

TSNRP ★ news

From the Director

SPRING/SUMMER 2012



CAPT John P. Maye

The TriService Nursing Research Program (TSNRP) staff and I have been extremely busy the past year. Much of the work and the educational opportunities that were offered in 2011 have led to new and exciting prospects in 2012. The Biobehavioral Research Interest Group (RIG) held its first meeting at the University of Michigan last summer. Upon the meeting's conclusion, a needs assessment was conducted and an educational program was conceived. Under the leadership of Col (ret) Penny Pierce, USAFR, NC, a summer course, largely sponsored by TSNRP, will now be offered at the University of Michigan Institute for Social Research. The weeklong course will focus on enhancing the skills of military nurse researchers as they pursue biobehavioral research with and without survey methodology. TSNRP continues to support and develop RIGs, which provide a critical foundation to the development of a strong military nursing research program. Both the Women's Health RIG and the En Route Care RIG have continued to expand in scope and membership.

CDR Dennis Spence, NC, USN, has coordinated a Research and Scientific Writing Resources project to provide educational resources that will assist military nurses, physicians, and allied health professionals in conducting and disseminating research and scholarly activities.

Educational offerings will include PowerPoint presentations and podcasts that will be available on TSNRP's Web site. Topics will include formulating a research question, conducting a literature review, research design, research methods, statistics, responsible conduct of research, and improving scientific writing skills. An article by CDR Spence in this issue of *TSNRP News* provides additional information about this valuable educational program.

Research and technology continue to evolve. Many military nurses engage in distance-learning programs, either to obtain a degree or to increase their knowledge base. To keep pace with changes in technology, education, and research, TSNRP will hold a Strategic Planning Meeting to re-evaluate its mission, vision, research, and educational priorities. The meeting is scheduled for 10–11 September 2012 and will be held in the national capital area. On the afternoon of 10 September, TSNRP will hold a 20th anniversary reception to celebrate the many accomplishments of military nurse researchers. Please mark your calendar!

TSNRP remains committed to military nurses and military nursing research. As you read this newsletter, consider participating in a RIG or attending a TSNRP-sponsored educational event. Also, take the time to visit the TSNRP Web site and review the different educational offerings available. Regardless of your rank or education level, TSNRP has something to offer you.

CAPT John P. Maye, CRNA, PhD, NC, USN



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Development and Implementation of the Army Nursing Research and Evidence-Based Practice Priority List and Policy

Lori A. Loan, PhD, RN, FAAN, Army Nurse Corps Consultant to the Surgeon General for Nursing Research

Evidence-based management (EBM) is a high-priority initiative in the Army Nursing (AN) Campaign Plan. While management of evidence and knowledge currently available is an obvious component of EBM, recognition and action to fill gaps in knowledge are also crucial to ensure

for Implementing the Army Nursing Research & EBP Priority List. The list identifies high-priority knowledge gaps. The policy outlines the plan of action to deliver immediate evidence to be used to formulate solutions.

Several steps for knowledge gap identification and priority setting

and EBP projects. ANC Consultants to The Surgeon General (TSG) and the Warrior Care, Human Capital, Evidence-Based, and Leadership Imperative Action Team Leaders were asked to submit a list of knowledge gaps that require immediate and near-term solutions. Items from

Why prioritize a near-term AN research and EBP agenda?

- Mission success is crucial.
- The culture and goals have changed.
- Deployments are the norm.
- The Army Nursing Campaign Imperative Action Teams have exposed new knowledge gaps.
- Resources for research and EBP are limited.
- Research endeavors need to be balanced between constituencies (e.g., ANC and Medical Treatment Facilities).
- Coordination among leaders and scientists is vital.

- More progress toward intervention evaluation and implementation is needed.
- Priority topics with short-term need-to-know timelines should be transferred to the EBP priority list.

Army Nursing keeps pace with advances that drive practice and process excellence. Recognizing this necessity, the Chief, Army Nurse Corps (ANC), commissioned the development of an Army Nursing Research & Evidence-Based Practice (EBP) Priority List and the Policy

were conducted in order to generate the Research & EBP Priority List. Key stakeholders were interviewed to delineate “ideal” Army Nursing research topics, studies, and agendas. Each Army Center for Nursing Science & Clinical Inquiry was asked to submit a list of ongoing studies

these collated lists, along with the ANC Strategy Map and the TriService Nursing Research Program Research Priority List, were reviewed and then clustered into like categories by six senior Army Nurse Scientists and six selected Army Nursing Consultants to TSG.

