes, and medical supply companies are what make Brother's Brother successful.

"We work where and with whom we believe we can be effective," said Hingson, "These networks are what make it all work."

He continued, "We are so grateful to the medical community. Without them, we couldn't do the work we do."

For more information about Brother's Brother Foundation visit www.brothers-brother.org.



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Tomorrow's Organ Transplants: A Farewell to Wait Lists and Immune Rejection?



By David Green

More than 100,000 Americans are currently on the active waiting list for an organ transplant. Meanwhile, the average annual cost of immunosuppressive drugs—taken after a transplant to keep the body from rejecting the new organ—is more than \$11,000, and in some instances can be as much as \$25,000, according to the American Society of Transplant Surgeons.

These stark figures are motivating a quest within the biomedical research community for innovation. “One of the most promising avenues of approach is the development of techniques for growing an organ from a patient’s own stem cells,” says David Green, President of Holliston, MA-based Harvard Bioscience. “In so doing, we eliminate the long wait time that might be required for the patient to receive a suitable organ, and do away with the need for immunosuppressive medications following the procedure.”

A significant success in this area was recently achieved with the company’s help. At Karolinska University Hospital in Huddinge, Stockholm, Sweden, a 36-year-old man suffering from late-stage tracheal cancer was recently provided with a new trachea that was grown in the laboratory, seeded by the patient’s own stem cells. The operation was performed by Professor Paolo Macchiarini of Karolinska University Hospital and Karolinska Institutet, along with colleagues including Prof. Alexander Seifalian from University College in London, England.

Despite maximum treatment with radiation therapy, the patient’s tumor had reached approximately six centimeters in length and was extending to the main bronchus. It was progressing and almost completely blocked the trachea. Since no suitable donor windpipe was available, the transplantation of the synthetic tissue-engineered trachea was performed as the last possible option for the patient, referred by Professor Tomas Gudbjartsson of Landspítali University Hospital (Iceland), who was also part of the surgical team.

This represents the first time a synthetic organ has ever been successfully trans-

planted into a patient. The key technology behind the surgery was a shoebox-sized apparatus known as a bioreactor, created by Harvard Bioscience, in which the new trachea was grown. The bioreactor was loaded with a nanocomposite “scaffold,” designed and built by Prof. Seifalian, and made out of a porous plastic polymer material, in the shape of the patient’s original trachea. Over the course of about two days, the scaffold was rotated inside the bioreactor while its surface was soaked with stem cells taken from a bone marrow biopsy from the man’s hip.

Over that two-day period, the patient’s stem cells settled into the pores inside the scaffold, and started to grow into each other, gradually transforming from individual cells into real tissue. A few days after the new trachea was implanted, the patient’s own blood vessels actually began to grow into it, making the new organ truly a part of his own body. Because the patient’s own stem cells were used, the patient’s body accepted the transplant without the use of immunosuppressive drugs. The patient was subsequently discharged from the hospital and is doing well.

What does tomorrow hold for this type of bioreactor technology? For the immediate future, explains David Green, Harvard Bioscience’s president, the scaffold approach to generating synthetic body parts will be limited to tubular organs such as trachea and blood vessels, rather than more complex organs such as kidneys and livers. However, other types of organs may become a practical option in time. “I believe the future will witness the widespread adoption of this technique for tracheal cancer patients, who number about 1,800 annually,” Mr. Green says. “Beyond that, it is possible that the technique can be applied to other tubular organs like esophagus, blood vessels and ureters.”

Should this scenario unfold as some predict, it could spell the dawn of a new era in the treatment of thousands of patients whose lives and health will be significantly improved. †

David Green is President of Holliston, MA-based Harvard Bioscience, a global developer, manufacturer and marketer of a broad range of specialized products, primarily apparatus and scientific instruments, used to advance life science research and regenerative medicine. He can be reached at dgreen@harvardbioscience.com.

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Unleashing The Body's Healing Potential Through Chiropractic Care

By Christopher Lawton

At 6'1" and with energy and a build like Casey Hampton, Mike Tarquinio's a man whose passions, as well as his voice, run deep. For one, he's the owner of Nicholas Management Company, one of the most successful property management firms in Pittsburgh. For another, he has a fervent zeal for hot rod restoration, a passion that earned him 2011's Hot Rod of the Year title by *Hot Rod Magazine*.

Last fall, Tarquinio's passions were interrupted by

chronic symptoms brought on by a bone spur in his lower back. This spur put pressure on the sciatic nerve causing intense pain and discomfort. Tarquinio initially went to see Dr. Joseph Moroon, MD, FACS, one of the premiere specialists for surgical treatment related to injuries of the brain and spine. Dr. Moroon performed microsurgery to remove Mike's bone spur—and the results were immediately significant.

"Dr. Maroon's work helped to substantially reduce the pain I was experiencing," said Tarquinio. "Unfor-

tunately, my follow up physical therapy wasn't working as well as the surgery because I was still experiencing residual pain."

Around the same time, several family members were seeing a local Wexford Chiropractor, who was using a relatively new, and uniquely revolutionary adjustment technique called KST or Koren Specific Technique. Urged on by his wife, Tarquinio made the appointment to see Peter M. Lawton, DC, owner of Lawton Chiropractic in Wexford, PA.

"When people think of Chiropractors they tend to think of us as bone doctors, when in reality Chiropractic care is focused on the nervous system – the primary organ in our bodies that controls how we function," said Dr. Pete Lawton, DC.

KST was developed in 2003 by Dr. Tedd Koren and is a low force directional adjusting protocol/technique that is neurologically based. There are no heavy manipulations, no 'cracking sounds' and no patient discomfort whatsoever.

Most KST adjustments are made through use of an ArthroStim™, a low-force adjustment tool that helps correct subluxations (distortions to the bodies' nervous system) and releases them.

"Through KST a person can realize significant, positive changes to their physiology with less stress than a typical manual adjustment," said Dr. Lawton. "Relaxing in its technique, KST often gives patients a euphoric feeling of ease, relaxation and well-being as their overall structural nerve stress goes away."

Jim Strong, DC, who owns Chestnut Ridge Chiropractic in Blairsville, PA, has also seen KST's positive results with patients in his practice.

"I've seen patients who experience many different



Dr. Lawton using the ArthroStim™ tool on a patient in his office.



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types of neurological disorders and realize tremendous success through KST,” said Dr. Strong. “A good KST adjustment makes the entire nervous system work better and a well functioning nervous system contributes greatly to their continued wellness.”

“When a person experiences stress, the first thing to come under attack is the body’s nervous system—which then leads to a symptomatic complaint,” said Dr. Lawton. “A wellness program that incorporates KST treatments can greatly improve a person’s overall health and in many cases prevent the onset of more chronic conditions.”

KST allows complete analysis of a patient’s nervous system while the system is actively working. Unlike traditional chiropractic adjustments, which are made while a patient lies down on a table and thereby when their musculoskeletal and nervous system is inactive, KST adjustments are made when a patient is upright and both systems are fully functioning.

“Chiropractic care is largely a misunderstood profession by the general public but also particularly within the traditional medical field,” said Dr. Lawton. “The goal of Chiropractic care is to enhance and compliment what the medical community does in terms of treating disease. D.D. Palmer, the founder of Chiropractic care, realized that it was a disturbance associated with the nervous system—disease conditions associated with trauma and toxins, as well as chemical, physical and emotional stress—that resulted in a person’s poor health. KST is a technique, in practice, that validates Palmer’s original assessment and vision, which were very much ahead of their time.”

KST’s design is to facilitate the wellness process by helping to repair an individual’s nervous system.

“Everything a person does, or experiences on a day to day basis, is filtered through the nervous system,” said Dr. Lawton. “And everything that operates within the body—including organs and the musculoskeletal structure, depends upon the nervous system to coordinate their function—it is the conductor to the body’s orchestra. So the better that conductor does its job the better the ‘music’ produced by the orchestra. KST is a tool that helps unlock the body’s symphonic wonders.”

Regardless of the comparison, the result has been music to Tarquinio’s ears.

“Over the last year, I’ve noticed that I just feel better. It’s been a total body transformation where I can feel myself healing. Through Dr. Lawton’s use of KST in my care, I’ve had instant relief that continues to this day,” added Tarquinio. 🙏

Christopher Lawton is the senior creative and owner of wecreate—an award-winning, virtual marketing communications firm specializing in content, messaging and brand development for various industries, including healthcare and wellness. For more information, visit www.wecreatesolutions.com.

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New Molecules May Reduce Risks of Respiratory Depression



By Mark A. Varney

Opioids are drugs that mimic the effects of opium and can be used to treat severe pain. Unfortunately, they are highly addictive, and they contribute to the fact that prescription drug abuse is the fastest-growing drug problem in the US. Prescription drug addiction is now killing more people

than crack cocaine in the 1980s and heroin in the 1970s combined. As a result, in late April, the Obama administration unveiled its Prescription Drug Abuse Prevention Plan, which orders that health care providers learn appropriate uses for opioids before they can get a license to prescribe them. Congress must now decide whether to amend the Controlled Substances Act to incorporate the plan.

FDA Commissioner Margaret Hamburg has said that the opioids—including OxyContin and nearly a dozen other painkillers—are widely misprescribed and abused. Their destructive effects were starkly outlined in an April 19 *New York Times* article, profiling the devastation wrought upon smaller communities such as Portsmouth, Ohio. Many young people in rural towns gain access to the drugs from dealers and users with access to prescriptions. Across Ohio, fatal overdoses have quadrupled in the last decade. Statewide, more people died from prescription drug overdoses in 2008 and 2009 than the number of people who died in the World Trade Center attacks on

September 11, 2001.

The opioids work by attaching to specific receptors in the brain and blocking the perception of pain; over time, they can cause physical and chemical changes in the brain's pathways. Taking too much of an opioid can cause breathing to slow—a phenomenon known as respiratory depression—and, in some cases, stop entirely. As abuse of these drugs has grown, so has the number of overdoses.

A 2009 paper in the journal *Anesthesiology* detailed how AMPAKINE® CX717, a compound in clinical development created by an Irvine, California-based neuroscience company Cortex Pharmaceuticals, rescued fentanyl-induced respiratory depression in rats. These studies supported testing the AMPAKINE in human volunteers, and in these studies, Cortex was able to show that CX717 prevented the onset of respiratory depression by an opioid.

“Patients are usually given an opiate to mediate pain during surgery,” explains University of Alberta professor Dr. John J. Greer, who led the animal study. “The study’s hypothesis was that the AMPAKINE molecule can stimulate breathing without interfering with the beneficial analgesic effects of opioids.”

In this study, CX717 demonstrated equal efficacy with the opioid-antagonist Naloxone, a drug used to counter the effects of opioids on suppression of breathing. CX717 did not, however, interfere with the action of pain-killing opiates. This offers a distinct advantage compared with Naloxone and could provide a novel therapeutic means of treating those patients who are

particularly prone to breathing depression with opiates while achieving maximum pain relief.

This is also significant because drug-induced respiratory depression enhances the risk of sleep apnea or exacerbates this condition in those who already have it. In turn, sleep apnea has been shown to contribute to heart disease; last year, a study led by Dr. Daniel Gottlieb at Boston University School of Medicine found that men between the ages of 40 and 70 who have severe sleep apnea are 68 percent more likely to develop heart disease, and 58 percent more likely to develop heart failure, than those without the condition.

AMPAKINE compounds act on the most common excitatory receptor in the brain, the AMPA-type glutamate receptor. Dr. Greer’s research team demonstrated that certain of these compounds stimulate a primitive area of the brain called the pre-Botzinger Complex that controls breathing, without causing side effects. In animal models, the compounds were shown to enhance the respiratory drive and breathing rhythm in laboratory rats whose respiration rates were purposely suppressed. AMPAKINES may one day serve as rescue therapies for patients exhibiting respiratory depression, or perhaps an adjuvant to painkillers to make them safer, as well as those who suffer from sleep apnea. †

Mark Varney, Ph.D. is President and Chief Executive Officer of Cortex Pharmaceuticals, an Irvine, CA-based neuroscience company focused on novel drug therapies for treating psychiatric disorders, neurological diseases and sleep apnea.

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Helping Your Mind, Body, and Spirit Achieve a State of Balance

By Kathleen Ganster

For years, it often seemed that “traditional” medicine was different and even at odds with “alternative” medicine.

But more and more physicians are integrating the more non-traditional forms of healing into their practices and teaming up with practitioners of alternative, natural health to care for their patients.

Additionally, more health insurance companies are providing benefits for these services such as massage.

As the owner of medica...the healing arts and an “alternative” health care practitioner, Beverly Leopold has often tried to dispel myths that she can’t work hand-in-hand with a client’s physician to solve chronic health issues.

“I don’t like to refer to it as ‘alternative’ health care, but rather complimentary health care,” said Leopold.

For nearly 20 years, Leopold has owned medica located in Richland Township and practiced natural, complimentary health care including massage, acupuncture, Reiki, reflexology and other similar procedures that she refers to as “wellness techniques.”

“Our sessions are clinical in nature and offer a complimentary factor to the healing process,” she said.

Leopold, a certified massage therapist, certified hypnotherapist, and Reiki master, knows that there are health problems that must be treated by a physician.

“I often refer someone to a physician if they have symptoms of an overlying health concern,” said Leopold, “We work with our clients within the scope of our knowledge.”

Leopold also works with physicians who will refer patients to her that have run the course through certain medicines or procedures and are still suffering with chronic pain that may be eased through massage or hypnosis.

Leopold’s son, Rich Timmerman, is also a certified massage therapist and provides deep tissue massage that works well with athletes recovering from sports injuries and chronic health issues. medica also has a chiropractor on-site who incorporates acupuncture into wellness sessions.

A key component in strengthening the partnership of complimentary health-care providers and physicians is the fact that in the state of Pennsylvania, massage therapists must now be licensed. The law will require all massage therapists to have completed the licensure process and be certified by December 2012.

A long-time proponent of licensing, Leopold thinks more physicians will look at massage in a more serious manner with this new requirement.

“This just takes us to a higher level. We work hard for our education and training, and to have the li-

censing will, I believe, make massage therapy ‘legitimate,’” said Leopold.

Like traditional physicians, Leopold and Timmerman work with their client’s total health care issues to ensure the optimal overall health.

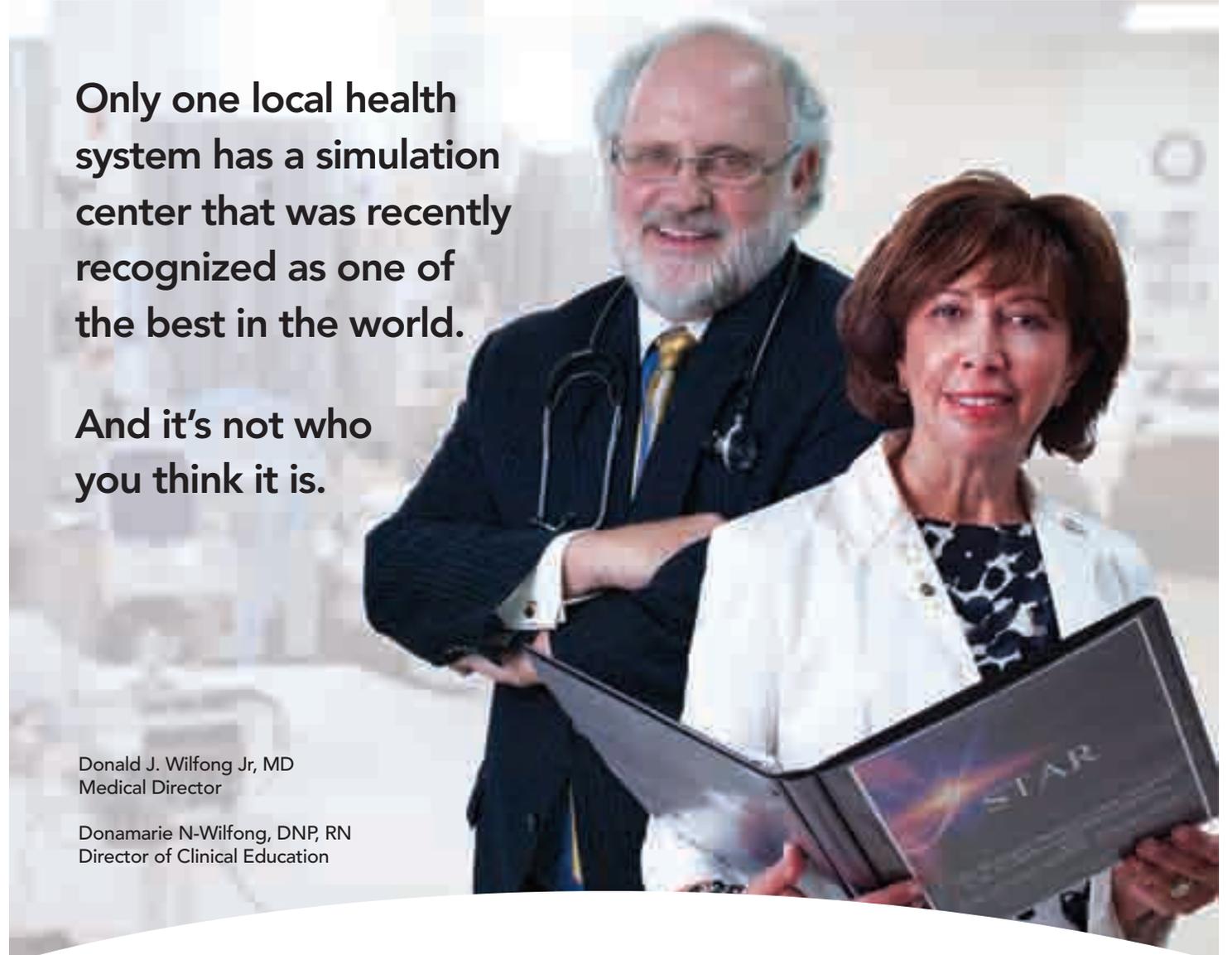
Along those lines, medica has recently teamed up with Alexander’s fitness clubs and MyoFitness personal trainers.

“This follows the whole philosophy that good health is total health with all of a client’s health care providers working in harmony,” she said.

Leopold will be hosting an open house for health care providers in early January. For more information, please contact Leopold at email: medica2beverly@msn.com or telephone at 724-449-2255. Visit www.medicathehealingarts.com for more information. †



Bev Leopold and her son, Rich Timmerman, owners of medica



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Tom Barnes Merges Photography with Physical Therapy to Highlight the Positive Aspects of Healthcare

by Christopher Cussat

While many of the healthcare professionals we profile in this series often use their artistic interests as relaxing ‘escapes’ from the high demands of their positions, physical therapist, Tom Barnes, has found a way to incorporate his artistic passion directly into his work.



Tom Barnes

Originally from Upper St. Clair in the South Hills of Pittsburgh, Barnes attended Penn State University for his undergraduate biology degree and then completed his Master’s Degree in Physical Therapy at the University of Pittsburgh in 2001. He has been associated with and has worked for Butler-based, Quality Life Services (QLS) since October

2001—first as a staff PT at the QLS-owned Chicora Medical Center and Sugar Creek Rest and then as a Site Supervisor at Chicora for six years.

Barnes is currently the Blue Sky Therapy (BST) Regional Manager for all of the QLS and Nugent Group nursing and personal care homes found in the Western Pennsylvania region. “Also, I’ve been a Certified Eden Associate since June of 2010, which helps to promote culture change in nursing homes to combat feelings of loneliness, helplessness, and boredom of

our elders,” he adds. Barnes notes that this mission statement of BST represents an individualized, quality, patient-centered care that is in line with its nursing home partners.

Artistically, Barnes tries to promote the positive stories of therapy and nursing home care by capturing some of its happier moments through his photography and writing about many elders’ success stories. He also explains how his affinity for taking photographs began at an early age. “Like many amateur photographers, I started taking pictures for my high school newspaper at Upper Saint Clair. As a kid, I always especially enjoyed photographing professional baseball, hockey, and football players while they were in action—and I guess it just grew from there!”



Almost as an opposite reaction to the empirical requirements of working in healthcare, creatively capturing positive reflections of life is what Barnes feels has drawn him to photography. “My scientific side taught me to document the facts, but my artistic side drives me to capture the positive experiences and emotions in people’s lives. It is kind of like a scrapbook

of a fraction of all the good we do in the rehabilitation profession.”

Barnes realizes that he is very fortunate to have the opportunity to blend his creative interests with his profession. “I am blessed to be able to incorporate my artistic outlet with my professional career by using photos and success stories towards the promotion of BST’s innovative therapy services and our nursing home partners’ skilled rehabilitation abilities.”

Since his artistry is now so linked to his healthcare work, Barnes can definitely ‘picture’ himself in a more prominent artistic role—especially to continue showcasing the positive aspects of healthcare. “If I didn’t have to work full-time, it would be a pleasure to highlight the compassionate care so many professionals in the healthcare field provide daily—as well as the hopeful, uplifting, success stories of their patients. Sometimes people only hear about the rare, negative events in healthcare (abuse, malpractice, neglect, etc.) that seem to appear at the public forefront more often—I would like to promote the far more prevalent good news!”

The photos printed here alongside the article (with permission for release from BST’s QLS nursing home partners) represent just some of the powerful, happy emotions of patients and therapists that Barnes has captured with his cameras.

For more information on Blue Sky Therapy, please visit: www.blueskytherapy.net.



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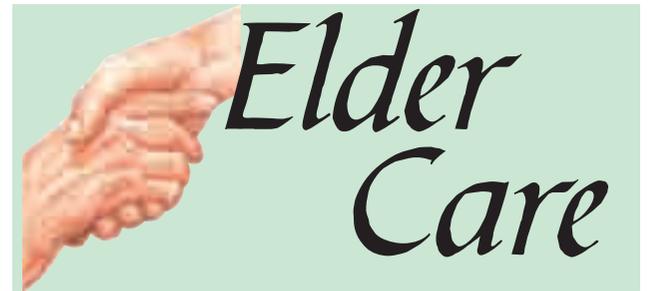
Day created the program to ensure that long-term care residents are not forgotten during the holidays. He also wanted the program to encourage community members to visit their local long-term care facilities in order to witness acts of kindness and compassion. During its 27th season, in 2010, PRESENTS FOR PATIENTS celebrated a new record – 27,482 residents were offered gifts at 322 facilities throughout Pennsylvania, Ohio, New York, Tennessee and West Virginia. The campaign matches interested donors with a patient at a nearby nursing facility. Donors are then sent their patient's information, including his or her three gift wishes. Each donor is asked to purchase at least one of those items.

Some participants go above and beyond the standard commitment of the program by executing truly extraordinary wish list items for patients. For instance, Hank Norton, a 76 year old resident of Beaver Valley Nursing and Rehabilitation Center, had a special Christmas wish last year – to fly in a small-engine plane. Norton, an Air Force veteran, was granted his request to fly again.

Often times many contributors will donate money

for a teddy bear or throw blanket to be given to a patient. Donations in the form of volunteer hours at the headquarters are also appreciated as it takes much time to match nursing home residents with donors to ensure all participants get a fulfilling experience.

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Healthcare Professionals Must Meet the Growing Crisis of Alzheimer's Disease Head On



By Eric J. Hall

As the nation faces an Alzheimer's disease epidemic in the coming years, healthcare professionals must be prepared to meet the unique and changing needs of this population. To do so requires both specialized training in dementia to adequately care for individuals with the brain disorder, and a special empathy for family members who face enormous physical, emotional and practical ramifications as a result of caregiving.

Now is the time: Currently, as many as 5.1 million Americans expected to explode as the nation's population ages. Advanced age is the biggest risk factor, with the prevalence doubling every five years after 65. Not to be overlooked, about a half million Americans under age 65—as young as in their 30's—have young-onset Alzheimer's disease. Many people with dementia have co-existing conditions, so healthcare professionals across the spectrum play a big role in diagnosis and ongoing care.

The gap in healthcare professionals to care for the older population, let alone the older population with dementia, has become glaring. Shortages are widespread, from direct care workers to specialists, from residential care settings to acute care hospitals. As such, training in geriatrics and dementia might open the door to job and advancement opportunities.

As the authors of an April 2008 report issued by the Institute of Medicine of the National Academies conclude: "The nation faces an impending health care crisis as the number of older patients with more complex health needs increasingly outpaces the number of health care providers with the knowledge and skills to adequately care for them." The report's recommendations included a call for initiatives designed to "enhance the geriatric competence of the entire [healthcare] workforce."

There is no doubt that Alzheimer's disease and related dementias add multiple layers of complexity—all of which require healthcare professionals to become knowledgeable about cognitive and behavioral symptoms, disease management, pharmacological and non-pharmacological interventions, and communication techniques in order to enhance professional-patient interactions. For example, as this degenerative disorder progresses, individuals with dementia typically don't respond to instructions, have difficulty managing medications,

lose the ability to speak, exhibit unpredictable behaviors, and become lost. Further, hospital stays for people with dementia often provoke anxiety, confusion and the onset of delirium.

Such understanding can extend well beyond proper diagnosis and ongoing clinical interactions into the home environment, assisting family members in improving quality of life for their loved ones and themselves. People with the disease and family members, usually at a loss after hearing a diagnosis of Alzheimer's disease, need clinicians, physician extenders and other healthcare professionals to fill them in on treatment and care options—and what to expect down the road. Survey after survey finds that caregivers depend on healthcare professionals for information and resources to get them through the various stages of Alzheimer's disease. Individuals live with the disease an average eight years from diagnosis, so needs are continually changing and reliance on others progresses dramatically.

Continuing education programs, available online, on-site and at conferences, can assist professionals and paraprofessionals in meeting this growing need for training. Dementia Care Professionals of America (DCPA), a division of the Alzheimer's Foundation of America (AFA), is one example of a dementia care training program for all levels of healthcare professionals. Mastered by nearly 6,000 professionals to date, the DVD-based program covers a basic understanding of dementia, management of activities of daily living and behavioral symptoms, and principles of basic care. A more advanced series delves further into these topics.

For example, Glen Cove Hospital in Glen Cove, NY, became the first hospital setting to provide DCPA's specialized training in dementia care for its entire geriatric unit, consisting of 27 nurses and 18 patient care associates. Elaine Evangelou Soto, RN, nurse manager of the hospital's geriatric unit, who spearheaded the hospital's dementia training, said that many elderly admitted to the hospital with a primary diagnosis of pneumonia, congestive heart failure or an infection often have a secondary diagnosis of Alzheimer's disease.

"Caring for patients with Alzheimer's disease or dementia requires a certain skill set. It requires that we have a clear understanding of the disease process and its symptoms, so caregivers can communicate effectively and provide the appropriate treatment," she said.

Whether in a clinician's office, hospital setting or long-term care facility, greater education about dementia and improved dialogue between professionals and individuals with the disease and their families hold the hope of increasing the efficacy of intervention, as well as helping families cope with daily challenges of the disease. †

Eric J. Hall is the founding president and chief executive officer of the Alzheimer's Foundation of America, a New York-based national nonprofit organization focused on providing optimal care to individuals with Alzheimer's disease and related illnesses, and their families. For more information, contact AFA at www.alzfdn.org or 866-232-8484.



Community Care Inc. Opens New Office in Allegheny County

Community Care Inc., a local company who specializes in home health care, is opening a new office in Allegheny County. The office will extend service to more customers with a localized, personal approach in the Pittsburgh area.

Community Care Inc. celebrates their 25th year of business in 2011. Among several services, Community Care Inc. excels in home health care, both skilled and unskilled, for children, adults and veterans. They also serve as a facility staffing organization, helping local hospitals, long term care facilities and medical institutions that are in need of skilled nurses. Community Care Inc. requires all candidates to exceed certain requirements before becoming a part of their staff.

Home health facilities are able to service homes effectively within a one-hour radius from their office. Opening a new office on Fifth Avenue in Pittsburgh allows for a greater outreach with so many services to more patients. Currently, Community Care Inc. has two convenient offices located in Greensburg and Washington, PA.

Wasil Waleski, Administrator, is looking to improve the growth of Community Care Inc. in Allegheny, Beaver and Butler County. "This is our 25th year and a great way to celebrate is to open this new office and offer expert home care into new neighborhoods," says Waleski of the Pittsburgh office.

While the company grows, its intimate approach to customers and patients has remained unchanged. Community Care Inc. has been family owned and operated since its inception.

For more information, visit www.communitycarenursing.com. †

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Hospice Is About Life



By Evalisa McClure

Those of us who have dedicated our careers to caring for people with life-limiting illness know that hospice is about life—some of the most important moments in life. New research now confirms the benefits—financial, physical and emotional—of choosing hospice and palliative care for people facing terminal illnesses. In fact, one recent study has shown that people can actually live longer with palliative, or comfort, care.

The study, published in the *New England Journal of Medicine*, showed that terminally ill patients who received palliative care services lived nearly three months longer and enjoyed an improved quality of life compared to those who didn't receive the attention of a palliative care team.

Another recent study found that cancer patients who die at home with hospice services had a better quality of life in their final days compared to similar patients who died in a hospital. Moreover, the family members of the patients fared worse psychologically if their loved ones died in a hospital instead of at home.

"When patients and their families are dealing with a terminal illness, the physical and emotional challenges can be a burden," says Timothy Jones, MD, medical director for VITAS Innovative Hospice Care® of Pittsburgh. "But hospice, with its focus on pain and symptom management and on psychological and spiritual support for patients and their families, can help to ease those burdens.

"Because hospice care typically is provided in a patient's home, whether the home is a private residence, a nursing home or an assisted living community, the patient is able to stay in a familiar setting surrounded by family and friends," he adds. "By treating physical symptoms and providing pain management, as well as addressing emotional and spiritual concerns, hospice can make the dying process more meaningful for patients and their loved ones."

WHEN THERE'S A CRISIS, THERE'S CONTINUOUS OR INPATIENT CARE

What happens when the patient has a medical crisis and experiences, for example, uncontrolled pain, intractable nausea, uncontrolled bleeding or severe confusion?

"Patients often experience acute symptoms when dealing with a terminal illness," says Robert Pfoff, MD, VITAS physician in Pittsburgh. "This can make it difficult for patients to continue to receive care in their residence. But when things get difficult, hospice can be there around the clock."

VITAS offers Intensive Comfort Care (also known as continuous care), which puts a hospice professional at the patient's bedside 24 hours a day until the crisis is resolved. But even with that option, sometimes the illness, or the family situation, makes remaining at home difficult. Even then, hospice can help—by moving the patient to an inpatient hospice unit (IPU).

"In those kinds of situations, we can move the patient to one of our IPUs for a few days, where our staff can watch him around the clock and ensure that his new medication is working," says Dr. Pfoff. "Our field staff can provide the same level of care at a patient's home, but sometimes an IPU offers a more structured environment for pain and symptom management."

BRINGING HOSPICE TO ALL THOSE WHO CHOOSE IT

"Meeting the end-of-life care needs of diverse communities and cultures can be a challenge for hospice providers," says Susanna Lisotto, VITAS community liaison in Pittsburgh. "It is vitally important for all healthcare providers to receive specialized training on the unique needs of people of all faiths and cultures."

Experience also has shown us that our nation's military veterans have unique needs as they approach the end of life, Susanna adds. "Along with specialized training, hospice and other healthcare providers can form relationships with the local Veterans Administration, veterans groups, churches and community centers to provide hospice education and to help people better understand their options in hospice care," she says.

By treating physical symptoms and providing pain management, as well as addressing emotional and spiritual concerns, hospice can make the dying process more meaningful for patients and their loved ones. For more information on end-of-life care, visit the National Hospice and Palliative Care Organization at www.nhpco.org, or contact VITAS at 1-800-93-VITAS. †

Evalisa McClure is Patient Care Administrator for VITAS Innovative Hospice Care® of Pittsburgh.

Candid Thoughts on the Class Act

By Mark D. Bondi, NHA, JD

I confess that I did not educate myself on all aspects of the recent health reform legislation. This was partially due to my living through health reform #1 in the 1990s when I wasted many hours learning about something that disappeared as completely as the 2011 Pirates chances to make the playoffs.

But since most of my work involves seniors I did feel compelled to study the part of the health reform legislation known as the Class Act. The Community Living Assistance Services and Support Act. Recently, I found that I may have wasted my efforts again.

The Class Act was to be a consumer financed and federally administered long

term care insurance program. I felt the best part of the program for consumers was the relatively modest premiums that were being discussed along with no lifetime limits on benefits. I repeat NO LIFETIME LIMIT ON BENEFITS. As I discussed this legislation at various educational programs that I conduct with seniors I would point out that The Class Act sounded like a great deal for someone interested in long term care insurance.

