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To provide efficient and effective administrative support services to Indiana's professional licensing boards and commissions in order to facilitate the delivery of competent consumer services by regulated professionals to the citizens of Indiana. To provide an expedient licensing process for regulated professionals by maintaining a climate that fosters the growth of commerce while ensuring the health, safety and welfare of the citizens of our great state.

Frances L. Kelly
Executive Director

Office Location
Indiana Professional Licensing Agency
Indiana State Board of Nursing
Indiana Government Center South Building
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Edition 6
Our nurses are such great teachers, the ones I have been assigned to work with are awesome.

Nikki Christian, OMHS Nurse

Nurses have numerous employment options. Sorting through offers and incentives can be challenging, especially for graduates with no previous nursing experience.

But for Nikki Christian it was a straightforward decision; the seasoned surgical technician knew where she wanted to put down her career roots.

“There was no question about where I wanted to work when I finished nursing school,” said Christian, who worked at hospitals in the Owensboro region for six years, “falling in love” with nursing while observing nurses during her tenure in hospital operating rooms.

Christian, who came to work at OMHS as a nurse extern following her third semester of nursing school, worked seven months in the Coronary Care Unit. Today, she is a nurse graduate and is a full-time Intensive Care nurse. She considers nurses at OMHS a significant part of her education.

“Our nurses are such great teachers,” she said. “The ones I have been assigned to work with are awesome.”

The next steps for Christian include a bachelor of science in nursing and eventually becoming a nurse anesthetist. But she said she knows where she wants to be.

“This is my home, that’s for sure.”

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Board Meetings
The Indiana State Board of Nursing meets on the third Thursday of every month. The meetings begin at 8:30 a.m. and continues until business has been completed. The public is invited to attend. It is not necessary to notify the Board if you wish to attend.

July 20, 2006
August 17, 2006
September 21, 2006
October 19, 2006
November 16, 2006
December 14, 2006

The 2006 meetings will be held in the Auditorium of the Conference Center, Indiana Government Center South Building, 302 West Washington Street, Indianapolis, Indiana. If you have any questions about attending a meeting you may contact the Board at (317) 234-2043 or via e-mail at pla2@pla.in.gov

Meeting agendas will be available 6 days prior to the meeting at www.pla.in.gov Click on the “calendar & news” link.
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What's new in Orthopedics nursing?
An innovative Center of Excellence at St. Vincent Indianapolis Hospital—that's what.

Opening soon, the hospital's Orthopedics Center of Excellence (COE) will be a comprehensive, state-of-the-art environment for diagnostic, surgical and rehabilitative care, as well as research, education and wellness. It will serve inpatients and outpatients, adult and pediatric.

Services will encompass all orthopedic specialties, from joint replacement, sports medicine and musculoskeletal conditions, to spinal reconstruction, cartilage restoration and more.

Developing the exact patient care model has been a significant part of planning the COE. “This will be an environment of true patient-focused care,” says Jeffery L. Pierson, M.D., specialist in orthopedic surgery at the new Orthopedics Center of Excellence.

Pierson says the model places the highest priority on always anticipating and responding to the needs of patients and their family members. “The center will be a setting in which doctors and nurses will constantly ask of themselves, ‘what would I want if I were the patient or the patient’s family?’”

In Pierson’s experience, one of the things patients most want, and nurses most want to provide, is “high-touch care—a direct, continuous, quality relationship between patient and nurse.” That includes providing patients and their loved ones with quality information and education on the respective medical condition.

Nurses in the new COE will become experts in particular areas of orthopedics. “This will be a subspecialty environment,” says Pierson. “We are encouraging and fostering the development of sub-specialty doctor and nurse teams—for example, a joint replacement team, a spine team, an upper extremity team, and so on.”

“Nurses will develop advanced skills and knowledge in precise orthopedics conditions,” Pierson points out. “Experience with this model has demonstrated that, for many nurses, it decreases the stress level in the work environment, as well as enhances pride in expertise.” He says nurses who sub-specialize know they are part of a unique, best-in-class care delivery model that reflects a high level of knowledge, competence and skills.

Another key advantage, Pierson points out, is that it promotes good personal and professional relationships among all staff, including the surgeons, OR and PACU staffs, and other members of the various subspecialty teams.

