<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Message from the Dean</td>
</tr>
<tr>
<td>2</td>
<td>Nursing News</td>
</tr>
<tr>
<td>4</td>
<td>Caring for the Elderly: Today and Tomorrow</td>
</tr>
<tr>
<td></td>
<td>Three College of Nursing alumni weigh in on</td>
</tr>
<tr>
<td></td>
<td>the latest trends and challenges in gerontology.</td>
</tr>
<tr>
<td>7</td>
<td>Faculty Spotlight: Planting the Seed</td>
</tr>
<tr>
<td></td>
<td>College of Nursing professors reveal how they</td>
</tr>
<tr>
<td></td>
<td>engage their students in gerontology early in</td>
</tr>
<tr>
<td></td>
<td>their studies.</td>
</tr>
<tr>
<td>8</td>
<td>Healing the Dying by Bringing Quality of Life</td>
</tr>
<tr>
<td></td>
<td>to the Living</td>
</tr>
<tr>
<td></td>
<td>A professor and her student share lessons</td>
</tr>
<tr>
<td></td>
<td>learned through the College’s Dying with Dign</td>
</tr>
<tr>
<td></td>
<td>ity course.</td>
</tr>
<tr>
<td>9</td>
<td>Nursing Alumna “Sees the World”</td>
</tr>
<tr>
<td></td>
<td>Catherine Kazmin takes her nursing career</td>
</tr>
<tr>
<td></td>
<td>abroad as a Foreign Service Health Practitio</td>
</tr>
<tr>
<td>10</td>
<td>The Globalization of Nursing Education:</td>
</tr>
<tr>
<td></td>
<td>A Seton Hall Experience with Germany</td>
</tr>
<tr>
<td></td>
<td>Four German nursing students spend five</td>
</tr>
<tr>
<td></td>
<td>weeks studying nursing education at the Col</td>
</tr>
<tr>
<td></td>
<td>lege.</td>
</tr>
<tr>
<td></td>
<td>Mid-Residency Weekend</td>
</tr>
<tr>
<td></td>
<td>The College’s online M.S.N. students enhance</td>
</tr>
<tr>
<td></td>
<td>their studies during one of three weekends</td>
</tr>
<tr>
<td></td>
<td>on campus.</td>
</tr>
<tr>
<td>11</td>
<td>New College of Nursing Faculty</td>
</tr>
<tr>
<td>12</td>
<td>Faculty Publications</td>
</tr>
<tr>
<td>13</td>
<td>Sigma International</td>
</tr>
<tr>
<td></td>
<td>The College’s Dean and faculty take part in</td>
</tr>
<tr>
<td></td>
<td>a prestigious conference in Vienna, Austria.</td>
</tr>
</tbody>
</table>
MESSAGE FROM THE DEAN

Phyllis Shanley Hansell, Ed.D., R.N., FAAN
Dean, College of Nursing

Dear Alumni and Friends,

Seton Hall University’s College of Nursing has been a leader in nursing education for more than seven decades. We are proud of our legacy and seek to continue to further develop the profession. Today the College of Nursing is at the heart of the University’s mission to educate nurses as servant leaders in a global society. It was the president of Seton Hall University who saw fit to provide higher education for nurses 70 years ago in 1937. Seton Hall was on the vanguard of nursing education when the first baccalaureate degree program for nurses was launched.

Today we are moving forward into the future as we develop new programs that are responsive to the changing healthcare needs of society. The enrollment in the B.S.N. program is strong and our Ph.D. currently enrolls 26 students, with several students from the first cohort preparing their dissertation proposals.

Our most recent innovation is the establishment of the M.S.N. entry Clinical Nurse Leader Program. This program for college graduates was recently approved by the Seton Hall University Board of Regents and the New Jersey State Board of Nursing. A first in the state of New Jersey, this program replaces the very popular second degree B.S.N. accelerated program. The curriculum for the M.S.N. Clinical Nurse Leader is responsive to the complex needs of patients within the context of an increasingly complex healthcare delivery system. In addition to better differentiating the role the professional nurse, this new program includes substantial didactic and clinical practicum experience that focuses on effective critical analyses of patient care problems. This program is offered in partnership with several clinical partners who will work with us to design innovative care delivery models aimed at improving patient care outcomes.