I guess that maybe the deal was too good. As you probably now know, the Class Act was placed on life support on Friday October 14, 2011 when the Secretary of Health and Human Services said that the program's financial model would just not work. The premiums needed to support the projected funding needs were not viable for a voluntary program. As the program's costs increased the premiums would need to increase and this would decrease the number of premium payers. A death spiral for any insurance program. Just ask the many private companies who have struggled with providing long term care insurance policies.

It's good that we found that this program was not viable before it was implemented. But a larger question remains. How do we fix our broken long term care system? The current system forces those who cannot afford to privately pay for care to become indigent so they can qualify for state supported institutional care. Alternately, seniors can be cared for at home by family members or a spouse. There may family or a spouse who are capable of providing care if they are not working already, and if they can stand the stress of what is often a 24-7 responsibility. There are some programs that are excellent but funding these programs is an issue.

We need to fix our broken long term care "system". I guess the Class Act was not the answer - bur an answer is needed. †

Mr. Bondi is president of Sherwood Oaks Retirement Community in Cranberry Twp. PA.

Hospital News is always seeking your opinion pieces on any topic related to the healthcare sector. Please email Daniel Casciato at writer@danielcasciato.com with your ideas.



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Roy Stinson: Profile in Eldercare

Roy Stinson was tired of moving. The son of a carpenter turned sharecropper in the depression in the west, his father moved the family regularly to find work. "Dad wouldn't stay in any place too long. If he couldn't get work, we'd move around the country." Roy, himself, bounced around. He left home when he was 15, traveled around the west, rode the rails for a while, and worked many different jobs as a carpenter or in farming. After his wife died in 2002, after 62 years of marriage, Roy stayed settled in. But he still had one more move to make, one he would later say was the best decision he'd ever made.

By the time Roy was 88, he was a frequent visitor to his local emergency room. He could not get a handle on health. "It seemed like I was there every other week, and I may have been." Out of concern for the safety to others, he gave up driving. He was alone much of the time, although he'd tell you that wasn't a problem for him.

But all of this was a problem for his daughter, Rebecca Guay. She supported him in moving back to Pittsburgh and later in enrolling in LIFE Pittsburgh's program of all-inclusive care for the elderly. Because he resides in Allegheny County and is financially eligible, there is no cost.



Recreation Assistant, Jamie Armes-Opoku with Roy Stinson

The LIFE (Living Independence for the Elderly) programs provide all-inclusive medical and other services to nursing-facility-eligible participants 55 and older, with the goal of having them remain safe and independent in their homes. LIFE's coordinated plan of care includes all medical, social, and daily living support. Primary care and community services are provided through the Day Health Centers and through an in-home program according to an individual's needs. Services include comprehensive medical care, including outpatient and inpatient services, emergency care, podiatry, dentistry, hearing and eye care, diagnostic tests, lab tests and procedures, full prescription coverage, physical, occupational, speech and recreational therapy, nutritional support, transportation to and from the day health centers and to medical appointments, medical supplies and durable medical equipment. There are no fees whatsoever for financially eligible participants.

"Dad had been floundering with all these doctors appointments and not being able to keep track of them or knowing how to get them," says Rebecca. "He was eating out of cans or microwaved frozen foods – and not much else. He kept losing track of his meds. He wasn't able to clean his home. Exactly all the things that LIFE Pittsburgh addresses for him."

Roy, now 90, has been with LIFE Pittsburgh for two years and, in that time, has not required a single visit to the Emergency Room. He says, "I had been in such poor health. Sick a lot and very uncomfortable. Seemed like every time I turned around I was in the Emergency Room. Since I've been a member of LIFE Pittsburgh, I haven't been. I get the medicines there and regular attention from the nurses and doctors. They come to my house every evening to ensure I've taken my medications. I never forget it in the morning but I do in the evening when I'm busy with puzzles or reading."

Rebecca is thrilled with his care. "I no longer worry about him – and I used to all the time. We're very close, we talk every day. LIFE Pittsburgh is very good about including me in my father's care. They not only don't mind my participation, they welcome it. They know that taking care of nursing-facility-eligible folks like Dad is a team effort."

She adds, "He once said to me, 'the Bible says when you're older, the child shall lead.' And he believes that's the right thing, as do I. He jokingly calls me Bossy Pants because I stay on him about his care, but he knows it's for his overall health and well being. You better believe I stay on it."

Roy adds, "Rebecca talks to the nurses and stays abreast of everything and shares information about me that they'd need to know. She knows more about my health than I do."

Roy may forget his medications, but his mind is sharp as a tack. And he loves the attention he gets at the day health center. "Everybody's nice," he says. "A lot of nice people over there."

A recreation specialist

interrupts our interview to give him a hug. Roy says, "How's the kids?"

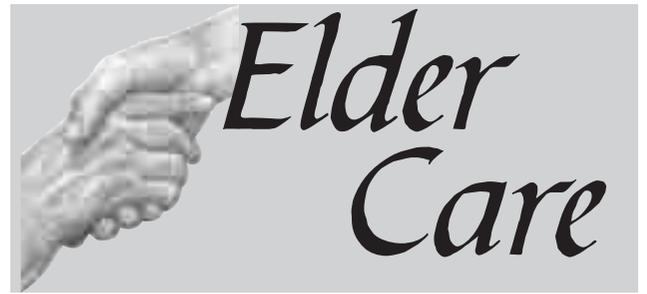
"Getting big and sassy," she replies.

Without missing a beat he quips, "Just look who they bond to."

Looking around the center, it's hard to tell whether Roy's a favorite, because everyone gets so much love and attention. "I think that's one of the things that's so critical to my father's health," says Rebecca. Certainly getting checked up regularly and taking medications is essential. But so is the attention he receives. I wouldn't be surprised if that wasn't the bigger part of it."

Roy says he really appreciates that whatever he needs, there's someone to provide it for him. He visits the center twice a week from around 11:00 a.m. to 4:30 p.m. He loves the games, the medial attention, chapel, and says the food is "out of this world."

Roy has two other children, a daughter in Oklahoma and a son in Oregon, and "a trainload of grandchildren." While Roy really enjoys his independence, he also enjoys all the attention. "I can live with people or without them. But I'd rather have them around." †





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Hospice Care Provides Patients and Loved Ones with Comfort, Care and Compassion

When a loved one is ill, you do what you can for that person. You make chicken soup, fluff pillows and pick up prescriptions from the pharmacy — you do whatever you can to provide as much comfort as possible. Hospice care — a type of care available when a patient's prognosis is for a life expectancy of six months or less if the terminal illness runs its normal course — is centered on those same principles but so much more. It's more than attending to a patient's physical needs, it's making sure the emotional needs of the patient, as well as his or her family, are also considered. The whole person is treated, with a focus on providing peace and comfort.

The Hospice Care concept was established in the United States in 1974, and according to the national Hospice and Palliative Care Organization, hospice care was provided to at least 700,000 patients in 1999, up from 540,000 in 1998. Today, hospice care continues to be a growing and viable option for quality care for the terminally ill. AseraCare Hospice, a leading provider of eldercare services, is not surprised by the increase.

"By treating a person's medical condition, such as relieving pain and controlling symptoms, as well as providing emotional support to the patient and his or her loved ones, greater quality of life can be attained during the final stages of a person's life — that's very important to our patients," said Jane Carr, Director of Clinical Services.

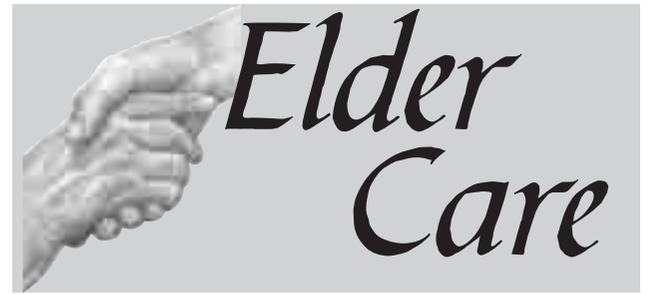
Hospice care is a family-centered approach, and is made up of a "family" or team of healthcare professionals including doctors, nurses, social workers, chaplains,

aides and volunteers, who coordinate and provide care not only to the patient, but also to the family, 24 hours a day, seven days a week. Each member of the hospice team plays a special role in the care of a patient and his or her family, providing medical care, and social, emotional and spiritual support, even after the death of the patient. The Hospice Foundation of America (HFA), a not-for-profit organization that provides leadership in the development and application of hospice and its philosophy of care, notes that patients and families who choose hospice care are the core members of the hospice team and are at the center of all decisions that are made.

The last days of a person's life should be as restful and serene as possible. Therefore, with hospice care, patients and their family members make the decision as to where the patient's final days are spent. AseraCare Hospice explains that rather than at a hospital, hospice care can be provided in a welcoming and comfortable setting such as a nursing home, an assisted living or personal care home, an inpatient hospice center, the home of family, or at the patient's own home. The hospice team can help make that decision, based on what will be most comfortable for the patient and family.

AseraCare Hospice offers the following step-by-step guide to help those eligible for hospice care understand how to take the first step to receiving care.

- Hospice staff meet with the patient's personal physician and a hospice physician to discuss the patient's medical history, current symptoms and life expectancy.



- After the initial physicians' meeting, hospice staff meets with the patient and his or her loved ones to discuss the hospice philosophy, available services and expectations.

- The hospice staff then discusses with the patient his or her pain and comfort levels, support systems, financial and insurance resources, medications and equipment needs.

- Finally, a plan of care is built for the patient, which staff regularly reviews and revises, based on a patient's condition.

While it may be difficult to think about a loved one passing away, hospice care can help make the transition more peaceful. Bereavement support is also available, and is one of the final stages of hospice care. AseraCare Hospice staff notes that one of the most beneficial roles that hospice staff and volunteers offer is support and help to family members and loved ones with emotional healing or adjusting to their loss.

For more information visit www.aseracare.com or www.youtube.com/aseracarehospice or www.facebook.com/#!/aseracarehospice. †

The 50-50 RuleSM: Overcoming Family Conflict is in the Best Interests of Aging Parents

By Lucy Novelly

Anyone who cares for seniors whether in the hospital or home setting has seen the behind-the-scenes family conflict that can interfere with the care of an elderly patient. Siblings may not have much in common now that they're grown, but they do share one thing: responsibility for the care of their mom or dad.

"Any family that has cared for a senior loved one knows that problems working with siblings can lead to family strife," said Lucy Novelly, a local franchise owner of Home Instead Senior Care that serves Washington County and South Hills. "Making decisions together, dividing the workload and teamwork are the keys to overcoming family conflict."

Coined The 50-50 RuleSM, this program offers strategies for overcoming sibling differences to help families provide the best care for elderly parents, which in turn helps the professionals who fit into the overall care dynamic. The 50-50 Rule refers to the average age (50) when siblings are caring for their parents, as well as the need for brothers and sisters to share in the plans for care 50-50.

"If you're 50, have siblings and are assisting with the care of seniors, it's time to develop a plan," Novelly said. "This program can help."

At the core of the 50-50 Rule public education program is a family relationship and communication guide of real-life situations that features practical advice from sibling relationships expert Dr. Ingrid Connidis from the University of Western Ontario. Medical professionals, administrators and others who find themselves in contact with families may benefit from understanding more about such family dynamics and may become a third party mediator in discussions regarding the overall care and health of a senior.



"Like all relationships, siblings have a history," Connidis noted. "Whatever happened in the past influences what happens in the present. Regardless of their circumstances, most siblings do feel a responsibility to care for parents that is built from love. And that's a good place to start — optimistically and assuming the best."

According to the website Caring.com, family feuds often revolve around the following areas and impact the health status of a senior:

- **Roles and rivalries dating back to childhood.** Mature adults often find that they're back in the sandbox when their family gets together. This tendency can grow even more pronounced under the strain of caregiving.

- **Disagreements over an elder's condition and capabilities.** It's common for family members to have very different ideas about what's wrong with a loved one and what should be done about it. You may be convinced that your family member is no longer capable of driving, while your brothers argue that he needs to maintain his independence.

- **Disagreements over financial matters, estate planning, family inheritance and other practical issues.** How to pay for a family member's care is often a huge cause of tension. Financial concerns can influence decisions about where the person should live, whether or not a particular medical intervention is needed, and whether he can afford a housekeeper. These conflicts are often fueled by ongoing resentment over income disparities and perceived inequities in the distribution of the family estate.

- **Burden of care.** Experts say the most common source of discord among family members occurs when the burden of caring for an elder isn't distributed equally. Home Instead Senior Care research reveals that in 43 percent of U.S. families and 41 percent of Canadian families, one sibling has the responsibility for providing most or all of the care for mom or dad. "Usually one of the adult children in the family takes on most of the caregiving tasks," says Donna Schempp, program director at the Family Caregiver Alliance (www.caregiver.org) a national nonprofit organization that provides information and support to caregivers.

Engaging parents in caregiving issues is important, Dr. Connidis said, and so are family meetings that involve a third party if necessary. A third-party resource, particularly a professional such as a doctor or geriatric care manager, can provide an impartial voice of reason. "Talking before a crisis is best," she said. "Talk to one another about perceptions of what happens if seniors need help, how available you would be, and the options that you and your family would consider."

For more information about the 50-50 Rule program, visit www.solvingfamilyconflict.com. †

Lucy Novelly, CSA, is the franchise Owner/CEO of Home Instead Senior Care serving Washington County and the South Hills area. For more information about the local Home Instead Senior Care offices serving the Greater Pittsburgh area, visit www.homeinstead.com/greaterpittsburgh or call 1-866-996-1087.

Artists', Photographers' Creations Brighten Kane Glen Hazel

The walls at the Kane Regional Center in Glen Hazel have been transformed into a work of art thanks to talented artists and creative photographers from the Milestone Centers for People with Behavioral and Intellectual Challenges located in Wilkinsburg.

Approximately 100 pieces of art such as framed paintings, drawings and sculpture have been on display at Kane Glen Hazel since May 26, and 40 photographs are part of the project. The entire collection is entitled "The Art of Giving."

One of the 22 artists, George Gaydos, had more than 20 of his paintings in the Kane Glen Hazel lobby. Gaydos is a Pittsburgh native who has been painting since the mid-1970's. He is part of the Milestone Day Treatment Therapeutic Art Programs. Painting, Gaydos said, has been part of his life for decades and he wants to give back to others through his artwork.



"Art is therapy for me," said Gaydos, who attended the Art Institute of Pittsburgh in the 1970's and received a certificate in air brush painting. "I enjoy doing things for people who appreciate the art. I teach the people that want to learn. I have been in hospitals and institutions myself. I remember being in (the former) Mayview State Hospital in 1988 and there was nothing on the

walls — nothing to take your mind off things. Everyone needs a little bit of fantasy in their life. It is going to lift your spirits."

Gaydos' work is intended to lift the spirits of residents, staff and visitors at Glen Hazel. The artwork donated by members of the Day Treatment Therapeutic Art Programs certainly has sparked interest and started more than a few conversations.

"The key feeling about this artwork is that George and other artists in the organization have received services their entire lives, and now they are returning services by making their artwork visible to our residents and the residents at Kane Glen Hazel," said Jennifer Macioce, LCSW, Director of Day Treatment and Deaf Services at Mile-

stone Centers.

Kirsten Ervin, a therapist at Milestone and former gallery manager, coordinated the art project. She and Gaydos worked together each week to mat and frame the art in frames donated by the Pittsburgh Center for the Arts, Panza Gallery, Carnegie Mellon Art Department and several individual Pittsburgh artists. Gaydos, a self-employed carpenter for 30 years, donated hours of time and expertise to the framing process. "George has taught me so much about framing, and this is after I ran a gallery for three years" Ervin said.

In addition to the paintings, a second endeavor involving Milestone and Kane Glen Hazel was a success. Kane residents were asked to compile a list of their favorite locations throughout the Pittsburgh region to be photographed by a Milestone art therapy group.

"The photography group has met with Kane residents," Macioce said. "They had a questionnaire that asked three questions: Where in Pittsburgh are you originally from?; What are your three favorite places in Pittsburgh?; and if you could only have one picture of Pittsburgh that you could keep with you, what would it be? Once that information is compiled, the group decided which images to shoot based on the answers."

Five photographers participated in the project and spent weeks shooting photographs in Bloomfield, Lawrenceville and the South Side as per the request of the Kane Glen Hazel residents. The photographs were framed and displayed at Kane Glen Hazel.

Jessica Kalmar, a photographer and instructor at the Art Institute of Pittsburgh, is a long-time volunteer with the Milestone photography group. She coordinated the photography portion of the exhibit displayed at Kane Glen Hazel.

"The artwork on display has been quite impressive," said Albert Pantone, Recreation Therapy Supervisor at Kane Glen Hazel and one of the project organizers. "The photographs complement the artwork. We are proud that Kane Glen Hazel and Milestone Centers have teamed to produce such an aesthetically pleasing and worthwhile project."

For more information, contact Jennifer Macioce, LCSW, Director of Day Treatment and Deaf Services at Milestone Centers at 412.473.8059, or Albert Pantone, Kane Glen Hazel Recreation Therapy Supervisor, at 412.422.6993. †



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Walking on Common Ground

By Rafael J. Sciuolo

They were a handsome family of three: mom, dad, and their 11 year-old daughter. With the household pet in tow (a friendly Beagle), they set out on the trail at dusk. This was the first time they took part in our Family Hospice and Palliative Care annual Memorial Walk, which was held October 2 on the South Side.

Although the family was happy to take part, the pain was still evident in their eyes. Grand pap had just passed away this summer, and it was in his memory the family was walking.

As they made their way along the walking trail, the family slowed down to look at each luminaria that lined the walkway. One by one, they read the names of loved ones who were being honored in a special way.

After about ten minutes, the mom said “There it is. There’s Grand pap’s name.” The family stopped and stared a moment at the luminaria they had placed in her father’s honor. They gathered around it in quiet reflection, then stopped another walker, asking if she would take their photo.



After the photo was taken, the woman, who came alone, continued walking with the family of three, first engaging in small talk. Then, the conversation turned to their respective purposes at the Walk.

“My dad died this summer,” the mom explained. “His name was John. He worked thirty eight years at the mill.”

“What a coincidence,” said the woman who had taken the picture, “My dad worked at the mill, too. He was a welder, his name was Frank. He died in February.”

As the conversation continued, the mom recognized a familiarity in the description of the woman’s dad. “You know, my dad used to tell us about a guy he worked with named Frank. He said he would come to work just about every day humming an old tune, and do the same thing when the whistle blew at night.”

“That was my father!” the woman exclaimed. “When he got home each night, he was still humming the same tune.”

As it turns out, the two men worked together on the welding line for 22 years.

Making the Most of Life

The rest of the Memorial Walk seemed to fly right by as the family and the woman shared stories and remembrances.

What happened at our Memorial Walk on October 2 is a great example of the hospice continuum of care. While the primary focus is compassionate care for the patient, we also pride ourselves in the services offered to families and loved ones.

Events like the Memorial Walk allow those with similar experiences to connect and share. Hospice is more than a means of care – it is a community. A community of professionals, caregivers and families.

Family Hospice is proud to offer ways for that community to remember its loved ones, and stay in touch while doing so. Along with events like the Walk, we have also just launched a Facebook page (www.facebook.com/familyhospicepa) where families and professionals alike can stay up-to-date on the latest news from Family Hospice and connect with others who have shared their life experiences.

Patients and loved ones under hospice care take part in a special journey. The journey gives those who experience it a unique understanding of end-of-life care and provides a connection on many levels.

The woman and the family who attended our Walk discovered that they were walking on common ground in more ways than one. Not only did it turn out that their fathers were long-time co-workers, but they themselves walked the same journey. The Memorial Walk was a microcosm of that. They had all been down the same path before, a path filled with compassion, support and caring. And they realized that the path is a little easier to navigate when there is someone else walking along side. †



Rafael J. Sciuolo, MA, LCSW, MS, is President and CEO of Family Hospice and Palliative Care and Past Chairperson of the National Hospice and Palliative Care Organization. He may be reached at rsciuolo@familyhospice.com or (412) 572-8800. Family Hospice and Palliative Care serves nine counties in Western Pennsylvania. Its website is www.familyhospice.com.

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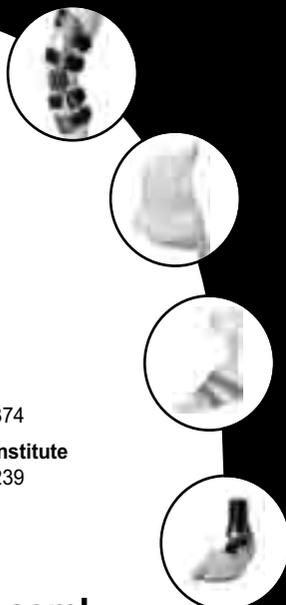
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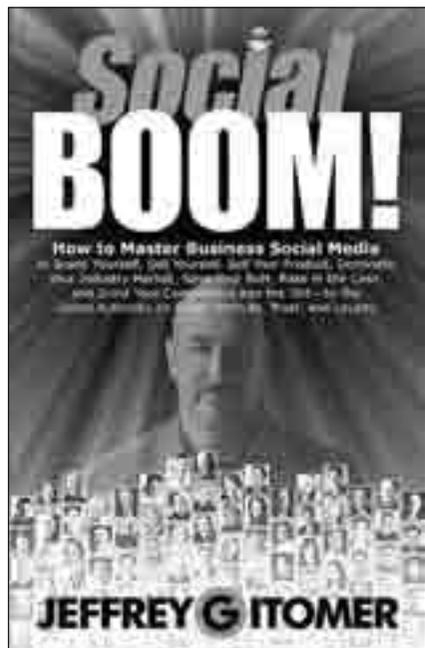
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“Social BOOM!” by Jeffrey Gitomer

c.2011, Financial Times Press \$22.99 / \$27.99 Canada
190 pages

On your way to work this morning, you checked in with your peeps and your tweeps. You told them you were wearing your lucky shirt, you asked for good wishes, then you hit “send” and posted it on Facebook and Twitter for all to see.



But aside from your followers – who cares? Nobody, says author **Jeffrey Gitomer**, which means you’re wasting valuable resources. In his book “**Social BOOM!**” he shows how better postings on social media can mean better postings at the bank.

Every day, you spend a few minutes amusing your friends online with your wryly observant posts. Fun, huh? Now imagine what would happen if you used those same few minutes to reach thousands of prospective clients instead.

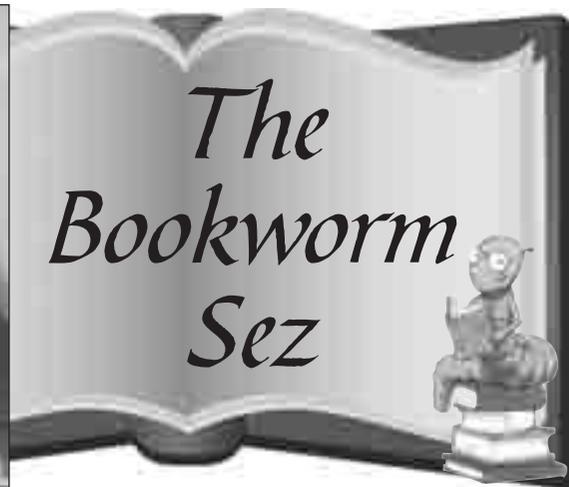
According to Gitomer, there are four keys to business social media: Facebook, Twitter, LinkedIn, and YouTube. Use all four efficiently, simultaneously, and with great frequency “...or BOOM! will never happen...”

Facebook, he says, is the easiest to understand and use. Chances are you already have a personal page, but BOOM! requires a sec-

ond page, on which you’ll post information of value to your clients and prospects. Give them something useful and they’ll run to your door.

LinkedIn is purely a business social site; in fact, you’re not technically allowed to link with someone you don’t already know. LinkedIn is simple to use, and the beauty of it is that you can join groups of like-minded people and search for prospects in the database. Don’t forget, Gitomer says, to completely fill out your profile.

You might think Twitter and YouTube are just for kids, but Gitomer insists that both are important tools for business. If one of your tweets is re-tweeted, it auto-



matically expands your audience (and your prospects) to the hundreds of thousands. And think about how convenient it would be to let new customers see a video of your business any time they wanted.

“... if done correctly, business social media puts you in a direct one-on-one contact with paying customers,” says Gitomer. “That’s a game plan you can take to the bank.”

Undoubtedly, the information you’ll find in “Social BOOM!” is useful. You don’t need a PhD in computers to do it. All you need, author Jeffrey Gitomer says, is time.

But, judging by most indications, it’s going to take a lot of that. Gitomer says you only need an hour a day, but this book advises readers to peruse blogs, post multiple times a day, “follow” people and comment on their posts, make frequent YouTube videos, and update, update, update often. That one hour a day could quickly become all day.

Still, employing just a fraction of what you’ll learn here can only help. Just dipping your toe into the tech pool may lead to some good leads. And most importantly, as Gitomer points out, business social media is free.

I think there are nuggets of goodness inside “Social BOOM!” but only if used wisely and judiciously. If you’re new to social media or want a few tips on using it, peep this book. †

The Bookworm is Terri Schlichenmeyer. Terri has been reading since she was 3 years old and she never goes anywhere without a book. She lives on a hill in Wisconsin with two dogs and 12,000 books.



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The Tortuoso Camino



By Michael W. Weiss, M.D.

I wonder if Guatemala missed “Pittsburgh” as much as Panama missed “Denver.”

“Denver” is what the staff at a Panama hospital calls the Operation Walk medical team that, until this year, traveled from the Colorado city to the Central American country to perform joint surgeries on needy patients.

In the Panama hospital’s nursing units and operating rooms, the name Denver is spoken with reverence – the kind reserved for Nobel Prize winners, religious leaders and poet laureates.

“Pittsburgh” is what the same staff calls our western Pennsylvania team of surgeons, physician assistants, nurses and others, who traveled to Guatemala in years past but switched places with Denver this September and went to Panama instead.

I’m not sure, but I think the Denver-Pittsburgh swap deflated Panama – deflated as in how you feel when you want a new fishing reel for your birthday but get a pair of tan Dockers instead.

Operation Walk is a not-for-profit, volunteer medical services organization whose teams travel to developing nations to provide U.S.-quality surgical care for patients with degenerative arthritis and other painful, debilitating joint conditions. Each team raises its own travel funds, secures equipment donations from implant manufacturers and advance-ships its own medical supplies.

Teams representing nearly a dozen U.S. cities participate. Many months’ worth of work and hundreds of thousands of dollars go into making the one-week trip possible. As our depart date nears, we work harder to prepare and look forward more anxiously to the opportunity to serve.

“Why don’t you speak Spanish?” an administrator from the Panama facility asked me upon our arrival. “Denver does.”

In my own defense, I did anticipate and try to proactively bridge the communication gap. Our practice recently hired a physician assistant who logged a prior career as a sign language interpreter. When I interviewed her in August, I asked if her hands were bilingual.

“No, Dr. Weiss,” she replied. “We use American Sign Language in the United States.”

Maybe the Panama hospital administrator likes Denver better because no member of Denver’s team would ever be so ill prepared. Or maybe the tan Dockers’ reception for Pittsburgh wasn’t about the Pittsburgh team at all.

Shooting from the Hip

Medical service trips unite strangers in a bond of shared purpose, and it’s hard to share a purpose as meaningful as treating underserved patients without also becoming friends. Denver left its mark on Panama first; any team that followed was destined to be second favorite.

Then again, volunteering for medical service is about giving and not receiving, so it doesn’t matter who occupies what position on the popularity scale. It only matters what you leave behind. By week’s end, the Pittsburgh team had offered the best of its skills to dozens of grateful patients, affirming for the Panama hospital administrator that one can care in any language.

I boarded the plane still not knowing the Spanish translation for, “How is your pain level today?”

I also don’t know how else to say, “No, sir, I’m not smuggling baby sea turtles or their eggs. My large bag is safe to open.” Fortunately, federal fish and game commission officers in U.S. airports speak English. In Atlanta, one waved me over to a special security checkpoint and asked, “Will anything jump out at me when I unlock your luggage?”

Catching a glimpse of the tan Dockers in my suitcase, I thought of the many thousands of patients I’ve treated through the years.

Just as our Operation Walk team went to great lengths to prepare for its medical service trip, and just as I came away from the trip knowing what it means to be not-Denver, I wondered if I subconsciously treat some patients the same way.

Patients plan for their office visits, fill out their forms and submit their secrets, all with the hope of being helped. I need to give each one my complete, undivided skill and attention – and be aware of the unintentional signals I’m sending – or else they may leave my office feeling like the Pittsburgh team in Panama. That’s not the impression any physician wants to leave or the reputation anyone wants to build.

Did you know that baby sea turtles have been observed making a full circle around their nests before traveling in a straight line to the sea? The Internet says that the Spanish phrase for circuitous route is “tortuoso camino,” and that “tortuoso” also means “winding.”

Normally, I’m a straight-line-to-the-ocean sort of guy and don’t do “tortuoso.” This time, it took a detour through a Central America hospital to help me better understand what happens at home. †

Dr. Weiss is an orthopedic surgeon with Tri Rivers Surgical Associates, Inc. His column appears quarterly in Hospital News.

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Nursing Professor Named Fellow by Esteemed Nursing Academy



L. Kathleen Sekula

Dr. L. Kathleen Sekula has earned one of the nursing profession’s highest honors in being named a Fellow of the American Academy of Nursing (AAN).

Sekula, an associate professor and coordinator of Duquesne University’s graduate forensic nursing programs, will be formally inducted as a Fellow at the AAN’s national conference on Oct. 15. She is the third School of Nursing faculty member to be named a Fellow by the AAN, the nation’s top organization for improving nursing practice and influencing policy.

Fellows are selected, in part, on the extent to which their careers have influenced health policies and health care delivery for the benefit of all Americans. Sekula has been an advocate for improving nursing practice for vulnerable populations, in particular victims of violence, including domestic and sexual assault.

With financial assistance from grants from the Department of Health and Human Services, Sekula was the driving force in the creation of the School of Nursing’s graduate forensic programs, and she has worked tirelessly to see that forensic nursing gains recognition as a health care specialty. With the expansion of the role of the forensic nurse, forensic nursing professionals in the United States and United Kingdom have sought her guidance.

Sekula serves as president of the International Association of Forensic Nurses certification board, a post through which she works to establish advanced practice certification. She is also a member of the board of directors of The Cyril H. Wecht Institute of Forensic Science and Law, as well as an advisor to the programs that it offers.

Her resume includes years of experience as an advanced practice psychiatric nurse, and during her early years in practice, she served on the staff of the emergency room at what is now UPMC Mercy Hospital. It was while maintaining a clinical practice in psychiatric nursing that she recognized the need to create programs to better prepare nurses for the care of victims of violence.

Sekula resides in New Kensington.

For more information, visit www.duq.edu. †



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Awardees



Giuseppe Aiello, BSN, RN
UPMC Italy, Istituto Mediterraneo per I Trapianti e Terapie ad Alta Specializzazione

Giuseppe Aiello found professional fulfillment in nursing. "Nursing provides the key combination of empathy and problem solving, and involves both frame of mind and intellect," he says. "These are gifts related to both art and science, each connected to the other."

Aiello, who resides in Bagheria in Palermo, Italy, earned his registered nurse degree at Istituto Pace Sviluppo Innovazione ACLI (IPSIA), his professional nurse diploma at Institution Azienda Sanitaria, and his Bachelor of Science degree in nursing at the University of Palermo. He began his career in dialysis and became a techniques manager responsible for training other nurses. He currently works in nephrology and dialysis at UPMC Italy, Istituto Mediterraneo per I Trapianti e Terapie ad Alta Specializzazione (ISMETT), the transplant center in Sicily partnered with UPMC.

At ISMETT, Aiello was first introduced to work with pediatric patients. In 2010 he cared for a three-year-old girl from Israel on a waiting list for a kidney/liver transplant. His young patient required daily dialysis for six months. "In spite of the language barrier and different culture we were able to build a great relationship and communication," he says. "She and her family will stay in my heart for the rest of my life."

Aiello continually aspires to improve his professional skills. His work at ISMETT, one of the leading organ transplant centers in the Mediterranean region is a source of pride. In caring for young patients who fear life is almost over, he brings a simple smile and endeavors to steal a smile back.