Pointing out that sub-specialization doesn’t mean nurses and others won’t have potential for cross-training, Pierson says “there definitely will be cross-training; it’s just that here the model of subspecialty teams will be a fundamental.”
Events Affecting the Development of Nursing Education in Indiana

(Part 2)

**Formal Nurses Training in Indiana**

Prior to the development of formal nursing programs, nursing care in hospitals was provided by Sisters from religious orders and workers with previous experience in caring for the sick. During times of inadequate supply, nurses were imported from eastern states where nursing programs were already established (Allen, 1950). As the growth of hospitals occurred, so did the need for persons to provide care for the sick. In Marion County, hospitals were places of last resort for the destitute. Established in 1832, the Marion County Poor Farm provided the only refuse for the sick poor who were unable to afford hospital care (McDonnell, 1994a). By today's standards, medical and nursing care was substandard.

Grace M. Cook, a graduate of the Indianapolis City Hospital School of Nursing, Class of 1911, summarized the establishment of the Indianapolis City Hospital based on an epidemic outbreak in Indianapolis. According to Cook (n.d.):

Early in the year 1855, January or February, when the population of Indianapolis did not exceed 12,000 souls, an epidemic of smallpox greatly alarmed the citizens and led to a discussion of the necessity for providing hospital accommodations and as a result in March, 1856, an ordinance passed the Council authorizing the construction of a building... at the expense of about $25,000.

For many months the building remained unfurnished and useless, until finally, in the latter part of...
April, 1861, shortly after the declaration of war, with the consent of city authorities and by direction of Gov. O. P. Morton, it was taken possession of by the U.S. government, furnished and conducted as a military hospital from May 1st, 1861 to June 15, 1865. (p. 1)

A group of Indianapolis society women organized as the Flower Mission took flowers and provided care for the sick poor since its inception in 1876 (McDonnell, 1994a). In addition, the Flower Mission School later provided trained nursing care for the community through district nursing, private duty practice and long hours that offered little pay (Ross, 1933). Although private hospitals instituted a few basic nurses’ programs, Indiana’s first school of nursing was not established until 1883 (Gabin, 1994).

Through private donations, the Flower Mission Training School for Nurses was developed as part of the Indianapolis City Hospital, which is now known as Wishard Hospital (Eckerman, 1994; Ott, n.d.). With Lilly family financial support, the Flower Mission continued its work in providing care for the ill when it established Eleanor Hospital for the poor sick children in 1895. A small hospital was opened in 1903 on the grounds of Wishard Hospital by the Flower Mission to provide care for those with tuberculosis (McDonnell, 1994a).

One of the early and most significant supporters of nurses’ training in Indiana was Dr. W. N. Wishard, Superintendent of City Hospital, Indianapolis (Wishard, 1983). In 1879, Dr. William N. Wishard became superintendent of City Hospital (Indianapolis City Hospital, 1930). At the time, there were two nurses at City Hospital, one being a male nurse who was in fact a former patient, in charge of the male ward. The other, a female nurse, Fannie McPhearson, was in charge of the female ward (Cook, n.d.).

Dr. Wishard’s influence and support of the Flower Mission Training School for Nurses prompted other physicians to endorse a plan for nurses’ training programs and the necessity of training nursing care for the patients (Eckerman, 1994). In
1895, the second nurse training school in Indiana was established through St. Vincent Hospital followed by Protestant Deaconess Hospital school for nurses in 1899 (McDonnell, 1994c). Society’s need for nursing care to serve those with common diseases such as typhoid fever, infantile diarrhea, tuberculosis (also known as consumption and the white plague), smallpox, diphtheria, pneumonia and venereal disease was the catalyst in the development of nursing in Indiana (McDonnell, 1994a). Then, in the early 1900’s, several new hospitals began to emerge across the state stimulating the need for additional nurse training schools. In 1914, the Indiana University Training School for Nurses (now known as Indiana University School of Nursing) opened in Indianapolis (McDonnell, 1994b).

In a letter by Dr. W. H. Wishard (son of William N. Wishard) dated March 28, 1993, he writes regarding establishment of the Flower Training School for Nurses fifty years earlier:

There was at that time, so far as I could find out, but one training school for nurses west of the Allegheny Mountains, and that was in connection with the Presbyterian and Cook County Hospitals in Chicago. Nurses from our school after graduating, aided in establishing training schools at Louisville, St. Louis, Springfield, Ohio; Denver, Colorado; Los Angeles and at Honolulu, besides furnishing superintendents for several small schools in Indiana, including Terre Haute, Elkhart, Evansville and other cities.

We opened the school on September 1, 1883 with three graduates of Bellvue Training School . . . on the first day we had one pupil nurse, Miss Margaret E. Iddings . . . within a week two or three other pupil nurses came and the school began its development which has been followed by the revolution in nursing in Indiana and elsewhere (Wishard, William to Miss Cline, March 28, 1993).

