



LEARNING THE Healer's art

BRIGHAM YOUNG UNIVERSITY COLLEGE OF NURSING | SPRING 2017

Trekking for Cultural Understanding

PAGE 2

What Nurse Practitioners Can Do

PAGE 6

It's Not Just Who You Know but What You Know

In the last magazine, I addressed one of the goals of the BYU College of Nursing. Today I would like to elaborate on another: "Engage in interprofessional relationships, collaborative research, and clinical partnerships to optimize student learning." We accomplish this task in several ways.

The college connects with many significant resources, including people, facilities, and organizations—both on campus and throughout the community. These alliances allow the college to involve guest speakers in faculty members' nursing courses, recruit dozens of preceptors and clinical mentors to support student placement and learning, share ideas by serving on state and national nursing-related organizations, and cosponsor trainings and conferences. (Read on page 10 about our annual Scholarly Works Conference, which was cosponsored this year by Intermountain Healthcare.)

Our faculty research is benefiting many and affecting changes in areas such as sexual assault, immunizations, anemia rates, and physical activity. The college has seen an increase in both the number of nursing students who desire to

participate in faculty research as well as the number of projects in which students work directly with faculty members in their field of research or on projects contributing to the discipline. This research enhances learning and increases our program's reputation.

We are also pleased that BYU nursing students are welcomed at the growing number of hospital and medical clinics

and ensures the quality and commitment of the next generation of nurse scholars. Donations—large and small—have been made by kind alumni and friends of the college. The campaign has reached 16 percent of its goal; I encourage you to consider making a donation online at give.byu.edu/nursing.

This year marks the BYU College of Nursing's 65th anniversary. While there

The college connects with many significant resources, including people, facilities, and organizations—both on campus and throughout the community.

in the area. They are sought after because they have developed confidence, strong nursing skills, and preparation in our nursing simulation lab, so they are ready to begin working immediately upon receiving their RN certification.

This magazine builds on the theme of optimized learning. It features a story about how students visiting Vietnam for the first time learned from the local Hmong people by listening and being kind; a story that highlights the abilities that our graduate students foster by becoming nurse practitioners; and a story from an alumna regarding how her degree from the college led to a diagnosis that saved her husband's life. The publication also shares the work of Sondra Heaston and Dr. Neil Peterson, and it includes a spotlight on Debra Wing as well as bios on two newly hired faculty members.

As I announced early last year, the college began a mentored-learning campaign to raise money so faculty can receive in-house grants to fund mentoring of students through various projects. This funding benefits both faculty and students as it advances the discipline

are no plans for big gatherings, I do want alumni, students, and friends of the college to participate in the celebration. On page 13 of this publication, there is a large college logo. Have a photograph of yourself taken with the logo during your travels—on a family trip, at a work conference, or at a unique place in your community—then send the photo to us for inclusion in a mural on the first floor of the Kimball Tower and at BYU Homecoming events. I encourage your engagement on our social media channels, where we share college updates, alumni event information, and the pictures you send.

Please continue to tell us about the successes in your career, family, or academics by emailing nursingpr@byu.edu. I appreciate you for your involvement in the college and for helping us achieve our goals. 🇺🇸



Patricia Ravert

Dean and Professor, BYU College of Nursing



LEARNING THE Healer's art

SPRING 2017



2



6



#YNURSING52

12

2 **Trekking for Cultural Understanding: Public & Global Health in Vietnam**

BYU nursing students hiked to rural hill tribes in Vietnam to understand healthcare practices and to gain clinical experience through home visits and teaching opportunities.

6 **It's Not the Length of the Coat: What Nurse Practitioners Can Do**

Due to their holistic approach and emphasis on patient education, nurse practitioners can become ideal primary care providers.

12 **Help Celebrate the College's 65th Anniversary**

The BYU College of Nursing invites alumni, students, and friends to help celebrate the college's 65th anniversary by submitting pictures of themselves with the college logo.

COLLEGE NEWS

- 10 Scholarly Works Conference Recap
- 14 More Mentored-Learning Experiences
- 16 Faculty Spotlight
- 17 New Faculty
- 22 Contribution to the Discipline
- 23 Research
- 24 Faculty Achievements

ALUMNI NEWS

- 18 Alumni Updates and In Memoriam
- 19 Alumni Achievement Award
- 20 Alum Perspective
- 21 Let's Do Lunch!

ON THE COVER

BYU nursing student Karren Hunsaker Thatcher (BS '16) of Alpine, Utah, instructs village children in Vietnam about dental hygiene. Photograph by graduate student Megan Zitting (BS '09, MS '16).

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BYU nursing students hike along rice fields in northern Vietnam on their way to meet with Hmong families living in mountain villages. The trekking was part of the clinical practicum for their Public and Global Health Nursing course.



TREKKING

FOR CULTURAL UNDERSTANDING

PUBLIC & GLOBAL HEALTH IN VIETNAM

Amy Boswell looked down at her hiking shoes and sighed. The deep tread on the bottom had long since filled with mud and was now useless. She had known there would be a lot of trekking on the trip, but this went beyond that. Going straight up the mountain, no switchback trails, she wondered how the native guides ahead of her did this day in and day out. Suddenly her foot slipped. Startled, sliding, skidding, she fell. Finally stopping, covered with mud, she looked up to see a smiling guide, hand stretched out to help her back up.

In spring 2016 BYU College of Nursing students traveled to Vietnam for the first time. There they experienced a clinical practicum for the Public and Global Health Nursing course unlike any other. Students journeyed to a remote region in northern Vietnam, visited the hill tribes there, lived with local families, and provided instruction on healthcare. This cultural immersion provided an exceptional experience for students to gain perspective they will apply in their future careers.

THE PREPARATION

Associate teaching professor Cheryl A. Corbett (BS '89, MS '96) knew she needed to find a site where students

could learn from a truly foreign culture. She knew Vietnam would fit the bill, but she did not know how enthusiastic students would be.

“One of my concerns was if I would have students who would want this kind of experience,” Corbett says. “We needed students who could sleep with the bugs, live in the rafters with the people, and eat their unique foods—things which might put someone out of their comfort zone.”

Corbett pressed forward with her plan and traveled to Vietnam for a two-week scouting trip. She found great clinical opportunities among some amazing people and came back ready to take students who were willing and ready to go on an adventure.

THE TREKKING

Nestled near the Chinese border in the hills of northern Vietnam is a town called Sa Pa. Residents include people from several ethnic minorities, including the Hmong, who also live in scattered tribes across the surrounding countryside. Nursing students spent three weeks trekking up and down mountains to reach these villages. With the help of their three Hmong guides, the nursing

students were able to reach several isolated communities, sometimes hiking 10 to 12 miles per day.

“Our guides were literally in slip-on sandals running up and down the mountains,” says Boswell, a sixth-semester nursing student. “Here we were in these beautiful hiking shoes slipping and falling everywhere we went. I remember one guide, named Mai (we called her Mama), would always help us up after a fall. I especially had a reputation for falling up and down the mountains.”

With the nearest healthcare facility more than eight hours away, students had to rely on their own abilities and use caution. However, even though the trekking was more intense than expected, the group realized it was worth it as they became immersed in the unique culture.

“The people in the hill tribes are shy, but they want to share,” says associate teaching professor Karen M. Lundberg (AS ’79). “Our Hmong guides were able to get us into tiny villages that we wouldn’t have been able to get into otherwise.”

The group found that simply spending time with the people worked best to help them open up. Rather than quickly asking to see homes and healing practices,

they stopped and took the time to communicate with them through gestures, smiles, and exchanges. And with the help of their guides, the students felt the Hmong people become receptive.

HMONG HEALING PRACTICES

None of the group members will ever forget the elderly female shaman they came across performing a ceremony in one of the villages. The Hmong people believe they have a certain number of spirits in their body. When they get sick the spirits leave, and it becomes necessary for a shaman to perform rituals to collect the spirits and put them back in the bodies of patients. The memorable healing ceremony included the shaman sacrificing a duck.

Following the experience, group members were struck by the reaction from the people of the village. Lundberg recalls the trust that developed because they were accepting of the Hmong culture. “After we had that experience, the shaman asked us to see one of her grandchildren, who suffered from something like cerebral palsy,” Lundberg says. “She wanted to know if the child could be cured if he went to the hospital; the family wanted our opinion. I

believe if we had just walked in and asked if there were something we could teach or do, they wouldn’t have let us in to see this child.”

Although a hospital trip wouldn’t have cured the child, students were able to provide him with care to make him more comfortable. They found this developmentally delayed child lying in a state of atrophy. His feet had been tangled in a fishing net so tight that it cut off his circulation. The students checked his skin for breakdown, cut the nets off his toes, and explained what needed to be done to further care for him. The students smiled at the child and called him by name, hoping to provide the comfort he needed.

TEACHING AND LEARNING

Throughout their experience students learned how to build trust and listen to the people, incorporating Hmong beliefs with Western medicine to create healing together. They were also able to teach some simple healthcare practices and deliver much-needed supplies.

Eyesight is crucial in Hmong culture. Villagers make all of their own clothing, from growing the hemp plants to dyeing the finished product. The women are expected to do intricate hand stitching on all their clothing, but as they get older, they cannot see up close and can no longer be productive.

Corbett remembers distributing reading glasses they brought to these Hmong women. “To watch them put on these glasses and see a whole new world open up was so amazing,” she says. “They could see little things again. Seeing their smiling faces made me think of how much we take eyesight for granted. . . . Getting these eyeglasses was like the best present they ever had.”