Steps Used to Create the AN Research and EBP Priority List

- Define the problem.
- Identify stakeholders.
- Describe an “ideal” research study and research agenda.
- Review external and internal research activities and agendas.
- Identify knowledge gaps.
- Determine whether gaps are best bridged by research or EBP.
- Compile a slate of research and EBP initiatives to address knowledge gaps.
- Review AN comparative advantage for each initiative.
- Prioritize research and EBP initiatives.
- Strategize methods to match resources (people, money, etc.) to high-priority initiatives.

Each remaining knowledge gap was evaluated to determine if its outcome was sensitive to changes in nursing. This was done by focusing on two broad requirements: (1) Is the gap a high-cost, high-volume, high-risk, or problem-prone phenomenon?, and (2) Does the gap represent a weakest link or a biggest benefit? Several knowledge gaps were eliminated from the priority list after this

is the present resource flow for the outcome impacted by the gap?, (4) How effective are present interventions to improve the outcome?, and (5) How effective could future interventions to improve the outcome be? Several gaps were dropped from the list because the ability of nursing to impact on the outcome was low, or work was already in place to fill the knowledge gap.

How much evidence is available to support a solution?, and (4) What is the strength and quality of available evidence?

The preliminary list of research and EBP priorities was merged into one list and further refined during a briefing to the Deputy Chief, ANC, and other senior staff. The list and the Policy for Implementing the Army Nursing Research & EBP Priority List

Where does the knowledge gap fall on the evidence loop?

- Creation of knowledge (Research)
- Validation of knowledge (EBP or Research)
- Transformation into best practice (EBP)
- Dissemination of knowledge (EBP)
- Identification of gaps and development of initiatives to fill gaps (start with EBP but may progress to Research)
- Development of indicators to measure impact on desired outcomes (Research)
- Feedback such as program evaluation for ongoing initiatives (EBP)

review. Next, five questions were considered to determine the immediacy and futility of each knowledge gap: (1) What is the burden of the outcome impacted by the knowledge gap?, (2) Why does the gap persist?, (3) What

Each remaining item was evaluated for its strategic significance in order to determine if the gap should be pursued using research or EBP. Factors in this evaluation were (1) How important is the solution?, (2) How soon do we need to implement a solution?, (3)

were refined and then approved by the Chief, ANC.

Fifty evidence-based recommendations were generated from the 11 high-priority EBP projects that have been completed to date. ★

Policy for Implementing the Army Nursing Research and Evidence-Based Practice Priority List

- All AN graduate students and fellows are required to choose a topic from the priority list for their thesis, scholarly or capstone project, or dissertation; coordinate with the Education (E) or Nursing Research (NR) Consultant regarding topic selection; provide the E or NR Consultant with an electronic copy of their completed project or study; and assist in efforts to disseminate findings.
- Every Army Nurse Scientist will be assigned a priority list topic and expected to complete a thorough evaluation and grading of evidence, plan of action to address the knowledge gap, and timeline for study or project completion.
- The Consultants to the Surgeon General for E and NR will coordinate and facilitate priority list topic assignments and guide diffusion of evidence efforts for priority list studies or projects.

Disclaimer: The views expressed in this article are those of the authors and do not reflect the official policy of the Department of the Army, the Department of Defense, or the U.S. Government.

Restructuring Into a Joint Nursing Research Cell

LTC Meryia Throop, AN, USA

Although restructuring and mergers are increasingly common in the civilian sector, the closure of Walter Reed Army Medical Center (WRAMC) and its integration with the National Naval Medical Center (NNMC) was unprecedented in the history of military health care. The initial transition of outpatients and staff from WRAMC to the NNMC campus began in April 2011 and was completed in the third week of August 2011. By mid-morning August 27, the last inpatient at WRAMC, a wounded service member assigned to the Warrior Transition Unit, was loaded into an ambulance and transferred to the NNMC campus. By September 15, 2011, the "new" facility, named Walter Reed National Military Medical Center (WRNMMC) Bethesda, was forged.

Following nearly the same timeline, the nursing research cells located at both facilities also began to integrate. This delicate dance involved identifying work priorities, recognizing cultural nuances, planning for the integration of personnel, and developing new work procedures. In addition, both entities had equipment and files to be moved to a new building. In spite of the physical challenges, the formation of a joint research cell composed of the Army and the Navy—and the later addition of an Air Force nurse scientist—provided a unique opportunity for collaboration and to fundamentally understand facility integration from a first-person point of view. This is the WRNMMC story told from the perspectives of the chiefs of each research cell at the former facilities as they experienced The Move.

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COL Sara Breckenridge-Sproat, AN, USA:

I consider the integration of the WRAMC and NNMC nursing research cells akin to a permanent change in station (PCS). New faces, new places; some I know from the past, and some are new people to meet and greet. Get into the job, learn the new systems, and then get back to work in a short time.