Sheryl Anderson, RN
West Penn Allegheny Health System, Canonsburg General Hospital

Sheryl Anderson, the evening charge nurse on Canonsburg General Hospital's Medical/Surgical and Orthopaedics Unit, entered nursing with a "love and desire to help people and make a difference in their lives, be it physical or mental."

Her career has fulfilled her dreams! A graduate of Washington Hospital School of Nursing, Anderson finds great satisfaction in knowing she has provided the best care and comfort possible and in seeing patients recover, understand their illness and manage their health appropriately.

A resident of Scenery Hill, Anderson encountered one of her most challenging patients early in her career. "Providing comfort for a young mother dying of cancer and trying to alleviate her children's fears of losing their mother made me question myself as a young nurse," she says. "But in the end, the mother died peacefully with her children at her side, and I felt a sense of pride, knowing that I was able to help them through this terrifying ordeal."

Anderson advocates for nursing by encouraging young adults to consider the profession. She notes that nursing has changed over the years, including a greater emphasis on teaching by bedside caregivers. "We have limited time to spend with our patients; so our time with them must be quality time. We must all work together to provide the best care possible."

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- Alana Iwanowski
- Autumn Jones
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- Nicole Mitchell
- Angela Panos
- Amanda Petrill
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- Gary Stanich
- Casey Steckler

Donate Life Honoree

- Eileen Roach

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Roslyn Arndt, RN BSN
Heritage Valley Sewickley

Roslyn (Ros) Arndt has been a nurse for 35 years, since graduating with honors from Clemson University in Clemson, South Carolina in 1976. She currently works as a full time registered nurse in the Post Anesthesia Recovery Unit (PACU) at Heritage Valley Sewickley.

Arndt first thought of becoming a nurse as a five-year-old, being cared for by her aunt, who was an RN. She was encouraged by nurses in her family and in the community. They seemed committed, capable, confident and compassionate. "They were wonderfully influential and helped me listen to my God-given call".

Nursing is a natural part of who Arndt is. "I believe people can sense, see, and know my love of this profession." She believes she has been given her much in life and has a desire and a sense of responsibility to give back. A resident of McKees Rocks, Arndt volunteers in the community through the Health Ministries program at her church and provides counseling and support for Celiac Sprue patients. These encounters taught her about selfless giving and forbearance. Arndt is also a member of Pennsylvania Association of Post Anesthesia Nurses (PAPAN) and the American Society of Peri-Anesthesia Nurses (ASPAN).

"Ros is a model of excellence in nursing," say her co-workers. "If you ask anyone about Ros, you will see a tender look or smile cross their face as they recollect a time they were touched by our angle of mercy."

Patrica Barilaro, RN
Heritage Valley Beaver

Nursing was not Patty Barilaro's first career choice. Her dream was to be a stewardess and fly all over the world. Fortunately, she did pursue nursing. Barilaro became a nurse because someone believed she could, and she stayed a nurse because she believes this is the path God has chosen for her.

Barilaro, who has been a nurse for 19 years, currently works as a full time registered nurse on Level 1 an Adult Medical Surgical Oncology Unit at Heritage Valley Beaver. She is a 1992 graduate of Community College of Beaver County and resides with her family in Monaca.

The most rewarding part of Barilaro's Oncology nursing career is sad yet gratifying. Every day she deals with death and dying. "I love making a difference in the lives of my patients and their families," she says. "If I can make someone smile, help them through pain, hold their hand when they are afraid, comfort them when they are dying, and help them to die with dignity—all while my own heart is breaking—then I am satisfied."

"I have learned a lot about the person I am and a lot about life," she says. Barilaro is actively involved in her community's Relay for Life program. "I love my profession and being an Oncology nurse," she says. "I don't believe I would ever change my profession. It is hard and stressful, but one of the most rewarding jobs in the world."



Linda L. Barr, RN
UPMC Cancer Centers

Linda Barr remembers as a young child, the calming and gentle touch of a nurse who was with her during a procedure. That was when Barr decided to pursue a career in nursing.

Barr uses these same caring qualities as an RN on the medical oncology unit at the Arnold Palmer Pavilion, a joint venture of UPMC Cancer Centers and Excelsa Health. After earning a licensed practical nursing diploma from Westmoreland Community College, Barr continued her education by earning a registered nursing diploma from Citizens General Hospital School of Nursing.

Medical advances have enabled oncology patients to have better outcomes and quality lives. Barr credits these treatments in the satisfaction she receives from seeing patients who years ago may not have had good outcomes, now return for "well" check-ups. "I love oncology nursing," she says.

Barr regularly participates in the American Cancer Society's Relay for Life, a cancer research fundraiser where survivors and other participants run or walk around a track for 24 hours.

She fondly remembers one AIDS patient who avoided any physical contact. "I thought the patient just didn't like to be touched," Barr says. One day, the patient looked particularly sad. "I told the patient I was having a bad day and needed a hug." Immediately, the patient embraced Barr and began crying. "Do you know how long it's been since anyone touched me," the patient asked? "The patient was protecting me by not touching me," Barr says. "Now I never say good-bye without a hug."



Carol A. Bodnar, RN
Ohio Valley General Hospital

Carol Bodnar began her professional journey with Ohio Valley General Hospital and has been a dedicated Registered Nurse on the Critical Care Unit for 17 years. Encouraged by her mother to become a nurse, Bodnar fell in love with the profession and takes pride in her day to day duties.

Bodnar recognizes the importance of the nursing profession. "The most rewarding part of my job is knowing that I contributed to improving the health of our patients," she says.

She gives her best every day and believes in the importance of giving back. Bodnar makes a point to share her knowledge with many younger nurses through clear communication, collaboration and professionalism. "I feel it is our duty as seasoned nurses to encourage our younger nurses to have a good work ethic, a professional attitude, and to learn something every day," she says.

Alnora Brassell, RN
Kindred Hospital, North Shore

Alnora Brassell's goal is to help patients achieve the highest quality of life possible through encouragement, support, education, and a scientific knowledge base driven by the nursing process. "People need someone to listen to their concerns, their feelings, and to be an advocate for them," she says. "People know so little about health care so I take on the responsibility to educate my patients and their families."

Brassell incorporates evidence and research into her every day practice. She appreciates that nursing is not always easy but she tries to help her co-workers through teamwork and relationship building.

In addition to her work with patients, Brassell orients students and serves as a preceptor to new nurses at Kindred Hospital, North Shore. Education is an important part of Brassell's life as a student as well. "There is always room to learn and improve in all you do," she says. Her goal is to complete her BSN by May 2012, and then go on to earn a graduate degree to become a nurse practitioner with a specialty in family medicine. "As a nation, we all deserve health care," she says. "As a CRNP I'll be able to provide a service to people, not just treating the disease process, but encouraging preventative medicine and health promotion."



Tracy Brnusak, BSN, RN
Magee-Womens Hospital of UPMC

After her grandmother's illness and passing Tracy Brnusak knew she wanted to care for people in the weakest, most vulnerable moments of their lives. The nurse who cared for her grandmother was so attentive, exemplary, and caring, that Brnusak shifted her studies from pharmacy to nursing. "It was the best decision I have ever made," she says.

The Pleasant Hills resident earned her Bachelor of Science degree in Nursing at the University of Pittsburgh School of Nursing and gained experience on a gynecologic surgical unit. Today Brnusak is a senior professional staff nurse in orthopaedic and bariatric surgery at Magee-Womens Hospital of UPMC. She has bariatric certification and is a preceptor to nursing students and an advocate for the profession. "I try to stress that we are the eyes and ears of our patients and that our assessments and critical thinking truly do save lives."

Brnusak drew inspiration from a clinical mission to Guatemala two years ago with a surgical team to perform free knee and hip replacements. The team worked in a hospital with limited resources for patients who lived in homes with cement walls, dirt floors, and tarp ceilings. "Our patients wanted only to live without arthritic pain so they could continue to work and feed their families," she says. "They would hug us, call us angels, and sing hymns of thanks."

Brnusak has found that as a nurse she is "never really off-duty," which is why her license plate reads "PITT RN."

Karen Brzuz, RN, CCRN
UPMC Hamot

Inspired by her grandmothers who were nurses, Karen Brzuz entered a future nurses program while still in high school. "I attended parochial school, and when you chose your vocation it was a spiritual experience." Nursing became her higher calling.

Brzuz earned her practical nursing license in Erie where she had an aunt who was a nurse. She later obtained her associate's degree in nursing at Gannon University and her critical care nursing certification through the American Association of Critical Care Nurses. A critical care nurse since 1969, Brzuz currently works in the intensive care unit at UPMC Hamot, and is certified in trauma care, specialized life support, and National Institutes of Health stroke scale.

"I am an advocate for stronger bedside care," she says. "As technology improves, nursing sometimes loses the stronger bedside connection." Brzuz believes in setting daily goals for patients with range of motion and physical activity whenever possible. "I like to empower patients to want to get better and participate in their care with their families." She also serves as a nurse preceptor empowering young nurses.

Brzuz once treated a stroke patient who was very unstable, not yet ready for physical or occupational therapy. "I cared for him as I would my own father," she says. She helped him with range of motion exercises, turned him frequently, and finally saw him into rehabilitation. Later they met again by chance in a restaurant and he gave Brzuz a big bear hug. "Now that's what it's all about!"



Michelle Cain, RN
Western Psychiatric Institute and Clinic

Michelle Cain chose nursing because she wanted to help people, and that's exactly what she does. As an assistant nurse clinical manager and wound care nurse on the Integrated Health and Aging Unit at Western Psychiatric Institute and Clinic, Cain gets to do what she likes best: "Spending time with and caring for patients."

Cain earned her Bachelor of Science degree in nursing at the University of Pittsburgh. She is adept at meeting the challenges of care in the behavioral health environment. Many of Cain's peers feel her energy and compassion make her the gifted nurse she is. As one co-worker says, "She always puts her patients' needs first." When a patient was unable to leave her room for a long period of time, Cain was a regular visitor who brightened the patient's day and tend

Considered a go-to person on her unit, Cain is sought out for instruction in the use of medical equipment, dressing changes for complex wounds, and how to prevent falls. She won honorable mention for her abstract on the reduction of non-behavioral restraints and fall rates for Research Day on Aging 2011. She also assists nursing instructors on her unit.

Cain calls nursing "the most versatile profession." She encourages middle and high school students to consider the field. "Nurses provide care, education, support, and coaching so patients gain independence and knowledge of their own health care," she says.

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Our Cameos of Caring®
Honoree

Mariaelena Perowski,
RN, CCRN, PHRN

And Salutes all of the
2011 awardees



Mariaelena Perowski, RN, CCRN, PHRN





Keith Carroll, RN, MSN
UPMC Beacon

Keith Carroll became interested in nursing after working as a nurse assistant. "I have been very fortunate in my nursing career," he says. "I've worked with some amazing people."

Carroll earned his nursing certificate from Riverside College of Health Studies in London and earned a master's degree in nursing from the Royal College of Surgeons in Dublin, Ireland. As a nursing supervisor manager at UPMC Beacon Hospital, Carroll ensures that all units run smoothly.

"I believe everyone has a contribution," he says. His guiding philosophy is that all members of a nursing team are in the job together. "I would not ask my team to perform any task that I myself wouldn't perform."

Carroll fondly remembers one of his first oncology patients. He had befriended her, often, paying her visits. After the patient passed away, her family wrote Carroll expressing gratitude for his, and the entire nursing team's, care and compassion toward the patient. They also included a memorial card.

According to Carroll, communication is the key to successful nursing. He leads with an open-door policy and feels that everyone needs to be treated as an individual. Establishing a rapport with the patient is essential. Once that trust is gained, the most difficult tasks become easier. "What's most important for some patients is that the caregiver sits with them, has a chat, and holds their hand," he says.

Beth Ann Condit, RN, BSN, CCRN
UPMC Passavant

In high school, Beth Ann Condit wanted to be an auto mechanic or a truck driver, but her dad said no to both. "I figured that since he was a college graduate, he wanted me to go to college," says Condit. That's when she considered nursing, and her dad said yes.

A resident of Cranberry Township, Condit earned her nursing diploma from St. Francis School of Nursing in New Castle, PA and her bachelor's degree in nursing at LaRoche College. As a senior professional staff nurse and preceptor in the cardiac catheterization lab at UPMC Passavant, Condit loves "selling" the nursing profession to the students who come to observe.

"Once you get the foundation of a nursing degree, the sky is the limit. Nursing offers so many opportunities for growth," Condit says.

In her first year out of nursing school, Condit became very close to an 18-year-old girl in need of a new liver. When one became available, the patient called Condit and asked if she could be there. Condit made it to the hospital in time to visit before the patient went to the operating room. She also observed the surgery before and after her shift.

Condit felt privileged to witness the second liver transplant in Pittsburgh by Thomas Starzl, MD. "The experience has helped me to always remember that patients are people with normal lives being interrupted by an illness who need the help of nurses, doctors, and technology," she says.



Michael C. Cook, RN
Jefferson Regional Medical Center

Michael Cook started working at Jefferson Regional Medical Center in 1989 as a patient care technician, a position he held for 20 years before enrolling at Community College of Allegheny County to become a Registered Nurse.

His dedication and determination to pursue a nursing career while managing the demands of a family and a full-time job earned him the respect of his peers, who chose Cook as Jefferson's Cameo from a record field of 18 other excellent nominees.

"Michael worked full-time and attended nursing school in his efforts to develop his skills to have further positive impact on the health and well-being of his patients," says Joseph Cvitkovic, PhD, director, Behavioral Health. Karen Saylor, patient care manager, Behavioral Health, who nominated Cook, says his patients and their families are his number-one priority.

Cook is an instructor for CPR and comprehensive crisis management classes, a member of the patient identification committee, and a psychiatric intensive outpatient nurse facilitator.

"We are honored to have Michael represent Jefferson Regional as our Cameo of Caring," said Louise Urban, Senior Vice President Hospital Operations and Chief Nursing Officer. "His willingness to constantly strive to meet and exceed the expectations of our patients is an inspiration to all of our nurses."

Mary Ellen Davin, RN, BSN, CHPN
Excelsa Health, Home Care and Hospice

Until Mary Ellen Davin was 10, her grandmother lived with the family. "Watching the care and nurturing my mom gave her prior to her death inspired me to care for others." Volunteer time at a nearby Catholic hospital solidified her decision to become a nurse.

Davin earned her associate degree in nursing at Delaware County Community College and her Bachelor of Science degree in nursing from the University of West Florida. A bedside nurse early on, she has spent 20 of her 35 years in Hospice care. So it's no surprise this Certified Hospice and Palliative Nurse is most at home in patients' homes, or alongside them during times of transition. She derives great satisfaction in returning patients to a loving family environment where they can spend their final days.

Now a Hospice liaison working within the hospital setting at Excelsa Latrobe, Davin forms the bridge between patients and their families and providers. Her respect for physicians and other members of the care team is evident, and is reciprocated. Augmenting their understanding and knowledge, Davin is easily accepted as a mentor for family medicine residents, educating and demonstrating how to approach end-of-life conversations and medical care.

Davin is co-captain of the hospice program's Relay for Life team for the American Cancer Society and a member of the Hospice and Palliative Nurses Association.



Congratulations to our Cameo of Caring Honorees ...

Kim Wystepek, RN, BSN
Frick Hospital

Barbara Grote, RN, BSN, CCRN
Latrobe Hospital

Diane Testa, RN, BSN
Westmoreland Hospital

Mary Ellen Davin, RN, BSN, CHPN
Home Care and Hospice

...who demonstrate *Excellence* in patient care and embody the very *Essence* of the nursing profession.



A Celebration of Nursing



Terri Day, RN
West Penn Allegheny Health System, The Western Pennsylvania Hospital, Forbes Regional Campus

Terri Day, a graduate of The Western Pennsylvania Hospital School of Nursing, is clinical coordinator of Forbes' Cardio Thoracic Intensive Care Unit and Stepdown Unit. Day is proud that her coaching in the use of the Toyota Production Model for Operational Excellence enabled her to help her unit improve patient satisfaction and become a change agent in the organization.

The death of her grandmother when Day was 12 years old motivated her to become a nurse. "I wanted to devote my life to helping others heal or providing comfort in end-of-life situations," she says. She advises those interested in nursing that compassion, empathy and a good work ethic are prerequisites to reap nursing's true rewards.

Day demonstrates her devotion to patients and families by being there for them, even if it means taking on an unplanned night shift. She recalls a particular incident when it became evident that a patient would not survive. "I held family members' hands as life support was discontinued," she says. "They clung to me and thanked me for my care and support."

Day shares her nursing knowledge by serving on Forbes' Critical Care Education Committee and creating simulation scenarios for staff education through the STAR Center at WPAHS. She also co-chairs her hospital's Standards of Care Committee.

A resident of Manor, PA, Day's community activities include Forbes' Fall into Health Fair, Go Red for Women, and the Heart Walk.

Ann Druschel, RN
VA Butler Healthcare

Ann Druschel is the Adult Day Health Care Clinical Nurse Manager and Homemaker Home Health Aide Program Coordinator for VA Butler Healthcare. Druschel earned her associates degree in nursing at butler community college. She will complete her bachelor's degree in nursing through the Florida Hospital College of Health Sciences in December 2011.

A resident of Portersville, Druschel chose to become a nurse because of her son—when he was born, she saw the positive and powerful impact she could have on someone's life by becoming a nurse. So, when he entered kindergarten on the first day, she took her first college nursing class.

Now with nearly 15 years in the nursing profession, Druschel's favorite part of her job is working with Veterans at VA Butler Healthcare. "When I came to the Adult Day Health Care program as a new supervisor, it was a little overwhelming learning the names, likes, and dislikes of 62 Veterans," she says. "After a few months, one Veteran called me aside and told me I had made such a positive impact on the program that he didn't know what they ever did without me. I knew then and there that I was where I belonged."

Druschel participates in four committees at VA Butler Healthcare: Nurse Executive Committee; Patient Care Services; Controlled Substance Inspector; Palliative Care Consult Team. She is also the VA Butler Caregiver Support Coordinator Alternate and a member of the National League of Nursing.



Ursula Erb, RN
HealthSouth Sewickley

Ursula Erb wanted to be a nurse ever since she was in high school, where she was president of the Future Nurses of America Club her senior year.

An excellent nurse and role model with an extraordinary sense of public service, Erb has earned the nickname "Mother" at HealthSouth. She started the Clothes Closet for patients in need of clothes, and comforts and encourages patients to ensure they benefit from their stay. She helps turn around patients who have given up, making them believe in the power of therapy and healing. "Seeing the smiles on the faces of my patients after helping them work through their problems is very gratifying," she says.

She especially enjoys mentoring new nursing staff to ensure they understand how important it is to retain their skills and professionalism. "Having the opportunity to educate new nurses while maintaining my role as a bedside nurse enables me to be an advocate for the profession I care so deeply about."

Erb recently met with patients she had cared for many years ago. "I was thrilled to recognize so many faces," she says. One face in particular stood out because of the time they had shared during his period of need. "This particular patient meant a lot to me, and I to him," she says. "He hugged me and thanked me for the care I provided when he needed it most. It was not just the physical care, but the emotional bond we both felt at that time."

Judy Fyock, RN

Conemaugh Health System, Memorial Medical Center

Judy Fyock earned her practical nursing license (LPN) at Johnstown Vocational School for Practical Nursing and worked as an LPN in Ohio. After working as an optometrist assistant, she returned to nursing at Bethlehem Home. "I hadn't worked as a LPN for many years, and didn't know if I could do it," she says. "But I went for an interview and was hired that day." Several of her colleagues discussed becoming RNs, but Fyock was the only one who perused this dream. "I never thought that I would return to school at the age of 50," she says.

Now Fyock works as a staff nurse on Good Sam 5 at Conemaugh Health System. She is a member of the skin team and the Practice Council for the fifth floor. She also serves on the Nurses group at her church.

Direct contact with patients and their families is Fyock's favorite part of nursing. "It's important for nurses to be a good advocate for patients and the families," she says. "The nurse is the person that has the most interaction with the patient. Patients appreciate the time taken to explain what is happening and what to expect while in the hospital."



Vincent T. Gerello, RN
LifeCare Hospitals of Pittsburgh

Vincent Gerello's decision to become a nurse was spurred by two personal events: a celebration and a tragedy. The celebration occurred in the 1970's—before Gerello was born—when his mother was named the American Cancer Society Nurse of Hope for Pennsylvania. This honor influenced her to direct Gerello to nursing, so with her encouragement, he enrolled in Youngstown State University after high school. But, growing bored with the nursing curriculum, he changed his major to politics until tragedy struck with the sudden death of his father. Gerello immediately enrolled in Jameson Hospital School of Nursing, with a goal of quick employment so he could provide for his family.

Gerello helps break the stigma of the male nurse and helps patients and families understand that a nurse means understanding and compassion for people at their weakest moment. As a nursing supervisor, he also brings a strong sense of teamwork and commitment to his coworkers, going the extra mile to improve patient care by teaching and mentoring his coworkers.

In December, Gerello will graduate with the bachelor's degree in nursing. In a few years, he intends to go on and pursue a master's degree in business administration with a view to moving into the next leadership role or possibly lobbying for health care special interest groups. With his interest in politics and nursing, Gerello sees political office as an opportunity to advocate for the profession and for patients across the county.

Kathleen Graham, BSN, RN, WOCN, CWS
VA Pittsburgh Healthcare System –Heinz Division

Kathleen Graham knew from a young age that she was going into the medical profession. Her first teachers were her parents, who cared for her older sister with special needs. Graham credits that sister with guiding her into nursing.

Now Graham, a wound ostomy continence nurse who has cared for wounded Veterans for more than 30 years, is a valued member of an interdisciplinary team at VA Pittsburgh Healthcare System's Community Living Center. She is known for providing moral and physical support to staff and Veterans; it is not uncommon to find the Gibsonia, PA resident at a patient's bedside, humming his or her favorite song.

"Her dedication to our staff, Veterans, and to nursing is evidenced by her professional attitude and her extraordinary performance as a healer," says a coworker.

Graham earned her Bachelor of Science degree in nursing at the University of Pittsburgh in 1979 and furthered her education by becoming a certified wound care specialist through the American Academy of Wound Care in 2002 and obtaining a certification in wound, ostomy and continence from Wicks Educational Associates, Inc., in 2003.

"What other profession enables one to choose from a variety of career paths? As a nurse, my job is always evolving and challenging," she says. "Nursing has also given me the opportunity to pursue both my passions — family and a career."



Barbara Grote, BSN, CCRN
Excela Health, Latrobe Hospital

Barbara Grote has always believed nurses make a big difference, whether in management or volunteerism, community education or at the bedside. Throughout her 35-year career at Latrobe Hospital, she's had the opportunity to touch countless lives amid diverse responsibilities, leading by quiet, confident example.

As a young girl, she was inspired by the "Cherry Ames" nursing novels. A lengthy illness that claimed her father's life at age 45 and her mother's determination to soldier on and become a nurse herself further motivated Grote to tread the caregiver path. "I saw early on how a nurse could really change the shape of a patient's day," she says.

A 1974 nursing graduate of Indiana University of Pennsylvania, Grote is certified by the American Association of Critical Care Nurses, and active in the Three Rivers Chapter. She is also a graduate of the University of Pittsburgh Consortium Ethics Program and served as a health system resource for ethics and end-of-life care since 1994.

Grote's passion for coronary care contributed to the successful rollout of ongoing community education related to symptom recognition and rapid treatment for heart attack and stroke promoted as the "Golden Hour."

At the volunteer level, Grote is involved in Global Links, a medical relief program to redirect still useful equipment to developing countries. She also has been recognized by the American Heart Association with a "Heart of Gold" Award.

Kaleigh N. Gustafson, RN
UPMC Northwest

After soothing a crying patient at UPMC Northwest's Family Birthing Center during her first week of orientation, Kaleigh Gustafson was convinced she chose the right profession.

A resident of Oil City, Gustafson earned her associate's degree in nursing at Pennsylvania State University. She is certified in advanced cardiac life support and neonatal resuscitation, received an Excellence in Nursing Practice Award, and was recently nominated for a CARES Award and a DAISY Award.

As a nurse in UPMC Northwest's Family Birthing Center, most days are happy ones. But there are days when Gustafson says, "I have to find my deepest strength for my patients who have none." Gustafson recalls a patient who had lost her baby. That patient later wrote the unit director a letter expressing how kind and caring Gustafson had been to her during that difficult time. "I am humbled and it amazes me that I could make a lasting impression on one of the worst days of her life," Gustafson says.

Gustafson says she hopes to be a role model to other young nurses as they embark on the nursing profession. She takes great pride in nursing and enjoys the challenges and rewards.

When starting her nursing career, Gustafson was unsure as to whether nursing was the right choice, but now she's found her niche. "I hope that every nurse can have the opportunity to experience the joy in their careers that I do in mine," she says.





Tina Henderson, RN
UPMC Bedford Memorial

Nursing was not Tina Henderson's first career choice. While working as a cosmetologist, one of her clients often urged Henderson go into nursing. She ultimately heeded that advice and now works as a nurse in the Emergency Department at UPMC Bedford Memorial. After much blood, sweat, and tears—and total support from her family—she's proud to say "we did it!"

Henderson earned her associate's degree in nursing from Olympic College in Bremerton, Wash. She is actively involved with suicide prevention programs and autism awareness. She also assists with the Camp Cadet program, an intensive one-week police academy experience for teens and speaks annually to a youth leadership group about the Yellow Ribbon Program.

Having been encouraged to explore nursing herself, Henderson now passes along that same advice whenever she can. "There is always a new area in nursing just waiting for you," she says. Henderson also advocates for the patient. "I take pride in being there for someone when they need to be cared for."

Intuition or divine intervention pushed Henderson to act on a feeling she had about a patient. Initial testing revealed nothing unusual, yet Henderson felt something wasn't quite right. Continuous observation revealed a serious condition that necessitated flying the patient to another hospital for life-saving surgery.

"Nursing means working long hours, but if at the end of the day I can say 'I did the best I could,' and maybe even helped someone along the way, it's all worth it," she says.

Edward Hetherington, BSN, RN
UPMC Rehabilitation Institute

As a rehabilitation clinician, Edward Hetherington is a true patient advocate. "He isn't afraid to stick up for what he believes in where patient care is concerned," says his supervisor. "Every shift he works, at least one patient tells me how wonderful he is."

The Monroeville resident earned Associate Degrees in nursing and business management before earning his Bachelor of Science degree in nursing from the University of Pittsburgh. As a preceptor for new staff and students on the Rehabilitation Unit at UPMC Montefiore, Hetherington is comprehensive and supportive. He promotes an atmosphere of positive team work.

Hetherington is the pharmacy liaison on his unit and monitors RN scanning compliance to ensure proper use of the Care Mobile Medication Administration system. He developed a Stroke Education Day for staff, and his work and preparation were vital to his unit's designation as a Stroke Center of Excellence by The Joint Commission. He has been active on the Professional Practice Committee and the System Wide Rehab Committee.

A patient perhaps described Hetherington's work best: "I have never met a nurse like Ed before. He is a true rehab nurse...he listens and relates to what is in a patient's heart. I have never felt more prepared for discharge than I did with Ed. He is truly an asset to UPMC and an example for all nurses."



Alana Iwanowski, RN
UPMC McKeesport

Growing up, Alana Iwanowski always wanted to be just like her mom — a nurse. So it was no surprise when she earned her associate's degree in nursing from the Community College of Allegheny County. "I always felt nursing fit my personality," she says. "Now that I've become a nurse, I honestly could not see myself doing anything else."

A resident of Port Vue, Iwanowski enjoys learning and expanding her career. She's currently pursuing a bachelor's degree in nursing at California University of Pennsylvania with the ultimate goal of becoming a nurse practitioner.

As a registered nurse at UPMC McKeesport, Iwanowski loves interacting with her patients, making them smile, laugh, and helping them feel like more than just patients. "The most satisfying part of my job is when a patient expresses sincere thanks for all I've done."

Iwanowski takes pride in being a nurse, advocating for the profession by mentoring new nurses and students. She's also a current member of the professional practice council and former member of the Magnet® Council.

Iwanowski will never forget caring for a hospice patient dying of cancer. She not only tried to comfort the patient, but also the family. They shared stories, feelings, and fears. After the patient passed away, the entire family thanked her for everything. A few days later, the patient's daughter personally delivered a thank you card and meaningful gift—a sincere thanks for a job well done.

Autumn R. Jones, RN, BSN
UPMC Mercy

"Ever since I was a little girl, I knew I wanted to become a nurse," says Autumn Jones, who works as an RN in radiology at UPMC Mercy. "I watched my mom care for my ill grandmother and thought it was a wonderful thing."

After high school, Jones worked as a school aide taking care of individuals with varying degrees of mental and physical limitations. The satisfaction she got from that job prompted her to apply to Sewickley Valley Hospital School of Nursing, where she earned her diploma. Jones went on to earn her bachelor's degree in nursing from Carlow University, where she's currently pursuing her master's.

A resident of Beaver Falls, Jones says the most satisfying part of her career is having an impact on the lives of her patients and their families. "I love knowing that I can play a positive role in helping somebody get through a very difficult and scary time," she says. Jones also serves on the Quality and Education Committee at UPMC Mercy and has several advanced life support certifications.

A few years ago, as a "newbie" on the surgical PCU, Jones had a young patient with multiple post-op issues and anxiety. Over the many weeks of providing care, Jones developed a strong rapport with the patient and the patient's family. After discharge, the patient sent Jones a very personal thank you card. "That truly touched my heart," she says. "I will always remember how that made me feel."



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NOMINEES

- | | |
|---------------------|--------------------------|
| Joann Altobello, RN | Crystal Lumley, RN, CRRN |
| Tracy Banas, RN | Kendellen Palladin, RN |
| Mary Conroy, RN | Marcia Trigg, RN, CRRN |
| Gail Davis, RN | |

2011 Cameos of Caring® Award Recipients

Ursula Erb, RN



Valerie Rivette, RN, CRRN



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Melodie Luttrell, RN
UPMC Senior Communities

"Without the customer, there is no us," says Melodie Luttrell, unit manager at Heritage Place, part of UPMC Senior Communities. She treats each person as she would a family member. "Residents need to be cared for as the parents, grandparents, and siblings they are."

Luttrell earned an associate's degree in nursing at the Community College of Allegheny County and completed her nursing studies with a bachelor's degree in nursing at Duquesne University. She's been in nursing for 17 years and long-term care is her passion.

She is a strong advocate for effective communication among the entire care team, including the patient and family. Luttrell recalls a patient who had been transferred from one floor to another. The patient was known to fall frequently, but through proper staff collaboration, the falls began to decrease. Observing and anticipating the patient's needs, including keeping the patient comfortable, helped eliminate the falls.

Luttrell is active on the Quality Assurance Committee and Safety Committee, among others. She advocates a philosophy of practice centered in quality of care, critical thinking, and cultural awareness. "Residents who are alert and oriented should be encouraged to participate in their plan of care," she says. She encourages "a spirit of inclusion in the activities of daily living."

She feels strongly about setting long- and short-term goals for residents. "When this is constantly practiced, we have happy residents and families," she says. "We are here to serve with dignity and respect."

Jonathan McDonald, RN

VA Pittsburgh Healthcare System, Highland Drive Division

Jonathan McDonald is a staff nurse at VA Pittsburgh Healthcare System's Highland Drive campus. He expects to graduate from Waynesburg University with a Bachelor of Science degree in nursing this December.

That degree will follow several others already under his belt: McDonald graduated from UPMC Shadyside School of Nursing in 2006 after earning a Bachelor of Arts in communications from Robert Morris University in 1993 and an associate's degree in music and video business from The Art Institute of Pittsburgh in 1989.

McDonald's diverse educational background inspired him to develop a special presentation and video on therapeutic communication with behavioral health patients for his fellow employees. His multifaceted skills and talents not only support his daily patient care but also make him a role model for his peers.

"I find the best way that I can advocate for the nursing profession is to be a strong advocate for my patients," McDonald says. "When I put my patients' needs first and provide a voice for those who are not able to effectively advocate for themselves, I believe that elevates the nursing profession."

McDonald lives in Grove City, Pa., with his wife and two sons. He is a member of the American Psychiatric Nurses Association and its 2012 national conference planning committee. He also volunteers for the Grove City Alliance Church and leads Cub Scout Pack 76.



Nicole Mitchell, RN, BS
UPMC Shadyside

Nicole Mitchell first experienced the healing nature of nursing as a teen when her father was recuperating from a work accident. "Through many tough years of surgeries, rehabilitation, and care at home," she says, "I realized how rewarding it is to help people get their lives and health back."