Students also got to teach dental hygiene and hand-washing techniques to the Hmong people they met along the way. The students were happy to give away toothbrushes and eager to teach good practices. They found that many families had only one toothbrush to share and would often use it for cleaning purposes, including scrubbing the mud from their shoes when they got home from the rice fields.

Sixth-semester student Isaac Harmon (right) of Green River, WY, teaches first-aid skills to one of their Vietnamese guides to better serve future trek participants.





TOP: Students distribute reading glasses to assist Vietnamese women in their work of intricately beading apparel. BOTTOM: Local children practice brushing their teeth after receiving dental-hygiene training.

LIVING AMONG THE HMONG

The BYU group spent nights in the homes of the people they were visiting. They slept on mats in rafters where the families usually store their rice. During long treks and the quiet nights in the villages, students had time to reflect on the people they were around.

Boswell found the generosity of the Hmong people particularly impressive. “While trekking, those we met would invite us into their home, asking if we had eaten that day and if they could share their rice,” she says. “The Hmong people have so much less to give than I do, and they were so willing at any second to just give it. I came back realizing I need to open my heart and be more hospitable and kind to people.”

The group was also impressed by the Hmong family dynamic as the villagers sat together on the dirt floors of their homes and cooked over open fires. The

Throughout their experience **STUDENTS LEARNED HOW TO BUILD TRUST AND LISTEN TO THE PEOPLE,** incorporating Hmong beliefs with Western medicine to create healing together.

students and families would have dinner together, talk together, and laugh together.

“Dinnertime is notable for the Hmong,” Lundberg says. “Even though they just have one small light bulb hanging over the table, they sit around and talk and laugh late into the night. It was so awesome seeing how connected the families were, with several generations living in the same home.”

GIVING BACK

The Hmong people are subsistence farmers. During the planting season, whatever rice they plant is what they will live off of for the next year.

In one village, the students found a widow who was unable to get her rice planted. Instead of just observing her predicament, the students got to work in the rice paddy.

Corbett remembers how much the group learned from this experience. “Rather than put on someone else’s shoes to learn about them, we had to take ours off,” she says. “We were in the mud up to our knees for over five hours doing backbreaking work. It was so eye-opening to learn the intricate process of planting. . . . I think we all left with a new appreciation for rice. None of us ever want to let a single grain of rice fall off a table ever again.”

BRINGING IT BACK HOME

Even though their Public and Global Health Nursing course was not in a hospital setting, students found that the things they learned had extraordinary applications in their own healthcare practice.

“When students step out of their ethnocentric viewpoint,

they gain the ability to see the world in a different way,” Corbett says. “They can take that and use it whenever they treat a patient from another culture. They can understand the patient’s belief and use that to help heal them.”

And students learned that cultural beliefs can vary from patient to patient. They found that some Hmong people were culturally opposed to a hospital visit while others would choose the option when they need it.

“You can’t just assume something about an individual based on the culture,” says Megan Zitting (BS ’09, MS ’16), a graduate student who came on the trip as an assistant. “What an individual believes about healthcare and what they desire the moment they’re sick and need treatment might be completely different.”

LOOKING FORWARD

The inaugural Vietnam trip provided an excellent foundation for coming trips. This year organizers plan on helping the Hmong trek guides learn first-aid and dental-hygiene education and practices.

Students will continue to bring a minimal amount of first-aid and dental-hygiene items. They do not want to change the Hmong people, just provide them with healthcare concepts. “We want them to be self-sufficient and not rely on outsiders bringing things to them. Our plan is to bring materials they wouldn’t have access to but need,” Corbett says.

Zitting adds, “You have to dig deep and establish connections in a place before you can help them. You have to be able to see what their needs are and see what you actually can or cannot do to help them. Some people have this idea that they can just help people everywhere, but it takes some time and relationship building to be able to get in there and make a difference. And we’ve got a great start in Vietnam.” 🇻🇳

IT'S NOT THE LENGTH OF THE COAT

What **NURSE PRACTITIONERS** Can Do

BY JEFF L. PEERY

White lab coats appear in clinics, hospitals, and medical educational settings—a universal sign that the wearer is a healthcare professional. Upon closer inspection you may notice that not all white coats are alike.

The differences in length and number of pockets traditionally indicate position, sometimes establishing who has the most education or clout as a healthcare provider. Medical doctors typically have the longest coat, signifying authority in many facilities. However, regardless of coat length, all coat wearers—including physicians, nurses, and nurse practitioners (NPs)—play a vital role in the care of their patients.

Each profession has a core expertise that makes it distinct and unique. Physicians focus on diseases and how to cure them, while nurses and nurse practitioners study people—their illnesses, infections, and injuries—and how to treat them. The NP role is different than that of a registered nurse in that an NP assesses and orders tests, treatments, and medication, helps patients and their families

understand the medical diagnosis, and evaluates treatment options.

“With their advanced education, NPs give primary, acute, and specialty healthcare services to diverse populations,” says Dr. Donna Freeborn (AS ’74), BYU College of Nursing graduate program coordinator and associate professor. “They are qualified to diagnose illnesses, treat conditions, and provide evidence-based health education to their patients.” Freeborn says NPs assess their patients by examining medical histories, performing physical evaluations, and ordering or performing diagnostic tests.

Quality Healthcare by NPs

Due to their holistic approach and emphasis on patient education, NPs become ideal primary care providers. They can address risk identification and reduction while also considering preventive care through lifestyle modification. They have the advantage of working as an advocate for patients and families, defining complex terms, answering questions,



and explaining various medical care options to provide a full spectrum of care.

According to the National Council of State Boards of Nursing, NPs are governed by the Advanced Practice Registered Nurse consensus model—a set of regulations outlining the preparation, accredited education, licensure, and certification required before becoming independent providers.¹

Research by the American Association of Nurse Practitioners (AANP) suggests that individuals receiving care from an NP are satisfied with their care and have fewer unnecessary emergency visits, hospital readmissions, and preventable hospitalizations compared to patients under physician care.²

NPs not only diagnose or treat specific problems but also create integrated healthcare plans that address all of an individual patient's collective healthcare needs. "Most importantly, these professionals serve not only as healthcare providers to patients but also as educators, counselors, researchers, and mentors," says Freeborn.

The advantage of this approach is that NPs become familiar with their patients and develop trusting relationships, which allow them to monitor individual health and treatment plans over a longer period. It also allows them to follow up on courses of treatment, work in partnership with other healthcare professionals, and maintain patient files with detailed records.

Physicians often treat patients after the development of a medical problem, while NPs address the lifestyle and health of their patients as a preventative approach. Many NPs have the advantage of working closely with one or more medical doctors, with each other, or independently. This gives them the ability to collaborate, if needed, and make appropriate referrals for their patients. NPs hold prescriptive

privileges in all 50 states and can administer controlled substances in 49 states, and in 26 states they have the ability to practice independently.³

Specialization

Similar to how physicians can specialize in a particular medical field, such as cardiology or oncology, NPs can focus on a specific area of practice. They can also conduct and contribute to medical research projects and patient studies affecting their area of expertise.

The responsibilities of NPs depend on their specialization and their location of practice. Options for specialization include the following categories: acute care, adult, gerontology, neonatal, pediatric, psychiatric/mental health, and women's health, with additional clinical specialty areas such as cardiovascular, dermatology, neurology, oncology, or sports medicine.

The most popular specialization is family nurse practitioner (FNP), in which NPs provide primary and specialty care to patients throughout their lifespan. According to the AANP, 55.1 percent of all NPs choose this specialization.⁴ BYU's graduate nursing program also focuses on this area of study.

Adult-gerontology NPs—the second most popular specialization at 23.5 percent—focus specifically on adult or aging populations. Acute care NPs (7.7 percent) specialize in emergency conditions. Primary care pediatric NPs address the needs of children and compose 8.1 percent of NPs. A rare subset of this group focuses on neonatal care, which accounts for just 1.7 percent of NPs. Women's health NPs equal 5.8 percent of all practitioners and focus on reproductive and gynecologic health. Another specialization is psychiatric mental health

HONORS FOR NP PROFESSORS

Dr. Donna Freeborn was one of three volunteers honored last September at the United Way of Utah County Day of Caring. Her pro bono service as a healthcare provider on Thursday evenings for the Volunteer Care Clinic of Provo has extended over 10 years!

Lacey Eden serves in the special interest group for pediatric palliative care and immunizations in the National Association of Pediatric NPs. Eden's devotion to healing children earned her the 2017 AANP NP Award for Excellence for the state of Utah.

NPs (5.4 percent), who take a holistic approach to treatment, considering their patients' mental and physical health.

The scope of practice for NPs depends not only on their chosen specialty but also on the state in which they practice. The AANP classifies states into three groups: full practice (e.g., NV, OR, WA), reduced practice (e.g., OH, NY, UT), and restricted practice (e.g., CA, FL, TX).⁵ In states that allow full practice, NPs can assess patients, diagnose conditions, order diagnostic exams (such as blood draws or x-rays), and provide care using the scope and standards found from their state board of nursing. Those in reduced-practice states require collaboration with another healthcare provider in at least one aspect of NP practice. Utah is considered a reduced-practice state because practitioners must work with a provider until two years of licensure or 2,000 hours of experience is reached; then they can function under the full-practice requirements. Restricted-practice states require direct supervision in at least one element of NP practice.

NPs at BYU

In its more than 40 years of existence, BYU's nursing master's degree has focused on various NP specialties. Its current emphasis is FNP.

