

Oncology Nursing Society Immediate Past Chief Executive Officer Joins Medicare Advisory Committee



The National Patient Advocate Foundation (NPAF) announced that NPAF Executive Board Member Pearl Moore, RN, MN, FAAN, the immediate past chief executive officer (CEO) of

the Oncology Nursing Society (ONS), has been invited to serve on the Medicare Evidence Development and Coverage Advisory Committee (MEDCAC).

MEDCAC is designed to provide independent guidance and expert advice to Centers for Medicare and Medicaid Services (CMS) on specific clinical topics and is used to supplement CMS's own research and internal expertise to allow an unbiased and current deliberation of state-of-the-art technology and science. MEDCAC members are selected based on their background, education, and expertise in a wide variety of scientific, clinical, and related fields.

Moore joined ONS in 1975 as a founding member. During her tenure as CEO, ONS grew to more than 32,000 members with 220 chapters nationwide. Moore also helped to raise \$16 million to support the ONS Foundation Center for Leadership, Information, and Research, the largest contributor to nursing research outside of the National Institutes of Health. Moore has received numerous honors, including being named a fellow in the American Academy of Nursing, receiving the Association of Community Cancer Centers Achievement Award, and being awarded the U.S. Oncology Medal of Honor.

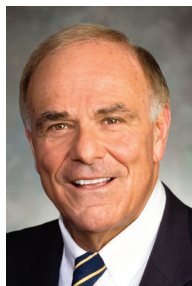
"I am honored to be invited to work with this impressive group of professionals in providing expert assessments on key healthcare issues," said Moore. "Throughout my career, I have seen many transformative changes in cancer care, and I hope to provide thorough and thoughtful information in finding the most effective means to ensure access to quality care for all cancer patients."

NPAF is a national, nonprofit organization dedicated to improving patient access to health care through public

policy reform at the state and federal levels. MEDCAC, established in 1998, reviews and evaluates medical literature, technology assessments, and data and information on the effectiveness and appropriateness of medical items and services that are covered or may be eligible for coverage under Medicare. As many as 100 experts from clinical and administrative medicine, biologic and physical sciences, public health administration, patient advocacy, healthcare data and information management and analysis, healthcare economics, and medical ethics are selected to serve on MEDCAC.

For more information, visit www.cms.gov/FACA/02_MedCAC.asp.

Pennsylvania Governor Chairs National Nursing Campaign



The American Academy of Nursing announced Pennsylvania Governor Edward G. Rendell as the new chair of its Raise the Voice campaign advisory council. Raise the Voice, which is sup-

ported by a grant from the Robert Wood Johnson Foundation, informs policy makers of nursing innovations and their success, with emphasis on replication. The campaign showcases the work of nurses who are developing care models and interventions that demonstrate significantly improved clinical and financial outcomes.

As governor, Rendell has advocated for nurses by ensuring that they play an integral leadership role in health care in Pennsylvania. Rendell served as a dignitary in the 33rd Annual ONS Congress in Philadelphia.

The American Academy of Nursing serves the public and the nursing profession by advancing health policy and practice through the generation, synthesis, and dissemination of nursing knowledge. The organization and its members create and execute knowledge-driven and policy-related initiatives to drive reform of America's healthcare system. For more information, visit www.aannet.org.

The Robert Wood Johnson Foundation focuses on pressing health and healthcare

issues in the United States. As the largest U.S. philanthropy devoted exclusively to improving health care for all Americans, the Robert Wood Johnson Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful, and timely change. For more information, visit www.rwjf.org.

Nurse Researcher Hall of Fame Honors ONS Member



Marilyn Dodd, RN, PhD, a professor emerita at the University of California in San Francisco, will be inducted into the newly created Sigma Theta Tau International

(STTI) Nurse Researcher Hall of Fame. The unique recognition honors nurse researchers who are STTI members and have achieved long-term, broad national or international recognition for their work and whose research has impacted the profession and the people it serves.

Dodd and 21 other nurse researchers will be inducted at the inaugural award ceremony, sponsored by Wiley-Blackwell, at the International Nursing Research Congress on July 16, 2010, in Orlando, FL. The event theme, "Global Diversity Through Research, Education and Evidence-Based Practice," will explore strategies needed to enhance collaborative nursing research globally, promote the translation of research-based evidence into practice, and examine how international healthcare concerns affect nursing worldwide. Event registration is open, and induction ceremony tickets are available online until July 11 at www.nursingsociety.org/Events.

"STTI's research congress is the most appropriate venue for this recognition," said STTI President Karen H. Morin, RN, DSN, ANEF. "STTI is a pioneer in funding and disseminating nursing research, and for more than 20 years, STTI's research congress has attracted hundreds of nurse leaders representing more than three dozen countries."