The M.S.N. Clinical Nurse Leader Program is 80 credits and offered over 22 months. Included in the curriculum is a 7-credit, 400-hour clinical immersion capstone experience. Prerequisites to the program include Anatomy and Physiology I and II; Organic and Inorganic Chemistry; Ethics; Statistics; and Developmental Psychology (covering lifespan). Admission to the program is highly competitive and requires a minimum of an undergraduate grade point average of 3.0.

The second major innovation for the College of Nursing this year is the development of the Doctor of Nursing Practice (D.N.P.) Program, which will move the College of Nursing into alignment with the coming changing professional standard for advance practice nurses which will include the nurse practitioner tracks and the health systems administration track. The D.N.P. curriculum is 70 credits beyond the baccalaureate and includes 1,000 supervised clinical hours, which is approximately twice the number of supervised hours currently required for the various tracks in the current M.S.N. program. We anticipate final approval of the D.N.P. within the year, with anticipated implementation of this program in 2009-10. We are especially enthusiastic about the potential for health care that the D.N.P. offers, as it positions Advanced Practice Nursing to be the leader in the delivery of care, especially that which focuses on health promotion and disease prevention.

The nursing profession is finally coming of age in a world that needs the expertise of nurses and advanced practice nurses more than it ever has needed us. Only nurses can make the differences in patient outcomes that are needed. I firmly believe that the nursing professions have the answer because nurses care for the whole patient within the context of the resources and environmental context that the patient brings to the healthcare provider.

Phyllis Shanley Hansell, Ed.D., R.N., FAAN
Dean and Professor, College of Nursing
A Legacy Continued

Latisha Marshall is following in her grandmother’s footsteps. The granddaughter of Jean Rochelle Marshall ’89, Latisha is taking College of Nursing classes as a pre-nursing student.

Well known in the state for her commitment to the field of nursing, Jean has held many prestigious positions, including assistant commissioner of health under former Governor Christine Todd Whitman. The first and only African-American president of the New Jersey State Nurses Association (1988-89), she was honored in 2006 with the University’s Alumni Service Award for providing unparalleled service to others.

“Though I encouraged Latisha to be anything she wanted, I am thrilled that she has chosen the field of nursing,” Jean says. “I await her weekly calls about how she is doing. It’s like reliving the profession through her.”

Nursing Cadets Pursue Academic, Military Success

The 2007-08 academic year brought with it the largest number of nursing cadets on the Seton Hall campus in recent years.

The University boasted 10 nursing cadets in its Reserve Officer Training Corps (ROTC) program:

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<tr>
<td>Freshmen</td>
<td>Lindell Arino</td>
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<td>Sophomores</td>
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</table>

Lieutenant Colonel Madelfia A. Abb of Seton Hall’s ROTC program finds that recruiting students is a team effort that involves the ROTC instructors, the College of Nursing, Freshman Studies and Enrollment Services. “Together, we are confronting the shortage of nurses in our society and in the Army,” says Abb.
Dean Makes Connections in D.C.

Dean Phyllis Shanley Hansell, Ed.D., R.N., FAAN, represented the College of Nursing at several events last year that were attended by both state and federal legislators.

She was among 17 Seton Hall officials who were present at the fourth annual Hall on the Hill in July 2007, an event sponsored by Seton Hall’s Office of Government Relations. The event brought together 100 Washington, D.C.-area alumni, one-half of New Jersey’s congressional delegation and dozens of Capitol Hill staff, providing these leaders a look at the University and its achievements.

Dean Hansell also participated in the “Walk to Washington,” sponsored by the New Jersey Chamber of Commerce, on January 31 and February 1. Twelve Seton Hall representatives from across the University took a train ride from New Jersey to Washington, D.C., with state and federal legislators and representatives from New Jersey’s businesses. The event gives deans and other University leaders a chance to share the achievements of their schools and colleges with government and business officials, and provides the framework for possible partnerships with these officials in the future.

Two College of Nursing faculty members and two current students were honored for their commitment to the field of nursing last year.

Phyllis Russo ’61/Ed.D. ’86, R.N., chair of the College’s Department of Adult Nursing, was honored with the Margaret C. Haley Distinguished Alumni Award on June 19, 2007. Her career began as a nurse at St. Mary’s Hospital, Orange, and St. James Hospital, Newark. Combining teaching with practice, she currently directs the College’s Accelerated Nursing Program and chairs its Clinical Nurse Leader Program Committee.