One graduate of BYU's FNP program, assistant teaching professor Lacey Eden (BS '02, MS '09), became an NP to be an educator and an influencer to her patients. She also recognizes that her decision to be an NP rather than a medical doctor helped her launch her career earlier. "A nurse practitioner plays a unique role between a registered nurse and a physician," says Eden. "NPs may gain valuable on-the-job nursing experience for several years between receiving their baccalaureate and an advanced degree. Although NPs earn a master's or a doctorate of nursing practice degree, they have the advantage of avoiding the lengthy and costly nature of the education and internships required for medical doctors; it perhaps allows an NP to launch a career in a shorter time span."

Admission to the BYU nursing master's program is competitive, with an acceptance rate of 34 percent. A maximum of 15 students per class each year take two and a half years to complete the required 59–62 credit hours. About 73 percent of the students are female and 27 percent male.

Over the past decade, the college has maintained an overall first-time certification pass rate of better than 99 percent. Graduates of the FNP program are highly sought after in the workplace, with a 100 percent employment rate after completion of the program.

The college's newly updated Mary Jane Rawlinson Geertsen Nursing Learning Center, which contributes to the high certification pass rate and employment rate, uses technology and realistic facilities to simulate real-life experiences. "Our students gain expertise through the use of unfolding case studies, standardized patients, and—beginning this academic school year—electronic medical records training," says assistant teaching professor Ryan J. Rasmussen (MS '11).

Nurse Practitioner JOB DESCRIPTION⁶

- ☐ Analyze patients' histories and symptoms to develop diagnoses
- ☐ Treat acute ailments such as illnesses, infections, and injuries
- ☐ Educate patients about self-managing acute or chronic illnesses
- ☐ Order, perform, or interpret the results of diagnostic tests
- ☐ Prescribe medication dosages and frequencies



“[FNP] students also receive hands-on training from local physicians and nurse practitioners who volunteer to be program preceptors and mentor individuals with clinical experiences in a variety of settings that provide rich learning environments.”

So does the length of a lab coat matter? For most the answer is no. Physician

and NP knowledge and patient care overlap and are complementary. NPs are vital because they provide care, education, and prevention that focus on the overall health of their patients. The FNP program at BYU prepares students to become excellent healthcare providers, mentors, educators, and advocates—long coat or no coat. 🏥

NOTES

1. https://www.ncsbn.org/Consensus_Model_for_APRN_Regulation_July_2008.pdf
2. <http://c.ymcdn.com/sites/www.pacnp.org/resource/resmgr/imported/qualityofpractice.pdf>
3. https://explorehealthcareers.org/en/Career/75/Nurse_Practitioner
4. <https://www.aanp.org/all-about-nps/np-fact-sheet>
5. <http://www.bartonassociates.com/nurse-practitioners/nurse-practitioner-scope-of-practice-laws/>
6. <http://www.onetonline.org/link/summary/29-1171.00>

How Nurses Change the World

Highlights from the Scholarly Works Conference

By **Jeff L. Peery**

Each fall semester the BYU College of Nursing hosts a conference promoting the value of research and its impact on the nursing industry. The annual conference focuses on faculty research and ways professors contribute to the nursing discipline. It also provides a venue for mentored students to share project methodology, educational

strategies, ethical issues, and utilization of nursing research. Last November's event was cosponsored by Intermountain Healthcare and attended by more than 500 nursing students, nursing faculty, and Intermountain guests.

Stephanie L. Ferguson, PhD, RN, FAAN, offered the conference keynote address. She directs the ICN Global Nursing Leadership Institute, is a World Health Organization consultant, and was a White House Fellow. She is the only nurse appointed from the National Academy of Sciences who currently advises President Donald Trump in medical trends and healthcare initiatives.

Dr. Ferguson's keynote focused on the role of nurses in creating a sustainable world by helping to ensure healthy lives and promote well-being for all. She believes that every interaction a nurse has with a person is an opportunity to contribute.

She shared how countries belonging to the World Health Organization adopted a set of goals in late September 2015 to end poverty, protect the planet, and ensure prosperity for all as part of a new sustainable development agenda. Each goal has specific targets to be achieved over the next 15 years.

"As you look at the goals, know that it's prayer time," says Ferguson. "You cannot achieve any of them if you do not have a strong belief in God, and then know that He provides for His children, but mostly through the actions of others. . . . God wants us to be there for certain people. He puts us in darkness because you will be the light."

Ferguson stressed the importance of leadership, suggesting that nurses need to be leaders not only in the nursing profession but also as CEOs of hospitals, in political roles, and in high levels of



Dean Patricia Ravert greets nursing students, college faculty, and Intermountain Healthcare guests during breakfast.



organizational influence. She says, “Each day you need to look in the mirror and say ‘Why would anyone want to be led by me?’ If you cannot answer that, then you need to reflect on your role as a nurse.”

Ferguson also discussed how nurses with leadership skills can serve as catalysts for important changes in any health-care system: “Nurse leaders are critical in improving health systems, their workplaces, and broader challenges in society through sound nursing practice, education, research, and evidence-based health and social policy changes.”

She concluded her presentation by challenging conference participants to develop characteristics that will bring career success: perseverance, ambition, passion, courage, heart, humor, and talent.

After Dr. Ferguson’s address, the conference offered participants a variety of breakout sessions to attend, giving them the opportunity to hear from faculty, students, and Intermountain staff on research projects they have conducted and found of value to the nursing profession.

Nearly a dozen of the breakout sessions came from Intermountain nursing staff and administrators. Highlights included “The Career Paths of Female Nurses: Decisions Associated with Intention to Leave Direct Patient Care,” by assistant vice president of nursing Linda Hofmann (MS ’90), and “Development and Validation of the Intermountain Pain-Assessment Tool,” by Bridget Shears, Stephanie Stokes, and Glen McBride.

Some breakout sessions were presented exclusively by nursing students, such as “Future Healthcare Providers Gain New Insights Through Poverty Simulation,” by fifth-semester student Mike P. McNeil, with faculty guidance from assistant



Left: Recent graduate Rebecca Swenson Edmunds and Dr. Neil Peterson share data on fitness-band activity trackers at one of the many breakout sessions, which were presented by nursing professors and the student research assistants they mentored as well as by nursing professionals.



Right: More than 500 people participated in the annual conference.

“Nurse leaders are critical in improving health systems, their workplaces, and broader challenges in society through sound nursing practice, education, research, and evidence-based health and social policy changes.”

—Stephanie L. Ferguson

teaching professor Gaye C. Ray (AS ’81); “Health-Promoting Student Activities in Vietnam Hill Tribes,” presented by recent grads Laci Hendricks Sharp (BS ’16) and Karren Hunsaker Thatcher (BS ’16), under the mentoring of associate teaching professors Cheryl S. Corbett (BS ’89, MS ’96) and Karen M. Lundberg (AS ’79); and “Childhood Vaccination Exemptions: Are All States Doing the Same Thing?” by graduate student Emily Groth Dunn (BS ’09), mentored by several faculty members, including associate professor Dr. Beth M. Luthy (MS ’05).

Other presentations were a mixture of faculty members and nursing students, such as “Rudolf Travels Beyond Provo: International Nursing Student Collaborative Learning,” by sixth-semester

student Tara E. Yergensen and assistant teaching professor Dr. Leslie W. Miles (AS ’83, BS ’99), and “Systematic Literature Review: Staff-Oriented Fall-Prevention Education in Long-Term Care and Rehabilitation,” featuring recent grad Megan A. Parr (BS ’16) and assistant teaching professor Dr. Blaine A. Winters.

Based on event evaluation, participants appreciated the time their peers and professors took to share the results of their studies. Most were not aware of the mentoring opportunities students have to work in close collaboration with faculty members. It also sparked interest in learning how to apply for campus grants for similar experiences and to share in faculty member research—all desired outcomes for the event. 📌

Help Celebrate the College's

65th

Anniversary

To recognize the 65th anniversary of the Brigham Young University College of Nursing—established on September 29, 1952—we're inviting all alumni and students to help celebrate. Since the influence of our program is known worldwide, we're wondering, "Where will the college logo travel in the next six months?"

From now until September, we are asking our alums, students, and friends to do the following:

1. Cut out or photocopy the college logo on the next page.
2. Bring the logo with you on your journeys—near and far—this spring and summer.
3. Take a photo of you, your family, or your friends with the logo in front of your favorite location.
4. Post your images on Facebook or Instagram and use the hashtag **#YNursing52**.

If you are not planning any trips, no need to worry. Snap an image in your backyard, community, or workplace. These photos will track all of the adventures and accomplishments of our alumni and students. We're planning a display in the fall 2017 issue of the magazine, during Homecoming, and at the Scholarly Works Conference in October. To be considered for inclusion in the fall magazine, entries must be received by June 15; otherwise, photos are due September 15.

You don't do social media? Email high-resolution photos (JPG file in original size) to nursingpr@byu.edu, or mail them to BYU College of Nursing, 65th Anniversary Celebration, 572 SWKT, Provo, UT 84602.

Let's see how far our celebration can go! Who will take the logo with them? Stay tuned. 📷

KAYLEE HUNSAKER, WASHINGTON, DC



COULETTE WALTON, WYOMING

CORY PAUL, ANTARCTICA



EMILY GARDNER, DISNEY WORLD





#YNursing52

More Mentored-Learning Experiences

This article is a continuation of the article “A Mentored-Learning Experience and You,” printed in the spring 2016 issue. Read the article online at <http://bit.ly/2jEWCN8>.

