♦ Vanderbilt University Medical Center







School of Medicine School of Nursing Hospital and Clinic



Vanderbilt University 2003/2004

Containing general information and courses of study for the 2003/2004 session corrected to 15 July 2003 Nashville The University reserves the right, through its established procedures, to modify the requirements for admission and graduation and to change other rules, regulations, and provisions, including those stated in this bulletin and other publications, and to refuse admission to any student, or to require the withdrawal of a student if it is determined to be in the interest of the student or the University. All students, full- or part-time, who are enrolled in Vanderbilt courses are subject to the same policies.

Policies concerning non-curricular matters and concerning withdrawal for medical or emotional reasons can be found in the Student Handbook.

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In compliance with federal law, including the provisions of Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, Vanderbilt University does not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability, or military service in its administration of educational policies, programs, or activities; its admissions policies; scholarship and loan programs; athletic or other University-administered programs; or employment. In addition, the University does not discriminate on the basis of sexual orientation consistent with University non-discrimination policy. Inquiries or complaints should be directed to the Opportunity Development Officer, Baker Building, VU Station B #351809 Nashville, Tennessee 37235-1809. Telephone (615) 322-4705 (V/TDD); fax (615) 343-4969.

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Contents



Calendars	6, 7
Administration	9, 11
Medical Center Overview Life at Vanderbilt	17
School of Medicine Administration Medical Education at Vanderbilt Academic Program Academic Regulations Research in Medical Sciences Admission Financial Information Honors and Awards Chairs, Professorships, and Lectureships Courses of Study Faculty Register of Students Residency Assignments	41
School of Nursing	287
Administration Practice Network Nursing Education at Vanderbilt Academic Program The M.S.N. Degree Ph.D. Degree in Nursing Science Pre-Nursing Studies Post Master's Option Continuing Nursing Education Academic Regulations Admission Financial Information Honors and Awards Courses of Study Faculty Class of 2002/2003	
Vanderbilt University Hospital and The Vanderbilt Clinic	439
Index	483

School of Medicine Calendar 2003/2004

FALL SEMESTER 2003

Registration and classes begin 4th year and half of 3rd year class / Monday 7July Registration and classes begin other half of 3rd year class / Monday 4 August

Registration 2nd year / Monday 11 and Tuesday 12 August

Registration 1st year / Monday 11 to Wednesday 13 August

Classes begin 2nd year / Wednesday 13 August

Classes begin 1st year / Thursday 14 August

Labor Day holidays for 1st, 2nd and 4th year classes / Monday 1 September

Mid-term exams 2nd year class / Monday 13 to Wednesday 15 October

Fall break 1st year class / Wednesday 15 to Sunday 19 October

Fall break 2nd year class / Friday 16 to Sunday 19 October

Thanksgiving holidays / Thursday 27 to Sunday 30 November

Exam period elective courses 1st and 2nd years / Monday 8 to Friday 12 December

Exam period required courses 1st and 2nd years / Monday 15 to Thursday 18 December

Fall semester ends 1st and 2nd years / Friday 19 December

Fall semester ends 3rd and 4th years / Friday 19 December

Holidays 1st and 2nd year classes / Saturday 20 December to Sunday 4 January Holidays 3rd and 4th year classes / Saturday 20 December to Sunday 4 January

SPRING SEMESTER 2004

Spring semester begins 1st, 2nd, 3rd and 4th year classes / Monday 5, January Mid-term exams 1st and 2nd year classes / Monday 23 to Friday 27 February Spring holidays 1st and 2nd years / Saturday 28 February to Sunday 7 March Spring holidays 3rd year (Med., Surg.) / Saturday 13 to Sunday 21 March

Spring holidays 4th year TBA

United States Medical Licensing Examination - Step 2 / TBA

Instruction ends 4th year / Friday 23 April

Spring holidays 3rd year (Ob/Gyn, Peds., Psych., Neuro.) / Saturday 24 April to Sunday 2 May

Exam period elective courses 1st and 2nd years / Monday 26 to Friday 30 April

Instruction ends required courses 1st year / Tuesday 27 April

Instruction ends required courses 2nd year / Tuesday 4 May

Reading Period 1st year only / Wednesday 28 to Friday April 30

Exam period required courses 1st year / Monday 3 May to Thursday 6 May

Reading Period 2nd year only / Wednesday 5 to Sunday 9 May

Exam period required courses 2nd year / Monday 10 to Thursday 13 May

Commencement / Friday 14 May

United States Medical Licensing Examination - Step 1 / TBA

Instruction ends 3rd year / Friday 25 June

Medical Center

School of Nursing Calendar 2003/2004

FALL SEMESTER 2003

Orientation for nursing students (mandatory) / Monday 25-Wednesday 27 August Block classes may meet according to specialty/Thursday 28 August Non-block classes meet on Monday schedule /Friday 29 August Labor Day – No VUSN classes held/Monday 1 September Homecoming / Reunion week-end/Friday-Saturday 10-11 October Thanksgiving holidays / Saturday 22-Sunday 30 November Classes end / Friday 12 December Reading days and examinations / Monday 15-Wednesday 17 December Holidays begin / Thursday 18 December

SPRING SEMESTER 2004

Classes begin / Monday 5 January Spring holidays / Saturday 6-Sunday 14 March Classes end / Friday 23 April Commencement / Investiture Friday 14 May

SUMMER SEMESTER 2004

Classes begin / Monday 3 May Pinning Ceremony for August 2004 graduates / Friday 8 August Classes end / Friday 8 August

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Medical Center

35

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University Committees

Chemical Safety

The Chemical Safety committee considers policies and procedures pertaining to the safe handling, transport and use of chemicals and recommends adoption of new or revised policies for the Vanderbilt University Medical Center (VUMC) and Vanderbilt University Campus (VUC) administration through Vanderbilt Environmental Health & Safety (VEHS). It monitors and interprets regulations and/or guidelines of the Environmental Protection Agency (USEPA), the Occupational Safety and Health Administration (OSHA), National Institutes of Occupational Safety Health (NIOSH) and others pertaining to hazardous chemicals and provides technical assistance to Vanderbilt Environmental Health and Safety (VEHS) on these matters.

Thomas N. Oeltmann, Chair. Todd D. Giorgio, Todd R. Graham, Frederick R. Haselton, Adam List, Lawrence J. Marnett, Karl B. Schnelle, George H. Sweeney, Daulat Ram Tuliani. Administrative/Ex Officio: Bob Wheaton, Maralie Exton, Don Hayes, Robert Hayes, Dale McClendon.

Institutional Review Board for the Protection of Human Subjects

The Institutional Review Board for the Protection of Human Subjects comprises a Chair and the committees of Behavioral Sciences and Health Sciences, which are composed of physicians, behavioral scientists, a staff attorney, and community members. Acting through its two committees, the board reviews research proposals involving human subjects with respect to the rights and welfare of the human subjects, the appropriateness of methods used to obtain informed consent, and the risks and potential benefits of the investigation. Approval of the board or one of its component committees is required prior to initiation of any investigation.

Behavioral Sciences Committee

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Health Sciences Committee, #1

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Health Sciences Committee, #2

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Health Sciences Committee, #3

Margaret G. Rush, Chair. Grant Wilkinson, Vice Chair. John Y. Fang, Candace Floyd, Gregory M. Gillette, Robert W. Green, Jr., Victoria L. Harris, Christa Hedstrom, Robert L. Janco, Mary Kay Washington.

Medical Archives Advisory Committee

The Medical Archives Advisory Committee recommends overall collecting and operating policies and appraisal standards for the archival program for the Medical Center. It recommends new programs and directions, recommends policies of accession and deaccession, and encourages departments to prospectively and retroactively contribute material to the archives.

Harris Riley, Chair. Mary Lou Donaldson, Robert Collins, William Darby, Randolph S. Jones, David Robertson, Mary Teloh.

Collection Advisory Forum

The Collection Advisory Forum advises the Eskind Biomedical Library about a wide range of collection development issues, including new ways to deliver information, strategies for upgrading the collection and access/ownership issues.

Scott Arnold, Erin Davidson, Clark Galbraith, Chris Jones, Terry Minnen, Barbara Petersen, Ann Richmond, Michael Smith, Nancy Wells.

Medical Center Promotion and Tenure Review Committee

The Medical Center Promotion and Tenure Review Committee reports to the Vice-Chancellor for Health Affairs. Its membership is made up of representatives from the School of Medicine and the School of Nursing, and the Dean for Graduate Studies and Research. The committee is responsible for review of all promotions to tenure in the Medical Center.

Peter I. Buerhaus, Kathryn M. Edwards, Barbara Grimes, Larry E. Lancaster, Lawrence J. Marnett, Lynn M. Matrisian, Martin P. Sandler, P. Anthony Weil, Lester F. Williams, Jr.

University Animal Care Committee

The University Committee on Animal Care is responsible for the establishment and periodic review of University policy on the humane care and use of animals in experimentation. While not involved in the direct administration of any animal facility, the committee makes recommendations to the Chancellor on policies maintained by these facilities.

In reviewing and establishing such policies for animal care, the committee considers prevailing federal, state, and local laws and guidelines and their applicability to situations unique to Vanderbilt. The committee also is concerned that its policies lead to standards that will enhance the quality of scientific investigation in the University.

The committee is free to consult with and take recommendations to the Vice Chancellor for Health Affairs, the Provost, and the deans of the various schools of the University as it formulates and reviews animal care policies.

Richard M. Breyer, Chair. Maurice C. Bondurant, William Chapman, Jin Chen, Benjamin J. Danzo, Frederick Haselton, Raymond Mernaugh, Richard E. Parker, Cathleen C. Pettepher, Lilianna Solnica-Krezel. Administrative and ex officio: LouAnn Burnett, John Childress, Fred DeWeese, Judson Newbern, Joan Richerson, Jeffrey D. Schall.

Vice Chancellor's Committee for the Veterans Administration

The Vice Chancellor's Committee is the fundamental administrative unit for policy development and evaluation of educational and research programs at the affiliated Veterans Administration Medical Center. It is composed of senior faculty members of the School of Medicine and others who are associated with the Veterans Administration Medical Center. Vanderbilt members are appointed by the chief medical director of the Veterans Administration on nomination by the Vice Chancellor for Health Affairs.

Harry R. Jacobson, Chair. Charles Beattie, Marjorie Collins, Colleen Conway-Welch,
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Medical Center

Medical Center Overview 17 Life at Vanderbilt 29



Medical Center Overview

ANDERBILT University Medical Center (VUMC) has a three-fold mission—the education of health professionals, research in medical sciences, and patient care. This mission is carried out in five primary operating units—the School of Medicine, the School of Nursing, The Vanderbilt Clinic, Vanderbilt University Hospital, and Vanderbilt Children's Hospital, where patients receive exemplary care from physicians and nurses who are creative teachers and scholars.

Members of the faculty maintain proficiency and establish working relationships in the professional community by participating directly in patient care. Their practice encourages the free flow of ideas among the School of Medicine, the School of Nursing, and the clinical units, facilitating joint research activities. As a result, the Medical Center can undertake significant, innovative programs that set the standards for health care in the region.

Outstanding patient care and technological innovation have established Vanderbilt's reputation as a leading referral center for the Southeast. Physicians from other states and foreign countries refer to Vanderbilt those patients whose health problems demand interdisciplinary skills and expert knowledge. Consequently, students in the Medical Center encounter a wider range of diseases than they would be likely to see in many years of private practice.

The Medical Center furnishes support for University programs in engineering and law—and makes possible the Ann Geddes Stahlman professorship in medical ethics as well as interdisciplinary programs in philosophy, religion, and the social sciences.

Through the education of physicians, nurses, biomedical scientists, and technicians in allied health professions—and an overriding concern for the care of patients—Vanderbilt University Medical Center strives to improve the health of the individual. Through scholarship and research leading to new knowledge about the nature, treatment, and prevention of disease, the Medical Center contributes to the improvement of the health of all.

Facilities

Vanderbilt University Hospital

The hospital is a dramatic, twin-tower structure of red brick, especially equipped to provide complex and vital services to its patients, continuing Vanderbilt's century-old tradition of offering the best in patient care.

Routinely, more than 25 percent of patients seen in the Hospitals are from states other than Tennessee, with the majority coming from Kentucky, Alabama, and Mississippi.

Children's Hospital of Vanderbilt University Medical Center

Located on the fourth, fifth, and sixth floors of the University Hospital, the Children's Hospital meets the unique medical needs of infants and children. Specialty units include neonatal intensive care and a children's kidney center. A new free-standing Children's Hospital is under construction.

The Vanderbilt Psychiatric Hospital

Opened in 1985, this hospital provides care for children and adolescents with general psychiatric problems, chemical dependency, and psychosomatic and neuropsychiatric problems. The hospital is a regional referral center for middle Tennessee and serves as a teaching and research facility for medical students and resident physicians in psychiatry.

The Vanderbilt Clinic

The 535,000 square foot Vanderbilt Clinic houses more than eighty-five medical specialty practice areas, the clinical laboratories, a center for comprehensive cancer treatment, a day surgery center. The clinic was opened in February 1988.

Stallworth Rehabilitation Hospital

Opened in 1993, this up-to-the-minute hospital is the only freestanding facility of its kind in Middle Tennessee. The eighty-bed hospital provides both inpatient and outpatient rehabilitation services to adults and children who have suffered strokes, head or spinal cord injuries, or have other orthopaedic or neurological diseases requiring rehabilitation. The hospital contains the Junior Chamber of Commerce Clinic Bowl Gymnasium, which is specially designed for handicapped sports, including basketball, volleyball, and indoor tennis. The Vanderbilt Center for Multiple Sclerosis is also housed in the hospital.

Rudolph A. Light Hall

Completed in 1977, Light Hall provides classroom and laboratory space for students in the School of Medicine. It houses the department of biochemistry, the department of molecular physics and biophysics, and the Howard Hughes Medical Institute. Named for Dr. Rudolph A. Light, former professor of surgery and member of the Board of Trust, Light Hall is connected by tunnels to Medical Center North and to the hospital and by bridge to the Medical Research Buildings and the Veterans Administration Medical Center.

Ann and Roscoe Robinson Medical Research Building

Laboratories and academic space for pharmacology, biochemistry, and molecular physiology and biophysics are housed in the Ann and Roscoe Robinson Medical Research Building. The eight-story building, opened in 1989, is also home to the A. B. Hancock Jr. Memorial Laboratory for Cancer Research and the positron emission tomography (PET) scanner.

The building is linked to Light Hall on all levels and shares an underground level with The Vanderbilt Clinic. The Vanderbilt Clinic and the Veterans Administration Medical Center are connected to the Medical Research Building by a bridge.

Frances Preston Medical Research Building

This building is named in honor of Frances Williams Preston, President and CEO of Broadcast Music, Incorporated. An addition to the south face of the Frances Williams Preston Building, formerly known as Medical Research Building II, is currently under construction. The purpose of this building is to consolidate the Vanderbilt-Ingram Cancer Center programs into one primary location with a distinct presence within the Vanderbilt Medical Center campus. The project consists of a new two-story lobby at grade with a patient drop-off area, five office floors, and a conference center floor.

Medical Research Building III

The new MRB III building houses sixty-four research laboratories, four teaching laboratories, research support areas, offices, conference rooms, classrooms, and an 8,650-square-foot greenhouse for research and teaching. The unfinished ninth floor can be renovated later for an additional twelve research laboratories and support areas.

The landmark project—a 350,000-square-foot facility designed to promote study between diverse scientific disciplines—is a joint undertaking of the College of Arts and Science and the Medical Center.

Medical Center East

The original building, constructed in 1993, contains a surgical pavilion and an inpatient thirty-bed obstetrics unit. A four-floor addition was added in 1994. It currently houses the Children's Hospital Outpatient Center, adult primary care practice suites, and academic and outpatient space for the Department of Ophthalmology and Visual Sciences.

Medical Center North

The 21-bed Newman Clinical Research Center, an inpatient orthopaedic unit, a Level I burn center, and a sub-acute care unit are located in Medical Center North. The complex also houses administrative support services for the hospital and Medical Center

Faculty and administrative offices and research space for Medical School departments are in Medical Center North. The original portions of the building were completed in 1925. Since that time a number of connecting wings and buildings have been added.

Medical Center South

Medical Center South contains academic space for the Departments of Orthopaedics, Surgical Sciences, and Neurology and houses the School of Medicine Alumni and Development Office.

Vanderbilt Arthritis and Joint Replacement Center

This unique multidisciplinary resource for those with arthritis and rheumatic diseases is located adjacent to the Medical Center in the Village at Vanderbilt.

Vanderbilt Sports Medicine Center

Housed in McGugin Center, the Sports Medicine Center not only serves all University athletes, but is also the primary location for research, education, and treatment for all types of sports-related injuries.

Village at Vanderbilt

The Village contains outpatient facilities for psychiatry, orthodontics, and allergy. It also contains the Arthritis and Joint Replacement Center, the Voice and Balance Center, the Dialysis Center, and the Breast Center.

Oxford House

The Oxford House contains office space for a number of Medical Center functions. Major occupants include the Transplant Center, the Department of Emergency Medicine, Medical Ethics, and the Emeriti Faculty Office.

Mary Ragland Godchaux Hall

Vanderbilt University School of Nursing (VUSN) is located between the Jean and Alexander Heard Library and Medical Center North of VUH. Offices and classrooms are located in Mary Ragland Godchaux Hall and the Annex.

Godchaux Hall contains 67 administrative, faculty and staff offices, 4 class/conference rooms, 3 class laboratories, the Helene Fuld Instructional Media and Computer Center and the Joint Center for Nursing Research (JCNR). The research support areas of the JCNR include offices, conference space and computer facilities. The Godchaux Annex contains 3 large lecture halls, 4 seminar size classrooms, and a vending machine and commons area totaling 14,200 square feet. All classrooms have either permanently installed projection devices with computers and document cameras, or can be accommodated with similar portable equipment.

The Helene Fuld Instructional Media Center (HFIMC). The HFIMC student computer labs are equipped with nineteen Compaq DeskPro 6450X (Pentium II, 450 MHz) computers, three Power Macintosh computers,

three scanners and one laser printer. An additional eight units have recently been installed in a separate room to accommodate the growth of web-based testing in a quiet, secure environment. Students schedule in advance of the testing date in order to accommodate a range of needs.

A full range of software is available for document, slide and overhead preparation. Instructional software packages are also available. Faculty and students use the web-based program "Prometheus" for delivering on-line course content and communication resources. Experts in interactive educational design and computer instruction are available through the HFIMC and consist of three full-time staff members, a network manager and technician. Consultation and trouble-shooting activities include assistance with design and development of instructional strategies, development of specialized interactive computer-based programs, design and maintenance of databases, and design and development of instructional materials. In addition, the staff of the HFIMC maintain the SON web pages with assistance from designated departmental staff.

Over 200 personal computers are networked via Ethernet to the five production servers running Novell within the SON. This local area network is connected to the campus backbone that is currently being upgraded via a six-million-dollar capital project. The older FDDI will be phased out and replaced with a redundant ATM core with a one Gigabit capacity. As of December 20, 2001, the SON will have the one Gigabit capacity. The architecture includes two levels of firewall, encryption, and authentication for remote access via Internet service providers, virtual private networks, or ISDN and leased T1 lines (from remote clinics). Vanderbilt is a founding member of the University Corporation for Advanced Internet Development (UCAID) and Internet2. As such, the network will be maintained according to standards met by those collaborative projects.

Joint Center for Nursing Research (JCNR). Housed on the fifth floor of Godchaux Hall, the JCNR provides research consultation, support, and resources for faculty, students and nursing staff of the School of Nursing, Vanderbilt University Hospital (VUH), the Nashville Veterans Administration Hospital (VAMC) and St. Thomas Hospital (STH). The Associate Dean for Research, the Director of the JCNR, and the Assistant Directors from VUSN, VUH, VAMC and STH, plus an administrative assistant, grants manager and full-time statistician provide assistance. They assist with grant proposal development, Institutional Review Board application, paper and poster preparation, data base management, instrument development, use of computers in literature searches, reference retrieval and manuscript preparation. The resources of the JCNR are available to all School of Nursing investigators.

Patricia Champion Frist Hall

In 1998 the new 25,000 square foot Patricia Champion Frist building located adjacent to Godchaux Hall was completed. This building houses a multi-media classroom with installed networking for 75 students, 2

health assessment/multi purpose classrooms, a student lounge, a reception area and 50 faculty offices. Two of the larger classrooms have installed infrastructure capable of video streaming live lectures that are then converted to CD-ROM format. Godchaux Hall, the Annex, and Frist Hall are joined by a common Atrium, which houses a kitchen area for faculty, staff, and students. Thus, the three buildings of the School of Nursing and the Atrium form a self-contained, cohesive instructional and social complex.

Kim Dayani Human Performance Center

The Dayani Center is devoted to health promotion, fitness testing and evaluation, cardiac rehabilitation, employee wellness, and fitness and nutrition research.

The center, named in honor of Dr. Kim Dayani (M.D. '65), offers membership primarily to Vanderbilt faculty and staff members, but a limited number of memberships are available to the public.

Bill Wilkerson Hearing and Speech Center

A diagnostic and treatment center for audiological and speech problems, the Wilkerson Center is located at Edgehill Avenue and 19th Avenue South. A new facility in the Medical Center complex is under construction.

Medical Arts Building

Immediately adjacent to the hospital, the Medical Arts Building provides members of the clinical faculty with convenient office space.

Libraries

The Jean and Alexander Heard Library

This is the collective name for all the libraries at Vanderbilt, which have a combined collection of more than 2.7 million volumes. It comprises the Central, Biomedical, Divinity, Law, Management, Music, Peabody, and Science and Engineering libraries, each of which serves its respective school and disciplines. Special Collections, the University Archives and the Television News Archives are also part of the library system. The facilities, resources, and services of these divisions are available to all Vanderbilt faculty and staff members, students, and alumni/ae. Most materials are shelved in open stacks and are available to users through Acorn, the library's integrated, automated system. Acorn also provides access to a growing number of full-text journals, as well as indexes and other research resources. Acorn and the library homepage (http://www.library.vanderbilt.edu/) are accessible via the campus network and from workstations in each library.

The Annette and Irwin Eskind Biomedical Library

The Eskind Biomedical Library (EBL) is a modern 78,000 net square feet facility, dedicated in April 1994. The construction of this award-winning library building was made possible by a gift from Vanderbilt Alumnus Irwin Eskind and his wife, Annette. With a staff of 46, the library collects and provides access to materials to support the teaching, research, and service missions of Vanderbilt University Medical Center. Library holdings include over 210,000 print volumes, of which about 81,000 are monographs and about 129,000 are serials. The library receives over 1,700 print serial titles and has a small collection of non-print material. Most materials are shelved in open stacks and are available to users through Acorn, the library's integrated, automated catalog. Acorn is web-based and accessible via the campus network and from workstations in the library. A unique collection of rare books, photographs and historical items can be found in the Historical Collections Room. The EBL Medical Center Archives, located in the lower level of the EBL, is a repository for manuscripts and institutional records reflecting the history of the Medical Center and the history of medicine.

In addition to print materials, EBL provides access to over 2,600 fulltext electronic journal titles, a number that is growing rapidly. It also makes available almost 100 online texts such as Harrison's Online and Nelson Textbook of Pediatrics, and multimedia programs such as A.D.A.M.TM. The library subscribes to a wide variety of information sources from commercial providers. MDConsultTM, STAT!-Ref.TM, and Current Protocols Online are collections of full-text electronic resources. CRL Online (Clinical Reference LibraryTM) is a comprehensive clinical drug information database. UpToDateTM is a database of clinical topic reviews based on clinical evidence. EBM Solutions, a clinical consulting tool, provides evidence-based comprehensive practice guidelines along with corresponding sections written at the consumer level. Ovid™ Technologies provides access to several databases, including CINAHLTM (nursing and allied health), Ovid™ Evidence-Based Medicine Reviews, EMBASE Drugs & Pharmacology™, and HaPI™. The library also provides Web access to the Science Citation Index Expanded™, Journal Citation ReportsTM, ScienceDirectTM, and Current Contents Connect®. Further, EBL's connection to the World Wide Web provides global access to a wide range of internet-based information resources which have been fully integrated into the Digital Library portal to provide rapid and easy access. Access to MEDLINE and other NLM databases is provided through PubMed and the NLM Gateway. Also available is the National Center for Biotechnology Information's wide range of molecular biology and genomics resources, including GenBankTM, LocusLinkTM, OMIMTM and a tool for viewing the human genome. In addition, the network brings into the library a number of Medical Center information systems.

Orientations and training sessions on electronic resources are offered regularly in the state-of-the-art Training Room. The Training Room fea-

tures 14 training stations, a master station for the trainer, and multimedia projection capabilities. Classnet®, an integrated hardware utility, allows the trainer to assume control of trainees' computers, the multimedia player, and the classroom projector, which facilitates interactive instruction and demonstration.

The EBL provides staff and patrons with the computer equipment needed to support their information needs. Most public workstations in the library have the same desktop and functionality as other "shared" workstations throughout the Medical Center. All 75 publicly available computers in the library are connected to the Medical Center network, and the library makes as many of its resources as possible available via the network. The library has a multimedia workstation available for CD-ROM titles that cannot be networked. In addition, thirteen laptop computers programmed to work with wireless technology can be checked out for use in the library.

The library is committed to service, and its most important resource is the expertise of its staff. Librarians help students, residents and faculty stay abreast of the latest findings in the literature by actively participating on clinical rounds and providing targeted support to researchers. Bioinformatics support is provided through regular training classes and individualized consultations. Members of the Collection Development Team are available to meet with faculty developing new courses or programs to assess the information needs of those endeavors and determine the most appropriate way to fulfill those needs. The library has also established a program to provide VUMC patients and their families with the latest in health information. Through the AskELIS synchronous and asynchronous services (Virtual Reference, Library Information Desk, SearchDoc, and Learning Site), staff expertise is available on the desktop through the Web. EBL also recently added specialized Digital Libraries for the Children's Hospital, the Adult Primary Care Center, and for Consumer Health users to customize the electronic delivery of information to specific user groups. Online knowledge modules provide 24-hour interactive instruction in health science resources and bibliographic management tools. Other services include circulation of books, management of reserve materials, document delivery to obtain needed material held by other institutions, reference and research services, and guidance in the use of new information technologies. EBL staff members also guide development of VUMC's Webpages and create online tools, such as the Learning Module Shell, to promote the reuse of information. As part of the Informatics Center, library staff work in partnership with researchers in the Division of Biomedical Informatics and the Information Management Department to innovate the delivery of health information to Vanderbilt and to the larger regional community.

The library's Website http://www.mc.vanderbilt.edu/biolib has more details, including a succinct description of the library's collection and services and an organization chart (in the "About Us" section).

Professional and Supervisory Staff

JENNIFER BIDDLE, M.L.S., Library Intern

DEBORAH BROADWATER, M.L.S., Assistant Director for Collection Development

JOHN CLARK, M.S., Health Systems Analyst Programmer

G. MEGAN DAVIS, M.S.L.S., Library Fellow

MARCIA EPELBAUM, M.A., Assistant Director for Library Operations

GAYLE GRANTHAM, Health Information Specialist

NUNZIA GIUSE, M.D., M.L.S., Director

REBECCA JEROME, M.L.I.S., Assistant Director for Filtering and Evidence-Based Services

TANEYA KOONCE, M.S.L.S., Assistant Director for Web Development

QINGHUA KOU, M.S., Health Systems Analyst Programmer

PATRICIA LEE, M.L.S., Assistant Director for Fee-Based Services

FRANCES LYNCH, M.L.S., Associate Director

JENNIFER LYON, M.L.I.S., M.S., Coordinator, Research Informatics Consult Service

SANDRA L. MARTIN, M.L.S., Ed.S., Ed.D., Assistant Director for Children's Hospital Services

DAN E. MCCOLLUM, Co-Coordinator, Records Center, Co-Coordinator, Document Delivery

SHANNON A. MUELLER, M.L.I.S., Library Fellow JEREMY NORDMOE, M.A., Coordinator, Medical Center Archives

NILA SATHE, M.A., M.L.I.S., Assistant Director for Research

KATHERINE E. SZIGETI, M.L.I.S., Library Fellow

MARY H. TELOH, M.A., Coordinator, Special Collections

PAULINE TODD, M.S., Library Fellow

MARGARET W. WESTLAKE, M.L.S., Assistant Director for Staff Training and Quality Assurance

ANNETTE M. WILLIAMS, M.L.S., Assistant Director for Knowledge Management

TAO YOU, M.L.I.S., Library Fellow

JERRY ZHAO, M.S., M.L.I.S., Systems Software Specialist

Affiliated Facilities

Vanderbilt is closely affiliated with the 485-bed Veterans Administration Medical Center—a Vice Chancellor's Committee hospital containing 439 acute-care beds and outpatient facilities—and with the Howard Hughes Medical Institute, which occupies the eighth floor of Rudolph A. Light Hall.

Saint Thomas Hospital is closely affiliated with the educational programs of the Schools of Medicine and Nursing. The Medical Center also utilizes the facilities of Baptist Hospital, the Luton Community Mental Health Center, the Middle Tennessee Mental Health Institute, the Metro Nashville–Davidson County Health Department, Southern Hills Hospital, and Centennial Medical Center.

Information Technology Services (ITS)

Information Technology Services, formed by the recent merger of Academic Computing and Information Services (ACIS) and Telecommunications, advances Vanderbilt's information infrastructure and offers services for voice, data, and video technologies. In addition to providing reliable and cost effective telecommunications services, ITS designs, manages,

and maintains VUnet, the data network that is Vanderbilt's link to the Internet. Key services of VUnet include the VUmail electronic message system; VUspace, a networked file system available to students, faculty, and staff; and Prometheus, an online vehicle that makes it easy for faculty to put course materials on the Web. For more information see www.vanderbilt.edu/its. For more information about computing at Vanderbilt, visit Vanderbilt's computing home page at www.vanderbilt.edu/compute/.

Canby Robinson Society

In 1978 Vanderbilt established the Canby Robinson Society in honor of George Canby Robinson, M.D., dean of the Medical School from 1920 to 1928. It was through Dr. Robinson's leadership that the teaching hospital and the research laboratories were placed under one roof, thrusting Vanderbilt to the forefront of medical education. His innovation regarding the diversity of the Medical School's curriculum, with emphasis on biomedical research and improved health care, is a legacy that continues today.

With a membership of eighteen hundred plus and a working thirty member board, this donor society promotes both unrestricted and restricted gifts in support of the Medical Center's programs. Through the leadership of this group, private support to the Medical Center continues to increase. The Canby Robinson Society offered twenty-two full scholarships this past year.

