

Robert Wood Johnson University Hospital

RWJBarnabas
HEALTH

2018

NURSING ANNUAL REPORT





Robert Wood Johnson University Hospital 2018 Nursing Annual Report

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Nursing Leadership 2018

Tracey Malast, BSN, MSN, RN

Interim Chief Nursing Officer, Robert Wood Johnson University Hospital



Maureen Bueno
PhD, RN

*Senior Vice President,
Organizational Effectiveness*



Lydia Stockman
MHA, RN, FACHE

*Senior Vice President,
Clinical Operations*



Arlex Matulac
MSN, BSN, RN

*Vice President,
Perioperative Services*



Kathy Morgan-Gorman
MS, DNP, RN, NE-BC

*Vice President, The Bristol-Myers
Squibb Children's Hospital*



Julie C. Arsenault
DNP, RN, NE-BC

*Assistant Vice President of
Cardiology and Intensive Care
Nursing Services*



Kathleen Evanovich Zavotsky
PhD, RN, CCRN, CEN, ACNS-BC,
FAEN, FCNS

*Assistant Vice President,
The Center for Professional
Development, Innovation
and Research*



Jamie Perry
MSN, RN

*Interim Assistant Vice President of
Oncology and Surgical Services,
Director of Clinical Operations*



Lisa A. Falcón

MSN, RN, TCRN, NE-BC
*Interim Administrative Director
of Trauma & Emergency
Department Services*



Kathy Easter

MSN, RN, CCRN-K
Magnet Program Director



Linda Tamburri

MS, RN, APN, CCRN
*Clinical Nurse Specialist, Magnet/
Quality, Critical Care Float Pool,
SCTU*



Chief Nursing Officer's Message

The nurses at Robert Wood Johnson University Hospital (RWJUH) are highly respected. Each day, RWJUH nurses provide safe, high-quality, compassionate, evidence-based, patient-centered care to our patients and families seeking treatment across the care continuum. Through interprofessional collaboration and teamwork, our expert nurses meet the needs of patients who require complex, high-acuity care throughout the lifespan in our academic Level I Trauma Center.

As you will read in the pages of this report, our nurses are not only embracing new technology, they are driving innovation. Nurses at all levels and in all specialties are working at the top of their license and raising the bar on quality outcomes and patient satisfaction.

Looking Back

The Department of Nursing had several milestones to celebrate in 2018:

- New facilities: In 2018, we opened a state-of-the-art, 24-bed Cardiothoracic Intensive Care Unit (CVICU) and a new Pediatric Emergency Department, and we continued the expansion of our adult Emergency Department.

- Transfer Center: Critical care nurses are managing transfers into the hospital through our Transfer Center. Referring physicians provide intake information to critical care nurses, who provide it to accepting physicians. By using algorithms, transfer center nurses can determine the appropriate level of care for the patient and coordinate a safe and efficient transfer. This service is particularly helpful when transferring neurology and cardiothoracic patients.
- Discharge Hospitality Suite: When patients are cleared for discharge, they now may leave through our Discharge Hospitality Suite. There, specially trained nurses explain discharge instructions, educate patients and their families, schedule follow-up visits, and coordinate prescriptions before patients leave the hospital. The suite was the subject of a presentation at the 2018 ANCC National Magnet Conference, where it was viewed as a model for other Magnet hospitals.
- Lutathera Therapy: We began offering lutathera, a therapy designed to treat neuroendocrine tumors. RWJUH New Brunswick is the first hospital in New Jersey to offer this therapy.
- RWJUH Nurses care for our CAR T-Cell patients. This is a promising new therapy for patients with certain types of lymphoma and multiple myeloma

versus bone marrow transplant. After providing specialized training for more than 100 nurses, physicians, and staff members, we completed three CAR T-Cell transplants in 2018, and all patients are responding well to treatment.

- As an academic and tertiary acute care facility, our nursing educators, clinical nurse specialists, and clinical nurses are actively creating and disseminating new knowledge by conducting and publishing research study results. We are proud of the new evidence-based practice academy that launched in 2018. This provides significant opportunities for nurses to translate evidence into practice. RWJUH nurses continually generate new knowledge to improve nursing practice and outcomes for patients, families, and the communities we serve.

Looking Ahead

In the coming year, nurses will work to compile data and sources of evidence for our 6th Magnet document submission due in June 2020.

Several projects will come to fruition in 2019, including the opening of our new, state-of-the-art, 14-bed neuroscience ICU. A component of

our Comprehensive Stroke Center, the unit will accommodate patients requiring more complex care. In addition, we plan to expand the services of our Discharge Hospitality Suite to include rehabilitation patients to improve throughput.

All of the successes you will read about in this report are the result of collaboration across many disciplines, including the invaluable work of our nurses. They make teamwork look seamless, and that is an achievement we can celebrate every day.

Tracey Malast, MSN, RN

Interim Chief Nursing Officer

Robert Wood Johnson University Hospital



Participation in National Patient Safety Collaborative Helps Children's Hospital Improve Metrics

Developing solutions to improve quality metrics can be difficult in the pediatric population because the pool of patients is small. However, when data from more than 100 children's hospitals is aggregated and analyzed, the impact of changes in practice can be easier to detect and can help guide future recommendations.

The Bristol-Myers Squibb Children's Hospital (BMSCH) at RWJUH New Brunswick joined the Children's Hospitals' Solutions for Patient Safety (SPS) National Children's Network in 2016. The collaborative seeks to create a universally safe and healing environment for children, with the shared goal of reducing harm in several areas by December 31, 2021.

SPS is focused on reducing harm by preventing readmissions, serious safety events, and several specific hospital-acquired conditions, including:

- Adverse drug events (ADE)
- Catheter-associated urinary tract infections (CAUTI)
- Central line-associated blood stream infections (CLABSI)
- Falls with injury
- Pressure injuries
- Surgical site infections
- Ventilator-associated events (VAE)
- Venous thromboembolism
- Peripheral intravenous infiltration and extravasations (PIVIEs)
- Unplanned extubations
- C. difficile and antimicrobial stewardship
- Nephrotoxic acute kidney injury

“Some collaboratives become a competition among participants, but everyone in SPS is on the same page, trying to make care better for children,” explains Kathy Morgan-Gorman, BSN, MS, DNP, RN, Vice President of BMSCH.

Through the collaborative, the nursing team at BMSCH has access to a variety of bundles—sets of evidence-based practices that when performed collectively have been proven to improve patient outcomes. For each bundle, a team of nurses was formed to brainstorm how best to operationalize bundle implementation. In addition to implementing the evidence-based practices outlined in the bundle, teams were able to develop additional interventions. SPS provides educational modules and audits to ensure that each bundle is applied to practice properly, and participants can ask questions or share what’s worked in their facility, so the group benefits from the experiences of all members.

“Having frontline nurses involved with deciding how best to implement each bundle is crucial, because they know which changes in policies or procedures will be most meaningful to our patients and their parents,” says Morgan-Gorman.