The first nursing class in 1883 consisted of nine students with Miss Margaret Iddings graduating as the first trained nurse in Indiana (Allen, 1950, p. 46). Nursing training in the early days of the Flower Mission School was accomplished by visiting and resident surgeons at the bedside and by the superintendent and head nurse. Students were expected to work twelve hour days in addition to class work, walk a mile from the Nurses’ Home to the hospital in Indianapolis and received two weeks of vacation per year (Cook, n.d.). Eventually, nurs-
ing students were transported by horse and wagon. Often times, new hospital wings lacked water or gas and buildings were heated by grate fires until further updates could be made. Yet, students persisted in their studies and upon graduation many traveled out of state or the country to practice and establish new nursing programs. The first missionary of the school, Miss C. S. Bell, went to India to serve as a nurse and care for the sick. She later died of cholera.

Training typically consisted of a variety of duties including methods for proper ventilation, providing personal hygiene, housekeeping, laundry, office duties, cleaning, and preparing and serving meals (St. Vincent's Hospital School of Nursing, 1948). Courses in hygiene, dietetics, bandaging, massage, tuberculosis and even electricity were provided in the early years of nursing education (Indiana State Board of Nurses' Registration and Examination, 1949). In some areas of the state, nurses were also responsible for care of cows and chickens owned by the hospitals.

Therapeutic nursing care was provided only occasionally consisting of wound dressings, application of cups and leeches, provision of enemas and irrigations as well as “remedies” (Allen, 1950). The Flower Mission Training School continued under the management of the Flower Mission until 1897 when the City of Indianapolis assumed ownership and changed the name to the Indianapolis City Hospital School of Nursing (Indianapolis City Hospital, 1930).

In 1913 a bill was passed in Indiana requiring nursing programs to be a minimum of three years in length (Allen, 1950). Soon after, nursing schools were encouraged to establish affiliations with institutions of higher learning. Universities were pushed to improve postgraduate education for nurses. In 1923, the Winslow-Goldmark report supported by the Rockefeller Foundation, stressed the importance of baccalaureate degree nursing programs over diploma programs and by 1978, a doctorate degree in nursing was available at Indiana University (McDonnell, 1994b).

A severe and fatal form of influenza arose in 1918 leading to 445,000 deaths in the United States (St. Vincent's Hospital School of Nursing, 1948). Indianapolis hospitals overflowed with cases of influenza. Most of the Sisters and many nursing students became ill. Due to high illness rates among teachers and students, nursing classes were suspended. Those who were not ill were expected to provide care to the hospitalized patients. Fortunately, no Sisters or students of St. Vincent's nursing school died during this pandemic.

References

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Amy Smith
Registered Nurse, Med/Surg
Howard employee since 2002
Disciplinary Actions

Indefinite Suspension—Indefinitely prohibited from practicing for a specified minimum period of time.

Indefinite Probation—License is placed on probation for a specified minimum period of time with terms and conditions.

Renewal Denied—The Nurse's license will not be renewed therefore, she/he does not have a license to practice in Indiana.

Summary Suspension—Immediate threat to the public health and safety should they be allowed to continue to practice. Issued for a period of ninety (90) days but can be renewed with Board approval.

Letter of Reprimand—Letter issued by the Board to the Nurse indicating that what she/he did was wrong.

Revoked—An individual whose license has been revoked may not apply for a new license until seven (7) years after the date of revocation.

Discipline for the previous quarter will be printed in each magazine addition in the future. Changes may occur before printing so the most accurate discipline information should be obtained on the license search feature of our website at www.pla.in.gov.

February 16, 2006 Meeting

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<td>Cheryl Ann Robertson</td>
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<td>Mary Elisabeth White</td>
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<td>Indefinite Suspension, $750.00 Fine &amp; CEU's</td>
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May 18, 2006 Meeting

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<thead>
<tr>
<th>NAME</th>
<th>License #</th>
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<tr>
<td>Zanna Jean Paul</td>
<td>28075309</td>
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<td>Missy Stevens</td>
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<td>Michelle Tejera</td>
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<td>David Castillo</td>
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<td>Dawn Elaine Griffith</td>
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<td>Mary O'Leary</td>
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<td>Tracy Lynn Livox</td>
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<td>Shari Parker</td>
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<td>Lashandra McIntosh</td>
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<td>Rachel Michelle Finchum</td>
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<td>Catherine Flock Thompson</td>
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<tr>
<td>Carla D. Neal</td>
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