Kathleen Scura, Ed.D., R.N., associate professor, received the Award for Excellence in Nursing Research from the National Conference of Gerontological Nurse Practitioners in September 2007. Honored for her commitment to research that benefits the geriatric community, Scura has published numerous articles on her research on the risks and issues of HIV/AIDS for older adults. She has also focused on the effects of cancer, particularly prostate cancer, on older adults.

Graduate student Elizabeth Kellett, R.N., M.S.N., who is pursuing school nurse certification, received the Dr. Ruth Hutchison Scholarship in October 2007. Kellett is a substitute school nurse in the Scotch Plains/Fanwood, Cranford and Mountainside school districts. The scholarship, which was created to assist aspiring school nurses with their graduate educations, provides its recipients $1,000 per semester.

Undergraduate nursing student Nicole Garabedian was chosen to participate in the Student Laureate Program sponsored by the National Dean’s List. As a result of her selection, Garabedian will spend two weeks in Africa this summer studying the problem of HIV/AIDS.
CARING FOR THE ELDERLY: TODAY AND TOMORROW

By Shannon Rossman Allen, M.A. ’04
A mericans are living longer, thanks to improvements in medical care and an array of health prevention efforts. Good news? Sure sounds like it. Yet, the aging U.S. population is one of the major public health challenges of the 21st century, according to the Center for Disease Control and Prevention.

Three College of Nursing alumni — Virginia Burggraf ’79, D.N.S., R.N. FAAN, Veronica Rempusheski ’75, Ph.D., R.N., FAAN and Maura Ryan ’74/ M.S.N. ’80, Ph.D., APNP-BC — who have dedicated their careers to the holistic care of the elderly weigh in on some of the latest trends and challenges in the field of gerontology.

“The older adult population is growing rapidly,” notes Ryan. “The latest U.S. census data in 2004 showed there are 37 million people who are 65 or older. In 1900, this population stood at only 3 million.” According to the CDC, the population of those 65 years or older is expected to double in the United States by 2030, which is roughly 20 percent of the population.

While a longer lifespan is certainly good news, it is important to look at the quality of life for this age group. “A nurse’s care influences the quality of living and dying, as well as the progression of life,” says Rempusheski. “There’s not a nurse out there who won’t, at one point or another, interact with an elderly person. So a well-rounded nursing education focusing on the entire lifespan is important. A gerontological nurse — someone specifically educated in the holistic care of the elderly — will have knowledge of the aging process and how the body changes, psychologically, cognitively and physiologically, at each stage.”

This knowledge is important when nurses address trends related to caring for the elderly. “As the population ages, nurses are seeing patients who are living with one or more chronic illnesses, such as type 2 diabetes, high blood pressure, cancer, heart disease and more,” says Burggraf. “And unfortunately, these chronic illnesses are the leading causes of death in the elderly population.”

Ryan adds: “While this is a sad fact, many of these chronic diseases can be prevented. They are often related to lifestyles that include smoking, poor diet and physical inactivity, all self-directed behaviors that can be altered.”

Trends related to aging, according to the CDC’s “The State of Aging and Health in America 2007” report, focus on:

• addressing health disparities in racial and ethnic minority populations;
• communicating wishes about end of life;
• improving the oral health of older Americans;
• increasing physical activity through promotion of environmental changes;
• increasing adult immunizations and screening for colorectal cancer; and
• preventing falls.

While all areas of focus are important, the three experts agree that promoting healthy living through good eating habits and physical activity can almost immediately begin to improve the quality of life. And the sooner a person embraces such healthy behaviors, the better. “Simple changes in one’s daily life, like adding moderate exercise and eating well, can make a difference,” notes Rempusheski, “which, in turn, creates a domino effect in terms of good health. It’s harder to regain your equilibrium if your health is already deteriorating.”

Physical activity can also help to prevent falls, which are the leading cause of hospitalization and injury deaths among the aging population. As a result of the chronic illnesses this age group lives with, falls are expected. Yet, there are a number of ways to reduce the chances of a fall, Rempusheski and Ryan stress. Increased physical activity can improve the balance of someone who already has impaired gait as a result of a chronic disease, and vision problems can be corrected, safety features can be installed and poor lighting can be fixed to lessen tripping hazards in the home.
Probably the most important factor in caring for the elderly is geriatric-focused education and nurses who are committed to working with this age group. Burggraf, Rempusheski and Ryan emphatically agree that top-quality gerontological education beginning at the baccalaureate level is key. “Knowledge truly is power,” notes Burggraf. “But along with the academic programs that are offered, the future of gerontological nursing depends on savvy nurses who are aware of legislation, Social Security, Medicare, the rising costs associated with health care, and other issues surrounding managed care, healthcare policy and care giving.”