When the team implemented the CLABSI bundle in the Pediatric Hematology-Oncology Unit, it didn’t see a decrease in infections as quickly as anticipated. The team involved with the bundle discussed the issue, and learned that many parents were refusing the germ-killing chlorhexidine gluconate (CHG) baths for their children. Staff had heard complaints from parents that CHG was sticky and that the bathing process was cumbersome. The group decided to change the wording from “CHG bath” to “CHG treatment.” “Parents didn’t understand the importance of the bath, so they were skipping it,” says Morgan-Gorman. “A simple change of wording suggested by the nursing staff has made a big difference.”

Thanks to other initiatives related to the bundle, the Neonatal Intensive Care Unit (NICU) has been CLABSI-free for more than two years. Surgical site infections and urinary tract infections also have decreased.

“Our involvement with SPS has been a beneficial tool for improving our already high-quality care,” says Tracey Malast, MSN, RN, Interim Chief Nursing Officer.





Irene Radko, RN, 9 (left) received a Great Catch Safety Award for her vigilance in ensuring an appropriate endoscopy consent process for a patient who had difficulty making decisions about care.

Hospital-Wide High Reliability Organization Training Promotes Safety

Throughout 2018, RWJUH New Brunswick continued its journey to promote a culture of safety and firmly establish itself as a High Reliability Organization (HRO). Through a system-wide initiative called “Safety Together,” the hospital embraces safety practices to create the best possible outcomes for patients, a safe and welcoming atmosphere for visitors, and an exceptional work environment for staff.

In early 2018, 60 nurses and staff members received comprehensive HRO Safety Together training. In turn, with extensive planning, these individuals trained all 5,000 RWJUH New Brunswick employees in the principles of HRO and how they relate to daily practice and care. Kathleen Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN, FCNS, Assistant Vice President for the Center for Professional Development, Innovation, and Research at RWJUH New Brunswick, reports there were over 100 HRO classes taught by the interprofessional team.

“This initiative provides a systematic framework to keep staff, patients, and families safe, which fits in perfectly with what we do as nurses every day,” explains Zavotsky. “We use processes that are sometimes complicated, and HRO training has helped us look at these processes in a new way to identify any areas for improvement.”

Great Catch Broadens Efforts

The Great Catch Safety Awards program at RWJUH New Brunswick was launched in April 2018 to further encourage staff to provide insight when they notice a potential safety issue. Awardees receive a personalized trophy, a certificate, vouchers for hospital dining purchases, and a photo with leadership that is featured in RWJUH New Brunswick publications.

To date, leadership has presented nearly 200 Great Catch Safety Awards to nurses, staff, physicians, and medical students to honor them for their vigilance in catching and correcting potential errors throughout the hospital. This vigilance has paid off, resulting in many permanent, systemic improvements in both clinical and operational areas. These include:

- Adding motion-sensing capability to security cameras on the campus
- Standardizing the allowable electrical power strips in the hospital and reducing the overall usage of power strips
- Modifying a specific medication in SCM oncology order sets to reduce the incidence of patient falls
- Standardizing the storage of bedside supplies for patients with tracheostomies
- Modifying the times of medications in SCM to prevent drug-drug interactions

In addition to HRO training and the Great Catch program, safety coaches are being identified on every unit and in every department to bring ongoing education to the unit level.

“From a nursing and overall care perspective, there’s nothing more important than safety for patients, families, and staff,” adds Zavotsky. “With everyone on board, we’re on a journey that will make the care we provide even safer.”



Barbara Gabriel inspected the labeling of an intravenous medication infusion bag and identified a problem which was corrected before administration.

Jenny Lind Francisco discovered that the Pyxis bin with multivitamins with iron also contained plain multivitamins. This prevented a potential medication error.

Lanlen Soriano performed a thorough patient assessment and determined the patient was having neurological changes. After ARCCing up the importance of her finding, a CT scan of the patient's head was done. This revealed that the patient was having a bleed and was taken for emergency surgery to address the condition.



2018 DAISY Award Recipients

Alyxandra Volpe, BSN, RNC (fourth from left), and the RCU team.

Valsa Mathew, BSN, RN (left), BMTU, and Nancy Skolnick, RN, OCN who submitted Valsa's nomination.

Marybeth Shipley, BSN, RN - 2 Core



Robert Wood Johnson University Hospital Celebrates Certified Nurses Day

Robert Wood Johnson University Hospital celebrated Certified Nurses Day to recognize its nurses for their professionalism and commitment in achieving national certification in their nursing specialties.

Professional certification is a key factor in the assurance of standards of knowledge, skills and abilities in nursing specialty practice and it contributes to excellent patient outcomes. Certification also allows nurses to be recognized for competence in their clinical specialty.

During Certified Nurses Day, nurses shared what inspired them to become certified while encouraging their colleagues to become certified in their respective specialties.



Community Service Activities

Elizabeth Russer, MSN, RN, PCCN

T-Ball Coach for the South Amboy Youth Athletic Association

Elizabeth Russer, MSN, RN, PCCN

Cheerleading Coach Our Lady of Victory, Sayreville, NJ

Myrna Young, MSN, RN, CNOR

Ozamen Homeless Shelter Food Drive

Myrna Young, MSN, RN, CNOR

Catholic Charities Food Drive

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN

Ozamen Homeless Shelter Volunteer

2018 Robert Wood Johnson University Hospital Nurse Excellence Awards Recipients



Virginia H. Joseph Award
Cristina Lu, BSN, RN-BC, CNIII



Friend of Nursing Award
René Osgood, RPh., PharmD.



**Nursing Technician/
Technologist Award**
Luz Ruiz



**Advanced Practice
Provider Award**
Helen Miley, PhD, RN, AGACNP



**Transformational
Leadership Award**
Patricia Andrews, BSN, RN, OCN



**Structural
Empowerment Award**
5 North Central Line Orientation
Education Task Force



**Exemplary Professional
Practice Award**
Traci Marcus, MSN, RN, OCN, CNIII



**New Knowledge Innovations
and Improvements Award**
Amanda Alvarado, BSN, RN, OCN, CNIII



**2018 Magnet Nurse of the
Year Award**
Keona Phillips, BSN, RN, CCRN, CNIV
Education Task Force

Nursing Scholarship Awards

Associate Degree in Nursing

Caunya Schneider

Bachelor of Science in Nursing

Lisa Fletcher, MHA, CRA, RT (R), (M), (CV)