Mitchell earned a bachelor's degree in child development and family relations from Indiana University of Pennsylvania, which set the stage for her future career. She went on to earn an associate's degree in nursing from Community College of Allegheny County. "Going back to school and obtaining my nursing license was the best thing I could have done," she says.

A resident of Jefferson Hills, Mitchell cares for patients in the cardiothoracic intensive care unit at UPMC Shadyside. She is a preceptor: dedicated to disseminating knowledge and experience and reaching for inspiration.

In 2009, she cared for a patient who'd undergone extensive open heart surgery and required continuous dialysis and life support during postoperative recovery. Mitchell drew inspiration from the positive outlook of her patient, even though the patient's recovery originally looked so bleak. "No matter how bad things got, there was always a smile on her face," Mitchell recalls. The patient fulfilled her dream of returning home and later came back to visit. "She taught us what it was to live and love."

Mitchell carries that positivity and passion for her work. "I am doing what I was born to do," she says.



Mary L. Narcavish, BSN
Kindred Hospital, Heritage Valley

Mary Narcavish, nursing supervisor at Kindred Hospital Heritage Valley, has been a nurse for 16 years. She earned her Bachelor of Science degree in nursing from Franciscan University of Steubenville and received critical care training from UPMC Pittsburgh and wound care training from the Cleveland Clinic. Narcavish is also certified as a Basic Life Support and Advance Cardiac Life Support instructor from the American Heart Association.

Narcavish is particularly proud of her involvement with the Red Cross and the Salvation Army. She was an active participant in Operation Outreach and the Wounded Warrior Project in support of her grand daughter in the U.S. Airforce.

She received the Gold Award and Employee of the Month on multiple occasions during her nine year career with Kindred Hospital. She supports the nursing profession through patient advocacy, education and professionalism. "No act of kindness, no matter how small, is ever wasted," she says.

Angela M. Panos, RN, BSN, CCRN
UPMC Presbyterian

Angela Panos became a nurse to personalize science through the daily care involved in the profession. "Nursing blends knowledge with compassion and respect to help patients and families through the continuum of their health care experience," she says.

Panos has spent most of her career in cardiothoracic surgery and transplant critical care. She currently works as a primary nurse care coordinator in the Cardiothoracic ICU at UPMC Presbyterian. She earned her bachelor's degree in nursing from the University of Virginia and is currently enrolled in the acute care nurse practitioner master's program at the University of Pittsburgh.

Panos is co-chairperson of UPMC Presbyterian's Professional Practice Council and was co-chair of the systemwide council from 2007 to 2009.

As a leader and advocate for nurses and patients Panos directly impacts the profession in the "high tech and high touch" environment of nursing. She recalls a patient—a life-long outdoorsman—with a ventricular assist device awaiting a heart transplant. After multisystem organ failure closed off hope of a transplant, he requested that Panos organize meetings with himself, his family, and clinical team. After much discussion he made the difficult decision to be removed from mechanical support. Panos made the administrative contacts and arrangements and brought his clinicians, pastoral and palliative care, and loved ones together in a roof-top garden where her patient passed away peacefully in the open air according to his own wishes.

"We learn so much from our patients and families everyday," she says.



Mariaelena Perowski, RN, CCRN, PHRN
Monongahela Valley Hospital

Mariaelena Perowski's mother wanted her to study nursing, but she initially followed a different path —she married and started a family. At the encouragement of a friend, the mother of three enrolled in the Washington Hospital School of Nursing when her youngest child was only 5 years old.

Perowski has provided care in every unit at MVH except the Operating Room and Delivery. She also served as a flight nurse for four years and briefly provided in-home medical care. Today, her quick response and caring nature is not limited to MVH's Emergency Department — she will provide emergency medical care to anyone in distress. Recently, while dining at a local restaurant, Perowski and her daughter, a flight attendant, sprang into action to provide CPR and chest compression to a woman in cardiac arrest. When paramedics arrived, the woman was flown to a hospital where she received an automated implanted cardiac defibrillator.

Perowski is certified in Neonatal Advanced Life Support and Trauma Nurse Care Curriculum, and is a National Institutes of Health Stroke Scale Provider. She also serves as a nurse educator, teaching Pediatric Advanced Life Support and Advanced Cardiac Life Support. In addition, she is a preceptor and mentor for new MVH employees and college nursing students.

"Mariaelena is passionate about nursing," said Mary Lou Murt, senior vice president of nursing at MVH. "She continuously updates her knowledge and shares what she learns with her colleagues. Nurses repeatedly express that Mariaelena is the best mentor in MVH's Emergency Department."

Amanda Petrill, RN, CPN
Children's Hospital of Pittsburgh of UPMC

Amanda Petrill is a clinical leader and senior professional staff nurse on Unit 6A at Children's Hospital of Pittsburgh of UPMC. In her work as a floor nurse, clinical leader, and preceptor, Petrill is an advocate for both patients and nurses with the goal of fostering the best outcomes possible. "Nursing is a job where you can truly make a difference in the life of another person," she says

A resident of Jeannette, Petrill earned her associate's degree in nursing from Westmoreland County Community College and is studying to earn her bachelor's degree in nursing at Carlow University. A certified pediatric nurse, she is co-chair of the Children's Hospital Professional Practice Council and is a member of the Magnet® Steering Committee.

As an educator Petrill provides guidance and support to new nurses and gives them "the running room they need to grow in their practice." In her council and committee work she collaborates with other bedside nurses, nurse leaders, and educators to write and revise patient care policies that promote best-nursing practice.

Early in her career Petrill cared for a 10-year-old girl recovering from severe injuries sustained in a bicycle accident. Unable to talk or move, the girl worked bravely with her clinical team to regain function. Petrill met her again months after discharge "when she walked onto the unit by herself and spoke with me ... I was so proud of her. I remember thinking that this is why I became a nurse."



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Jennifer Prager, BSN, MSN
Kindred Hospital, Robinson

Jennifer Prager has been a staff nurse at Kindred Hospital, North Shore for eleven years. She earned her Bachelor Degree in Nursing from Franciscan University Steubenville, Ohio and last year completed her Master's in Family Nurse Practitioner from Franciscan University.

She says she became a nurse because "she loves to care for people." This is evident in the way Prager cares for her patients and co-workers. She has a natural ability to make every patient feel special. "The reward of seeing an ill patient leave our facility healthier, far out weighs all the hard work it took to get them to that level," she says.

Her co-workers often use Prager as a resource. She is knowledgeable about her patients and their disease process and provides excellent care.

Prager is always looking for ways to help others become better nurses. She is cross-trained to be an educator and has taught new nurses how to effectively read rhythms and understand drip titration. Prager has also taught experienced nurses the critical care course. She enjoys the opportunity to help her co-workers advance their skills. She cares for her co-workers as much as she does her patients. She has the ability to see when others need her, and without being asked, is there to help. These are some of the many reasons her peers nominated her for this award.



Valerie Rivett, RN
HealthSouth Harmarville Rehabilitation Hospital

Valerie Rivett works as a Charge Nurse on the Neuroscience Unit at HealthSouth Harmarville, where she has provided nursing care for over 11 years. She earned her nursing diploma from Citizens General Hospital School of Nursing and passed the Certified Rehabilitation Registered Nurse (CRRN) exam in June, 2011. Rivett was named Clinician of the Year in 2002 and received the Outstanding Employee Achievement Award for the 1st quarter in 2010.

Rivett knew she wanted to be a nurse when her grandfather was in the hospital diagnosed with cancer. She found nursing fascinating: watching the nurses start IV's, administer chemo, and compassionately and professionally care for him to make his life a little more tolerable. "I knew then that I wanted to be a nurse to care for and to help patients cope with their life-changing disease/illness," she says.

Her Nurse Manager calls Rivett a dedicated Professional Nurse. "Valerie is full of energy which is contagious to other employees. She demonstrates patients are her first priority and has received many positive comments from patients and families about her excellent care, patience and compassion," she says. "Valerie is a mentor for new nurses and a definite asset to HealthSouth Harmarville as well as to the nursing profession."



Rosharon Price, RN, BSN
UPMC St. Margaret

As a high school student in the late sixties, Rosharon Price didn't have the unlimited career choices that women have today. "I always found medicine interesting, so nursing just seemed to be a natural fit: a job that not only engaged my mind, but my heart as well," she says.

Price earned her bachelor's degree in nursing from the University of

Oklahoma in 1974. The Gibsonia resident works as a professional staff nurse in the OR at UPMC St. Margaret.

Although it's been more than 30 years, Price has never forgotten a pediatric patient whose recurrent episodes of apnea frequently brought her to the emergency department in respiratory distress or even respiratory arrest. The condition eventually caused the child's death at about 8 months of age. "I remember her name to this day, even though it's been about 33 years. I really felt for her mother and often wonder what has happened to this family after their loss."

One co-worker says Price "represents what nursing is all about, caring for patients and their families in a no-nonsense way."

Price admits she doesn't think caring for people is something you can learn in school. "I think you get a true empathy only from having experienced the fear, sadness, and joy from caring for people in your own life," she says. "Having been there yourself makes all the difference."



Mary Anne Ray, RN
West Penn Allegheny Health System, Alle-Kiski Medical Center

Mary Anne Ray works as a radiology nurse in the Department of Medical Imaging. She was encouraged to become a nurse

by her father and became 'hooked' on the profession during her hospital volunteer experiences as a candy striper. "The draw for me was the chance to make a difference in someone's life," she says. "Nursing engages patients during their time of need; it is rewarding to be able to ease their distress."

Her patients confirm that Ray achieves this goal. "I remember one patient who was facing a new diagnosis of cancer and already had herself dead and buried," she says. "After we talked, the patient was able to sort things out realistically. She later wrote me a letter to thank me and we remain in touch to this day."

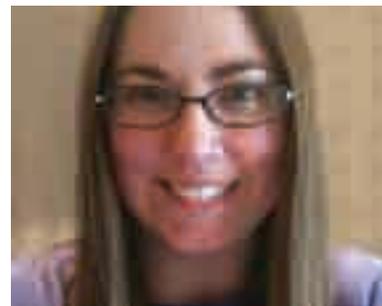
A resident of Leechburg and proud graduate of Allegheny Valley Hospital School of Nursing, Ray gives back to her hospital, the profession, and the community in many ways, including serving as a CPR instructor for 15 years, being selected as an Excellence Ambassador to represent Medical Imaging in this hospital-wide service initiative, being elected to the Radiology Staff Action Team, and as a member of the Greater Pittsburgh Radiology Nurses Association.

"I promote healthcare careers, especially nursing, all the time," she says. "We educate patients and we educate each other, every day."

Congratulations!



Kindred Hospital Pittsburgh North Shore
Alnora Brassel, RN



Kindred Hospital Pittsburgh
Jennifer Prager RN, BSN, CRNP



Kindred Hospital at Heritage Valley
Mary L. Narcavish RN, BSN

One nurse from each of the 3 Pittsburgh hospitals has been selected to receive the Cameo of Caring award in November. University of Pittsburgh School of Nursing's The Cameos of Caring® Program & Awards Gala honors exceptional bedside nurses who work at acute care hospitals.



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Lisa Smith, RN
LifeCare Hospitals of Pittsburgh, Monroeville

When Lisa Smith graduated from high school 34 years ago, women didn't have all the career opportunities they have today: the choices were teacher, secretary, or nurse. At first, Smith wasn't sure she'd make a good nurse, but as she went through nursing school she realized she'd made the right decision. "My goals were to be successful, to help people, and to make a difference in someone's life—including mine," she says. "In becoming a nurse I achieved those goals and more."

In the way she presents herself, treats patients, interacts with visitors, staff, physicians, and peers, Smith exemplifies respect, dignity and professionalism every day. "I try to maintain a positive attitude, even in the most stressful situations," she says. She shares her knowledge and expertise with patients and peers, learning from them as well. "To know that you have made a difference in someone's life, no matter how small or insignificant that difference may seem, is a very rewarding accomplishment."

"I have been a nurse for 32 years. I have seen a lot of changes, both good and bad. But one thing that has not changed is the patient. Patients still rely on us to care for them and treat them with dignity and respect," she says. "I have found that all patients require is respect, dignity, and professionalism from those who are responsible for their care."

Gary M. Stanich, RN, CRNA
University of Pittsburgh Physicians,
Department of Anesthesiology

While pursuing a business degree at West Virginia University, Gary Stanich came to the realization he was not meant to spend his life sitting behind a desk. He researched career options and came across the profession of nurse anesthetist, a career choice he pursued with remarkable success.

Before taking his current position as nurse anesthetist at UPMC Shadyside, Stanich earned his RN-certification at Washington Hospital School of Nursing and certification as a CRNA at Presbyterian University Hospital School of Anesthesia. Stanich also earned a bachelor's degree in education from California University of Pennsylvania. He has served as a role model and mentor for nursing students pursuing careers in anesthesia. Stanich has an extraordinary ability to share not only the science, but also the 'art' of anesthesia, with his students.

A resident of Pittsburgh, Stanich was named CRNA Clinician of the Year in 2000 by the Pennsylvania Association of Nurse Anesthetists and received a UPMC ACES Award in 2008. He serves as chairman of the Susan Nath Bywaters Endowment Award Committee, and personally delivers this prestigious award to students during graduation ceremonies.

Stanich has served as director of Nurse Anesthesia at UPMC Shadyside and director of the University Health Center of Pittsburgh School of Anesthesia for Nurses, but is always drawn back to his first and most rewarding role as a primary caregiver. One colleague says, "Gary's personal warmth and integrity have been a source of comfort and inspiration to many over the years."



Casey Steckler, RN, BSN
UPMC Horizon

Childhood illnesses and less than optimal health care experiences raised Casey Steckler's awareness of the need for quality care at the bedside. She pursued the nursing profession as a way to support patients and effect change. "I have tried to treat every patient as if I was in their position," she says.

A resident of Grove City, Steckler earned her bachelor's degree in nursing at Edinboro University of Pennsylvania and her school nurse certification at Slippery Rock University. As a staff nurse in the post-anesthesia care unit at UPMC Horizon's Shenango Valley campus, Steckler thrives in the diversity of patients and conditions in the surgical care environment. She is a member of the Policies and Procedures/Evidenced Based Nursing Committee and received the Excellence in Practice Award in May 2011.

Steckler believes strongly in the nurse's dual role of caring for both the physical and emotional needs of a patient. Caring for an anxious patient who required an immediate colon resection, she provided constant support and reassurance through recovery and transfer to intensive care. Steckler also helped locate the patient's husband. "The thing upsetting her most was that she wouldn't see her husband before entering the OR."

Steckler has been involved in UPMC Horizon's planning and training for electronic medical record and has been on the PACU Band Revision Committee and the Informatics Council. "Communication is key to improving nursing job satisfaction, which ultimately improves patient satisfaction," she says.

Cathy Thompson Stoddart, BSN, RN
West Penn Allegheny Health System,
Allegheny General Hospital

Cathy Stoddart was the first in her family to go to college, earning a practical nursing degree from Jefferson Community College in Ohio, an associate's degree in nursing from West Virginia Northern Community College, and a Bachelor of Science degree in nursing from Franciscan University of Steubenville, Ohio. Stoddart currently works as an advanced registered nurse on Allegheny General Hospital's (WPAHS-AGH) Kidney, Liver Transplant, Colorectal and Gyne-oncology Surgical Unit,

Her professional honors include graduation from the Wharton School of Business Executive Leadership Program; serving as National Chair of Policy and Politics of the Service Employees International Union (SEIU) Nurse Alliance; President of AGH's Registered Nurse Chapter, SEIU Healthcare PA; testifying at Department of Justice and Federal Trade Commission Joint Hearings on healthcare competition law and policy; membership on a distinguished panel at the Center for American Progress honoring the 40th anniversary of the Occupational Safety and Health Administration; and, in 2009; and taking two nurse leaders and 17 staff nurses to a special meeting of registered nurses with President Obama at the White House. Stoddart currently serves on a steering committee that obtained a grant to develop a quality improvement curriculum for bedside nurses, with a path to an advanced degree in nursing.

Her volunteer nursing extends from her Mingo Junction, Ohio, home to Louisiana (Hurricane Katrina, 2005) and Haiti (earthquake relief, 2010 to the present).

"I became a nurse to make my dad proud." Her father, who passed away at Christmas, was surely honored by her achievements.



CONGRATULATIONS!



Patty Barilaro, RN
 Level 1 - Adult Medical
 Surgical Oncology Unit
 Heritage Valley Beaver



Roslyn Arndt, RN
 PACU
 Heritage Valley Sewickley

2011 Recipients of the Cameos of Caring® Award



Diane Testa, RN, BSN
Excela Health, Westmoreland Hospital

"I gain the greatest satisfaction when I am able to educate a patient on a condition that they have or a test that's being performed," says Diane Testa, a charge nurse on a medical surgical unit at Excela Health Westmoreland Hospital.

A bachelor's degree in Journalism/Communications from Lock Haven University laid the foundation for effective interactions with co-workers and patients alike. Her nursing skills were honed in the associate's degree program at Westmoreland County Community College, and she is wrapping up her second bachelor's degree in nursing through the Pennsylvania State University.

She is also a member of the Pennsylvania State Nurses Association

"Nursing combines all the things I love to do into one career," she says. "I love helping and supporting others. I love science and I love teaching, and not a day goes by that I don't learn something new myself."

Testa serves as a preceptor to graduate nurses and new hires to her unit, helping to build confidence in clinical and decision-making skills. Seen as the "go to" person by patients in her care, Testa believes communicating with the patient and family gives you a whole understanding as to what life is like outside of the hospital.

An advocate for the nursing profession, Testa is quick to dispel age-old stereotypes and misperceptions. "I am so proud to say I'm a nurse when people ask what I do for a living, she says. "It is a privilege."

Denise Teti, RN
St. Clair Hospital

Denise Teti started her clinical career working as a medical assistant for St. Clair Hospital Senior Vice President and Chief Medical Officer G. Alan Yeasted when he was in private practice. She joined St. Clair in 2001 as a phlebotomist in the Lab.

Teti earned her nursing degree at the Community College of Allegheny County South Campus in 2007 and has worked on St. Clair's Orthopedic Unit since then. She currently works as a charge nurse on unit 5A/IRU.

"Denise is a very good role model and a very good example of how to provide great customer service," says Cindy Gaber, manager of 5A/IRU. Gaber remembered Teti from her work as a phlebotomist and selected her to be a nurse intern on her unit because of her excellent bedside manner with patients. "Denise is the type of person everybody would like to have on their staff," she says.

The Scott Township resident is very instrumental in implementing new processes on the unit and is a member of the Hospital's Quality Council, and 5A Council, as well as an educator for the total joint class for patients. Her efforts and leadership have had a direct impact on patient satisfaction on 5A and throughout the Hospital.

"I've found a job that I love," says Teti. "My favorite part of being a nurse is interacting with patients and helping to take care of them."



Ken Vignevic, BS, RN
**West Penn Allegheny Health System,
 The Western Pennsylvania Hospital**

Ken Vignevic earned a Bachelor of Science degree in medical technology before deciding on a nursing career. "I have always had a desire to help people," he says. "After college, a family member became ill and I was very emotionally rewarded when helping to take care of him."

Two years later, Vignevic received his Diploma in nursing from St. Margaret's Hospital. He has found his professional niche in the Intravenous (IV) Therapy Department at West Penn Allegheny Health System, The Western Pennsylvania Hospital. (WPAHS/WPH) "I'm very good at my job and enjoy helping patients through the painful process of getting IVs placed."

Vignevic actively reviews and develops patient education materials, protocols and policies in his field. "We had been inserting peripherally inserted central catheters (PICCs), which are very large-bore catheters, with just topical lidocaine. One very agitated and frightened patient led me to think that there had to be a better way to control the pain of this procedure. I researched nurses' use of intradermal lidocaine for PICC insertion and, with my manager, developed a protocol for its use at West Penn."

Vignevic is active as a Magnet Ambassador, in Nursing Operations Council, and with projects such as the Bone Marrow Transplant Unit's campaign to prevent central line associated bloodstream (CLAB) infections and keep patients "CLAB"-free (33 months and counting).

The Pittsburgh resident believes nurses should be involved in the community. Vignevic volunteers regularly at a local homeless shelter and at Habitat for Humanity.

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 Registered Nurse
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- Bobbie Lasiak
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A Celebration of Nursing



Tina M. Ward, BSN, RN
VA Pittsburgh Healthcare System, University Drive Division

Tina Ward began her career as a licensed practical nurse on the dialysis unit at VA Pittsburgh Healthcare System. From there, she earned an associate's degree in nursing from the Community College of Allegheny County in 2006 and a bachelor's in nursing from Waynesburg University in 2009.

Ward's role in the dialysis unit continues to grow and evolve. She paved the way for home hemodialysis at VA Pittsburgh, helping to establish the first such VA program in the country. She has enthusiastically taken on the subspecialty position of home peritoneal and home hemodialysis training coordinator, in which she teaches patients how to perform peritoneal dialysis at home and manages many of their clinical health care needs.

A resident of Verona, Ward embodies the mission and vision of the VA and the home dialysis program by offering hope, understanding and compassion to Veterans and their families.

"Each of my patients and their families has touched my life in different ways, and I continue to learn and grow daily in my profession," she says. "It is an honor and privilege to provide nursing care for those who have served our country. I have discovered that being a nurse is who I am, not just what I do."



Kimberly A. Wysteppek, RN, BSN
Excela Health, Frick Hospital

Helping friends and family through the difficult things they experience when a loved one is sick has always been important to Kim Wysteppek. In fact, she's building a career around it. A close relationship with her grandmother was the impetus for choosing the nursing profession. "She did so much for me and I wanted to help her in some way," she says. "The perfect way to repay her was to become a nurse – the person she counted on to see her through." But it wasn't her grandmother who benefited: rather Wysteppek's younger brother, who was in a serious car accident that left him in a coma and paralyzed on one side.

Beyond seeing to their medical care, Wysteppek also promotes nursing as a profession among relatives and friends. From the diversity of settings and roles to the career advancement opportunities, she speaks with authority and enthusiasm, motivating young people to become tomorrow's nursing leaders.

Wysteppek earned her Bachelor of Science degree in nursing from Carlow University, along with her school nurse certification, and spent a year with Redstone Highlands supervising the skilled, intermediate and dementia nursing units. Over the past 12 years, her responsibilities have increased at Excela Health Frick Hospital (PCU), where she serves as clinical nurse coordinator for the Progressive Coronary Unit. A trained facilitator of continuous improvement methodology, Wysteppek participates on committees developing policies, procedures and promoting service excellence, as well as teaching safety standards to her co-workers.

Case Manager Awardee



Kathy Raimondi, RN
Highmark Blue Cross Blue Shield

The death of Kathy Raimondi's parents led her to a career in nursing, specializing in hospice and palliative care.

"Becoming a nurse was my mom's lifelong dream, but she never achieved her goal as she was diagnosed with cervical cancer and died young," she says. "My father died of lung cancer two years later. I became a nurse to honor them and to help make end-of-life care more gentle and respectful as well as to help provide comfort as illness progresses."

Raimondi worked in hospice nursing for over 20 years and assisted with the design of one of the first freestanding hospice residences in Pittsburgh. She joined Highmark, to work on a team developing a palliative care pilot, which served as the foundation for the Advanced Illness program that was introduced in 2011.

"Nursing has allowed me to understand that the one constant is hope: it simply takes on different meaning along the way," she says. "It allows me to appreciate the courage, strength and honesty with which so many people approach life's final days."

Raimondi currently serves members with complex medical problems who need support in understanding their treatment options and care planning. She and her colleagues are advocates for the member and family no matter where they are on that journey.

"I have a sticky note on my computer that says, 'The goal of listening is more than processing information; it is making people feel understood.'"

Donate Life Awardee



Eileen Roach, RN, MSN, CCRN, CNRN
UPMC Presbyterian

"The nature of a nurse is to save lives," says Eileen Roach, who began her career as a staff nurse in a neuro intensive care unit. "It opened my eyes to the lives that could be potentially saved through organ donation," she says.

Roach earned her bachelor's degree from Duquesne University School of Nursing and her master's from the University of Pittsburgh School of Nursing's clinical nurse specialist program. She currently works as an advanced practice nurse in Critical Care neuro and trauma intensive care units at UPMC Presbyterian.

As the institutional leader for organ donation at UPMC, Roach is chairperson of the UPMC Presbyterian Donor Guidance Committee. In 2009 she was awarded a \$10,000 grant from The Beckwith Institute to develop a screening process for post-traumatic stress disorder in a Level I Trauma Center. She has lectured on a variety of nursing topics related to trauma, neurology, and organ donation, published studies in nursing journals, and presented numerous posters at AANN national meetings.

Roach has brought structure, support, and engagement to the institutional culture of organ donation at UPMC. She leads the Donor Advisory Group and provides education to multiple disciplines, including nursing, medicine, and social work. Roach also played an integral part in the construction of the Giving Life Wall to honor organ donors.

"It's the responsibility of the nurse to be an advocate for the patient," she says. "And organ and tissue donation is a tangible means to honor the lives of patients we cannot save."

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Saturday, November 5, 2011

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7 p.m. Dinner and Awards Presentation

10 p.m. Post Event Reception

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Advanced Practice Awardees



Faith Colen, RN, MSN
UPMC Shadyside

"Just like medicine, nursing offers the opportunity for specialization," says Faith Colen, an advanced practice nurse (APN) at UPMC Shadyside. "It's not just bedpans and backrubs anymore. Nurses can now specialize in surgery, trauma, hospice, oncology ... the opportunities are endless."

Currently living in Brackenridge, Colen has a master's degree in nursing education from Indiana University of Pennsylvania, and a bachelor's degree in nursing with a minor in biology from DeSales University.

As an advanced practice nurse and nurse educator in the emergency department (ED), Colen provides bedside education to nurses caring for critically ill patients, specifically those suffering septic shock, respiratory or cardiac arrest, intracranial hemorrhage, and ischemic stroke.

"I believe in being available to all staff members and frequently spend time in the department on off-shifts, weekends, and holidays," Colen says. "Knowledge is power and my focus for the role as APN in the ED is to provide educational opportunities for the nursing staff."

Colen works side by side with her nursing staff and takes every opportunity to teach and mentor. "Even with a full assignment, she manages to jump in and educate on arterial lines, chest tubes, hypothermia, or whatever the staff are unfamiliar with," says one staff member. "Faith is a hands-on educator and has earned the entire department's respect for her dedication to quality patient care."

Jeannine DiNella, RN, MSN, CNS
UPMC Presbyterian

As a clinical nurse specialist (CNS), Jeannine DiNella wears many hats. She is a cardiovascular/cardiothoracic advanced practice nurse, nurse mentor, and a CPR instructor, among her many roles. "I believe in team work and team building," she says.

DiNella earned her Bachelor of Science degree in nursing from Pennsylvania State University and her master's degree in nursing and clinical nurse specialist degree from the University of Pittsburgh. She is currently enrolled in the doctor of nursing practice program at the University of Pittsburgh. DiNella is a 2010 UPMC ACES Award winner and has placed first or second in numerous quality fairs for sustained achievement.

With her physician partner, DiNella developed and leads a CNS-driven anticoagulation in-patient service. She has cared for patients in general medicine, cardiology, post-cardiothoracic surgery, pulmonary medicine transplant, and hepatic/renal transplant. Through evidence-based initiatives she advances nursing practice standards, policies, and care pathways. She responds regularly to condition codes on her units and has a primary role on the Anticoagulation Task Force.

DiNella works in the three spheres of influence: Patient/Client, Nurse and Nursing Practice, and Organization/System. She thinks on her feet. When a double-lung patient was unable to receive nutrition because an adapter was missing from a feeding tube, she photographed the equipment at the bedside. She then forwarded the photo to specific departments until an adapter was located.

Every day DiNella proves that an "advanced practice nurse can impact the cultural adoption of evidence-based practice."



Nora Y. Evans, RN, MSN, CMSRN
UPMC McKeesport

When Nora Evans was invited to be a Beckwith fellow, it was the turning point of her nursing career. She used this time to expand her thinking and gained personal insights into her professional strengths and weaknesses. She built a network of people who inspired her to strive for excellence.

A resident of Elizabeth, Evans holds a master's degree in nursing from Waynesburg University, a bachelor's degree from Pennsylvania State University, and an associate's degree from the Community College of Allegheny County. With a nursing tenure of 34 years, she currently manages three UPMC McKeesport units. As unit director of 3 Mansfield Medical Surgical Unit, 3 Shaw Observation Union, and the Sleep Disorder Center, she oversees, directs, and coordinates patient care, and much more.

Embracing relationship-based care, Evans extends her care far beyond the hospital walls. She has organized charitable events, and even raised money for a patient who had no funds with which to buy her children gifts during the holiday season. She also participates in many committees and professional organizations.

"Nursing gives you the opportunity to travel a road of self-discovery and truly make a difference in people's lives while realizing your full potential," she says.

Evans has learned to cherish the life lessons her patients have taught her. "This journey of self-discovery affords us the privilege of making a difference in our patient's lives as they make a difference in ours," she reflects.

Lisa Fox-Hawranko, RN, MSN
UPMC Presbyterian

"Nursing is the only profession I know of in which complete strangers allow you to become part of their world and share extraordinary moments in their lives," says Lisa Fox-Hawranko. She should know: Fox-Hawranko has been a nurse for 31 years and a nurse manager for 19 of those years.

The Pittsburgh resident earned her master's degree in nursing at Duquesne University and holds bachelor's and associate's degrees in nursing from Carlow College and Salem College respectively. Fox-Hawranko currently works as director of Unit 11-North of UPMC Montefiore, part of UPMC Presbyterian.

She promotes patient-centered care and a shared-governance model of practice. In addition, she views the practice of nursing as highly individualized with each nurse offering unique gifts and talents in the care of patients.

Fox-Hawranko manages a busy 22-bed abdominal transplant unit at the Thomas E. Starzl Transplantation Institute where she also assists in mentoring staff. "She is the best transplant nurse and teacher I have ever seen," says one surgeon. Fox-Hawranko is a member of the National Honor Society of Nursing and the International Transplant Nurses Society. In 2007, she received a Best of Abstracts Award in education, and has contributed to clinical journals and quality symposia.

When her staff asked for more hours to ensure high-quality care, Fox-Hawranko encouraged them to submit a proposal supported by data. They did, and their goal was achieved, an example of structural empowerment. Ultimately, "nursing is an art," she says.



Gloria Gotaskie, RN, MSN
UPMC Cancer Centers

Gloria Gotaskie's passion for nursing began at age 16, when she was a candy striper at UPMC Shadyside. She earned her bachelor's degree in nursing at the University of

Pittsburgh School of Nursing. Wanting to make a difference in the lives of patients and other nurses, she continued at Pitt and obtained a master's degree as an oncology clinical nurse specialist.

An oncology clinical nursing specialist in outpatient services at Hillman Cancer Center, Gotaskie places an emphasis on education. Her primary responsibility is educating staff and new employees. She also coordinates the educational experiences of students from all health care professions at Hillman.

A resident of Verona, Gotaskie cites the expansion of the University of Pittsburgh Cancer Institute as a career highlight. Her role educating staff made the transition to the larger facility less hectic.

Says one medical assistant, "When I sometimes feel I'm at my wits end and that everything I do is an exercise in futility, I have only to look at Gloria — going quietly about the business of being there for patients, families, and staff who need an example of selfless caring to hold and admire. Words alone pale in describing what Gloria does day by day."

Whether educating patients, families, staff, or nursing students, Gotaskie's passion and love for nursing are evident. "I'm proud of the nurses I have educated and mentored and hope that, in some way, I will have touched the lives of the patients they care for in the future."

Vivian Petticord, MSN, RNC, CNL
Magee-Womens Hospital of UPMC

According to Vivian Petticord, it takes a village to raise a child, and a team to care for a patient. As a nurse with a 30-year tenure, Petticord has progressively held clinical leadership positions within the Womancare Birth Center at Magee-Womens Hospital of UPMC.

A Robinson Township resident, she earned her bachelor's degree in nursing from Duquesne University and a master's degree in nursing from the University of Pittsburgh.

As a clinician IV, Petticord chose to remain connected to the bedside. "I have always had excellent clinical skills, and didn't want to lose them," she says. "I always felt like I made a difference to my patients." The position of clinical nurse leader was the perfect match for Petticord, enabling her to reach her goal to make a difference in nursing.