Ryan adds that GNP’s can become involved in seeing that public policy changes support additional opportunities for home and community-based care, which can help contain the rising costs associated with health care, managed care and care giving. Research (AARP, 2005) shows that overwhelmingly the elderly want to stay in their own homes and communities if at all possible, should they need long-term care services. Given their wishes and the decreased cost, the next generation of nurses, Ryan says, “will need to continue to make their voices heard so the elderly and their loved ones have the long-term care choices they may want and need.”

ABOUT OUR ALUMNI EXPERTS

Virginia Burggraf
Active in the field for more than 25 years, Burggraf currently serves as distinguished professor of gerontological nursing at Radford University in Virginia. She has been awarded numerous grants to develop leadership initiatives for students to serve aging populations and advance the science of gerontological nursing. Among Burggraf’s many accomplishments, she developed the first curriculum in gerontological nursing at LSU School of Nursing and facilitated the Louisiana State Nurses Association’s first Geriatric Nursing Interest Group. She was the first nurse in Louisiana to receive American Nurses Association certification in gerontological nursing and received an American Journal of Nursing Book of the Year Award for Nursing the Elderly: A Care Plan Approach in 1990. Her monthly Senior News column, “Ginger Says,” provides important health information to more than 66,000 seniors in southwest Virginia.

Veronica Rempusheski
Rempusheski’s contributions to the field began in 1976, when she integrated gerontological nursing into the baccalaureate curriculum at Clemson University College of Nursing. The first nurse in South Carolina to receive American Nurses Association certification in gerontological nursing, she became the first non-attorney court visitor appointed to represent the elderly in pending guardianship and conservatorship cases for the Pima County Public Fiduciary Office in Tucson, Arizona. Rempusheski’s research with Linda Phillips, Ph.D., R.N., on decision-making in elder abuse and neglect was published in Nursing Research in 1985 and identified as a scientific breakthrough that brought about a trans-disciplinary change in thinking about the variables that influence a diagnosis of an abusive relationship in a family. In 1991, she was honored with Fellow status in the Gerontological Society of America. She currently is the Jean K. Buxbaum Chair of Nursing Science at the University of Delaware.

Maura Ryan
Ryan, a retired gerontological nurse practitioner (GNP) and professor, remains active in the field as chair of a caregivers’ support group. One of the first nurses certified by the American Nurses Association, she received the Gerontological Nurse of the Year Award from the New Jersey State Nurses’ Association and the Constance Clery Award for Teaching Excellence at Columbia University School of Nursing. Her doctoral research on loneliness, social support and cognitive changes in the hospitalized elderly was funded by the American Nurses Foundation. Throughout her more than 30-year career, she served as director of the GNP programs at Columbia University School of Nursing and Hunter-Bellevue School of Nursing, CUNY. She also helped set up the state’s first burn unit at St. Barnabas Medical Center. Later, she established a part-time private practice as a GNP in a New York City nonprofit high-rise apartment, from which she retired in 2006.
The U.S. Census Bureau indicates that in 2006, those 65 or older comprised approximately 12.4 percent of the United States population. By 2030, that figure is expected to grow to 20 percent. Alarming, however, statistics show that less than one percent of all nurses in the U.S. are certified in gerontology.

“The need for gerontological nurses has never been greater,” says Leah Johnston Rowbotham ‘71, M.S., A.P.R.N., B.C., College of Nursing faculty member.

Yet unfortunately, Rowbotham and her colleagues — Patricia E. Ropis ‘80, R.N. B.C., M.S.N., and Phyllis Russo ‘61/Ed.D. ‘86, R.N. — say that most of their B.S.N. students do not initially choose to specialize in gerontology. “A lot of them either aren’t sure which field to study, or prefer to work in pediatric or trauma nursing,” notes Rowbotham. “We try to get them physically and emotionally involved in gerontology and related fields early on in hopes that they pursue it after they graduate.”