Awina Nueva, AAS, RNC-OB

Alexis Perez, AAS, RN

Laura Sarris, AAS, RN,C

Master of Science

Carolyn Austin BSN, RN, CNOR, RNFA, WCN

Catherine Filippelli, BSN, RN, CEN, TCRN

Michelle Fiori, BSN, RN-BC

Olga Karpusyuk, BSN, RN,C

Rebecca Lubitz, BSN, RN, CCRN

Sandhya Nair, BS

Darshi Patel, BSN, RN-BC

Dina Sattenspiel, BSN, RN, CCRN

Aniamma Thomas, BSN, RN, CCRN

Katarzyna Wolan, BSN, RN, CEN, CCRN, CPEN

Doctoral Studies

Jeannette Galindo-Lopez, BSN, RN

Patricia James, MS, RN, CCRN

Kerri Lyman MSN, RN, CPEN

Katherine Soriano, MS, RN-BC, NE-BC

Nurse Residency Graduates

Kimberly Barone, BSN, RN

Jennifer Bernal, BSN, RN

Marchelle Boyd, BSN, RN

Chelsea Cardone, BSN, RN

Erica Colindres Garcia, BSN, RN

Courtney Donlon, BSN, RN

Kristen Dudas, BSN, RN

Martina Figel, BSN, RN

Deema Hamdan, BSN, RN

Elizabeth Hughes, BSN, RN

Nadia Liung, BSN, RN

Anthony Lombardo, BSN, RN

Sabrina Reeves, BSN, RN

Krystle Richardson, BSN, RN

Alexis Sample, BSN, RN

Jamie Sellari, BSN, RN

Recognition and Honors



Lori A. Colineri, DNP, RN, NEA-BC, Senior Vice President,
and Chief Nursing Officer - Southern Region, RWJBH

Award - Richard Hader Visionary Leader Award

Sponsor - Nursing Management Congress 2018



Victoria Pangilinan, MSN, RN, CCRN
Staff Nurse SICU-West

Award - 2018 Nurse of the Year, Critical Care

Sponsor - March of Dimes



Jackie Jacalan-Baras, MSN, MBA, RN
Quality Nurse Manager- Perioperative Services

Award - Diva and Don Award

Sponsor - The Institute for Nursing



Extraordinary Orchestration Launches NICU/PICU ECMO Program

During the summer, more than 25 nurses, clinicians, and staff converged in a pediatric intensive care unit (PICU) room – with several dozen additional participants behind the scenes – to walk through every aspect of an undertaking three years in the making: a full-scale, extracorporeal membrane oxygenation (ECMO) simulation designed for a pediatric patient. In the fall, a similar exercise was conducted in the neonatal intensive care unit (NICU).

The Bristol-Myers Squibb Children's Hospital (BMSCH) at RWJUH New Brunswick is now one of only two facilities in the state to offer pediatric ECMO, an advanced life support modality used for patients with life-threatening heart and/or lung problems to provide long-term breathing and heart support when standard treatments have failed. The hospital also offers an adult ECMO program.

A Multidisciplinary Plan

Initial planning for the pediatric program began with the training of 17 bedside pediatric and neonatal critical care nurses to become ECMO specialists, a nearly two-year process adhering to specific guidelines from the Extracorporeal Life Support Organization (ELSO). Anyone involved in the care and support of an ECMO patient then began convening regularly to plan the simulation, including hospital leadership, nurses, physicians, surgeons, chaplains, respiratory therapists, and staff from radiology, the lab, the pharmacy, the operating room, housekeeping, and environmental services. Specific roles were assigned to each participant in the simulation, which also featured event narrators, a photographer, and a videographer. Each six-hour simulation was followed by a thorough debriefing where everyone at the table shared insights.

"It was a proud moment to see so many disciplines coming together with such a high level of passion and enthusiasm to make this a success," says Cindy Ferraro, MSN, RNC-LRN, APN.C, NICU Director at BMSCH. "Everyone was on the same page, and we were able to apply insights from the PICU simulation to the NICU experience."

To ensure ongoing skills practice and education, monthly Pediatric ECMO Committee meetings are held with the ECMO specialist group and staff, along with mini simulations focusing in on a particular aspect of the therapy.

"With extensive planning and open communication at all levels, the launch of this program went amazingly well," says Dominick M. Carella, RN, MSN, MBA, ECMO Coordinator at BMSCH. "We have now safely and confidently treated several young patients in our region who have needed such a high level of care, without them having to travel long distances in their compromised condition."

For many nurses, the experience of creating the pediatric ECMO program from the ground up was empowering, broadening perspectives about how various disciplines can work more closely together.

"It was an incredibly moving interprofessional experience in which everyone's voice was heard and valued to make this program the best it could be," says Mary Lynn Dupuis, BSN, RN, CCRN, pediatric critical care transport nurse and co-chair of the Pediatric ECMO Committee. "Our preparations have made ECMO delivery like a choreographed dance. It's given many of us a new identity, and it certainly has enhanced our culture of care."





Pediatric Trauma Program Attains Reverification

As the first American College of Surgeons (ACS)-verified Pediatric Trauma Center in New Jersey, RWJUH New Brunswick has become the state's resource for the care of injured children in the region, from acute pediatric trauma care to injury prevention and trauma education.

The Level II Pediatric Trauma Program has attained ACS verification for nearly a decade, and was again reviewed and successfully verified by ACS's Committee on Trauma April 28, 2018. Having this designation demonstrates to the community that RWJUH has met a rigorous set of criteria that validates commitment to trauma care, injury prevention, and quality outcomes.

"The Level II pediatric trauma verification means our patients are receiving high-quality, family-centered care from an exceptional multidisciplinary team led by very talented trauma surgeons," says Irene Sudah, BSN, RN, CNOR, Pediatric Trauma Program Manager.

Providing Comprehensive Trauma Care Requires Interdisciplinary Coordination

The verification of the program, which sees about 220 pediatric trauma patients each year, included reviewing the credentials and performance of its three pediatric trauma surgeons and assessing the preparation of each pediatric service involved in trauma care. This includes nurses and other providers across disciplines—pre-hospital care, surgical services, emergency medicine, intensive care, rehabilitation, interventional radiology, respiratory therapy, and more. The review also examined the facility's level of resources, such as pediatric-specific supplies and equipment, and the implementation of pediatric massive transfusion protocol.

"Providing comprehensive care to each trauma patient requires a coordinated continuum among surgeons, nurses, and many other specialties behind the scenes," explains Sudah.

Trauma nurses are expected by the ACS to have specialized training in the care of trauma patients. This training includes nationally recognized courses, including Trauma Nurse Core Course (TNCC), Trauma Care After Resuscitation (TCAR), and/or Pediatric Care After Resuscitation (PCAR). Many staff have had additional training to become instructors for TNCC courses.

Nurses play a pivotal role in the entire review process, according to Tim Murphy, MSN, RN, Trauma Performance Improvement Coordinator. From the trauma program managers (both adult and pediatric) and the education coordinator to the injury prevention coordinator and advanced practice nurses (both trauma and critical care), nurses provided valuable input during the review.

Trauma Nurses Continue to Enhance Their Skills

To keep their skills sharp, staff nurses like Jim Doherty, RN, in the Pediatric Emergency Department, participate in many of the hospital's child passenger safety events and organize the trauma center's "Wanted Alive" injury prevention outreach program.

Additionally, nurses involved in delivering trauma care are encouraged to attain certification as a Trauma-Certified Registered Nurse. The certification communicates that the nurse has the expertise required to deal with the complex and challenging presentation of the traumatically injured child.

"Our trauma nurses are advocates for comprehensive trauma care here and beyond our doors," adds Murphy. "They are actively involved in state and national organizations, and many contribute to the field on a larger scale through Rutgers University's global trauma program."