Founders Circle

DR. AND MRS. BEN J. ALPER Nashville

DR. DIXON N. BURNS Tulsa, Oklahoma

MR. AND MRS. MONROE J. CARELL, JR. Nashville

MRS. CAROLYN PAYNE DAYANI Scottsdale, Arizona

DR. AND MRS. WILLIAM R. DELOACHE

Greenville, South Carolina
DR. AND MRS. IRWIN B. ESKIND

Nashville

MRS. A. B. HANCOCK, JR.

Paris, Kentucky

MISS VIRGINIA E. HOWD

Cincinnati, Ohio

MRS. E. BRONSON INGRAM

DR. AND MRS. HARRY R. JACOBSON

MRS. GEORGE C. LAMB, JR.

Durham, North Carolina

DR. AND MRS. JAMES R. LEININGER

San Antonio, Texas

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DR. AND MRS. JOHN S. ODESS

Chelsea, Alabama

DR. THEODORE P. PINCUS

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MRS. DAVID Y. PROCTOR, JR.

Nashville

DR. AND MRS. HERBERT J. SCHULMAN

Nashville

DR. AND MRS. EUGENE A. STEAD, JR.

Bulluk, North Carolina

MR. AND MRS. CAL TURNER, JR.

Goodlettsville, Tennessee

MR. AND MRS. STEVE TURNER

Nashville

MR. AND MRS. DAVID K. WILSON

Nashville

MR. AND MRS. THOMAS L. YOUNT

Nashville

Stewards Circle

MR. AND MRS. HOWELL E. ADAMS

Nashville

MR. AND MRS. BARRY BAKER

Nashville

DR. AND MRS. LEO M. BASHINSKY

Birmingham, Alabama

DR. AND MRS. ROBERT N. BUCHANAN, JR.

Nashville

MR. AND MRS. LUCIUS E. BURCH III Nashville

MR. AND MRS. CORNELIUS A. CRAIG II

DR. AND MRS. E. WILLIAM EWERS

Nashville

DR. AND MRS. WILLIAM A. HEWLETT

Nashville

DR. AND MRS. JACK E. KEEFE III Key Biscayne, Florida

MS. MARY E. KELLER

Nashville

MR. AND MRS. LEO KING

Henderson, KY

DR. AND MRS. JAMES TRUE MARTIN

Nashville

MRS. EDGAR M. MCPEAK

Rusk, Texas

MRS. BARBARA L. ROGERS

Nashville

MRS. VERNON ROSSER

Nashville

DRS. JOHN L. AND JULIA E. SAWYERS

MR. AND MRS. DONALD N. TEST. JR.

Dallas, Texas

MRS. HILLIARD TRAVIS

Nashville

MRS. ELTON YATES

Pinehurst, North Carolina

The University

When Commodore Cornelius Vanderbilt gave a million dollars to build and endow Vanderbilt University in 1873, he did so with the wish that it "contribute to strengthening the ties which should exist between all sections of our common country."

A little more than a hundred years later, the Vanderbilt Board of Trust adopted the following mission statement: "We reaffirm our belief in the unique and special contributions that Vanderbilt can make toward meeting the nation's requirements for scholarly teaching, training, investigation, and service, and we reaffirm our conviction that to fulfill its inherited responsibilities, Vanderbilt must relentlessly pursue a lasting future and seek highest quality in its educational undertakings."

Today as Vanderbilt pursues its mission, the University more than fulfills the Commodore's hope. It is one of a few independent universities with both a quality undergraduate program and a full range of graduate and professional programs. It has a strong faculty of over 2,000 full-time members and a diverse student body of about 10,000. Students from many regions, backgrounds, and disciplines come together for multidisciplinary study and research. To that end, the University is the fortunate recipient of continued support from the Vanderbilt family and other private citizens.

The 330-acre campus is about one and one-half miles from the downtown business district of the city, combining the advantages of an urban location with a peaceful, park-like setting of broad lawns, shaded paths, and quiet plazas.

Off-campus facilities include the Arthur J. Dyer Observatory, situated on a 1,131-foot hill six miles south.

The schools of the University offer the following degrees:

College of Arts and Science. Bachelor of Arts, Bachelor of Science.

Graduate School. Master of Arts, Master of Arts in Teaching, Master of Liberal Arts and Science, Master of Science, Doctor of Philosophy.

Blair School of Music. Bachelor of Music.

Divinity School. Master of Divinity, Master of Theological Studies. School of Engineering. Bachelor of Engineering, Bachelor of Science, Master of Engineering.

Law School. Doctor of Jurisprudence.

School of Medicine. Doctor of Medicine, Doctor of Audiology, Master of Medical Physics, Master of Public Health, Master of Science in Clinical Investigation.

School of Nursing. Master of Science in Nursing.

Owen Graduate School of Management. Master of Business Administration.

Peabody College. Bachelor of Science, Master of Education, Master of Public Policy, Specialist in Education, Doctor of Education.

No honorary degrees are conferred.

Accreditation

Vanderbilt University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award Bachelor's, Master's, Specialist's, and Doctor's degrees. Vanderbilt is a member of the Association of American Universities.



Life at Vanderbilt

ANDERBILT provides a full complement of auxiliary services to meet the personal needs of students, to make life on the campus comfortable and enjoyable, and to provide the proper setting for academic endeavor.

Graduate Student Council

The Graduate Student Council, consisting of one student representative from each graduate program, serves to ascertain graduate student opinion and communicate it appropriately. The council and its committees are available to students and members of the administration and faculty for consultation regarding matters concerning the Graduate School and the graduate student body. The council also provides the Graduate Honor Council, which hears any cases involving graduate students and protects the compact with the University. The Graduate Student Council co-sponsors seminars on career planning, dissertation writing, financial matters, and other important topics and serves as a volunteer organization, collecting clothes, food, and toys for various community programs and allowing graduate students to volunteer a little time out of a busy schedule. Finally, the council organizes many graduate student social functions.

Housing Facilities

The Office of Housing and Residential Education provides apartment-style housing for as many graduate students as possible. Applications for housing will be mailed to students upon request after March 1. Questions should be addressed to the Office of Housing and Residential Education, VU Station B #351677, Nashville, Tennessee 37235-1677. A \$200 deposit is required at the time of application. Returning residents of University housing will be permitted to renew their leases until May 1. Incoming students in graduate and professional schools will receive priority for the remaining available housing for the fall if their applications are received by May 1. Any returning student may apply for on-campus housing by filing an application with a \$200 deposit. After May 1, assignment is made on the basis of the date of application.

Apartments are leased for the entire academic year. Students who are assigned space on the campus are therefore committed for one year and should understand that only withdrawal from the University will cause the lease to be terminated.

Residential occupancy is subject to the terms and conditions of a lease executed by the occupants. Only full-time students at Vanderbilt are eligible for campus apartments. Apartments must be vacated within twenty-four hours if the occupants cease to be students.

University housing for graduate and professional students is available in the following facilities:

The Family Housing Complex, located at the eastern edge of campus on Eighteenth Avenue South, has air-conditioned, town-house apartments with living room and kitchen downstairs and two bedrooms and bath upstairs. The apartments are designed for families with children.

The Garrison Apartment complex on Eighteenth Avenue South has airconditioned efficiency and one-bedroom units. Single as well as married students are assigned here.

TeleVU, the residence hall cable television system, and ResNet, the residential data network, are available in all apartments in Family Housing and Garrison Apartments.

For additional information, consult the Housing Web site at www. vanderbilt.edu/ResEd/.

Off-Campus Housing

The Office of Housing and Residential Education maintains a listing of available off-campus accommodations in the Nashville area. The majority of rental property is close to the campus. Cost, furnishings, and conditions vary greatly. For best choices, students seeking off-campus housing should visit the office by early July for suggestions and guidance, or consult the Web site at https://apphost1.acis.vanderbilt.edu/off_campus_referral.

Change of Address

Students who change either their local or permanent mailing address are expected to notify school and University registrars immediately. Candidates for degrees who are not in residence should keep the school and University Registrar informed of current mailing addresses. To change or update addresses, go to www.vanderbilt.edu/students.html, then click on Address Change.

The Card

The Card is the Vanderbilt student ID card. It can be used to access debit spending accounts, meal plans, and campus buildings such as residence halls, libraries, academic buildings, and the Student Recreation Center.

ID cards are issued at the Card Office from 8:30 a.m. to 4:00 p.m. at 184 Sarratt Student Center. For more information, see the Web site at http://thecard.vanderbilt.edu.

Eating on Campus

Vanderbilt Dining operates several food facilities throughout campus that provide a variety of food and services. The largest dining facility is Rand Dining Center behind the Sarratt Student Center, serving breakfast, lunch, and dinner, Monday through Friday. The Courtyard Café, located in The Vanderbilt Clinic, and an on-campus McDonald's Restaurant,

located on the hospital's plaza/mezzanine level, serve Medical Center personnel and visitors. Six convenience stores on campus offer grab-andgo snacks, beverages, and groceries. Three of the stores have hot food and made-to-order items. All units accept the Vanderbilt Card, cash, or checks. For more information, visit the Web site at www.vanderbilt.edu/dining.

Services to Students

Confidentiality of Student Records (Buckley Amendment)

Vanderbilt University is subject to the provisions of federal law known as the Family Educational Rights and Privacy Act (also referred to as the Buckley Amendment or FERPA). This act affords matriculated students certain rights with respect to their educational records. These rights include:

The right to inspect and review their education records within 45 days of the day the University receives a request for access. Students should submit to the University Registrar written requests that identify the record(s) they wish to inspect. The University Registrar will make arrangements for access and notify the student of the time and place where the records may be inspected. If the University Registrar does not maintain the records, the student will be directed to the University official to whom the request should be addressed.

The right to request the amendment of any part of their education records that a student believes is inaccurate or misleading. Students who wish to request an amendment to their educational record should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the student will be notified of the decision and advised of his or her right to a hearing.

The right to consent to disclosures of personally identifiable information contained in the student's education records to third parties, except in situations that FERPA allows disclosure without the student's consent. One such situation is disclosure to school officials with legitimate educational interests. A "school official" is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including University law enforcement personnel and health staff); a person or company with whom the University has contracted; a member of the Board of Trust; or a student serving on an official University committee, such as the Honor Council, Student Conduct Council, or a grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

The Buckley Amendment provides the University the ability to designate certain student information as "directory information." Directory information may be made available to any person without the student's consent unless the student gives notice as provided for below. Vanderbilt has designated the following as directory information: the student's name, addresses, telephone number, e-mail address, date and place of birth, major field of study, school, classification, participation in officially recognized activities and sports, weights and heights of members of athletic teams, dates of attendance, degrees and awards received, the most recent

previous educational agency or institution attended by the student, and other similar information. Any new entering or currently enrolled student who does not wish disclosure of directory information should notify the University Registrar in writing. No element of directory information as defined above is released for students who request nondisclosure except in situations allowed by law. The request to withhold directory information will remain in effect as long as the student continues to be enrolled, or until the student files a written request with the University Registrar to discontinue the withholding. To continue nondisclosure of directory information after a student ceases to be enrolled, a written request for continuance must be filed with the University Registrar during the student's last term of attendance.

If a student believes the University has failed to comply with the Buckley Amendment, he or she may file a complaint using the Student Complaint and Grievance Procedure as outlined in the *Student Handbook*. If dissatisfied with the outcome of this procedure, a student may file a written complaint with the Family Policy and Regulations Office, U.S. Department of Education, Washington, D.C. 20202.

Questions about the application of the provisions of the Family Educational Rights and Privacy Act should be directed to the University Registrar or to the Office of the General Counsel.

Vanderbilt Directory Listings

Individual listings in the student section of the printed *Vanderbilt Directory* and the online *People Finder Directory* consist of the student's full name, school, academic classification, local phone number, local address, box number, and permanent address. Student listings in the *People Finder Directory* are available to the Vanderbilt community via logon ID and e-password. Students have the option of making their *People Finder* listings available to the general public (viewable by anyone with access to the Internet) and of adding additional contact information such as cellular phone, pager, and fax numbers.

Students who want their listings excluded from the printed *Vanderbilt Directory* or the online *People Finder Directory* must notify the University Registrar in writing. To be excluded from the printed directory, this notice must be received by August 1. Requests to exclude listings from the online directory can be made at any time during the year.

Directory listings should be kept current. Students may report address changes via the Web by going to www.vanderbilt.edu/students.html and clicking on Address Change.

Psychological and Counseling Center

The Psychological and Counseling Center is a broad-based service center available to students, faculty, staff, and their partners and dependents. Services include: 1) family, couples, individual, and group counseling and

psychotherapy; 2) psychological and educational assessment; 3) career assessment and counseling; 4) programs such as assertiveness training; marital communication; individual study skills techniques; weight, stress, and time management; group support programs for acquiring skills such as relaxation; 5) administration of national testing programs; 6) outreach and consultation with departments; 7) special programming related to diversity issues; 8) campus speakers and educational programs.

Eligible persons may make appointments by visiting the Psychological and Counseling Center or by calling (615) 322-2571. Services are confidential to the extent permitted by law. For more information, see the Web site, www.vanderbilt.edu/pcc.

Career Center

The Vanderbilt Career Center helps students and alumni of Vanderbilt University develop and implement career plans. This is accomplished by offering a variety of services and educational programs that help students and alumni determine career options, learn job search skills, gain career-related experience, and connect with employers.

Services include individual career advising; career resource center; graduate and professional school services; career-related seminars and workshops; resume consultation; video interview training; internship information service; career fairs; campus interviews; credentials service; part-time and full-time job listings; resume referrals; and alumni services. For detailed information about the Career Center, visit the Web site at www.vanderbilt.edu/career.

Student Health Center

The Vanderbilt Student Health Center (SHC) in the Zerfoss Building is a student-oriented facility that provides routine and acute medical care similar to services rendered in a private physician's office or HMO.

The following primary care health services are provided to students registered in degree-seeking status without charge and without copayment: visits to staff physicians and nurse practitioners; personal and confidential counseling by mental health professionals; routine procedures; educational information and speakers for campus groups; some routine laboratory tests that are performed at the SHC; and specialty clinics held at the SHC.

These SHC primary care services are designed to complement the student's own insurance policy, HMO, MCO, etc., coverage to provide comprehensive care. Students are billed for any services provided outside the SHC or by the Vanderbilt University Medical Center.

Dr. John W. Greene, director of the Student Health Center, is a tenured faculty member of the Vanderbilt University School of Medicine. The entire medical staff is composed of physicians and nurse practitioners who have chosen student health as a primary interest and responsibility.

The Zerfoss Student Health Center is open from 8:00 a.m. to 4:30 p.m., Monday through Friday, and 8:30 a.m. until noon on Saturday, except during scheduled breaks and summer. Students should call ahead to schedule appointments, (615) 322-2427. A student with an urgent problem will be given an appointment that same day, or "worked in" if no appointment is available. When the Health Center is closed, students needing acute medical care may go to the Emergency Department of Vanderbilt University Hospital. They will be charged by the VU Medical Center for Emergency Department services.

Students may also call (615) 322-2427 for twenty-four-hour emergency phone consultation, which is available seven days a week (except during summer and scheduled academic breaks). On-call Student Health professionals take calls after regular hours. Calls between 11:00 p.m. and 7:00 a.m. are handled by the Vanderbilt University Emergency Department triage staff. More information is available on the Web at www .vanderbilt.edu/student_health/.

Student Accident and Sickness Insurance Plan

All degree-seeking students registered for 4 or more hours at Vanderbilt are required to have adequate health insurance coverage. The University offers a sickness and accident insurance plan that is designed to provide hospital, surgical, and major medical benefits. A brochure explaining the limits, exclusions, and benefits of insurance coverage is available to students at registration, in the Office of Student Accounts, or at the Student Health Center.

The annual premium is in addition to tuition and is automatically billed to the student's account. Coverage extends from August 12 until August 11 of the following year, whether a student remains in school or is away from the University.

A student who does not want to subscribe to the insurance plan offered through the University must notify the Office of Student Accounts of adequate coverage under another policy. A new student must complete an online selection/waiver process through either the Office of Student Accounts (www.vanderbilt.edu/stuaccts) or via the insurance company. This process must be completed at or by registration for the fall or spring semester. The online selection/waiver process indicating comparable coverage must be completed every year in order to waive participation in the Student Accident and Sickness Insurance Plan.

Family Coverage. Students who want to obtain coverage for their families (spouse, children, or domestic partner) may secure application forms by contacting the on-campus Student Insurance representative, (615) 322-4688. Additional premiums are charged for family health insurance coverage.

International Student Coverage

International students and their dependents residing in the United States are required to purchase the University's international student health and

accident insurance plan. No exceptions are made unless, in the judgment of the University, adequate coverage is provided from some other source. This insurance is required for part-time as well as full-time students. Information and application forms are provided through the Student Health Center.

Services for Students with Disabilities

Vanderbilt is committed to the provisions of the Rehabilitation Act of 1973 and Americans with Disabilities Act as it strives to be an inclusive community for students with disabilities. Students seeking accommodations for any type of disability are encouraged to contact the Opportunity Development Center. Services include, but are not limited to, extended time for testing, assistance with locating sign language interpreters, audio-taped textbooks, physical adaptations, notetakers, and reading services. Accommodations are tailored to meet the needs of each student with a documented disability. The Opportunity Development Center also serves as a resource regarding complaints of unlawful discrimination as defined by state and federal laws.

Specific concerns pertaining to services for people with disabilities or any disability issue should be directed to the Assistant Director for Disability Programs, Opportunity Development Center, VU Station B #351809, Nashville, Tennessee 37235-1809; phone (615) 322-4705 (V/TDD); fax (615) 343-0671; www.vanderbilt.edu/odc/.

Child Care Center

Vanderbilt Child Care Center operates as a service to University staff members, faculty members, and students. The program serves children from six weeks to five years of age. The center is accredited by the National Academy of Early Childhood Programs.

Vanderbilt Police Department

The Vanderbilt University Police Department, (615) 322-2745, is a professional law enforcement agency dedicated to the protection and security of Vanderbilt University and its diverse community.

The Police Department comes under the charge of the Office of the Vice Chancellor for Administration. As one of Tennessee's larger law enforcement agencies, the Police Department provides comprehensive law enforcement and security services to all components of Vanderbilt University including the academic campus, Vanderbilt University Medical Center, and a variety of University-owned facilities throughout the Davidson County area. Non-commissioned and commissioned officers staff the department. Commissioned officers are empowered to make arrests as "Special Police Officers," through the authority of the Chief of Police of the Metropolitan Government of Nashville and Davidson County. Vanderbilt officers with Special Police Commissions have the same authority as that of a municipal law enforcement officer while on

property owned by Vanderbilt, on adjacent public streets and sidewalks, and in nearby neighborhoods.

The Police Department includes a staff of more than 100 people, organized into two divisions: operations and administration. All of Vanderbilt's commissioned officers have completed officer training at a state certified police academy. Those officers hold Special Police Commissions and are required to attend annual in-service, as well as on-the-job training. The department also employs non-academy-trained officers for security-related functions and as part-time student security officers.

The Police Department has several services and programs in place to help protect and educate the Vanderbilt community.

SafeTrips—The escort program includes both a walking escort service and a van service. The walking escort provides door-to-door security for students, faculty, and staff walking across campus during nighttime hours. The van service is operated from dusk until 2:00 a.m., seven days a week (vans operate until 5:00 a.m. on Saturday and Sunday mornings). The vans will follow a continuous loop around campus with the following thirteen stops: Police Headquarters, Lupton dormitory on Branscomb Quadrangle, 24th Avenue between Carmichael Towers East and West, the parking area outside of Mims Dormitory, Terrace Place Garage, Heard Library, Wesley Place Garage, Payne Hall, Hill Student Center, Memorial Hall, North Hall on Peabody Campus, the Blair School of Music, and Lewis Hall at Morgan Circle. Each stop will be clearly marked by a sign. The telephone number for SafeTrips is (615) 421-8888.

Emergency Phones—More than 100 emergency telephones are located throughout the University campus and Medical Center parking areas. Using one of these phones will connect the caller directly to the Police Communications Center. An open line on any emergency phone will activate an emergency response from an officer.

Lost and Found—Recovered property may be turned in at any time to the Police Department. Inquiries about lost items may be made by contacting VUPD's Lost and Found Office, Monday through Friday, 8:30 a.m. to 4:00 p.m. The telephone number is (615) 343-5371.

The Office of Crime Prevention for the Police Department offers several programs and services to the Vanderbilt community. It includes a variety of topics including sexual assault, domestic violence, workplace violence, personal safety, RAD (Rape Aggression Defense) classes, and victim assistance. For further information on available programs and services, call (615) 322-2558 or e-mail *crimeprevention.atwood@vanderbilt.edu*.

Additional information on security measures, programs and services, and crime statistics for the Vanderbilt community is available from the Police Department, 2800 Vanderbilt Place, Nashville, TN 37212. Information is also available at http://police.vanderbilt.edu.

Campus Security Report

In compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act and the Tennessee College and University Security Information Act, Vanderbilt University will provide you, upon request, an annual Security Report on University-wide security and safety, including related policies, procedures, and crime statistics. A copy of this report may be obtained by writing or calling the Vanderbilt University Police Department, 2800 Vanderbilt Place, Nashville, Tennessee 37212 or by telephone at (615) 343-9750. You may also obtain this report on the Web site at http://police.vanderbilt.edu/secatvu.htm.

Parking and Vehicle Registration

Parking space on campus is limited. Motor vehicles operated on campus at any time by students, faculty, or staff must be registered with the Office of Traffic and Parking located in the Wesley Place Garage. A fee is charged. Parking regulations are published annually and are strictly enforced. More information is available at www.vanderbilt.edu/traffic_parking/.

Bicycles must be registered with the VU Police Department.

Bishop Joseph Johnson Black Cultural Center

The Bishop Joseph Johnson Black Cultural Center (BJJBCC) provides educational and cultural programming on the African world experience for the Vanderbilt community. It also promotes the retention of the University's African-descended students. Dedicated in 1984, the center is named for the first African-descended student admitted to Vanderbilt (in 1953), Bishop Joseph Johnson (B.D., '54; Ph.D., '58).

The center represents the University's efforts in promoting diversity and fostering understanding of the values and cultural heritages of people of African origin worldwide. In this respect, the center also serves as a clearinghouse for information relative to African and African-descended life and culture. Symposia, lectures, music, art exhibitions, audiovisual materials, and publications on the universal black experience provide a broad spectrum of activities for the University and the general public. Programs are publicized in the University calendar and a quarterly newsletter, *News from the House*. The Black Student Alliance (BSA) and the Cultural Center's Advisory Board assist in developing the center's programs.

The center is a system of support to African-descended students but is open to all students for small meetings and gatherings throughout the year. More information is available on the BJJBCC Web site at www.vanderbilt.edu/BCC.

International Student and Scholar Services

Vanderbilt University hosts more than 1000 international students from more than ninety countries, and many questions and concerns arise when students arrive at the University. The ISSS should be the first stop for international students and scholars coming to Vanderbilt. ISSS can provide much of the information needed for studying and working at Vanderbilt and living in the Nashville area. The services range from clarifying visa questions to providing opportunities for interaction among students who are interested in each other's cultures. For more information about the services provided, please refer to the Web site at www.vanderbilt.edu/isss.

Margaret Cuninggim Women's Center

The Women's Center was established in 1978 to provide support for women at Vanderbilt as well as resources about women, gender, and feminism for the University community. In 1987, the center was named in memory of Margaret Cuninggim, dean of women and later dean of student services at Vanderbilt.

Programs for students, faculty, and staff are scheduled throughout the fall and spring semesters and are publicized on the Web at www. vanderbilt.edu/WomensCenter and in the monthly newsletter Women's VU, which is distributed without charge to campus addresses on request. A student group that works closely with the Women's Center, Vanderbilt Feminists, is open to all interested students, both male and female.

The center houses a small library with an excellent collection of journals, books, and tapes. Books and tapes circulate for three weeks. Copy facilities are available. The Women's Center is also home to Project Safe (PS), a coordinated program of education about, prevention of, and response to violence against women on campus.

Schulman Center for Jewish Life

The philosophy of the Schulman Center is based upon the Jewish concept of hospitality, *hachnasat orechim*, and provides a welcoming atmosphere for everyone whether for purposes of spirituality, social action, or study. The center allows the Vanderbilt Hillel to expand its services and programs on campus including worship, counseling, study, fellowship, and retreats for Vanderbilt's Jewish community as well as those interested in learning more about Judaism. The Schulman Center is also home to Grins Café, Nashville's only Kosher-certified restaurant. The facility is named in honor of Ben Schulman, a 1939 Vanderbilt graduate.

Religious Life

The Office of the University Chaplain and Affiliated Ministries exists to provide occasions for religious reflection and avenues for service, worship, and action. There are many opportunities to clarify one's values, examine personal faith, and develop a sense of social responsibility.

The Holocaust and Martin Luther King Jr. lecture series, as well as Project Dialogue, provide lectures and programs investigating moral issues, political problems, and religious questions.

Baptist, Episcopal, Jewish, Presbyterian, Reformed University Fellowship, Roman Catholic, and United Methodist chaplains work with individuals and student groups. Provisions for worship are also made for other student religious groups. Counseling and crisis referrals are also available.

Extracurricular Activities

Sarratt Student Center

The Sarratt Student Center (www.vanderbilt.edu/sarratt), named for former mathematics professor and dean of students Madison Sarratt, provides a variety of facilities, programs, and activities. The center houses a cinema; an art gallery; art studios and darkrooms for classes and individual projects; work and office spaces for student organizations; comfortable reading and study lounges fully wired for Internet access; large and small meeting rooms; and large, open commons and courtyard areas for receptions or informal gathering. The center also houses the Overcup Oak restaurant and the Stonehenge Cafe, and leads directly to Rand Dining Room, the Varsity Market, and the Bookstore. The Vanderbilt Program Board plans concerts, film screenings, classes, speakers, receptions, gallery showings, and many other events throughout the campus. The center's Welcome Desk serves as a campus information center and is a TicketmasterTM outlet, handling ticket sales for most of the University's and Nashville's cultural events. Sarratt Student Center is home to the Division of Student Life, the Vanderbilt Card Office, and Vanderbilt Student Communications (including the student newspaper, radio station, and yearbook).

Recreation and Sports

Graduate and professional students are encouraged to participate in the many physical activity classes, intramurals, and sport clubs offered by the University. All students pay a mandatory recreation fee which supports facilities, fields, and programs (see the chapter on Financial Information). Spouses must also pay a fee to use the facilities.

Physical activity classes offered include racquetball, fly fishing, and scuba, along with rock climbing and kayaking. Thirty-one sport clubs provide opportunity for participation in such favorites as sailing, fencing, rugby, and various martial arts.

The University recreation facilities include gymnasiums, tracks, and four softball diamonds. The four lighted multipurpose playing fields are irrigated and maintained to assure prime field conditions.

The Student Recreation Center houses a 36 meter x 25 yard swimming pool; three courts for basketball, volleyball, and badminton; six racquetball and two squash courts; a weight and fitness room; a wood-floor activity room; a rock-climbing wall; an indoor track; a mat room; locker rooms; a Wellness Center; and the Time-Out Cafe. Lighted outside basketball and sand volleyball courts and an outdoor recreation facility complement the center.



School of Medicine

Administration	43
Executive Faculty	,
Standing Commit	tees

Medical Education at Vanderbilt 49

Admission 55Medical Scientist Training Program
Joint Degree Programs

Academic Program 67 Advanced Training

Academic Regulations 77

Chairs, Professorships, and Lectureships 83

Honors and Awards 97

Financial Information 101
Honor Scholarships
Financial Assistance

Research in Medical Sciences 117 Endowed Research Funds Research Centers

Courses of Study 127

Faculty 163

Register of Students 274

Residency Assignments 282



School of Medicine



STEVEN G. GABBE. M.D., Dean

G. ROGER CHALKLEY, D.Phil., Senior Associate Dean for Biomedical Research Education and Training M.D.,

GERALD S. GOTTERER, M.D., Ph.D., Senior Associate Dean for Faculty and Academic Administrative Affairs

F. ANDREW GAFFNEY, M.D., Associate Dean for Clinical Affairs

GERALD B. HICKSON, M.D., Associate Dean for Clinical Affairs

GEORGE C. HILL, Ph.D., Associate Dean for Diversity in Medical Education

BONNIE M. MILLER, M.D., Associate Dean for Medical Students

JASON D. MORROW, M.D., Associate Dean for Physician-Scientist Development FREDERICK KIRCHNER, JR., M.D., Associate Dean for Graduate Medical Education

CORNELIA R. GRAVES, M.D., Assistant Dean for Diversity in Medical Educaion

J. HAROLD HELDERMAN, M.D., Assistant Dean of Medical School Admissions

LYNN E. WEBB, Ph.D., Chief of Staff

VICKY CAGLE, Director, Student Financial Services

CRAIG CARMICHAEL, Director, Finance

TERENCE S. DERMODY, M.D., Director, Medical Scientist Training Program SUSAN WENTE, PH.D., Associate Director, Medical Scientist Training Program MICHELLE GRUNDY, PH.D., Assistant Director, Medical Scientist Training Program

JOSEPH M. GOFF, Director, Multimedia Support

DONALD E. MOORE, JR., Ph.D., Director, Division of Continuing Medical Education

PATRICIA F. SAGEN, Ph.D., Director, Medical School Admissions

JANELLE CAREY OWENS, Executive Assistant, Medical School Programs and pecial Projects BENITA J. BOBBITT, Assistant to the Dean

Executive Faculty

Steven G. Gabbe, Chair. Jeffrey R. Balser, R. Daniel Beauchamp, Fred H. Bess, George C. Bolian, Alan D. Cherrington, Stephen S. Entman, Daryl K. Granner, Dennis Hallahan, Heidi Elizabeth Hamm, Jacek Hawiger, David R. Head, Harry R. Jacobson, Lynn M. Matrisian, Robert L. MacDonald, Randolph A. Miller, Harold Moses, Jr., Eric G. Neilson, Robert H. Ossoff, Martin P. Sandler, Samuel A. Santoro, William Schaffner, Corey M. Slovis, Dan M. Spengler, William W. Stead, Paul J. Sternberg, Arnold W. Strauss, Michael R. Waterman, Susan Rae Wente. Regular Non-Voting Members: Craig R. Carmichel, G. Roger Chalkley, Colleen Conway-Welch, F. Drew Gaffney, Gerald S. Gotterer, Gerald B, Hickson, George C. Hill, Frederick Kirchner, Jr., Lee E. Limbird, Jason D. Morrow, Linda D. Norman, Mark A. Magnuson, Bonnie M. Miller, Donald E. Moore, Jr., William W. Stead, Lynn E. Webb, Alastair J. J. Wood.