Ropis, who specializes in home and hospice care, takes her students to community and inpatient hospices, as well as nursing homes, to care for patients. “I spend part of my day observing them as they do assessments, dressing changes, tube feedings and other tasks,” she says. She also makes it a point to teach her students about the shifting role of the nurse. “Research shows that by 2010, 70 percent of all nursing care will take place in the home, which means that the nurse will gradually become more of a teacher, advisor and counselor,” says Ropis. “They’ll be wearing many different hats, and it’s important that they learn to embrace those responsibilities.”

In addition to the managerial side of nursing, the three colleagues teach their students to care for each of their aging patients as a whole. A member of the Board of Trustees for Center for Hope Hospice, Russo met her friend — the late Margaret (Peggy) Coloney — almost 20 years ago, just before Coloney founded Center for Hope. Russo admires the selflessness she says Coloney epitomized. “Peggy always made sure her patients got the physical, emotional, psychological and spiritual support they needed,” she recalls fondly. “I try to communicate that level of caring to my students — that they should care for the entire person, not just one aspect. That’s critical for hospice nursing, as well as nursing in general.”

Rowbotham builds on that by emphasizing the importance of one-on-one attention with each patient. She incorporates a unique project into her curriculum based on her experiences at St. Vincent’s Hospital, where she helped set up an Alzheimer’s program 25 years ago. “As the disease progressed within our patients, many of them became increasingly isolated from their loved ones, who were no longer sure how to care for them. The more isolated they felt, the more depressed and often agitated they became,” she says. “We were able to give them one-on-one attention and increase their comfort level.” To ensure that this lesson hits home with her students, she asks them to spend six hours interviewing a person 75 or older and later report their findings. They describe the person, bring in photos and explain how the experience will make them a better geriatric nurse.

Rowbotham, Ropis and Russo believe that their teachings are yielding a positive change in their students’ attitudes toward caring for the elderly. “Our curriculum really helps combat any negative misconceptions the students may have about aging and the elderly,” says Rowbotham. “This is the first step toward becoming the types of nurses our society will need them to be, both now and decades down the line.”

(from left) Russo, Rowbotham and Ropis pique their students’ interest in gerontology early in their studies.
The United States is blessed with one of the most scientifically and technologically advanced healthcare systems that civilization has ever seen. But with the continuing advances in medical procedures, the preparation for death as the final stage of life is frequently overlooked. As nurses, we strive to ensure the patient’s right to die with dignity, the opportunity to die healed.

Dying healed means that the patient finishes life with a sense of completion and satisfaction. Life’s struggles have lent the patient a sense of knowledge gained from various experiences, thereby leading to wisdom and, at times, peace. This ultimately gives the patient’s life and death greater meaning, which allows the patient to more easily accept his/her death as a natural part of life. Seton Hall University’s College of Nursing has successfully addressed the need to perceive death in this way by adding the Dying with Dignity course to its nursing curriculum.

Students in this course examine their own mortality and concepts of death, so that they can be prepared to be intimately involved in all aspects of end of life care. These aspects include:

- Helping the patient to attain comfort — the capacity to live fully until death occurs — by offering relief from pain and release from worry
- Adopting pharmacologic and nonpharmacologic means of pain management to ease both the patient and his/her family during the dying process
- Learning to negotiate the healthcare system by first examining the students’ own views regarding hospice and end of life care

Students become familiar with these concepts by exploring various theories that will give them the foundation to assist patients and their families at the end of life. Students also develop a response paper to media portrayals of death. Opportunities for onsite visits to hospitals expand students’ knowledge of the rituals of dying.

To help them determine their own feelings and attitudes toward death, students also maintain a journal throughout the semester. Anne Touhill, a former Dying with Dignity student, shares the lessons she learned through an excerpt from her journal:

Death. What a powerful, life-changing word. This past year I have not only witnessed several deaths working in the hospital, but have supported friends going through the bereavement process in dealing with losing a loved one. Death has recently become a lot more real to me than it was in the past.

In class, we talked about… the idea of allowing the dying patient to live life to the fullest in their last days on earth, even if they are restricted to a hospital bed. From situation to situation, patient to patient, there are going to be different goals or priorities that they want to complete during their last days. This class has enabled me to think through the process of death, becoming more comfortable with it. I know that I will never become numb to death, but I have realized that I need to become educated and comfortable with death, so that I can be a source of strength and comfort to both the dying patient as well as those left behind.