In preparation, we made a concerted effort to reach out to our Navy partner—CDR Michele Kane, NC, USN—to involve her in projects that we predicted would transfer to the new facility. Thinking like a typical soldier, this was the time to begin the dialogue regarding all of the logistics to prepare her and us for the move.

I expected the usual summer turmoil; however, this 8-mile PCS was as if the whole building was shaken upside down and everyone PCSed at the same time. Seemingly easy processes appeared broken, and few knew where to turn to get things done. Our civilians, whom we have always relied on for institutional knowledge in the past, were unable to locate their usual knowledge brokers to get work orders in place and to fix items that were not working. In a single week, it seemed that everyone in the institution became challenged with competing priorities. All the planning that was done seemed like a drop in the bucket compared to what we wanted or needed to get done now that we had really arrived at our new location.

For a group of fast-paced researchers with more than 50 years of conducting research at WRAMC, adjusting

to a new place, new faces, and a new pace was challenging. To quote CAPT Spock of the U.S.S. Enterprise, "Hours could seem like days." The organization's focus of effort was understandably and rightfully caring for our wounded warriors and their families. The researchers were considered a lower priority when dealing with the chaos of the move, such as triaging problems and applying resources to ensure that the patients and staff immediately received the care and resources they required. What we had expected would be minor office inconveniences were, in fact, major challenging road blocks.

But soon we began to bond as we started to celebrate the small successes: "Hooray! The printer is now networked!!" And then the momentum began to build as we started to embrace even the smallest positive changes as monumental victories: "One member of our department has a long-distance PIN code!!!" As the momentum increased, slowly the pace began to increase. Despite our Army affiliation, we started to know and use Navy "lingo" as we directed folks toward the "head" (restroom), next to the "ladder" (stairwell) on the second "deck" (floor). After several weeks, the grant writing season began. A new coffee pot was plugged in and working. We could hear our new printer in the back starting to hum.

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CDR Michele Kane, NC, USN:

Even though WRAMC was relocating to our campus (NNMC) to become the new WRNMMC, I was essentially the lonesome dove waiting for

the invading force to arrive. Everyone was up-front about the loss of the legacy of WRAMC, but there was a loss for the Navy, as well. Our loss of identity seemed to be at times underappreciated or unrecognized. I sensed that the nurse scientists and research staff members from WRAMC were a cohesive unit, and I wondered how I would fit in. They knew each other's research strengths and weaknesses and research trajectories; at times, they had their own lingo and quirky moments of humor. They had established social connections with colleagues within the Army that I had not. Not to mention, for all intents and purposes, they were already a fully functioning "ship."

Prior to integration, the Navy Nursing Research Department at NNMC was a shop of "one" (and I was the "one"). Being the only nurse researcher at one of the biggest military treatment facilities created a significant amount of stress for me as I strived to meet everyone's needs, from professional grant writing, protocol evaluations and support, institutional review board requirements, and evidence-based practice projects to teaching, strategic partnerships, and organizational demands. In reality, I was nervous about fitting into the new group, but I also couldn't wait for the Army nurse researchers to arrive, just from the pure perspective of being a part of a "robust" nursing research department. I wanted to see how they did it. I looked forward to the intellectual freedom and stimulation to talk about research ideas and to be mentored under "veteran" researchers in aspects of grant writing and submissions. Furthermore, to watch other researchers construct ideas, teach, and mentor is an invaluable gift.

Being by myself at NNMC, I rarely had daily opportunities for dialogue.

Reflecting after the move, I found two events pivotal to our group success. First, both the WRAMC staff and I moved into a "new" building at the same time; consequently, it didn't feel like an invasion. It felt like we were all starting fresh. The situation was very similar to reporting aboard ship for a 6-month deployment. Boxes and personal gear everywhere (called "gear adrift" in the Navy or a "duffle bag drag" in the Army). "But we are here now, so dig in!"

The second event was the TSNRP Cycle A call for proposals in October 2011. As soon as we got our computers and phone lines working (which for most of the Army personnel was a horrendous task in itself), we had to begin writing. That singular experience over the next 30 days brought me closer to this group than anything else. (Of course, I am still not fluent in "Armyspeak"; it took me a while to get used to some Army lingo—for example, why would you want to visit a mess[ly] hall?) At the same time, my new boss (of 2 weeks) was now editing my proposal. Never in my 3 years of being a novice researcher at NNMC did I feel a part of something greater. In sum, this is what it was all about: collaboration, skill building,

and collegial scientific interface. I was missing it for years, and now I found it in my Army comrades!