By Jeff L. Peery

The BYU College of Nursing’s mentored-learning program has seen an increase in the number of students desiring to participate. Faculty members have also established more projects in which students can work directly with them in their field of research or on projects contributing to the discipline.

As announced last year, the college started a campaign to raise money for the Mentored Learning Endowed Fund. The interest from this endowed fund will be used for college grants to further support faculty members who are mentoring students in various methods. These mentored students work as research or teaching assistants (RAs), assist with faculty projects, and disseminate findings or outcomes at conferences and in journal articles.

We are pleased to announce that the campaign has reached \$320,000—16 percent of the \$2 million goal. Dean Patricia Ravert (AS ’74, BS ’75, MS ’94) has encouraged alumni, students, and friends

of the college to read about our fundraising efforts in past college magazines, and she is asking individuals to make a donation online at give.byu.edu/nursing (select “Nursing Mentored Learning” as the account).

Mentoring is as vital to a faculty member’s success as is teaching and participating in scholarly works. This initiative benefits both mentors and students as it advances the discipline and ensures the quality and commitment of the next generation of nursing scholars. The 2016 spring magazine contains four examples of how professors have used mentored learning to enhance the education of nursing students. Below are five additional examples.

- 5 Undergraduate nursing student Robin Grigg (BS ’16) worked under the supervision of professor Dr. Renea L. Beckstrand (AS ’81, BS ’83, MS ’87) to examine end-of-life care in the United States. With Beckstrand’s help, Grigg sent out 2,000 surveys to nurses across the country asking about their experiences in this field, and she analyzed their responses to determine the main concerns facing nurses in these situations. The results helped her figure out ways to be a better end-of-life care nurse by showing her what others had learned. There were also unexpected outcomes from the experience: she learned to love research and became more interested in family history work. Grigg also came to love the example of her mentor, Dr. Beckstrand, and hopes to become like her by eventually teaching at the college. Another RA, sixth-semester nursing student Bekah Leavitt, learned to appreciate research through Beckstrand’s work. Together they researched various hospitals, calling the facilities to see if they had a functioning ICU. Not only did Leavitt gain respect for the intense effort that research requires, but she valued the opportunity to represent BYU to many hospitals that had not heard of the school.

Mentoring is as vital to a faculty member’s success as is teaching and participating in scholarly works. This initiative benefits both mentors and students as it advances the discipline and ensures the quality and commitment of the next generation of nursing scholars.

\$2,000,000

\$1,750,000

\$1,500,000

\$1,250,000

\$1,000,000

\$750,000

\$500,000

\$250,000

6 Assistant teaching professor Gaye C. Ray (AS '81) worked with four students—Lindsay Dixon Leonard (BS '16), Stephen Winert (BS '16), Brady Shepherd (BS '16), and sixth-semester student Elizabeth Kerr—to prepare a seminar on intraosseous (IO) vascular access for nurses at the Lyndon B. Johnson Tropical Medical Center in American Samoa. IO vascular access is a procedure in which medical staff members drill into the bone to administer medication to a patient whose veins cannot be located. On a previous visit to the center, students had found that IO techniques were almost unheard of there. Students, under the direction of faculty, studied Samoan culture and then planned the IO course. They taught it in May 2016, and results from post-conference studies indicate that the Samoan nurses felt more confident in using IO techniques. In fact, the training led to the requirement that nurses at the center receive special IO training to qualify for individual certificates.

7 Winert was also mentored by another faculty member, associate professor Dr. Katreena Collette-Merrill (AS '83, BS '85), who offered Winert help as they worked together to produce patient-safety awareness programs. Winert gained experience with research techniques and with the ethics of nursing. His approach allowed him to study topics most interesting to him. Thanks to the support of Collette-Merrill, he attended the Nursing Management Congress last year in Las Vegas. It gave him a new career perspective and focus that influenced him in the weeks preceding his graduation.

8 Assistant professor Dr. Deborah O. Himes (BS '91) used an in-house college grant to take two master's students to participate in podium presentations with her at the International Society of Nurses in Genetics World Congress in Dublin, Ireland, last August. A couple of weeks before commencement, nursing graduate student Maren L. Zaro (MS '16) was able to travel with Himes to Ireland

to share their findings on breast-cancer risk assessment and an evaluation of referral tools for genetic consultation. In addition, second-year graduate student Aubri E. Root (BS '10) worked closely with Himes while writing a scholarly article based on calculating lifetime risk for breast cancer using the Tyrer-Cuzick model (which is part of Himes' research interest). Because of this guidance in the mentored-learning environment, both students developed logical thinking and analytical skills to apply information in new ways.

9 According to the Centers for Disease Control and Prevention, every 20 minutes in the United States an elderly adult dies from a fall. By obtaining BYU experiential-learning monies, assistant teaching professor Dr. Blaine A. Winters and RA Megan Parr (BS '16) worked to find ways to lower those grim

statistics. Winters and Parr researched medical literature to find leading causes of falls and the best ways to prevent them. Their research showed that training staff on fall prevention was extremely useful. With Winters' help, Parr shared their findings in a podium presentation at the Utah Nurses Association fall conference in Salt Lake City last November and in a breakout session for the college's annual Scholarly Works Conference (see related story on page 10). Because of this opportunity to be included in the research with faculty guidance, Parr successfully fulfilled the role of an RA, gained organizational skills as an undergraduate, and learned that small actions make a difference.

Through additional donations to the college fund, more students can have a similar experience and appreciate the value of mentoring in the nursing profession. 

16 Ways Students Benefit from Mentored Learning

1. Learn directly from a credible, positive role model
2. Explore diverse perspectives and opportunities
3. Foster accountability to work ethically and accurately
4. Discover additional topics for further mentoring
5. Acquire knowledge and expertise in subject areas beyond classroom options
6. Enhance leadership, management, and problem-solving skills
7. Study research procedures and standards
8. Collect and analyze data to develop critical-thinking abilities
9. Understand how to work as a team member
10. Gain confidence by sharing findings through trade journals and at professional conference presentations (podium or poster results)
11. Receive recognition as coauthor on posters or in publications
12. Expand network
13. Secure financial support for projects
14. Develop skills to conduct nursing research in the future
15. Prepare for graduate school and advanced learning
16. Practice balancing collaborative and individual work

Learning from a Military Nurse

By **Steven C. Tibbitts**

There are very few people who can talk about NATO, nursing, and kimchi in the same conversation. Assistant teaching professor Debra Wing is one of them.

Wing's passion for nursing started while she was young. That passion also runs in the family: one of Wing's nursing professors at Weber State University was her older sister.

"I have always felt that nursing was paramount," Wing says. "To me the one-on-one aspect that you give to your patient and the love and respect that you offer them is an opportunity to show them you are walking in the Savior's shoes. You are truly His representative."

The emphasis on providing care in the Savior's way has served Wing immensely during her career.

Both Wing and her husband served in the U.S. Air Force as medical personnel.

They have had joint assignments with NATO and with the Surgeon General of the Air National Guard office. "My husband is a hospital administrator, so he ran hospitals for the air force all over the world," she says. "We've been able to see some fascinating things." Her husband is a veteran of three wars, while Wing is a veteran of two.

"I've worked just about everywhere you can work in a hospital setting," Wing says. Her list of assignments is almost as extensive as the list of countries that she and her husband have visited and lived in (42 between the two of them). These include being a charge nurse, a nurse manager, a chief nurse executive, and a school nurse. Additionally she served as the clinical oversight for EMEDS (Expeditionary Medical Support) training for the Air National Guard.

feared for his safety. After two hours of searching, Wing's husband found their son safe and sound with a Turkish security guard. A traveler had come across the wandering child and brought him to the guard, who did not speak English. While efforts were made to locate the child's parents, the guard calmed the weeping toddler by bringing him ice cream and attempting conversation, despite the language barrier. The tenderness of the moment altered Wing's perception of the Turkish people forever. "That was a changing point for me," she says.

In May 2016, Wing and her husband returned from a one-year military relations mission for The Church of Jesus Christ of Latter-day Saints in South Korea. Back at BYU now, she teaches a number of courses (including Community Health Nursing and the senior-level

"I've worked just about everywhere you can work in a hospital setting," Wing says. Her list of assignments is almost as extensive as the list of countries that she and her husband have visited and lived in (42 between the two of them).

"EMEDS is the modern version of MASH. I had the responsibility to train physicians, nurses, techs, and dentists in wartime delivery of care in trauma," Wing says. In fact this assignment was where Wing first became acquainted with simulation training, which she has used in her college positions at BYU since joining the faculty in 2010.

With these military assignments came travel. Of all the places the family lived, Turkey was a favorite. "My children will say that they're half Turkish," Wing jokes.

One of her most impactful experiences was when her then 3-year-old son was lost in a crowd in a Turkish airport. Having heard horror stories about Turkey, she

career class Strategies for Employment) and leads a clinical practicum for the Public and Global Health Nursing course each spring—this year in Finland and the Czech Republic.

"I love the students," she says. "There is something so exciting about watching the students grow and progress, and things that were so difficult for them at the beginning of the nursing program are second nature by the time they get to capstone, and then to see them integrate everything they've learned in a capstone experience—I think that is my favorite."

Wing and her husband have three children and three grandchildren, whom she describes as the joy of her life. ■



New Faculty

Several new faculty members recently joined the College of Nursing. Two are highlighted here, with others to be featured in future publications.