Through the Dying with Dignity course, Anne and her peers will accrue the knowledge and tools necessary to ensure the patient’s right to die with dignity, the opportunity to die healed. It teaches them to address the process of life as a continuum, that each stage from birth to death is a period of growth and development. By facilitating death as the completion of the final stage of life, the nurse is able to assist the patient in recognizing his/her meaning and the value of life.
Every morning, Catherine Kazmin ’92, M.S., NP-C, opens her office at 8 a.m. She spends the day caring for patients with a variety of ailments, then devotes her evening to teaching about health care and doing administrative work. She lives as many health practitioners do, with one notable exception.

Her home these days is Baghdad, Iraq, and her office is the United States Embassy.

Kazmin is a Foreign Service Health Practitioner (FSHP) in the joint medical unit of the embassy. A member of a medical unit staff consisting of one Regional Medical Officer (RMO), two FSHPs, one Military M.D. and five medics, she cares primarily for embassy employees and their families.

But Iraq wasn’t the first stop on the globe for this accomplished nurse.

After earning her B.S.N. from Seton Hall University in 1992 and her M.S. in Nursing from Rutgers University in 1995, Kazmin worked in primary care and subsequently open heart surgery for four years. One day as she perused a nurse practitioner magazine, she came across an ad for the Foreign Service that prompted her to “See the World.” “It made me realize how much I always wanted to travel and try to make a difference on a more global scale,” she says.

Kazmin joined the Foreign Service in 1999. Her first assignment was to Liberia, where she spent five months caring for embassy employees as well as Liberian natives. Since then, she has served as FSHP/Medical Attaché in such countries as Eritrea, Mexico and Turkmenistan.

The intense travel schedule may have been overwhelming for some, but Kazmin embraces the experience. “I love foreign cultures and meeting new people,” says Kazmin. She adds that due to the poor medical care of some countries, many patients seek out FSHPs like herself because of their strong medical backgrounds. “Not only am I looking to build relationships with them, but often they want to do the same with me. I’m fortunate to be making friends all over the world,” she says.

In the summer of 2007, Kazmin was given the opportunity to spend one year in Iraq — an opportunity she couldn’t pass up. She recalls: “With everything that was going on in the world, I knew this was a chance for me to witness history firsthand. I wanted to experience the people and the environment for myself and not rely solely on what I was seeing and hearing on television and in the newspapers.”

In the few months she has spent in Baghdad, Kazmin believes she is already seeing a positive change in the people and their overall morale. “When I first arrived, the Iraqis I encountered were in pretty low spirits,” she remembers. “There was a lot of sadness and anger. It was a little scary.” And now? “Things are a lot better,” she reports. “Morale is a lot higher, and the violence has definitely decreased.”

Kazmin will conclude her time in Iraq on August 21, 2008. Wherever her practice takes her next, she hopes to continue to make a difference in the lives of others. “Despite the hardships — having to adapt to different lifestyles and the long hours away from home — my job truly is rewarding. Our patients and their families love that we’re always available not just to treat them, but to build friendships with them and provide them with the emotional support they may not get otherwise,” she says. “It’s a whole other level of health care that I’m blessed to be a part of.”

Kazmin stands at the field beneath Iraq’s “Crossed Swords” monument.
THE GLOBALIZATION OF NURSING EDUCATION: A SETON HALL EXPERIENCE WITH GERMANY

By Sherri Suozzo, M.S.N., R.N., APN-C, AOCN, and Linda D’Antonio ’69, M.S.N.

Last fall, the College of Nursing hosted four interns from The University of Applied Sciences Katholische Fachhochschule Mainz, Germany. Graduate students studying nursing education in their native country, the interns – Jenny Hellwig, Ramona Grosse, Katrin Werner and Ines Baer – spent five weeks at Seton Hall entrenched in the College’s coursework and interacting with faculty. They also connected with the College’s general student body; and together, they shared their thoughts in panel discussions that focused on entry into practice requirements, practice standards, perceptions of what it means to be a nurse and other related topics.

The interns, College faculty and students also learned from one another outside of the classroom at Overlook Hospital, one of the College’s clinical agencies. As a result of this field experience, the interns were able to observe American nursing in its true form — at the bedside — while also allowing them to experience a bit of American culture. In return, the staff nurses got a taste of the future of nursing education and its global society.