Standing Committees

(The Dean is an ex officio member of all standing and special committees.)

Academic Programs

The Academic Programs Committee, appointed by the Dean, is composed of faculty and students. It is charged with monitoring the content and implementation of the Medical School curriculum and recommending to the Dean and the Executive Faculty any actions or modifications in policies relating to its area of responsibility.

George C. Bolian, Chair. Arthur F. Dalley, Terrence S. Dermody, Agnes B. Fogo, Robert L. Janco, Kimberly Lomis, Jeanette J. Norden, James W. Pichert, James S. Powers, R. Michael Rodriquez, Anderson Spickard III, Alexander S. Townes, Luc Van Kaer, John A. Zic. *Ex officio:* Gerald S. Gotterer, Bonnie Miller, Donald E. Moore.

Admissions

The Admissions Committee has the responsibility of reviewing Medical School applications for admission and making recommendations to the Dean for the admission of those students who are considered best qualified.

J. Harold Helderman, Chair. Robert Baum, Lonnie S. Burnett, P. David Charles, Brian W. Christman, Wonder Puryear Drake, John H. Exton, Agnes B. Fogo, Cornelia Graves, Kathy Jabs, H. Wayne Lambert, Willie V. Melvin III, James Nash, Lillian B. Nanney, R. Michael Rodriguez, Donald Rubin, Sally Santen, Jayant P. Shenai, Larry L. Swift, John Zic. Ex officio: George A. Hill, Bonnie Miller, Pat Sagen.

Clinical Research Center

The Clinical Research Center Advisory Committee meets regularly to act upon new and current faculty research proposals for the use of the center, to formulate policy and review all aspects of the administration of the center, and to approve reports and applications by the center to the National Institutes of Health.

Nancy J. Olsen, Chair. Raymond Burk, Alp Ikizler, Richard Kim, James E. Loyd, Herbert Meltzer, Judy G. Ozbolt, Ronald Salomon, James Sheller, Michael Stein.

Medical Center Conflict of Interest

The Conflict of Interest Committee is appointed by and advisory to the Dean of the School of Medicine. It is charged to review individual faculty circumstances where a possible conflict of interest or commitment might exist. The committee makes recommendations to the department chairs and the Dean concerning their review.

Gerald Gotterer, Chair. Italo Biaggioni, Lonnie S. Burnett, Richard Caprioli, Thomas P. Graham, Jr., Rolanda Johnson, Peng Liang, John Murray, Donald H. Rubin. *Ex officio:* Diana Marver, Leona Marx, Chris McKinney, Alastair J. J. Wood

Faculty Advisory Council

The Faculty Advisory Council is made up of departmentally elected faculty from all of the departments of the School of Medicine and serves as an advisory committee to the Dean and Executive Faculty. The council is to be invited by the administration to participate in the formulation of major policies of the school and may present other recommendations to the Dean at its discretion.

Jason D. Morrow, Chair. Christopher R. Aiken, Ronald M. Barton, Gordon R. Bernard, Albert H. Beth, Frank H. Boehm, Kevin B. Churchwell, John G. D'Alessio, Jeffrey M. Davidson, Ariel Y. Deutch, Josiane Eid, Tom A. Elasy, Ronald B. Emeson, Michael L. Freeman, C. Gaelyn Garrettm Joseph Gigante, Lee Ann C. Golper, Christopher F. J. Hardy, Robin R. Hemphill, Kevin B. Johnson, Robert M. Kessler, Howard S. Kirshner, Bonnie LaFleur, David E. Ong, John S. Penn, Herbert S. Schwartz, J. Kelly Wright, Jr.

Faculty Appointments and Promotions

The committee, appointed by the Dean, is responsible for consideration of faculty promotions in the School of Medicine and for examination of credentials of candidates for appointment to faculty positions.

Thomas Hazinski, Chair. John T. Algren, William D. Dupont, Raymond N. DuBois, Jr., Kathleen L. Gould, William O. Richards, J. Ann Richmond, Jean F. Simpson, Roland W. Stein, Robert L. Macdonald. David M. Miller. *Ex officio:* Gerald S. Gotterer

Graduate Education

The Graduate Education Committee is the faculty body concerned with graduate student affairs and graduate programs in the Medical Center.

David M. Miller, Chair. Fred H. Bess, Jin Chen, Louis J. DeFelice, Ronald B. Emeson, Walter Gray Jerome III, Sebastian Joyce, Richard M. O'Brien. *Ex officio:* G. Roger Chalkley

Interdisciplinary Graduate Program

The Interdisciplinary Graduate Program Executive Committee is concerned with graduate student affairs and graduate programs in the Medical Center. It is responsible for admitting students to the Interdisciplinary Graduate Program in the Biomedical Sciences; for recommending candidates for fellowships and other funds available for the program; for reviewing activities and progress of the students in the program and recommending students to the Departments of Biochemistry, Cell Biology, Microbiology and Immunology, Molecular Physiology and Biophysics, Pathology, and Pharmacology for the completion of the Ph.D. degree.

James G. Patton, Chair. Richard Caprioli, Jin Chen, Louis J. DeFelice, Ronald B. Emeson, Sebastian Joyce, David M. Miller, Richard M. O'Brien. *Ex officio:* G. Roger Chalkley

International Medical Educational Experiences

The International Medical Educational Experiences Committee acts as a channel for exchange of students and faculty in areas of international education.

Faculty Advisors: Peter F. Wright, Chair. Ferris Carney, Mark R. Denison, David T. Karzon, Jeffry P. McKinzie, William Schaffner, John T. Tarpley, Mary I. Yarbrough. Coordinator: Janelle Carey Owens.

Ex officio: Bonnie M. Miller.

M.D./Ph.D. Committee

The M.D./Ph.D. Committee has responsibility for admitting students to the M.D./Ph.D. program; for recommending candidates for fellowships and other funds available for the program; and for maintaining, on a continuing basis, a review of the activities and progress of the students in the program.

Terry S. Dermody, Director; Susan R. Wente, Associate Director; Michelle M. Brudy, Assistant Director. H. Scott Baldwin, R. Daniel Beauchamp, Albert H. Beth, Mark R. Boothby, Bruce Carter, Robert J. Coffey, Jr., Kathy Gould, Dennis E. Hallahan, Heidi Hamm, Frederick R. Haselton, Robert McDonald, Eric G. Neilson, Dan M. Roden, Shirley Russell, Arnold W. Strauss, Mary Zutter.

Student Members: Dwayne Dove, Hilary Highfield.

Ex officio: Roger Chalkley, Steven G. Gabbe, Gerald S. Gotter, George C. Hill, Fatima Lima, Bonnie M. Miller

Student Promotion Committees

Each promotion committee will have the responsibility for making recommendations to the Dean and the Executive Faculty concerning promotion, remedial action, or dismissal as appropriate for each student in the class for which it is responsible.

Class of 2004

J. Harold Helderman, Chair. John H. Exton, Tina V. Hartert, R. Michael Rodriguez, Corey M. Slovis. Ex officio: Gerald S. Gotterer, Bonnie M. Miller

Class of 2005

Lillian Nanney, Chair. Ronald B. Emeson, Arnold W. Strauss, Julia G. Lewis, *Ex officio:* Gerald S. Gotterer, Bonnie M. Miller

Class of 2006

Linda Sealy, Chair. Jeffrey R. Balser, Cornelia R. Graves, H. Wayne Labmert, Alvin C. Powers. *Ex officio*: Gerald S. Gotterer, Bonnie M. Miller

Class of 2007

Cathleen C. Pettepher, Chair. Alan D. Cherrington, Sandra A Moutsios, R. Stokes Peebles, Janant P. Shenai. *Ex officio:* Gerald S. Gotterer, Bonnie M. Miller





Medical Education at Vanderbilt

THE Vanderbilt University School of Medicine is committed to the education of physicians who are firmly grounded in basic medical science; who can recognize and treat disorders in their patients and provide appropriate preventive counseling; who can obtain, evaluate, and apply the results of scientific research; and who can translate their proficiency into effective humanitarian service.

The medical school's major strength lies in the quality of its students and faculty. The school provides a supportive, positive environment in which students are treated individually in their pursuit of excellence in medical careers. The student body is diverse, with students from a wide variety of major universities nationwide. The medical school has an unusually low attrition rate and its graduates traditionally gain entrance to residency programs of high quality throughout the country.

The faculty, which represents a variety of specialties and many strong research programs, has a national and international reputation for excellence in the biomedical sciences and clinical care. House staff officers who have teaching duties consistently receive commendation for their contribution to the educational program.

The medical school curriculum contains within its core and elective components the full spectrum of medicine. The curriculum provides sufficient structure to afford guidance, with flexibility to encourage initiative. An extensive elective program during the first two years gives students the opportunity to pursue individual interests. The curriculum provides traditional experiences in the various disciplines of medicine and offers students research opportunities for academic credit. To enrich and expand the student's understanding of patients and the context in which they experience illness and seek care, there are courses in such subjects as human development, human behavior, medical philosophy, medical ethics, medical history, death and dying, and human sexuality.

From the more than 3,400 applications received each year at the School of Medicine, approximately a hundred students are chosen for the first-year class. A hallmark of the School of Medicine admissions process is the personal attention to details by the administrative staff and the Admissions Committee. The involvement of more than a hundred faculty members in the interview and evaluation process reflects the importance placed on the selection process and leads to a personal interest in each applicant. An important part of the admissions process is the applicant's tour of the medical school facilities with a member of the student body as a guide.

The school seeks to attract qualified minority and disadvantaged students. This goal is based not only on a commitment to equal opportunity, but also on the belief that a diverse student population provides the best learning environment for all students.

Medical school is but the beginning of a continuing process. Following graduation from medical school, residency provides a period of further formal training in specialized areas of medicine. For the physician who aspires to a career in academic medicine, additional postdoctoral training in research is needed. The Vanderbilt program in medical education provides a sound basis for the physician graduate to enter any field of medicine. Vanderbilt's commitment to medical education as a lifelong pursuit is supported by programs of continuing education offered to alumni and to physicians practicing locally as well as those practicing in other parts of the country.

Mission of the School

The mission of the Vanderbilt University School of Medicine is:

- 1. To develop outstanding clinicians, scientists, and teachers in an environment that stimulates learning and discovery and cultivates empathy and compassion.
- 2. To advance the knowledge base of medicine by continuing our role as a leading research institution.
- To disseminate knowledge through continuing education of our students, graduates, faculty members, and colleagues.
- 4. To promote exemplary patient care and to serve our local and extended community.
- 5. To maintain our atmosphere of cooperation, collegiality, and mutual respect.
- 6. To recognize individuality and to foster personal growth of all who work and learn with us.

Education

The school's mission includes the education of physicians at all levels of their professional experience: medical school; postgraduate education, including basic science and clinical training; and continuing education for the practicing physician. The faculty seeks to provide students with the attitudes and background, based on sound biomedical science, to continue their education lifelong. At Vanderbilt, every medical student has access to examples of the highest standards of biomedical investigation and clinical practice. The desired end is a graduate who has been challenged and stimulated in as many areas of medicine as are feasible within the limits of a four-year course of study.

Patient Care

A teaching hospital and its associated outpatient facilities constitute a classroom for trainees based on high academic standards. The clinical facility also serves as a laboratory for clinical research. Faculty members, serving as role models for young physicians, teach the practice of exemplary patient care at all levels. Model programs of health care delivery, at primary, secondary, and tertiary levels, fulfill the school's responsibility for community service in its fullest context.

Research

In addition to teaching, members of the medical school faculty have a second and complementary responsibility to generate new knowledge through research. Exposure to an inquiring faculty sparks the spirit of inquiry in students. At Vanderbilt, research encompasses basic scientific questions, issues in clinical care, and problems related to the health care system itself. Vanderbilt is recognized as one of the leaders in research among medical schools in the United States.

History of the School

The first diplomas issued by Vanderbilt University were to sixty-one Doctors of Medicine in February of 1875, thanks to an arrangement that recognized the University of Nashville's medical school as serving both institutions. Thus, Vanderbilt embraced a fully-organized and functioning medical school even before its own campus was ready for classes in October of that year.

The arrangement continued for twenty more years, until the school was reorganized under control of the Board of Trust. In the early days, the School of Medicine was owned and operated as a private property of the practicing physicians who composed the faculty and received the fees paid by students—a system typical of medical education in the United States at the time. Vanderbilt made no financial contribution to the school's support and exercised no control over admission requirements, the curriculum, or standards for graduation. After reorganization under the Vanderbilt Board in 1895, admission requirements were raised, the course was lengthened, and the system of instruction was changed to include laboratory work in the basic sciences.

The famous report of Abraham Flexner, published by the Carnegie Foundation in 1910 and afterward credited with revolutionizing medical education in America, singled out Vanderbilt as "the institution to which the responsibility for medical education in Tennessee should just now be left." Large grants from Andrew Carnegie and his foundation, and from the Rockefeller-financed General Education Board, enabled Vanderbilt to carry out the recommendations of the Flexner Report. (These two philan-

thropies, with the addition of the Ford Foundation in recent years, have contributed altogether more than \$20,000,000 to the School of Medicine since 1911). The reorganized school drew upon the best-trained scientists and teachers in the nation for its faculty. The full benefits of reorganization were realized in 1925 when the school moved from the old South Campus across town to the main campus, thus integrating instruction in the medical sciences with the rest of the University. The school's new quarters were called "the best arranged combination school and hospital to be found in the United States."

Rudolph A. Light Hall, completed in 1977, is a sophisticated facility providing much-needed space for medical education and other student activities. The seven-story structure contains 209,000 square feet of space housing the latest in laboratory equipment, audio-visual and electronic teaching tools, and multi-purpose classroom space. The second floor student lounge is designed to foster medical student interaction and to permit informal educational experiences—leading to the development of physicians grounded in the sciences but enlightened by humanitarian interests and understanding. Light Hall is the physical manifestation of Vanderbilt University Medical School's ongoing commitment to excellence in all areas of medical education.

The Medical Research Building, completed in 1989, provides laboratories and academic space for pharmacology, biochemistry, and molecular physiology and biophysics. The eight-story building also houses the A. B. Hancock Jr. Memorial Laboratory for Cancer Research and the positron emission tomography (PET) scanner.

Objectives of the Program

1. Knowledge of the normal structure and function of the body and of each of its major organ systems.

2. Knowledge of the genetic, molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.

3. Knowledge of the various causes (e.g., genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of maladies and the ways in which they operate on the body (pathogenesis).

4. Knowledge of the altered structure and function (pathology and pathophysiology) of the body as seen in various diseases and conditions.

5. An understanding of the power and the principles of the scientific method in establishing the causation of disease and in assessing the efficacy of traditional and non traditional therapies.

6. The ability to obtain an accurate medical history that covers all essential aspects of the history, including issues related to age, gender, and socio-economic status.

7. The ability to perform both a complete and an organ system specific

examination, including a mental status examination.

- 8. Knowledge of the most frequent clinical, laboratory, imaging, and pathologic manifestations of common maladies.
- 9. The ability to interpret the results of commonly used diagnostic procedures.
 - 10. The ability to perform routine technical procedures.
 - 11. The ability to reason deductively in solving clinical problems.
- 12. The ability to construct appropriate diagnostic and therapeutic management strategies for patients with common conditions.
- 13. The ability to recognize and treat patients with life threatening emergencies.
- 14. The ability to communicate effectively, both orally and in writing, with patients, patients' families, colleagues, and others with whom physicians must exchange information.
- 15. Knowledge of the economic, psychological, social, and cultural factors that contribute to the development and/or continuation of maladies.
- 16. Knowledge of the epidemiology of common maladies within a defined population, and the systematic approaches useful in reducing the incidence and prevalence of those maladies.
- 17. The ability to identify factors that place individuals at risk for disease or injury, to select appropriate diagnostic tests, and to determine a rational therapeutic response.
- 18. The ability to retrieve (from electronic databases and other resources), manage, and utilize biomedical information for solving problems and making decisions.
- 19. Knowledge of the theories and principles that govern ethical decision making, and an understanding of their application in the solution of ethical dilemmas in medicine.
- 20. Knowledge of various approaches to the organization, financing, and delivery of health care.
- 21. Knowledge of the principles of medical research and critical evaluation of its significance.
- 22. Compassionate treatment of all patients, respect for their privacy and dignity, and an understanding of their needs and their families' needs at the time of death.
- 23. Honesty and integrity in all interactions with patients, patients' families, colleagues, and others with whom physicians must interact in their professional lives.
- 24. A commitment to provide care to patients who are unable to pay and to advocate for access to health care for members of underserved populations.
- 25. A commitment to advocate at all times for the interests of one's patients over one's own interests.
- 26. An understanding of, and respect for, the roles of other health care professionals, and of the need to collaborate with others in caring for individual patients and in promoting the health of defined populations.

- 27. An understanding of the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine.
- 28. The capacity to recognize and accept limitations in one's knowledge and clinical skills, and to acknowledge and rectify personal short comings that may result from those limitations.
- 29. A commitment to practice medicine in a scholarly manner based on an understanding of the need to engage in lifelong learning.
- 30. Commitment to achieve excellence in professional area(s) of individual interest.



Admission



Requirements for Entrance

Vanderbilt University School of Medicine seeks students with a strong background in both science and the liberal arts who will have the baccalaureate degree before matriculation. The Medical College Admission Test (MCAT) is required and used along with other observations to predict success in preclinical course work.

Applicants must present evidence of having satisfactorily completed the minimum requirements listed below. A semester hour is the credit value of sixteen weeks of work consisting of one hour of lecture or recitation or at least two hours of laboratory.

Biology. Eight semester hours, including laboratory, in either general biology, zoology, or molecular biology. Courses should deal with the structure and function of living organisms at the cellular and molecular level.

Chemistry. A minimum of 16 semester hours, 8 in general inorganic chemistry, including laboratory, and 8 in organic chemistry, covering aliphatic and aromatic compounds and including laboratory.

While a year of inorganic chemistry is designated, Vanderbilt will accept the additional 8 hours with lab in an upper level chemistry course(s) other than organic, especially if the student has placed out of the entry level course.

English and Composition. Six semester hours.

Physics. Eight semester hours, including laboratory. Quantitative laboratory work should be emphasized.

Advanced placement credits and pass/fail credits are not acceptable in lieu of science requirements. Advanced courses in the same discipline may be substituted for the traditional requirements when the applicant has placed out of the entry level course.

The faculty of the Vanderbilt University School of Medicine recognizes its responsibility to present candidates for the M.D. degree who have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. Candidates for the M.D. degree will ordinarily have the broad preliminary preparation to enter postgraduate medical education in any of the diverse specialties of medicine. All candidates for admission must possess sufficient intellectual ability, emotional stability, and sensory and motor function to meet the academic requirements of the School of Medicine without fundamental alteration in the nature of this program. The Assistant Dean, in consultation with the Admissions Committee of the School of Medicine, is responsible for interpreting these technical standards as they might apply to an individual applicant to the School of Medicine.

Recommendations for Entrance

A broad experience in non-science courses is encouraged, especially experience beyond the introductory course level in areas such as English, the humanities, the arts, and the social and behavioral sciences. A major in non-science courses does not affect selection.

Selection Factors

The Committee for Admissions seeks applicants who have demonstrated academic excellence and leadership qualities, with broad extracurricular experience. Experience in research and evidence of a concern for others are positive factors for selection.

The applicant's essay, letters of recommendation, and the interview are also important factors in the Committee's evaluation. Interviews are conducted at Vanderbilt and, for those applicants unable to travel to Nashville, regionally.

Medical College Admission Test

The Medical College Admission Test is given under the auspices of the Association of American Medical Colleges and is required of applicants to Vanderbilt. It is given twice a year at most universities and colleges. Since the examination score is used by medical schools in the selection of applicants, candidates should take the test in the spring prior to the time application is submitted, if possible. Results of the fall examination are acceptable, but will delay review of the application.

Application Procedure for Admission

As a convenience to the applicant, Vanderbilt University School of Medicine participates in the American Medical College Application Service. All application materials may be obtained on-line through AMCAS by going to http://aamc.org.

The Committee on Admissions evaluates the initial application received through the application service. Applicants receiving a favorable initial review are invited to be interviewed and to request letters of evaluation. Applications are received on-line by AMCAS any time after 1 June and before 15 October preceding an anticipated fall semester enrollment date. Vanderbilt participates in the Early Decision Program through the American Medical College Application Service.

Medical Scientist Training Program

One of the dual degree programs, the combined M.D./Ph.D. program is designed to develop investigators and teachers in the clinical and basic

medical sciences. Students in the program have the opportunity to study a basic biomedical science in depth and to do research in some phase of that subject while concurrently pursuing studies leading to the medical degree. This training develops the skills and techniques necessary for an experimental approach to problems in basic and clinical medical sciences. The program is designed for students aspiring toward careers in academic medicine and medical research.

The M.D./Ph.D. program fully meets the Vanderbilt University Medical School requirements for the Doctor of Medicine degree and Vanderbilt University Graduate School requirements for the Doctor of Philosophy degree. The combined degree program usually requires seven calendar years beyond the baccalaureate for completion. Although some saving of time is built into the program, there is no implication that the combined degree program circumvents, alters, or dilutes requirements for either the M.D. or the Ph.D. The intent is to profit optimally from the strengths of each school.

Admission to the Program

Those applying to the M.D./Ph.D. program should indicate as such on the AMCAS application to Vanderbilt University School of Medicine and-complete the Medical Scientist Training Program section of the secondary application to Vanderbilt University Medical School. Applications to the program are reviewed by the Faculty Advisory Committee for the Medical Scientist Training Program Committee. Applicants must be accepted into Vanderbilt University Medical School and into Vanderbilt University Graduate School upon recommendation of the Medical Scientist Training Program Committee. In exceptional circumstances, late applications to the program will be received from applicants who have already been accepted into the Medical School. Students who have completed no more than two years in medical school may also apply for admission to the combined degree program.

Upon enrollment in the M.D./Ph.D. program, students are assigned to faculty and student advisers. During their first semester, they become familiar with Ph.D. study and research activities of the affiliated graduate programs: Biochemistry, Bioinformatics, Biological Sciences, Biomedical Engineering, Cancer Biology, Cell and Developmental Biology, Microbiology and Immunology, Molecular Physiology and Biophysics, Neuroscience, Pathology, and Pharmacology.

Following the orientation program, but before the end of their second year in medical school, M.D./Ph.D. students must select and be accepted into the graduate program of an affiliated department or program. M.D./Ph.D. students work closely with their assigned faculty and student advisers in all matters related to enrollment, registration, course selection, and scheduling. The usual course of study is divided into several phases. The first phase consists of the first two years of medical school, devoted largely to the basic biomedical sciences. Students then enter the graduate

school (Ph.D.) phase of the program after the second year of medical school. During this second semester, the student meets the Graduate School requirements for the completion of the Ph.D. degree. The third phase consists of the core clinical clerkships of the third year and the elective and selective clinical rotations of the fourth year of medical school.

Requirements for the Ph.D. degree are set out in detail in the *Bulletin of Vanderbilt University: Graduate School Catalog.* Briefly stated, Ph.D. students must complete 72 hours of graduate work for credit, of which a minimum of 24 hours is required in formal course and seminar work. Ph.D. students must also complete a qualifying examination to test their knowledge of their field of specialization and present an acceptable dissertation in the major field of study.

M.D./Ph.D. students are encouraged to begin courses for graduate school credit and to select a preceptor to supervise their dissertation research as soon as possible. They are also encouraged to undertake research at an early stage, including the summer prior to matriculation. Certain Graduate School courses may be taken as part of the elective program in the Medical School and be applied toward formal course work requirements for the Ph.D. degree. The M.D./Ph.D. student must be officially enrolled in any one semester in either or both the Medical and Graduate schools to ensure appropriate assignment of credits. Students must complete all course work and the research, writing, and defense of the Ph.D. dissertation before entering the third phase of the program.

Financial Support

Special funding (tuition and stipend) is available for those who gain admission to the Medical Scientist Training (M.D./Ph.D.) Program.

The limitations of financial support create a competitive situation in the selection process. Candidates are urged to submit their application to the M.D./Ph.D. program as early as possible. In accepting financial support for the program, the student agrees to promote primary effort to M.D./Ph.D. studies, and further agrees not to undertake concurrently any other gainful employment or effort without formal approval of the Medical Scientist Training Program Committee and the Medical School officers responsible for the M.D./Ph.D. program.

In general, financial support is arranged by mutual agreement of the Medical Scientist Training Program Committee, the Dean of the Medical School and, in certain instances, the chair of the graduate department involved. Various sources of funds are available with different application requirements, restrictions, obligations, and levels of support. Some potential sources for support available to the student include the following:

Vanderbilt Medical Scientist Scholarship Programs. Currently there are several sources of funding available in support of the scholarship awards, a privately endowed program and a special allocation of funds by the School of Medicine. These programs pay tuition and fees and provide a

competitive stipend. Once awarded, support from these scholarships will continue, contingent upon satisfactory performance, until the M.D. degree is awarded.

National Research Service Award. Financial support is available through an institutional grant awarded to Vanderbilt University Medical School by the National Institute of General Medical Sciences. The support pays tuition at the current level, provides a stipend (plus a Medical School supplement) per year, and includes funds for fees and related expenses. As with all federal funding, support is guaranteed for only one year at a time, since all federal funds are reviewed and funded annually. Generally, funds are renewed and support is continued.

Departmental Support. Limited resources are available through graduate departments. Tuition awards are available as well as some stipend support either from federal training grants or research funds. Interested students should request from their faculty adviser or department chair specific information on the availability of this type of support.

Personal Support. This refers to the student's own resources or sources of funds. Approved students for the Medical Scientist Training Program who do not receive financial support from any of the above sources may remain in the joint program at their own expense. Although not guaranteed, financial support can usually be obtained for the graduate phase of the M.D./Ph.D. program.

Other Joint Degree Programs

M.D./J.D. Joint Degree Program

This describes the features of a joint M.D./J.D. degree. Such a degree, with its potential to attract outstanding students to both programs, will benefit both the Vanderbilt University School of Medicine and Vanderbilt Law School. It offers an excellent opportunity to enhance the collaboration between these two programs.

Students must apply to each program separately and be accepted by both programs to pursue the joint degree. Ideally, students will apply for joint degree status before enrolling in either program. However, Medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school. Law students who apply to the medical school during their first year in the law program may also be considered for the joint degree.

Joint degree students will complete both degrees in six years, saving one year in school, as medical school ordinarily takes four years and law school takes three.

M.D./M.S. in Biomedical Engineering

This describes the features of a joint M.D./M.S. program in biomedical engineering degree. Such a degree, with its potential to attract outstanding students to both programs, will benefit both the Vanderbilt University School of Medicine and Vanderbilt's Biomedical Engineering Department in the School of Engineering. It offers an excellent opportunity to enhance the collaboration between these two programs.

Students must apply to each program separately and be accepted by both programs to pursue the joint degrees. Ideally, students will apply for joint degree status before enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school.

Joint degree students will complete both degrees in five years, saving one year in school, since ordinarily medical school takes four years and the M.S. in biomedical engineering two years.

M.D./M.S. in Biomedical Informatics

This describes the features of a joint M.D./M.S. program in biomedical informatics program. Such a degree program, with its potential to attract outstanding students to both schools, will benefit both the Vanderbilt University School of Medicine and Vanderbilt's Biomedical Informatics Department. It offers an excellent opportunity to enhance the collaboration between these two programs.

Students will apply to each program separately and must be accepted by both programs to pursue the joint degree. Ideally, students will apply for joint degree status prior to enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school.

Joint degree students will complete both degrees in six years, saving one-half year in school, since medical school ordinarily takes four years and the M.S. in biomedical informatics two and one-half years.

M.D./M.Div. and M.D./M.T.S.

This describes the features of joint degrees of the Medical School and the Divinity School. The M.D./M.Div. and M.D./M.T.S. degrees represent the Medical Doctorate and the Master of Divinity and Master of Theological Studies. These joint degree programs provide the potential to attract outstanding students to both schools and will benefit both the Vanderbilt University School of Medicine and Vanderbilt Divinity School. This offers an excellent opportunity to enhance the collaboration between these two schools.

Students must apply to each school separately and be accepted by both to pursue the joint degree. Ideally, students will apply for joint degree status before enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school. Divinity students who apply to the medical school during their first year in the divinity program may also be considered for the joint degree.

Students with interest in medical and divinity degrees will have the op-

portunity to enroll in one of two joint degree programs.

The M.D./M.Div. (M.D./Master of Divinity) joint degree program will take a total of six years for completion. This saves one year as the M.D. degree ordinarily takes four years and the Master of Divinity takes three. The Master of Divinity is a professional degree and prepares students for the practice of ministry. This program has a required field education component as part of the Master of Divinity degree requirements. In this program students will carry 15 credit hours per semester while in the Divinity School.

M.D./M.S. in Computer Science

This describes the features of a joint M.D./M.S. in computer science degree program. Such a degree program, with its potential to attract outstanding students to both schools, will benefit both the Vanderbilt University School of Medicine and Vanderbilt's Computer Science Program in the School of Engineering. It offers an excellent opportunity to enhance the collaboration between these two schools.

Students must apply to each program separately and be accepted by both programs to pursue the joint degrees. Students must meet requirements of each program for admission. Ideally, students will apply for joint degree status prior to enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school.

Joint degree students will complete both degrees in five years, saving one year in school, since medical school ordinarily takes four years and the computer science program two years.

M.D./M.Ed. Program

This describes the features of a joint degree program leading to completion of both the M.D. and M.Ed. degrees in five years. Such a program, with its potential to attract outstanding students, would benefit both the School of Medicine and Peabody College of Education and Human Development. It offers an excellent opportunity to enhance the collaboration between these two schools.

Education is an integral part of medicine. The word doctor comes from the Greek and means teacher. Whether a student chooses a career in research or clinical practice, there always will be a need to teach students, patients, and colleagues. Students who choose this program may be interested in patient education or in a career in an academic center working in medical education. They also may be interested in leadership positions at the national level that interface with health policy and education. Education will be a large part of prevention in future medical practice.

Students must apply to the M.D. and M.Ed. programs separately and be accepted by both programs to pursue the joint degree. Ideally, students will apply for joint degree status before enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the School of Medicine. Peabody students may apply for admission to the M.D. program during their first year in the master's program.