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After The Move

Six months have passed since WRAMC and NNMC integrated and the resulting WRNMMC submitted two grants in the TSNRP A call. The printers are still "new," and the paint is still "fresh" in the new facility. In making the move, the newly formed team underestimated the disruption to work flow and the reliance on institutional knowledge (even for the most basic tasks). In the beginning of the integration, nearly all efforts had to be focused on the purely tactical conditions and conducting simple office tasks, such as setting up voice mailboxes. Nonetheless, the ability of the nurse scientists to work together, align their priorities, and be willing to adopt new "lingos" enhanced teamwork and collaboration. Those involved have never lost sight of their joint strategic mission—to make nursing research relevant, timely, and significant for all nurses who care for military members and families. The nurse scientists continue to grow closer and identify new research needs that must be addressed in the military health care community. ★

Published Articles by TSNRP Nurse Scientists

McGraw, L., Pickering, M. A., Ohlson, C., & Hammermeister, J. (2012). The influence of mental skills on motivation and psychosocial characteristics. *Mil Med* 177(1), 77–84.

Wilson, C., McClung, J. P., Karl, J. P., & Brothers, M. D. (2011). Iron status of military personnel deployed to Afghanistan. *Mil Med* 176(12), 1421–1425.

Research and Scientific Writing Resources Project

CDR Dennis Spence, NC, USN

Military nurse researchers have many roles and responsibilities, some of which involve developing and promoting research that aligns with their respective branches of Service and their medical and nursing research priorities. They foster grant writing, facilitate multisite research, develop programs of health services research, and serve on strategic goal groups and external civilian and academic boards. They also are expected to be subject matter experts in their substantive areas of clinical knowledge; engage in scholarly activities that demonstrate their expertise, such as publishing, proposal writing, and teaching; and serve in leadership positions within their respective commands. In most Service branches, military nurse researchers also are expected to maintain their clinical nursing or advanced practice skills. One of their most important and exciting roles, however, is to mentor and educate novice investigators in study design and methodology, evidence-based practice (EBP), and other scholarly and research practices.

At Naval Medical Center San Diego, I had the wonderful opportunity to serve as a nurse researcher and as chair of research education and facilitation in our Clinical Investigation Department. In these roles, I mentored and educated nurses, physicians, and allied health professionals in research design and methodology, EBP, and other scholarly and investigative endeavors. Nurse researchers are experts in research and EBP, and it is essential that we promote ourselves as such to all health care professionals. One of the best ways to do this is to educate and facilitate research and EBP by novice investigators.

Educating and facilitating research through formal courses in the military

can be a daunting and time-consuming task. Some large commands may have whole staff education departments that can coordinate the development of curriculum, the scheduling of classes, and the registration of participants, whereas smaller commands may not have these resources available. It takes time to identify content experts, prepare lectures, and locate other course resources. Furthermore, costs for travel and lost work hours for participants to attend courses can sometimes limit their ability to develop formal research and EBP coursework.

TSNRP has done an outstanding job of providing numerous training and education opportunities to military nurses over the years. It has hosted grant camps, grant management workshops, research and EBP courses, and publication workshops. These courses are effective at preparing and promoting nursing research and EBP; unfortunately, space to attend these courses is limited, which presents a barrier to military nurses seeking additional education in research and EBP.

To address this barrier, TSNRP has teamed up with the Research Facilitation Division at Naval Medical Center San Diego to develop a series of research and scientific writing resources. These educational resources will assist nurses, physicians, and allied health professionals in conducting and disseminating research and scholarly activities. Experts in nursing, medical research, and biostatistics have contributed to the development of this project, which is designed to prevent redundancy in work efforts of military nurse researchers who are trying to educate and to facilitate research and EBP, potentially saving time and money. The project will



CDR Dennis Spence

provide excellent resources for military nursing professionals who are interested in conducting and disseminating research and EBP findings as well as for nurses who are preparing for or are currently in doctoral programs. Military nurse researchers are encouraged to download and share these resources.

The project materials will be posted on the TSNRP Web site for easy access. Presentations will be provided in PowerPoint or Adobe format, and podcasts will be in WMV or MP4 format. The project also will include links to Web resources on research, EBP, and statistics. For those learning how to use SPSS, demos are offered on how to perform common statistical tests. Resources can be downloaded from the Web site and imported onto computers and other media devices (e.g., iPods, iPads, tablet PCs). Topics included in this project are as follows:

- Part 1. Formulating a Research Question

- Formulating a Research Question (PowerPoint and Videos)
- Problem Statement and Research Question (Example)
- Specific Aims Taxonomy
- Part 2. Conducting Literature Searches
 - Constructing a Sensitive Search
 - Searching and Reviewing Scientific Literature
 - Literature Search and Evidence-Based Practice (Web Resources)
- Part 3. Research Design
 - Experimental and Quasi-Experimental Design (PowerPoint and Videos)
 - Qualitative Research Design (PowerPoint and Videos)
 - Survey Research Design (PowerPoint and Videos)
- Part 4. Research Methods
 - Research Methods (PowerPoint and Videos)
 - Methods Section (Example)
- Research and Evidence-Based Practice (Web Resources)
- Part 5. Statistics
 - The Role of the Biostatistician in Research (PowerPoint and Videos)
 - Helpful Hints on Study Planning
 - Statistical Web Resources
 - Choosing a Statistical Test (Video)
 - SPSS Demos
- Part 6. Responsible Conduct of Research and Bioethics (Web Resources)
- Part 7. Scientific Writing
 - Scientific Writing Tips (PowerPoint and Videos)
 - How to Write an Abstract (PowerPoint and Videos)
 - How to Make a Poster (PowerPoint and Videos)
 - Writing and Publishing Scientific Papers (PowerPoint and Videos)
 - How to Write a Case Report (PowerPoint and Videos)

The Research Facilitation Division at Naval Medical Center San Diego would like to thank the following people for providing the material and for granting their permission to disseminate these resources: CAPT(ret) Linnea Axman, NC, USN; Elizabeth Barker, PhD, CNP; CAPT John Maye, NC, USN; Lt Col Marla DeJong, NC, USAF; CDR Dennis Spence, NC, USN; Nancy Crum-Cianflone, MD; DeeDee Watts, PhD, RN; Robert Riffenburgh, PhD; and LTC (ret) Nancy Ryan-Wenger, AN, USA.

For more information, please feel free to contact the developer of this project, CDR Dennis Spence, at dennis.spence@med.navy.mil. ★

Disclaimer: The views expressed in this article are those of the author and do not reflect official policy or position of the Department of the Navy, the Department of Defense, the Uniformed Services University of the Health Sciences, or the U.S. Government.



Newly Funded Studies

TSNRP recently awarded grants to the military nurse scientists listed below. These grants will enable them to conduct research or evidence-based practice projects on their respective topics. Please join us in congratulating these new TSNRP grant recipients.

U.S. Army

MAJ (ret) Mary McCarthy, AN, USA, “An RCT of Nurse Coaching vs. Herbal CAM for Soldier Weight Reduction”

LTC Ann Nayback-Beebe, AN, USA, “A Pilot Study Examining the Efficacy of Biomodulator Treatment for Chronic Low Back Pain”

LTC Meryia Throop, AN, USA, “Exploring the Patient Perspective in a Restructured Military Facility”

U.S. Navy

CDR Carole Daniel, NC, USN, “Effect of Psychosocial Factors on Acute and Persistent Pain Following Childbirth”

CDR Michele Kane, NC, USN, “Joint Multi-Disciplinary Evidence Based Practice Complex Wound Care Guideline”

U.S. Air Force

Col Mona Pearl, USAF, NC, “Working Dogs for Wounded Warriors: Effects of Animal Assisted Therapy on PTSD”

LTC Laura Feider Inducted into Order of Military Medical Merit

LTC Laura Feider, AN, USA, Brooke Army Medical Command (BAMC) Chief, Center for Nursing Science and Clinical Inquiry, was awarded and inducted into the Order of Military Medical Merit by MG M. Ted Wong, USA, at the BAMC Holiday Ball on 16 December 2011. This prestigious award honors an individual “who through dedicated application of talent, effort and spirit has made a significant exemplary contribution to the U.S. Army Medical Department.” LTC Feider was the only Army nurse inducted into the Order at BAMC and San Antonio Military Medical Center.

The Order of Military Medical Merit is a unique, private organization founded by the Commanding General of the U.S. Army Health Services Command in April 1982 to recognize excellence and promote fellowship and esprit de corps among Army Medical Department (AMEDD) personnel. Membership in the Order recognizes those individuals who have clearly demonstrated the highest standards of integrity and moral character, displayed an outstanding degree of professional competence, served in the AMEDD (for a minimum of 10 years) with selflessness, and made a sustained contribution to the betterment of Army medicine. Membership in the Order denotes distinguished service that is recognized by the senior leadership of the AMEDD. Members receive a certificate and a sterling silver medallion on a maroon ribbon that signifies they are members of the Order.

TSNRP proudly congratulates LTC Feider on receiving this distinguished honor.