Though America and Germany are thousands of miles apart, the common thread of nursing was evident between the interns and those whose lives they touched. It was clear within the first week of their visit that the main concerns in patient care and nursing education in America and Germany were parallel. College of Nursing students also learned that in a socialized medical environment, the role of the nurse remains the same, as nurses in Germany provide multifaceted care and function as patient advocates and educators and provide psychosocial support.

Students and faculty alike were invigorated by the visiting interns. With the “world shrinking” as a result of technological advances, the College hopes to continue such face-to-face experiences for its students.

MID-RESIDENCY WEEKEND

By Catherine Cassidy ’65, Ph.D., R.N., APN-C, COHN-S

The College of Nursing’s online Master of Science in Nursing program prepares graduate students to serve as advanced practice nurses. Students in the program are required to participate in three on-campus residency weekends. The first residency weekend takes place at the beginning of the program, and provides an opportunity for faculty and students to meet face-to-face and prepare to work in an online environment. The second weekend residency, also known as the mid-residency, takes place in the fall, approximately halfway through the first clinical practicum, and the third residency weekend occurs at the beginning of the third practicum. These last two residency weekends include lecture and clinical practice opportunities in the College of Nursing Skills Laboratory.

During the mid-residency — which generally takes place in late October — faculty members demonstrate the complete physical examination, with students performing a return demonstration, or test off, under faculty supervision. Students demonstrate another component of the physical examination by completing the GYN and GU Examination using live models who guide the students through completion of these exams in a supportive learning environment.

Additional mid-residency topics include review and demonstration of the technique for taking the history of the patient’s chief complaint, EKG analysis and chest x-ray interpretation. Students also have an opportunity to practice in the College of Nursing laboratory using the latest office-based laboratory tests and screening equipment.

The highlight of the mid-residency for both faculty and students is the quality face time spent reacquainting names with faces as students and faculty come together and share, in person, their program experiences thus far. Without skipping a beat, the two-dimensional world of online learning becomes three-dimensional, which is what makes the online programs so successful.

(from left) Katherine O’Connor, Lisa Friedrich, Kay Bonyak, Professor Jacqueline Zaremba, Cindy Dvorak

D’Antonio (second, from left) poses with (clockwise, from left) Grosse, Baer, Hellwig and Werner.
PAMELA J. GALEHOUSE, Ph.D., APRN-BC, earned a B.S.N. from St. Olaf College in Northfield, Minnesota, as well as a M.A. in Child and Adolescent Mental Health-Psychiatric Nursing and a Ph.D. in Nursing Research and Theory Development from New York University. She is also certified as an advanced practice nurse in child and adolescent psychiatric and mental health nursing. Galehouse’s research interests are preventive intervention, child temperament and self-regulation. Her publications focus on preventive intervention research in urban public schools.

DONNA HOSHING, R.N., M.S.N., CNOR, earned a B.S.N. from Jersey City State College, a M.S.N. in Nursing Administration from William Paterson University and is currently in the dissertation phase of earning a Ph.D. in Nursing at Rutgers University. She is also certified as a perioperative nurse. She has received outstanding nurse awards in the acute practice arena and has presented at the Eastern Nursing Research Society’s Annual Scientific Session. Her publications focus on perioperative care and breast and cervical cancer.

PORTIA JOHNSTON, R.N., Ed.D., earned a A.A.S. from Mercer County Community College with honors, a M.S.N. from Hunter College, City University of New York, and an Ed.D. in Health Education from Teacher’s College, Columbia University. Her publications focus on dietary lifestyle changes, and her research interest is obesity in African-American women.

SHEILA LINZ, R.N., APN, BC, earned her B.S.N. and M.S.N. from Columbia University. She has spent years working with the chronic mentally ill. Starting with intensive Assertive Community Treatment, she was one of the founders of an ACT Team that provided care for people living with H.I.V., chronic mental illness and substance abuse. She also worked at various sites within the shelter system of New York, providing primary psychiatric services to a mentally ill and substance abusing population, as well as homeless youth. Additionally, she has worked in partial care and community mental health clinics as a psychiatric nurse practitioner and APN in both New York and New Jersey.