Joint degree students will complete both degrees in five years, saving on year in school, as medical school ordinarily takes four years and the Peabody program two years.

M.D./M.P.H. Program

This describes the features of joint the M.D./M.P.H. degree program. Such a program, with its potential to attract outstanding students interested in public health and medicine, will benefit the educational program of the School of Medicine.

Students must apply to each program separately and be accepted by both programs to pursue the joint degree. Medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school. An important component of the M.P.H. program is a mentored research investigation, which assumes a degree of student independence typically associated with fellowship or junior faculty status. Thus, acceptance into the M.P.H. program will be restricted to students who exhibit this capacity and will require pre-identification of a qualified faculty member willing to serve as the student's mentor.

Joint degree students will complete both degrees in five years, saving one year in school, since medical school ordinarily takes four years and the M.P.H. program two years.

M.D./M.B.A. Program

This describes the features of a joint M.D./M.B.A. degree program. Such a program, with its potential to attract outstanding students to both schools, will benefit both the Vanderbilt University School of Medicine and Vanderbilt's Owen Graduate School of Management. It offers an excellent opportunity to enhance the collaboration between these two programs.

Students must apply to each program separately and be accepted by both programs to pursue the joint degree. Ideally, students will apply for joint degree status prior to enrolling in either program. However, medical students may elect to apply for admission to the joint degree program at any time during their first three years in the medical school. Owen students who apply to the medical school during their first year in the M.B.A. program may also be considered for the joint degree program.

Joint degree students will complete both degrees in five years, saving one year in school, since medical school ordinarily takes four years and the Owen program two years. The first three years are spent in medical school. Students spend their fourth year at the Owen School and then spend the fall semester of year five in medical school and the spring semester of year five at the Owen School.

Single Degree Programs

M.S. in Clinical Investigation

Candidates for the Master of Science in clinical investigation will be physicians who have completed the clinical requirements for Board eligibility in their primary specialty. Full-time Vanderbilt faculty members may apply to the program with the consent of their department chair. Post-doctoral Ph.D.s who anticipate a career in patient-oriented research will also be considered.

Candidates should submit an application that includes biographical information, references, career goals, and a specific proposal for a patient-oriented research project. The research proposal must identify the candidate's proposed mentor. Applications will be judged on the quality of the science proposed, on the commitment of the mentor to the career development of the candidate, and on the overall impact of the training program on the applicant's career development. The proposals will be evaluated on the following criteria:

- Proposals must outline patient-oriented research that is hypothesisdriven and mechanistic.
 - Performance of the project must be feasible within a two-year period.
- Project mentors must have extra-mural research grant funding that is assured for the duration of the project.

In addition, sponsoring departments will be expected to guarantee that 80 percent of the candidate's professional time will be devoted to the M.S. in clinical investigaton program.

The Master's program is two years and comprised of the following elements:

The core of the Master's of Science in clinical investigation program is the completion of a mentored research project. The research must be patient-oriented and involve direct measurements on patient-derived samples or the use of investigational therapeutic or diagnostic techniques. The mentor must be an established physician-scientist with experience in patient-oriented research. Use of the Vanderbilt University General Clinical Research Center will be encouraged. The research project will account for 80 percent of the candidate's commitment to the program.

Candidates will complete didactic courses covering the essentials of study design, biostatistics, ethics, drug development, and data analysis. It is expected that course work will comprise 20 percent of the candidate's time commitment. Core courses will be provided in two formats: intense courses that meet three hours each day (e.g., 7 a.m. to 10 a.m.) for four weeks, and courses that can be offered less intensively (2–4 hours a week for several months). Many of the proposed courses will be taken in conjunction with candidates in the Master in Public Health program. The course schedule is designed to maximize protected time for patient-oriented research.

In addition to the formal curriculum, a monthly seminar series "Careers in Clinical Research" will permit candidates to meet successful patient-oriented researchers. Topics of discussion will include academic "rules of the road," time management, promotion/tenure issues, grants management, and overall program evaluation. Candidates will hone their scientific communication skills through an annual presentation at this forum. The directors will host social functions with the candidates, clinical investigators, mentors, and visiting scientists.

Candidates will be expected to complete a Master's thesis based on their research project. This thesis will be due in the Spring of the second year. Successful completion of the thesis requirement will be evaluated by a thesis committee, comprised of the trainee's mentor and two other members selected by the candidate, the mentor and the directors of the M.S.CI. A completed grant proposal, submitted for a federal or major foundation grant, could serve in lieu of a thesis. Candidates whose thesis or grant is judged inadequate by the committee will be given a discrete time period in which to correct any deficiencies.

Master of Public Health Degree

The Master of Public Health (M.P.H.) is a two-year program offered by the Department of Preventive Medicine that is designed for physicians and other health care professionals at a comparable level. The primary objective of the program is to provide training in the methods of assessment of clinical outcomes in populations or samples of humans. The program includes four intensive didactic sections and a supervised project resulting in a paper for submission to the biomedical literature.

Doctor of Audiology

The professional doctorate of audiology (Au.D.) is a four-year post-baccalaureate degree offered by the Department of Hearing and Speech Sciences, Vanderbilt Bill Wilkerson Center for Otolaryngology, and Communication Sciences. The program is designed for individuals who wish to practice the profession of audiology. The program includes three years of traditional coursework and practicum rotations, followed by a fourth year of concentrated clinical experiences. In addition to 78 hours of coursework, the seven hearing clinics operated by the department afford students with 2500 hours of supervised clinical practicum over the four-year period. Students also participate in a guest lecture series and obtain educational opportunities through other departments within the School of Medicine (e.G., clinical rotations, continuing medical educational courses, seminars, and teaching conferences). The program meets the new educational standards set forth by the American Speech-Language-Hearing Association.

Students with backgrounds in such areas as communication disorders and other health related professions, biomedical sciences, psychology, and psycholinguistics are encouraged to apply. All students must possess GRE scores consistent with Vanderbilt's standards; a strong record of past academic achievement; a commitment to hearing health care; excellent oral and written skills; a willingness to work collaboratively; a strong work ethic; perseverence; and organizational and time management skills.

Visiting Medical Students

Visiting student status may be afforded students from medical schools accredited by the Liaison Committee on Medical Education or from a limited number of foreign schools with which Vanderbilt maintains exchange programs.

Visiting students from osteopathic medical schools must request an application from the department in which they wish to do course work (if class space is available) and gain departmental approval before being considered by the Office of Student Records.

Visiting students are permitted registration for course work in the Medical School (if class space is available) with approval of the appropriate department and with concurrence of the course instructor and the Associate Dean for Medical Students. Visiting students must present evidence of adequate professional liability coverage and health insurance coverage and pay a registration fee when registering for course work. Completed applications must be received in the Office of Student Records at least eight weeks before the start date of the course. Upon arrival at Vanderbilt Medical School, all visiting students are required to take part in an orientation, including a Bloodborne Pathogen Training Session. Since visiting students have no status for credit as Vanderbilt medical students, they are not issued credit from Vanderbilt for their experience, nor do they establish a medical-school-based record at Vanderbilt. The normal opportunities and prerogatives of regularly enrolled medical students are not available to visiting students. The visiting student is subject to all regulations of the University as well as to any special regulations relating to visiting student status as determined by the department, the course instructor, or the Dean or the Dean's deputy.



The Academic Program

HE curriculum is divided into required courses taken by all students and elective courses taken at the choice of the individual student. Required courses constitute the nucleus of medical education at Vanderbilt; elective courses are an integral part of each student's educational experience in the Medical School, providing considerable flexibility for individual programming. Students develop an elective program to meet individual needs with the help of the faculty and the approval of the Associate Dean for Medical Students or a designee.

All electives are courses for credit. Electives in the first and second years are graded as Pass or Fail; electives and selectives in the third and fourth years are graded on the same basis as required courses. The format for electives includes lecture or seminar series, specialty clinics, clinical clerkships, or research experiences at Vanderbilt or other approved institutions; and, in special circumstances, Vanderbilt undergraduate or graduate courses may be counted as electives.

The Medical School curriculum in the preclinical years is organized on a semester basis. Students are encouraged to participate in a summer research or community service experience.

The curriculum is under constant review by both faculty and students, and is subject to timely change as recommended by the Academic Programs Committee and approved by the Executive Faculty.

Major Courses

First Year

Biochemistry, gross anatomy, physiology, cell and tissue biology, microbiology and immunology, human behavior, ecology of health care, and introduction to biomedical research. Monday, Wednesday, and Friday afternoons are reserved for electives. Electives available to the first-year student cover a wide range of subjects, including alcohol and drug abuse, human sexuality, death and dying, cancer biology, emergency medical services, legal medicine, medicine in the community, medical ethics, introduction to problem solving, and a clinical preceptorship program.

Second Year

Pathology, neurobiology, pharmacology, nutrition, genetics, radiology, preventive medicine, psychiatry, laboratory diagnosis, and physical diagnosis. During the second semester, all the clinical departments cooperate in providing an introduction to history taking and the physical examination through a series of lectures, demonstrations, small group sessions, and individual student work with patients. A variety of elective courses or independent study electives may be taken on Wednesday and Friday afternoons and also on Monday afternoons in the fall semester or Tuesday afternoons in the second half of the spring semester.

Third Year

Medicine, obstetrics and gynecology, pediatrics, surgery, psychiatry, and neurology. Required clerkships are scheduled primarily during the third year. Students are assigned to clerkship rotations by a computer program that optimizes their prospects of obtaining their preferred sequence.

Students have close contact with selected patients under the supervision of attending physicians and house staff.

Students have the option of starting the required clerkships at different times, beginning in early July. All students are required to complete the ten-week clerkships in medicine and surgery and two of the eight-week clerkships (obstetrics/gynecology, pediatrics, or psychiatry/neurology) no later than June of their third year. Ordinarily, all required core clerkships are completed by the end of August of the fourth year, but students may defer the final core clerkship to a later time in order to pursue research or other special educational opportunities with the approval of the Associate Dean for Medical Students.

Fourth Year

Clinical selectives and electives in basic science and/or clinical areas. The fourth year is divided into four week academic units. The flexibility of the fourth-year curriculum gives the student maximum opportunity for individual development. Eight full academic units must be completed, including one unit in primary care, one in emergency medicine, and two inpatient selective clerkships.

FIRST YEAR, FALL SEMESTER. FIRST HALF							
HOURS	MON	TUES	WED	THURS	FRI	SAT	
8–9			Dia alaasa				
9–10	Biochem	Gross	Biochem	Gross	Biochem		
10–11		Anatomy	Psych	Anatomy	Biochem		
11–12	Ecology		. 5,5				
12–1							
1–2			I.B.R.		Gross Anat		
2–3	Electives	Gross		Gross	GIOSS ATIAL		
3–4	Electives	Anatomy	Electives	Anatomy			
4–5					Electives		

FIRST YEAR, FALL SEMESTER. SECOND HALF						
HOURS	MON	TUES	WED	THURS	FRI	SAT
8–9			Biochem			
9–10	Biochem	Gross	Biodriem	Gross	Biochem	
10–11		Anatomy	Psych	Anatomy	Biodrioin	
11–12	Ecology		-			
12–1						
1–2			I.B.R.			
2–3	Electives	Gross		Gross	Electives	
3–4		Anatomy	Electives	Anatomy	Licotivos	
4–5						

FIRST	FIRST YEAR, SPRING SEMESTER							
HOURS	MON	TUES	WED	THURS	FRI	SAT		
8–9	Physiol	Physiol			Physiol			
9–10			Micro	Physiol				
10–11	Cell	Micro			Cell			
11–12	Biology			Micro	Biology			
1–2					Physiol			
2–3		I.B.R.	Electives					
3–4	Electives	1.0.11.	Licotivos	I.B.R.	Electives			
4–5								

SECOND YEAR, FALL SEMESTER						
HOURS	MON	TUES	WED	THURS	FRI	SAT
8–9					Radiology	
9–10	Pathology	Neuro-	Pathology	Neuro-		
10–11		Science	cience So	Science	Pathology	
11–12						
12–1						
1–2						
2–3	Electives	Pathology	Electives	Psychiatry	Electives	
3–4			210011100			
4–5		C.P.C.				

SECO	SECOND YEAR, SPRING SEMESTER, Weeks 1 through 8						
HOURS	MON	TUES	WED	THURS	FRI	SAT	
8–9	Dharm		Dharm	Pharm	Pharm		
9–10	Pharm	Physical	Pharm				
10–11	Lab Diag.	Diagnosis	Diagnosis	Lab	Lab	Lab	
11–12	Nutrition		Diagnosis	Diagnosis	Diagnosis		
12–1							
1–2							
2–3	Physical &	Electives & Independent Study	cal &	Electives &	Physical Diagnosis	Electives &	
3–4	Diagnosis		Independent Study		Independent Study		
4–5							

SECOND YEAR, SPRING SEMESTER, Weeks 10 through 13									
HOURS	MON	TUES	WED	THURS	FRI	SAT			
8–9	Pharm		Pharm	Pharm	Pharm				
9–10	THAITH	Physical							
10–11	Prev. Med.	Diagnosis	Diagnosis	Diagnosis	Diagnosis	Genetics	Preventive	Preventive	
11–12	Nutrition			Medicine	Medicine				
12–1									
1–2									
2–3	Physical	Electives &	Electives &	Physical	Electives &				
3–4	Diagnosis	Independent Study		maoponaoni	Independent Study	Diagnosis	Independent Study		
4–5									

SECOND YEAR, SPRING SEMESTER, Weeks 14 through 18

HOURS	MON	TUES	WED	THURS	FRI	SAT
8–9			Dle e use	Pharm	Pharm	
9–10	Pharm	Physical	Pharm	THAITH	i iiaiiii	
10–11	Prev. Med.	Diagnosis	Genetics	Preventive	Preventive	
11–12	Genetics		Genetics	Medicine	Medicine	
1–2						
2–3	Physical	Electives &	Electives &	Physical	Electives &	
3–4	Diagnosis	Independent Study	Independent Study	Diagnosis	Independen t Study	
4–5						

THIRD AND FOURTH YEARS—FIRST HALF

o -								
/ 15 Dec	Elective	Ob/Gyn	Psych/Neuro	Pediatric		as a		
ct 20 Nov	Elective	/90	Psych	Ped	Surgery	Medicine		
23 Oct								
	Elective							
25 Sept		/Neuro	Pediatric	Ob/Gyn				
	Elective	Psych/Neuro	Psych	Psycl	Elective Psyc	/q0	Medicine	Surgery
28 Aug								
ULY _	Elective Elective Pediatric	3yn	Neuro					
30 JULY		Pedi	Ob/Gyn	Psych/Neuro				
3 July			Elective					

Clerkships

8 weeks	8 weeks	8 weeks
Pediatrics	Ob/Gyn	Psych/Neuro
	10 weeks	10 weeks
•	Medicine	Surgery

(The medicine and surgery clerkships and two of the 8-week clerkships must be completed by July 1 of the fourth year.)

THIRD AND FOURTH YEARS—SECOND HALF

29 Jan		26 Feb 26	26 March 30 /	30 April 28 May	2 July
	Elective	Elective	Elective	Elective	Elective
	Ob/Gyn				
Ob/Gyn	(ЭӨ	Pediatric	Psych/Neuro	Neuro
Ne	Psych/Neuro	70	Ob/Gyn	Pediatric	atric
≥	Medicine		Surgery		
	Surgery		Medicine		

Selectives

Emergency Medicine 4 weeks
Primary Care 4 weeks
Medical Group 4 weeks
Surgical Group 4 weeks

Electives

A minimum of four additional units of four weeks duration each. Note: The calendar shows the times during which 10- and 8-week clerkships are scheduled. Most selectives and electives are offered during the 4-week elective units.

Advanced Training

In addition to its primary responsibility of educating medical students, the School of Medicine has active programs for graduate students in the preclinical sciences, for postdoctoral interns and residents, and for postdoctoral research trainees.

Residency Training

Students preparing for the practice of medicine usually spend three or more years in house staff training. Such experiences at Vanderbilt are particularly varied and well supervised. Applicants for positions are carefully chosen because of the competition for positions. As a result, the house staff makes up a competent and stimulating group, with considerable responsibility in medical student teaching.

The faculty of the School of Medicine has professional responsibilities at Vanderbilt, Veterans, Saint Thomas, and Baptist hospitals. Patients in these hospitals are cared for by members of the medical staff, assisted by the intern and resident staff.

Vanderbilt University Hospital is a referral center and consequently has a patient population with complex medical and surgical problems. The Veterans Administration Hospital, adjacent to the Vanderbilt Medical Center, serves veterans and their families from throughout the mid-south and is an important component of the teaching program. All physicians at the VA Hospital are full-time faculty members of the School of Medicine.

Post-Residency Fellowships

Postdoctoral training programs have as their goal the training of physicians for practice and certification in a medical subspeciality. Fellows admitted to these programs must have completed an approved residency program. The fellow is expected to participate in departmental activities related to teaching, clinical services, and research.

Continuing Medical Education

Vanderbilt University School of Medicine and Vanderbilt University Medical Center recognize a major commitment to the continuing education of physicians and others in the health professions. The School of Medicine views medical education as a continuum initiated in the undergraduate phase, progressing through graduate medical education, and maturing in ongoing continuing medical education. The professional life of the physician and all health professionals should include activities encompassing this view, with the goal of improving health care for patients. Under the auspices of the Division of Continuing Medical Education, the

School of Medicine offers a broad spectrum of courses throughout the year to meet the needs of physicians in practice and other health professionals. Inquiries should be directed to the Division of Continuing Medical Education.



Academic Regulations

ANDERBILT students are bound by the Honor System inaugurated in 1875 when the University opened its doors. Fundamental responsibility for the preservation of the system inevitably falls on the individual student. It is assumed that students will demand of themselves and their fellow students complete respect for the Honor System. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given by the student in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are specifically prohibited under the Honor System. The system applies not only to examinations but also to written work and computer programs submitted to instructors. The student, by registration, acknowledges the authority of the Student Honor Council of the School of Medicine.

The University's Graduate Student Conduct Council has original jurisdiction in all cases of non-academic misconduct involving graduate and professional students.

The *Student Handbook*, available at the time of registration, contains the constitution and bylaws of the Honor System and the Honor Code, as well as an explanation of the functions of the Honor System.

Requirements for M.D. Degree

Candidates for the Doctor of Medicine degree must be mature and of good moral character. They must have spent at least four years of study or its equivalent as matriculated medical students at an accredited medical school. Students accepted with advanced standing must complete at least the last two years in the Vanderbilt University School of Medicine. All students must have satisfactorily completed the medical curriculum, have passed all prescribed examinations, and have no outstanding unpaid balances with the University other than sanctioned educational loans. Students fulfilling these requirements will be recommended for the degree Doctor of Medicine.

Advisers

The Vanderbilt Medical School has one of the lowest attrition rates in the country. The faculty and administration take an active interest in assuring that each student achieves to maximum capability. Advisers, both student and faculty, and staff members of the office of the Dean are available to assist students toward successful development of their plans.

Licensure

The school does not require students to take the United States Medical Licensing Examination (USMLE) for promotion or graduation, but it is required for licensure. Students ordinarily will take Step 1 at the end of the second year and Step 2 in the fourth year. Step 3 is taken after graduation. All three steps must be passed to obtain a license to practice medicine. The school does not use test scores to determine promotion or graduation.

Grading and Promotions

Successful completion of the courses of the medical curriculum and scholastic standing are determined by the character of the student's daily work; the results of examinations, which may be written, oral, or practical; and observation of the student in action. The medical school curriculum builds progressively on the course work of each previous academic year. The courses of each subsequent year require increasing levels of coordination and integration of the material previously presented. Thorough knowledge and understanding of each subject and an appropriate level of skills are therefore required for satisfactory progress to be maintained in the medical curriculum.

Grades

The summative evaluation of academic performance for each course is reported on the following basis:

Honors (H): superior or outstanding work in all aspects (second, third, and fourth years.

High Pass (HP): completely satisfactory performance in all aspects, with some elements of superior work (third and fourth years).

Pass (P): completely satisfactory performance in all aspects (all years). Marginal Pass (P*): marginal performance, to be reviewed by the Promotion Committee and course directors. Not to be recorded on the official transcript. After discussion and/or remedy, the grade will be changed to either Pass or Fail.

Fail (F): unsatisfactory performance (all years).

Electives in the first and second year are graded on a Pass or Fail basis. Exemplary or inadequate performance in these electives will be documented by supporting narrative evaluations. Electives and selectives in the third and fourth years are graded on the same basis as required courses.

Student Grievances Concerning Grades

Students should seek redress of a problem with a grade as soon as possible after receiving the grade and in no case later than six months after

the event. Students with a problem should confer directly with the course director. Every effort should be made to resolve the problem fairly and promptly at this level.

If the student cannot resolve the problem through discussion with the course director, he or she should bring the problem, within two weeks of talking with the course director, to the attention of the Associate Dean for Medical Students, who will seek to resolve the problem. If resolution is still not achieved, the Associate Dean will make a recommendation to the Dean, which will be accompanied by commentary on the recommendation by the relevant department chair. The Dean will make the final decision.

Promotion

Promotion Committees of the faculty, in consultation with representatives of the departments responsible for instruction, are charged with making recommendations to the Dean, and the Executive Faculty regarding progress and promotions of students in each class. The Executive Faculty of the School of Medicine has final responsibility for the determination of medical student progress in the school. Decisions on the progress of students during the first two years are ordinarily made at the end of each academic year. In view of the integrated nature of the curriculum in the final two years, no specific decisions on promotion from the third to the fourth year are made. Decisions on the progress of students during these final two years, however, may be made at any time as academic performance may dictate. Ordinarily, decisions for graduation will be made shortly before commencement in the final year.

The committees recommend for promotion those students who have demonstrated appropriate personal behavior and the knowledge, understanding, and skills consistent with faculty expectations at their particular stage of professional development.

The school's academic program is predicated upon providing students an academic environment conducive to successful achievement. Occasionally, however, the outcome is unsuccessful. The Promotion Committees will review the performance of students with deficiencies and make recommendations concerning their progress.

Students who have marginal) grades in two or more courses in a single academic year will undergo special review by their Promotion Committee. In light of the student's complete academic record, the committee may recommend promotion, promotion on probation, repetition of all or part of the academic year, or withdrawal from school. Ordinarily, a student with marginal performances in required preclinical courses accounting for more than half of the scheduled required course hours in a single academic year can expect to repeat an academic year or to withdraw from school. Students who deliver marginal performances in more than two required clerkships can expect to have their progress delayed in order to complete remedial work or to withdraw from school.

Students who fail in a course, whether required or elective, will be required to remedy the failure before being permitted to enter the courses of the next academic year. Credit may be given on the basis of re-examination or satisfactory repetition of the course work, but failures will remain on the record and may be counted as cause for dismissal if additional failure occurs. Students who fail in two courses or fail a re-examination or course repetition may be required to withdraw from the school.

Promotion Committees will ordinarily recommend that students be placed on academic probation if their course work includes any failures or is generally of marginal character. Students placed on academic probation who do not perform in a satisfactory manner during the subsequent academic year will be dismissed from school unless there are mitigating circumstances approved by the Dean. Students on probation may be withdrawn from school if their academic performance continues at a marginal level, even though there may be no recorded failures. Promotion Committees may recommend removal of probationary status when a student has demonstrated a continuing record of satisfactory performance in the succeeding units of study.

Students who are shown by work or conduct to be unfit for the practice of medicine may be required to withdraw from the school at any time.

Extracurricular Work

The Medical School does not regulate the outside work of its students, although it does take the firm position of discouraging outside work. No outside commitments may be assumed by medical students that may compromise their responsibilities at the Medical School. If the outside obligation is considered prejudicial, the student may be required to discontinue it.

Leave of Absence

A leave of absence may be granted by the Associate Dean for Medical Students for a period not to exceed one year for purposes of approved studies, recuperation from illness, or other special circumstances. Should it be necessary for a student to be absent for a period of more than one calendar year, the student must make formal reapplication and be reconsidered by the Admissions Committee, unless special approval is given by the Associate Dean for Medical Students for a more extended leave.

Commencement

The University holds its annual Commencement ceremony following the spring semester. Degree candidates must have completed successfully all curriculum requirements and have passed all prescribed examinations by the published deadlines to be allowed to participate in the ceremony. A student completing degree requirements in the summer or fall semester will be invited to participate in Commencement the following May; however, the semester in which the degree was actually earned will be the one recorded on the diploma and the student's permanent record. Students unable to participate in the graduation ceremony will receive their diplomas by mail.





Chairs, Professorships, and Lectureships

Chairs and Professorships

RUTH AND R. BENTON ADKINS JR. CHAIR IN SURGERY. This chair will reflect the life-long commitment to surgical excellence as exemplified by longtime faculty member R. Benton Adkins. Dr. Adkins, a professor of surgery and of cell biology, joined the Vanderbilt faculty in 1964. He is a member of the Vanderbilt School of Medicine Class of 1958.

THE BEN J. ALPER CHAIR IN RHEUMATOLOGY. Dr. Alper, a 1949 graduate of Vanderbilt University School of Medicine, and his wife, Phyllis, provided for the establishment of this chair in 1995. The chair will support research and clinical care in rheumatology.

THE THEODORE R. AUSTIN CHAIR IN PATHOLOGY. This chair was established in memory of Dr. Austin, a pathologist who practiced in Alexandria, Virginia. He was an alumnus of Vanderbilt Medical School. The chair was established by his wife, Mrs. Dorothy B. Austin.

THE OSWALD T. AVERY PROFESSORSHIP IN MICROBIOLOGY AND IMMUNOLOGY. Established in 1989, this professorship honors Dr. Oswald T. Avery, a Nashvillian and faculty member of the Vanderbilt University School of Medicine who was a leader in understanding of the composition and significance of DNA.

THE ALLAN D. BASS CHAIR IN PHARMACOLOGY. Funded in large part by a gift from an anonymous donor, this chair supports scientific development in pharmacology. Allan D. Bass, chairman of the Department of Pharmacology from 1953 to 1972, was instrumental in establishing pharmacology as an independent research discipline.

THE BETTY AND JACK BAILEY PROFESSORSHIP IN CARDIOLOGY. Through the generosity of Betty and Jack Bailey, this gift was made in support of a professorship in the Division of Cardiology as a tribute to a distinguished physician, Dr. F. T. Billings, Jr.

THE ALLAN D. BASS CHAIR IN PHARMACOLOGY. Funded in large part by a gift from an anonymous donor, this chair supports scientific development in pharmacology. Allan D. Bass, chairman of the Department of Pharmacology from 1953 to 1972, was instrumental in establishing pharmacology as an independent research discipline.

THE MELINDA OWEN BASS CHAIR IN MEDICINE. In 2002, it was agreed that monies from the Owen Fund for Pulmonary Research would be used to establish this chair in honor of Mrsl Bass and her family's many contributions to medical research at Vanderbilt.

THE CHARLES H. BEST PROFESSORSHIP IN DIABETES RESEARCH. This professorship is named for Dr. Charles H. Best, who was involved in the isolation of insulin and its initial use in the treatment of diabetes.

F. TREMAINE BILLINGS PROFESSORSHIP IN MEDICINE AND PHARMACOLOGY. This professorship recognizes the many and varied accomplishments and contributions from F. Tremaine "Josh" Billings, M.D., who joined the Vanderbilt faculty in 1941 and presently serves as professor of medicine, emeritus.

THE JAMES G. BLAKEMORE CHAIR IN PSYCHIATRY. Through the generosity of James G. Blakemore, Nashville businessman and Vanderbilt alumnus, this professorship in psy-

chiatry was endowed in 1973 to support a distinguished faculty member in the Department of Psychiatry, providing freedom to contribute to research and teaching within a specific field of excellence.

THE WILLIAM L. BRAY CHAIR IN UROLOGIC SURGERY. Established in 1992 by a bequest from James L. Bray, M.D. '31, a physician in Los Angeles, this chair supports the research of a distinguished faculty member in urologic surgery. The chair honors Bray's father.

THE ROBERT AND RACHEL BUCHANAN / A. H. AND LUCILLE LANCASTER CHAIR IN DERMATOLOGY. Dr. and Mrs. Robert Buchanan and Mrs. A. H. Lancaster provided for the creation of this chair in 1994. The chair honors two of Tennessee's first dermatologists, both of whom graduated from the Vanderbilt University School of Medicine, and will support a faculty member in the division of Dermatology.

THE FRANCES AND JOHN C. BURCH CHAIR IN OBSTETRICS AND GYNECOLOGY. This chair was endowed in 1995 through the generosity of the Burch family and other friends and colleagues. John C. Burch, M.D. '23, was chairman of the Department of Obstetrics and Gynecology and son of former Vanderbilt School of Medicine Dean Lucius E. Burch.

THE LUCIUS E. BURCH CHAIR IN REPRODUCTIVE PHYSIOLOGY AND FAMILY PLAN-NING. In 1967, the Department of Obstetrics and Gynecology received funds from an anonymous donor to establish this professorship, the purpose of which is to further research in basic reproductive biology, and applied family planning. The chair is named for Dr. Lucius E. Burch, dean of the School of Medicine from 1913 until 1920, and chairman of the Department of Obstetrics and Gynecology until his retirement in 1945.

BETTY AND LONNIE S. BURNETT CHAIR IN OBSTETRICS AND GYNECOLOGY. Established in 1997, this chair honors Mrs. Burnett and her husband, a member of the Vanderbilt faculty since 1976 and chair of Obstetrics and Gynecology until 1995. Dr. Burnett has made numerous contributions in the field of gynecological oncology.

MARTHA O. AND DIXON N. BURNS CHAIR IN MEDICAL ETHICS. This chair was established in 1998 in memory of Mrs. Burns and in honor of Dr. Burns. It will provide support for the burgeoning specialty of medical ethics, an area of particular interest to Dr. Burns, a member of the Vanderbilt School of Medicine Class of 1945.

C. SIDNEY BURWELL PROFESSORSHIP IN MEDICINE. This professorship honors the memory of C. Sidney Burwell, chairman of the Department of Medicine from 1928 to 1935.

THE BENJAMIN F. BYRD JR. CHAIR IN CLINICAL ONCOLOGY. Family, friends, and patients established in 1992 an endowed chair that honors Nashville surgeon and former president of the American Cancer Society, Benjamin F. Byrd, Jr., M.D.

THE ANN AND MONROE CARELL FAMILY CHAIR IN THE VANDERBILT CHILDREN'S HOS-PITAL. This chair was established in 1991 through the generosity of Board of Trust member Monroe Carell, Jr., and his wife Ann. The chair is held by the head of the Division of Pediatric Cardiology.