As an advocate for quality patient care, Petticord is active with the Patient Safety Council and other initiatives promoting best practices throughout the hospital. She is also a member of the Association of Women's Health Obstetric and Neonatal Nursing.

Petticord defines a good nurse as one who is motivated by compassion and caring and sees the big picture. "Health care is fragmented and is in need of nurses who care for the patient, as well as everything that touches the patient," she says. "Becoming a nurse is very much akin to a calling."



Josephine E. Tutro, MEd, BSN, RN-BC
West Penn Allegheny Health System,
The Western Pennsylvania Hospital

Josephine Tutro has been manager of West Penn Hospital's Bone Marrow/Cell Transplant Unit since October 2010. She earned her Diploma in Nursing from McKeesport Hospital, her bachelor's degree in nursing from Penn State University, and her Master of Science degree in education from Duquesne University. She is board-certified by the American Nurses Credentialing Center in Nursing Professional Development.

Tutro accepted her current managerial position after 15 years of focusing on staff nurse education and development. "When I applied for the position, the Hospital was going through enormous change," she says. "Many nurses were fearful and thinking about leaving. I believe I was able to bring stability to the nurses with my 'one team' approach and commitment to and advocacy for them. Keeping this team together is the most significant accomplishment of my career."

"Jo is extremely dedicated, reliable and caring, never afraid to take on a challenge," colleagues say. "She embodies all the essential characteristics, competencies, and values of a manager, challenging others to strive for their highest level of competency and patient care."

A resident of Jefferson Hills, Tutro presents posters and serves as faculty at professional conferences, is a founding member and was the first Treasurer of the Greater Pittsburgh Chapter of the National Nursing Staff Development Organization, is a longtime member of the Oncology Nursing Society, and supports numerous community campaigns benefiting patient care and research.

Dawn Sporny Wentley, MSN, NP-C, OCN
West Penn Allegheny Health System,
The Western Pennsylvania Hospital

Dawn Wentley is a CRNP who specializes in Bone Marrow Transplantation, Hematology, and Oncology. She earned her associates degree in nursing from Community College of Allegheny County and her Bachelor of Science degree in nursing from Waynesburg University.

In 2009 Wentley received the Margaret Terenski Scholarship from the Sigma Theta Tau Mu Xi Chapter in Franklin, PA. The scholarship enabled Wentley to complete her Master of Science degree in nursing in the Family Nurse Practitioner Program at Clarion University's Pittsburgh Site.

Wentley's professional activities include West Penn's Magnet Ambassador program, Foundation for the Accreditation of Cellular Therapy-Cell Transplantation (FACT-CTP) Committee, Pharmacy Performance Improvement Committee, the Oncology Nursing Society, the American Academy of Nurse Practitioners, and the CRNP Association of Southwestern Pennsylvania.

Clinically, Wentley feels most rewarded by being able to perform bone marrow biopsy and aspiration procedures independently, and seeing her care impact patients' lives. "She is loved by her patients," says John Lister, MD, Chief, Hematology and Cellular Therapy, WPAHS. "She is caring and dedicated ... a truly extraordinary nurse practitioner."

Wentley's colleagues praise her as a role model, professional resource and patient advocate. One patient stated, "She should be the yardstick by which you measure all [Cameos] recipients. Her unyielding concern for the patient is why I entered treatment and am here today."

A resident of Gibsonia, Wentley participates in community events such as Komen Race for the Cure, Leukemia & Lymphoma Society's Light the Night, and Gilda's Club.



Nurse Educator Awardees



Catherine Boyd, MSN, RN

West Penn Allegheny Health System, Citizens School of Nursing

Catherine Boyd, a Citizens School of Nursing Medical-Surgical Instructor, earned her Diploma in nursing from St. Francis School of Nursing, her Bachelor of Science degree in Nursing from Indiana University of Pennsylvania, and her Master of Science degree in Nursing from Waynesburg University.

Boyd's path to becoming a nurse educator began with a long-time desire to teach and included satisfying experiences educating patients and other staff. "But it was when I had opportunities to work with nursing students that I felt most fulfilled as a nurse," she says. "So when an instructor position be-

came available at my hospital, I jumped at the chance. I have never, for one moment, regretted that decision. I look forward to my job every day."

Her positive attitude and competence made all the difference for one Management Course student who was apprehensive about providing so much physical care to so many patients. "I led her in caring for the first patient and she gained confidence over time. In her final clinical evaluation, she remarked that watching my effortless care led her to realize she could do that too—I had helped her spread her wings and fly!"

A resident of Tarentum, Boyd's community service includes Toys for Tots, pancreatic cancer fundraising, and serving on the advisory board and as professional judge for the local high school's nursing aid course.

Gina DeFalco, RN, MSN

St. Margaret School of Nursing of UPMC

After years of working in nursing management and administration positions, Gina DeFalco felt the best way she could make a difference and influence the future of nursing was to become a nurse educator.

A resident of Plum Boro with both master's and bachelor's degrees in nursing from LaRoche College, DeFalco is chairperson of the Basic Nursing I Course at St. Margaret School of Nursing. She holds the overall responsibility for students entering the program and progressing to Basic Nursing II.

DeFalco lectures, provides clinical oversight to students, and works with other nurse educators to develop and coordinate schedules. As a member of the admissions committee, she reviews applications from prospective students, helps select students for the program, and actively participates in recruitment activities.

DeFalco is also an adjunct faculty member and clinical instructor at Allegheny County Community College, teaching nursing students at UPMC St. Margaret and Presbyterian SeniorCare. She is a member of several professional organizations, including the Association of Operating Room Nurses, the National League of Nursing, and Sigma Theta Tau.

As a nursing educator, DeFalco says the most exciting and rewarding part of her career is being a part of shaping the future of the nursing profession. "Influencing young men and women to provide quality, empathetic, and patient-centered care through the use of evidence-based information, critical thinking, and knowledge helps me know that, someday, I will relinquish my nursing responsibilities to competent and qualified graduates," she says.



Nadine Cozzo Englert, RN, MSN, PhD

Robert Morris University

Nadine Cozzo Englert is an associate professor of nursing at Robert Morris University (RMU) School of Nursing and Health Sciences. After earning her Bachelor of Science degree in nursing from Florida Atlantic University in Boca Raton, Florida, Englert returned to Pittsburgh and worked as a medical-surgical and critical care nurse.

While working in a trauma-surgical intensive care unit she realized her passion for teaching new graduate nurses. Englert earned a Master of Science degree with an emphasis on nursing education from the University of Pitts-

burgh School of Nursing and began teaching full-time in an undergraduate nursing program. She then earned her Doctor of Philosophy degree from Pitt's School of Education.

Englert has been a nurse educator for over ten years, actively teaching across the undergraduate, masters and doctoral levels in the School of Nursing. An enthusiastic teacher who engages students with stories and active learning strategies, Englert was recently nominated by her Dean at RMU for the President's Distinguished Teaching Award.

In addition to her full-time faculty position, Englert works as a staff nurse at a long-term care facility in the South Hills area, providing direct care to residents through a unique program that fosters wellness and independent living. She promotes the inclusion of geriatric nursing care in the undergraduate program and embraces opportunities to bring undergraduate and graduate students to her clinical facility: "When I bring my students and residents together, the learning is reciprocal and the benefit mutual," she says.

Cindy Ann Fickley, MSN, RN

Carlow University

Cindy Fickley has been director of the undergraduate School of Nursing program at Carlow University since 2006.

Fickley earned her Associate degree in nursing from Community College of Allegheny County (CCAC) South Campus, her Bachelor of Science degree in nursing from the Pennsylvania State University, and her Master of Science degree in nursing, with an area of specialization in nurse education from Duquesne University. She is currently working on her doctorate of nursing practice at Chatham University.

Before turning her attention to nursing education, Fickley spent 20 years in clinical nursing at Jefferson Hospital, including the last 12 years as hospital nursing supervisor. She has also taught nursing at CCAC-South and Parkway West Vocational Technical School. She is also a member of the Pennsylvania State University's Student Alumni, Sigma Theta Tau, Eta Epsilon Chapter; the National Association of Professional Women; and the University of Texas Health Center at San Antonio for Nursing and Simulation. Fickley has published and presented her studies in evidence-based practice both locally and nationally.

"Nursing provides a great opportunity to make a difference in people's lives," she says. "As a nurse educator, I am influencing nurses who will touch patients I never have met. It's an awesome responsibility."



Kathy Magdic, DNP, RN, ACNP-BC, FAANP

University of Pittsburgh

As a patient at Children's Hospital, Kathy Magdic admired the student nurses who cared for her - she thought the uniforms were cool too. She joined the Future Nurses of America and took science and Latin classes to prepare for nursing career. Magdic didn't know it at the time, but that was the beginning of a lifetime of learning.

After earning a diploma from Presbyterian University Hospital School of Nursing she went on to earn her BSN from Pennsylvania State University. With an interest in teaching, she earned a Clinical Nurse Specialist graduate degree at the University of Pittsburgh, then a second master's degree for Acute Care Nurse Practitioner (ANCP). Finally, she earned the doctor of nursing practice degree. "I am the epitome of a lifetime learner," she says.

An assistant professor and coordinator of ACNP at the University of Pittsburgh School of Nursing, Magdic also maintains an active nurse practitioner practice at UPMC Presbyterian. "I love to teach and I love clinical practice so this is the perfect blend for me," she says.

Magdic is active in nursing organizations at the state and national level. She serves as regional representative to the Pennsylvania Coalition of Nurse Practitioners and is chair of the Acute Care Taskforce. "As a teacher I can impact students to be good nurse practitioners. But I can also affect the role of nursing and development of the role at state and national levels. Then, I can translate that to practice and to my students."

Renée N. Patton, RN, MSN, CCRN

Mercy Hospital School of Nursing of UPMC

Renée Patton dreamed of becoming a nurse at a very young age when she helped care for her father who was bedbound for a year after an auto accident. The experience was the driving force that led her to pursue a career as a nurse and provide exceptional care for patients.

A resident of South Park, Patton earned her bachelor's degree in nursing from Duquesne University School of Nursing. After years of practice, she decided to become a nurse educator to inspire young nursing students with the passion and love for nursing. Patton earned her master's degree in nursing from the University of Phoenix. She is currently a nursing instructor at Mercy Hospital School of Nursing specializing in adult critical care/trauma/burn.

Student nurses admire Patton for her dedication and support. She strives to help the diverse student population overcome language barriers and arranges for translation of materials to students' native languages. Students identify with Patton and are motivated by her continued support and devotion in helping them succeed. She is a true advocate for the nursing profession, committed to "making a difference in the future of nursing."

Patton is a member of the Honor Society of Nursing and was elected to the Pennsylvania League for Nursing Area VI Nomination Committee.

She truly enjoys being a part of the birth of new generations of nurses. The most satisfying part of her career, Patton says, is when "the light goes on for a new nursing student — that ah-ha moment."



Shirley Powe Smith, PhD, RN, CRNP

Duquesne University

Shirley Powe Smith, assistant professor and coordinator for continuing education at Duquesne University School of Nursing, is an expert in the field of community health nursing, with a long and distinguished career as a nurse, humanitarian and educator.

The first African American graduate of Duquesne's Nursing PhD program, Smith worked tirelessly over the years to make sure members of minorities, as well as economically or educationally disadvantaged students, can choose nursing, do well in nursing school, and begin their careers.

Last year her faculty colleagues established a scholarship fund named in her honor to help minority and disadvantaged students become nurses. This was the second nursing scholarship at Duquesne named in Smith's honor, a clear acknowledgement of her academic leadership, professionalism and commitment to improve community health.

In addition to holding faculty positions at Duquesne and other schools of nursing, Smith has held regional and state office positions in professional nursing organizations. The Pennsylvania State Nurses Association, the American Heart Association and other organizations including the Pittsburgh Pirates have singled her out for her vision and dedication.

Smith's work continues to enrich the nursing profession through the colleagues she inspires and her students, in whom she instills a love of learning and an appreciation for the calling of nursing.

Sharen Ziska, RN, MSN

UPMC Shadyside School of Nursing

Sharen Ziska believes a commitment to lifelong learning is essential in today's health care environment. She has made transitioning and preparing graduate nurses for professional practice her priority. "It gives me great satisfaction knowing I have a part in producing the health care leaders of tomorrow," she says.

A resident of North Versailles, Ziska earned both her bachelor's degree in nursing and master's in nursing administration from Indiana University of Pennsylvania. She currently works as coordinator of the Professional Roles Transitions Course at UPMC Shadyside School of Nursing. A strong advocate for patient safety and the nurse's role in health care reform, Ziska has shared her vision at many regional and national forums.

"As nurses, we are held to a higher standard," she says. "It's our job as educators to hold our students to those same high standards of excellence and produce competent and capable professional nurses."

Ziska's greatest success stories involve student-driven change projects. She strives to incorporate quality and safety concepts into nursing education so graduates can function as leaders and agents of change. During their senior-level course, students identify areas that interfere with the delivery of patient care and then develop and implement strategies for making sustainable improvements.

"Their work shows a great deal of thought and effort and each one makes a significant impact on improving the care delivery process," she says. "I am very proud of the caliber of our graduates and their passion for creating a safer environment for our patients."



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Sheryl L. Anderson, RN
Canonsburg General Hospital

Theresa (Terri) Day, RN
Forbes Regional Hospital and Forbes Hospice

Ken Vignevic, BS, RN
The Western Pennsylvania Hospital



Advanced Practice (Clinical Focus) Award

Dawn Wentley, MSN, NP-C, OCN®
The Western Pennsylvania Hospital



Advanced Practice (Manager Focus) Award

Josephine E. Tutro, MSEd, BSN, RN-BC
The Western Pennsylvania Hospital



Nurse Educator Award

Catherine A. Boyd, MSN, RNC
Citizens School of Nursing

2011 Nominees

Allegheny General Hospital

Lauren Beno, BSN, RN
Victoria Borusiewicz, BSN, RN
Scott Brothers, RN
Jessica Busch, AND, RN, CCRN
Anne Dahlkemper, BSN, RN
Lisa Lee, RN
Kim Matson, RN
Tara Orcutt, MSN, RN, CCRN
Amy Snyder, RN
Cathy Thompson Stoddart, BSN, RN
Karen Trenney, RN
John Ziegler, RN

Advanced Practice (Clinical Focus)

Janet Shade, MSN, RN, CML, CEN
Danielle Zatchey, MSN, RN

Advanced Practice (Manager Focus)

Molly Sinclair, MSN, RN, CCRN

Donate Life

Theresa Chiamonte, BSN, RN, CCRN

Allegheny Valley Hospital

Amy Arduino, RN
Sue Armagost, RN
Ann Barrett, RN
Diane Chilton, RN
Mara Cloak, RN
Ryan Cornman, RN
Yitnalem Garibo, RN
Shannon Girdano, RN
Mary Anne Ray, RN
Melissa Sharp, RN
Kristin Wildi, RN

Canonsburg General Hospital

Sheryl L. Anderson, RN
Ginger Andredas, RN
Leesa Berger, RN
Marie Donkers, RN
Brienne Messer, BSN, RN
Marilyn Taylor, RN

Forbes Regional Hospital and Forbes Hospice

Theresa (Terri) Day, RN
Tara Knight, RN
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Laura Szczepaniak, RN
April Tatsak, RN
Rachel Walton, RN
Janice Wendt, RN
Kim Yuhouse, RN

Advanced Practice (Clinical Focus)

Kelly Buchinsky, MSN, RN

The Western Pennsylvania Hospital

Sally Bowker, RNC-OB
Fallon Degrange, RN
Marylynn Donaldson, RN
Kristy Kirkpatrick, RN
Jennifer Marafka, BSN, RN
Debbie McTiernan, RN
Denise Novak, RN
Mary Pat Swauger, RN
Ken Vignevic, BS, RN
Rose Wagoner, RN, CNOR



Advanced Practice (Clinical Focus)

Dawn Wentley, MSN, NP-C, OCN®

Advanced Practice (Manager Focus)

Josephine E. Tutro, MSEd, BSN, RN-BC

Citizens School of Nursing Nurse Educator

Catherine A. Boyd, MSN, RNC
Merlyn Slater, MSN, RN, CNE



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Marketing/Communications Advocacy Strategy Development

By T.L. (Tim) Tassone

A common definition of Advocacy frames it basically as a political process by an individual or a large group that normally aims to influence public policy and resource allocation decisions within political, economic, and social systems and institutions. It may be motivated from moral, ethical marketing/communications or faith principles or simply to protect an asset of interest, whether tangible or intangible to those involved.

Advocacy can include many activities that a person or organization undertakes including marketing/communications media campaigns, direct marketing, public relations, public speaking, commissioning and publishing research or poll or the 'filing of friend of the court briefs'. Lobbying (often by lobby groups) is also a form of advocacy where a direct approach is made to legislators on an issue that plays a significant role in modern politics.

Taken as yet another viable strategy of the marketing/communications planning process mix, Advocacy can be employed to add a vehicle that raises greater and more cogent awareness among specific target audience(s), as well as to enhance an additional proof source for the product (or service) promise being made by the marketer to the consumer/patron.

Consider the use of Advocacy as a possible planning tool in addition to the tools proposed in my other recent articles ("The Three Knows of Marketing/Communications" and "The Efficient Strategic Planning Process: Account Planning") for the marketer to use to maximize the yield from the strategic marketing/communications effort. Remember that the broader and more diverse target audiences that need to be addressed, the greater the call for a mix of more meaningful marketing/communications strategies and tactics.

The following process checklist will provide a template for the construction and use of Advocacy as a marketing/communications strategy and tactical development.

1. OBJECTIVES: WHAT DO YOU WANT?

Any advocacy effort must begin with a sense of its goals. Among these goals some distinctions are important. What are the long-term goals and what are the short-term goals? What are the content goals (e.g. policy change) and what are the process goals (e.g. building community among participants)? These goals need to be defined at the start, in a way that can launch an effort, draw people to it, and sustain it over time.

2. AUDIENCES: WHO CAN GIVE IT TO YOU?

Who are the people and institutions you need to move? This includes those who have the actual formal authority to deliver the goods (i.e. legislators). This also includes those who have the capacity to influence those with formal authority (i.e. the media and key constituencies, both allied and opposed). In both cases, an effective advocacy effort requires a clear sense of who these audiences are and what access or pressure points are available to motivate and to move them.

3. MESSAGE: WHAT DO THEY NEED TO HEAR?

Reaching these different audiences requires crafting and framing a set of messages that will be persuasive. Although these messages must always be rooted in the same basic truth, they also need to be tailored differently to different audiences depending on what they are ready to hear. In most cases, advocacy messages will have two basic components: an appeal to what are right and an appeal to the audience's self-interest.

4. MESSENGERS: FROM WHOM DO THEY NEED TO HEAR IT?

The same message has a very different impact depending on who communicates it. Who are the most credible messengers for different audiences? In some cases, these messengers are "experts" whose credibility is largely technical. In other cases, we need to engage the "authentic voices" that can speak from personal experience. What do we need to do to equip these messengers, both in terms of information and to increase their comfort level as advocates?

5. DELIVERY: HOW CAN WE GET THEM TO HEAR IT?

There is wide continuum of ways to deliver an advocacy message. These range from the genteel (e.g. lobbying) to the 'in-your-face' (e.g. direct action). Which means is most effective varies from situation to situation. The key is to evaluate them and apply them appropriately, weaving them together in a winning mix.

6. RESOURCES: WHAT HAVE WE GOT?

An effective advocacy effort takes careful stock of the advocacy resources that are already there to be built on. This includes past advocacy work that is related, alliances already in place, staff and other people's capacity, information and political intelligence. In short, you don't start from scratch, you start from building on what you've got.

7. GAPS: WHAT DO WE NEED TO DEVELOP?

After taking stock of the advocacy resources you have, the next step is to identify the advocacy resources you need that aren't there yet. This means looking at alliances that need to be built, and capacities such as outreach, media, and marketing research that are crucial to any effort.

8. FIRST EFFORTS: HOW DO WE BEGIN?

What would be an effective way to begin to move the strategy forward? What are some potential short term goals or projects that would bring the right people together, symbolize the larger work ahead and create something achievable that lays the groundwork for the next step?

9. EVALUATION: HOW DO WE TELL IF IT'S WORKING?

As with any long journey, the course needs to be checked along the way. Strategy needs to be evaluated revisiting each of the questions above (i.e. are we aiming at the right audiences, are we reaching them, etc.) It is important to be able to make mid-course corrections and to discard those elements of a strategy that don't work once they are actually put into place.

Within our current USA society and the global society, the rate change has accelerated far beyond what has been considered as the norm only a few years ago. Aspects of higher and speedier technology, volatile economies, cultural mores, and personal political empowerment are a real time issue. The need for a closer examination by the marketing/communicator regarding what target audience(s) is seeking and what will be considered as an acceptable and legitimate 'promise' from a product or service will most definitely require the use of Advocacy as a part of the strategic mix. †

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Submissions? Story Ideas? News Tips? Suggestions?
Contact Daniel Casciato at
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Krol Media Helping Non-Profits Find Their Voices

By Ashley Macik

Doing a good deed is not always without a challenge.

Behind a good cause, an awareness event, or a memorable slogan designed to attract public attention is often a well-meaning yet unheralded entity: a non-profit organization.

Non-profits maintain a selfless desire to support something bigger than them in a time of profitability, gain, and “What’s in it for me?”

Without a desire for profit, however, comes the stark realization of limited time and resources.

As sometimes learned the hard way, time and resources are often essential ingredients to a successful non-profit campaign. Without them, non-profits can find it difficult to effectively work with the media or learn and apply new marketing techniques to help spread their messages.

Fortunately, non-profits can find their voices through public relations agencies.

While the public might already be aware of these organizations and what they represent, they are still prone to getting lost within a world of saturated, sensationalist news.

These agencies employ specialists to bring organizations like non-profits to the media forefront. With time not always on the side of tight-scheduled non-profits, agencies help carry the workload of media contacts, press releases and bylined articles – essentials for assuring media support for a campaign.

Krol Media Associates of Cranberry Township, PA,

is a public relations agency that understands how to support non-profits. They believe in the power of creative storylines and that the more thought out the campaign, the greater the effect on the public. Their goal is to “provoke response.”

Over the years, Krol has helped create such success for non-profits throughout the Pittsburgh region. Those who partner with them see the expertise and professionalism they exude for media outreach and all things public relations.

One organization that has experienced success with Krol is Family House – a non-profit that offers affordable housing for patients and their families who are in Pittsburgh for extended hospital stays.

For the past two years, Krol has managed their media outreach plan including the annual Family House polo match.

Since its inception 28 years ago, the event has seen considerable success. To its advantage, however, Family House’s partnership with Krol proved to make it even more successful. With Krol’s outreach plan designed to raise awareness to a new generation of potential donors, the increased media coverage contributed to an increase in ticket sales for the event and overall revenue increase for Family House.

Other non-profits benefitting from Krol Media’s services are: Coro Civic Leadership Council, The Regional Internship Center and Keystone Simulation and Education Center (KSEC).

“Non-profits who are able to deliver their mission, by reaching their potential clients and funding oppor-

tunities, requires a number of team players to reach success, said Lynell Scaff, Executive Director of KSEC. “Krol Media has rounded out my team, by delivering affordable branding and marketing strategies that produce the results for delivery of the mission.”

Currently, Krol is focusing on PRESENTS FOR PATIENTS®, a charitable program of St. Barnabas Health System.

The program, founded in 1984, was created to assure that nursing home residents are not forgotten during the holidays. In 2010 alone, the program offered gifts and visits to 27,482 residents in more than 300 facilities throughout Pennsylvania, Ohio, New York, Tennessee and West Virginia.

With Krol’s support, PRESENTS FOR PATIENTS® will continue growing its public outreach to encourage community members to visit their local nursing residencies more often.

Not all non-profits can or will garner the support of an outside source like Krol, but if there is one tip they can offer to an organization, it is to tell their story.

“We encourage our non-profit clients to remember to keep their message out there to remind people of why they do what they do,” Susan Krol, founder and owner of Krol Media, said. She encourages organizations to keep donors and potential donors informed through both traditional and social media.

The more a non-profit’s story is told, the greater its chances are of achieving the ultimate goal: public support for the causes it so strongly believes in.

For more information, visit www.krolmedia.com. †

UPMC Health Plan Case Managers Reach Out to Connect with Members

By Karen DePasquale

“You never know what you’re going to get on the other end, so you need to be prepared for anything.”

That is how Deb Beasock approaches her work as a case manager for UPMC Health Plan, and it’s an approach that makes perfect sense for the work she does.

As a case manager, it is her job to reach out to UPMC Health Plan members on the telephone and to respond to their particular needs, regardless of degree of difficulty. When she calls, she never knows what issues she may have to deal with, but she has to be prepared to handle whatever comes her way.

“You’re there for the members in any and all aspects of support to meet their needs,” says Deb, a registered nurse from West Mifflin, who has been a case manager for UPMC Health Plan for three years.

The job of a UPMC Health Plan case manager requires many skills. You need versatility and ingenuity, as well as empathy and medical knowledge. Sometimes a case manager is required to assist a member with understanding diagnoses and treatments appropriately. Other times, the case manager has to know how to cut through administrative red tape by removing barriers to care. And yet other times, the most important service a case manager can provide is just being there to listen.

Case managers telephone members who are managing specific chronic conditions or who have lifestyle risks or a complex medical condition. The chronic conditions include diabetes, asthma, chronic heart failure, coronary artery disease, high blood pressure/high cholesterol, COPD (chronic obstructive pulmonary disease), low-back pain, and depression.

Deb’s first priority on every call she makes is to establish “an open conversation” with the member. “I try to find out any needs they have and what I can do to meet them.” This is true whether the member is someone she will deal with only once, or someone she will regularly interact with for months and even years to come.

Deb finds the job very rewarding in many ways, including the rare times when she can solve a mystery. One case she remembers well involved a member with diabetes who was making progress in all areas, but could not lower her blood sugar level. “We had several conversations and we couldn’t figure out why her blood sugar values were so high.”

During one of their talks, the member casually told Deb that she liked tomato soup and that she always had the soup along with “a whole sleeve” of crackers. What the member did not realize was that by eating all those crackers she was in-

creasing her intake of carbohydrates, which was raising her blood sugar. Deb was able to talk to her about changing her diet. Result: She finally was able to reduce her blood-sugar level.

Because UPMC Health Plan supports each member in striving for the best possible quality of life and health, its programs are designed to provide a continuum of education, support, and care. UPMC Health Plan’s case management function includes a comprehensive team of health professionals who serve members’ needs where and when that service is most effective.

Case managers help members to manage their condition by following their doctor’s plan of care. They provide members with educational materials, coach them through the materials, and support them in obtaining the skills and knowledge necessary for self-management.

For example, after Deb helped the woman who ate all the crackers to solve her blood sugar problem, the woman was more amenable to dealing with another problem: quitting smoking. Through the UPMC Health Plan case management program, Deb was able to connect her with a health coach who coached her through a quit smoking program. Today, the woman has a lower blood-sugar count, is managing her diabetes more successfully, and is a non-smoker.

“It can be a very rewarding job,” says Deb. “I get a lot of positive feedback. A lot of members tell me, ‘I’m so glad I’m talking to you.’ There are times when you reach members on their worst day and it’s just nice that you are able to help them get through it.” †

Karen DePasquale, LSW, is Director of Commercial Health Management for UPMC Health Plan.



Deb Beasock

Duquesne University Nursing School Earns Center of Excellence Designation for Second Time

For the second time, Duquesne University's School of Nursing has earned the coveted designation as a Center of Excellence from the National League for Nursing (NLN). The NLN, the foremost organization for nurse educators and institutions of higher learning, only bestows the Center of Excellence status to a handful of nursing schools.

The School of Nursing is one of only eight schools across the nation, and the only nursing school in Pennsylvania, to earn the designation of an NLN Center of Excellence.

Since 2004, the NLN has invited nursing schools each year to apply for three-year Center of Excellence status, based on their ability to demonstrate sustained excellence in faculty development, nursing education, research or student learning and professional development.

The School of Nursing first became a Center of Excellence in 2008 for a three-year term. The reprise of the designation at Duquesne, according to Nursing Dean Eileen Zungolo, underscores the commitment of the nursing faculty and staff to implement and measure the effect of educational best practices.

"The nursing faculty has shown sustained dedication to academic and professional excellence, the proof of which is evident in the quality of our students and alumni," Zungolo said. "To prepare our students to excel as nurses-and to be recognized twice in this way by the NLN-requires the highest levels of performance as individual educators and as a team, so I couldn't be more proud."

This year, the NLN extended the Center of Excellence term from three to four years and awarded the credential to each school in one of three categories: Enhancing Student Learning and Professional Development; Promoting the Pedagogical Expertise of Faculty; or Enhancing the Science of Nursing Education. The nursing school earned Center of Excellence status in Enhancing Student Learning and Professional Development.

"The Center of Excellence banner carries with it a responsibility to the entire academic community," said Cathleen Shultz, NLN president. "We expect that Center of Excellence schools will help educate and inspire others, thus elevating the standards of excellence throughout all levels of higher education in nursing."

For more information, visit www.duq.edu.

New & Notable

Allegheny General Hospital Study Finds Less Invasive Treatment for Early-Stage Lung Cancer as Effective as Limited Surgery

A newer, non-surgical way of treating high-risk, early-stage lung cancer patients with stereotactic radiation is as effective as limited surgery and brachytherapy (radioactive seed implantation), providing patients with another good treatment alternative, according to a study by Allegheny General Hospital radiation oncologists.

The study is being presented today at the annual meeting of the American Society for Therapeutic Radiology and Oncology (ASTRO) in Miami Beach, Fla., and is one of several being presented by AGH researchers. Founded in 1958, ASTRO is the largest radiation oncology society in the world with more than 10,000 members committed to advancing the scientific base of radiation therapy and extending the benefits of radiation therapy to patients with cancer and other diseases.

"We now have multiple options for these high-risk patients with early-stage lung cancer, where before they had limited options," said lead researcher Athanasios Colonias, MD. "These are two viable therapeutic regimens and choosing between them may simply come down to patient preference."

This study is one of the biggest thus far to compare the two methods, and a much larger, randomized study is soon to be underway through the American College of Surgeons Oncology Group (ACOSOG). Allegheny General will participate in the ACOSOG study.

The AGH researchers studied 213 patients with Stage 1 non-small-cell lung cancer from January 1996 to January 2011. The patients were considered high-risk because their lung function was compromised or they suffered from other lung or heart diseases and could not tolerate the standard surgical procedure of lobectomy. The patients ranged in age from 50 to 91.

Of the patients enrolled, 145 were treated with surgery and brachytherapy. An additional 68 patients were treated with stereotactic body radiotherapy, which uses a very high dose of radiation delivered very precisely to the lung tumors. It is an outpatient procedure, and painless.

Patients in the study who underwent surgery stayed in the hospital an average of six days, and peri-operative mortality rate was 3.4 percent. The stereotactic group had no treatment-related deaths.

The overall 1 and 2-year survival for the surgery/brachytherapy group was 85 percent and 71 percent, while overall 1 and 2-year survival rates for the stereotactic radiation group were 84 percent and 66 percent.

"The stereotactic technique is non-surgical and has limited side effects. Opting for surgery, however, may offer an advantage to doctors in terms of getting a better view of the tumor and providing more accurate staging, which is not as easily done with the non-surgical procedure," said Dr. Colonias.

"Close collaboration between the surgical oncologist and radiation oncologist can help us determine which approach is best based on the individual patient circumstance," Dr. Colonias added.

Also involved in the study were David Parda, MD, Chair, Department of Radiation Oncology, West Penn Allegheny Health System; Olivier Gayou, Ph.D., DABR, System Director, Physics Research and Development Department of Radiation Oncology, Allegheny General Hospital; E. Day Werts, Ph.D., System Director of Education and Clinical Research; Katherine Kotinsley, MD, Chief Resident, Radiation Oncology Residency, AGH; Benjamin Kotinsley, MD, Radiology Resident, AGH; James Betler, DO, Radiation Oncologist, AGH, and Fiore Alite, fourth-year medical student.

For more information, visit www.wpahs.org.