CYNTHIA M. PETERMANN, M.S.N. ’07, NP-c, SANE, received her B.S.N. from William Paterson University. Her area of clinical expertise is critical cardiac, open heart recovery, cardiac electrophysiology and heart transplant patients. She received her M.S.N. as an Adult Nurse Practitioner from Seton Hall University, is board certified through the American Association of Nurse Practitioners and is also certified as a Sexual Assault Nurse Examiner. Her clinical practice is in a continuing care residential community for adults age 55+) meeting the healthcare needs of the residents from wellness and independent living through assisted living, skilled nursing and hospice. She has received the Experiential Education Award from Seton Hall University, the Catherine Denning Medal for Community Service, and the Rising Stars in Research Award from Sigma Theta Tau. In addition, she volunteers as a parish nurse for her Church community.

LEAH JOHNSTON ROWBOTHAM ’71, M.S., A.P.R.N., BC, is an advanced practice nurse in behavioral health. She received her B.S.N. from Seton Hall College of Nursing and her M.S.N. from Rutgers Graduate School. She has been awarded the American Red Cross Comradeship Award, has been honored by the Essex County Board of Freeholders for her work on the Juvenile Conference Committee and for outstanding achievement in the developing and implementation of parenting programs. She lectures on family, caregivers, and women’s issues throughout the tri-state area and worked with ABC News as a consultant and presenter on family and parenting issues. Additionally, she is a published poet and uses much of her work in her presentations.

JANET M. SUMMERY ’02, M.S.N., R.N., APN, C, earned a B.S. in Biology from Providence College, and her B.S.N. and M.S.N. as a Women’s Health Nurse Practitioner from Seton Hall University. In addition to her position at Seton Hall, Summerly maintains a private practice focusing on obstetrics and gynecology. Her research interests are adolescent pregnancy, abstinence, breastfeeding and culturally competent care. She is also active in Sigma Theta Tau and is the treasurer of Gamma Nu Chapter.
FACULTY PUBLICATIONS

Through their publications, College of Nursing faculty continue to share their expertise in a wide variety of nursing topics. The following are just a few examples of their notable achievements.

CHAPTERS IN BOOKS PUBLISHED


PEER-REVIEWED JOURNAL ARTICLES


ALL OTHER PUBLICATIONS


FA C U L T Y  P U B L I C AT I O N S
Six College of Nursing faculty members and the dean of the College presented papers on topics including HIV/AIDS and adolescent mothers at the 18th International Nursing Research Congress Focusing on Evidence Based Practice sponsored by Sigma Theta Tau International in Vienna, Austria, last July.

In a 90-minute session, Dean Phyllis Shanley Hansell, Ed.D., R.N., FAAN, spoke on “Health Beliefs, Power as Knowing and Symptom Management in Women with HIV/AIDS,” pointing out that worldwide HIV/AIDS is increasing in poor, underserved women more than any other group. Hansell stressed that, with early diagnosis and treatment, longer-term survival is possible, but adherence to drug protocol is critical.

Assistant Professor Ann Marie Mauro ’82/M.S.N. ’86, Ph.D., R.N., presented “Uncertainty and Psychosocial Adjustment among Implantable Cardioverter Defibrillator Recipients: A Follow-Up Study.” Twenty-one of 94 participants in a previous study were included in this follow-up investigation.

In her talk, Associate Professor Gloria Gelmann, Ph.D, Ed.D., R.N., APN, CPNP/A, addressed the needs of children, families and communities as they cope with the many problems resulting from the tragedy of September 11 in America and other losses that have an impact on children both nationally and internationally.

Associate Professors Kathy Sternas, Ph.D., R.N., and Mary Ann Meredith Scharf, Ed.D., R.N., discussed how their campus and community-based service projects addressed high rates of asthma, heart disease and other health problems in their presentation, “Advancing Evidence Based Practice with Vulnerable Populations through Transdisciplinary Collaboration on Service-Learning Projects.”

Focusing on the attitudes, behaviors and requirements agency nurses identified as supportive of their work and those considered sources of frustration, Assistant Professor Bonnie Sturm, Ed.D., R.N., presented “Leadership Dynamics and Issues in the Context of Community Care: Principles of Servant Leadership Discovered in Ethnographic Research.”

In addition, Assistant Professor Josephine De Vito ’78/ M.S.N. ’85, Ph.D., R.N., explored the experience of parenting for adolescent mothers during the four-to-six week post-partum period.

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