Sibley Nurses Answer the Call to Advance their Education

The Tri-Council for Nursing Issues, whose member organizations include the American Association of Colleges of Nursing (AACN), the American Association of Nurse Executives (AONE), the American Nurses Association (ANA) and the National League of Nurses (NLN) issued a consensus statement in 2010 calling for “all registered nurses to advance their education in the answer of enhancing quality and safety across healthcare settings,” a recommendation echoed in the IOM Report on the Future of Nursing (2010). In that spirit, Sibley is delighted and proud to recognize the following nurses for their academic achievement this past spring:

- **Lelisse Abate**, MSN, AGPCNP, CMSRN, a nurse on 6-East Medical-Surgical Unit, received her MSN in the Nurse Practitioner program for Adult Gerontology, Primary Care, from Catholic University of America.
- **Kimberly Brown**, MSN, RN, Critical Care Charge Nurse, received her MSN in Nursing Education from Walden University.
- **Matthew Brown**, MSN, RN-BC, NICHE Nurse Navigator, received his MSN in Nursing Administration from George Mason University. Matt also received the Student Excellence in Nursing Administration Award, and was inducted into Sigma Theta Tau International.
- **Belinda Coleman-Larry**, BSN, RN, a nurse on 2 West Same Day Surgery graduated magna cum laude with her BSN from Anna Maria College.
- **Suzanne Dutton**, MSN, GNP-BC, NICHE Coordinator, will complete her Post-Masters Certificate in the Master Faculty Program at George Washington University in June.
- **Billy Mullins**, DNP, RN, NE-BC, a nurse in the Emergency Department, received his Doctor of Nursing Practice from George Washington University. Billy was also recognized as the Outstanding Student for Excellence in Innovation.
- **Hayley Tawes**, MSN, RN, received her Pediatric Nurse Practitioner degree from the University of Virginia. Hayley works in Sibley’s Special Care Nursery.
- **Jacqueline Zamora**, MSN, FNP-BC, also a nurse in the Emergency Department, received her MSN in the Family Nurse Practitioner Program of the University of Pennsylvania.

Congratulations to other graduates we may have missed; we would very much like to recognize all of you. Please send information about your academic accomplishments, including any awards you received, to Karen McCamant, Director of Professional Nursing Practice and Magnet, kmccama1@jhmi.edu.
Kudos Corner: Recognizing Nurses

Sibley Places Second in Innovation Contest

From Tuesday, July 28 to Wednesday, July 29, three Sibley employees attended the VA Innovation Creation Series Makeathon Challenge at the Maguire VA Center in Richmond, Va. They spent 21 hours over two days working with over 20 teams from across the region to come up with solutions to several medical problems faced by our wounded veterans. Matt Brown, R.N., Joel Hemphill, P.T., and Joe Sigrin, innovations, used their design training to produce an initial design solution for VA patients with dysphagia (the inability to swallow correctly). They met with veterans and medical staff who presented problems or pain points impacting veterans.

The team came up with a prototype drink cup that maintains patient dignity while restricting the amount of fluid to 5mL in each sip. The camo cup, as they call it, is a standard size drink cup lid with the components "hidden" below it.

Congratulations Matt, Joe, and Joel for placing second!

The DAISY Award

Sibley is pleased to announce our very first recipient of the DAISY Award, Katie Evans. Katie works in the medical-oncology unit and received three separate, stunning nominations from her patients. As a DAISY winner, Katie receives recognition on the DAISY Award website, reduced tuition at Chamberlain College of Nursing, reduced cost on ANCC certification or renewal, and recognition through various forms of social media. To read Katie’s nominations, please visit http://daisyfoundation.org/daisy-award/daisy-nurses/2015/06/evans_katherine. Our next DAISY winner will be announced in October!

Shining Star Award

Suzanne Dutton, MSN, RN, GNP-BC, is nominated for a Johns Hopkins School of Nursing Shining Star Award, and is honored by an invitation to the School’s annual Alumni event on September 26th. The Shining Star Award calls for nominees who demonstrate clinical excellence in their area of nursing to improve the quality of patient care and have made a significant difference to the nursing profession.
Sibley NICHE Program Achieves Exemplar Status!