Dr. Lori Loan Inducted as an AAN Fellow

Lori Loan, PhD, RNC, Consultant to the Army Surgeon General for Nursing Research, Senior Nurse Scientist at Madigan Healthcare System, and TSNRP’s specialty leader for the U.S. Army, was selected for induction as a Fellow of the American Academy of Nursing (AAN) at the Academy’s 38th Annual Meeting and Conference on 15 October 2011 in Washington, D.C. In her role as the first civilian Consultant to the Army Surgeon General for Nursing Research, Dr. Loan transformed nursing support services Army-wide, building five regional Centers for Nursing Science and Clinical Inquiry staffed with nurse scientists, clinical nurse specialists, and health care system analysts with a research, evidence-based practice, and decision-support mission. In addition, she has led or advised military research teams nationally and abroad during the past 15 years, leading to transformations in pre-deployment nurse training that focused on relevant and critical combat skills for a number of duty positions and to changes in nurse staffing and outcomes at both the unit and shift levels that enabled nurse executives to make targeted improvements. Dr. Loan has been instrumental as a team member on numerous TSNRP-funded research studies and frequently is sought out for her expertise in study design and methods as well as health services research.

The prestigious nomination for induction into AAN requires an impressive portfolio of expertise and contributions, current and future, to the field of nursing and/or health care nationally or internationally. Evidence of these contributions includes, but is not limited to, productivity that implies consistent outstanding performance over time; criticality of the impact of contributions and their sustainability over time; dissemination of important information and contributions over a career timeline; and documentation of the adoption of the candidate’s research findings and innovations that guide changes in education, research, administration, or the improvement of nursing practice at the national level. In addition, there must be evidence of activities that reflect a broad perspective of nursing’s commitment to society and active participation in nursing and other organizations at the national or international level.

TSNRP congratulates Dr. Loan on this special recognition of her outstanding achievements.

Col(ret) Laura Talbot Named Dean for College of Nursing

Col(ret) Laura A. Talbot, USAF, NC, has been named the next dean for the University of Tennessee Health Science Center (UTHSC) College of Nursing in Memphis. She will assume her new responsibilities in June. In her new role, Col(ret) Talbot will be responsible for all four UTHSC missions—education, research, clinical care, and public service—at the College of Nursing, which is the leading producer of nursing faculty and graduate nurses in the Mid-South.

Col(ret) Talbot is currently the Dean W. Colvard Distinguished Professor in Nursing and a professor in the College of Health and Human Services at the University of North Carolina at Charlotte (UNCC). She also serves as director of the UNCC Health Services Research PhD program.

In addition to four years at UNCC, Col(ret) Talbot’s academic appointments have included five years at the Uniformed Services University of the Health Sciences and five years on the faculty of the Johns Hopkins University School of Nursing in Baltimore, Maryland. Originally from Texas, Col(ret) Talbot has extensive administrative, clinical, and research experience, much of it gleaned during her more than 30 years of service in the Air Force. While in the Air Force, she commanded a medical squadron.

Recognized as a leading contributor in her field, Col(ret) Talbot has received a wide variety of awards and recognitions, including the Legion of Merit (2010); Meritorious Service Medal, Second Oak Leaf Cluster (2007); Brigadier General Beverly Lindsey Administrative Excellence Award, Air Force Reserve Corps (2006); Global War on Terrorism Service Medal (2006), and Faye G. Abdellah Senior Researcher Award (USUHS-GSN, 2005).

Col(ret) Talbot has two ongoing TSNRP-funded studies: “Strength, Pain and Function in OIF/OEF Amputees: A Nurse Managed Program” and “Electromyostimulation and Strength Walking for Knee Injuries: Nurse Managed Care.”

COL (ret) Linda Yoder Named RWJF Executive Nurse Fellow

COL (ret) Linda Yoder, AN, USA, associate professor and director of the nursing administration graduate concentration at The University of Texas at Austin School of Nursing, has been named a 2011 Robert Wood Johnson Foundation (RWJF) Executive Nurse Fellow.

COL (ret) Yoder joins a select group of 21 leaders in the field of nursing chosen to participate in the highly competitive, 3-year leadership development program. The fellowship program is designed to enhance nurse leaders’ effectiveness in improving the country’s health care system.

The fellows hold senior leadership positions in health services; scientific and academic organizations; public health and community-based

organizations; and national, professional, governmental, and policy organizations.

COL (ret) Yoder served in the Army Nurse Corps for 28 years. She also has served at the National Institutes of Health Clinical Center and at a large civilian multihospital organization as the director of research. Her studies include examining the nursing work environment, the career development of nurses, and the quality of life in patients with chronic illnesses.

The RWJF Executive Nurse Fellows Program provides coaching, education, and other support to strengthen nurses’ ability to lead teams and organizations in improving health and health care. The program collaborates with the Center for Creative Leadership in Greensboro, North Carolina, and Colorado Springs, Colorado.

“I am humbled to be selected to such a distinguished fellowship program,” COL (ret) Yoder said, “especially since we will be working with the Center for Creative Leadership, which is an internationally known leadership development organization for senior executives.” ★



Save the Date!

On 10 and 11 September 2012, TSNRP will commemorate its 20th anniversary in conjunction with its Strategic Planning Meeting.