Something to Look Up To

TRACY W. DUSTIN, MSN-ED, RN



After four years as an adjunct faculty clinical instructor, Tracy Dustin is the newest addition to the BYU College of Nursing. With more than 20 years of experience in both academic and clinical settings, she brings a unique and seasoned perspective to her role as an assistant teaching professor.

Dustin received her bachelor's degree from the University of Utah and her master's from Westminster College. She spent 27 years at the VA Medical Center in Salt Lake City and worked as adjunct faculty for both BYU and Westminster College. She has received awards for excellence both as a student and as a professional.

Her Ute background isn't exactly commonplace at BYU, but she keeps a good humor about it. "Different sides of my extended family are gung-ho Ute fans," she says. "I am proud to be an alum with a family legacy of the Utes. They make fun of me for working behind enemy lines, but when we tease each other, it's all in good fun."

Growing up, Dustin loved medicine and got involved at a young age. At 13 she was already volunteering as a candy stripper

Growing up, Dustin loved medicine and got involved at a young age. At 13 she was already volunteering as a candy stripper in the hospital.

in the hospital. She enjoyed interacting with the patients, whether she was taking them different places in the hospital or simply working in the gift store.

Dustin was drawn to the BYU College of Nursing because of its reputation, its faculty, and the students she interacted with as a clinical instructor at the VA. "I love the spirit that is here, and it's nowhere else," she says. "Anywhere else you'd have to be careful about bringing up religious topics around students, but here it's so great to have that freedom. Working with the faculty has been amazing as well. They are all great, remarkable people. The things that they do and have achieved are so amazing; it's something to look up to."

When she leaves work for the day, Dustin most looks forward to seeing her family. She loves being with her husband, two sons, daughter-in-law, two cats, and grand-puppy. She is usually training for another marathon or triathlon and says she exercises diligently so she can eat what she wants. The next bike race and marathon on her list are coming up in April. 🏃‍♀️

A Positive Attitude

SCOTT K. SUMMERS, MS, FNP-C



Most people would quickly retreat if they came across a bear in the wilderness. Not new faculty member Scott Summers (MS '11). Recently while running, he and a friend came across a black bear in Rock Canyon (east of Provo). Since his friend had never seen a wild bear, Summers helped maneuver the two until they were behind the animal. (They got great pictures!)

A native of Ammon, Idaho, Summers always looked up to his father, who was a nurse. His father's example inspired Summers to follow in his footsteps. Summers got his bachelor's degree at Idaho State University; however, he didn't just get an education there—that is where he met his wife, Kendra. The couple now has three children.

Summers is an avid outdoorsman. His goal is to climb all of the major peaks in the Teton Range, and he is making steady progress. In fact, Koven (his 3-year-old son) was named after a peak that Summers summited shortly before Koven's birth.

He loves teaching at BYU and interacting with students and fellow faculty members. In fact, he and assistant teaching professors Craig Nuttall (MS '11) and Ryan Rasmussen (MS '11)

Summers always looked up to his father, who was a nurse. His father's example inspired Summers to follow in his footsteps.

all went through BYU's College of Nursing graduate program together and have offices in the same hall.

Hispanic culture also is a large part of Summers' life. He served a mission in Rosario, Argentina, for The Church of Jesus Christ of Latter-day Saints and still uses his Spanish in his clinical work. He will help lead nursing students in the Ecuador section of the clinical practicum for the Public and Global Health Nursing course in May.

An assistant teaching professor, Summers has served as a nurse practitioner with Revere Health for the last five years. He instructs Nursing Care of Adults in Crisis and supports several nursing capstone projects.

To struggling students Summers recommends just being happy and not sweating the small stuff. "Your time at BYU is not just about getting a classroom education," he says. "It also includes all the relationships that you make. I firmly believe that having a positive attitude is a great start to improving one's situation and that there is always something to be excited about." 🏡

Alumni Updates



Each year on the Saturday of BYU Homecoming, the BYU College of Nursing alumni board sponsors a service project to make hundreds of kits (newborn, dental, hygiene, etc.) that nursing students distribute during the clinical practicum of the Public and Global Health Nursing course each spring. Pictured above are event organizers (left) **Nancy Kuehner Kraus (AS '80, BS '82)** of Trabuco Canyon, CA, and **Tiffany Poulsen Schwebach (BS '99)** of Kaysville, UT.

Carol Larsen Jackson (BS '66) went back to work part-time with NXP Semiconductors in Mesa, Arizona, after serving as a health missionary in Quetzaltenango, Guatemala, and working 25 years as a certified occupational health nurse with Freescale Semiconductor in Chandler, Arizona.

Marci Smith Curran (AS '82, BS '90) has more than 10 years of experience in psychiatric care with emphasis in residential. She is currently serving as a juvenile justice faculty practice RN in Salt Lake County.

Karen Eliason Asay (AS '84) returned to school at Texas Woman's University to complete a bachelor's degree in nutrition and wellness. She is a certified health education specialist in the Dallas area.

Tracey Bates Long (BS '86) recently published *Mommy the Builder*, a children's book about the creation of the amazing human body; her daughter Brittany Olsen illustrated the book.

Christina Robinson Sommers (BS '89) has spent 10 years as a clinical educator for perioperative services with Dignity Health in Henderson, Nevada.

Christine A. Tanner (BS '89) worked in home healthcare for 11 years after graduation. Then she obtained an MBA and became

a contract nurse for 12 years with a company that oversees long-term care insurance policies (and still does this in her spare time). For the past four years, she has served as director of BYU OneStop, a campus organization that helps students with financial aid, scholarships, and class registration. She is grateful for the education and degree she received from the nursing program.

Jody Christensen Osteyee (MS '91) has worked as a pediatric acute-care clinical nurse specialist at Primary Children's Hospital for 16 years. She also serves on the alumni board of the University of Utah College of Nursing.

Tracey Baron Haun (BS '98) is now a staff nurse specialist for labor and delivery at Soin Medical Center, part of the Kettering Health Network in southwestern Ohio.

Theresa Mooney Bess (BS '04) earned a master's degree from Arizona State University and is a nurse practitioner providing care to women in Chandler, Arizona.

Ethel Tovar Christensen (BS '06) became a unit education consultant in the newborn ICU at Primary Children's Hospital in Salt Lake City.

Timothy M. Naylor (BS '07) is a certified registered nurse anesthetist and has provided more than 5,000 safely administered anesthetics. He works for Arroyo Anesthesia Associates LLC in the Phoenix, Arizona, area.

Spencer B. Cahoon (BS '12) will soon complete a master of healthcare administration degree from the University of Minnesota School of Public Health. He received more than \$22,000 in scholarship awards and was part of a CLARION 2016 first-place winning team.

New promotion? Advanced degree? Recently published? Let your peers across the country know of your success and status. Email nursingpr@byu.edu. Your news may be included in the next edition of *Learning the Healer's Art*.

IN MEMORIAM

Mary Jo Henricksen Brady (BS '60)

Elaine Lucile Conyers VanDam (AS '71)

Jackie Lynne Boulton Hatch (AS '74)

Sara Udall Sullivan Henderson (AS '76)

Susan Georgina Coons Horne (AS '76)

Mickie Jo Stewart (AS '76)

Lorie Larsen Blair (AS '77, BS '81)

Rayola Hodgkinson Andersen (MS '79)

JoAnn Reeve (AS '79)

Carolyn A. Mathews Raat (MS '83)

The Importance of Apologies

By **Jeff L. Peery**

Marie Prothero received the college's 2016 Alumni Achievement Award in recognition for her contribution to the nursing profession. This article contains excerpts from her BYU Homecoming address, delivered October 13, 2016.

"I believe that for us to move healthcare forward into achieving quality healthcare and outcomes, [we must] have transparency," says Marie Mellor Prothero (MS '96), MSN, RN, FACHE. A nurse administrator, Prothero is the executive director of quality for St. Mark's Hospital in Salt Lake City. She oversees quality assurance for her organization that includes electronic reporting, patient concerns, and physician compliance. She also strives to improve process flow and safety efforts. Prothero is currently working on a PhD in nursing from the University of Utah; her dissertation is focused on transpar-

there is a medical mistake or accident. "We must realize [that the] consequences of not apologizing affects our emotional, spiritual, and physical well-being," says Prothero. "And if left unresolved, [mistakes] can create feelings of bitterness and even increase litigation and settlement costs."

To give an effective apology, one must express regret and sorrow; you cannot fully apologize without remorse. "A conversation casually informing a patient of the error is inadequate," says Prothero, "and so is a statement that seems forced and insults others' intelligence." Appropriately apologizing takes the right setting and practice.

Prothero's research serves as a starting point for additional inquiry to explore the nature and types of apologies. It will help other nurse leaders identify what comes after the apology

and if the patient-provider relationship can be repaired. "There must be ongoing communication as additional details are learned—with the patient and family members, as well as with unit staff and hospital administrators," she says. "Once we identify system changes, we need to involve others in the process to ensure needs are met and proper training occurs."

Further, Prothero's studies clarify the role of nursing in disclosure, apology, and



the creation of a culture of safety in which everyone feels valued and able to speak up. "We must continue the important work of quality assurance, process improvement, and system improvement," she says. "Never forget that

every patient matters."

She also emphasizes that nurses have the opportunity to be leaders with a broad impact in their organization. "Leadership is interdisciplinary and [is] a team approach," she says. "You must know your strengths and weaknesses and understand what you bring to the team. Then surround yourself with people who are different from you and learn from each other for success."