Children's Dermatology Services Opens New Acne Treatment Center



Douglas Kress

Last month, Children's Hospital of Pittsburgh of UPMC's Division of Pediatric Dermatology, known as Children's Dermatology Services, opened its new Acne Treatment Center, the only one of its kind in the region. Located at its office in Wexford, Pa., the center is led by Douglas Kress, MD, and Robin Gehris, MD, both of whom are full-time



Robin Gehris

board-certified pediatric dermatologists, their pediatric dermatology fellow, and their four full-time certified physician assistants, all of whom are expert in the treatment of acne.

For more information, visit www.chp.edu.

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Pitt Team Finds Molecular Evidence of Brain Changes in Depressed Females

Researchers at the University of Pittsburgh School of Medicine have discovered molecular-level changes in the brains of women with major depressive disorder that link two hypotheses of the biological mechanisms that lead to the illness. Their results, published online this week in *Molecular Psychiatry*, also allowed them to recreate the changes in a mouse model that could enhance future research on depression.

Although women are twice as likely as men to develop depression and have more severe and frequent symptoms, very little research has focused on them or been conducted in other female animals, noted senior author Etienne Sibille, Ph.D., associate professor of psychiatry, Pitt School of Medicine.

“It seemed to us that if there were molecular changes in the depressed brain, we might be able to better identify them in samples that come from females,” he said. “Indeed, our findings give us a better understanding of the biology of this common and often debilitating psychiatric illness.”

The researchers examined post-mortem brain tissue samples of 21 women with depression and 21 similar women without a history of depression. Compared to their counterparts, the depressed women had a pattern of reduced expression of certain genes, including the one for brain-derived neurotrophic factor (BDNF), and of genes that are typically present in particular subtypes of brain cells, or neurons, that express the neurotransmitter gamma-aminobutyric acid (GABA.) These findings were observed in the amygdala, which is a brain region that is involved in sensing and expressing emotion.

In the next part of the project, the researchers tested mice engineered to carry different mutations in the BDNF gene to see its impact on the GABA cells. They found two mutations that led to the same deficit in the GABA subtype and that also mirrored other changes seen in the human depressed brain.

Dr. Sibille noted that researchers have long suspected that low levels of BDNF play a role in the development of depression, and that there also is a hypothesis that reduced GABA function is a key factor.

“Our work ties these two concepts together because we first show that BDNF is indeed low in depression and second that low BDNF can influence specific GABA cells in a way that reproduces the biological profile we have observed in the depressed brain,” he said.

The team is continuing to explore the molecular pathway between BDNF and GABA and others that could be important in depression. Co-authors include Gaelle Douillard-Guiloux, Ph.D., Rama Kota, Ph.D., Xingbin Wang, Ph.D., George C. Tseng, Ph.D., and David Lewis, M.D., all of the University of Pittsburgh; Jean-Philippe Guilloux, Ph.D., of Pitt and Universite Paris-Sud; Alain Gardier, Ph.D., of Universite Paris-Sud; and, Keri Martinowich, of the National Institute of Mental Health, part of the National Institutes of Health.

The study was funded by the National Institute of Mental Health.

For more information, visit www.medschool.pitt.edu.

New & Notable

Disability Organization’s “Dare to Dream” Fund Provides Opportunity to Achieve Life-Long Dreams

Bill Tatters, a forty-seven year old Armstrong County resident and consumer of Three Rivers Center for Independent Living’s (TRCIL) Living Well With A Disability program, realized his childhood dream of skydiving on Thursday, September 8 at Skydive Pennsylvania, Grove City Airport.

Tatters fondly recalls watching war movies with his father as a child and always desiring to become a paratrooper for the U.S. Military. However, twenty-two years ago Tatters sustained a Traumatic Brain Injury (TBI) as a result of an accident which shattered his military aspirations. Now, with the financial support of TRCIL’s “Dare to Dream” fund, Tatters performed a tandem jump which provides the first-time jumper the chance to skydive with little training. Tatters and his instructor free-fell together for 45 to 60 seconds then flew the canopy to landing. This “ultimate rush”, according to Tatters, is a “life goal and shows persons with disabilities can do whatever they want.” TRCIL’s “Dare to Dream” fund assisted him in this endeavor as his family and friends gathered to witness the event.

TRCIL was the second Center for Independent Living (CIL) in Pennsylvania to offer the innovative Living Well With A Disability program. The concept was first developed by the Center for Independent Living of Central Pennsylvania (CILCP) in 2007 as a resource for anyone with any type of disability to reach short-term and long-term goals, beyond the realm that service providers generally offer, ranging from the achievement of dreams and aspirations to enhancing the quality of life. TRCIL launched Living Well With A Disability in Western PA in September 2008. The “Dare to Dream” campaign is unique to TRCIL and was introduced in November 2009 as a fundraising effort to provide financial support to qualified individuals who need assistance in making their own Living Well With A Disability goals a reality. The proceeds from all of TRCIL’s fundraising events benefit “Dare to Dream”.

For more information, visit www.LivingWellWithADisability.org.

Blind & Vision Rehabilitation Services Offers Evening Hours

Starting in October, Blind & Vision Rehabilitation Services of Pittsburgh’s low vision program will have evening appointments available on Tuesdays at its Homestead office, 1800 West Street.

BVRS’s low vision program provides services to people who have some usable vision. Its specially trained optometrist performs an exam to determine the person’s level of vision, and then prescribes optical aids designed to maximize remaining eyesight. The new hours are Monday, Wednesday and Thursday from 8:00 a.m. to 4:30 p.m.; Tuesday 8:00 a.m. to 7:30 p.m., and Friday 8:00 a.m. to 1:00 p.m.

Blind & Vision Rehabilitation Services of Pittsburgh, a 101-year-old private non-profit, offers comprehensive and personalized computer instruction, employment and vocational services, personal adjustment to blindness and deaf blindness training, independence skill building, in-home instruction, and low vision services for persons with vision loss. BVRS is a United Way Agency of Excellence in Health and Human Services formerly known as Pittsburgh Vision Services of Oakland and Bridgeville, and is accredited by The National Accreditation Council for Agencies Serving People with Blindness or Vision Impairments (NAC).

For more information, visit www.pghvis.org.

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Virtual OfficeWare Announces Hire of Human Resources Consultant



Anita M. Gavett

Virtual OfficeWare, Inc. (VOW) is pleased to announce the addition of Anita M. Gavett, PHR to their growing staff. Gavett is VOW's Lead Consultant for the company's newly formed Human Resources Consulting Division. She will lead business development, consulting, recruiting and overall division management.

Gavett possesses over 15 years of diverse HR experience. She is a graduate of La Roche College where she earned her B.S. Degree in Communications along with her Masters Degree in Human Resources Management. Gavett is a Certified Professional in Human Resources and is a member of the Society of Human Resources Management, Pittsburgh Human Resources Association and the International Foundation of Employee Benefits. In addition, she volunteers as a Career Coach for the Pennsylvania Organization for Women in Early Recovery.

For more information, visit www.virtualofficeware.net/HR-Consulting-Services. †

Sherman Joins Gateway Rehab as Chief Financial Officer

Gateway Rehab, with facilities in Pennsylvania and Ohio, dedicated to a full continuum of substance-abuse treatment, appointed **David W. Sherman, CPA**, as its Chief Financial Officer and Executive Vice President, Finance.

Originally from New York, Sherman's experience in guiding the financial needs of healthcare facilities is extensive. Most recently he served as Director of Finance for the West Penn Allegheny Health System. His background also includes positions with University of Pittsburgh/University of Pittsburgh Physicians and Quorum Health Resources. Earlier in his career, Sherman was associated with the international accounting firm Pannell, Kerr, Forster & Co. in New York City. A graduate of Ithaca College, where he earned his Bachelor of Science in Accounting, Sherman holds a Masters in Healthcare Administration from the University of Pittsburgh as well. He is a Certified Public Accountant and is a member of the American Institute of Certified Public Accountants.

For more information, visit www.gatewayrehab.org. †



David W. Sherman

Healthcare Professionals in the News

Pitt's John J. Reilly Named Jack D. Myers Professor and Chair of Medicine



John J. Reilly Jr.

John J. Reilly Jr., M.D., executive vice chair, Department of Medicine, has been named the Jack D. Myers Professor and Chair, Department of Medicine, University of Pittsburgh. Reilly replaces Steven Shapiro, M.D., who was named chief medical and scientific officer of UPMC last year.

Dr. Reilly came to Pitt in 2008 as a professor of medicine. He is a prolific researcher who has authored or co-authored more than 100 peer-reviewed research reports and co-authored chapters in two of the most well-known textbooks of internal medicine. His areas of interest include the genetic and environmental factors associated with chronic obstructive pulmonary disease (COPD) and the role of alveolar macrophage enzymes in emphysema, COPD and lung cancer.

Dr. Reilly graduated from Harvard Medical School after earning an undergraduate degree in chemistry from Dartmouth College. He completed his residency in internal medicine at Brigham

and Women's Hospital and later completed a fellowship there in pulmonary and critical care medicine. In 2010, he completed Intermountain Healthcare's Advanced Training Program in Healthcare Delivery Improvement.

Dr. Reilly's academic career started at Harvard, where he rose from instructor of medicine to associate professor of medicine. He also was an attending physician at the Brigham and Women's Hospital, where he served in several roles: medical director of the Lung Transplant Program, the Center for Chest Diseases, and the Pulmonary Rehabilitation Program; director of the Bronchoscopy Service and the Pulmonary Function Laboratory; interim chief of the Division of Pulmonary and Critical Care Medicine; and vice chairman of Brigham's Integrated Clinical Services.

Dr. Reilly is certified by the American Board of Internal Medicine and by that Board's Pulmonary Subspecialty Board. He also holds a Board Certificate of Competence in Critical Care, is a Fellow of the American College of Physicians, and is a past chair of the National Heart, Lung, and Blood Institute Clinical Trials Study Section.

For more information, visit www.medschool.pitt.edu. †

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Former PA Health Secretary Everette James to Lead Pitt Health Policy Institute



Everette James

The University of Pittsburgh has named professor and Associate Vice Chancellor **Everette James, J.D., M.B.A.**, as the new director of its Health Policy Institute (HPI). James joined Pitt last year after serving as Pennsylvania's 25th Secretary of Health.

James has served in senior state and federal government policymaking roles and is recognized for his collaborative work formulating and successfully implementing health policy. He implemented Pennsylvania's first statewide indoor smoking ban and the nation's most comprehensive health care-associated infection law, and helped negotiate the passage of scope-of-practice expansions for nurses and physician and dental assistants. Working with the Pennsylvania State Board of Education, James successfully applied current childhood obesity research to update the nutrition and physical activity standards in the Pennsylvania School Code.

He succeeds Beaufort Longest Jr., Ph.D., who has led HPI

since its inception in 1980.

For more information, visit <http://www.healthpolicyinstitute.pitt.edu>.

Baptist Homes Society Board Chair Announced

Jan O. Wenzel, a shareholder with Buchanan Ingersoll & Rooney PC, has been named chair of the Board of Directors for Baptist Homes Society (BHS), a faith-based, not-for-profit senior living and care organization operating two communities—Baptist Homes in Mt. Lebanon and Providence Point in Scott Township.

Wenzel has been a member of the BHS Board since 2008. He is a member of the Allegheny County Bar Association, including its Health Law Section. Wenzel's expertise in health care legal matters and issues will be an asset to the organization as Baptist Homes Society continues to grow and expand services to seniors in the region.

For more information, visit www.baptisthomes.org.



Jan O. Wenzel

Internationally Recognized Expert in Immune Reconstitution Named Chief of New Division at Children's Hospital of Pittsburgh



Paul Szabolcs

Paul Szabolcs, M.D., a pioneer in reduced-toxicity cord blood and marrow transplantation, has been appointed chief of the newly established Division of Blood and Marrow Transplantation and Cellular Therapies at Children's Hospital of Pittsburgh of UPMC.

Under Dr. Szabolcs' leadership, physicians in the Division of Blood and Marrow Transplantation and Cellular Therapies will design and test disease-specific and biologically rational novel reduced-toxicity transplantation regimens for patients with high-risk leukemia or lymphoma, and for those afflicted with life-threatening inherited conditions that can lead to bone marrow failure, immune deficiency, autoimmune diseases and neurodegenerative conditions.

Dr. Szabolcs, also a professor of Pediatrics at the University of Pittsburgh School of Medicine, comes to Pittsburgh from Duke University Medical Center, where he was as an associate

professor of pediatrics and immunology. While at Duke, he established an independent research program that combined basic and clinical investigations focused on understanding the biology of immune reconstitution and alloreactivity after cord blood transplantation and developed immunotherapy strategies to prevent or treat leukemia relapse after cord blood transplantation.

In recent years, Dr. Szabolcs, a National Institutes of Health-funded researcher, has successfully developed novel reduced-toxicity transplant conditioning regimens to improve the safety of cord blood transplantation for children afflicted with a variety of non-malignant diseases, including inborn errors of metabolism, immunodeficiencies, and sickle cell anemia. Most recently, he has turned his attention to combining unrelated-donor bone marrow transplantation with lung transplantation for curative treatment of rare immune disorders that result in or cause pulmonary failure.

Dr. Szabolcs is a graduate of Semmelweis University School of Medicine in Budapest, Hungary. He completed his residency in pediatrics at New York University School of Medicine and his fellowship in pediatric hematology/oncology/bone marrow transplantation at Cornell University Medical College and Memorial Sloan-Kettering Cancer Center.

For more information, visit www.chp.edu.

Healthcare Professionals in the News

Pitt School of Nursing's Schubert Named President of Statewide Nursing Foundation

Mary Rodgers Schubert, M.P.M., B.S.N., director of continuing education, University of Pittsburgh School of Nursing, has been named president of the Nightingale Awards of Pennsylvania (NAP), a nonprofit foundation that aims to improve recruitment and retention of nurses in the state. NAP also has named three School of Nursing faculty as Nightingale Award finalists and a post-doctoral student has been awarded a Nightingale scholarship.

As the School of Nursing's director of continuing education, Schubert is responsible for planning, development, implementation and assessment of live and online educational opportunities for professional nurses with a focus on advanced practice, education, leadership and re-entry into practice.

NAP was established in 1989 by nursing and health care leaders to increase the supply of nurses to match the rising demand throughout the state. Each year, the group awards scholarships to nurses in the spring, and in the fall honors nurses at an annual awards gala. The nonprofit group is governed by a 24-member volunteer board of trustees, consisting of leaders in nursing, business, industry and other health care fields.

Pitt school of Nursing Nightingale Award finalists for 2011 include Michael Beach, M.S.N., D.N.P., assistant professor; Alice Blazeck, B.S.N., M.S.N., D.N.Sc., assistant professor and vice chair for administration; and Annette DeVito Dabbs, Ph.D., F.A.A.N., associate professor and vice chair for research, all of the Department of Acute/Tertiary Care.

Elizabeth Crago, M.S.N., a post-doctoral student in Pitt's Department of Acute/Tertiary Care has been awarded a Nightingale scholarship.

This year's gala is Nov. 4, and proceeds benefit the group's scholarship program.

For more information, visit www.nursing.pitt.edu.



Mary Rodgers Schubert

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Jameson Health System Holds Annual Membership Meeting

Jameson Health System's annual meeting was held September 21 in its South Conference Center. System Chair Lee Silverman presented a Chairman's report, CEO Douglas Danko the 2010-2011 Annual Report, Secretary Kenneth Romig the Treasurer's Report and Steven Warner, Hospital and Nominating Committee Chair, presided over elections.

103 members were re-elected to Membership. The following new Members were elected:



Steve Caldararo

Steve Caldararo, President & CEO, Nick's Auto Body community affiliations include Boards of YMCA, Lawrence County Chamber, First Merit Bank.

Bryan Clark, Partner, Clark's Studio community affiliations are YMCA Board and Mohawk Athletic Association.

David Copper, Executive Director, Cray Youth & Family Services community affiliations are Lawrence County Headstart Advisory Board,

past president of Lawrence County Chamber, New Castle Kiwanis, and Lawrence County Family Center.



David Copper

Lawrence Corvi, Publisher, New Castle News community affiliations include Lawrence County Chamber Board.

Joseph Gabriel, Principal, Packer Thomas community affiliations include boards of Lawrence County DUI Program and Lawrence County School to Work, Boy Scouts Moraine Council Audit Chair, Treasurer St. John's Church, New Castle Rotary member chair.

Amy McConnell, President, M&M Insurance Group /McConnell & Associates community affiliations include YMCA, Lawrence County Chamber, and Lawrence County Tourist Promotion Agency.



Bryan Clark



Lawrence Corvi

Healthcare Professionals in the News



Joseph Gabriel

Dennis W. Nebel, Psy.D., Executive Director, Human Services Center community affiliations are boards of Lawrence County Economic Development Corporation, Lawrence County Learning Center, Meals on Wheels, Beaver-Lawrence Red Cross, Pittsburgh Symphony Cathedral Advisory board, chair of YMCA Salute to Courage, member New Castle Lion's Club, Lawrence County Chamber and Social Services Health Advisory Council.

Eugene DeCaprio and Dale Perelman were elected by Membership to serve three-year terms on the Jameson Health System board of directors with Gerald Mitchell elected to Emeritus.



Dennis W. Nebel

During the reorganizational meeting of the Jameson Health System board following the annual meeting, new board appointments were made:

Jameson Hospital Board: Steve Caldararo, Lawrence Corvi, with Eugene DeCaprio, Donald DeCarbo, Gerald Mitchell, and Dale Perelman elected to Emeritus

Children's Advocacy Center Board: David Copper

Reappointments were made to the Jameson Hospital, Jameson Health Care Foundation, Jameson Care Center, Children's Advocacy Center, Jameson Health Services, and Jameson Medical Inc. boards.

For more information, visit www.jamesonhealth.org.



Amy McConnell

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Two New Faculty Members Join University of Pittsburgh Graduate School of Public Health



Jagpreet Chhatwal

The University of Pittsburgh Graduate School of Public Health Department of Health Policy & Management (GSPH-HPM) recently introduced two new faculty members who joined the department in September 2011.

Jagpreet Chhatwal, Ph.D. holds a joint appointment at GSPH-HPM and the Swanson School of Engineering in the Industrial Engineering Department. Chhatwal received his Ph.D. in Industrial Engineering from the University of Wisconsin-Madison. His thesis focused on improving the practice of breast cancer diagnosis by reducing unnecessary biopsies. He developed advanced mathematical models to help radiologists determine the risk of breast cancer and the optimal time to recommend a biopsy. This research won him several awards from the medical, as well as the operations research community.

After completing his PhD, he worked for Merck Research Laboratories as a health economist focusing in the area of infectious diseases and vaccines.

Dr. Chhatwal joined the University of Pittsburgh in order to pursue his goal of integrating medicine with operations research to form better clinical and public health policies. He also plans to collaborate with the VA Pittsburgh Health Systems to make healthcare operations more efficient. Additionally, Dr. Chhatwal expects to develop two new graduate courses on cost-effectiveness analysis and operations research methods in healthcare for the next academic year.

Healthcare Professionals in the News

demical year.

Julia Driessen, Ph.D. did her undergraduate work at The University of Michigan, where she majored in math and economics. She then completed her Ph.D. in Economics at Johns Hopkins University. Her thesis, titled “The Impact of Health Interventions on Fertility and Education: New Evidence”, was a study of secondary data to evaluate the socioeconomic effects of vaccination and family planning programs in Bangladesh.

Dr. Driessen’s position at Pitt will allow her continue her research on Bangladesh, in addition to collaborating on work with other faculty members to examine the long-term socioeconomic effects of health interventions. Her future goals include the application of her econometric analysis of health programs to other regions of the world.

Dr. Driessen also expects to begin teaching at the Graduate School of Public Health in the next academic year.

For more information, visit www.pitt.edu.



Julia Driessen



Mark A. Provenzano

Heritage Valley Sewickley Adds New Pulmonologist/Intensivist

Heritage Valley Health System recently announced the addition of **Mark A. Provenzano, M.D.** to Heritage Valley’s Sewickley campus.

With more than 20 years of experience, Dr. Provenzano specializes in critical care and in the treatment of all respiratory diseases. He obtained his bachelor’s of science degree from the University of Southern California and his medical degree from George Washington University

School of Medicine. He completed his internship and residency in Internal Medicine and fellowship in Pulmonary, Allergy and Critical Care Medicine at UPMC. Dr. Provenzano is board certified by the American Board of Internal Medicine for internal, pulmonary and critical care medicine. He is also a fellow in the American College of Chest Physicians.

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Brett Christopher Perricelli

Physician Joins St. Clair Hospital Staff

Brett Christopher Perricelli, M.D. has joined the group South Hills Orthopaedic Surgery Associates and is now on staff at St. Clair Hospital.

Dr. Perricelli earned his medical degree at the University of Pittsburgh School of Medicine. He completed a residency in orthopaedic surgery at UPMC. He completed a fellowship in adult reconstruction at the OrthoCarolina Hip and Knee Center in Charlotte, NC.

For more information, visit www.stclair.org.

Dr. Tsarnakova Joins Mount Nittany Physician Group's Internal Medicine Practice



Ralitsa Balabanova-Tsarnakova

Mount Nittany Physician Group is pleased to announce the addition of **Ralitsa Balabanova-Tsarnakova, MD**, an internal medicine physician, to its staff.

Dr. Tsarnakova is a graduate of Sofia Medical College, Sofia, Bulgaria. She completed her internship and residency at The Brooklyn Hospital Center, Brooklyn, NY.

As an internal medicine physician, Dr. Tsarnakova will provide primary medical care for adults, generally patients over the age of 16. She will manage patients' overall medical care by performing regular health maintenance examinations and health screening tests, as well as by treating common illnesses and chronic conditions.

Dr. Tsarnakova will provide services at Mount Nittany Physician Group's Park Avenue practice, which is located at 1850 East Park Avenue in State College. She is accepting new patients.

For more information, visit www.mountnittany.org/mount-nittany-physician-group.

Healthcare Professionals in the News

Lynn Vescio, RN, BSN, MS, Appointed Director of Performance Improvement

Lynn Vescio, RN, BSN, MS, recently joined Jefferson Regional Medical Center as director of performance improvement. She succeeds Mary Mylo, RN, BSN, MPM, who has been promoted to associate quality executive at Jefferson Regional.

In her new position, Vescio's focus will be on the facilitation of teams and projects with specific targeted goals and objectives for the enhancement of quality and patient safety at Jefferson Regional Medical Center.

She previously served 11 years as director of performance improvement for VHA Pennsylvania. Her past positions include consultant and senior associate for GSA Healthcare, Ltd., and nursing quality coordinator and staff nurse in the critical care and medical surgical units at Sewickley Valley Hospital.

She earned her Bachelor of Science in Nursing degree at Penn State University, her Master of Science degree in Professional Leadership at Carlow University and her nursing diploma at Heritage Valley Sewickley School of Nursing.

Her professional affiliations include Southwestern Pennsylvania Organization of Nurse Leaders, Pennsylvania State Nurses Association and Heritage Valley Sewickley Foundation, where she serves as a trustee.

For more information, visit www.jeffersonregional.com.



Lynn Vescio



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ACMH Physicians Honored with Gynecological Surgery Excellence Award

On October 6, a team of ACMH Hospital doctors was presented with the HealthGrades Gynecological Surgery Excellence Award for 2011. The award names ACMH #1 in Pennsylvania for gynecological surgery, among the top 5% in the country. This accolade is decided by a national survey of hospitals, where patient records are obtained from the 19 states which make such records public. Gynecological surgery ratings were based on the analysis of several different



Left to Right, Dr. Steven Paterno, Dr. Jeffrey David, Dr. Yanouchka Narcisse, Dr. Maureen Russell, Dr. Amy Turner and Dr. Ira S. Abramowitz

procedures. HealthGrades' report found that women who undergo gynecological surgery at 5-star rated healthcare facilities such as ACMH Hospital experience 35% fewer complications.

HONOR ROLL

ACMH is committed to providing women with the highest possible quality care.

ABC Women's Care, Women's Healthcare Associates and Professional Women's Healthcare all provide a comprehensive array of obstetric and gynecological services devoted to women's health and well-being. A strong focus on current diagnostic and treatment techniques is maintained, ensuring the highest standards of care are met. The network of women's health specialists at ACMH Hospital offers one-on-one communication with the patient, guaranteeing a thorough and personalized experience.

John Lewis, President and CEO of ACMH Hospital, explains the approach to women's healthcare that has generated so much success. "At ACMH, we take the time and effort necessary for personalized healthcare delivery," he said. "Our women's health services are becoming even more accessible, as we have been growing to accommodate more areas with new locations. Maintaining the health and wellness of the community is our utmost priority, as we continue to carry a progressive vision for women's healthcare in Armstrong County and our surrounding region."

Dr. Hal Altman, a long standing physician at ACMH and the current Chief Medical Officer, offers this perspective: "We at ACMH are both honored and humbled by this prestigious award. The honor proves that community hospitals can provide quality medical care on par with any institution, regardless of size or location. We are extremely proud of our staff and physicians, and we will use the positive energy connected with this award to fuel our pursuit of excellence for all patients."

For more information, visit www.acmh.org.

American Society for Radiation Oncology Honors Allegheny General Nurse

Linda Meyer, RN, BSN, OCN, a nurse manager with West Penn Allegheny Health System's (WPAHS) radiation oncology network, is the recipient of the American Society for Radiation Oncology's (ASTRO) 2011 Nurse Excellence Award.

Each year, ASTRO's Nurse Excellence Award recognizes a nurse and ASTRO member who goes above and beyond the normal standards of nursing practice, promoting excellence in direct patient care and positively portraying the nursing profession.

Meyer received the award, a \$1,000 grant, on Sunday, October 2, during ASTRO's 53rd Annual Meeting in Miami Beach, Fla.

Meyer works to continually improve care throughout the WPAHS radiation oncology program through the development of specified care plans and processes for treatment assessment and fol-

low-up and clinical trial accrual. She also takes a leading role in implementing electronic medical record processes throughout the radiation oncology network, streamlining operations to benefit the network's 3,000 patients.

In addition to her daily work, Meyer serves on the board of the Greater Pittsburgh chapter of the Oncology Nursing Society and serves as co-chair for the organization's "Camp Raising Spirits," an annual weekend getaway for cancer patients and their families.

She earned her bachelor's degree in nursing from Duquesne University and coordinates with Duquesne to provide clinical rotations for second-degree nursing students pursuing their BSN degrees. She lives on the North Side, where she was born and raised.

For more information, visit www.wpahs.org.



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Barbara Cliff

Windber Medical Center CEO Named Distinguished Alumna

Barbara Cliff, RN, PhD, FACHE, has been named as the first ever Outstanding Alumna for Western Michigan University's PhD program in Interdisciplinary Health Sciences in the College of Health and Human Services. She was honored October 8 at a ceremony on WMU's campus in Kalamazoo, MI. Dr. Cliff completed her PhD in 2007 and has been the

President/CEO of Windber Medical Center since 2009.

For more information, visit www.windbercare.org.

Two Distinguished Researchers to Receive Scholar Awards at Pitt Ceremonies

A researcher who hopes to find effective treatments for amyotrophic lateral sclerosis (ALS) and another who is looking for biomarkers to detect early colon cancer were honored last month with awards that support education programs to broaden awareness of these deadly diseases.

Robert J. Ferrante, Ph.D., professor of neurological surgery, University of Pittsburgh School of Medicine, has been chosen as the first recipient of the Leonard Gerson Distinguished Scholar Award.

Three months ago, Dr. Ferrante brought to Pitt from Boston University his bench-to bedside translational program and 20 years of experience to augment ongoing research and clinical efforts in degenerative diseases of the brain, particularly ALS, or Lou Gehrig's Disease. He has led efforts to develop animal models of these complex conditions and to bring promising drug candidates to human trials.

"I am humbled and pleased to be selected for the Leonard Gerson Award, and applaud these efforts to raise awareness about ALS and the need for aggressive research," Dr. Ferrante said. "This disease is like a runaway train, and so far nothing we have thrown at it has been able to slow down its progression."

The award was established by Sandy Gerson Snyder, of Squirrel Hill, in memory of her father, Leonard, who died from ALS complications three months after he was diagnosed.



Sanford Markowitz

On Friday, Oct. 7, the Sadie Gerson Distinguished Scholar Award was presented in a private ceremony sponsored by the University of Pittsburgh Cancer Institute to **Sanford Markowitz, M.D., Ph.D.**, of Case Western Reserve University, Cleveland. Dr. Markowitz grew up in Pittsburgh and attended Peabody High School.

His research focus is identifying biomarkers that can provide early indications of colon cancer, and he has discovered gene mutations that contribute to the disease.

The Sadie Gerson Award honors expertise in colon cancer research and was established by Mrs. Snyder in memory of her mother, who died of the disease.

For more information, visit www.medschool.pitt.edu.



Robert Ferrante

HONOR ROLL

American Cancer Society Honors CEO Judy Lentz with 2011 Pathfinder in Palliative Care Award

The Hospice and Palliative Nurses Association (HPNA) announced that its Chief Executive Officer, **Judy Lentz RN MSN NHA**, has been awarded the 2011 American Cancer Society Pathfinder in Palliative Care Award. This honor recognizes the outstanding achievements of a professional who has demonstrated remarkable innovation and ingenuity across a range of opportunities for action that contribute to the advancement of the field of palliative care. The award was presented October 11th during the 2011 Kathleen Foley Palliative Care Research Retreat at Le Château Montebello in Quebec, Canada.

According to the American Cancer Society, Lentz was selected for this award specifically for her many leadership efforts and collaborative achievements to advance palliative care at a national level, including her groundbreaking work in creating new funding sources for research, initiating numerous educational summits and conferences to address current critical issues in patient care, and leading coalition efforts to help establish standards of quality practice and care. In addition, she has also been a tireless mentor to many nurses over the course of her career, having spent countless hours supporting emerging leaders in the field and lending her expertise to develop palliative care nursing curricula and certification program strategies.

Lentz is currently the CEO of the Alliance for Excellence in Hospice and Palliative Nursing (The Alliance), which includes the Hospice and Palliative Nurses Association (HPNA), National Board for Certification of Hospice and Palliative Nurses (NBCHPN®), and the Hospice and Palliative Nurses Foundation (HPNF). Lentz has served these organizations since her hire in June 2000.

For more information, visit www.hpna.org.



Judy Lentz

Tradition of Caring Award Announced

Debbie DeMarco, Nutritional Services Department at Canonsburg General Hospital was awarded with the 2011 Tradition of Caring Award in October. This award recognizes an employee that exemplifies the tradition of caring expected by hospital patients, physicians, fellow staff members and the community.

The Tradition of Caring Award is given to a person that demonstrates outstanding job knowledge, performance, and communications skills, which Ms. DeMarco exhibits on a daily basis.

The award process begins with fellow employees and supervisors nominating a coworker for the award; everyone that is nominated deserves recognition. There are 21 nominees for the eighth annual award of Canonsburg General Hospital including, Sharon Brown, Cyndi Campbell, Debbie DeMarco, George Eicher, Kelly Garove, Doreen Getty, Toy Gregorakis, Jodie Ilgenfritz, Jamie Markle, Robert Nash, Joanne Phillips, Melvin Ralston, Shirlene Romanosky, Mary Ross, Dinah Rutkowski, Donald Schuler, Annette Schulte, Heather Silbaugh, Andre Smith, Anne Veres and Jackie Wilkinson.

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HealthSouth Harmarville Rehabilitation Hospital Receives National Presidents' Circle Award

HealthSouth Harmarville Rehabilitation Hospital received the National Presidents' Circle Award during HealthSouth's Annual Meeting and Awards Banquet last month in Washington, D.C.

The hospital is one of only 13 hospitals in HealthSouth's nationwide network of 97 rehabilitation hospitals to receive the prestigious award. This distinction recognizes the hospital's outstanding performance in development of clinical programs, quality of patient care services, employee retention and overall operational excellence.

"Being honored with the Presidents' Circle Award is recognition for our commitment to high-quality, cost-effective healthcare," said Ken Anthony, CEO at HealthSouth Harmarville Rehabilitation Hospital. "Our success depends on the quality of care provided to each and every patient and I applaud our staff's efforts to provide an exceptional patient experience. I take great pride accepting this award on behalf of our physicians, nursing staff, therapists and all other hospital staff."

For more information, visit www.healthsouthharmarville.com.



Ken Anthony

Children's Hospital of Pittsburgh of UPMC Hematology/Oncology Fellow Receives Grant from the St. Baldrick's Foundation



Jennifer Elster

Jennifer Elster, M.D., a hematology/oncology fellow at Children's Hospital of Pittsburgh of UPMC, has been awarded a research grant of \$147,961 from the St. Baldrick's Foundation, a nonprofit organization dedicated to raising money for childhood cancer research.