Join us on **Monday, 10 September, at 4:00 p.m.** for a reception featuring a commemorative address from Ada Sue Hinshaw, PhD, RN, FAAN, Dean of the Graduate School of Nursing at the Uniformed Services University of the Health Sciences. Visit the TSNRP Web site for additional information.

Former TSNRP Executive Director CAPT Patricia Kelley Retires

In November 2011, CAPT Patricia Kelley retired after 21 years in the Navy. CAPT(ret) Kelley was TSNRP's third Executive Director, having served from June 2003 through February 2007. We thank CAPT(ret) Kelley for taking some time to share her perspectives on her military career and plans for the future.

What sparked your decision to join the Navy?

PK: I decided to join the Navy Reserve while I was in graduate school because a Navy recruiter kept running into me and telling me how great the Navy was. Then President George H.W. Bush declared war, and off to Newport, Rhode Island, I went. I met my husband at the Naval Reserve Center, and the rest is history. Over 21 years of service, I had a great and rewarding career. I met wonderful people and was privileged to care for our nation's greatest military asset: the soldier, marine, sailor, and airman.

What Navy positions did you hold, and what were some of their challenges and rewards?

PK: My Navy positions were varied, ranging from family nurse practitioner to Executive Director of TSNRP to associate professor at the Uniformed Services University of the Health Sciences.

All of the positions were both energizing and challenging. Each job was unique, and I learned from all of them how to maximize the talents of all members of my team. If you marry your passions with the needs of the organization, you can be successful and have fun. I firmly believe that your success is dependent upon others

and that you cannot achieve success solely based upon your own efforts.

Please tell us a little about your duty under instruction (DUINS) experience.

PK: I always wanted to obtain the highest academic degree related to my profession. I became interested in The Catholic University of America (CUA) after meeting an inspiring professor when I was working toward my BSN at American University. She taught at CUA and was very impressive and supportive of students obtaining advanced degrees. So I applied to CUA while I was stationed in Italy. When I heard that I had been selected to work on my PhD full time, I was excited beyond belief.

Studies for a PhD are rigorous, and it is a lonely road because you do most of the learning through reading and reflection. Upon graduation, I was stationed at National Naval Medical Center.

Why did you decide to pursue a career in research? How were you able to support research at TSNRP?

PK: I pursued research to answer the most pressing health care questions and to improve patient outcomes. I believe that a nurse is foremost a patient advocate and that nurses need to be flexible to help patients maximize their health. Research and knowledge development are crucial to achieving the goal.

As Executive Director of TSNRP, I was always inspired by the wonderful and exciting ideas nurses had to improve the science, and I was honored to help nurse researchers achieve their goals. One of the ways I accomplished this was by partnering



CAPT(ret) Patricia Kelley

military nurse scientists with senior nursing faculty at the top ten schools of nursing in the United States. I had the honor to work with some of the country's top nursing experts while serving my country as a Naval officer and a Navy nurse. What a deal—I highly recommend it!

What are your plans for the future?

PK: As a Health Sciences Officer with the Department of Veterans Affairs, I will be working on expanding and further developing the Nursing Research Initiative. I also have been appointed to the Board of Directors for the Navy Safe Harbor Foundation, where I will continue to marry my research and patient care expertise to help provide care and support to the nation's heroes and their families. ★



Recent Graduates

TSNRP proudly congratulates the following four military nurse scientists who recently received their doctoral degrees in nursing.

LTC Susan Hopkinson, AN, USA, recently earned her PhD from the University of Maryland, Baltimore. Her dissertation focused on interruptions in the nursing work environment. Using qualitative methodology, she first completed a pilot study in spring 2010, during which she observed and interviewed six registered nurses at both civilian and military facilities. She presented her study results through poster sessions at the 16th Biennial Phyllis J. Verhonick Nursing Research Conference (where it earned an award for excellence in clinical innovation) and the Walter Reed Army Medical Center's Nurses Week 2011.

LTC Hopkinson's experience from the pilot study guided the development of her micro-ethnographic dissertation study on interruptions within the culture of the nursing unit. Using more than 180 hours of observation of nurses' work on a medical unit and the transcripts of 9 interviews, LTC Hopkinson identified beliefs, values, patterns, and normative practices of the nursing unit that contributed to interruptions.

LTC Hopkinson is currently assigned as a nurse scientist at Landstuhl Regional Medical Center in Germany.