Prothero has been a leader her whole career. Before St. Mark's, she was the CEO of Utah Valley Specialty Hospital in Provo for seven years, a CEO of Ernest Health for four years, and an operations officer with Intermountain Healthcare for 22 years.

"Never stop learning and developing your nursing and leadership skills," she concludes. "Success comes from ensuring the success of your peers. Take time to remove roadblocks, recognize achievement, and encourage others. By being a positive influence, you can see the best in your team." ■

Visit nursing.byu.edu to watch a video spotlight on Prothero.

Prothero's studies clarify the role of nursing in disclosure, apology, and the creation of a culture of safety in which everyone feels valued and able to speak up.

ency in healthcare and the role of an apology following a medical error.

The attributes of an apology include expressing regret and sorrow, admitting fault with a statement that an error occurred, listening with dignity and respect, correcting the mistake and ensuring it will not happen again, and offering restitution to the victim.

Her studies highlight several antecedents, such as why we apologize and the corollaries of not apologizing when

An Education and a Diagnosis Saved My Husband's Life

Adapted from material submitted by **Kayla S. Nelson**

As many BYU students and graduates can attest, life does not always go according to plan. Some nursing graduates must constantly readjust their personal blueprints, which oftentimes leads to a more satisfying life.

Alumna Kayla Stiles Nelson (BS '15) knows this very well—except the tweaking of her career path not only lead to a happier lifestyle but also helped her save her husband's life.

Colon cancer is rare in patients as young as 24-year-old Austin, so the fact that they had found it at all was a miracle. This was just one of many miracles that followed.

Nelson, a native of Boise, Idaho, did not originally intend to be a nurse. "When I entered BYU in the fall of 2010, I planned on majoring in exercise science and going on to physical therapy school," she says. "I always had a love for the human body and all things medical."

Soon the first of many life changes occurred. Her father expressed sentiments that she needed to enter the nursing program. Nelson in turn prayed about the option and applied to the BYU College of Nursing. She was accepted and quickly found that she had an affinity for the discipline. "I was ecstatic and soaked up everything I could in my nursing courses," she says. "During my time in the College of Nursing, I realized that nursing was my calling, and I absolutely loved it. I particularly enjoyed working with the women's health/OB/newborn population

and hoped to get a job somewhere within that specialty when I graduated."

In December 2013 Nelson married her husband, Austin. After her April 2015 graduation they moved to Boise, where Nelson worked to find a job in her preferred specialty. But nothing panned out. She finally accepted a position at St. Luke's Regional Medical Center working with abdominal-surgery patients. She acclimated swiftly and began to enjoy the

position. Her boss even offered her the chance to be a relief charge nurse despite her short time in the field.

In August 2016, however, the real benefits of the job began to manifest themselves in a unique way.

Austin began having dark bowel movements that resembled those of patients at the hospital. Recognizing the seriousness of the situation, Nelson convinced him to visit a doctor. Per Nelson's request, that doctor referred Austin to a gastrointestinal specialist with whom Nelson worked.

The specialist found a 3-centimeter cancerous tumor in Austin's colon. The good news was that it had not



PROVIDED BY NELSON FAMILY

metastasized. Colon cancer is rare in patients as young as 24-year-old Austin, so the fact that they had found it at all was a miracle. This was just one of many miracles that followed.

"The two best colorectal surgeons in Idaho work at St. Luke's—my hospital—and their patients routinely come to the sixth floor after surgery," Nelson says. "I cannot express what a comfort it was to be able to choose and personally know the surgeon who would be operating on my husband."

The surgery went well, and several of Nelson's coworkers cared for Austin during his stay at the hospital. He is currently undergoing chemotherapy.

Nelson feels extreme gratitude to God for the changes in her life that led her to nursing. "I will forever be grateful to our Heavenly Father, who provided me with a passion for medicine, guided me to the College of Nursing, and specifically planted me on a hospital floor that would provide me with the knowledge I needed to help my husband," she says. "The College of Nursing successfully prepared me to be the kind of nurse that my husband and our families would need at the most difficult time in our lives." 🙏

As a BYU alum, how has your College of Nursing degree blessed or saved a life? Submit experiences to nursingpr@byu.edu. Authors whose stories are published will receive a college-logo key tag.

Hey, Alumni: Let's Do Lunch!

By **Jean M. Bigelow** (AS '80, BS '82),
Nursing Alumni Board Chair

The college's Semiannual Speed "Nurse-working" Luncheon is a unique opportunity for BYU nursing students to interact with alumni. Similar to speed dating, the event has alumni change tables five times—for each course of the meal—to meet more people.



Aubri Root (BS '10) was among the 30 alumni who participated in the recent speed luncheon.



Rachel Pulsipher Wells (BS '14) works in the Neurological Critical Care Unit at Utah Valley Hospital. Even with just two years of experience, she feels like her insight can benefit luncheon participants.

Sitting with senior nursing students, BYU College of Nursing alumni informally share their personal tips and insights for managing a successful nursing career. Students value the experience as they meet alumni who are working RNs, learn about nursing careers, network for job opportunities, and ask questions. They can also exchange contact information for further connecting or mentoring.

The next luncheons will be October 18 and again in February on BYU campus. There is no cost to participate, but space is limited. RSVP to nursingpr@byu.edu. 🇺🇸



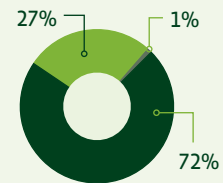
Alumni change tables about every 12 minutes, which allows them to meet with more students.



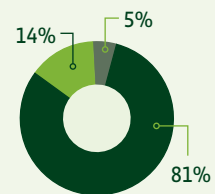
Dean Patricia Ravert (AS '74, BS '75, MS '94) shares details of her nursing career with students at this semiannual event.

The following are survey responses from those who attended the activity on February 2, 2017.

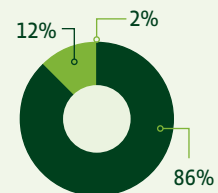
■ STRONGLY AGREE
■ AGREE
■ OTHER RESPONSE



This event helped me connect with alumni and healthcare professionals associated with the College of Nursing.



The activity allowed me to gain insights from working RNs.



By attending, I had chances to ask questions and learn from others.

The Use of Soy Milk and Persistence

Sondra S. Heaston, Associate Teaching Professor, MS, NP-C, CEN, CNE



In less-developed countries where appropriate prevention methods are limited or unavailable, easily preventable diseases can quickly escalate into serious health crises. Such is the case with anemia, or iron deficiency, in South America, according to associate teaching professor Sondra S. Heaston (MS '05).

The World Health Organization (WHO) states that the anemia rate for preschool-age children in the United States is 3.1 percent. In Ecuador the rate is 37.9 percent, which WHO classifies as a moderate health problem (<http://bit.ly/2gYmXA8>).

Heaston, along with teaching professor Dr. Sheri P. Palmer (AS '81, BS '84) and a dozen BYU nursing students, has

Heaston and her team have had considerable success with their research and intervention studies thus far, and they are working to eliminate redundant variables to choose the best treatment plan.

nursing faculty, students, HDC, and reviewing literature to develop some ideas for different interventions.

They determined two possible factors. First, the children in rural Guayaquil neighborhoods get limited nutrients from their diet. Heaston says that this is due to economic conditions, as most children's diets consist primarily of white rice—a low-cost option that fills stomachs but has little nutritional value. Second, the children may suffer from parasites (contracted from contaminated water) that

dropped to 13 percent. When the college team returned in May 2013, they discovered that the anemia averages had risen to 30 percent. One explanation is that the summer break in Ecuador is from January to April, so the kids had not received treatments for four months.

Since then soy milk fortified with a supplement created by a BYU Department of Nutrition graduate student was researched. The children continue to be tested every six months. The latest batch of data from November is still being analyzed, but Heaston, Palmer, and others are working with HDC and the local government to determine an intervention that will be sustainable and reliable. They have had considerable success with their research and intervention studies thus far, and they are working to eliminate redundant variables to choose the best treatment plan.

The local press and government of Guayaquil are highly receptive to BYU's presence and efforts. They realize that healthcare and education have a cyclical relationship: the better healthcare education individuals receive, the better they can prevent disease and live healthy lifestyles; and the healthier people are, the better they will succeed educationally and professionally, benefiting the entire community.

Heaston hopes students understand the voice they have on issues that are important to them. She knows that they can help build a better world, one person at a time—just as she has done in Ecuador. ■

Heaston and her team set out to develop treatments ranging from an iron-fortified vitamin and an antiparasitic medicine to an in-school snack consisting of a roll and soy milk fortified with a supplement created by a BYU Department of Nutrition graduate student.

been traveling annually to Guayaquil, Ecuador, since 2005 as part of the college's clinical practicum for the Public and Global Health Nursing course. They work in close cooperation with local hospitals, government officials, and the nonprofit organization Hogar de Cristo (HDC).

In 2008 HDC approached the college about anemia in Guayaquil's school children. On her next trip to the country, Heaston began tracking the height, weight, and hemoglobin levels of these children. The sample research found that up to 48 percent of the children they tested suffered from anemia, which prompted Heaston to collaborate with

prevent the body from properly absorbing nutrients such as iron.

With these two causes in mind, Heaston, HDC leaders, and students set out to develop treatments ranging from an iron-fortified vitamin and an antiparasitic medicine to an in-school snack consisting of a roll and soy milk. Additionally, all schools received dietary education presented by a local nutritionist working for the Ministry of Health in Guayaquil.