The NICHE program annually evaluates the 600 designated sites nationwide, to benchmark progress year to year, target future policy, program development, and sustain support from stakeholders. Sibley Memorial Hospital became a designated site September 2011, and subsequently hired a NICHE Coordinator/Geriatric Advanced Practice Nurse who started January 2013, and a Geriatric Nurse Navigator who started February 2015. The evaluation scores each facility on 8 dimensions including: guiding principles, organizational structures, leadership, geriatric staff competence, interdisciplinary resources, patient-family centered approaches, environment of care, and quality measures. The scores are quantified into (4) levels from (1) Early, (2) Progressive, (3) Senior-Friendly, (4) Exemplar. In September 2015, Sibley Memorial Hospital was awarded to level (4) Exemplar, which places them in the top 17% of NICHE hospitals.

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<th>NICHE Levels</th>
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Sibley Recognizes Clinical Excellence!

Certification is defined by the American Board of Nursing Specialties as, “formal recognition of the specialized knowledge, skills and experience demonstrated by the achievement of standards identified by a nursing specialty to promote optimal health outcomes” (ABNS, 2005). The American Nurses Credentialing Center (ANCC) offers a similar definition when they note that certification “... enables nurses to demonstrate their specialty expertise and validate their knowledge to employers and patients through targeted exams that incorporate the latest nursing-practice standards. (ANCC, 2015).”

Because Sibley is committed to recognizing nurses professional achievements, the Certification Bonus for nurses attaining specialty certification for the first time will continue. Through the generous philanthropic support of the Sibley Memorial Hospital Foundation, nurses who become certified will receive a one-time $500 bonus. All full-time, part time and permanent PRN nurses who have not previously received it are eligible for the Certification bonus. Eligible nurses should contact their manager and Chrissy Morales, Education and Training Specialist.

NPs work in concert with physician partners to provide seamless care in an environment that strives for excellence.

Nurse Practitioners at Sibley

By Catherine Bishop, D.N.P., N.P., AOCNP

Nurse practitioners (NPs) are advanced practice providers who manage a variety of medical conditions. NPs are educated at the master's (MSN) or doctorate level (DNP or PhD). NPs are trained and qualified to diagnose medical conditions, order treatments, perform advanced procedures, prescribe medications, and make referrals for a wide range of acute and chronic illness.

NPs at Sibley Memorial Hospital work with the entire health care team to provide expert care within their specialty area. Delivering this care with respect and compassion to patients is central to their practice.

Currently, at Sibley NPs are practicing in:

- Employee health
- Gastroenterology
- Hepatology
- Johns Hopkins Memory program
- Neurology/stroke
- Occupational health
- Oncology/hematology
- Orthopedics/Institute of bone and joint health
- Pain management
- Palliative care
- Pre-surgical testing
- Skilled nursing and rehabilitation
- Psychiatry
- Surgical education

NPs work in concert with physician partners to provide seamless care in an environment that strives for excellence.
Successful Recertification of Sibley’s Stroke Program and Women’s Choice Award

Sibley Hospital earned The Joint Commission’s Gold Seal of Approval® and the American Heart Association/American Stroke Association’s Heart-Check mark for Advanced Certification for Primary Stroke Centers. The Gold Seal of Approval® and the Heart-Check mark represent symbols of quality from their respective organizations.

Led by Dr. Jason Freeman and Jenni Knittig, RN, Sibley’s Stroke Program underwent a rigorous onsite review in April. Joint Commission experts evaluated compliance with stroke-related standards and requirements, including program management, the delivery of clinical care and performance improvement. Through this credentialing process, Sibley has thoroughly demonstrated the greatest level of commitment to the care of stroke patients. As well, based on our Joint Commission approval and above average patient recommendation scores, the Stroke Program was awarded the Women’s Choice Award by America’s Best Stroke Centers. Only 250 hospitals nationwide carry the Women’s Choice Award seal. Many thanks to all of our nurses for helping our stroke patients at Sibley!

“To the Angels of 4 East:

I was a bilateral knee-replacement patient on your floor from July 29th – August 2nd. During that time, my 90 year-old aunt suffered a massive stroke and was brought to the Sibley ER. After realizing this was catastrophic and that she would not recover, you all miraculously arranged to have her spend her final hours near me.