Elster is one of 13 new St. Baldrick's Fellows nationwide this year. Her research focuses on anti-angiogenic drug research. Overseeing her fellowship is mentor Edward Prochownik, M.D., director of oncology research at Children's Hospital.

A growing tumor requires a blood supply, and in some tumors, such as neuroblastoma, the number of blood vessels in a tumor correlates with metastases and mortality. The formation of new blood vessels is called angiogenesis and the cells needed to form these new vessels have previously been thought to arise only from normal cells in the body. Anti-angiogenic drugs designed to stop these blood vessels from forming have proved disappointing, so far. The lab in which Dr. Elster is working has determined that, in addition to recruiting blood vessel cells, tumor cells can sometimes turn into blood vessel cells. Because tumor cells are known to mutate very rapidly, this may explain why anti-angiogenic therapies often are ineffective or stop working. Dr. Elster is studying this newly discovered phenomenon in greater detail as it may provide a way to identify more potent anti-angiogenic agents.

"The St. Baldrick's Foundation grant provides the funds necessary for me to spend the next two years further studying this so-called 'tumor cell to endothelial cell transition' and to develop a drug screening program that will allow us to screen large libraries of compounds for one that will inhibit this transformation," Dr. Elster said. "We are working on a new way to stop a tumor's blood flow, essentially destroying its ability to feed itself and to grow. If we are successful, it will have implications for the treatment of many tumor types including neuroblastoma, which currently is very challenging to treat."

Elster is originally from Southern California and attended medical school at the University of Pittsburgh School of Medicine. She is in the third year of her hematology/oncology fellowship at Children's Hospital.

For more information, visit www.chp.edu.

HONOR ROLL

AVH Trust Awards First Seybold Nursing Scholarship

The Allegheny Valley Hospital Trust (AVH Trust) announced that the first annual nursing scholarship from the Raymond C. and Ann M. Seybold Scholarship Fund has been awarded to Rachel Robison, a second-year student at the Citizens School of Nursing in New Kensington, PA.

Robison, a resident of Lyndora, PA, will receive a \$2,000 scholarship to be applied toward her nursing education.

The Raymond C. and Ann M. Seybold Scholarship Fund was established in 2009 through a bequest from Ann Miller Seybold. Seybold, a 1932 graduate of the Citizens School of Nursing, left a \$345,000 endowment with instructions that it be used to provide scholarships to needy and worthy nursing students at the school.



Lynne Rugh, Director, Citizens School of Nursing and William B. McCready, Executive Director, AVH Trust present Rachel Robison (center) with the 2011 Seybold Nursing Scholarship.

Student applications were first reviewed by the Citizens School of Nursing Scholarship Committee to determine if the applicant met the minimum criteria for the scholarship award. Final selection was made by the AVH Trust's Health Services Committee.

For more information, visit www.wpahs.org.

LECOM at Seton Hill awards white coats

One hundred first-year medical students from the Lake Erie College of Osteopathic Medicine at Seton Hill received their white coats during a ceremony on Saturday, October 1, at the Palace Theater. In reciting the Osteopathic Pledge of Commitment, members of the Class of 2014 promised to uphold the high standards of the osteopathic medical profession and administer compassionate, quality care to their patients.

Frank Tursi, D.O., 100th President of the Pennsylvania Osteopathic Medical Association (POMA), also spoke at the white coat ceremony. Dr. Tursi is a LECOM clinical faculty member and Director of Medical Education at Millcreek Community Hospital in Erie.

POMA donated the white coats and stethoscopes distributed at the event. Dr. Tursi said POMA will be a valuable resource to them throughout their osteopathic medical careers.

Others in attendance included LECOM President John M. Ferretti, D.O., LECOM Provost Silvia M. Ferretti, and Irv Freeman, Ph.D., J.D., Vice President for LECOM at Seton Hill.

For more information, visit www.lecom.edu.

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J.C. Blair 100th Anniversary Gala Honors Individuals

J.C. Blair Memorial Hospital honored individuals within the J.C. Blair Health System family who have contributed significantly over the past century to the Hospital and its place in the Huntingdon County community during the Recognition Award Ceremony at the 100th Anniversary Evening of Promise Gala on Saturday evening, September 17, at Lake Raystown Resort. Award categories included Volunteer Award of Honor, the Health Care Professional Award, and the Kate Fisher Blair Philanthropy Award.

The Volunteer Award of Honor was presented to Pamela Kenyon Thompson. Thompson is a lifelong citizen of Huntingdon who started volunteering at J.C. Blair Memorial Hospital as a teenager in what was then known as the Junior Auxiliary. As an adult, she became a long term member of the Auxiliary to J.C. Blair and held many positions including President. She became active in the Pennsylvania Association of Hospital Auxiliaries (PAHA) where she again held many offices at the regional and state level. As Auxiliary President, Thompson served on the Hospital Board of Directors and was then elected to a position on the Board after her Auxiliary term expired. She was the first woman elected to serve as Chairman of the Board of the Hospital.



J.C. Blair Memorial Hospital's 100th Anniversary Evening of Promise Gala featured a Recognition Program honoring individuals for their contributions to the Hospital. The evening's program included front row (l-r) J.C. Blair Chief of Staff Maria Pettinger, M.D., J.C. Blair President and CEO Joseph J. Peluso, J.C. Blair Auxiliary President Shirley Powell; second row (l-r) Gala Co-Chair Suzie Black, Volunteer of Honor 2011 Pamela Kenyon Thompson, Gala Co-Chair Cindy Clarke; back row (l-r) Gala Co-Chair Keith Black, J.C. Blair Memorial Hospital Foundation Executive Director Marsha Hartman, accepting the Kate Fisher Blair Philanthropy Award on behalf of Kate Fisher Blair, J.C. Blair Board of Directors Chairman John Coursen, Health Care Professional 2011 and J.C. Blair Chief Nursing Officer Pamela Davis Matthias, and Gala Co-Chair Geoff Clarke.

dates for this award will have made an exceptional charitable contribution to further the Hospital's mission of "being the premier health resource for the residents of Huntingdon County and nearby communities." Marsha Hartman, Executive Director of the J.C. Blair Memorial Hospital Foundation, received the award on behalf of Kate Fisher Blair.

For more information, visit www.jcblair.org.

The Health Care Professional Award was presented to Pamela Davis Matthias. Matthias started working as a nurse at J.C. Blair in 1975 and now serves as Vice President of Patient Care/Chief Nursing Officer for J.C. Blair Health System, Inc. As such, she manages all clinical departments of the Hospital and chairs numerous committees. In addition she serves on the boards of the J.C. Blair Memorial Hospital Foundation, Huntingdon House and Home Nursing Agency. Throughout her career at the Hospital, she has dedicated her time and talent to providing high quality health care to the Huntingdon County community.

The Kate Fisher Blair Philanthropy Award was presented posthumously to Kate Fisher Blair.

Kate Fisher Blair's \$100,000.00 philanthropic gift to Huntingdon County established J.C. Blair Memorial Hospital in this community. In future years, this award will be reserved for a person whose philanthropic giving has helped sustain J.C. Blair Memorial Hospital and/or who has invested significantly in its future. Future candi-

HONOR ROLL

Ohio Valley General Hospital Schools Earn 100% Passing Rate on State Exams

Pittsburgh's Ohio Valley General Hospital School of Nursing has enjoyed a rich history of over 100 years of success. Most recently, the School of Nursing announced the graduating class of 2011 achieved a 100% pass rate on the State Board of Nursing Licensure exam.

Administration and Staff members held a celebration luncheon with the graduates and faculty on Tuesday, October 4, 2011. "We are very proud of all the graduates for passing the NCLEX [National Certification Licensure Examination] exam. We know that the graduates have all worked very hard and they should be proud of their accomplishments," says Robin Weaver, Director of The School of Nursing. "The success of this class is a testimonial to the strength of our program" says Joy Peters, Vice President Patient Care Services & Chief Nursing Officer. The graduates presented the faculty with certificates to acknowledge the support and assistance which faculty provided to the graduates throughout their nursing school experience.

In addition, to the success of the School of Nursing, the Ohio Valley School of Radiography of also achieved 100% pass rate of their graduates for the class of 2011.

The School of Nursing and The School of Radiography are part of a small, yet diversified, community hospital system which is able to offer a personal touch to its students. The programs accept 50 freshmen nursing students and 12 freshmen radiography students each year, allowing for the faculty of both programs to provide individualized assistance to all students.

Pittsburgh's Ohio Valley General Hospital School of Nursing's 20-month Diploma RN program offers twenty seven college credits in addition to the core nursing classes required for program completion. Also, the school offers up to 20 full scholarships annually to facilitate student success.

For more information, visit www.ohiovalleyhospital.org.



Christine Giovanetti, Kelly Gallagher, Diana Schu-
bert, Marianne Wade
Standing in First Row: Casey (Koniski) Vietmeier,
Kalyn (Yakubik) Kohler, Marcy Ford, Sondra Cob-
bler, Kelly Klug, Sydney Mulvihill
Last Row: Lisa Oliver, Laura (Smith) Kramer

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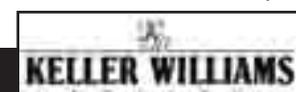
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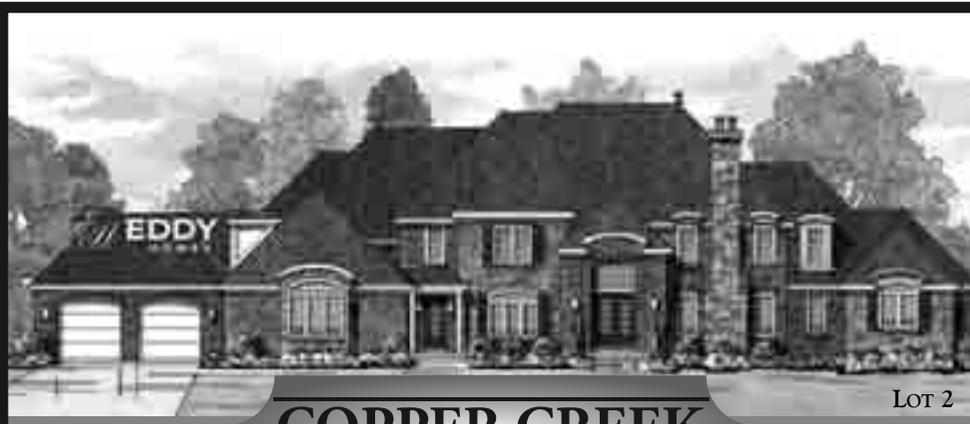
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800-447-2030 fax 412 436-2215
www.interimhealthcare.com



PRESBYTERIAN SENIORCARE

As this region's premiere provider of living and care options for older adults, Presbyterian SeniorCare offers a wide variety of employment opportunities - all with competitive wages and comprehensive benefits - at multiple locations throughout Southwestern Pennsylvania. As part of its philosophy of Human Resources, PSC strives to develop a rewarding work environment that is rich in interdepartmental cooperation and that recognizes the value of each individual employee.

Human Resources Department
1215 Hulton Road, Oakmont, PA 15139
412-828-5600
825 South Mail Street, Washington, PA 15301
724-222-4300

ST. BARNABAS HEALTH SYSTEM

RNs, LPNs, Home Care Companions, Personal Care, Attendants, Hospice Aides, Dietary Aides. St. Barnabas Health System frequently has job openings at its three retirement communities, three living assistance facilities, two nursing homes, and an outpatient medical center that includes general medicine, rehab therapy, a dental practice, home care and hospice. Campuses are located in Gibsonia, Allegheny County, and Valencia, Butler County. Enjoy great pay and benefits in the fantastic suburban setting. Both campuses are a convenient drive from the Pennsylvania Turnpike, Routes 8, 19 and 228, and Interstates 79 and 279. Contact Margaret Horton, Executive Director of Human Resources, St. Barnabas Health System, 5830 Meridian Road, Gibsonia, PA 15044. 724-444-JOBS; mhorton@stbarnabashealthsystem.com, www.stbarnabashealthsystem.com.

EXTENDED CARE & ASSISTED LIVING

ASBURY HEIGHTS

For over a century, Asbury Heights, operated by United Methodist Services for the Aging, has been providing high-quality compassionate care to older adults in Southwestern Pennsylvania. Asbury Heights is a faith-based, non-profit charitable organization located in Mt. Lebanon. Through various accommodations, services and amenities, the needs of independent living residents can be met. For residents requiring more care, the continuing care community also offers assisted living, nursing and rehabilitative care and Alzheimer's specialty care. The Health and Wellness Center is headed by a board certified, fellowship trained geriatrician. Residents may be treated by on-site specialists or retain their own physicians. Rehabilitative therapies are also available on-site. A variety of payment options are available to fit individual financial situations. The application process is very quick and easy and does not obligate the applicant in any way.

For more information, please contact Joan Mitchell for independent living; Michele Bruschi for Nursing Admissions; or Lisa Powell for Assisted Living at 412-341-1030. Visit our website at www.asburyheights.org.

BAPTIST HOMES SOCIETY

Baptist Homes Society, a not-for-profit organization operating two continuing care retirement communities in Pittsburgh's South Hills region, has served older adults of all faiths for more than 100 years. Baptist Homes, nestled on a quiet hillside in Mt. Lebanon, serves nearly 300 seniors. Providence Point, a beautiful 32-acre site in Scott Township, has the capacity to serve more than 500 older adults. Each campus has a unique identity and environment yet both provide a full continuum of care, including independent living, personal care, memory support, rehabilitation therapies, skilled nursing, and hospice care. Baptist Homes Society is Medicare and Medicaid certified. Within our two communities, you'll find the lifestyle and level of care to meet your senior living needs. To arrange a personal tour at either campus, contact: Sue Lauer, Community Liaison, 412-572-8308 or email slauer@baptisthomes.org.

Or visit us at Baptist Homes
489 Castle Shannon Blvd., Mt. Lebanon.
(www.baptisthomes.org).
Providence Point:
500 Providence Point Blvd., Scott Twp
(www.providencepoint.org)

KANE REGIONAL CENTERS

Allegheny County's four Kane Regional Centers provide residential skilled nursing care and rehabilitation for short-term and long-term needs. The centers -- located in Glen Hazel, McKeesport, Ross Township and Scott Township -- offer 24-hour skilled nursing care, hospice and respite care, Alzheimer's memory care, recreational therapy and social services. Visit www.kanecare.com or call 412.422.6800.

OAKLEAF PERSONAL CARE HOME

"It's great to be home!"
Nestled in a country setting in a residential area of Baldwin Borough, Oakleaf Personal Care Home provides quality, compassionate care to adults who need assistance with activities of daily living. As we strive to enhance the quality of life of our residents, our staff constantly assesses their strengths and needs as we help them strike that fine balance between dependence and independence. Oakleaf offers private and shared rooms, all located on one floor. Our home includes a spacious, sky-lighted dining room, library, television lounges, sitting areas and an activity room. Our fenced-in courtyard, which features a gazebo, provides our residents with a quiet place to enjoy the outdoors, socialize with family and friends, and participate in planned activities. Upon admission, the warmth of our surroundings and the caring attitude of our staff combine to make Oakleaf a place residents quickly call "home". Please call for additional information, stop by for a tour or visit us on our website. www.oakleafpersonalcarehome.com.
3800 Oakleaf Road, Pittsburgh, PA 15227
Phone 412-881-8194, Fax 412-884-8298
Equal Housing Opportunity

PRESBYTERIAN SENIORCARE

A regional network of living and care options for older adults throughout southwestern Pennsylvania. Services and facilities include skilled and intermediate nursing care, rehabilitation, personal care, specialty Alzheimer's care, adult day care, home health care, senior condominiums, low-income and supportive rental housing. For more information:

Presbyterian SeniorCare - Oakmont
1215 Hulton Road, Oakmont, PA 15139
412-828-5600
Presbyterian SeniorCare - Washington
825 South Main Street, Washington, PA 15301
724-222-4300

ST. BARNABAS HEALTH SYSTEM

Regardless of what lifestyle option a senior needs, St. Barnabas Health System has a variety of choices to fulfill that need. Independent living options include The Village at St. Barnabas apartments, The Woodlands at St. Barnabas and White Tail Ridge carriage homes, and The Washington Place at St. Barnabas efficiency apartments. Living assistance is available at The Arbors at St. Barnabas in Gibsonia and Valencia. Twenty-four hour skilled care is provided at St. Barnabas Nursing Home and Valencia Woods at St. Barnabas. St. Barnabas Medical Center is an outpatient facility that includes physicians, chiropractors, general medicine, rehab therapy, a dental practice, home care, memory care and hospice. The system's charitable arm, St. Barnabas Charities, conducts extensive fundraising activities, including operating the Kean Theatre and Rudolph Auto Repair. St. Barnabas' campuses are located in Gibsonia, Allegheny County, and Valencia, Butler County. For more information, call 724-443-0700 or visit www.stbarnabashealthsystem.com.

WESTMORELAND MANOR

Westmoreland Manor with its 150 year tradition of compassionate care, provides skilled nursing and rehabilitation services under the jurisdiction of the Westmoreland County Board of Commissioners. A dynamic program of short term rehabilitation services strives to return the person to their home while an emphasis on restorative nursing assures that each person attains their highest level of functioning while receiving long term nursing care. Westmoreland Manor is Medicare and Medicaid certified and participates in most other private insurance plans and HMO's. We also accept private pay. Eagle Tree Apartments are also offered on the Westmoreland Manor campus. These efficiency apartments offer independent living in a protective environment.

Carla M. Kish, Director of Admissions
2480 S. Grande Blvd., Greensburg, PA 15601
724-830-4022

HOME HEALTH/HOME CARE/HOSPICE

ANOVA HOME HEALTH AND HOSPICE

Anova Healthcare Services is a Medicare-certified agency that has specialized care in home health, hospice & palliative care, and private duty. Anova concentrates their care within seven counties in South Western PA. Through Anova's team approach, they have developed a patient-first focus that truly separates their service from other agencies in the area. Home Health care is short term acute care given by nurses and therapists in the home. Private duty offers care such as companionship, medication management and transportation services. Hospice is available for people facing life limiting conditions. With these three types of care, Anova is able to offer a continuum of care that allows a patient to find help with every condition or treatment that they may need. Anova's goal is to provide care to enable loved ones to remain independent wherever they call home. Anova Knows healthcare ... Get to know Anova!

1229 Silver Lane, Suite 201
Pittsburgh, PA 15136
1580 Broad Avenue Ext., Suite 2
Belle Vernon, PA 15012
1-877-266-8232

BAYADA NURSES

Bayada Nurses has been meeting the highest standards of clinical excellence in home health care for more than 30 years. Every client in our care is supervised by an experienced RN and both clients and staff have access to 24-hour on-call support, seven days a week. With homemaking, personal care, and skilled nursing care that extends to the high-tech level, our Pittsburgh location provides quality in-home care to pediatric, adult and geriatric clients. The office is certified by Medicare and Medicaid and accepts a wide variety of insurance programs and private pay. All staff are screened rigorously and fully insured.

www.bayada.com
Adult Office
Phone 877-412-8950
300 Oxford Drive, Suite 415,
Monroeville, PA 15146
Pediatric Office
877-374-5331
300 Oxford Drive, Suite 410,
Monroeville, PA 15146

CELTIC HEALTHCARE

Delivering innovative healthcare at home. Home healthcare, hospice, virtual care, care transitions and disease management. Learn more at www.celtichealthcare.com

EKIDZCARE

eKidzCare is a Pediatric focused (ages birth through 21 years) Home Health Agency that is licensed and Medicare/Medicaid certified to provide care throughout Western PA. Allegheny, Armstrong, Beaver, Butler, Crawford, Erie, Fayette, Lawrence, Mercer, Venango, Warren, Washington, and Westmoreland Counties are serviced currently. Range of services from home health aide level of care to high-tech skilled nursing (trach/vent care) visits and/or shift nursing. We accept Medicaid and all major insurances, including Highmark, Health America, and UPMC. We employ RN's with extensive experience in Pediatric care who evaluate and supervise our Kids and families special care. We provide the highest quality of care to even the littlest of patients.

1108 Ohio River Blvd., Ste. 803,
Sewickley, PA 15143
412-324-1121/412-324-0091 fax
<http://www.ekidzcare.com>

GATEWAY HOSPICE

Gateway's hospice services remains unique as a locally owned and operated service emphasizing dignity and quality clinical care to meet the needs of those with life limiting illness. Quality nursing and home health aide visits exceed most other agencies. Our commitment to increased communication and responsiveness to those we serve is our priority. Medicare certified and benevolent care available. Gateway serves patients in Allegheny and ALL surrounding counties. Care is provided by partnering with facilities and hospitals in addition to wherever the patient "calls home". For more information call 1-877-878-2244.

HEARTLAND

At Heartland, we provide Home Care, Hospice or IV Care. We have a special understanding of the health care challenges of our patients, as well as their families and loved ones may be experiencing. Through our passion for excellence, we are committed to enhancing their quality of life through our compassionate and supportive care. Most of the care Heartland provides is covered under Medicare, Medicaid or many health care plans including HMOs, PPOs and private insurance. Our team can provide more information about Heartland's services and philosophy of care at anytime. Please feel free to contact us at 800-497-0575.

INTERIM HEALTHCARE HOME CARE AND HOSPICE

Interim HealthCare is a national comprehensive provider of health care personnel and services. Interim HealthCare has provided home nursing care to patients since 1966 and has grown to over 300 locations throughout America. Interim HealthCare of Pittsburgh began operations in 1972 to meet the home health needs of patients and families throughout southwestern Pennsylvania and northern West Virginia and now has offices in Pittsburgh, Johnstown, Somerset, Altoona, Erie, Meadville, Uniontown and Morgantown and Bridgeport WV. IHC of Pittsburgh has been a certified Medicare and Medicaid home health agency since 1982 and a certified Hospice since 2009. We provide a broad range of home health services to meet the individual patient's needs - from simple companionship to specialty IV care and ventilator dependent care to hospice care - from a single home visit to 24 hour a day care. IHC has extensive experience in working with facility discharge planners and health insurance case managers to effect the safe and successful discharge and maintenance of patients in their home.

For more information or patient referral, call
800-447-2030 Fax 412 436-2215
1789 S. Braddock, Pittsburgh, PA 15218
www.interimhealthcare.com

LIKEN HOME CARE, INC.

Established in 1974, is the city's oldest and most reputable provider of medical and non-medical care in private homes, hospitals, nursing homes, and assisted living facilities. Services include assistance with personal care and activities of daily living, medication management, escorts to appointments, ambulation and exercise, meal preparation, and light housekeeping. Hourly or live-in services are available at the Companion, Nurse Aide, LPN and RN levels. Potential employees must meet stringent requirements; screening and testing process, credentials, references and backgrounds are checked to ensure qualifications, licensing, certification and experience. Criminal and child abuse background checks are done before hire. Liken employees are fully insured for general and professional liabilities and workers' compensation. Serving Allegheny and surrounding counties. Free Assessment of needs available. For more information write to Private Duty Services, 400 Penn Center Blvd., Suite 100, Pittsburgh, PA 15235, visit our website www.likenservices.com, e-mail info@likenservices.com or call 412-816-0113 - 7 days a week, 24 hours per day.

LOVING CARE AGENCY OF PITTSBURGH

Loving Care Agency is a national provider of extended hour home health services with 31 offices in 7 states. The Pittsburgh office cares for medically fragile children and adults with a variety of diagnoses. Specializing in the most complex care, including mechanical ventilation, the staff of Loving Care Agency of Pittsburgh includes experienced RNs, LPNs and home health aides. Services are available 24 hours per day, 7 days per week in Allegheny, Armstrong, Beaver, Butler, Washington and Westmoreland Counties. Backgrounds and experience of all staff are verified. Loving Care Agency is licensed by the PA Department of Health.

Contact information:
Loving Care Agency of Pittsburgh
875 Greentree Road, Building 3 Suite 325,
Pittsburgh, PA 15220
Phone: 412-922-3435, 800-999-5178/
Fax: 412-920-2740
www.lovingcareagency.com

PSA HEALTHCARE

At PSA Healthcare, we believe children are the best cared for in a nurturing environment, where they can be surrounded by loving family members. We are passionate about working with families and caregivers to facilitate keeping medically fragile children in their homes to receive care. PSA Healthcare is managed by the most experienced clinicians, nurses who put caring before all else. Our nurses are dedicated to treating each patient with the same care they would want their own loved ones to receive. PSA is a CHAP accredited, Medicare certified home health care agency providing pediatric private duty (RN/LPN) and skilled nursing visits in Pittsburgh and 10 surrounding counties. The Pittsburgh location has been providing trusted care since 1996, for more information call 412-322-4140 or email scoleman@psakids.com.

VITAS INNOVATIVE HOSPICE CARE® OF GREATER PITTSBURGH

VITAS Innovative Hospice Care is the nation's largest and one of the nation's oldest hospice providers. When medical treatments cannot cure a disease, VITAS' interdisciplinary team of hospice professionals can do a great deal to control pain, reduce anxiety and provide medical, spiritual and emotional comfort to patients and their families. We provide care for adult and pediatric patients with a wide range of life-limiting illnesses, including but not limited to cancer, heart disease, stroke, lung, liver and kidney disease, multiple sclerosis, ALS, Alzheimer's and AIDS. When someone becomes seriously ill, it can be difficult to know what type of care is best ... or where to turn for help. VITAS can help. Call 412-799-2101 or 800-620-8482 seven days a week, 24 hours a day.

HOSPITALS

Kindred Hospitals
of Pittsburgh

Our services include but are not limited to:
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Wound Management • Nutritional Services
Surgical Services • Ventilator Weaning
Daily Physician Visits • Pulmonary Rehab
Physical, Occupational and Speech Therapies
Subacute Rehabilitation Unit (at North Shore location)

Kindred Hospital Pittsburgh
7777 Steubenville Pike Oakdale, PA 15071

Kindred Hospital Pittsburgh - North Shore
1004 Arch Street Pittsburgh, PA 15212

Kindred Hospital at Heritage Valley
1000 Dutch Ridge Road Beaver, PA 15009

For referrals and admissions, call:
412-494-5500 ext. 4356
www.kindredhealthcare.com

**Resource Directory**

Contact Harvey Kart to find out how your organization or business can be featured in the Hospital News Resource Directory. Call 412.475.9063, email hdkart@aol.com or visit wphospitalnews.com.

IT SERVICES**ASCENT DATA**

Ascent Data is Western Pennsylvania's trusted provider for data center services, including managed hosting, colocation, server virtualization, private cloud hosting, data security and business continuity solutions. Customer infrastructure and applications are protected in a secure, resilient, state-of-the-art SAS 70 Type II compliant data center in O'Hara Township, near Pittsburgh, PA. By outsourcing applications and infrastructure to Ascent Data, companies can dramatically improve operational efficiencies and reduce business risk, as well as free up human and financial resources to focus on core business objectives. Ascent Data is a proud sponsor of the Pennsylvania Chapters of the Medical Group Management Association (MGMA) and American College of Healthcare Executives (ACHE). For more information, email inquiries@ascentdata.com, call 866.866.6100 or visit www.ascentdata.com.

MEDICAL BILLING & EMR SERVICES**ALL-PRO BUSINESS SOLUTIONS, LLC**

We have a certified EMR Incentive solution. With one system we can handle all of your practice's clinical and administrative needs. Our EMR package provides both a clinical interface for practitioners to maintain detailed patient encounter records and an administrative interface for your office to maintain your schedules, check eligibility, file claims, post reimbursements, reconcile all payments to your contracts, and most importantly, add to your EMR Incentive payment requirements. Clinical highlights include Electronic Prescription, Drug Interactions, Lab Reports, and Online Patient Health Records. Administrative benefits are Eligibility Checks, Documentation Management, Coding Templates, and ERA/EDI Modules. ONE SYSTEM, ONE SOLUTION. With 2 locations established for your convenience. Pittsburgh, PA covering Pennsylvania, West Virginia, and Maryland. Cincinnati, OH covering Ohio, Kentucky and Indiana. Contact us for a Free consultation at 888-890-6021 or 412-651-6021 or visit our Website @ www-EMRComplianceinfo.com, @www.AllProBusinessSolution.com
Diane L. Sinck
All-Pro Business Solutions, LLC

MEDICAL TRANSCRIPTION**CMS MEDICAL WORDS**

Do you need help with medical transcription? CMS Medical Words may be the answer. Founded over 20 years ago by Carolyn Svec of Elizabeth Township, her company works with multi-physician facilities as well as solo practicing physicians. CMS Medical Words also provides transcription services on a temporary basis caused by staff turnover, vacations and leaves of absence. With new digital equipment, reports and/or letters can be sent electronically to your site, saving you valuable time. For more information phone 412-751-8382.

PEDIATRIC SPECIALTY HOSPITAL**THE CHILDREN'S HOME OF PITTSBURGH & LEMIEUX FAMILY CENTER**

28-bed, licensed pediatric specialty hospital serving infants and children up to age 21. Helps infants, children and their families transition from a referring hospital to the next step in their care; does not lengthen hospital stay. Teaches parents to provide complicated treatment regimens. Hospice care also provided. A state-of-the-art facility with the comforts of home. Family living area for overnight stays: private bedrooms, kitchen and living/dining rooms, and Austin's Playroom for siblings. Staff includes pediatricians, neonatologists, a variety of physician consultants/specialists, and R.N./C.R.N.P. staff with NICU and PICU experience. To refer call: Monday to Friday daytime: 412-617-2928. After hours/weekends: 412-596-2568. For more information, contact: Kim Reblock, RN, BSN, Director, Pediatric Specialty Hospital, The Children's Home of Pittsburgh & Lemieux Family Center, 5324 Penn Avenue, Pittsburgh, PA 15224. 412-441-4884 x3042.

PUBLIC HEALTH SERVICES**ALLEGHENY COUNTY HEALTH DEPARTMENT**

The Allegheny County Health Department serves the 1.3 million residents of Allegheny County and is dedicated to promoting individual and community wellness; preventing injury, illness, disability and premature death; and protecting the public from the harmful effects of biological, chemical and physical hazards within the environment. Services are available through the following programs: Air Quality, Childhood Lead Poisoning Prevention; Chronic Disease Prevention; Environmental Toxins/Pollution Prevention; Food Safety; Housing/Community Environment; Infectious Disease Control; Injury Prevention; Maternal and Child Health; Women, Infants and Children (WIC) Nutrition; Plumbing; Public Drinking Water; Recycling; Sexually Transmitted Diseases/AIDS/HIV; Three Rivers Wet Weather Demonstration Project; Tobacco Free Allegheny; Traffic Safety; Tuberculosis; and Waste Management. Bruce W. Dixon, MD, Director.

333 Forbes Avenue, Pittsburgh, PA 15213
Phone 412-687-ACHD • Fax: 412-578-8325
www.achd.net

REHABILITATION**THE CHILDREN'S INSTITUTE**

The Hospital at the Children's Institute, located in Squirrel Hill, provides inpatient and outpatient rehabilitation services for children and young adults. Outpatient services are also provided through satellite facilities in Bridgeville, Irwin and Wexford. In addition, The Day School at The Children's Institute offers educational services to children, ages 2-21, who are challenged by autism, cerebral palsy or neurological impairment. Project STAR at The Children's Institute, a social services component, coordinates adoptions, foster care and intensive family support for children with special needs.

For more information, please call 412-420-2400
The Children's Institute
1405 Shady Avenue, Pittsburgh, PA 15217-1350
www.amazingkids.org

AVH Opens Low Vision Rehabilitation Center

Allegheny Valley Hospital (AVH) recently announced the opening of its Low Vision Rehabilitation Center—the first of its kind in the area. Made possible through a donation from the AVH Auxiliary, the Low Vision Rehabilitation Center helps patients whose vision loss has affected their ability to safely and independently carry out daily activities. The center is a new service being offered through the hospital's robust physical and occupational rehabilitation therapy program.

Low vision is a major contributor to the loss of independence for many individuals over the age of 70. Patients with common diagnoses such as macular degeneration, diabetic retinopathy, glaucoma, head injury and stroke, multiple sclerosis and cataracts will benefit from this type of service.

Around the Region

The goal of low vision rehabilitation therapy is to maximize the use of the clients' remaining vision by teaching patients to use visual aid devices that are available, as well as teach them techniques to improve their visual skills. For example, some patients can be trained to use healthy parts of their eye to improve their reading ability. Optical devices recommended by referring eye care professionals are available for training before purchase for personal use.