During this annual program, nurses from around the world are invited to New Brunswick for a week of lectures and observational opportunities focused on enhancing trauma care throughout the world.

"Trauma care is a team sport and everyone plays critical role," explains Murphy. "Collaboration is key."





Orthopedic and Bariatric Programs Earn Joint Commission's Gold Seal of Approval

In 2018, RWJUH New Brunswick earned The Joint Commission's Gold Seal of Approval® for its Hip and Knee Joint Replacement Programs and its Bariatric Surgery Program. These certification awards recognize the dedication and collaboration of the multidisciplinary team – including hospital leadership, nurses, physicians, surgeons, professional staff, and support staff – to continuous compliance in meeting The Joint Commission's national standards for health care quality and safety in disease-specific care.

To earn these certifications, the orthopedic and bariatric programs underwent rigorous on-site reviews, with Joint Commission experts assessing compliance with national standards, the effective use of evidence-based clinical practice guidelines to manage and optimize care, and an organized approach to performance measurement and improvement activities.



Bariatric Distinction

RWJUH New Brunswick's Metabolic and Bariatric Surgery Center of Excellence is one of only six centers in the nation to receive the Gold Seal of Approval for its Bariatric Surgery Program. From nurse bariatric champions to anesthesiology and preoperative, surgical, and postoperative care, a team approach in which all insight is valued led to a successful site review.

"Our nurses understand that bariatric surgery is a life-changing experience for patients, and they were proud to showcase the compassionate, high-quality care they provide every day," says Marlene Thompson, MHA, BSN, RN, CNML, Nursing Administrator for the Bariatric Program. "They strive to provide a memorable experience for patients from the very first encounter."

"Bariatric-sensitive patient education and early post-surgery ambulation are an integral part of the care we provide," adds Kimberly Barone, BSN, RN, a bariatric champion for 9 Tower, the unit receiving patients after bariatric surgery. "In fact, we're examining trends in early ambulation to help our patients further improve mobility, relieve gas-related symptoms, and promote earlier discharge."

Orthopedic Excellence

In preparing for Joint Commission review, Joint Care Coordinators at RWJUH New Brunswick reviewed documentation, examined goals, and made action plans to improve every single metric, according to Sandra Olivero, BSN, RN, Nursing Director of 2 East Orthopedics and 9 Tower Bariatric and Trauma Services.

For example, with the one-on-one assistance of Kyala Pascual, RN, ONC, the team improved compliance in preadmission education to nearly 100 percent. Working with Case Management, they helped shorten length of stay by bringing a medical equipment distribution process in house. They also appointed Beth Ann Kaplan, BSN, RN as Joint Champion to engage peers in ensuring the highest standards for hip and knee replacement care. Through the examination of all practices, even a simple schedule adjustment for orthopedic aides improved documentation and early ambulation after surgery.

"It's an overwhelming feeling to know that our ongoing efforts are being recognized," says Olivero. "Because we take a collaborative approach involving many disciplines, our commitment to excellence shines through on every level."

EDUCATIONAL ACHIEVEMENTS

The following nurses obtained a Bachelor of Science in Nursing (BSN) degree in 2018:

BSN Degrees

Eduvijes Acosta, BSN, RN
American Sentinel University

Denise Bailey, BSN, RN-BC
Walden University

Jeyanthi Balagi, BSN, RN-BC
University of Phoenix

Gabriel Calara, BSN, RN
University of Texas

Maurina Cashe, BSN, RN
University of Phoenix

Amandeep Chahal, BSN, RN, MNN
Rutgers, The State University of New Jersey

Rebecca Coolahan, BSN, RN-BC
Thomas Edison University

April Di Matteo, BSN, RN
New Jersey City University

Melissa Jensen, BSN, RN
New Jersey City University

David S. Katz, BSN, RN, RNC
Western Governors University

Maria M. Luistro, BSN, RN, CGRN
Chamberlain College of Nursing

Stefanie Magan, BSN, RN-BC
American Sentinel University

Joahanna Mercado, BSN, RN
New Jersey City University

Grace Mortel-Tiongko, BSN, RN-BC
Walden University

Nicollette Murray, BSN, RN
Villanova University

Awina Nueva, BSN, RN
Chamberlain College of Nursing

Esleen Palattao, BSN, RN
American Sentinel University

Carlos Ramirez-Palma, BSN, RN
City University of New York

Aurora Ruiz-Calderon, BSN, RN
Walden University

Cheryl Sabatino, BSN, RN
University of Phoenix

Jason Zydallis, BSN, RN, PCCN
Thomas Jefferson University

The following nurses obtained a Master of Science (MSN) degree in 2018:

MSN Degrees

Daily Abreu, MSN, RN
Western Governors University

Samantha Belfer, MSN, RN
Monmouth University

Dawnmarie DeVito, MSN, RN, CPAN
Thomas Edison State University

Rose Egbutu, MSN, RN, OCN
Walden University

Keri Furci, MSN, RN
Seton Hall University

Irina Guseva, MSN, RN, CCRN
Rutgers, The State University of New Jersey

Patricia Hoffer, MSN, RN, CNOR
Purdue University Global

Maria Elena Holguin, MSN, RN
Grand Canyon University

Mellisa Jimenez, MSN, RN
The College of New Jersey

Selena McClinton, MSN, RN-BC
Rutgers, The State University of New Jersey

Stephanie Murray, MSN, RN-BC
Thomas Edison State University

Deval Patel, MSN, RN
Monmouth University

Francine Sanchez, MSN, APN, RN
Rowan University

Kharlo M. Suico, MSN, RN
Walden University

Aniamma Thomas, MSN, RN, CCRN
Walden University

The following nurses obtained a Doctorate of Nursing Practice (DNP) degree in 2018:

DNP Degrees

Julie Arsenault, DNP, RN, NE-BC
MGH Institute of Health Professionals

Kathy Morgan-Gorman, MS, DNP, RN, NE-BC
Quinnipiac University

PROFESSIONAL NURSING CERTIFICATIONS

Congratulations to the following nurses for achieving national certification in their specialty in 2018:

Melody Aquino, BSN, RN, CPN

Certified Pediatric Nurse

Lauren Baldi, BSN, RN, SCRNP

Certified Stroke Registered Nurse

Emily Bates, BSN, RN, CCRN

Critical Care Registered Nurse - Pediatric

Shanna Dean, BSN, RN-BC

Medical-Surgical Registered Nurse

Jennifer D'Heron, RN-BC

Medical-Surgical Board Certified

Tara Evans, RN, CPEN

Certified Pediatric Emergency Nurse

Jaime Friedland, BSN, RN, OCN

Oncology Certified Nurse

Sean Fusco, BSN, RN, CCRN

Critical Care Registered Nurse - Adult

Maryanne Guinto, RN, CNOR

Certified Nurse Operating Room

Joy Hultman, MSN, RN, CCRN

Critical Care Registered Nurse - Pediatric

Alison Kegelman, MSN, RN, CCRN

Critical Care Registered Nurse - Pediatric

Caitlin Lundberg, BSN, RN-BC

Medical-Surgical Registered Nurse

Stefanie Magan, BSN, RN-BC

Medical-Surgical Registered Nurse

Toni Manfre, BSN, RN, CCRN

Critical Care Registered Nurse - Pediatric

Nicholas Meo, BSN, RN, CNOR

Certified Nurse Operating Room

Joanne Mercurio, MSN, RN, CNOR, CRNFA, APN-BC

Advanced Practice Nurse, Board Certified

Maria Gilly Montera, BSN, RN-BC

Medical-Surgical Registered Nurse

Watta Okai-Menjor, BSN, RN, RNC

Inpatient Obstetric Nursing

William Navarro, BSN, RN, CCRN

Critical Care Registered Nurse - Adult

Kinjel Patel, BSN, RN-BC

Medical-Surgical Registered Nurse

Catia Quintela, BSN, RN, PCCN

Progressive Care Certified Nurse

Carly Snodgrass, BSN, RN, CNOR

Certified Nurse Operating Room

Alexandria Rodriguez, RN, CNOR

Certified Nurse Operating Room

Esmeralda Sinanovic, BSN, RN, RNC-OB

Inpatient Obstetric Nursing

Charlie Smith, BSN, RN, CCRN

Critical Care Registered Nurse - Adult

Rebecca Watts, BSN, RN-BC

Medical-Surgical Registered Nurse

Yesenia Boynton-Zwiren, BSN, RN-BC

Medical-Surgical Registered Nurse

Jonathan Yurecko, BSN, RN, CCRN

Critical Care Registered Nurse - Adult

Lexi Zhao, RN, CMSRN

Certified Medical-Surgical Registered Nurse

Jason Zydallis, BSN, RN, PCCN

Progressive Care Certified Nurse



Investments in New Technology Made with Nurses' Input

RWJBarnabas Health is investing in new technology at RWJUH New Brunswick and across the system, and input from nurses is being used to guide purchasing decisions.

Infusion Pumps Are Equipped for Efficiency

Several different IV infusion pump models are used across RWJBarnabas Health, which can lead to inconsistency and inefficiency. At the same time, newer, more “wired” options have come on the market. Nursing leaders sought to find an updated IV pump to roll out systemwide.

“Pump technology has evolved,” explains Kathleen Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN, FCNS, Assistant Vice President of the Center for Professional Development, Innovation and Research at RWJUH New Brunswick. “Newer options have features that would interface more efficiently with our electronic medical records (EMR), expand the pump’s drug library and enable updates more readily. It was time to find a system-wide solution.”

Staff nurses evaluated three state-of-the-art infusion pumps. The pumps were assessed by acute care nurses during skills fairs, simulation labs, and meetings with medical equipment sales representatives. Each nurse completed a survey about the models.

Zavotsky said hospital leaders agreed that it was important to purchase the model recommended by nurses. The chosen model integrates several safety features, including arm band scanning and information feeds directly into the EMR, which will help the team provide safer, more efficient patient care. The pump is expected to be implemented in 2019.

“Nurses were actively engaged in the process,” says Zavotsky. “The new pumps will greatly impact their practice while enhancing safety for patients.”

A New EMR Is on the Horizon

Several EMR systems are used in outpatient, ambulatory, inpatient, and long-term care areas. To improve information transparency, reduce errors, and improve patient care, nursing and hospital leaders are seeking to implement one integrated EMR across all care environments.

The goals of implementing a new EMR, according to Nicole Martinez, MSN, RN, NE-BC, DNP-c, Assistant Vice President, Nursing and Clinical Informatics, include:

- Improved communication and collaboration
- Increased patient safety and satisfaction
- Increased nurse and physician satisfaction
- Streamlined documentation and reduced duplication
- Improved access to critical information
- Increased integration with other medical equipment

Front line staff from all facilities saw demonstrations from EMR vendors and voted via text for their choice. Janet Tupper, RN, CCRN, staff nurse SICU West, says a new, more integrated EMR will save nurses and physicians time while also improving patient safety.

"Everything was integrated," Tupper says of the system she prefers. "It would eliminate double charting, and with its dashboard, you can see a patient's entire day, which would help with medication management, coordinating tests and labs, and discharge planning."

Votes were submitted to the steering committee and informed the final decision.

"We truly have shared governance in nursing," Tupper says. "Nurses have a voice and our leadership listens to and supports us."

Carts Improve Efficiency During Codes

To improve performance and efficiency, the Nursing Department researched options for replacing the 102 code carts used in the adult and children's hospitals.

"It was time for an upgrade," says Terry Savino, MSN, RN, Clinical Nurse Educator. "Larger, more modern carts will help nurses find critical supplies more quickly."

Members of the nursing team, including Savino and Rebecca Ramos, MS, RN-BC, Clinical Nurse Educator, Pediatrics, met with the Materials Management Director to learn about their options. They developed a PowerPoint presentation and, armed with a display code cart, sought the opinions of day and evening nurses walking through the atrium before and after their shifts. Nurses learned about the options and completed surveys to indicate their preferences.

New carts will arrive in January 2019, and education sessions will be held to enable nurses to become familiar with them. Features include:

- Pedestals above the cart for defibrillators
- Shelves on the side of cart for portable suction
- Decluttered workspaces on top
- Dedicated drawers for pediatric "code white" supplies
- Relocated medication drawers for easier access
- More responsive wheels
- Drawer dividers to better organize supplies

"Time is of the essence during a code," says Savino. "Nurses designed the carts to work best for them, which also improves patient safety."

Evidence-Based Practice Academy Offers Growth Opportunities

In collaboration with Rutgers University School of Nursing (RUSN), RWJBarnabas Health has launched a new pilot program that promotes evidence-based practice for nurses across the system. Participation in the Evidence-Based Practice Academy began with an application process that was open to all nurses, and two were selected from each campus to participate. As part of the program, RUSN faculty members are providing lectures on evidence-based practice and one-on-one, in-person mentorship for each participant. The team is presently working to develop a project that promotes evidence-based practice in units throughout the hospital and system-wide.





Nurse Expertise Expands with New CAR T-Cell Lymphoma Treatment Program

Until recently, individuals with B-cell lymphomas that did not respond to standard therapies had limited treatment options. Now, in partnership with Rutgers Cancer Institute of New Jersey (CINJ), RWJUH New Brunswick is one of only two certified programs in the state to offer CAR T-Cell Therapy, a new type of immunotherapy for forms of B-cell lymphoma.

The treatment involves collecting a patient's T cells (a type of white blood cell) and re-engineering them in the laboratory to produce special molecules known as chimeric antigen receptors (CARs). The CARs enable T cells to specifically recognize a target on the malignant cells. CAR T-Cell are reinfused into the body to attack these targeted markers that are limited to the cancerous cells. CAR T-Cell Therapy also shows promise in patients with multiple myeloma – an avenue currently being explored for future offerings.

"It's been incredible for our nurses, physicians, and staff to be engaged in building such an innovative program here," says Patricia Andrews, BSN, RN, OCN, Director of 4 North and the Bone Marrow Transplant Unit at RWJUH New Brunswick. "This unique treatment not only can provide more time for those who had no other options – it can potentially mean a cure."