My family and I are still in awe of your thoughtfulness and generous actions. Words just cannot express our appreciation for the excellent physical and emotional care that you provided to me but also to my aunt in her final hours.

You all are just incredible compassionate human beings and healers. We will remain eternally grateful to the nurses and PT staff of Sibley’s 4 East.

Thank you forever.”
Congratulations Joanne Miller, DNP

Congratulations are in order for our very own Chief Nursing Officer, Joanne Miller! Joanne recently completed her Doctor of Nursing Practice degree from Drexel University College of Nursing and Health Professionals. She defended her thesis, *Daily Nurse Manager Rounding and the Impact on Patient Falls and Patient Satisfaction* to a panel of judges in August. Joanne’s intervention of daily nurse manager rounding decreased patient falls on medical-surgical unit 6W by 55 percent and increased 6W HCAHPS domains “Staff Responsiveness” by 17 percent, “Overall Hospital” by 44 percent, and “Likelihood to Recommend the Hospital” by over 260 percent! Her rounding model was heavily influenced by the Relationship-Based Care Model (featured right).

**Fresh Faces: Have you met…?**

**Darryn Dunbar**

As a result of reorganizing the Patient Care Services & Nursing Divisions, Darryn Dunbar, MS, RN, APN/CNM, has been appointed Director of Emergency Services, Behavioral Health and Organizational Throughput. He brings vast experience from acute care, ambulatory, and academia environments.

As a certified advanced practice nurse and certified nurse-midwife, Darryn’s career trajectory includes a wide variety of clinical specialties including emergency medicine, telemetry, cardiac step down, medical-surgical, and maternal-child health. Darryn has held both permanent and interim leadership positions and has served as director for a 27-bay urban emergency department that averaged 55,000 visits annually while focusing on improving processes to support throughput. In addition to his work in acute care and ambulatory settings, he held adjunct faculty positions where he taught health assessment, fundamentals of nursing, obstetrics, and pediatric nursing.

After relocating to D.C. from Chicago two years ago, Darryn determined that Sibley Memorial Hospital was his employer of choice. His office is located in the Patient Care Services Administrative Suite on the 4th floor of the Renaissance.

**Harpreet Gujral**

Harpreet Gujral MSN, RN, FNP-BC has recently been appointed Director of Sibley Center for Weight Loss Surgery. She brings with her over twenty five years of experience in various clinical and management roles at a tertiary, teaching hospital and assistance with developing new subspecialty programs including, but not limited to, Rheumatology, Diabetes, and a Medical Weight Loss. Most recently Harpreet served as Senior Practice Advisor at the American Nurses Association and Assistant Director for Certification Services at ANCC. Additionally, past positions include working as a Nurse Practitioner with a hospitalist program at a community hospital; working as a Nurse Practitioner in hepatology for over six years; practicing as a staff nurse in the medical-surgical setting, and serving as a clinical instructor for a nursing school. She has obtained a Masters in Nursing as a Nurse Practitioner in 1999 and is currently pursuing a Doctor of Nursing Practice with specialization in Integrative Health and Healing. She has also attended an Integrative Nurse coach certificate program. Her office is located on the 4th floor of the Renaissance.
Annette Anderson

Annette Anderson, MSN/ED, MBA, MA, RN has recently been appointed as the Nurse Manager of the OR. She has a strong nursing clinical and management background predominately in the Operating Room and other Surgical and Procedural Departments. Annette joins us from Sinai Hospital of Baltimore, Baltimore, MD where she was the Manager of the Operating Room and Perioperative Support Services. Prior to that she was Manager of the Surgical Center, Cath Lab, Interventional Radiology/Post Observation, Endovascular Lab, and an Inpatient Surgical Unit at Greater Baltimore Medical Center. She also currently holds an Adjunct Faculty position at Howard Community College where she teaches nursing. Annette has her Bachelor of Sciences in Nursing from Radford University, Masters of Art from Trinity University and a Masters of Business and Masters of Science in Nursing/ Education from the University of Phoenix. Annette brings with her lots of experience with Kaizen LEAN projects in the OR and ANCC Magnet designation.