The Low Vision Center is located in AVH's outpatient physical therapy center in Natrona Heights. For more information, call 724-224-2166.

Health Care Event & Meeting Guide

Write Now

Sewall Center, Robert Morris University
Nov. 5
Register at www.rtconnections.com

Pittsburgh Chapter of American Association of Legal Nurse Consultants Fall Conference

La Roche College, Zappala College Center
November 5
For details, visit www.aalnepittsburgh.org

National Business Coalition on Health 16th Annual Conference

Pointe Hilton Tapatio Cliffs Resort, Phoenix, AZ
Nov. 7-9
www.nbch.org/2011-Registration

Understanding the Different Forms of Dementia

Webinar Sponsored by Senior Helpers
Nov. 21, 2:00 p.m.
Call 724-834-5720 to register

5th Annual National Conference on Health Disparities

Charleston Marriott, Charleston, SC
Nov. 30-Dec. 3
Call 1-888-573-8028 or visit www.buildinghealthycommunities2011.com

8th Annual Reindeer Ball: A Storybook Christmas

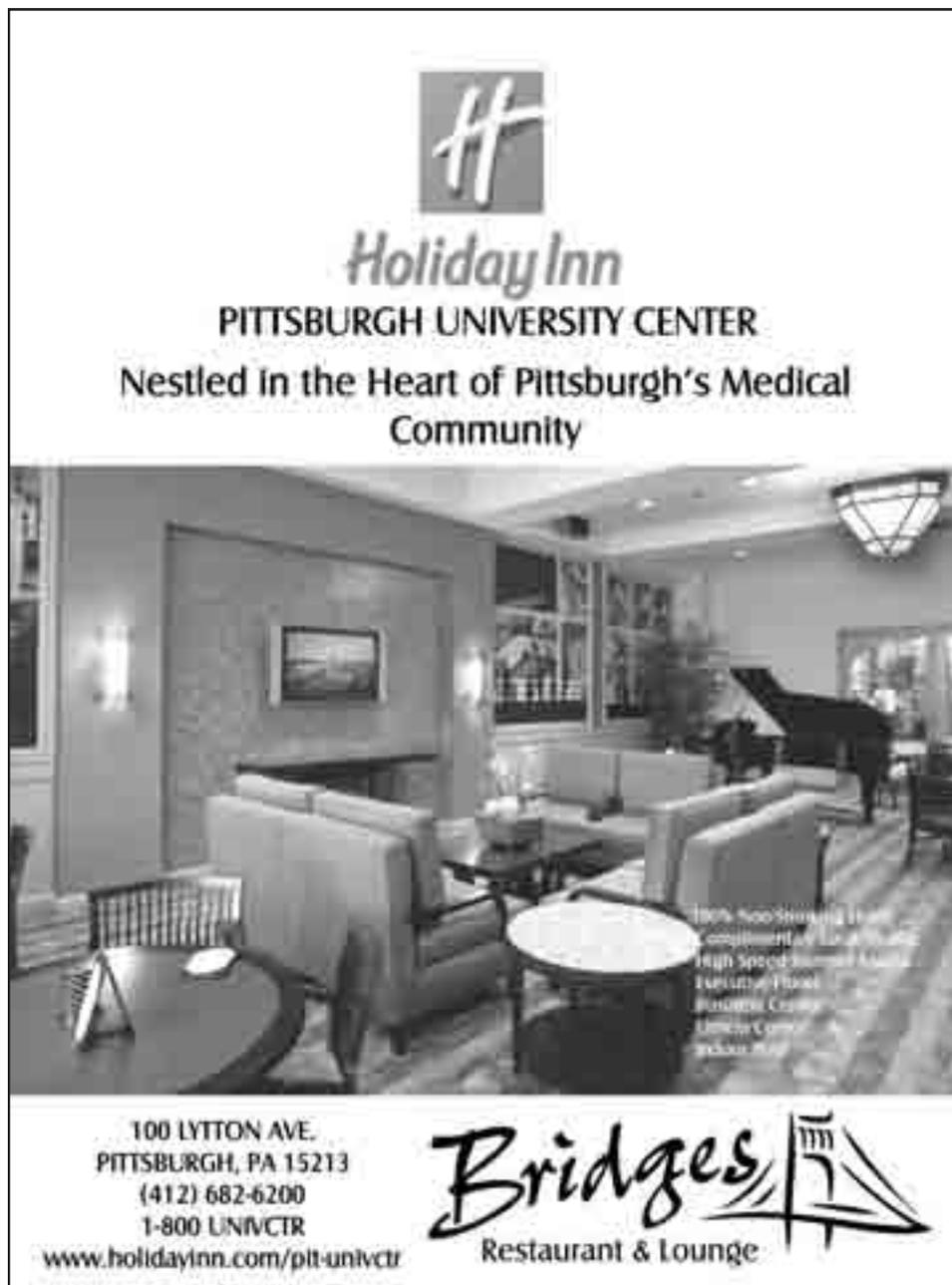
Hosted by Pittsburgh Mercy Health System
Westin Convention Center Hotel
Dec. 4, 4-7 p.m.
For tickets, visit www.pmhs.org/events.

Dementia and Caregiving: Focusing on the Person While Understanding the Progression

Webinar Sponsored by Senior Helpers
Dec. 19, 2:00 p.m.
Call 724-834-5720 to register

UPMC's 16th Annual Children's Ball

Carnegie Science Center
March 10, 2012
Email ogina@pmshf.org or call 412.647.4285



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Heritage Valley Health System to Open Medical Mall in Chippewa

Heritage Valley Health System plans to renovate a 30,000 square foot facility in the Chippewa Center in Chippewa, Pa to construct a new "Medical Mall." The new facility, located at 2580 Constitutional Boulevard, will consolidate five existing offices into one new location and offer additional specialty services.

The Medical Mall is a "one-stop shopping" concept and design that will provide patients with the convenience of accessing primary care, pediatric care as well as ambulatory and diagnostic services in one community, easy to access location.

The transaction was completed with Pennmark Management Company, the owner of the Chippewa Center, which is a full service commercial Real Estate Development and Management Company with a portfolio of approximately two million square feet of retail, office and medical located throughout Pennsylvania, New Jersey and Ohio. Over the past few years, they have also provided planning and construction services to medical groups and hospitals such as Heritage Valley.

Located next to the existing Aldi's Market, the new Heritage Valley location will consolidate the practices of Michael Guffey, MD, Trinity Family Practice, and Alexander Kalenak, MD. Dr. Guffey will be moving from his current location on Darlington Road in Beaver Falls. Trinity Family Practice (Drs. Ehrenberg, Grieco, Palguta and Rodriguez) will be relocating from their current location in Chippewa, and Dr. Kalenak will move from his current location on Second Street in Darlington, Pa.

Additionally, the Tri-State Pediatric Associates office currently located at 2400 Darlington Road will relocate to the new space in order to provide pediatric services from its network of 14 pediatricians. As an additional service, Children's Hospital of Pittsburgh will sublease space in the new facility to provide specialty pediatric services such as pediatric cardiology and pediatric neurology, enabling patients to receive specialized pediatric care locally and avoid driving to Wexford or Children's main campus in Lawrenceville.

Other proposed services in the Medical Mall facility include diagnostic services such as digital imaging, ultrasound, MRI, Heritage Valley's Signature Rehab outpatient rehabilitation, Staunton Clinic outpatient behavioral health and a retail location for MedCare, a durable medical equipment (DME) company.

Construction on the Heritage Valley Medical Mall facility will begin this fall, with completion scheduled for early 2012.

Visit www.heritagevalley.org for more information. †

Kane Scott TCU Provides Short-Term Intensive Rehabilitation

Since it opened in January 2009, the Kane Regional Center in Scott Township's Transitional Care Unit (TCU) has had a significant impact while serving as a bridge between a patient's hospital stay and a successful transition back home.

More than 1,000 patients have utilized the services at the TCU, which provides short-term intensive rehabilitation to patients recently released from a hospital or nursing home but who aren't quite ready to return to their homes. With 26 private rooms, a physical therapy gymnasium and its own dedicated therapy staff, the TCU provides patients with physical, occupational and speech therapy.

Physicians refer the patients to the Kane Scott TCU for stays of up to 28 days. The goal is to prepare the patients to return to their own home.

The Kane Scott TCU represented a step in an action plan developed by Allegheny County for a continuum of care at the four Kane Regional Centers located in Scott and Ross townships, and at McKeesport and Glen Hazel.

Kane Scott Township underwent \$2.1 million in renovations in 2008 and the TCU opened in January 2009. †



Around the Region

21st Annual Mount Nittany Medical Center Golf Classic Nets Record Setting \$150,000

The big winner of the 21st Annual Mount Nittany Medical Center Golf Classic was the under-construction cancer center slated to open in 2012. The \$150,000 total from this year's tournament represents the highest fundraising result in the 5-year Golf Classic's commitment to the cancer center, and makes this a record breaking year for the Golf Classic.

The Golf Classic hosted 60 foursomes—240 players, and more than 100 volunteers were on hand for the event, which took place on Aug. 21, at Penn State's Blue and White Courses. Another of the day's big winner was Joe D'Elia, who won the grand prize—car or cash giveaway. He chose the \$10,000 prize and donated a portion back to The Foundation for Mount Nittany Medical Center, and designated it to the cancer center.

"I am grateful for the support of our sponsors, golfers, and volunteers who have helped make this event our most successful tournament to date. The new cancer center will allow for a multi-disciplinary approach to cancer care while enhancing recruitment opportunities for Mount Nittany Health System," said John B. Cox, MD, and Golf Classic Chair.

At a building dedication and naming ceremony, held on Sept 7, the Board of Trustees of the Mount Nittany Medical Center announced that the name for the new center would be The Lance and Ellen Shaner Cancer Center. The Shaners made a substantial donation toward the construction of the center and also established a generous endowment for services and other treatment related needs of cancer patients and their families.

The Lance and Ellen Shaner Cancer Center will house radiation oncology, medical oncology, and examination space, and 19 private chemotherapy suites. It will also feature special amenities like a large resource room for patients and families; space for integrative services such as rehabilitation and nutritional consultations; private and quiet waiting areas in addition to public waiting areas; and a dedicated pharmacy.

Over the past 21 years, the Golf Classic has raised close to \$1.5 million to support critical programs and equipment purchases at Mount Nittany Medical Center.

For more information, visit www.mountnittany.org. †



Steve Brown, president and CEO of Mount Nittany Health System receives a check from Gene Stocker, 2011 Golf Classic committee member at the 21st Annual Mount Nittany Medical Center Golf Classic

Saint Vincent Receives Lactation Center Grant

The Saint Vincent Lactation Center has received a \$5,000 grant from the Pennsylvania Department of Health to provide breastfeeding consultation and education to low-income breastfeeding mothers to try to increase the community's breastfeeding success rate.

The grant, part of the state's Breastfeeding Hospital and Birth Centers Initiative, will help underwrite consultation and follow up for mothers experiencing breastfeeding difficulties. It will help inform the families of available resources to help increase the success and duration of breastfeeding. In addition, monies from the grant will aid in encouraging pediatricians and primary care physicians to refer patients for consultation if they are experiencing breastfeeding difficulties.

The grant was written by Karen McArthur, RN, IBCLC, of the Saint Vincent Lactation Center and Kim Amon, RN, Saint Vincent Maternal Child Health Educator and Childbirth Education Coordinator. It is expected to provide significant assistance to approximately 70 low-income families in Erie County.

Visit www.saintvincenthealth.com/lactation to learn more. †

J.C. Blair Pharmacists Highlight Vital Role in Improving Patient Safety

Pharmacists at J.C. Blair Memorial Hospital used National Hospital & Health-System Pharmacy Week, October 16-22, 2011, to underscore the many new and vital roles they now play in patient care. The evolution has been especially dramatic in recent years as pharmacists have moved beyond compounding and dispensing medications to become fundamental members of multidisciplinary patient-care teams.

Pharmacy Week provides an opportunity to educate the public about how pharmacists can help them get the most benefit from their medicine. Plans for the week included: a daily "Pharmacy Question of the Day" engaging the hospital personnel, promotion of Pharmacy Week through patient bedside cards and table tent cards in the waiting areas and cafeteria, patient handouts regarding important medication issues, and a "Get to Know Your Pharmacy Staff" activity.

Hospital and health-system pharmacists have been able to take on enhanced patient-care roles because of a number of factors, including the deployment of highly trained, certified technicians. The entire pharmacy staff shares their expertise in preparing and dispensing pharmaceuticals to the patients it serve. Numerous patient safety programs, drug evaluation reviews, and quality assurance measures have been established through the pharmacy staff to ensure the most up-to-date, complete and accurate care during their inpatient stay.

The J.C. Blair pharmacy team is composed of three full-time pharmacists, three part-time pharmacists, three full-time technicians, and three part-time technicians. The pharmacy fills approximately 27,000 physician medication orders, including units of IV admixtures on a monthly basis. Pharmacy Week highlights the vital role in quality healthcare that the pharmacy staff at J.C. Blair serves, as well as its commitment to provide the best care possible to patients.

For more information, visit www.jcblair.org.



J.C. Blair Memorial Hospital celebrates National Hospital and Health-System Pharmacy Week, October 16-22, 2011. J.C. Blair Pharmacy staff includes back row (l-r) pharmacist Todd Fortney, PharmD, RPh; pharmacist Jillian Hollen-Archey, PharmD, RPh; front row (l-r) Nancy Householder, CPhT; Jenn Boozel, CPhT; Marge Lightner, CPhT; Ethel MacDonald, CPhT; Gail Young, CPhT; and pharmacy director Tom Marko, RPh. Absent from photo: pharmacist Mike Miller, RPh; pharmacist Judy Miller, RPh; pharmacist Don Wetzal, RPh; and Jane Bellucci, LPN

Around the Region

Cura Hospitality Partners With Sisters of St. Joseph

Christy Reposky, RD/LDN, Cura Hospitality regional dietitian, is certainly making a difference for Cura-managed communities in Western PA, West Virginia and New York. Since joining Cura in March 2011, Reposky has partnered with the Sisters of St. Joseph at Baden, PA (Sisters) offering nutrition classes as a way to educate the Sisters on general nutrition, weight-loss tips and overall healthy living.

The classes were offered during a Sisters-sponsored fitness challenge in August where residents participated in tai chi, Zumba, yoga and strength training activities. For example, residents learned about the types of foods that can help lower cholesterol; healthy summer-time choices; foods that help you feel fuller longer without eating too many calories; and foods that sound like they would be healthy, but really should be avoided.

According to Allie Mooney, fitness challenge coordinator for the Sisters, "The presentations were an important aspect of the fitness challenge. What was great about Christy's presentation is that she explained information to us in laymen terms, as well as dining in and out scenarios so that anyone could clearly understand caloric needs vs. consumption."

The classes were so popular that Reposky was asked to participate in the Sisters wellness fair which was part of the Healthy Spirit Walk & Wellness Fair, and included a 1.5 walk that raises money for retired Sisters, on October 1. Reposky displayed sugar containers that presented how much sugar is in soda, juice, frozen drinks and sports beverages; and food models which also helped attendees understand healthy portion sizes.

Fred Blossat, Cura director of dining services for the Sisters, prepared granola and each of the participants received a sample. Other recipe ideas that incorporate hummus and pumpkin were also available for the Sisters to try on their own.

For more information, visit www.curahospitality.com.



Christy Reposky at the Health Fair at Sisters of St. Joseph at Baden.

1.1 Million Grant to Expand St. Elizabeth Family Medicine Residency Program

The U.S. Department of Health and Human Services, Health Resources and Services Administration (HHS HRSA) has awarded Humility of Mary Health Partners a 5-year grant that will total more than \$1.1 million to train primary care doctors in the Family Medicine Residency Program at St. Elizabeth Health Center.

HMHP Foundation staff worked with Rudolph Krafft, MD, director of the family medicine residency program, to apply for this grant in August. Dr. Krafft will serve as the project director.

Over the next five years, the St. Elizabeth Family Medicine Residency Project will increase access to and improve the quality of primary care in the area by expanding and enhancing family medicine resident training. The current res-

idency program curriculum will be expanded to include four additional areas: patient-centered medical home (PCMH); cultural competency and health literacy; and team-based interdisciplinary care.

To increase family medicine residents' familiarity with the concept of the PCMH, a key component of recent health care legislation, community-based training sites will be expanded to family practices and clinics where this model of care is practiced.

Residents will also be provided with enhanced education and training in the care of underserved, vulnerable and special needs populations; team management of chronic diseases; and integrated care.

Care management, recognized as the linchpin in PCMH

practice, will be incorporated into the program design and the grant will allow the hiring of care managers to assist resident physicians in identifying and using available resources to provide high quality patient care.

"This grant will enable us to strengthen our current program for family medicine residents," said Dr. Krafft. "Methods for delivering health care to individuals and the overall population are changing across the nation. This grant will support our efforts to ensure that residents going through the St. Elizabeth program are knowledgeable in both the clinical and personal aspects of caring for their patients and their community."

For more information, go to HMpartners.org.

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New Ambulatory Care Center Will Revolutionize Health Care for Veterans

U.S. Congressman Jason Altmire as well as local Department of Veterans Affairs leadership staff helped dedicate a new patient care building at the Heinz facility in O'Hara Township last month.

The \$40 million Ambulatory Care Center will house physical rehabilitation, primary care, audiology, dental, adult day care, outpatient pharmacy, patient education, and prosthetics. The design concept reflects the technological advances in the delivery of health care and includes a color-coded way-finding system, increased parking, and wireless clinical IT systems to enhance the current computerized clinical patient record system.

This Ambulatory Care Center was built to qualify for silver certification from the United States Green Building Council's Leadership in Energy and Environment Design green building rating system. The open and transparent process of obtaining LEED certification saves money in energy costs while creating a healthier work environment.

Pittsburgh-based Astorino designed this facility with direct input from Veterans and staff. Walsh Construction Company began construction began in March 2009.

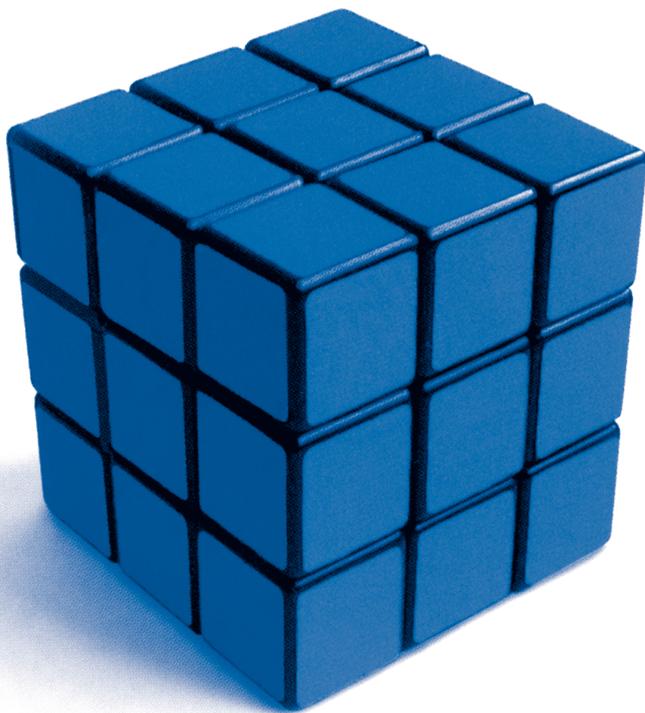
This building is part of a revolutionary multi-million dollar major construction project that will enhance both behavioral health and ambulatory care services and achieve efficiency through consolidation of a three-division health care system into two divisions.

For more information, visit www.pittsburgh.va.gov.



From left to right: Michael E. Moreland, VISN 4 Network Director; Kevin Swain, Business Group Leader, Walsh Construction; Timothy L. Powers, AIA, President of Architecture, Astorino; Terry Gerigk Wolf, Director, VA Pittsburgh Healthcare System; Congressman Jason Altmire (D-Pa.)

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Around the Region

Allegheny Valley Hospital Façade Redesign Gives Hospital New Look

Allegheny Valley Hospital (AVH) recently celebrated the unveiling of its new front exterior façade with a wall christening ceremony during the annual employee picnic last month.

The \$2.5 million façade redesign project involved upgrades to the 43-year old four-story patient tower. The project's scope included the removal of old brick, adding new insulation, new windows, roofing and new exterior stucco finishing along with exterior trim painting.

"The updated façade of our hospital gives us a new, updated and refreshed look and complements the Emergency Department expansion and renovation project that was completed last fall," said Ned Laubacher, President and CEO. Joining Ned in the traditional breaking of the champagne bottle to christen the new exterior is employee Gloria DeMeno, RN and Unit Manager of the Endoscopy/Short Term Procedure Unit.

Work on the project began in the fall of 2010 and finished this September.

For more information, visit www.wpahs.org.

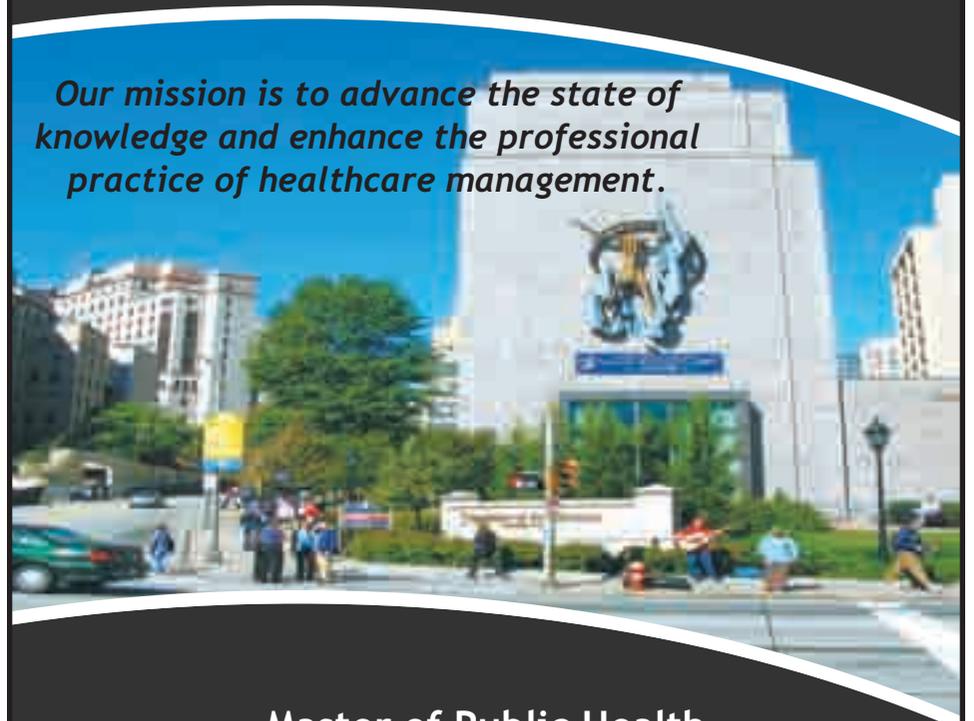


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Monongahela Valley Hospital Construction Reaches Halfway Point — Expansion To Benefit the Community

It's not easy expanding a hospital that provides state-of-the-art medical care in a comfortable environment. Just ask D. Ray Andrews, vice president, Administration and Support Services at Monongahela Valley Hospital, who is coordinating construction activities for MVH's \$25 million construction project. Thomas J. Cullen, senior vice president, who is responsible for the overall project and Andrews work very closely on the largest renovation and expansion since the construction of the hospital in 1976. On Oct. 1, 2011, the project will reach its midway point and despite a rainy spring, construction is close to schedule.

"The phasing of the construction combines new buildings along with renovations to existing spaces which requires a cascading effect in coordinating our efforts," said Andrews. "As new areas are completed and open, renovations will begin in the spaces that were vacated."

In all, the proposed expansion will increase the size of the hospital by nearly 16,000 square feet. However, more important than the bricks and mortar is the impact these updates

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Around the Region

will have on patient care. The expansion involves additions to the main hospital and the Charles L. and Rose Sweeney Melenyzer Pavilion and Regional Cancer Center. Construction includes:

Expansion of the hospital's first floor to add four new operating suites at 600 square feet each

The addition of new Image Guided Radiation Therapy (IGRT) equipment within the Sweeney-Melenyzer Pavilion

Expansion of the Hyperbaric Oxygen Treatment (HBOT) and Wound Care Management program within the first floor of the Sweeney-Melenyzer Pavilion

Upgrades to the hospital's air conditioning/heating systems, boilers, interior/exterior lighting and main electric transformers

The first two operating suites are scheduled to open Jan. 22, 2012. The Image Guided Radiation Therapy will be in use in spring 2012. The HBOT is scheduled to move in late June or early July 2012.

The two additions are being constructed simultaneously. According to Andrews, while all construction involves complete precision, some aspects of the project required special attention. For example, the cement for the addition which will house the IGRT required simultaneous pours. Four different pours that involved up to 40 cement trucks, pumped some 1,000 cubic yards of concrete into the molds for the footer, floors, walls and ceiling.

"Aside from the movement of some heavy construction equipment and the appearance of some muddy tracks along the roads, most patients and guests probably haven't even realized that we are building on our campus," said Andrews.

For more information, visit www.monvalleyhospital.com.



Workers direct cement through rebar as the roof is poured for the addition to the Charles L. and Rose Sweeney Melenyzer Pavilion which will house Monongahela Valley Hospital's new Image Guided Radiation Therapy unit.

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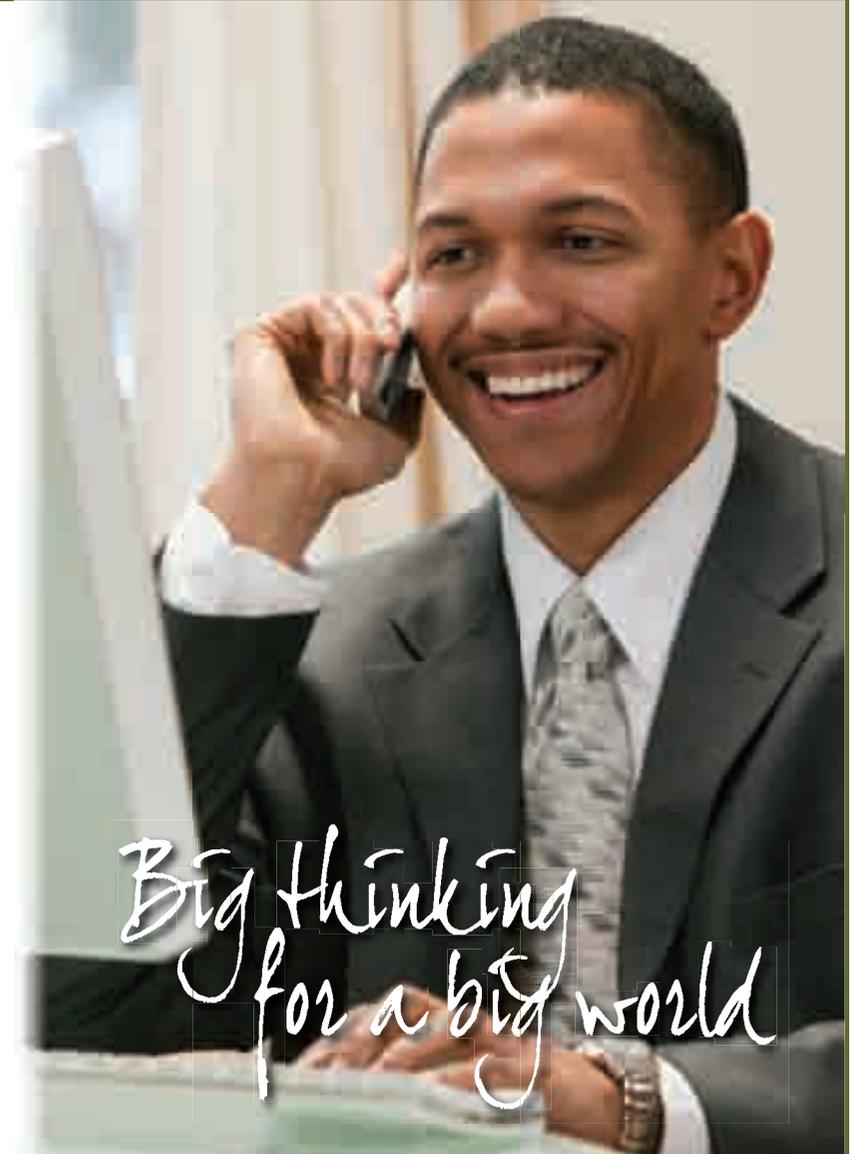
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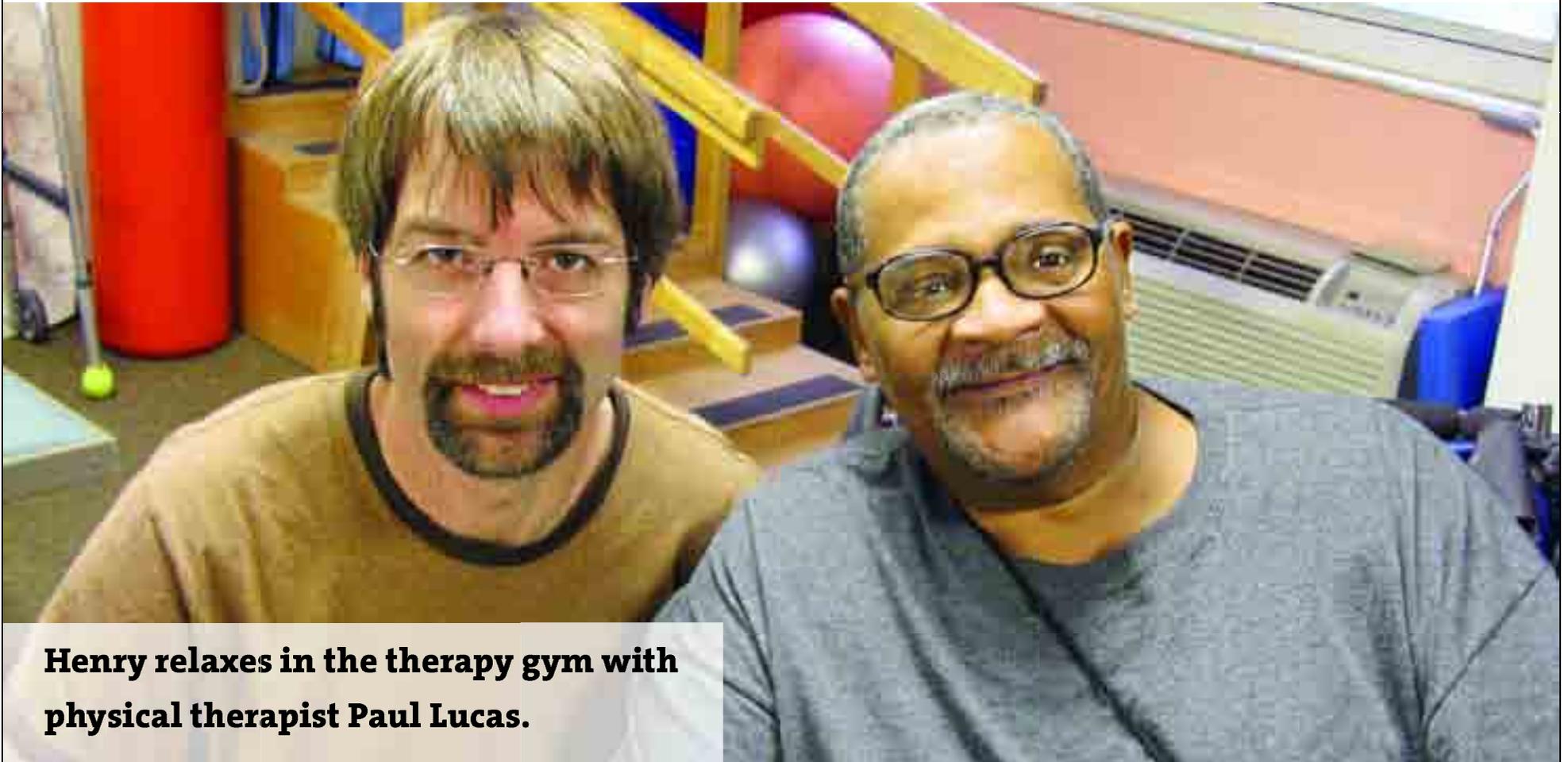
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