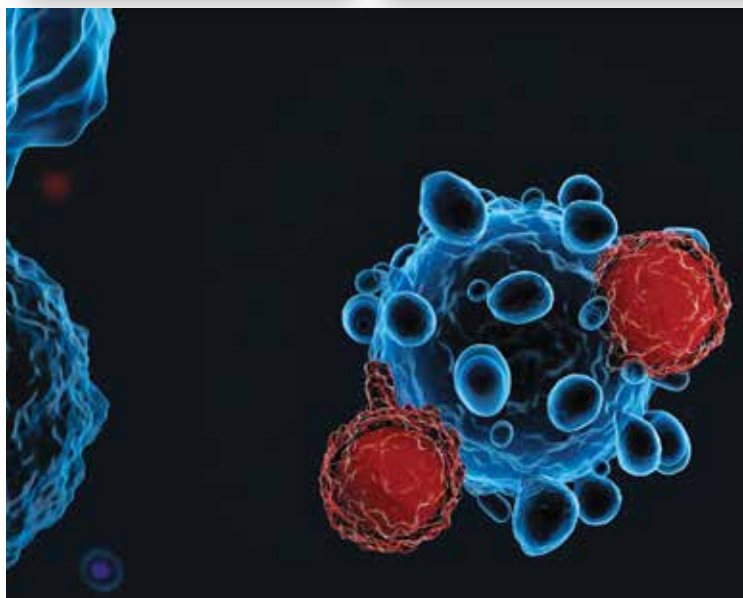
Planning for the program involved a high level of collaboration between Rutgers CINJ and various RWJUH New Brunswick departments, including the Bone Marrow Transplant Unit, Medical Intensive Care Unit (MICU), Pharmacy, Blood Bank, and Stem Cell Lab. In 2018, more than 100 RWJUH New Brunswick nurses, physicians, and pharmacists, along with Rutgers CINJ outpatient staff, received specialized training to ensure the program's success. The team has gained expertise in topics ranging from safe preparation and administration of therapy to patient education and specific nursing assessments following treatment.

While the infusion itself takes only a short time, patients are generally in the hospital for up to two weeks so nurses can monitor them, particularly for a potentially serious side effect: cytokine release syndrome (CRS), which involves a dangerous level of inflammation and related neurotoxicity. The team is specially trained to recognize, understand, and quickly react to any issues, and MICU nurses and staff are fully prepared to receive and treat patients should serious side effects occur.

"Since the collaborative planning and the launch of the program, we've had the opportunity to treat several patients," says Nicole McEntee, BSN, RN, OCN, BMTCN, Nurse Manager of the Bone Marrow Transplant Unit. "It's been extremely successful so far, and we're proud to give patients and their families access to this therapy close to home."

Bone Marrow Transplant Unit nurses Elizabeth Awuah, BSN, RN, OCN and Valsa Mathew, BSN, RN agree that the training and support they received made them confident to care for patients receiving this therapy.

"It helped me grow as a nurse," says Elizabeth. "Even more important, it's life-changing for our patients."



GI Nurses Sharpen Skills to Treat a More Acute Patient Population

The staff at the Center for Digestive Diseases at RWJUH New Brunswick is pioneering treatment options that will change the way cancer, obesity, and biliary, pancreatic, and motility disorders are treated. In staying ahead of the curve, the GI nursing team has learned additional skills involving new equipment, devices, and techniques.

“Our patient population is more acute than in traditional outpatient endoscopy units,” explains Amy Jablonski, MBA, BSN, RN, NE-BC, Director of Operations for the Center for Digestive Diseases at RWJUH New Brunswick. “Addressing their specific needs requires a broader level of critical care skills and ongoing training.”

The center brings together gastroenterologists, surgeons, and experienced nurses who perform diagnostic and therapeutic services for patients with disorders of the digestive tract, pancreas, bile ducts, and liver. The team performs the entire range of endoscopic procedures, including endoscopic ultrasound (EUS), endoscopic retrograde cholangiopancreatography (ERCP), and palliative procedures for cancers of the gastrointestinal tract.

To provide support for complex procedures and master new technical skills, our experienced GI nurses worked with Yukiko Fukuoka, BSN, RN, and the Advanced Endoscopist Team, including Kelly Esponda, Senior Endoscopy Technician. Fukuoka presented educational topics to the staff and worked with physicians and product representatives to coordinate additional lectures and hands-on training.

“We used feedback from the nurses and technicians to redesign our orientation process,” explains Jablonski. “The experienced GI nurses then trained new staff to care for the growing number of patients treated in the department.”

With the support of Stephanie Shea, BSN, RN, Endoscopy Coordinator, the team worked together to create an orientation manual for the new procedures. Nurses took notes and photos during cases and worked with other clinicians to develop procedure orientation guides.

Adding Skills to Offer More Services

In 2018, the center saw 4,409 outpatient cases and 2,710 inpatient cases—an increase of more than 50 percent from the previous year. To increase the team’s skills and provide a wider range of services, the center expanded its hours, increased staffing, and adopted new workflows.

The center recently added several new GI procedures and services, including:

- Endoscopic resection, including submucosal, full thickness, and submucosal tunneling
- Third space endoscopy, including peroral endoscopic myotomy (POEM), gastric peroral endoscopic myotomy (G-POEM), and Zenker’s diverticulum septotomy
- Gastroesophageal reflux disease (GERD) and Barrett’s esophagus treatments, including transoral incisionless fundoplication
- EUS-guided procedures, including varix embolization, gastrojejunostomy, and transgastric ERCP
- Pancreatic necrosectomy and endoscopic retroperitoneal pancreatic necrosectomy
- Weight-loss procedures, including gastric balloon insertion, endoscopic sleeve gastropasty, and transoral gastric outlet reduction
- Other procedures including photodynamic therapy for cholangiocarcinoma, biliary radiofrequency ablation, and optical coherence tomography

“With this increase in services, clinicians are able to detect cancers earlier and offer minimally invasive options for removing cancerous tissues,” says Jablonski. “Many of these procedures were traditionally performed in operating rooms. Now, by using minimally invasive endoscopic techniques, patients are able to recover faster with less post-operative pain.”

Additionally, endoscopic drainage procedures replace the need for a patient to have a percutaneous drain in place, decreasing the risk of infection and improving quality of life.

“We have highly skilled staff and state-of-the-art equipment and devices,” Jablonski explains. “Our team is helping pioneer minimally invasive procedures in therapeutic endosonography, endoscopic treatment of obesity, and endoscopic resection and myotomy. We offer treatment options that most hospitals can’t perform.”