Genevieve Cirineo

Genevieve Cirineo, MSN, RN has recently been appointed Nurse Manager of SASC. She brings with her strong nursing clinical experience in the OR, PACU and Critical Care, clinical development expertise in Surgical Services and management of Ambulatory Surgery Centers. Genevieve’s most recent positions were as Clinical Director Ambulatory Surgery Center at Orthoatlanta Surgery Center, Fayetteville, GA and Clinical Development Specialist Surgical Services, Northside Hospital Forsyth, Cumming, GA. Prior to that she was Manager of Atlanta Ambulatory Surgery Center, Peachtree Surgical and Bariatric in Atlanta, GA. Genevieve has her Bachelor of Science in Nursing from Arellano University and her Masters of Science in Nursing Informatics from Walden University. Genevieve brings with her experience in performance and project management, along with strong analytical skills.

Karen Going

Karen Going, MS, NP-C joins us as the Neuro/Stroke NP working under Dr. Jason Freeman. Karen graduated from SUNY Stony Brook as an Adult Health Nurse Practitioner in 2007 with her MS and did her undergraduate work at Adelphi University on Long Island. She has 20 years of critical care experience including cardiovascular, coronary care, medical/surgical intensive care, trauma and was a CCRN. She then did hemodialysis for 7 years. In 2007, she became the Stroke Coordinator for Brookhaven Memorial Hospital Medical Center and helped the hospital achieve the Gold Plus Award and Target Stroke Honor Roll with the American Stroke Association. Karen then worked at The Joint Commission as a Disease Specific Reviewer for Stroke when she first came to Virginia, and did programmatic work at Inova Fairfax before she joined Full Circle Neuropsychiatric Wellness Center with Dr. Colleen Blancfield in Reston.

Shannon Morris

In May, Shannon Morris, MSOD, PMP, CELDC joined Sibley leadership team as our new Senior Director, Patient Experience. In this new role, Shannon supports clinical and non-clinical areas in providing an exceptional patient experience. She acts as a coach and mentor, utilizing her knowledge of and experience with best practices to guide our patient experience work. She provides regular reporting of patient experience scores, and assists with strategy development and deployment at the unit and department level, as well as at a broader hospital level. In addition, Shannon oversees the activities of the Sibley volunteers, ambassadors and our patient advocacy function.

Prior to joining the Sibley team, Shannon worked at Children’s National where she was the Service Excellence Manager and led a staff that assessed and created interventions designed to improve the patient and family experience. She has also worked at a variety of organizations outside of the healthcare industry, including The Travel Channel and Heuristic Solutions. Shannon has a Master of Science in Organizational Development & Strategic Human Resources from Johns Hopkins University, a Masters Certificate in Information Technology Project Management, is Project Management Professional (PMP) certified and is a Certified Executive & Leadership Development Coach. Her office is on the first floor of the Renaissance building.
Educational Opportunities

Two-Day ELNEC Class Coming to Sibley in October

Sibley will be hosting the ELNEC (End-of-Life Nursing Education Consortium), on Thursday, October 8 & 15. There will be 12 contact hours covering the following 8 modules: Palliative Nursing Care, Pain Management, Symptom Management, Ethical Issues in Palliative Nursing Care, Cultural and Spiritual Considerations in EOL Care, Communication, Loss, Grief, & Bereavement, and Final Hours. Many of the leading palliative care educators will present the material. The foundation will support 40 nurses and social workers to participate. Applications will be accepted through the month of August, and should be sent via interoffice mail to Suzanne Dutton, NICHE coordinator. For more information contact Suzanne Dutton or Emily Sower.

Lessons from Mother Teresa

You are invited to join the Department of Pastoral Care and the Ethics and Palliative Care Committees for a free, inspirational talk. The event, “How Lessons from Mother Teresa Could Change Your Life” will help you gain an understanding of— and be able to identify— the issues that many people say “matter most during times of a serious illness” as well as learn practical steps to honor the human dignity. The Keynote Speaker is Jim Towey, former attorney for Mother Teresa and founder of Aging with Dignity. CME Credit is available: Sibley designates this live activity for a maximum of 2 AMA PRA Category 1 Credits.

Wednesday, October 28th
7:30-9:00 AM in REN 1 and 2
10:00-11:30 AM in Leonard Memorial Chapel
Please RVSP by Monday, October 19 by calling 202-537-4084.