The Honor Society of Nursing, STTI, is a nonprofit organization whose mission is to support the learning, knowledge,

and professional development of nurses committed to making a difference in health worldwide. Founded in 1922, STTI has inducted more than 400,000 members including practicing nurses, instructors, researchers, policy makers, and entrepreneurs. STTI's 469 chapters are located at 586 institutions of higher education throughout Australia, Botswana, Brazil, Canada, Colombia, Ghana, Hong Kong, Japan, Kenya, Malawi, Mexico, the Netherlands, Pakistan, Singapore, South Africa, South Korea, Swaziland, Sweden, Taiwan, Tanzania, the United States, and Wales.

For more information, visit www.nursingsociety.org.

ONS Member Receives Rachel Carson Advocacy Award



ONS member Judi Hirshfield-Bartek, RN, MS, OCN®, was awarded a Rachel Carson Advocacy Award from the Silent Spring Institute for expanding access to high-quality care and research into

the preventable causes of breast cancer. Hirshfield-Bartek was a clinical nurse specialist at Beth Israel Deaconess Breast Care Center in Boston, MA, and currently is a surgical program nurse at Dana-Farber Cancer Institute in Boston.

Hirshfield-Bartek has been active for many years in breast cancer advocacy and is on the board of the National Breast Cancer Coalition. She also is a founding member of the Jewish Women's Coalition on Breast Cancer, which addresses issues related to genetic testing, and is a past president of ONS's Boston Chapter.

The Silent Spring Institute is a unique partnership of scientists, physicians, public health advocates, and community activists that aims to identify and break the links between the environment and women's health issues, particularly breast cancer. The institute is named in tribute to Rachel Carson, whose landmark book *Silent Spring* launched the modern environmental movement. Carson died of breast cancer two years after the book was published.

For more information, visit www.silentspring.org.

ONS Member Obtains Grant to Support Doctoral Trainees in Cancer Survivorship



ONS member Catherine M. Bender, PhD, RN, FAAN, an associate professor in the School of Nursing at the University of Pittsburgh in Pennsylvania, received an Institutional Training Program grant (T32) from the National Institute of Nursing Research entitled Interdisciplinary Training of Nurse Scientists in Cancer Survivorship Research (5T32NR011972-02).

The goal of the training grant is to prepare nurse scientists to lead independent programs of theory-based research in cancer survivorship that meet two criteria. First, programs should evaluate physical, psychological, and social responses to cancer and cancer therapy over time, including the biologic basis, precipitating and enhancing factors, and effects of these responses. Second, programs should develop interventions

that prevent and manage negative responses to cancer and cancer treatment, which will ultimately improve quality of life. The grant will support pre- and postdoctoral nurse trainees in cancer survivorship research by providing full tuition, an annual stipend, and research support. Predoctoral candidates will include both BSN to PhD and MSN to PhD students. Postdoctoral candidates must have a PhD in nursing.

The training committee for T32 also includes ONS members Heidi Donovan, PhD, RN, Margaret Rosenzweig, PhD, CRNP-C, AOCN®, and Paula Sherwood, PhD, RN, CNRN. Training faculty includes scientists from multiple disciplines such as nursing, medicine, behavioral sciences, and genetics from the University of Pittsburgh, Carnegie Mellon University, and the University of Wisconsin.

For more information about the research training, Bender can be reached at cbe100@pitt.edu.

Linda K. Morse, RN, MSN, can be reached at Linda_Morse@dfci.harvard.edu, with copy to editor at ONFEditor@ons.org.

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ONS Conference Calendar

Advanced Practice Nursing Conference

November 11–13, 2010
Orlando, FL

11th Annual Institutes of Learning

November 12–14, 2010
Orlando, FL

36th Annual Congress

April 28–May 1, 2011
Boston, MA

LETTER TO THE EDITOR

Rose Mary Carroll-Johnson, MN, RN • Editor

"Let Me Call You Angry"

I am referring to the editorial in the May 2010 issue of the *Oncology Nursing Forum* ("Let Me Call You Sweetheart," Vol. 37, p. 241). This nurse sounds angry and defensive.

I have been a nurse for 30 years and in oncology for 18 years. I do refer to my patients as sweetheart, darling, love . . . not at first when the introductions are being made but over time when we establish a relationship. They need all the

kindness they can get, and if it comes naturally to call someone love or darling, then I say it. It is not meant to belittle someone but to show that we care about them as a person, not just as a patient.

I fell this winter and broke my arm, which required surgery and a lengthy recovery. I received phone calls, cards, gifts, all from patients. It was overwhelming. I believe the reason for this is because I humanize the care I give them and let them know they are more to me than just someone to whom I give chemotherapy.

I have never replied to an editorial before, but I would hate for a nurse to read this editorial and think he or she should never use a term of endearment toward a patient.

We need to stop thinking about being so politically correct and start thinking with our hearts.

Billie Bechold, RN, BSN, OCN®
Oncology Staff RN
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