CHANCELLOR'S CHAIR IN MEDICINE. This chair is committed to ensuring the ongoing mission within the Department of Medicine of treatment of those challenged by addictions.

STANLEY COHEN PROFESSORSHIP IN BIOCHEMISTRY. This professorship is named for Dr. Stanley Cohen, professor of biochemistry, recipient of the Nobel Prize for Physiology or Medicine in 1986 for his efforts in the discovery of growth factor.

THE MARK COLLIE CHAIR IN DIABETES RESEARCH. Country singer and songwriter Mark Collie, through the Mark Collie Foundation, endowed this chair in 2001 to directly support research in the field of diabetes.

THE CORNELIUS ABERNATHY CRAIG CHAIR IN MEDICAL AND SURGICAL ONCOLOGY. Established by the late Kathryn Craig Henry, this chair supports cancer research and serves as a memorial to her father, who was a Nashville businessman and member of the Vanderbilt University Board of Trust.

THE CRAIG-WEAVER CHAIR IN PEDIATRICS. Established through the generosity of Elizabeth Proctor, this chair enhances research and teaching programs of Children's Hospital and provides high quality specialty care for children. The chair honors Mrs. Proctor's parents, the late Mr. and Mrs. Edwin Wilson Craig, and her late husband, William C. Weaver, Jr.

THE JOE C. DAVIS CHAIR IN BIOMEDICAL SCIENCE. This chair was established in 1994 with the proceeds from a trust created by the estate of Mr. Davis, a Vanderbilt alumnus and trustee.

GERALD M. FENICHEL CHAIR IN NEUROLOGY. Established in 1999, this chair provides an opportunity for Dr. Fenichel's many friends, colleagues, students, and patients to honor his lengthy and accomplished career. The first chairman of Vanderbilt's Department of Neurology, Dr. Fenichel spent three decades in that position.

THE JOHN CLINTON FOSHEE DISTINGUISHED CHAIR IN SURGERY. Through the generosity of the late Dr. John C. Foshee, a 1916 graduate of Vanderbilt University School of Medicine and distinguished surgeon, this professorship was endowed in 1976 for the purpose of furthering medical education and research in the field of general surgery.

ROSALIND E. FRANKLIN PROFESSORSHIP IN GENETICS AND HEALTH POLICY. This professorship, dedicated to furthering advances in genetics and corresponding progress in health policy, is named in recognition of the accomplishments of the late Rosalind E. Franklin, a British chemist and molecular biologist who was a pioneer in the early mapping of DNA using x-ray crystallography.

THE THOMAS F. FRIST CHAIR IN MEDICINE. This chair was established in 1985 to support and recognize a distinguished leader-physician-scholar of national stature who combines the qualities of an eminent physician and experienced medical scholar. When possible, the occupant of the chair will be the chair of the Department of Medicine.

THE ERNEST W. GOODPASTURE CHAIR IN EXPERIMENTAL PATHOLOGY. In recognition of Ernest W. Goodpasture, this chair was established in 1960 to enhance basic investigative efforts in experimental pathology.

LAURENCE A. GROSSMAN CHAIR IN CARDIOLOGY. This chair exemplifies the leader-ship and moral fibre of noted Nashville internist Laurence A. Grossman, M.D., and his over-riding commitment to strengthening the field of cardiology. Dr. Grossman is a member of the Vanderbilt School of Medicine Class of 1941.

JAMES TAYLOE GWATHMEY CLINICIAN-SCIENTIST CHAIR. Created in response to a growing need to cultivate clinician scientists in the medical education environment, this professorship recognizes the efforts of Dr. Gwathmey, a pioneer anesthetist who developed the first apparatus able to equally administer ether, oxygen and nitrous oxide. Dr. Gwathmey was an 1893 graduate of the dual program between Vanderbilt's School of Medicine and its predecessor, the University of Nashville Medical School.

CATHERINE MCLAUGHLIN HAKIM CHAIR IN MEDICINE. This chair, established in 1999 in memory of Catherine McLaughlin Hakim, supports research and clinical care in the field of vascular biology.

THE GEORGE WEEKS HALE PROFESSORSHIP IN OPHTHALMOLOGY. Through the generosity of Virginia McHenry Hale, this professorship was established in 1960 for the advancement of ophthalmology. The chair honors Hale's late husband.

PAUL V. HAMILTON, M.D., CHAIR IN GERIATRICS. This chair came into effect in 1998, created from the estate of Dr. Paul V. Hamilton, a longtime and much beloved general practitioner in Cincinnati, Ohio, and a member of the Vanderbilt School of Medicine Class of 1929.

PAUL V. HAMILTON, M.D., AND VIRGINIA E. HOWD CHAIR IN UROLOGIC ONCOLOGY. Established in 1998 by a bequest from Dr. Hamilton and a gift from Hamilton's longtime friend, Virginia Howd, this chair promotes crucial research in the field of genitourinary cancer.

THE ELSA S. HANIGAN CHAIR IN PULMONARY MEDICINE. Mr. John L. Hanigan endowed this chair in memory of his wife. The chair strengthens the ability to treat and care for patients with respiratory diseases and offers a unique opportunity to develop innovative programs in pulmonary research, education, and rehabilitation.

THE JOEL G. HARDMAN CHAIR IN PHARMACOLOGY. Named in honor of noted researcher Joel G. Hardman, Ph.D., chair of the Department of Pharmacology form 1975 to 1990 and Associate Vice Chancellor for Health Affairs from 1990 to 1997. This chair supports investigational opportunities in pharmacology.

INGRAM CANCER RESEARCH PROFESSORSHIPS. Established in 1999 from part of a multimillion-dollar gift given by the family of the late E. Bronson Ingram, these ten faculty positions support research in such areas as functional genomics, signal transduction, cancer prevention, clinical trials, and experimental therapeutics. Ingram, a Nashville businessman and chairman of Vanderbilt's Board of Trust, died of cancer in 1995.

THE HORTENSE B. INGRAM CHAIR IN MOLECULAR ONCOLOGY. This chair, established in 1991 by president and CEO of Ingram Industries, Inc., E. Bronson Ingram, provides continued support for cancer research in the Department of Cell Biology. The chair honors Mr. Ingram's mother, the late Hortense Bigelow Ingram, a Nashville civic and charity leader.

LISA M. JACOBSON CHAIR IN CARDIOVASCULAR MEDICINE. This endowed chair in the Department of Medicine was established through the generosity of Dr. and Mrs. Harry Jacobson and honors Dr. Jacobson's mother, who suffered from coronary artery disease.

RUDY W. JACOBSON CHAIR IN ALLERGY, PULMONARY, AND CRITICAL CARE MEDICINE. Dr. and Mrs. Harry Jacobson generously established this endowed chair in the Department of Medicine. The chair was funded to help improve the treatment of pulmonary disease and honors Dr. Jacobson's father, who suffered from idiopathic pulmonary fibrosis.

RUDOLPH H. KAMPMEIER ASSOCIATE PROFESSORSHIP IN MEDICINE. Dr. Rudolph H. "Rudy" Kampmeier (1898–1990) was a highly respected clinical teacher in the broad Oslerian tradition. He joined the Vanderbilt faculty in 1936, chaired the Department of Medicine from 1943 to 1946 and again in 1958-59, and was elected president of the American College of Physicians in 1967. This professorship is named in recognition of his stature as a clinician, teacher, historian, and author.

THE DAVID T. KARZON CHAIR IN PEDIATRICS. This chair was established in 1991 to recognize an outstanding researcher, teacher, leader, and care giver, David T. Karzon, M.D. The chair provides support for pediatric science in any subspecialty area.

GRANT W. LIDDLE ASSOCIATE PROFESSORSHIP IN MEDICINE. This professorship honors the memory of Dr. Grant W. Liddle, chair of the Department of Medicine from 1968 to 1983. An internationally known endocrinologist and clinical investigator, Dr. Liddle was a firm believer in the importance of training in the fundamental disciplines.

THE ANN LIGHT CHAIR IN PULMONARY MEDICINE. Through the generosity of Ann R. Light (Mrs. Rudolph A. Light), the School of Medicine will benefit from a charitable trust to establish a chair in pulmonary medicine.

THE GUY M. MANESS CHAIR IN OTOLARYNGOLOGY. This chair was created in 1986 through the generosity of Dr. Maness, longtime friend of Vanderbilt Otolaryngology. The chair supports a comprehensive program of education, research, and treatment of diseases of the ears, nose, throat, head, and neck at Vanderbilt.

THE KATRINA OVERALL MCDONALD CHAIR IN PEDIATRICS. In 2002, it was agreed that monies from the James C. Overall Chair in Pediatrics would be used to establish this chair in memory of Mrs. McDonald and her family's many contributions to pediatric research and patient care at Vanderbilt

THE WILLIAM F. MEACHAM CHAIR IN NEUROLOGICAL SURGERY. Funding of this chair was spearheaded by the William F. Meacham Society, a group composed primarily of house officers who studied under Meacham, M.D.'40, chairman of the Department of Neurosurgery from 1954 to 1984. The chair supports research in neurological surgery and honors Meacham's contributions to this field.

THE STANFORD MOORE CHAIR IN BIOCHEMISTRY. Established in 1991 by an anonymous donor, this chair recognizes and encourages significant research in biochemistry and memorializes Dr. Stanford Moore, a former member of the Board of Trust and a Nobel Prize winner.

THE HUGH J. MORGAN CHAIR IN MEDICINE. The Morgan chair recognizes the many contributions of the distinguished former chairman of Vanderbilt's Department of Medicine. Members of his family, physicians who trained under him, patients, and friends contributed to chair's endowment.

ELIZABETH AND JOHN MURRAY CHAIR OF THE ASTHMA, ALLERGY, AND SINUS PROGRAM. This chair was established in direct support of the clinical and research pursuits within Vanderbilt's Asthma, Allergy, and Sinus Program (ASAP). Dr. Murray is a member of the Vanderbilt School of Medicine Class of 1979.

THE JAMES C. OVERALL CHAIR IN PEDIATRICS. Through the generosity of Mr. and Mrs. William K. Warren of Tulsa, Oklahoma, this chair was endowed in 1981 to enhance the academic program in the Department of Pediatrics. The professorship honors Mrs. Warren's brother, Dr. James C. Overall, a distinguished clinician and contributor to American pediatrics.

THE RALPH AND LULU OWEN CHAIR IN MEDICINE. In 2002, it was agreed that monies from the Owen Fund for Pulmonary Research would be used to establish this chair in memory of Mr. and Mrs. Owen's many contributions to medical research at Vanderbilt.

THE RALPH AND LULU OWEN CHAIR IN PULMONARY DISEASES. This chair was established in 1994 through a bequest from the estate of Mrs. Owen, who, with her late husband, was a trustee and life-long supporter of Vanderbilt University and its Medical Center.

THE CAROL D. AND HENRY P. PENDERGRASS CHAIR IN RADIOLOGY. Established by family and friends in 1997, the Carol D. and Henry Pendergrass Chair is the first endowed chair in the Department of Radiology and Radiological Sciences. The chair honors Dr. Pendergrass, a gifted professor of radiology and radiological sciences who served Vanderbilt and his profession with distinction, and his late wife, Carol. His research in the early diagnosis and detection of disease through medical imaging, along with his involvement in postgraduate and continuing medical education, helped establish the Department of Radiology and Radiological Sciences at Vanderbilt as one of the nation's leading centers for radiological research, education, and patient care.

THE LEO AND MARGARET MILNE RECORD CHAIR IN SURGERY. This chair was established through the generosity of Dr. Record, a prominent Chattanooga physician, and his wife.

THE ANN AND ROSCOE R. ROBINSON CHAIR IN NEPHROLOGY. Friends of Dr. and Mrs. Robinson endowed this chair in 1995. Dr. Robinson has served as Vanderbilt's Vice Chancellor for Health Affairs since 1981 and is internationally recognized as a nephrologist.

THE DAVID E. ROGERS PROFESSORSHIP IN MEDICINE. This professorship honors the memory of Dr. Rogers, a great clinician, educator, and public policy maker, who chaired Vanderbilt's Department of Medicine form 19599 to 1968.

THE PAUL W. SANGER CHAIR IN EXPERIMENTAL SURGERY. Through the generosity of the late Paul W. Sanger, M.D., 1931, a distinguished surgeon and former president of the Vanderbilt Medical Alumni, this professorship was established in 1969 and funded in collaboration with the Department of Surgery for the purpose of furthering research in surgical biology and in the general field of surgery.

THE JOHN L. SAWYERS CHAIR IN THE SECTION OF SURGICAL SCIENCES. The Chair honors John L. Sawyers, M.D., professor and chairman of the Department of Surgery and former director of the Section of Surgical Sciences, for his contribution to medicine and his dedication to training surgeons.

THE H. WILLIAM SCOTT JR. CHAIR IN SURGERY. Through the generosity of members of the H. William Scott, Jr., Society, consisting primarily of residents trained by Dr. Scott, this professorship was established in 1983 to honor Dr. Scott for his contributions to the Section of Surgical Sciences and Vanderbilt University during his thirty-year tenure as chairman, 1952–82.

THE ADDISON B. SCOVILLE JR. CHAIR IN MEDICINE. This chair was endowed in 1985 by the Justin and Valere Potter Foundation to support and recognize a distinguished physician scholar whose accomplishments in investigative medicine will enrich and strengthen the scientific endeavors of the Department of Medicine.

THE RUTH KING SCOVILLE CHAIR IN MEDICINE. This chair is named for the widow of long-time VUMX faculty member Dr. Addison B. Scoville, Jr. The position is intended to support distinguished faculty recruitment to the Division of Diabetes, Endocrinology, and Metabolism.

THE JOHN L. SHAPIRO CHAIR IN PATHOLOGY. Funded by family, friends, former house officers, and alumni, the holder of this chair promotes medical student involvement in research or clinical-pathological projects, graduate student recruitment, and young faculty development. The chair honors the late John L. Shapiro, M.D., a faculty member from 1948 to 1971 and Chairman of the Department of Pathology from 1956 until his retirement. During that time, Shapiro instructed more than 1,000 medical students and was considered to be the most effective teacher at Vanderbilt School of Medicine.

THE ANN GEDDES STAHLMAN CHAIR IN MEDICAL ETHICS. Endowed in 1973 by James C. Stahlman, B.A. '19, the broad objective of the chair is to contribute to the return of humanism in the practice of medicine. Stahlman was owner and publisher of the *Nashville Banner* and a long-time member of the Vanderbilt University Board of Trust. This chair honors one of his daughters.

THE EDWARD CLAIBORNE STAHLMAN CHAIR IN PEDIATRIC PHYSIOLOGY AND CELL METABOLISM. Endowed in 1972 by James C. Stahlman in honor of his father, this chair supports studies in pediatric physiology and cell metabolism.

THE GLADYS PARKINSON STAHLMAN CHAIR IN CARDIOVASCULAR RESEARCH. Established in 1973 by James C. Stahlman in honor of his wife, this chair supports cardiovascular research, with emphasis on the cause of the disease, its prevention, and its treatment.

THE MARY GEDDES STAHLMAN CHAIR IN CANCER RESEARCH. James C. Stahlman, endowed this professorship in 1972 for the purpose of furthering studies in cancer research. The chair honors his mother.

THE MILDRED THORNTON STAHLMAN CHAIR IN PERINATOLOGY. James C. Stahlman established this professorship in perinatology. The chair will reinforce the study of perinatology over an indefinite period of time. It is named in honor of Dr. Mildred Stahlman, one of Mr. Stahlman's daughters and a member of the School of Medicine faculty since 1951.

THE WILLIAM STOKES CHAIR IN EXPERIMENTAL THERAPEUTICS. Established in 1989, through the generosity of the Daiichi Seiyaku Company of Japan, this chair honors William Stokes. Stokes was a 19th century Dublin physician who made many contributions to cardiovascular medicine. The chair resides in clinical pharmacology.

THE WILLIAM S. STONEY JR. CHAIR IN THORACIC AND CARDIAC SURGERY. The chair honors William S. Stoney, Jr., M.D.'54, clinical professor in the department from 1969 to 1988, for his many contributions to thoracic and cardiac surgery and especially the surgical treatment of adult heart disease.

THE EARL W. SUTHERLAND JR. PROFESSORSHIP IN PHARMACOLOGY. This professorship recognizes the myriad of accomplishment by Dr. Sutherland, 1971 Nobel laureate for his discovery of the metabolic regulating compound "cyclic AMP," and professor of physiology at Vanderbilt from 1963 until 1973

THE MARGARET AND GEORGE THORNE PROFESSORSHIP IN PATHOLOGY. This professorship is one of several within the Medical Center designed to recruit and retain outstanding faculty.

THE MINA COBB WALLACE CHAIR IN GASTROENTEROLOGY AND CANCER PREVENTION. This chair was endowed in 1998 by John B. Wallace, a prominent physician from Gallatin, Tennessee, in memory of his mother, Mina Cobb Wallace. It promotes research in gastroenterology with specific application to the field of cancer prevention.

THE NATALIE OVERALL WARREN DISTINGUISHED CHAIR IN BIOCHEMISTRY. This chair was endowed by the William K. Warren Foundation in 1995. Mr. Warren's wife, Natalie Overall Warren, was an honors graduate of the class of 1920 with a major in chemistry and one of eight members of her family to graduate from Vanderbilt University.

THE WILLIAM C. WEAVER III CHAIR IN NEUROLOGY. Mrs. David Y. Proctor, whose generous support is evident throughout the Medical Center, endowed this chair in 1992 in honor of her son, William C. Weaver III, in support of research and service in neurodegenerative diseases and multiple sclerosis.

THE DOROTHY OVERALL WELLS CHAIR IN PEDIATRICS. In 2002, it was agreed that monies from the James C. Overall Chair in Pediatrics would be used to establish this chair in honor of Mrsl Wells and her family's many contributions to pediatric research and patient care at Vanderbilt.

THE ALBERT AND BERNARD WERTHAN CHAIR IN MEDICINE. The Werthan and Shayne families of Nashville made possible the establishment of this chair in 2000. Longtime benefactors of the School of Medicine, they established the Werthan Professorship in Investigative Medicine, forerunner of this endowed chair, in 1951.

THE THOMAS L. AND JANE WILKERSON YOUNT CHAIR IN AUDIOLOGY. This chair was established by Thomas and Jane Yount in memory of her father, Wesley Wilkerson, who founded the Bill Wilkerson Hearing and Speech Center. This chair enhances the three-fold mission of the Bill Wilkerson Center: research, education, and service.

LESTER AND SARA JAYNE WILLIAMS CHAIR IN SURGERY. Created under a bequest provision by Dr. and Mrs. Williams, this chair will benefit the academic program in the Section of Surgical Sciences. It was their wish that this chair serve to return some measure of what they consider a professional and highly collegial atmosphere among Vanderbilt surgeons and support staff.

THE ANNE POTTER WILSON DISTINGUISHED CHAIR IN COLON CANCER. This chair was established by Nashville businessman and Vanderbilt Board of Trust member David K. "Pat" Wilson in memory of Anne Potter Wilson.

ELTON YATES PROFESSORSHIP IN AUTONOMIC DISORDERS. Mrs. Elton Yates and the late Mr. Yates, a former oil company executive, endowed this professorship in 1997 in support of research into various autonomic disorders within the Clinical Research Center.

Lectureships

THE JOHN Q. ADAMS LECTURESHIP IN OTOLARYNGOLOGY. Through the generosity of the Adams family this annual lecture furthers education in otolaryngology.

THE ALPHA OMEGA ALPHA LECTURE. The Alpha Omega Alpha Honor Medical Society each year invites a scientist of prominence to deliver a lecture before the students and faculty and members of the medical community. The first lecture was given during the school year 1926/27.

THE ALLAN D. BASS LECTURESHIP. This lectureship was established in 1976 in recognition of Dr. Bass's outstanding contributions to Vanderbilt University, the Nashville community, and the field of Pharmacology. He served as professor and chairman of the Department of Pharmacology from 1953 to 1973, as associate dean for biomedical sciences from 1973 to 1975, and as acting dean of the School of Medicine from 1973 to 1974. The lectureship is made possible through the generosity of his associates and colleagues in the American Society of Pharmacology and Experimental Therapeutics; the FASEB; the AMA Council on Drugs; the Nashville Academy of Medicine; the present and former staff, students and faculty members at Vanderbilt University; and the Department of Pharmacology. The first lecture was given in April 1977.

THE ROBERT N. BUCHANAN JR. VISITING PROFESSORSHIP IN DERMATOLOGY. The Department of Medicine established in 1980 a visiting professorship to honor Dr. R. N. Buchanan, Jr., professor emeritus and former chairman of the Division of Dermatology. Each year a distinguished dermatologist is invited to come to Vanderbilt to deliver a series of formal lectures and participate in teaching conferences.

THE BARNEY BROOKS MEMORIAL LECTURESHIP IN SURGERY. In 1952 through the generosity of a Vanderbilt alumnus an annual lectureship was established to honor the memory of Dr. Barney Brooks, formerly professor of surgery and head of the department, and surgeon-in-chief of Vanderbilt University Hospital. As a fitting memorial to Dr. Brooks these lectures have been given by physicians who have made distinguished contributions in clinical or investigative surgery. It is held annually in conjunction with the spring meeting of the H. William Scott Society.

THE GEORGE DANIEL BROOKS LECTURESHIP IN ONCOLOGY. Established and endowed in 1991 by Frances Brooks Corzine in honor of her father, G. Daniel Brooks, who died of cancer. The focus of the lectureship is oncology and rotates between clinical and basic cancer distinguished lecturers.

THE JOHN E. CHAPMAN LECTURESHIP IN THE ECOLOGY OF MEDICINE AND MEDICAL EDUCATION. Established by Richard E. Strain, M.D. '75, in memory of his father, Richard E. Strain, Sr., M.D. '35, and honoring Dr. John E. Chapman, current Dean of Vanderbilt University School of Medicine. The annual lecture will be devoted to subjects that address the changing role of medicine in our culture.

THE CULLY COBB LECTURESHIP IN NEUROLOGICAL SURGERY. This fund is used exclusively to cover expenses for speakers at the regular meetings of the Meacham Society (M.D. '40), chairman of the Department of Neurosurgery from 1954 to 1984. Dr. Cobb is a clinical professor of neurological surgery.

THE W. ANDREW DALE MEMORIAL LECTURESHIP. Established by the Dale family and friends, this first lecture in vascular surgery supports the advancement of vascular education, research, and patient care. The lecture reflects the depth of Dr. Dale's commitment to Vanderbilt Medical School and vascular surgery.

THE ROLLIN A. DANIEL JR. LECTURE IN THORACIC SURGERY. In 1977 the Department of Thoracic and Cardiac Surgery established the Rollin A. Daniel Jr. Lecture as a tribute to Dr. Daniel. Since Dr. Daniel's death, there has been generous support from Dr. Daniel's family and many former residents to this lectureship fund. Each year a distinguished thoracic surgeon is invited by the Department to visit Vanderbilt and deliver the annual lecture, usually in the fall.

THE LEONARD W. EDWARDS MEMORIAL LECTURESHIP IN SURGERY. This annual lectureship was established in 1972 by the family and friends of Dr. Leonard Edwards, who was professor of clinical surgery, in recognition of his more than fifty years of contributions to Vanderbilt and the Nashville community as a distinguished surgeon and teacher. The first lecture was given in 1972 by Dr. Lester Dragstedt. Lectures usually concentrate on surgery and physiopathology of the alimentary tract.

THE PHILIP W. FELTS LECTURE SERIES IN THE HUMANITIES. This lecture series was established to honor Dr. Felts's dedication to medical students and his desire to help them develop as individuals as well as physicians. Funding in his memory comes primarily from former students and his own Vanderbilt classmates and friends as well as Vanderbilt faculty members. It allows medical students to invite a nationally recognized figure in the humanities to speak at the Medical School each year as part of the annual student-run humanities series. He was director of alumni affairs when he died in 1992.

THE ABRAHAM FLEXNER LECTURESHIP. In the fall of 1927 Mr. Bernard Flexner of New York City donated \$50,000 to Vanderbilt University to establish the Abraham Flexner Lectureship in the School of Medicine. This lectureship is awarded every two years to a scientist of outstanding attainments who shall spend as much as two months in residence in association with a department of the School of Medicine. The first series of lectures was given in the fall of 1928.

THE LEROY BRUNSON GEORGE JR. LECTURESHIP IN TRANSPLANTATION. This lecture provided by his mother, in tribute to his brave spirit in facing unprecedented heart surgery in 1956, which resulted in his death.

THE ALVIN F. GOLDFARB LECTURESHIP IN REPRODUCTIVE ENDOCRINOLOGY. Established by the children of Dr. Goldfarb to honor their father, an alumnus of Vanderbilt University School of Medicine, this is the first named lectureship in the Center for Fertility and Reproductive Research. Serving as an important forum for continuing education, the lectureship enables the Vanderbilt medical community to learn from those at the cutting edge of research and practice in reproductive biology.

THE ERNEST W. GOODPASTURE LECTURE. In 1968 the Goodpasture Lecture was established by a friend of Vanderbilt University and of the Department of Pathology, Mrs. George M. Green, Jr. The lecture is to honor the memory of Dr. Ernest William Goodpasture, distinguished chairman of the Department of Pathology from 1925 until his retirement in 1955. Each year a lecturer prominent for achievements in research or in medical education is selected. The first lecture was given in the fall of 1971.

THE J. LYNWOOD HERRINGTON LECTURESHIP IN GENERAL SURGERY. St. Thomas Hospital administers this fund for the exclusive use of surgical grand rounds, speakers, and lectures. It is in honor of Dr. Herrington, clinical professor of surgery emeritus.

THE J. WILLIAM HILLMAN VISITING PROFESSORSHIP. This professorship was established in 1976 as a tribute to the late Dr. J. William Hillman, who served as professor and chairman of the Department of Orthopaedics. To commemorate Dr. Hillman's tireless dedication to the art of teaching, the department annually invites a prominent orthopaedist to spend three or four days in residence teaching the house staff through a series of walking rounds and informal talks, concluding with a day-long seminar on special topics in the field.

THE GEORGE W. HOLCOMB LECTURESHIP. This lectureship was established in 1990 in tribute to George Whitfield Holcomb, M.D., clinical professor of pediatric surgery, emeritus, for his many contributions as a pediatric surgeon and teacher from 1952 to 1989. The lectureship will keep pediatric surgeons at Vanderbilt abreast of new clinical procedures and research discoveries in the field of pediatrics by inviting guest lecturers from all over the country to give presentations.

THE MARC H. HOLLENDER LECTURESHIIP IN PSYCHIATRY. This fund is used by the Department of Psychiatry for an annual lecture honoring the memory of its former chairman, D. Marc Hl. Hollender

THE BOEHRINGER INGELHEIM DISTINGUISHED LECTURESHIP IN BIOMEDICAL SCIENCES. This lectureship was established by the Boehringer Ingelheim Pharmaceutical Company in 1992 as an annual lecture. The lectureship was given in tribute to the strength of basic biomedical sciences at Vanderbilt University Medical Center. The focus of two lectures given by the distinguished lecturer is on a fundamental research area of broad and dramatic impact on the biomedical sciences.

THE EVERETTE JAMES JR. LECTURESHIP IN RADIOLOGY AND RADIOLOGICAL SCIENCES. Established by friends and colleagues of Dr. James, former chairman of the Department of Radiology and Radiological Sciences, this lectureship brings internationally known experts in a variety of areas of diagnostic radiology to Vanderbilt annually.

THE CONRAD JULIAN MEMORIAL LECTURE. This lecture was instituted in 1980 in honor of Dr. Conrad G. Julian, the first director of gynecologic oncology at Vanderbilt University Hospital. The lecture is delivered each year on a subject related to gynecologic oncology and is given in conjunction with the annual Gynecologic Oncology Seminar.

THE PAULINE M. KING MEMORIAL LECTURESHIP. This lectureship was established in 1962 by Mr. Robert F. King of Klamath River, California, as a memorial to his wife. Each year a distinguished thoracic or cardiovascular surgeon is invited to lecture by the Department of Surgery. The first Pauline M. King Memorial Lecture was given in the spring of 1963.

THE LEONARD J. KOENIG LECTURESHIP IN MEDICINE. This fund, established in 1977 and named for longtime Nashville pediatrician Dr. Leonard Koenig, is for lectures and seminars within the Department of Medicine.

THE M. GLENN KOENIG VISITING PROFESSORSHIP IN INFECTIOUS DISEASES. This visiting professorship was established in 1973 through the generosity of alumni, faculty, friends, and the family of the late Dr. M. Glenn Koenig who served as professor of medicine and head of the Division of Infectious Diseases. In recognition of Dr. Koenig's unexcelled ability to teach at the bedside, the Department of Medicine invites physicians of unusual competence in the teaching of clinical infectious diseases to join the Division of Infectious Diseases for short periods to spend time on the wards and in discussions with students, house staff, fellows, and faculty. The first visiting professorship was held in 1973.

THE KROC FOUNDATION LECTURESHIP IN MOLECULAR PHYSIOLOGY AND BIO-PHYSICS. Established in 1986 by the Kroc Foundation in honor of Ray A. Kroc and Robert L. Kroc to support several visiting professors each year. These individuals present a state-of-the-art lecture on diabetes, insulin action, or a related endocrine topic and consult with faculty members and their groups.

THE PAUL DUDLEY LAMSON MEMORIAL LECTURE. This lectureship was instituted in 1965 in memory of Dr. Lamson, professor of pharmacology and chairman of the department from 1925 until his retirement in 1952. A prominent scientist is brought to the campus biennially under the sponsorship of the alumni and staff of the Department of Pharmacology.

THE FRANK H. AND MILBREY LUTON LECTURESHIP. Established in 1976 through the generosity of friends and former students, this lectureship honors Dr. Frank H. Luton, the first psychiatrist on the Vanderbilt faculty. Each year a prominent lecturer in the field of psychiatry is selected.

THE MARTHA E. LYNCH LECTURESHIP. The Martha E. Lynch Lectureship is an annual series of lectures presented by the Vanderbilt Bill Wilkerson Center and is designed to provide continuing education to speech-language pathologists working in the public school system. The Lectureship is named in honor of Martha E. Lynch, a speech-language pathologist who has devoted her thirty-year career to children with communication disabilities.

THE DAN MAY LECTURE. Made possible by a gift from the May family, this lecture series honors Mr. May, a Nashville business, educational, and civic leader who was a Vanderbilt graduate, long-time Board of Trust member, and friend of the University. The lecturer is a distinguished scholar of medicine or another discipline with expertise in cardiovascular disease, medical education, or humanistic aspects of medicine.