Access to Lippincott Solutions, Procedures

Sibley staff have access to an online and interactive learning tool, Lippincott Solutions. Created by nurses for nurses, Lippincott Solutions helps healthcare organizations optimize nursing performance, increase clinical knowledge, standardize care, promote staff competence, and improve patient outcomes. Lippincott Solutions’ online evidence-based learning tools support your nurses’ professional development needs by keeping them current on the most recent evidence and standards. Staff can access the tool through the Sibley Intranet (click on Library, then Nursing Practice, then Lippincott Procedures and Skills).

Lippincott Procedures provides real-time access to step-by-step guides for over 1,700 evidence-based procedures and skills in a variety of specialty settings. Information includes: required equipment, quick lists to follow, patient instructions, complications to consider, skills checklist, and hundreds of video clips, diagrams and full-color images.

What Lippincott Procedures Can Do For You

◊ Improve patient outcomes, reduce errors, and promote consistent standardized care across your organization
◊ Promote effective and consistent communication related to patient safety and quality care
◊ Empower your nurses with the knowledge and confidence to make clinical decisions and facilitate delivery of care in unfamiliar settings or situations
◊ Maintain compliance with current national guidelines and alignment with Joint Commission standards and Magnet Recognition Program components
◊ Increase the amount of time devoted to delivering direct patient care
◊ Eliminate time wasted on unreliable Internet searches or tracking down protocols

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**Administer Analgesics on a Regular Schedule if Pain Is Present Most of the Day**

With the objective of preventing pain or maintaining a pain level that supports functional and quality of life goals, it often requires that the mainstay analgesic be administered on a scheduled around-the-clock basis to maintain effective analgesic blood levels. ATC analgesic regimens are appropriate when the pain itself is around the clock for 12 or more hours per day.

Extended release opioid preparations are ideal for this purpose since they can be dosed every eight to 24 hours, depending on the medication.

**Managing Breakthrough Pain**

Breakthrough pain is pain that increases above the pain addressed by the ongoing analgesics. An example would be the patient whose pain scores usually remain 0-3 on a 0-10 scale while on extended release morphine (such as MS Contin) every 12 hours, but who experiences occasional episodes of pain with scores of 5-8. These episodes “break through” the extended release morphine relief and require the addition of an “immediate release” or short-acting dose of morphine to relieve the increased pain.

Short-acting preparations are well suited to breakthrough pain because their onset and duration of action cause an increase in analgesic blood level just long enough to relieve the episode of pain and then allow the blood level to go back to the baseline provided by the extended release preparation.

Use the same opioid for ongoing pain and breakthrough pain whenever possible. An example would be morphine extended release (MS Contin) every 12 hours ATC for ongoing pain PLUS morphine elixir (Roxanol) prn for breakthrough pain.

**Calculating the Breakthrough Dose**

The dose of the breakthrough opioid is based upon the dose of the extended-release opioid. So remember to recalculate the breakthrough dose whenever the extended release dose is changed.

The American Pain Society recommends that the oral breakthrough opioid dose be about 5% to 15% of the total 24 hour oral opioid dose and may be given every one to two hours prn for breakthrough pain. For example, if the patient is receiving extended release morphine (MS Contin) 30 mg PO every 12 hours, the 24 hour total of oral morphine is 60 mg. Calculating 5% to 15% of 60 mg, we get 3 mg to 9 mg morphine as the range for selecting the breakthrough dose. However, for practical purposes, the dose of 5 mg is prescribed. Keep in mind that breakthrough dose calculations are estimates of appropriate doses and will need to be adjusted up or down, as guided by clinical judgment, for the individual patient.

**Adjustment of the Daily Opioid Regimen**

When the around-the-clock dose is titrated (raised or lowered), the prn dose must also be titrated in an amount that maintains the proportionality between them. While it is essential to tailor the opioid regimen to the individual patient, clinical experience suggests raising the dose of the around-the-clock and prn opioid when a patient requires 4 prn doses for breakthrough pain in a single day or requires three prn doses for breakthrough pain for two days in a row. Both the around-the-clock and prn medications may be increased 25% to 50% for mild to moderate pain and 50% to 100% for moderate to severe pain in amounts that maintain proportionality between them.
Patient and Family Centered Care
Be The National Leader in Safety, Science, Teaching, and Provision of Patient and Family Centered Care
- CAUTI: 0.00 ✓+
- CLABSI: 0.00 ✓+
- Hand Hygiene Compliance: greater than or equal to 95% ✓+