Investigators and Co-Investigators Employed by Robert Wood Johnson University Hospital

Principal Investigator/Co-Investigators	Study Title
Julie Arseneault, MSN, RN Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Exploring the Relationship between Empowerment and an RN ECMO Model
Dawnmarie DeVito, MSN, RN, CPAN Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Exploring the Motivational Benefits of Using an Electronic Activity Tracker on Post-operative Hospitalized Patients: A Pilot Study
Elizabeth Russer, MSN, RN, PCCN	Effects of Feeding Schedule on the Development of ICU Delirium
Elizabeth Russer, MSN, RN, PCCN	The VENT-AVOID Trial: A Prospective, Multi-Center, Randomized, Controlled, Pivotal Trial to Validate the Safety and Efficacy of the Hemolung Respiratory Assist System for COPD Patients Experiencing an Acute Exacerbation Requiring Ventilatory Support
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN Anthony Filippelli, DNP, RN, CEN, NEA-BC	Examining the Effects of a Hi-Fidelity Simulation on Sepsis Identification, Compliance with the Sepsis Bundle and Documentation of a Warning Score
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN Anthony Filippelli, DNP, RN, CEN, NEA-BC Leigh Anne Schmidt, MSN, RN, NE-BC	Robert Wood Johnson University Hospital Emergency Department Redesign Influence on Nursing Practice
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN Georgia Harrison, DNP, RN, CCRN	Examining the Relationship between Community Hospital Nurses' Perceptions of a Healthy Work Environment and Intent to Transfer Following Health System Mergers
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Acuity Decisions for Female Patients with Hypertension on Presentation: Does Recent Obstetric Event Affect Decision Making
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	The Effects of Music Therapy on Nausea, Vomiting, Mood, Anxiety, and Overall Comfort on Patients Receiving Outpatient Chemotherapy

Name with Credentials

Dawnmarie DeVito, MSN, RN, CPAN

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Kathy Easter, MSN, RN, CCRN-K

Linda Tamburri, MS, RN, APN, CCRN

Georgia Harrison, DNP, RN, CCRN

Kathleen Mahoney, PhD, APN, RN, OB-EFM

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Georgia Harrison, DNP, RN, CCRN

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Donna Prete, MSN, RN- BC, NE-BC

Myrna Young, MSN, RN, CNOR

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

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ACNS-BC, FAEN

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Vittoria Pontieri-Lewis, MS, RN, CWOCN, ACNS-BC

Lori Colineri, DNP, RN, NEA-BC

Publication

Wilson, K., DeVito, D., Zavotsky, K. E., Rusay, M., Allen, M., & Huang, S. (2018). Keep it moving and remember to PAC for venous thromboembolism prevention. *Orthopaedic Nursing* 37(6) 339-345.

Easter, K., & Tamburri, L. (2018) Understanding patient safety and quality outcome data. *Critical Care Nurse* 38(6) 58-66. doi:10.4037/ccn2018979

Russo, C., Calo, O., Harrison, G. Mahoney, K., & Zavotsky, K. E. (2018). Resilience and coping after hospital mergers. *Clinical Nurse Specialist* March/April, 97-102.

Harrison, G., & Zavotsky, K. E. (2018). Are critical care nurses more likely to leave after a merger? The relationship between perceptions of a healthy work environment and the intent to transfer. *Nursing Management*, September, 32-39.

Bridgeman M. M., Prete D., & Sturgill M. G.(2018) Enhancing empathy: Using simulation to introduce students and healthcare professionals to geriatric loss [abstract]. *American Journal of Pharmaceutical Education*. 82(5): Article 7158.

Young, M. (2018). Big dreams, broken glass. In M. Africa Beebe (ED.), *Disrupt 3.0 Filipina women rising* (3rd ed.). San Francisco, CA: Filipina Women's Network

Zavotsky, K. E., & Wolf, L. (2018). Building an institutional research committee: Getting started. *Journal of Emergency Nursing*. 44(3) 308-309.

Wolf, L., Delao, A., Perhats, C., Moon, M., & Zavotsky, K. E. (2018). Triageing the emergency department, not the patient: United States emergency nurses' experience of the triage process. *Journal of Emergency Nursing*. 44(3)258-266.

Wolf, L., Perhats, C., DeLao, A., Clark, P., Moon, M., & Zavotsky, K. E. (2018). Assessing for occult suicidality at triage: experiences of emergency nurses. *Journal of Emergency Nursing*, 44(5) 491-498.

Lehr, J., Vitoux, R., Zavotsky K. E., Pontieri- Lewis, V., & Colineri, L. (2018). Achieving outcomes with innovative smart pump technology: partnership, planning, and quality improvement. *Journal of Nursing Care Quality*. doi:10.1097/NCQ.0000000000000326

Name with Credentials	Name of Presentation	Conference Name or Sponsor
Lori Colineri, DNP, RN, NEA-BC	Heart Disease and its Impact on the Patient and their Family Members	American Heart Association
Kathy Easter, MSN, RN, CCRN-K	The Impact of a Professional Development Activity on Shared Governance Engagement	RWJBarnabas Health 13th Annual Nursing Research Day
Kathy Easter, MSN, RN, CCRN-K	Using the Magnet Model to Disseminate Lessons Learned	Clara Maass Medical Center
Georgia Harrison, MSN Ed, RN, CCRN	A Comprehensive Ventilator Liberation Strategy in a Closed ICU Markedly Reduces Ventilator Utilization	Society of Critical Care Medicine
Andreas Kraft, BSN, RN, RN-BC Myrna Young, MSN, RN, CNOR Laura Szymczak Edward House Patricia Rodriguez Joe McGettigan	Innovative Strategies In Developing A Cutting- Edge SPHM Program	NACNS - National Conference for Safe Patient Handling
Arlex Matulac, MSN, RN	Culture of Growth: Professional Development and Career Advancement	Robert Wood Johnson University Hospital Asian BRG
Awina Nueva, BSN, RN, RNC-OB	Team Steps	Robert Wood Johnson University Hospital Grand Rounds and Course
Donna Prete, MSN, RN, BC, NE-BC	Enhancing empathy: Using Simulation to Introduce Students and Healthcare Professionals to Geriatric Loss	NICHE Conference
Donna Prete, MSN, RN, BC, NE-BC Nicole Rolston, MSN, RN, BC	Improving Empathetic Care Through Simulation	National Association of Clinical Nurse Specialists
Linda Tamburri, MS, RN, APN, CCRN	Healthcare Providers: The Second Victims of Adverse Events	Rutgers University School of Pharmacy, Tristate Critical Care Symposium
Linda Tamburri, MS, RN, APN, CCRN	Creating a Healthy Work Environment for Second Victims of Adverse Events	Central New Jersey Chapter-American Association of Critical Care Nurses
Myrna Young, MSN, RN, CNOR	Innovative Strategies in Developing a Cutting-Edge Safe Patient Handling & Mobility Program, Part 1	Reaching for Excellence in Safe Patient Handling & Mobility - Innovations, Partnerships & Coalitions to Make the Needle Jump
Myrna Young, MSN, RN, CNOR	Innovative Strategies in Developing a Cutting-Edge Safe Patient Handling & Mobility Program Part 2	Reaching for Excellence in Safe Patient Handling & Mobility - Innovations, Partnerships, & Coalitions to Make the Needle Jump
Myrna Young, MSN, RN, CNOR	Mentorship: My Mother's Dream	Voice of Filipina Rising
Myrna Young, MSN, RN, CNOR	Empowering Women to Fight Violence Against Women	Vagina Monologues
Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Creating a Culture of Inquiry in the Emergency Department through PI, EBP and Research	New Jersey Emergency Nurses Association