THE GLENN A. MILLIKAN MEMORIAL LECTURE. This lectureship was established in 1947 in memory of Dr. Millikan, professor of physiology, by members of the then second-year class. It has subsequently received support by means of a capital fund by Dr. Millikan's father and mother, Dr. Robert A. Millikan and Mrs. Gretna B. Millikan, and friends. Contributions have been made to the fund by members of the founding class and other students. The lectureship is maintained to provide a distinguished lecturer in physiology.

THE WILLIAM F. ORR LECTURESHIP. This annual lectureship was established in 1976 through the generosity of Hoffman-LaRoche, Inc., in honor of Dr. William F. Orr, first professor and chairman of the Department of Psychiatry, a position he held from 1947 to 1969. A psychiatrist of national prominence is invited each year to present the lecture and to participate in various teaching conferences in the Department of Psychiatry.

THE FRED D. OWNBY LECTURESHIP IN CARDIOLOGY. This lectureship was established in 1996 as a tribute to Dr. Fred D. Ownby's contributions to the field of cardiology, his passion for education, and his commitment to the people of Middle Tennessee. Presented annually by a visiting professor, researcher, or clinician of national renown, the lectures, seminars, and teaching rounds address the latest advances in research, technology, and treatment of cardiovascular illnesses.

THE COBB PILCHER MEMORIAL LECTURE. In 1950 the Pi Chapter of the Phi Chi Medical Fraternity established the Cobb Pilcher Memorial Lecture to honor the memory of Dr. Pilcher, formerly associate professor of surgery, distinguished neurosurgeon, and a member of Phi Chi fraternity. Each year a lecturer of prominence is selected. The first lecture was given in 1950.

THE DAVID RABIN LECTURE IN ENDOCRINOLOGY. The Department of Medicine established in 1980 a visiting lectureship in recognition of the salient contributions of Dr. David Rabin to the world of endocrinology. Dr. Rabin was professor of medicine and head of the Division of Endocrinology from 1975 until his death in 1984. This lectureship annually brings to Vanderbilt a world leader in the science of endocrinology and the application of that science to the solution of the problems of humankind.

THE SAMUEL S. RIVEN VISITING PROFESSORSHIP. This professorship was established in 1989 to honor Dr. Samuel Riven for over fifty years of service to his patients and the Department of Medicine at Vanderbilt University. A physician of prominence is invited each year to present a lecture and to participate in various teaching conferences in the Department of Medicine.

THE W. D. SALMON LECTURESHIP IN THE DIVISION OF GASTROENTEROLOGY. Honoring William D. Salmon, Jr. (M.D. '49 and professor of medicine emeritus), this annual lecture series brings a visiting professor to campus to discuss topics in field of gastroenterology.

THE HARRISON J. SHULL LECTURESHIP IN THE DIVISION OF GASTROENTEROLOGY. This lectureship honors the memory of the late Dr. Harrison J. "Hack" Shull, Sr. (M.D. '34), the first physician to specialize in gastroenterology in Middle Tennessee. He started Vanderbilt's Division of Gastroenterology in the 1950s.

THE NORMAN E. SHUMWAY, JR., LECTURESHIP IN TRANSPLANTATION. This lectureship was established in 1994 to recognize the contributions and leadership of Dr. Shumway, a 1949 graduate of VUMS, in pioneering transplantation research, education, and patient care.

THE R. TURNER SIMPSON LECTURESHIP IN THE HISTORY OF MEDICINE. This lectureship was made possible by the generous contributions of John W. Simpson, M.D., Vanderbilt School of Medicine class of 1932, and his wife. The late Dr. Turner Simpson, brother of Dr. John W. Simpson, was also a Vanderbilt graduate. This lectureship will bring prominent figures in the field of medical history to Vanderbilt.

THE GRACE AND WILLIAM S. SNYDER LECTURESHIP. Established in 1983 by Phyllis and William B. Snyder, MD '57, the Snyder Lectureship honors his parents, both of whom practiced medicine in Kentucky. The lectureship is in the Department of Ophthalmology and Visual Sciences.

THE EARL W. SUTHERLAND LECTURESHIP IN THE DEPARTMENT OF MOLECULAR PHYSIOLOGY AND BIOPHYSICS. In 1999, this lectureship was established to honor the memory of former Vanderbilt professor and Nobel Laureate Earl W. Sutherland.

THE PAUL TESCHAN LECTURESHIP IN THE DIVISION OF NEPHROLOGY AND HYPER-TENSION. This lectureship was established in 1990 by colleagues of Dr. Teschan, professor of medicine emeritus. Its purpose is to bring the world's outstanding leaders in nephrology to Vanderbilt to provide the Division of Nephrology with special occasions of stimulation and professional enrichment. THE CHARLES J. THUSS SR. AND GERTRUDE NOBLE THUSS LECTURESHIP IN PLASTIC AND RECONSTRUCTIVE SURGERY. This lectureship was established in 1977 by Dr. Charles J. Thuss, Jr., Medical Class of 1961, of San Antonio, Texas, in honor of his parents. The lectureship is funded in collaboration with the Department of Plastic Surgery for the purpose of bringing distinguished lecturers in the field of plastic and reconstructive surgery to the Vanderbilt campus.

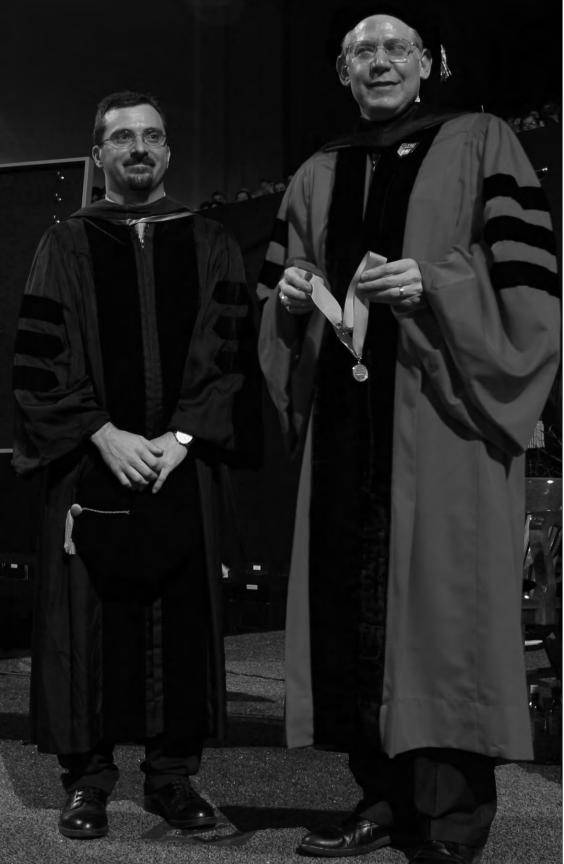
THE "UNIT S" OTOLARYNGOLOGY LECTURESHIP. This lectureship was established in 1994 through the leadership and generosity of Dr. William G. Kennon, Jr., and other descendants of the VUMS Team which served during World War I.

THE VANDERBILT UROLOGY SOCIETY VISITING PROFESSORSHIP AND RHAMY-SHELLEY LECTURE. This annual visiting professorship and lectureship was established in 1972 through the efforts of former residents in urology at Vanderbilt University Medical Center. An outstanding urologist, from either the United States or abroad, is invited to spend four or five days as visiting professor in the Department of Urology, to join with former residents and other urologists in demonstrations of surgical technique and diagnostic acumen, as well as in a series of conferences and lectures. The activities conclude with a formal lecture which honors Dr. Robert K. Rhamy, who was chairman of the Department of Urology at Vanderbilt from 1964 to 1981, and Dr. Harry S. Shelley, former chief of the Division of Urology at Nashville Veterans Administration Hospital.

THE ALBERT WEINSTEIN LECTURESHIP IN DIABETES. This lectureship was established as a tribute to the late Dr. Albert Weinstein by his wife, Miriam, and family members. Dr. Weinstein was born in Middlesboro, Kentucky, in 1905 and received his A.B. degree from Vanderbilt University in 1926. Three years later he graduated as Founder's Medalist from Vanderbilt Medical School. Following his residency training at Johns Hopkins, he moved to Nashville to begin his medical practice in internal medicine at Vanderbilt, where he served as clinical professor for over three decades. Recognized for his remarkable insight into the treatment of his patients, he was also an avid reader and publisher, credited for more than forty scientific papers on a wide array of subjects, including diabetes, cardiology, and hypertension.

THE MARY JANE AND ALBERT WERTHAN VISITING LECTURESHIP IN DERMATOLOGY. This lectureship was established by the Werthans in 1997 in honor of Dr. Lloyd King, Chairman of the Division of Dermatology at Vanderbilt University Medical Center. The named lectureship will bring topflight physician-scientists to Vanderbilt annually to discuss advances in the diagnosis, treatment, and causes of skin lymphoma and other types of skin cancers.

THE JOHN D. WHALLEY LECTURESHIP. The John D. Whalley Child Language Lecture-ship is an annual lecture presented by the Vanderbilt Bill Wilkerson Center, featuring internationally recognized researchers in the area of child language disorders. The lectureship is a tribute to the late John Donelson Whalley, one of the influential forces behind the development of the Scottish Rite Masons Research Institute for Communication Disorders at the Bill Wilkerson Center.



Honors and Awards



Alpha Omega Alpha

A chapter of this medical honor society was established by charter in the School of Medicine in 1923. Not more than one-eighth of the students of the fourth-year class are eligible for membership and only one-half of the number of eligible students may be elected to membership during the last half of their third year. The society has for its purpose the development of high standards of personal conduct and scholarship and the encouragement of medical research. Students are elected into membership on the basis of scholarship, character, and originality.

Founder's Medal

The Founder's Medal, signifying first honors, was endowed by Commodore Cornelius Vanderbilt as one of his gifts to the University. This medal is awarded to the student in the graduating class of the School of Medicine who, in the judgment of the Executive Faculty, has achieved the strongest record in the several areas of personal, professional, and academic performance in meeting the requirements for the Doctor of Medicine degree during four years of study at Vanderbilt.

Other Prizes and Awards

THE SCHOOL OF MEDICINE AWARD OF DISTINCTION. This award is presented to the student who has demonstrated outstanding qualities of leadership and humanitarian service.

THE DEAN'S AWARD. Presented to the medical student distinguished by outstanding contribution of leadership and service.

THE KAUFMAN PRIZE IN MEDICINE. This award honoring J. Kenneth Kaufman, M'39, is presented to a graduating medical student who has demonstrated qualities of humaneness, dedication, and unselfish service in the study of medicine and will apply these qualities in medical practice.

THE GEOFFREY DAVID CHAZEN AWARD. This award for innovation in medical education was established to recognize a student, resident, fellow, or faculty member who has made special contributions to the educational programs of the Vanderbilt University School of Medicine through the development and implementation of effective innovation in educational approach.

THE JANET M. GLASGOW MEMORIAL AWARD. This award is presented to a woman student who is an honor student and leads her class in academic distinction.

THE JANET M. GLASGOW MEMORIAL ACHIEVEMENT CITATION. This citation is presented in recognition of the accomplishments of women who graduate with honors. It serves to reaffirm the American Medical Women's Association's commitment to encouraging their continuing achievement.

THE ARNOLD P. GOLD FOUNDATION HUMANISM IN MEDICINE AWARD. This award is given to a graduating student and a faculty member who demonstrate compassion and empathy in the delivery of health care, and who engender trust and confidence in both their patients and colleagues while adhering to professional ethical standards.

THE DAVID R. FREEDY MEMORIAL AWARD. This award is established to honor the memory of David Richard Freedy, a member of the Class of 1993. It is given to the student who has demonstrated qualities of leadership, exceptional courage and perseverance in the face of adversity and has been dedicated to improving and promoting community life

THE AMOS CHRISTIE AWARD. This award recognizes the student in the graduating class who has demonstrated the outstanding qualities of scholarship and humanity embodied in the ideal pediatrician. The award is in memory of Dr. Amos Christie, who was Professor and Chairman of the Department of Pediatrics from 1943 to 1968.

THE JOHN G. CONIGLIO PRIZE IN BIOCHEMISTRY. This award is presented to a medical student who has distinguished him/herself in Biochemistry. Both accomplishments in biomedical research and performance in Biochemistry courses are considered in evaluating candidates for this award. This award was established by friends of Professor Coniglio on the occasion of his retirement to honor his many contributions to medical education at Vanderbilt.

THE JOHN L. SHAPIRO AWARD FOR EXCELLENCE PATHOLOGY. This award, given upon action of the Department of Pathology, recognizes outstanding student performance in pathology. It is given annually or otherwise depending upon action by the department and honors the memory of Dr. John L. Shapiro, who was Professor and Chairman of the Department of Pathology from 1956 to 1971. Dr. Shapiro remained an active participant in a variety of university and community activities, until his death on July 15, 1983.

THE CANBY ROBINSON SOCIETY AWARD. With nominations generated from the fourth year class, this award is presented to a member of the graduating class who possesses those intangible qualities of common sense, knowledge, thoughtfulness, personal warmth, gentleness and confidence which combine to make the "Ideal Doctor"...the person fellow classmates would most like to have as their personal physician.

THE EXCELLENCE IN EMERGENCY MEDICINE. The award for Excellence in Emergency Medicine is given on behalf of the Society for Academic Emergency Medicine. This award recognizes a medical student for outstanding clinical performance in the Emergency Department at Vanderbilt University Medical Center. (note to marilyn - this award was not given this year...it is shown in the general commencement program as "award not given this year")

THE ALBERT WEINSTEIN PRIZE IN MEDICINE. The Weinstein Prize in Medicine is awarded to graduating students who have demonstrated high academic achievement, superior clinical competence, and the qualities of dedication and professionalism that characterize the good physician.

THE RUDOLPH KAMPMEIER PRIZE IN MEDICINE. The Kampmeier Award is presented by the Department of Medicine to the graduate who, in the judgment of the faculty, best combines high academic achievement with clinical excellence, original scholarship or research, and demonstrated potential for an academic career.

THE SURGICAL CLERKSHIP AWARD. This award is presented by the Section of Surgical Sciences to a student who has shown superior performance in the third-year surgical clerkship and who plans to enter graduate education in surgery.

THE H. WILLIAM SCOTT, JR., PRIZE IN SURGERY. This award is presented to the graduating medical student who exemplifies the qualities of leadership, performance, and character reflecting the ideal surgeon.

THE HOSPITAL AWARD OF EXCELLENCE. This award recognizes the fourth year medical student selected by the chief residents of the services as having contributed most toward excellent patient care by demonstrating sensitivity, compassion, and concern in clinical responsibilities to patients of Vanderbilt University Medical Center.

THE BEAUCHAMP SCHOLARSHIP. Endowed and awarded to the student showing the greatest progress in the field of psychiatry.

THE MERCK AWARD FOR EXCELLENCE IN INFECTIOUS DISEASES. This award is presented annually by the Divisions of Infectious Diseases in the Departments of Medicine and Pediatrics to the student who has demonstrated outstanding aptitude and performance in clinical and investigative efforts in Infectious Diseases or Microbiology.

THE ORTHOPAEDIC SURGERY CLERKSHIP AWARD. This award is presented by the Department of Orthopaedic Surgery to the student who has excelled in both the third and fourth year orthopaedic clerkships, and who has demonstrated outstanding potential in the field of orthopaedic surgery.

THE TOM NESBITT AWARD. The Tom Nesbitt award is presented by the Nashville Academy of Medicine and Davidson County Medical Society to honor the outstanding services of Tom Nesbitt, M.D. a member of the Academy and one hundred thirty-third president of the American Medical Association. This award is presented to the graduating medical student who demonstrates exemplary character and leadership.

THE ENDOCRINE SOCIETY AWARD FOR EXCELLENCE IN CLINICAL ENDOCRINOLOGY. This award is presented annually by the Division of Endocrinology and Diabetes to the graduating medical student who demonstrates outstanding performance in clinical endocrinology. The award is sponsored by the Endocrine Society. The Society, founded in 1916, is the world's largest professional association devoted to all aspects of endocrinology.

THE DIABETES/ENDOCRINE RESEARCH AWARD. Given to the graduating student who has performed the most meritorious research related to diabetes and endocrinology. The award was established in honor of Dr.Oscar Crofford, Professor of Medicine, by his colleagues and friends throughout North American, to honor his leadership and distinguished service in diabetes research.

THE LONNIE S. BURNETT AWARD IN OBSTETRICS AND GYNECOLOGY. This award is given to the student demonstrating superior performance and who exemplifies the qualities of dedication, leadership, compassion, and integrity in the field of Obstetrics and Gynecology.

THE PAULA C. HOOS AWARD. The Class of 2003 presents this award in recognition of teaching excellence in the anatomy laboratory and to express our sincere appreciation for the assistance of members of the graduating class.

THE AMERICAN ACADEMY OF NEUROLOGY MEDICAL STUDENT PRIZE FOR EXCELLENCE IN NEUROLOGY. This award is to recognize medical students for excellence in clinical neurology.

THE ROENTGEN AWARD. This award is given to a graduating medical student who has made important contributions in one of the radiological sciences during four years of study. Named for Wilhelm Conrad Roentgen, a pioneer in diagnostic radiology, the award recognizes discoveries in either clinical or research areas.

THE TENNESSEE ACADEMY OF FAMILY PHYSICIANS AWARD . This award is given to a graduating medical student in recognition of dedication to the high level of family practice.

THE DIXON N. BURNS AWARD IN MEDICAL ETHICS. This is an award given by the Center for Clinical and Research Ethics to the graduating medical student who has, through a written essay, demonstrated unusual ability in identifying and analyzing ethical issues presented in either clinical or research contexts.

THE HARRISON SHULL, SR. GASTROENTEROLOGY AWARD. This award recognizes a medical student who has demonstrated outstanding clinical performance in gastroenterology or hepatology during their student rotation.



Financial Information for Medical Students

UITION for the academic year 2003/2004 is \$30,100. The annual expense of a first-year student in the School of Medicine is estimated to be \$45,430.

Tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

2003/2004

Application fee (to accompany secondary application)	\$ 50
Student activities and recreation fee (1st and 2nd years)	282
Student activities and recreation fee (3rd and 4th years)	333
Microscope usage fee per year (1st and 2nd years)	100
Student health insurance	1,228
Professional liability insurance	302
Student long-term disability insurance	60
Student health service fee	55
Transcript fee (one time only)	30

Payment of Tuition and Fees

All regularly enrolled medical students must pay the full tuition each year. There will be no exception to this requirement. Graduate students who enroll in courses in the medical curriculum for credit toward an academic degree and who later become candidates for the Doctor of Medicine degree may be required to pay the full tuition as indicated above. One half of tuition, total fees, and other University charges are due and payable by 19 August. Second semester tuition and other University charges are due and payable by 7 January.

Refund of Tuition

Students who withdraw officially or who are dismissed from the University for any reason after the beginning of a term may be entitled to a partial refund in accordance with the schedule shown below. No refund will be made after the tenth week in any semester.

Withdrawal prior to the end of	Reduction
1st full week	100%
2nd full week	95%
3rd full week	85%
4th full week	80%
5th full week	75%
6th full week	65%
7th full week	60%
8th full week	55%
9th full week	45%
10th full week	40%

No refund after the 10th full week.

Late Payment of Fees

Charges not paid by 19 August will be automatically deferred, and the student's account will be assessed a monthly late payment fee at the following rate: \$1.50 on each \$100 that remains unpaid after 19 August (\$5 minimum). An additional monthly late payment fee will be assessed unless payment is received in full on or before the end of each month; and late payment fees will continue for each month thereafter based on the outstanding balance unpaid as of the end of each month. All amounts deferred are due not later than 30 November for fall semester and 30 April for spring semester. Graduating students are not allowed to defer charges that are billed in advance for the final semester.

Financial Clearance

Students may not be allowed to register for any semester if they have outstanding unpaid balances for any previous semester. No transcript, official or unofficial, will be issued for a student who has an outstanding balance until the account has been paid. Diplomas of graduating students may be withheld until all bills are paid.

International students must provide documentation of having funds sufficient to meet all tuition, mandatory fees, and living expenses for the anticipated period of enrollment before a visa will be issued. Information will be provided by the University Office of International Student and Scholar Services.

Microscopes, Books, and Equipment

First-year and second-year students are provided microscopes by the University. The usage fee for this service is included in the tuition and fee schedule and is required of all students in these classes.

All students must have clean white laboratory coats. In their second year students must acquire hemocytometers and ophthalmoscopes. The average cost for these instruments is approximately \$640.

The average cost of books is approximately \$540 per year. The Medical Bookstore accepts cash or major credit cards.

Activities and Recreation Fees

The required student activities and recreation fees entitle students to use the facilities of Sarratt Student Center and the Student Recreation Center. The fees also cover admission to certain social and cultural events and subscriptions to certain campus publications. Specific information on these fees is published annually in the *Student Handbook*. By payment of an additional fee, students and their spouses may use their identification cards for admission to athletic events.

Professional Liability Insurance

Students will be automatically covered with professional liability insurance, required of all enrolled medical students, at the time of registration. The annual premium is payable in addition to tuition. Details of the policy are available at the University student insurance office, and students are encouraged to familiarize themselves with these details and with their responsibilities in this regard.

Students are covered whether they are at the Vanderbilt-affiliated hospitals (Vanderbilt University Medical Center, Nashville Veterans Administration Hospital, St. Thomas Hospital, or Baptist Hospital) or elsewhere as a "visiting student," providing that (1) the clerkship or other educational experience has prior approval from the School of Medicine as course work for credit, and (2) the activities within this experience are consonant with the student's level of training and experience and are performed under the supervision of appropriate faculty and/or staff.

Disability Insurance

Students will be automatically covered with long-term disability insurance, required of all enrolled medical students, at the time of registration. The annual premium is payable in addition to tuition. Details of the policy will be provided to each student following registration.

Student Health Insurance

All degree-seeking students registered for 4 or more hours at Vanderbilt are required to have adequate hospitalization insurance coverage. The University offers a sickness and accident insurance plan that is designed to provide hospital, surgical, and major medical benefits. A brochure explaining the limits, exclusions, and benefits of insurance coverage is mailed to students in the summer and is available in the Office of Student Financial Services, or at the Student Health Center. See page 33 for more details.

Student Health Service Fee

The required student health service fee covers required immunizations and health screening tests.

Honor Scholarships

Each year, a number of Honor Scholarships are awarded to incoming students. The school is dedicated to creating a rich and excellent academic environment for each student. This environment is enhanced by the inclusion of students who are talented and represent a broad spectrum of society—social, economic, and cultural. Honor scholarships ordinarily continue through four years of study, as long as students maintain satisfactory academic performance. There is no application process for Honor Scholarships. Selected students will generally be notified in late February or early March.

THE CANBY ROBINSON SCHOLARSHIPS. Canby Robinson Scholarships provide full tuition and, with satisfactory progress at Vanderbilt, continue for four years. The scholarships are awarded on the basis of demonstrated leadership and scholarship activities. Scholarship recipients are recommended by the Dean and the chairman of the Admissions Committee and chosen by a committee from the Canby Robinson Society. These scholarships were established in 1986 by the Canby Robinson Society.

THE JOHN C. CHAPMAN. M.D., ENDOWED SCHOLARSHIP FUND. This endowed fund was established in 2001 by friends, colleagues, and medical alumni to honor Dean Chapman, the seventh dean of the School of Medicine, upon his retirement after twenty-five years of service. Full tuition scholarships are awarded on the basis of merit and need.

THE JOE C. DAVIS SCHOLARSHIP. The Davis Scholarship is given periodically to an incoming medical student who has demonstrated qualities of scholarship and leadership, as well as financial need. To be eligible, the candidate must come from a state specified as a Southeastern state east of the Mississippi. It is a full tuition scholarship for four years of medical study, contingent upon satisfactory performance.

THE DEAN'S SCHOLARSHIPS FOR DIVERSITY. These full-tuition scholarships are funded by the Dean's Office for four years of study, contingent upon satisfactory academic performance. The Vanderbilt University School of Medicine is committed to diversity in its student body.

THE DORIS M. AND FRED W. LOVE SCHOLARSHIP. The Love Scholarship was established by Dr. and Mrs. Fred W. Love, a 1945 School of Medicine graduate. This tuition scholarship is given periodically and continues contingent upon satisfactory progress until the recipient graduates.

THE BESS AND TOWNSEND MCVEIGH SCHOLARSHIP FUND. This endowed scholar-ship was established in memory of her parents by Grace McVeigh, a 1925 Vanderbilt University graduate, to provide full-tuition, four-year scholarships for the benefit of needy and worthy students in the School of Medicine.

Financial Assistance

Education leading to the Doctor of Medicine degree requires a careful consideration of financial commitment by prospective students and their families. Financial planning is an important part of the student's preparation for medical school.

In addition to the Honor Scholarships just described, scholarships and loans are available through Vanderbilt, based on demonstrated financial need and continued satisfactory academic progress. Financial aid from school sources must be considered a supplement to governmental and other sources, rather than the primary source of funds necessary to attend medical school. Institutional financial aid is not adequate to meet students' demonstrated need, but approved educational expenses are met with funds from a combination of sources. Government funds that furnish significant loans to medical students are the Federal Subsidized and Unsubsidized Stafford Loan programs. Students interested in primary care may be eligible for Primary Care Loans. Private alternative loans are also available.

Additional information and applications for financial aid are online at www.mc.vanderbilt.edu/medschool/finaid/finaid1.php. Applicants desiring more specific information about financial aid resources should contact the Medical School Office of Student Financial Services.

The following are some of the Vanderbilt University School of Medicine institutional scholarships and loans available to assist students with demonstrated financial need.

Scholarships

THE ALPHA KAPPA KAPPA ALUMNI ASSOCIATION FUND. These funds are made available to students through contributions from alumni of the Alpha Kappa Kappa medical fraternity.

THE LUCILE R. ANDERSON SCHOLARSHIP FUND. This scholarship was established by Lucile R. Anderson, a 1933 School of Medicine graduate.

THE SUE AND NELSON ANDREWS SCHOLARSHIP FUND. This endowed scholarship fund was established in 2001 through the generosity of Board of Trust member Nelson Andrews, B.A.'50, and his wife Sue Adams, B.A.'51, to help deserving and needy students attend the School of Medicine.

THE EUGENE AND MARGE BESPALOW SCHOLARSHIP FUND. This endowed scholarship fund for deserving medical students was established by Dr. Bruce Dan, a Vanderbilt alumnus, in honor of his grandparents. THE THOMAS M. BLAKE SCHOLARSHIP. This endowed scholarship was established through a bequest provision by the late Thomas M. Blake, a 1944 graduate of the School of Medicine. The income is used to assist worthy students in the School of Medicine on the basis of merit.

THE DR. DANIEL B. BLAKEMORE SCHOLARSHIP FUND. This endowed scholarship was established by the will of Mrs. Nell J. Blakemore in memory of her husband for the benefit of worthy medical students who are in need of financial assistance.

THE BURRUS SCHOLARSHIP FUND. This endowed scholarship was established by members of the Burrus family to help meet the cost of tuition for medical students.

THE THOMAS CULLOM BUTLER AND PAULINE CAMPBELL BUTLER SCHOLARSHIP. This endowed scholarship was established by Thomas Cullom Butler, a 1934 School of Medicine graduate, for worthy and needy medical students.

THE ALICE DREW CHENOWETH SCHOLARSHIP. This scholarship honors the career of Dr. Alice Drew Chenoweth, a 1932 School of Medicine graduate who had a distinguished career as a pediatrician in the area of public health.

THE CLASS OF 1943 MARCH AND DECEMBER SCHOLARSHIP FUNDS. These endowed scholarships were established by members of these Medical School classes.

THE CLASS OF 1946 MEDICAL SCHOLARSHIP. This scholarship was established by members of this Medical School class.

THE CLASS OF 1947 SCHOLARSHIP. This scholarship was established by members of this Medical School class.

THE CLASS OF 1964 MEDICAL SCHOLARSHIP FUND. This scholarship was established by members of this Medical School class.

THE DR. ROBERT D. COLLINS SCHOLARSHIP FUND. This endowed scholarship was established by alumni in honor of Dr. Robert D. Collins, a distinguished and admired longtime professor of pathology and 1951 School of Medicine graduate.

THE COMMONWEALTH SCHOLARSHIP. This scholarship aid is made possible by the generosity of the Commonwealth Fund of New York City, a private foundation which has been supporting needy and deserving students in the School of Medicine for many years.

THE ENTREPRENEURIAL, COMMUNITY SERVICE SCHOLARSHIP. This endowed scholarship is given to a student that demonstrates entrepreneurial spirit and dedicates a significant portion of their free time to community service. This scholarship is given anonymously.

THE DEBORAH AND C. A. CRAIG II MEDICAL SCHOLARSHIP FUND. This fund was established in 1992 by Mr. and Mrs. C. A. Craig II. It provides support to talented and deserving students engaged in the study of medicine. Preference is awarded to former Eagle Scouts.

THE JACK DAVIES SCHOLARSHIP FUND. This fund was endowed primarily through gifts from the Classes of 1981, 1982, 1983, 1984, and 1994 in honor of the distinguished and beloved longtime professor of anatomy. This fund is designed to provide medical student financial assistance.

THE J. T. AND MARY P. DAVIS SCHOLARSHIP FUND. This endowed scholarship was established by J. T. DAVIS, a 1931 School of Medicine graduate.

THE ENTREPRENEURIAL, COMMUNITY SERVICE SCHOLARSHIP. This endowed scholarship is given to a student that demonstrates entrepreneurial spirit and dedicates a significant portion of their free time to community service. This scholarship is given anonymously.

THE HERBERT ESKIND MEMORIAL FUND. This scholarship honoring the memory of Mr. Herbert Eskind was established by members of his family.

THE ROBERT SADLER-WILLIAM EWERS SCHOLARSHIP FUND. This endowed scholar-ship was established in honor of Robert Sadler and William Ewers, 1947 School of Medicine graduates.

THE SAM FLEMING SCHOLARSHIP. This scholarship for needy medical students was established by J. T. Stephens in honor of Sam Fleming, former president of the Vanderbilt Board of Trust.

THE J. F. FOX STUDENT SCHOLARSHIP IN MEDICINE. This fund was established in memory of Dr. J. F. Fox, a Vanderbilt graduate, and provides for annual assistance to students in the School of Medicine based on scholarship, promise, and financial need.

THE D. G. GILL SCHOLARSHIP FUND. This fund was established in 1982 by the family of the late Dr. Daniel Gordon Gill. First preference goes to those students with financial need who have expressed an interest in the field of public health.