For the past two years, Heaston and her team of students have tested the children in May, with a smaller group returning again in November. Just six months after intervention treatments began, the average anemia rate had

Working Hard or Hardly Working? Peterson Uses Activity Trackers to Find Out

Neil Peterson, Assistant Professor, PhD, RN, NP-C, AGACNP-BC



Dr. Neil Peterson (BS '07), an assistant professor in the BYU College of Nursing, has been investigating the impact of fitness-recording devices on the activity levels of young adults. These mechanisms are widely advertised to provide positive effects on

the wearer's behaviors and overall health. His research aims to find how the devices affect the desire to exercise and then identify ways to augment that desire.

When he began his research, Peterson's main question was, do these tools have any noticeable effect on fitness levels? Also, which of the plethora of devices, with their myriad accessories and features, induces higher activity levels?

To address these questions, Peterson chose four devices to test: the Apple Watch, Fitbit Surge, Basis Peak, and Microsoft Band.

Initially, Peterson needed to know if the devices were accurate. Overstating or understating activity levels would be detrimental to achieving fitness goals. With the help of student research assistants from the nursing program and exercise science program, Peterson brought in roughly 50 individuals from the community to perform basic tasks, like walking and typing, while wearing one of the trackers. Every participant wore each of the devices in the study and offered feedback. Data evaluation is ongoing, but the initial evidence seems to indicate that the Apple Watch and the Basis Peak were the most precise in recording activity levels.

Next came the tests to determine the overall impact of the devices. Through social media and public announcements, Peterson and his team of students

While it is too early to give definitive conclusions, it appears that subjects were more active while wearing the devices that presented activity levels.

recruited more than 100 people to participate. Participants were 18–29 years old, which Peterson says is the ideal age range for individuals to develop health-centered habits.

Subjects first wore a tracker around their waists that did not display their exercise information—out of sight and out of mind. It was worn for a week, with the goal to identify the activity levels of participants when they couldn't see specific data about their fitness levels.

The next week, subjects wore both the non-display tracker and one of the four devices mentioned above (assigned randomly), so they could see how active they were. At the end of the week, participants returned the devices and also filled out a survey about their experiences.

While it is too early to give definitive conclusions, it appears that subjects were more active while wearing the devices that presented activity levels.

The survey answers provided by participants proffered valuable insights into how the users perceived their devices. The Apple Watch and the Fitbit Surge scored highest across the board, but the Fitbit Surge was better ranked regarding user-friendliness and battery life. The Apple Watch, while offering many additional benefits beyond fitness tracking, was more intricate and harder to understand.

Some interesting demographic insights came out of this study. Peterson says that women expressed distaste for wearing a bulkier device, like the Apple Watch; however, some women who were very health-oriented did not mind the cumbersome nature of the watch.

One unique aspect of Peterson's research, which was funded in part by university experiential-learning monies, was the degree of involvement for nursing students—several of whom had received an Office of Research & Creative Activities (ORCA) grant for working with Dr. Peterson in this study. For example, one student was in charge of maintaining the study's email account and coordinating with study participants. Other students served as experts on the various devices, while some recorded data. All received hands-on experience working with a professor and being responsible for smaller parts of a larger investigation.

Peterson also became an ambassador for the Exercise Is Medicine national initiative and organized a campus leadership team with assistant teaching professor Craig Nuttall (MS '11). Their group sponsored a free 3K Pokéthon fun walk for the university last October. In addition, Peterson had two research assistants help plan and organize the activity, in which 112 activity participants and 28 volunteers and organizers participated and were encouraged to dress up as their favorite Pokémon or Trainer or in their team colors as they walked around campus.

Peterson hopes that this research can be used in the future both by tracker manufacturers to create better devices and by healthcare providers to utilize these tools in promoting fitness. He is in the process of procuring more devices to expand the study. 📍

Faculty Achievements

College of Nursing faculty members continue to showcase their dedication to and expertise in the healthcare industry through a variety of achievements and publications. Following are a few notable examples of what they have accomplished.

JOURNAL ARTICLES PUBLISHED

Blad, K. D., Robinson, T.~, & Newman, P.~ (2016). To know them is to care for them better: Teaching healthcare educators on caring for veterans. *Annals of Global Health*, 82(3), 405. doi:10.1016/j.aogh.2016.04.134

Burkinshaw, S.~, & Macintosh, J. L. (2016). A literature review of barriers to immunization in preterm, low-birth-weight, and very-low birth weight infants. *All Student Publications*, paper 150. <http://scholarsarchive.byu.edu/studentpub/150>

Callister, L. C.~ (2016). Strategies to empower women across the globe: 100 under 100. *MCN: The American Journal of Maternal/Child Nursing*, 41(6), 375.

Himes, D. O., Luthy, K. E., Root, A. E.~, & Gammon, A. (2016). Breast cancer risk assessment: Calculating lifetime risk using the Tyrer-Cuzick model. *All Faculty Publications*, paper 1743. <http://scholarsarchive.byu.edu/facpub/1743>

Himes, D. O., Root, A. E.~, Gammon, A., & Luthy, K. E. (2016). Breast cancer risk assessment: Calculating lifetime risk using the Tyrer-Cuzick model. *The Journal for Nurse Practitioners*, 12(9), 581–592. doi:10.1016/j.nurpra.2016.07.027

Larimer, S. M.~, Freeborn, D. S., & Luthy, K. E. (2016). Differentiating celiac disease, lactose intolerance, and irritable bowel syndrome in the primary care setting. *All Student Publications*, paper 182. <http://scholarsarchive.byu.edu/studentpub/182>

Luthy, K. E., Kohler, L. R.~, Macintosh, J. L., Eden, L. M., Beckstrand, R. L., Wright, E. L.~, &

Hill, K. E.~ (2017). Vaccination policies of Utah family practice clinics. *Journal of the American Association of Nurse Practitioners*, 29(2), 77–84. doi:10.1002/2327-6924.12395

Luthy, K. E., Stocksdales, S. L.~, Macintosh, J. L., Eden, L. M., Beckstrand, R. L., & Edmonds, K.~ (2016). Evaluation of employee vaccination policies in outpatient oncology clinics: A pilot study. *Clinical Journal of Oncology Nursing*, 20(5), 492–497.

Luthy, K. E., Williams, C. M.~, Freeborn, D. S., & Cook, A. (2017). Comparison of testosterone-replacement therapy medications in the treatment of hypogonadism. *The Journal for Nurse Practitioners*. Article first published online 27 January 2017. doi:10.1016/j.nurpra.2016.11.016

Macintosh, J. L., Huggins, L. J.~, Eden, L. M., Merrill, K. C., & Luthy, K. E. (2016). Immunization status of NICU graduates at a tertiary care children's hospital. *Advances in Neonatal Care*. doi:10.1097/ANC.0000000000000357

Prince, W. L., Winmill, D., **Wing, D.**, & Kahoush, A. (2016). Nursing students' perception of a multiple-patient simulation experience. *Nursing Education Perspectives*, 37(6), 331–332. doi:10.1097/NEP.000000000000046

Rasmussen, S.~, Jarvis, S., & Winters, B. (2016). Role of the endocannabinoid system and medical cannabis. *All Student Publications*, paper 192. <http://scholarsarchive.byu.edu/studentpub/192>

Reed, S. J. (2016). Identifying learning acquired during debriefing. *UNLV Theses, Dissertations,*

Professional Papers, and Capstones, paper 2724. <http://digitalscholarship.unlv.edu/thesesdissertations/2724>

Ulberg, R. S., Blad, K. D., & Newman, P.~ (2016). Understanding diversity and culture in caring for our veteran population. *Annals of Global Health*, 82(3), 406. doi:10.1016/j.aogh.2016.04.135

Valentine, J. L., Sekula, L. K., Cook, L. J., Campbell, R., Colbert, A., & Weedn, V. W. (2016). Justice denied: Low submission rates of sexual assault kits and the predicting variables. *Journal of Interpersonal Violence*. Article first published online 1 December 2016. doi:10.1177/0886260516681881

Valentine, J. L., Shaw, J., Lark, A.~, & Campbell, R. (2016). Now we know: Assessing sexual-assault criminal justice case processing in an urban community using the Sexual Assault Nurse Practitioner Evaluation Toolkit. *Journal of Forensic Nursing*, 12(3), 133–140. doi:10.1097/JFN.0000000000000115

Whitt, K. J.~, Eden, L. M., Merrill, K. C., & Hughes, M.~ (2016). Nursing student experiences regarding safe use of electronic health records: A pilot study of the safety and assurance factors for EHR resilience guides. *Computers, Informatics, Nursing*, 35(1), 45–53. doi:10.1097/CIN.0000000000000291

Williams, C. M.~, Freeborn, D. S., & Luthy, K. E. (2016). Comparison of testosterone-replacement therapy medications in the treatment of hypogonadism. *All Student Publications*, paper 183. <http://scholarsarchive.byu.edu/studentpub/183>

PRESENTATIONS DELIVERED

Anderson, A.~, Luthy, K. E., Macintosh, J. L., Beckstrand, R. L., & Eden, L. M. (2016, November 7). Effectiveness of a whooping-cough vaccination education module for Utah County WIC clients.¹

Blad, K. D., & Jarvis, S. (2016, June 22). Fundamental critical-care support course. Podium presentation at American Association of Nurse Practitioners national conference, San Antonio, TX.