Poster Presentations

Name with Credentials	Name of Presentation	Conference Name or Sponsor
Carla Boyle, BSN, RN, RNC-OB	Improvement in the Timely Administration of the Universal Hepatitis B Birth Dose in the Newborn Nursery	RWJBarnabas Health Quality Fair
Carla Boyle, BSN, RN, RNC-OB	Safety Action Series National Improvement Challenge Reduction of Primary C-Sections	Council on Patient Safety in Women's Health Care
Carla Boyle, BSN, RN, RNC-OB Awina Nueva, BSN, RN, RNC-OB	Exemplary Care: 1 Family, 3 Patients, 3 Specialties - One Exceptional Nursing Team	RWJBarnabas Health Nursing Research Day
Francisca Dagdag, BSN, RN, MNN Gracelyn Stanbury, BSN, RN, MNN Julienne Riviere, BSN, RN, MNN Dawnmarie DeVito, MSN, RN, CPAN	Safety Fair	RWJBarnabas Health Nursing Research Day
Dawnmarie DeVito, MSN, RN, CPAN	Surgical Services Hair Removal Protocol: To Clip or Not to Clip	American Society of Perianesthesia Nursing
	Post Anesthesia Care Unit: The Journey towards becoming a Comprehensive Stroke Unit to Promote Post Mechanical Thrombectomy Clinical Care	NorthEast Cerebrovascular Consortium 13th Annual Summit
Susan Elliott, BSN, RN Mary Urrego, RN, CCRN Michelle Dickson, BSN, RN, CAPA Danuta Niewinska, BSN, RN Jennifer Pirozzi, BSN, RN, CNOR Pamela McKinney, RN, CRNFA, CNOR	Surgical Normothermia: Achieving the Triple Aim	RWJBarnabas Health Quality Fair
Cynthia Ferraro, MSN, APN, RN, CPNP-PC, RNC-LRN Lisa Laws, MSN, NNP-BC, RNC-NIC	Partnering with Parents to Promote Safe Care in the NICU	11th Annual NeoForum Research Symposium
Denise Gerhab, BSN, RN, WCC-OMS Kimberly McKeivitt, BSN, RN, WCC-OMS Doris Van Dyke, BSN, RN, RN-BC Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Exploring the Benefits of a Structured Hands-on Skin and Wound Care Education Session with New Graduates and their Caregiver Confidence	Wound Care Education Institute: WOW Conference
Denise Gerhab, BSN, RN, WCC-OMS Kimberly McKeivitt, BSN, RN, WCC-OMS Doris Van Dyke, BSN, RN, RN-BC Kathleen E. Zavotsky, PhD, RN, CCRN, CEN, ACNS-BC, FAEN	Exploring the Benefits of a Structured Hands-on Skin and Wound Care Education Session with New Graduates and their Caregiver Confidence	New Jersey Hospital Association & Organization of Nurse Leaders Research Day Conference
Gregoria Hernandez, BSN,RN, CCRN Angelie DelRosario, BSN, RN, RN-BC Sheila Hernandez, BSN, RN, PCCN Maryann Aduna, BSN, RN	Zeroing in on VTE in 2-Core Cardiothoracic Unit	RWJBarnabas Health Nursing Research Day
Gladys Kuria, MSN, RN Selena McClinton, MSN, RN, RN-BC	Keeping in Rhythm: Standardization of Nursing Telemetry	American Nursing Informatics Association Annual conference
Tracey Malast, MSN, RN Cheryl Myers, MSN, RN	The Discharge Hospitality Suite	2018 ANCC National Magnet Conference
Lorraine Martino, MSN, RN, NEA-BC	Leveraging Technology to Raise Awareness and Increase Compliance with Handwashing	RWJBarnabas Health Quality Fair
Donna Prete, MSN, RN, BC, NE-BC	Enhancing Empathy: Using Simulation to Introduce Students and Healthcare Professionals to Geriatric Loss	American Association of Colleges of Pharmacy 2018 Annual Meeting,

Poster Presentations

Poster Presenters

Marlene Spina, BSN, RN, CDE

Jessa Torres-Manalastas, BSN, RN, CCRN
Cynthia Ferraro, MSN, APN, RN, CPNP-PC,
RNC-LRN

Lisa Laws, MSN, NNP-BC, RNC-NIC

Laura Shanahan, RRT-NPS

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Jennifer Pirozzi, BSN, RN, CNOR

Name of Presentation

Diabetes in DR: The DRRO's First Mission

Collaborative Focus on Pneumothorax
in the NICU: A Patient-Centered Quality
Improvement and Safety Initiative

"Do I Stay or Do I Go?" The Effects of Moral
Distress on Operating Room Nurses

Conference Name or Sponsor

Garden State Association of Diabetes Educators'
Annual Conference

RWJUH - Critical Care Symposium

Eastern Nursing Research Society

Professional Appointments

Name

Kathy Easter, MSN, RN, CCRN-K

Kathy Easter, MSN, RN, CCRN-K

Kathy Easter, MSN, RN, CCRN-K

Georgia Harrison, DNP, RN, CCRN

Georgia Harrison, DNP, RN, CCRN

Elizabeth Russer, MSN, RN, PCCN

Lydia Stockman, MHA,BSN, RN, FACHE

Lydia Stockman, MHA,BSN, RN, FACHE

Linda Tamburri, MS, RN, APN, CCRN

Linda Tamburri, MS, RN, APN, CCRN

Myrna Young, MSN, RN, CNOR

Myrna Young, MSN, RN, CNOR

Myrna Young, MSN, RN, CNOR

Myrna Young, MSN, RN, CNOR

Kathleen E. Zavotsky, PhD, RN, CCRN, CEN,
ACNS-BC, FAEN

Appointment

New Jersey Council of Magnet
Organizations, Treasurer

ANA Quality Conference Abstract
Reviewer

ANCC National Magnet Conference
Abstract Reviewer

AACN 2019 NTI Evidence-Based Poster
Abstract Reviewer

ONL NJ Education Committee

Adjunct Faculty

Seton Hall University MHA Advisory
Council

Community Liver Alliance, Board Member

Circle of Excellence Award Review Panel

Abstract Reviewer for ANCC National
Magnet® Conference

2018 March of Dimes Nurse of the Year
Award Committee Member

President of Ladies for Rizal, Int'l
Organization

Board of Director & Treasurer 2018-2020

Vice President, Communications

Chairperson, Research Committee

Organization

New Jersey Council of Magnet Organizations

American Nurses Association

American Nurses Credentialing Center

American Association of Critical Care Nurses

Organization of Nurse Leaders

Rutgers, The State University of New Jersey

Seton Hall University

Community Liver Alliance

American Association of Critical Care Nurses

American Nurses Credentialing Center

March of Dimes

Jose P. Rizal International Foundation, Inc.

Philippine Independence Day Council

Jose P. Rizal International Foundation, Inc.

National Association of Clinical Nurse Specialists

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