THE DRS. FRANK LUTON AND CLIFTON GREER SCHOLARSHIP FUND. This fund was founded in 1995 through a gift from the estate of Dr. Clifton Greer, M.D. '51, in honor of the late Dr. Luton, M.D. '27. It provides tuition support for medical students with demonstrated financial need, with preference given to those from the southeastern United States.

THE DR. HARRY GUFFEE SCHOLARSHIP FUND. This endowed scholarship was established in honor of Dr. Harry Guffee, a 1939 School of Medicine graduate. Residents of Williamson County, Tennessee, are given first preference, and residents of the counties adjoining Williamson County are given second preference.

THE GLENN AND VIRGINIA HAMMONDS SCHOLARSHIP. This endowed scholarship was established by the late Dr. R. Glenn Hammonds, a 1944 graduate of the School of Medicine. The income is used to provide financial assistance to worthy and needy medical students.

THE FRANK M. HANDLEY SCHOLARSHIP. This endowed scholarship was provided from the estate of Frank M. Handley, a 1928 Vanderbilt Law School graduate.

THE JAMES HOLLORAN SCHOLARSHIP. This endowed scholarship was established by the class of 1980 in memory of their classmate, "Ed" Holloran.

THE HOLLIS E. AND FRANCES SETTLE JOHNSON SCHOLARSHIP FUND. This endowed scholarship was established by Hollis E. Johnson, a 1921 School of Medicine graduate.

THE IKE J. KUHN FUND. This scholarship fund is provided by a bequest from the will of Mr. Ike J. Kuhn and is awarded in the School of Medicine to a worthy man or woman born and raised in any of the states commonly known as the "southern states."

THE ANN R. LIGHT SCHOLARSHIP FUND. This endowed scholarship was established by Ann R. Light for needy medical students.

THE KONRAD LUX SCHOLARSHIP. This endowed scholarship was established by the will of Konrad Lux, a 1925 Vanderbilt University graduate, to benefit students in the Oral Surgery program.

THE THOMAS L. MADDIN, M.D., FUND. This fund is provided by a bequest from the will of Mrs. Sallie A. C. Watkins in memory of Dr. Thomas L. Maddin.

THE JACK MARTIN SCHOLARSHIP FUND. This endowed scholarship was established in honor of Jack Martin, a 1953 School of Medicine graduate.

THE PATRICIA AND EDWARD J. MCGAVOCK SCHOLARSHIP FUND. This endowed scholarship fund was established in 1998 through a bequest provision by the late Patricia McGavock of Old Hickory, Tennessee, to benefit students enrolled in the Vanderbilt University School of Medicine.

THE CHARLES AND EDITH MCGILL SCHOLARSHIP FUND. This endowed scholarship was established in 2000 through the proceeds of a life income trust set up by the late Charles M. McGill, M.D.'35, and his wife Edith for the benefit of students enrolled in the Vanderbilt University School of Medicine.

THE BARTON MCSWAIN ENDOWED SCHOLARSHIP This endowed scholarship was established in 1994 with proceeds raised by the Vanderbilt Medical School Class of 1958 to honor the late Nashville pathologist H. Barton McSwain, B.A.'27, M.D.'30. The income is to be used to benefit students enrolled in the Vanderbilt University School of Medicine.

MEDICAL STUDENT SCHOLARSHIPS GIFT FUND. Funds are available to needy students through gifts donated by alumni and friends of Vanderbilt Medical School.

THE H. HOUSTON MERRITT SCHOLARSHIP. This endowed scholarship was established by H. Houston Merritt, a 1922 School of Medicine graduate.

THE JAMES PRESTON MILLER TRUST. This trust, left by the will of James P. Miller in memory of his father, James Preston Miller, provides funds to assist in the medical education of deserving young men and women at Vanderbilt University. Residents of Overton County, Tennessee, are to be given first preference, and other residents of Tennessee are to be given second preference.

THE COLEMAN D. OLDMAN HONOR SCHOLARSHIP. This endowed scholarship was established through testamentary trust agreements by the late Coleman D. Oldham and his sister Emma. Mr. Oldham, who lived in Richmond, Kentucky, was a 1924 graduate of the College of Arts and Science. The Oldhams stipulated that the scholarship be used to benefit worthy male students from Madison County, Kentucky, or if not available, worthy male students from Kentucky at large.

THE C. LEON PARTAIN, M.D., AND JUDITH S. PARTAIN SCHOLARSHIP FUND. This endowed scholarship was established in 1998 through a bequest of the late Grace McVeigh, BA, 1925, for the benefit of needy and worthy students at Vanderbilt University School of Medicine. The scholarship honors Dr. and Mrs. Partain for their service to Vanderbilt University Medical Center during Dr. Partain's tenure as Chairman of the Department of Radiology and Radiological Sciences, 1992–2000.

THE THOMAS W. RHODES STUDENT SCHOLARSHIP FUND. Funds provided by the will of Georgine C. Rhodes were left to Vanderbilt University for the purpose of establishing a scholarship fund in the School of Medicine.

THE RILEY SCHOLARSHIP. This endowed scholarship was established by members of the Riley family: Harris D. Riley, Jr., M.D.; Frank Riley; Richard F. Riley, M.D.; and William G. Riley, M.D., all of whom are Vanderbilt alumni.

THE CANBY ROBINSON SOCIETY STUDENT SCHOLARSHIP BENEFACTOR PROGRAM. Scholarships are made available to students from members who donate to this program.

THE ROSCOE R. ROBINSON, M.D., AND ANNE ROBINSON SCHOLARSHIP FUND. This endowed scholarship was established in 1999 through a bequest by the late Grace McVeigh, B.A.'25, for the benefit of needy and worthy students in the Vanderbilt University School of Medicine. The scholarship honors Dr. and Mrs. Robinson for their service to Vanderbilt Medical Center during Dr. Robinson's tenure as Vice Chancellor for Medical Affairs, 1980–1997.

THE HELEN AND LOUIS ROSENFELD ENDOWED SCHOLARSHIP FUND. This endowed scholarship was established by Helen Rosenfeld, a Vanderbilt University alumna, and Louis Rosenfeld, a 1936 School of Medicine graduate.

THE GEORGE E. ROULHAC MEMORIAL SCHOLARSHIP FUND. This fund was established in 1994 through a gift from the estate of Dr. Roulhac, M.D. '39. It provides tuition support for medical education.

THE WILLETT H. "BUDDY" RUSH SCHOLARSHIP. Established in memory of Dr. Rush, a 1941 graduate of the School of Medicine, this scholarship honors the dedication he showed to the practice of medicine and the Frankfort, Kentucky community. Awards are given in order of preference to students from Frankfort, Kentucky, the bluegrass region of Kentucky, and then the state of Kentucky.

THE RICHARD M. SCOTT FINANCIAL AID PROGRAM. This endowed scholarship was established by the Medical Class of 1988 to honor Richard M. Scott, Director of Financial Aid for the School of Medicine from 1970 to 1987.

THE JOHN SECONDI SCHOLARSHIP FUND. This endowed scholarship was established in memory of Dr. John Secondi, a 1970 School of Medicine graduate.

THE FRANK C. AND CONNIE EWELL SPENCER MEDICAL SCHOLARSHIP FUND. This endowed scholarship fund was established in 1997 by Dr. Frank Cole Spencer, M.D. '47 and his wife, Connie Ewell Spencer, B.A. '46, to honor his medical class of 1947 on the occasion of its 50th reunion. The scholarship is used to assist worthy students who would not otherwise be able to afford to attend the School of Medicine.

THE LESLIE M. SMITH AND EVELYN C. SMITH SCHOLARSHIP ENDOWMENT FUND This endowed scholarship fund was established in 1998 by Mrs. Evelyn Clark Smith, widow of Dr. Leslie McClure Smith, M.D. '30, to be used to assist needy medical students. Preference is given to those students from New Mexico and Kentucky.

THE JOHN N. SHELL ENDOWMENT FUND. This scholarship fund is provided by a bequest from the will of John N. Shell.

THE K. DOROTHEA AND JOSEPH G. SUTTON SCHOLARSHIP IN MEDICINE. This scholarship was established in 1995 through a gift from the estate of Dr. Sutton, M.D. '22, for the benefit of students with financial need pursuing the study of medicine.

THE IRENE BEDFORD WATERS SCHOLARSHIP. This scholarship was established by W. Bedford Waters, a 1974 graduate of the School of Medicine, in honor of his mother, Irene. The scholarship benefits medical students who have demonstrated financial need, with first preference going to minority students.

THE CHARLES E. AND MILDRED WORK SCHOLARSHIP. This endowed scholarship was established through a bequest gift by the late Dr. Charles E. Work, a 1935 graduate of the School of Medicine. The income is used to provide financial aid to needy and worthy medical students.

THE FRED C. WATSON MEMORIAL SCHOLARSHIP. This scholarship is made on the recommendation of the Medical School to students selected by a committee based in Lexington, Tennessee, to students who are graduates of Lexington High School and are residents of Henderson County.

THE JOE AND HOWARD WERTHAN FOUNDATION FUND. The funds made available by this foundation to Vanderbilt University are to be given to those students in the School of Medicine needing financial assistance.

THE DR. DAVID HITT WILLIAMS MEMORIAL SCHOLARSHIP FUND. This fund was established in 1998 through the bequest of Eugenia F. Williams in memory of her father, a successful financier, professor of obstetrics and gynecology, and medical practitioner in Knoxville, Tennessee. The income from the endowment is to be used to assist worthy and deserving students in the School of Medicine.

Other Scholarships

Other scholarships are available outside of the need-based institutional financial aid program. They are as follows:

THE ELBYRNE GRADY GILL SUMMER RESEARCH SCHOLARSHIPS IN OPHTHALMOLOGY AND OTOLARYNGOLOGY. These scholarships provide support for medical student summer research in the areas of ophthalmology and otolaryngology.

THE MARY AND WILLIAM O. INMAN JR. SCHOLARSHIP FUND. This fund was established by Miss Grace McVeigh to pay tribute to the many contributions to the Brunswick, Georgia, community by the Inmans. This fund supports students in the combined M.D./Ph.D. program.

MEADE HAVEN SCHOLARSHIPS IN BIOMEDICAL SCIENCES. Meade Haven scholarships in biomedical sciences have been endowed to provide support for medical students who have made a serious career commitment to obtain advanced experience and training in research in the biomedical sciences.

Revolving Loans

THE AMA/ERF LOAN FUND. Funds are available to needy students through gifts donated by the American Medical Association Education and Research Foundation.

THE F. TREMAINE BILLINGS REVOLVING STUDENT LOAN FUND. Established by Elizabeth Langford and friends, this loan fund honors Dr. Billings and his many contributions as friend and internist. It is to be used for the education of worthy medical students.

THE BLOSSOM CASTER LOAN FUND. This fund was established by Milton P. Caster, a 1949 School of Medicine graduate, in honor of his mother, Mrs. Blossom Caster.

THE O. D. CARLTON II LOAN FUND. This revolving loan fund was established by Hall Thompson in honor of O. D. Carlton II for needy third- and fourth-year medical students.

THE EDWARD F. COLE REVOLVING MEDICAL LOAN FUND. These funds are made available to students through contributions from Dr. Edward F. Cole, a Vanderbilt Medical alumnus.

THE FRANK M. DAVIS AND THEO DAVIS STUDENT LOAN FUND. This endowed loan was established by Frank M. Davis, a 1934 School of Medicine graduate.

THE MAX EISENSTAT REVOLVING STUDENT LOAN FUND. This fund was established to honor the memory of Dr. Max Eisenstat.

THE TINSLEY HARRISON LOAN FUND. This fund was established to assist needy and worthy medical students by Dr. T. R. Deur, a Vanderbilt Medical School alumnus, in memory of Dr. Harrison, a former teacher and clinician at the school.

THE GALE F. JOHNSTON LOAN FUND. The funds donated by Gale F. Johnston are to be used as a revolving loan fund for students in the School of Medicine.

THE W. K. KELLOGG FOUNDATION LOAN FUND. This fund was established through donations from the W. K. Kellogg Foundation.

THE LAUDIE AND EDITH MCHENRY REVOLVING LOAN FUND. This fund was established with the proceeds from the trust of Dr. Laudie E. McHenry, a 1953 School of Medicine graduate, for students enrolled in the School of Medicine.

THE VANDERBILT MEDICAL FACULTY LOAN FUND. This fund is made available by donations from members of the Medical School faculty to be used to defray the educational costs of disadvantaged students.

THE MEDICAL LOAN FUND OF LIFE AND CASUALTY INSURANCE COMPANY OF TENNESSEE. Through donations from the Life and Casualty Insurance Company of Tennessee, needy students are provided revolving student loans.

THE MEDICAL SCHOOL STUDENT AID LOAN FUND. This fund is made possible through contributions from alumni and friends

THE J. C. PETERSON STUDENT LOAN FUND. This fund was established in memory of Dr. J. C. Peterson to provide loan monies for deserving medical students.

THE COLONEL GEORGE W. REYER MEMORIAL LOAN FUND. This fund was established by Colonel George W. Reyer, a 1918 School of Medicine graduate.

THE LEO SCHWARTZ LOAN FUND. This loan fund was established through contributions from Dr. Leo Schwartz.

THE ROBERT E. SULLIVAN MEMORIAL LOAN FUND. Through the generosity of Robert E. Sullivan, a fund has been established to assist worthy and deserving medical students.

THE ROANE/ANDERSON COUNTY MEDICAL SOCIETY FUND. This revolving loan fund is given to a needy medical student, with preference given, when possible, to students from Roane, Anderson, and Morgan Counties of Tennessee.

THE THOMPSON STUDENT LOAN FUND. This fund is to be used as a revolving loan fund for students in the School of Medicine from Middle Tennessee.

THE VANDERBILT MEDICAL SCHOOL ALUMNI REVOLVING LOAN FUND. This fund was established through contributions from alumni.

Student Summer Fellowships

Student research under the sponsorship of members of the faculty of the preclinical and clinical departments is encouraged as an important part of the elective medical curriculum. Stipends vary from about \$2,000 to \$4,000 for the summer programs, depending duration of project. Limited funds for fellowship support are available on a competitive basis from individual departments within the Medical School, with matching support from the Dean's office. Funds are provided from a variety of sources, including the United States Public Health Service and various private foundations and health-interested organizations such as the local affiliates of the American Heart Association.

Research projects may be taken as electives for credit but without remuneration. Special arrangements can be made for participation in research programs abroad or in other medical schools in the United States. Individual departments or faculty members may also support student research experiences. Funds from all sources are becoming more difficult to obtain, but remain available, though limited.

A complete listing of summer research opportunities is available on the School of Medicine Web site.

Medical Scholars Program

The Medical Scholars Program is sponsored by the school and offers interested students a one-year, in-depth, research experience in addition to the traditional four years of medical school. The goal of the Medical Scholars Program is to foster an interest in research among medical students that may eventually lead them to pursue careers in academic medicine. The research opportunities encompass all departments of the School of Medicine and are aimed at giving medical students the opportunity to contribute to the process of discovery in either clinical or basic research laboratories.

All medical students at the Vanderbilt University School of Medicine, except those enrolled in the MSTP program, are eligible to apply to the program. Formal application to the Medical Scholars Program may be made in the spring of each year. The duration of the program is twelve consecutive months, beginning July 1. A stipend of \$20,000 is provided for each student. Criteria for selection include a student's interest in research and an appropriate research topic and mentor. Over 200 faculty members serve as potential advisers. The types of research available to students range from patient-oriented studies to epidemiological investigations to research research at the molecular level. Interested students should contact Bonnie M. Miller, M.D., Associate Dean for Medical Students.

Community Scholars Program

The Community Scholars Program is a summer opportunity offered to students who have completed the first year at Vanderbilt University School of Medicine. In this program, students work in pairs to improve community health and health education. Students work with a faculty adviser and a community adviser to design, implement, and study the outcomes of a community health–related project. This program provides a summer stipend and is housed in the Center for Health Studies. Barbara Clinton, Director of the Center for Health Services, directs the program. Interested students may obtain information and apply for this program through the Center for Health Services by calling (615) 322-4773.

Employment Opportunities for Spouses

Nashville is a middle-sized city (500,000) affording employment opportunities common to an industrial, business, and educational center. Major employers include Vanderbilt University, two national insurance companies, and the state government. Every attempt is made to find a position within the University for spouses of students. If interested, student spouses should make inquiry at the Vanderbilt Employment Center.

Financial Information for Joint Degree Programs

Students who are enrolled in joint degree programs (other than the MD/Ph.D.) with other schools in Vanderbilt University will apply for financial aid through the School of Medicine Financial Services Office during each year of their academic program. During years in which the majority of their studies are performed at other schools, they will be enrolled jointly as medical students and as students of the other school.



Financial Information for Other Single Degree Programs 2003/2004

Doctor of Audiology

Tuition, 1st, 2nd, 3rd years	\$24,000
Tuition, 4th year	5,000

The total estimated cost of attendance for a first year student is \$42,540.

Masters of Science in Medical Physics

Tuition (19 hours @ \$850/hr.)	\$16.150
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The total estimated cost of attendance for a first year student is \$30,720.

Masters of Science in Public Health

Tuition, 1st year (29 hours @ \$850/hr.)	\$24,650
Tuition, 2nd year (7 hours @ \$850/hr.)	5,950

The total estimated cost of attendance for a first year student is \$42,540.

Masters of Science in Clinical Investigatio

Tuition, 1st year (28 hours @ \$850/hr.)	\$23,800
Tuition, 2nd year (11 hours @ \$850/hr.)	9.350

The total estimated cost of attendance for a first year student is \$42,540.

Tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

Other Fees

Student Health Insurance Fee	\$1,228
Activity and Recreation Fee (1st and 2nd years)	282
Activity and Recreation Fee (3rd and 4th years)	333
Transcript Fee (One time only)	30

Payment of Tuition and Fees

One half of tuition, total fees, and other University charges are due and payable by 19 August. Second semester tuition and other University charges are due and payable by 7 January.

For late payment of fees, refund schedule, financial clearance, activities and recreation fee, and student health insurance information, see pages

102 - 103.

Financial Assistance

Approved educational expenses are met with funds from a combination of sources. Government loans that furnish significant loans to students are the Federal Subsidized and Unsubsidized Stafford Loan programs. Private alternative loans are also available.

Additional information and applications for financial aid are online at www.mc.vanderbilt.edu/medschool/finaid/finaid1.php. Applicants desiring more specific information about financial aid resources should contact the Medical School Office of Student Financial Services.



Research in Medical Sciences

Endowed Research Funds

THE RACHEL CARPENTER MEMORIAL FUND. This fund was established in 1933 by a gift from Mrs. Mary Boyd Carpenter of Nashville. The income derived from the fund is to be used for education in the field of tuberculosis.

THE BROWNLEE O. CURREY MEMORIAL FUND FOR RESEARCH IN HEMATOLOGY. This is a memorial fund created by the friends of Brownlee O. Currey. The income is being used for the support of research in the field of hematology.

THE JACK FIES MEMORIAL FUND. The income from a gift to Vanderbilt by Mrs. Hazel H. Hirsch as a memorial to her son, Jack Fies, is to be used to support research in the field of neurosurgery. It is hoped that subsequent donations will be made by those who may be interested in creating a larger fund for this phase of research.

THE JOHN B. HOWE FUNDS FOR RESEARCH. In January 1946, the members of the family of the late John B. Howe established two funds in the University to be known as the John B. Howe Fund for Research in Neurosurgery and the John B. Howe Fund for Research in Medicine. The expenditures from the funds for neurosurgery and medicine are administered through the Department of Surgery and the Department of Medicine.

THE BEQUEST OF AILEEN M. LANGE FOR MEDICAL RESEARCH. To be used for medical research in preventing and curing ailments of human beings.

THE ANNIE MARY LYLE MEMORIAL FUND FOR MEDICAL RESEARCH. This gift is to be used for basic or applied research in medical science, particularly cardiovascular research or another area of need.

THE NEUROLOGY RESEARCH FUND. Funds to be used for research efforts in the field of Neurology.

THE MINNIE J. ORR FUND FOR RESEARCH IN POLIOMYELITIS OR HEART DISEASE.

THE MARTHA WASHINGTON STRAUS—HARRY H. STRAUS FOUNDATION, INC. The foundation provides support for research in the Department of Medicine in the field of cardiovascular diseases

THE LESLIE WARNER MEMORIAL FUND FOR THE STUDY AND TREATMENT OF CANCER. This fund was established in 1932 in the memory of Leslie Warner of Nashville, Tennessee. Half of the founding grant was contributed by the nieces and nephews of Mrs. Leslie Warner.

Research Centers

Vanderbilt University School of Medicine encompasses a number of multidisciplinary research groups that are funded primarily by external sources. Many of the centers involve investigators from schools of the University other than medicine. A brief description of each center and its general activities follows.

Vanderbilt-Ingram Cancer Center

Harold L. Moses, Director

This center is concerned with all cancer-related efforts at Vanderbilt University Medical Center. It is a matrix center including 197 faculty members. In 1995, after a comprehensive review, the National Cancer Institute designated the center as one of its nationally recognized clinical cancer centers. It fosters interdisciplinary cancer patient care, cooperative bench research activities, bridging of basic and clinical research with clinical care activities, and education of predoctoral students, postdoctoral research fellows, and clinical residents and fellows. The E. Bronson Ingram Cancer Center administrative offices are housed on the sixth floor of the Frances Preston Medical Research Building and have approximately 15,000 square feet of research space in this area. Research laboratories are also housed on other floors of the Ann and Roscoe Robinson Medical Research Building and the Frances Preston Medical Research Building and in Light Hall, Medical Center North, and the Henry-Joyce Clinical Research Center in The Vanderbilt Clinic. Patient care activities occur in the Henry-Joyce Cancer Clinic, Vanderbilt Hospital, Children's Hospital, the Breast Cancer Clinic at the Village at Vanderbilt, and the Veterans Administration Medical Center.

The Vanderbilt-Ingram Cancer Center includes the A. B. Hancock Jr. Memorial Laboratory, focusing on molecular epidemiology and cancer prevention studies, and the Frances Williams Preston Laboratory, funded by the T. J. Martell Foundation and focusing on cancer genetics and gene therapy. Also included are six endowed chairs: Craig-Weaver Chair in Pediatrics, William L. Bray Chair in Urologic Surgery, Cornelius Abernathy Craig Chair in Medical and Surgical Oncology, Mary Geddes Stahlman Chair in Cancer Research, Benjamin F. Byrd Jr. Chair in Clinical Oncology, and Hortense B. Ingram Chair in Molecular Oncology. The eight research programs include Signal Transduction and Cell Proliferation, Host-Tumor Interactions, Gastrointestinal Cancer, Cancer Etiology, Cancer Genetics, Breast Cancer, Cancer Pharmacology, and Clinical Investigations. Core laboratories are transgenic, retroviral vector, cell imaging, DNA sequencing, human tissue acquisition, clinical trials, biostatistics, bioanalysis, peptide sequencing, and genetics.

Center for Clinical and Research Ethics

Stuart G. Finder, Director

Since its establishment in 1982, the Center has been devoted to developing multi-faceted programs serving the Medical Center and University communities and to helping cultivate a public that is informed by and supportive of the very finest in patient care, biomedical research, and ethical understanding. To those ends, Center faculty members pursue a variety of activities. These include establishing (in 1984) and staffing the Medical Center's Clinical Ethics Consultation Service; serving on the Medical Center Ethics Committee, teaching both required and elective courses at Vanderbilt's Schools of Medicine and Nursing, teaching undergraduate and graduate courses in Vanderbilt's Department of Philosophy, Graduate Department of Religion, the Divinity School, and the School of Law; providing lectures and other types of public presentation for area community groups—churches, schools, civic groups, health agencies, industry, and others; and publishing and participating in professional scholarship focused on health care ethics and ethics consultation.

There are three central aims to all work pursued by Center personnel. First is to understand the distinctive clinical and research practices and activities in which health care professionals engage, in the contexts where such practices and activities actually occur—e.g., hospitals, clinics, and laboratories. Second is to address the ethical issues present within these various settings and practices in a manner that is attentive to one's own placement within these settings and as associated with those practices. Third is to understand this complex involvement in the more general terms of the moral dimensions of human relationships.

General Clinical Research Center

David Robertson, Director

The Clinical Research Center (CRC) is a 21-bed unit located in Medical Center North. Its objectives are to encourage and support clinical research into the cause, progression, prevention, control, and care of human disease. It fulfills these objectives by creating a controlled environment for studies of normal and abnormal body function. The CRC provides space, hospitalization costs, laboratories, equipment, and supplies for clinical research by any qualified member of the faculty of any medical school department. The common resources of the CRC support all disciplines, with particular emphases on nutrition, oncology, neurology, cardiology, clinical pharmacology, endocrinology, gastroenterology, hematology, and diabetes. The CRC is supported by a grant from the National Center for Research Resources.

Clinical Nutrition Research Unit

Raymond F. Burk, Director

The CNRU is one of twelve nutrition research units established nationwide by the National Institutes of Health. Its objectives are to enhance clinical and basic nutrition research within Vanderbilt; to strengthen nutrition training of health care professionals; and to improve patient care by focusing attention on nutrition. The CNRU research base investigators include twenty-eight clinicians and scientists representing eight departments within the School of Medicine. Research activities include study of the role of growth factors on the maturation and differentiation of the intestinal tract; the metabolism and function of vitamins, amino acids, lipids and trace elements; and the interaction among nutrient metabolism, exercise, and energy expenditure. The CNRU core facilities include an energy balance core with whole room indirect calorimeter, a nutrition assessment core, a one-carbon metabolism core, a mass spectrophotometer core, an analytical core, a protein-immunology core, and an administrative core with a biostatistical component. The CNRU provides support for a Pilot and Feasibility Program for nutrition related research and a New Investigator Award for young researchers involved in basic or clinical research. The work of the CNRU is supported by a grant from the National Institute of Diabetes and Digestive and Kidney Diseases.

John F. Kennedy Center for Research on Human Development Pat R. Levitt. Director

The John F. Kennedy Center for Research on Human Development is one of fourteen national centers for research on mental retardation and developmental disabilities supported in part by the National Institute of Child Health and Human Development. The mission of the Kennedy Center is to improve, through research, training, and outreach, the quality of life of persons with disorders of thinking, learning, perception, communication, mood and emotion caused by disruption of normal development. The center is a university-wide research, training, diagnosis, and treatment institute, embracing faculty and resources available through Peabody College, Vanderbilt University Medical Center, and the College of Arts and Science. The center's interdisciplinary research programs address three broad areas: communication and learning, developmental neurobiology and brain plasticity, and emotion and mood.

The Kennedy Center has a distinguished record of training behavioral and biomedical scientists who are dedicated to solve problems of development and developmental disabilities. Center investigators are Vanderbilt faculty known nationally and internationally for their innovative research. The Kennedy Center is committed to moving research from the laboratory, to the classroom and clinic, to society.

Students have the opportunity to collaborate in research with mentorship from renowned scientists, especially with faculty in Vanderbilt research training programs associated with the Kennedy Center: mental retardation and developmental disabilities, special education, developmental psychopathology, neurogenomics, neuroscience, and vision science. Observation, practicum, and clinical experiences are available in the center's clinical programs: the Susan Gray School for Children, an early childhood education/special education program of Peabody College and the Kennedy Center; the Reading Clinic; the Developmental Disabilities Behavior Clinic; and beginning in Fall 2004, the Family Research and Resources Clinic. The Kennedy Center is a participant in the Vanderbilt Brain Institute, a transinstitutional, interdisciplinary program to foster and facilitate neuroscience research, training, science education, and public outreach. Collaborative relationships with the Tennessee Departments of Education, Health, and Mental Health and Developmental Disabilities, and county school systems and community programs provide additional research and clinical opportunities.

Vanderbilt Diabetes Center

Daryl K. Granner, Director

The Vanderbilt Diabetes Center (VDC) encompasses the NIH-sponsored Diabetes Research and Training Center (DRTC), the Veterans Administration/Juvenile Diabetes Foundation-sponsored Diabetes Research Center (VA/JDF DRC), three NIH-sponsored training programs, and an extensive clinical care program.

The Vanderbilt Diabetes Research and Training Center (DRTC) involves sixty-five participating faculty members from fourteen departments, schools, and colleges of the University. The center is organized into three components: research, training and translation, and administration. The activities of the research component include core support for basic biomedical research and the Pilot and Feasibility Studies Program, which aids new investigators in testing the feasibility of new ideas before submitting grant proposals for long-term support. The demonstration and education component operates a model demonstration unit in which students in the health professions encounter patients with well-characterized diabetes who have volunteered for approved clinical research programs. The administrative component develops outside resources for training and research grants and initiates and supervises such activities as the Diabetes Center Seminar Series and the Visiting Scientist Program. DRTC funding is provided by a grant from the National Institutes for Health.

The newly established VA/JDF DRC involves 18 participating faculty members from several different departments and schools of the VA and the University. The center has the overall project title "Metabolic Adaptations to Diabetes" and consists of three individual research projects and a clinical services core. The activities of the research component combines basic biomedical research with a heavy emphasis on patient-oriented clinical studies. A broad spectrum of topics clinically relevant to diabetes,

such as insulin resistance, defective body weight regulation, exercise, and hypoglycemia, are investigated by the center. The clinical services core 1) recruits and intensively treats diabetic patients for individual research projects; 2) translates research advances of the center to patients and scientists; and 3) teaches and raises awareness of diabetes to health care professionals caring for diabetes. The Nashville VA/JDF DRC is one of only three such centers in the country, and funding is provided by a joint grant from the Veterans Affairs Administration and the Juvenile Diabetes Foundation International.

Three NIH-sponsored training programs are administered through the VDC. These include the Molecular Endocrinology Training Program (preand postdoctoral trainees), the Diabetes and Endocrinology Training Program (postdoctoral), and the Student Summer Research Programs (medical student trainees). The Diabetes Clinical Care Program is administered by Dr. Alan Graber. He, along with two other full-time clinicians and the several members of the Diabetes-Endocrinology Division, provide state-of-the-art care to persons with diabetes and other endocrine disorders.

Center for Lung Research

Brian Christman, Director

This center stimulates and facilitates lung research and training throughout the institution. Center investigators represent nine departments and are engaged in a wide range of basic and clinical research. These investigators work both individually and in collaboration with many other faculty members. The center serves to identify important research opportunities, to assist investigators in identifying collaborators within and without the institution, and to facilitate the research process by providing physical facilities, financial support, and administrative and scientific expertise. The center maintains close relationships with the departments of medicine, cell biology, pediatrics, pathology, biomedical engineering, pharmacology, and molecular physiology and biophysics, as well as with other departments in the schools of medicine and engineering.