People
Attract, Engage, Develop & Retain the World’s Best People
- Gallup Employee Engagement Grand Mean Score: 4.01 ✓+

Performance
Create Sustainable Financial Success & Implement Continuous Performance Improvement
- Operating Margin: greater than or equal to 4% ✓+
New and Improved Committees

Fall Prevention and Skin Integrity

The Fall Prevention and Skin Integrity committee is structured to reflect the ANCC Magnet® model. The committee has assigned 4 workgroups, each led by a committee member and comprised of multidisciplinary front-line staff, to address our current policies and procedures.

◊ Practice Initiatives led by Suzanne Dutton, MSN, GNP-BC, NICHE Coordinator
  ◊ Initiatives include implementing a non-pharmacological sleep protocol, mobility protocol, and delirium protocol; as well as enhancing education on appropriate medication for elders
◊ Standard Workflow and Procedures led by Marianne Durgavich, RN, NE-BC
  ◊ Initiatives include implementing and educating yellow socks for high-fall risk, creating a rapid response team for falls, revising post-fall huddle sheet, and establishing weekly nurse manager meetings with the CNO post-fall
◊ Patient/Family and Staff Education led by Allison Eustace, MSN, RN, ACNS-BC
  ◊ Initiatives include improving bedside handoff communication, designing and implementing purposeful hourly rounding, and involving patient and family members in plan of care and fall-risk reduction
◊ Skin Integrity led by Melva Glubka, RN, BSN, CCRN
  ◊ Initiatives include a consultation from wound ostomy expert, revising current policies and guidelines, observing practices at sister hospitals, and increasing basic education for all patient-care staff

Peer Review of Clinical Nursing Practice

The primary purpose of peer review is to ensure the quality of nursing care through deliverance of nursing practice and newly discovered scientific evidence-based practices. The process is quality-focused and non-punitive, rather seeking to identify and articulate opportunities for improvement. The early definition of nursing peer review proposed by ANA in 1988 still applies today: "Peer review in nursing is the process by which practicing registered nurses systematically assess, monitor, and make judgments about the quality of nursing care provided by peers as measured against professional standards of practice….Peer review implies that the nursing care delivered by a group of nurses or an individual nurse is evaluated by individuals of the same rank or standing according to established standards of practice." Both Peer Review Guidelines and the ANA Code of Ethics for Nurses (2001) focus on maintaining standards of nursing practice and upgrading nursing care in three contemporary focus areas for peer review—quality and safety, role actualization, and practice advancement.

Based on guidelines of the American Nurses Association, the nursing peer review process integrates the following principles:

◊ A peer is someone of the same practice-role.
◊ Peer review is practice-focused.
◊ Feedback is timely, routine, and a continuous expectation.
◊ Peer review fosters a continuous learning culture of patient safety and best practice.
◊ Feedback is not anonymous- nurses know who their peers are.
◊ Feedback incorporates the nurse’s developmental stage using Benner’s novice to expert framework.

Nursing Peer Review Council at Sibley meets twice a month and is led by Ann Marie Thomas, Director, Perioperative Services. Cases may come to the council for review through a variety of avenues, including:

◊ Referral from Root Cause Analysis Committee
◊ PSN Event Reports
◊ Trends in nursing quality data
◊ Request by a nurse

The Peer Review Council is an investigative body tasked with understanding factors that contribute to practice problems and identifying opportunities for change. The group makes recommendations to other bodies, such as Practice Council and Fall Prevention and Skin Integrity Council.

(Reference: Haag-Heitman & George 2011)
# Health and Wellness Schedule

## October 2015

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For a complete list of Health and Wellness offerings, please search “2015 wellness calendar” on the Sibley intranet.

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**Contact Us**

If you have a story you’d like featured, please let us know!

Karen McCamant, MSN, RN ACNS-BC  
Director, Professional Nursing Practice and Magnet  
Editor, Celebrate the Past, Embrace the Future!  
PCS Suite, 4th Floor REN  
(202) 660-6267  
kmcama1@jhmi.edu

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“To do what nobody else will do, in a way that nobody else can, in spite of all we go through; is to be a nurse.”  
- Rawsie Williams