LTC Kristal C. Melvin, AN, USA, earned her PhD in August 2011 from the Johns Hopkins University School of Nursing. Her dissertation, titled "Couple Functioning and Posttraumatic Stress in Operation Iraqi Freedom and Operation Enduring Freedom Veterans and

Spouses," was funded by a TSNRP grant. The objectives of her study were to (1) understand how posttraumatic stress symptoms (PTSS) affect couple functioning in soldiers returning from combat and their spouses or partners, (2) test the moderating effects of multiple variables on the relationship between PTSS and couple functioning, (3) examine the prevalence of secondary traumatic stress in civilian spouses, (4) analyze whether relationships between PTSS and couple functioning differed for male versus female soldiers and their spouses/partners, and (5) explore experiences of couples with high levels of couple functioning despite clinically significant levels of PTSS. Dissemination of LTC Melvin's research has included two poster sessions, a podium presentation, and an article in press in *Research in Nursing & Health*.

LTC Melvin is assigned to a nurse scientist position at Madigan Army Medical Center.

LTC James "Randy" Post, AN, USA, earned his PhD in May 2011 from the University of Tennessee Health Science Center (UTHSC) through the Army Nurse Corps Long Term Health Education and Training program. LTC Post performed a secondary data analysis combing three National Health Assessment and Nutrition Examination Survey (NHANES) datasets to form a large, national-representative sample of U.S. adolescents. His dissertation title was "The Relationship between Lower Extremity Bone Mass and Body Mass Index in the NHANES Adolescent Population." His findings determined that a positive relationship exists between lower extremity bone mass

and body mass index; however, this relationship is dependent on the gender, age, and race/ethnicity of the adolescent.

In addition to his academic pursuits, LTC Post was the College of Nursing representative on the UTHSC Graduate Student Executive Council and served on the Graduate Research Day Committee.

LTC Post is assigned as a nurse scientist at Brooke Army Medical Center.

MAJ Terri L. Yost, AN, USA, was awarded a PhD from the University of Virginia in August 2011. MAJ Yost's dissertation, "Qigong as a Novel Intervention for Service Members with Mild Traumatic Brain Injury," was funded through a TSNRP Graduate Award. The study aimed to determine the level of interest in and perceived benefit of a program of qigong, a Chinese health system. In addition to perceived improvements in quality of life and pain management, the active meditative movements of qigong allowed service members to enjoy the benefits of meditation without experiencing troublesome flashbacks commonly seen in those with mild traumatic brain injury and comorbid posttraumatic stress disorder. Dissemination of research and study findings so far includes a poster presentation at the 117th Annual Meeting of AMSUS, a podium presentation scheduled for the 45th Annual Communicating Nursing Research Conference, and a manuscript accepted for publication by the *Journal of Neuroscience Nursing*.

MAJ Yost is assigned as a nurse scientist at Tripler Army Medical Center in Honolulu, Hawaii. ★



Events and Deadlines

Calendar

May 2012

TSNRP-Sponsored Research Strategies for Clinicians

(in conjunction with the 17th Biennial Phyllis J. Verhonick Military Nursing Research Course)

3–4 May

San Antonio, Texas

National Teaching Institute & Critical Care Exposition

19–24 May

Orlando, Florida

June 2012

Research Development Course

11–13 June

Bethesda, Maryland

July 2012

Research Grant Camp

North Island Naval Air Station

9–13 July

San Diego, California

Biobehavioral Summer Summit

(in conjunction with the Inter-University Consortium for Political and Social Research, University of Michigan)

23–27 July

Ann Arbor, Michigan

August 2012

Post-Award Grants Management Workshop

13–15 August

National Capital Area

San Antonio Army and Air Force Nurses Collaborate

The San Antonio nurse scientist and research community consortium gathered for its second social on 7 January 2012, co-hosted by LTC Laura Feider, AN, USA, and Lt Col Candy Wilson, USAF, NC. The event included representation from Army and Air Force doctorally prepared nurses, project directors, research nurses, and clinical nurse specialists from Brooke Army Medical Center (BAMC)/San Antonio Military Medical Center (SAMMC), the U.S. Army Medical Department Center and School, Wilford Hall

Ambulatory Surgical Clinic (WHASC), and the U.S. Army Institute of Surgical Research. LTC Feider is the chief of the Center for Nursing Science and Clinical Inquiry at BAMC, and Lt Col Wilson is the director of nursing research at WHASC.

Members of the consortium have met to network and establish collaborative and integrative working relationships since the Army and Air Force partnered on 1 October 2011, per the Base Realignment and Closure process, to establish the San Antonio Military Health System.

Other examples of the research consortium's joint and integrated collaboration include the WHASC Nursing Research Day, during which LTC Feider and Lt Col Wilson provided a presentation titled "Joint Nursing Research Endeavors" that focused on the integrated nursing research activities of the Joint Combat Casualty Research Team, TSNRP's research interest groups, and exemplars of integrated collaborative work in the National Capital Region Medical and San Antonio Military Medical Health System. ★



Fostering excellence in military nursing through science