Broby, N.~, Lassetter, J., Williams, M., & Winters, B. (2016, November 7). Exploring the development of an international medical disaster-relief team.¹

Corbett, C., Lundberg, K., Zitting, M.~, Hunsaker, K.~, Orr, C.~, & Sharpe, L.~ (2016, November 7). Health-promoting student activities in Vietnam hill tribes.¹

Dunn, E. G.~, Luthy, K. E., Beckstrand, R. L., & Macintosh, J. L. (2016, November 7). Childhood vaccination exemptions: Are all states doing the same thing?¹

Eden, L. M., Wells, K., Macintosh, J. L., Luthy, K. E., Beckstrand, R. L., & Ray, G. L. (2016, September 14). Exemptions to school entry requirements: Administrative policy and practices across the nation. Poster presentation at the 47th National Immunization Conference, Atlanta, GA.

Hill, D. W.~, Lassetter, J., & Nuttall, C. (2016, November 7). Care of the peanut-allergic patient: Perspective of the FNP.¹

Himes, D. O. (2016, October 4). Breast cancer awareness week seminar. Panel presentation at Brigham Young University, Provo, UT.

Himes, D. O., Root, A. E.~, & Luthy, K. E. (2016, August 5). When to order screening breast MRI? Calculating lifetime risk for breast cancer using the Tyrer-Cuzick model. Podium presentation at 2016 International Society of Nurses in Genetics World Congress, Dublin, Ireland.

Himes, D. O., Zaro, M.~, Williams, M., Freeborn, D. S., Eggett, D. L., & Kinney, A. Y. (2016, August 5). Breast cancer risk assessment: Evaluation of referral tools

for genetic consultation. Podium presentation at 2016 International Society of Nurses in Genetics World Congress, Dublin, Ireland.

Jarvis, S. (2016, June 22). Chest radiography 101: It's all black and white to me. Podium presentation at American Association of Nurse Practitioners national conference, San Antonio, TX.

Lundberg, K., & Edmunds, D. (2016, April 22). Student nurses engaging refugee children in health promotion activities. Podium presentation at the Society of Pediatric Nurses annual conference, Minneapolis, MN.

Lyman, B., Cowan, L.~, Hoyt, H.~ (2016, November 7). Organizational learning in a college of nursing: A learning history.¹

Mabey, L., Miles, L., & Valentine, J. L. (2016, October 20). The intersection of mental illness and sexual assault: What psychiatric-mental health nurses should know. Poster presentation at American Psychiatric Nurses Association annual conference, Hartford, CT.

Margetts, W., & Williams, M. (2016, April 28). Visiting teaching: How we need each other! Podium presentation at BYU Women's Conference, Provo, UT.

McNeil, M.*, & Ray, G. L. (2016, November 7). Future healthcare providers gain new insights through poverty simulation.¹

Miles, L., Mabey, L., & Valentine, J. L. (2016, October 20). Psychiatric nurses and sexual-assault nurse examiners partner to support victims of sexual assault with mental illness. Podium presentation at American Psychiatric Nurses Association annual conference, Hartford, CT.

Peterson, N. E., Brady, B., Edmunds, R.*, Ogden, C., & Tullis, A.~ (2016, November 7). Perception of activity trackers and motivating physical activity.¹

Ray, G. L. (2016, October 28). Social determinants of health among school-age children: Thinking outside the school clinic. Keynote address at the Utah School Nurse Association annual conference, Provo, UT.

Ray, G. L., Peters, C., Hunsaker, S., Dixon, L.*, Winert, S., Shepherd, B.*, & Kerr, E.* (2016, October 13). An educational intervention for difficult IV access: A seminar for medical staff at the Lyndon B. Johnson Medical Center, Pago Pago, American Samoa. Podium presentation at Transcultural Nursing Society annual conference, Cincinnati, OH; (2016, November 7).¹

Ray, G. L., Peters, C., Speth, A.*, Wiscomb, N.*, & Valdez, B.* (2016, November 7). Anatomy Academy: A health-promotion intervention in Samoan primary schools adapted to the Samoan way.¹

Valentine, J. L. (2016, April 6). Sexual-assault kit submission rates and predicting variables from multiple sites in Utah. Press conference at Brigham Young University, Provo, UT; (2016, September 20). Sexual assault in Utah: What we now know. Keynote address at Utah Domestic Violence Coalition annual general meeting, Salt Lake City, UT; (2016, October 27). Current research on criminal justice system response to sexual assault: Building multidisciplinary teams to address sexual violence, and connecting research partnerships. Panel presentation at the National Sexual Assault Kit Initiative conference, Washington, DC; (2016, November 10). Research on sexual-assault kit submission rates: Implications on practice. Podium presentation at Bode Cellmark Forensics Annual DNA and Investigators Conference, Philadelphia, PA; (2016, November 17). The effectiveness of a trauma-informed training program and structured interview in adult sexual-assault cases. Podium presentation at the American Society of Criminology annual meeting, New Orleans, LA. Additional presentations were made on various dates to the following agencies/organizations: Salt Lake Sexual Assault Response Team, Utah Commission on Criminal and Juvenile Justice and Utah legislators, Utah Sexual Violence Council, RTI International SAKI team,

Wasatch Forensic Nurses, Northern Utah Sexual Assault Nurse Examiners, and Statewide Rape Kit Working Group.

Whiting, C. A.*, & Williams, M. (2016, November 7). The efficacy of exercise in alleviating or minimizing menopausal symptoms in menopausal women: A review of the literature.¹

Wing, D., de la Cruz, K., & Ray, G. L. (2016, October 13). Interpreting unexpected results: Pediatric anemia research in rural West Africa. Podium presentation at Transcultural Nursing Society annual conference, Cincinnati, OH.

Winters, B., & Parr, M. A.* (2016, October 28). Systematic literature review: Staff-oriented fall-prevention education in long-term care and rehabilitation. Podium presentation at Utah Nurses Association fall conference, Salt Lake City, UT; (2016, November 7).¹

Yergensen, T.*, & Miles, L. (2016, November 7). Rudolf travels beyond Provo: International nursing student collaborative learning.¹

Note:

¹Podium presentation at Brigham Young University College of Nursing's Scholarly Works annual conference, Provo, UT.

*Denotes current BYU nursing student (BS or MS)

~Denotes BYU nursing alumnus

^Denotes emeritus faculty member

HONORS

Congratulations to assistant professor **Dr. Julie Valentine**, who was awarded the Certificate of Honorable Mention by the American Association of Colleges of Nursing for her dissertation submitted for the Excellence in Advancing Nursing Science Award for 2016–2017. Her dissertation was titled "Justice Denied: Low Submission Rates of Sexual-Assault Kits and Predicting Variables." She also received the prestigious Ann Burgess Forensic Nursing Research Award for 2016 at the International Association of Forensic Nurses conference in September.

Dr. Julie Valentine, **Dr. Linda Mabey**, and **Dr. Leslie Miles** collaborated on a book chapter in the publication *A Practical Guide to Forensic Nursing*. It was selected for a 2016 American Journal of Nursing Book of the Year Award, winning first place in the Critical Care–Emergency Nursing category and third place in the Medical-Surgical Nursing category.

Assistant teaching professor **Lacey Eden** was the Utah state recipient of the 2017 American

Association of Nurse Practitioners (AANP) State Award for Excellence and will be recognized in June at the AANP national conference.

Teaching professor **Dr. Sheri Palmer** and assistant teaching professor **Karen de la Cruz** received the CTN-A (Certification in Transcultural Nursing–Advanced) from the Transcultural Nursing Society last fall, becoming the first two recipients of the certification in the state of Utah. **De la Cruz** also finished the core train-the-trainer program with the End-of-Life Nursing Education Consortium. She now coordinates integration of the palliative care core into the college's curriculum.

Associate dean and teaching professor **Dr. Kent Blad** received a presidential citation from the Society of Critical Care Medicine in January.

Associate professor **Dr. Katreena Collette-Merrill** was admitted as a professional member of the National Academy of Practice in Nursing.

Assistant teaching professor **Debra Wing** passed her Certified Nurse Educator exam last fall.

Assistant teaching professor **Tracy Dustin** participated in an Operation Walk El Salvador mission last November. This was her fourth year with this non-profit organization. She served as a recovery-room, health-screening, and whatever-was-needed nurse for joint-replacement surgeries at no cost to uninsured patients.

Last fall semester, 16 members of the faculty and Nursing Learning Center (NLC) staff received three days of intensive simulation training offered by Intermountain Healthcare and hosted at LDS Hospital. The training was coordinated by assistant teaching professor **Stacie Hunsaker**, who determined it would be beneficial to standardize the training that college employees receive. Also participating were NLC supervisor **Colleen Tingey**, assistant NLC supervisor **Kristen Whipple**, assistant teaching professor **Debra Wing**, and associate teaching professor **Sondra Heaston**.

APPOINTMENTS

Lacey Eden was appointed by the National Association of Pediatric Nurse Practitioners to be its liaison to the Immunization Action Coalition.

Assistant professor **Dr. Neil Peterson** became an ambassador for the Exercise Is Medicine national initiative and organized a campus leadership team with assistant teaching professor **Craig Nuttall**. Their group sponsored a free 3K Pokéthon fun

walk for the university last October. **Peterson** also became a judge for the 3-minute thesis competition at the interdepartmental graduate event held each March.

Assistant professor **Dr. Janelle Macintosh** now serves on the American Nurses Association's Advisory Committee on Integration of Immunization into Undergraduate Nursing Curriculum.

Stacie Hunsaker received a two-year appointment to the Emergency Nurses Association Institute for Emergency Nursing Education (IENE) Advisory Council as a new member.

Dr. Kent Blad was installed as the 2018 Society of Critical Care Medicine Congress cochair.

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