Center in Molecular Toxicology

F. Peter Guengerich, Director

The Center in Molecular Toxicology is an interdepartmental system that provides an environment for research in molecular toxicology by center investigators and affiliated faculty in the departments of biochemistry, cell biology, chemistry, medicine, pathology, and pharmacology. The National Institute of Environmental Health Sciences has aided the center with a grant since 1967. The center provides ongoing support for key faculty members in toxicology; supports core facilities, used on a collaborative basis for research efforts; and fosters collaboration through seminar programs, symposia, and pilot project support. Faculty members are in-

volved in a wide spectrum of research interests covering the chemical and biological aspects of molecular toxicology. Key research interests include (a) enzymatic oxidation and conjugation, (b) oxidative damage, (c) DNA damage and mutagenesis, (d) regulation of gene expression, and (e) environmental pathology.

George O'Brien Center for the Study of Renal Disease

Raymond C. Harris, Jr., Director

The objective of the Nephrology Center is to contribute to the understanding of pathogenic mechanisms leading to progressive nephron destruction in the kidney. Investigators from the departments of medicine, pediatrics, surgery, cell biology, pharmacology, and pathology bring a multidisciplinary approach to bear on specific mechanisms leading to glomerular and tubular dysfunction and progressive glomerular destruction. Center funding is derived primarily from the National Institutes of Health grant entitled "Biology of Progressive Nephron Destruction."

Center for Matrix Biology

Billy Hudson, Director

The goal for the Center for Matrix Biology is to stimulate interdisciplinary research in extracellular matrix as it relates to organ development, cancer, and the pathophysiology of tissue fibrosis. It provides a new focus on the biochemical and structural aspects of matrices that should complement all of the biological studies in pathophysiology and molecular biology already in place.

Center for Pharmacology and Drug Toxicology

Jason D. Morrow. Director

Research in the center is conducted by fifteen investigators in the departments of pharmacology and medicine, working in a program that joins clinical investigation with science at the molecular level. The research addresses the pharmacology of prostaglandins, leukotrienes, and other lipid mediators, as well as their participation in the pathophysiology of allergy, asthma, and cardiovascular disease. Funds for the support of the center come from the National Institute of General Medical Sciences.

Center for Reproductive Biology Research

Marie-Claire Orgebin-Crist, Director

Thirty-four faculty members from ten departments in the School of Medicine and the College of Arts and Science participate in the work of the center. Basic and clinical research focuses on four areas: the male reproductive system; the female reproductive system; fertilization, implantation, and embryonic development; and reproductive endocrinology. Center financing is provided by a training grant from the National Institute of Child Health and Human Development and from research grants related to both basic and clinical aspects of the reproductive sciences.

Vanderbilt Brain Institute

The Vanderbilt Brain Institute (VBI) promotes and facilitates the discovery efforts of Vanderbilt neuroscientists, the training of undergraduate and graduate students, and the coordination of public outreach in brain sciences. Research endeavors in the VBI include more than two hundred scientists from forty departments, centers, and institutes across the campus, spanning a spectrum of study from molecules to the mind.

Vanderbilt's neuroscience training programs foster the development of trainees to independent research scientists and educators, preparing them for careers in an integrative discipline. Students in the graduate neuroscience training program have the option of a curriculum and research program that emphasizes either cellular/molecular or integrative/cognitive neuroscience and are mentored by a distinguished training faculty reflecting the multidisciplinary nature of the field.

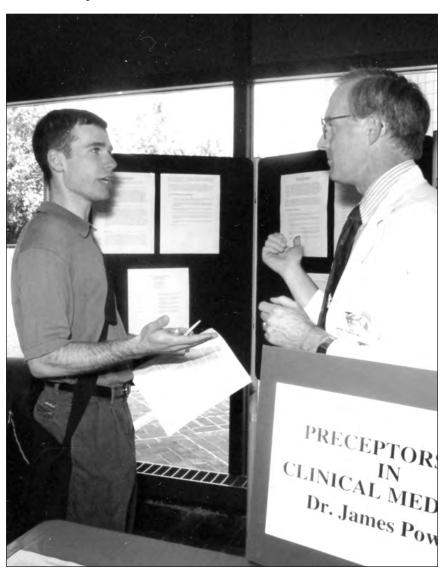
The VBI is also committed to educating the public about the extraordinary advances in brain research and how those discoveries significantly affect many aspects of people's lives. The institute annually sponsors Brain Awareness Month, a unique opportunity for Vanderbilt neuroscientists to interact with and educate the greater Nashville community about the progress, promise, and benefits of brain research.

The Vanderbilt Brain Institute is located in Medical Research Building III, with administrative offices on the first floor as of summer 2003. Contact VBI at (615) 322-3532, e-mail brain.institute@vanderbilt.edu, or visit the Web site at http://braininstitute.vanderbilt.edu.

Women's Reproductive Health Research Center

The Women's Reproductive Health Research Center was established in 1999, with principal funding from the National Institute of Child Health and Human Development, as part of the Specialized Cooperative Centers Program on Reproduction Research. This center's purpose is to promote clinically focused research programs at institutions that possess research strength in both basic science and clinical medicine. At Vanderbilt, our center has developed a program that is broadly focused on promotion of reproductive health by increasing our understanding of normal reproductive biology, as well as the dysfunction associated with such diseases as the abnormalities of pregnancy, dysfunctional uterine bleeding, endometriosis, and cancer. In addition to support from the National Insti-

tutes of Helath, our center receives support from the Endometriosis Association for our international research and training program in endometriosis research. This training program supports collaborations among basic and clinical scientists within the multidisciplinary research environment at Vanderbilt, with a focus on the care of women with endometriosis and associated diseases. The over-arching goal of our center is to move scientific discoveries of reproductive disease from bench to bedside to improve the health care of women.





Courses of Study



School of Medicine Departments

Anesthesiology

Biochemistry

Biomedical Informatics

Cancer Biology

Cell and Developmental Biology

Emergency Medicine

Family Medicine

Hearing and Speech Sciences

Medical Administration

Medicine

Microbiology and Immunology

Molecular Physiology and Biophysics

Neurology

Obstetrics and Gynecology

Ophthalmology and Visual Sciences

Orthopaedics and Rehabilitation

Pathology

Pediatrics

Pharmacology

Preventive Medicine

Biostatistics

Pharmacoepidemiology

Psychiatry

Radiation Oncology

Radiology and Radiological Sciences

SURGICAL SCIENCES

General Surgery

Neurosurgery

Oral and Maxillofacial Surgery

Otolaryngology

Pediatric Surgery

Plastic Surgery

Thoracic and Cardiac Surgery

Urologic Surgery

INTERDISCIPLINARY COURSEWORK

Anesthesiology

CHAIR Jeffrey R. Balser

VICE CHAIR Michael S. Higgins

EMERITI PROFESSORS M. Lawrence Berman, John J. Franks, Joanne Lovell Linn PROFESSORS John T. Algren, Jeffrey R. Balser, Jayant K. Deshpande, John Watson Downing, David Michael Lovinger, Bradley E. Smith, Kevin Strange

ADJUNCT PROFESSORS Jayakumar Reddy Kambam, Winston Clive-Victor Parris, B. V. Rama Sastry

ASSOCIATE PROFESSORS Jill K. Boyle, Gilberto Carrero, John G. D'Alessio, Eric Delpire, Shannon L. Hersey, Michael S. Higgins, Steve A. Hyman, Benjamin W. Johnson, Jr., Ira S. Landsman, Thomas C. Lewis, Janice M. Livengood, Addison K. May, Michael G. Richardson, Garry V. Walker

ASSOCIATE CLINICAL PROFESSOR T. Cameron MacCaughelty

ADJUNCT ASSOCIATE PROFESSORS David Dwight Alfery, John W. Culclasure

ASSISTANT PROFESSORS Arna Banerjee, Michelle Margaret Barnes, Frederick E. Barr, John Allan Barwise, Eswara C. V. Botta, Barry W. Brasfield, Stephen P. Bruehl, Susan A. Calderwood, Meera Chandrashekar, Ok Yung Chung, Kevin B. Churchwell, Kevin P. M. Currie, Hugh U. Dalton, Robert J. Deegan, Brian S. Donahue, Susan S. Eagle, Letitia Jane Easdown, Hani El-Alayli, Clark H. Galbraith, Sarah E. Gillespie, Marek Grzeszczak, Stephen R. Hays, C. Scott Hoffman, Julie Kay Hudson, Alexander K. Hughes, Adrian A. Jarquin-Valdivia, Michael F. Karadsheh, Sabina Kupershmidt, Ellen Moseley Lockhart, Sandra V. Lowe, Letha Mathews, Stephanie Mouton, Richard M. Nass, Daniel E. Oaks, Nancy O'Dell, Ramachander Pai, Pratik Pandharipande, Ray Paschall, Jr., Neal R. Patel, Robert Marc Pousman, Mias Pretorius, Ramiah Ramasubramanian, Vidya Rao, Arathi Sambasivan, Venkatramanan Shankar, Kenneth G. Smithson, Paul J. St. Jacques, Carl William Stanberry, Mary B. Taylor, Annemarie Thompson, Lucia Daiana Voiculescu, Dila Vuksanaj, Mirjana Vustar, Ann Walia, Roslynn Elizabeth Webb

RESEARCH ASSISTANT PROFESSOR Prakash C. Viswanathan

ADJUNCT ASSISTANT PROFESSORS Henry W. Baggett, Claude L. Ferrell, Jeffrey Allen Friederich, Vijay Rani Makrandi, J. David Netterville, Michael J. Stabile, Geeta P. Wasudev

ASSOCIATES Stephen T. Blanks, Raymond F. Johnson

INSTRUCTORS Susan A. Calderwood, Richard C. Evans, Lawrence W. Freund, Donald F. Pierce, Jr., Jeffrey W. Shooks, Sally A. Watson

ADJUNCT INSTRUCTORS William W. Goldsmith, James A. Ramsey

CLINICAL INSTRUCTOR Jean-Terese Fischer

ASSISTANTS Adele Franzblau Kleinrock, Nimesh Patel, Neal W. Sanders, John Shields, Joshua L. Yarbrough

THE Department of Anesthesiology provides lectures and offers a two-and-a-half-week selective for third-year students on aspects of anesthesiology within the Surgery clerkship. Fourth-year elective courses are offered in the pharmacology of anesthesiology, as well as a clerkship that includes operating room experience in the conduct of anesthesia.

Biochemistry

CHAIR Michael R. Waterman

PROFESSORS EMERITI Harry P. Broquist, Frank Chytil, Stanley Cohen, Leon W. Cunningham, Willard R. Faulkner, Robert A. Neal, Oscar Touster, Benjamin J. Wilson

PROFESSORS Richard N. Armstrong, Jorge H. Capdevila, Richard Caprioli, Graham F. Carpenter, Walter J. Chazin, F. Peter Guengerich, David L. Hachey, Carl G. Hellerqvist, Scott W. Hiebert, Billy Gerald Hudson, Tadashi Inagami, Daniel Christopher Liebler, Lawrence J. Marnett, David E. Ong, Neil Osheroff, Jennifer A. Pietenpol, John A. Phillips III, Virginia L. Shepherd, James P. Tam, Conrad Wagner, Michael R. Waterman VISITING PROFESSOR Tsutomu Shimada

RESEARCH PROFESSORS Essam E. Enan, Donald W. Horne, Carol A. Rouzer ADJUNCT PROFESSORS Marcia E. Newcomer, Gaynor C. Wild, Ronald M. Wisdom ASSOCIATE PROFESSORS Bruce Carter, Thomas N. Oeltmann, James G. Patton, Charles R. Sanders II, Joe Zhizhuang Zhao

RESEARCH ASSOCIATE PROFESSORS Robert J. Cook, Benjamin J. Danzo, Satoru Eguchi, Raymond L. Mernaugh, Masaaki Tamura

ASSISTANT PROFESSORS David Cortez, Diane S. Keeney, Andrew J. Link, Zu-Wen Sun, Munirathinam Sundaramoorthy

RESEARCH ASSISTANT PROFESSORS Pierre Chaurand, Amy-Joan Lorna Ham, Jaison Jacob, Norio Kagawa, Zigmund Luka, Laura Sera Mizoue, Jeffrey Kyle Myers, Takaaki Senbonmatsu, Jarrod A. Smith, Eugenia M. Yazlovitskaya

ADJUNCT ASSISTANT PROFESSOR Wayne P. Wahls

RESEARCH INSTRUCTORS Shibani Bhattacharya, Dale Shannon Cornett, David B. Friedman, Chuan Ji, Galina I. Lepesheva, Hong-Jun Liao, Chaitanya Suresh Nirodi, Larissa M. Podust, Oleg Yu Tikhomirov, Lisa J. Zimmerman

ASSISTANTS Hans Rudolf Aerni, Karen Angel, Philip J. Kingsley, Yufen Wang

THE Department of Biochemistry offers to first-year students basic information on the chemistry of living organisms. Electives available to students at all levels include such topics as nutritional biochemistry; toxicology; fundamentals of human nutrition; advanced biochemistry; genes and their regulation; clinical biochemistry; lipid chemistry, metabolism and transport; nutrition rounds; chemical mechanisms of enzyme catalysis; and reproductive biology. Research experience in biochemistry and nutrition is available to fourth-year students. The department offers as electives in the first, second, and fourth years a biochemistry seminar and a course in special problems in nutrition. A preceptorship in biochemistry is also offered in the fourth year.

Required Courses

5012. Biochemistry. This course is designed to familiarize the student with the structure and function of biomolecules and to provide a general understanding of life processes at the molecular level. Topics to be covered include the chemistry, metabolism, and cellular functions of amino acids, proteins, nucleic acids, carbohydrates, lipids, and vitamins. Lectures are supplemented with clinical correlation sessions and small group conferences that

serve to integrate and broaden course material and to relate molecular processes to the study of human disease. FALL. Osheroff and staff.

5015. Advanced Biochemistry. Advanced Biochemistry Offered in place of Biochemistry 5012 for medical students with demonstrated advanced standing in Biochemistry. Selected topics are presented with particular focus on the biochemical/molecular mechanisms relevant to human physiologic and pathophysiologic processes. Lectures are supplemented with small group conferences that serve to integrate and broaden course material and to relate molecular processes to the study of human disease. FALL. Ong and staff.

Biomedical Informatics

CHAIR Randolph A. Miller

VICE CHAIR Kevin B. Johnson

PROFESSORS Nancy M. Lorenzi, Randolph A. Miller, Judy G. Ozbolt, William W. Stead, Elizabeth Weiner

ASSOCIATE PROFESSORS Steven Holloway Brown, Dario A. Giuse, Nunzia B. Giuse, Stanley E. Graber, Michael S. Higgins, Kevin B. Johnson, Edward K. Shultz

ASSISTANT PROFESSORS Constantin Aliferis, Dominik Aronsky, Erik M. Boczko, Mary E. Edgerton, Jim N. Jirjis, Neal R. Patel, W. Anderson Spickard III, Ioannis Tsamardinos, Lemuel Russell Waitman

RESEARCH ASSISTANT PROFESSOR Terri Tiechua Ni INSTRUCTORS Fern FitzHenry, William Gregg, Samuel Trent Rosenbloom

THE Department of Biomedical Informatics was established in 1993 to provide an academic base for those who engage in the study, invention, and implementation of structures and algorithms to improve communication, understanding, and management of biomedical information. An interdisciplinary seminar series brings together concepts from biomedical engineering, biometry, computer science, decision science, health policy, and library science. Electives offer an opportunity for independent study in one of these areas.

Cancer Biology

CHAIR Lynn M. Matrisian VICE CHAIR J. Ann Richmond

PROFESSORS Carlos L. Arteaga, R. Daniel Beauchamp, David P. Carbone, Raymond N. DuBois, Jr., Michael L. Freeman, Hallahan, Lynn M. Matrisian, Robert J. Matusik, Harold L. Moses, Vito Quaranta, J. Ann Richmond

ASSOCIATE PROFESSORS Stephen J. Brandt, Philip J. Browning, Ravi S. Chari, Sanjoy K. Das, Roy Andrew Jensen, Walter Gray Jerome III, Peng Liang, Josiah Ochieng, Richard

M. Peek, Jr., Cathleen C. Pettepher, Micheler Ricardo Richardson, Wendell G. Yarbrough

RESEARCH ASSOCIATE PROFESSORS James Oliver McIntyre, Robert Whitehead ASSISTANT PROFESSORS Jin Chen, Thao P. Dang, Pran Krishna Datta, Mark P. de Caestecker, Dan Alan Dixon, Josiane Eid, William M. Grady, Simon William Hayward, Susan Kasper, P. Charles Lin, Ambra Pozzi, Jeffrey Roser Smith, Cristina I. Truica, Alissa M. Weaver, Elizabeth Yang, Roy Zent

RESEARCH ASSISTANT PROFESSORS Kolari S. Bhat, Neil Adri Bhowmick, Guo-Huang Fan, Barbara Mary Fingleton, Brian K. Law, Rebecca S. Muraoka, Shimian Qu, Robbert Jacobus C. Slebos, Neng Yang, Fiona Elizabeth Yull

RESEARCH INSTRUCTOR Lisa J. McCawley ADJOINT INSTRUCTOR Ramkumar Menon

THE Department of Cancer Biology was established in 2000 and is responsible for instruction in histology as part of the required curriculum for first-year medical students. An opportunity for independent study in the area of basic cancer research is provided.

Cell and Developmental Biology

CHAIR Susan Rae Wente

VICE CHAIR Stephen R. Hann

PROFESSOR EMERITUS Alvin M. Burt III

PROFESSORS David M. Bader, H. Scott Baldwin, R. Daniel Beauchamp, David P. Carbone, Vivien A. Casagrande, Robert J. Coffey, Jr., Arthur Frederick Dalley II, Sudhansu K. Dey, Ford F. Ebner, James Richard Goldenring, Kathleen L. Gould, Steven K. Hanks, Stephen R. Hann, Jon H. Kaas, Robert J. Matusik, Michael H. Melner, Lillian B. Nanney, Eric G. Neilson, Jeanette J. Norden, Gary E. Olson, Marie-Claire Orgebin-Crist, John S. Penn, Roland W. Stein, Susan Rae Wente, Christopher V. E. Wright

ADJUNCT PROFESSORS David G. Greathouse, John Steven Halle

ASSOCIATE PROFESSOR EMERITUS James McKanna

ASSOCIATE PROFESSORS Stephen J. Brandt, Chin Chiang, David I. Greenstein, Christopher F. J. Hardy, David M. Miller III, David Brent Polk, William Evans Russell, Linda Sealy

RESEARCH ASSOCIATE PROFESSOR Robert Whitehead

ADJUNCT ASSOCIATE PROFESSOR Robert C. Bone

ASSISTANT PROFESSORS Timothy S. Blackwell, Philip J. Browning, Jin Chen, Mark P. de Caestecker, Chand Desai, Daniela Drummond-Barbosa, Christopher D. Ferris, Guo-qiang Gu, Raul J. Guzman, Roy Andrew Jensen, Anne K. Kenworthy, Peter A. Kolodziej, Tsutomu Kume, P. Charles Lin, James E. Sligh, Jr., E. Michelle Southard-Smith, Guanqing Wu, Elizabeth Yang, Tao Peter Zhong

RESEARCH ASSISTANT PROFESSORS Jeffrey L. Franklin, Susan Kasper, Jennifer L. Morrell, Subir Kumar Nag Das, Yuri A. Shostak, Ming-Zhi Zhang

INSTRUCTOR H. Wayne Lambert

RESEARCH INSTRUCTORS Ying Qi, Susan J. Ruff

THE Department of Cell and Developmental Biology is responsible for instruction in histology, gross anatomy, and the human nervous system as part of the required curriculum for first- and second-year medical students. Elective courses are offered by the department in areas of reproductive biology, advanced neurobiology, surgical anatomy, neurochemistry, and cell biology.

Required Courses

501.1. Cell and Tissue Biology. First year. Designed to give students a familiarity with the properties of cells, in particular their interactions with one another to compose the tissues and organs of the body. Emphasis is on the correlates between structure and function at both the light and electron microscopic levels so as to serve as a basis for understanding the physiological and biochemical activities of cells and tissues. SPRING. Pettepher.

5020. Gross Anatomy. This course focuses on the macroscopic structure of the human body and anatomic principles, which provide the basis for physical examination, and much of diagnosis and therapy in clinical practice. The course includes media presentations by faculty, which supplement the experiential learning through regional cadaveric dissection, on which the course is centered. An emphasis is placed on gaining an understanding of the autonomic nervous system and experience with cross-sectional and dimensional anatomy as it relates to current techniques of medical imaging. Student team presentations of anatomical clinical correlation are required. The course incorporates development (embryology) of the organs and systems studied. FALL. Dailey and staff.

5010. Cell and Tissue Biology. This course is designed to give students a familiarity with the properties of cells, in particular their interactions with one another as components of the tissues and organs of the body. Emphasis is placed on the correlates between structure and function at both the light and electron microscopic levels as a basis for understanding the physiological and biochemical activities of cells and tissues. SPRING. Pettepher.

5040. Medical Neurosciences. The purpose of this course is to provide second year medical students and graduate students with a solid understanding of the organization of the human central nervous system. The course attempts to integrate basic information from neuroanatomy, neurochemistry and neuropathology. Students will also be introduced to the most up-to-date research currently being conducted in neurobiology, with a special emphasis on research with potential clinical significance. Clinical material is provided by patient presentations, discussions of the impact of neurological disease on patients and their loved ones, and by an analysis of pathological cases. Two to four hours lecture and four hours of laboratory per week. FALL. Norden and staff.

Emergency Medicine

CHAIR Corey M. Slovis
PROFESSORS Eric Martin Chazen, Corey M. Slovis, Keith Wrenn
VISITING PROFESSOR Ron M. Walls
ASSOCIATE PROFESSORS Andrea C. Bracikowski, Timothy G. Givens, E. Paul Nance, Jr.,
Lawrence B. Stack, Seth W. Wright

ASSISTANT PROFESSORS Donald Hayes Arnold, Dominik Aronsky, Richard S. Belcher, James F. Bihun, Joan Margaret Collier, Stephanie H. Eidson, Robin R. Hemphill, Daniel P. Himes, Ian D. Jones, William E. Lummus, Susan Kathleen Marlow, Jeffry P. McKinzie, Doris Elise Powell-Tyson, Steven T. Riley, Sally Santen, Gary R. Schwartz, Charles M. Seamens, Donna L. Seger, R. Jason Thurman, Glynis Anderson Walsh, Steven John White

ASSISTANT CLINICAL PROFESSORS Paul M. Bergeron, Kevin J. Bonner, Anna H. Bradham, Laurie M. Lawrence, Brian R. McMurray, Steven R. Meador, Wayne E. Moore, John Hannon Proctor

SENIOR ASSOCIATE Judy Jean Chapman

INSTRUCTORS Rene Alison Asaro, Thomas L. Brown, Kelly M. Butler, Joel M. Clingenpeel, David Z. Dalu, John M. Hardin, Tiffany Elder Hines, Allison Shivers McBride, Shelia P. McMorrow, Patrick J. Meehan, Marc Mickiewicz, Timothy Preston Myers, Jill Cole Obremskey, Kenneth Hugo Palm, John Paul Rohde, Mary D. Titus
CLINICAL INSTRUCTORS Rachel T. Kaiser, David W. Lawhorn, J. Raymond Pinkston

THE Department of Emergency Medicine offers an introductory elective course for first- and second-year students to acquaint them with emergency medical services, including ambulance ride-alongs and observation time in the Emergency Department (ED). Additionally, there is a required fourth year emergency medicine course, one month in length, consisting of 20 to 25 hours a week of lectures and 12 to 15 eight-hour clinical shifts, either in the main ED at Vanderbilt, the Pediatric ED at Vanderbilt, or the ED at St. Thomas Hospital.

Required Course

5950. This required four-week clerkship introduces the senior medical student to the specialty of Emergency Medicine. Students independently interview and examine patients who present to the Emergency Department with a variety of complaints. They will work closely with faculty and senior residents to formulate treatment plans and will participate in procedures and therapeutic interventions. Students will attend 3-5 daily interactive conference weekdays. Lab sessions will review airway skills, splinting and emergency procedures. Students will receive ACLS training and certification during the rotation. Each student will be assigned 12 clinical shifts during the month, which will include some night and weekend shifts. Students will have shifts at 3 different Emergency Departments, and must be able to provide their own transportation. This is a time-intensive clerkship and students should be available for the entire four weeks. A student leave pass will be required for any absences. Prerequisite: 4th Year student. The course may be taken in June after early completion of 3rd year, with approval by the course directors. Not offered in April. Santen and Slovis

Family Medicine

PROFESSOR Roy L. DeHart CLINICAL PROFESSORS Thurman L. Pedigo, Sr., William MacMillan Rodney ASSISTANT PROFESSOR Gene Alan Hannah CLINICAL INSTRUCTORS Gregg P. Allen, Charles A. Ball, Elizabeth B. Burgos, Raul Coronado, Elizabeth Harlan Crowe, Shawn N. Gentry, James Norris Johnson, Earl L. Kelly, Charles T. Marable, Scott R. Parker, James H. Pogue, Tony L. Ross, Alex James Slandzicki. Ruth Carr Stewart

FAMILY physicians are seen as holding pivotal positions to ensure the delivery of comprehensive and personalized health care. Twenty-seven percent of all office visits are made to family physicians. Their role, along with other primary care providers, is very important in making the optimal use of health resources. By involvement in training family physicians, medical schools gain the opportunity to develop strategies that improve the relevance of medical education and medical practice in meeting people's health needs.

Required Courses

5100. Primary Care Medicine. All fourth year students will have a four-week unit in an ambulatory primary care setting. Students will chose an experience in outpatient internal medicine, family medicine, or pediatrics. Practice sites include ambulatory medicine or pediatric clinics in the community. Students may also arrange a primary care experience outside of Nashville subject to the approval of the course directors. The clinic experience is supplemented by various conferences and a home health or hospice visit. In addition all students will complete the core didactic lecture series that include exercises in problem based learning, role-plays to foster interview skills, and a program in risk management. Prerequisite: Medicine 502, Pediatrics 502, Surg 502. All units except February. Gigante and Spickard.

Hearing and Speech Sciences

CHAIR Fred H. Bess

PROFESSORS EMERITI Russell J. Love, Judith Rassi, R. Edward Stone, Jr.

PROFESSORS Fred H. Bess, Stephen M. Camarata, Edward Gage Conture, D. Wesley Grantham, Gary P. Jacobson, Howard S. Kirshner, H. Gustav Mueller, Ralph N. Ohde, Robert H. Ossoff, Robert T. Wertz

VISITING PROFESSOR Richard W. Woodcock

RESEARCH PROFESSOR Teris K. Schery

ADJUNCT PROFESSORS Michael E. Glasscock III, Linda Jean Hood, Harold R. Mitchell, Eugene C. Nelson

CLINICAL PROFESSOR Gary W. Duncan

ASSOCIATE PROFESSORS Daniel H. Ashmead, Gene W. Bratt, Lee Ann C. Golper, David S. Haynes, Gerald B. Hickson, Anne Marie Tharpe

ADJUNCT ASSOCIATE PROFESSORS Judith S. Gravel, Russell Henry Mills

ASSISTANT PROFESSORS Patricia Flynn Allen, Renee Marie Brown, M. Candice Burger, Mary N. Camarata, Mary Sue Fino-Szumski, David Wade Gnewikow, Sue T. Hale, Devin Lochlan McCaslin, Todd A. Ricketts, Mary A. Schaffer, C. Melanie Schuele, Wanda G. Webb

RESEARCH ASSISTANT PROFESSORS Troy Alan Hackett, Robert Shawn Wall ADJUNCT ASSISTANT PROFESSORS Faith Wurm Akin, Linda L. Auther, G. Pamela Burch-Sims, Bertha Smith Clark, Rebecca M. Fischer, Barbara F. Peek, Amy McConkey Robbins

ASSISTANT CLINICAL PROFESSOR John R. Ashford ADJUNCT INSTRUCTOR Laura Knox

THE Department of Hearing and Speech Sciences offers work leading to the master's degree in speech-language pathology and hearing or speech science. The Ph.D. degree is offered in audiology, speech-language pathology, and hearing or speech science. In addition, the department offers a professional doctorate of audiology, the Au.D. Information on regulations and requirements for the Ph.D. programs and the master's degrees in speech-language pathology and hearing or speech science may be found in the *Graduate School Catalog*. Information on requirements for the Au.D program is outlined in the *Medical Center Catalog*. The research, teaching, and clinical programs associated with the Department of Hearing and Speech Sciences are housed in the Vanderbilt Bill Wilkerson Center for Otolaryngology and Communication Sciences.

Medical Administration

CHAIR Steven G. Gabbe

PROFESSORS EMERITI John E. Chapman, T. Mark Hodges

PROFESSORS Vera A. Stevens Chatman, F. Andrew Gaffney, Gerald S. Gotterer, George C. Hill, Roxane B. Spitzer

ADJUNCT PROFESSOR Deborah C. German

ASSOCIATE PROFESSORS Diana Marver, Donald E. Moore, Jr., Norman B. Urmy

ASSISTANT PROFESSORS Andrea Baruchin, Warren Ernest Beck, Craig R. Carmichel,

Alan E. Christman, Mary Early-Zald, Phyllis Ekdall, Lee Fleisher, Michelle Grundy, Michelle B. Marrs, Chanchai Singhanay McDonald, Janet Meeks, Martha K. Miers, Bonnie M. Miller, Stephen B. Moore, David S. Noel, Jack P. Nyiri, Bret L. Perisho, Frank Rosato, J. Richard Wagers, Jr., Lynn E. Webb

ADJUNCT ASSISTANT PROFESSOR Barbara Clinton

ASSOCIATE William R. Rochford

ASSISTANT G. Wayne Wood

THE Division of Medical Administration was established in 1969 to provide an academic base for those who engage in service, education, and research as these support the objectives of the Medical School. The division offers elective courses on subjects related to past and present trends in American medical education, the influence of various professional organizations and government bodies in medical education, issues in health care at all levels, and the transition to medical practice and medical practice management. Special subject seminars are encouraged.

Medicine

CHAIR Eric G. Neilson

VICE CHAIR FOR CLINICAL AFFAIRS AT ST. THOMAS HOSPITAL John J. Johnson VICE CHAIR FOR CLINICAL AFFAIRS AT VANDERBILT UNIVERSITY HOSPITAL Allen B. Kaiser VICE CHAIR FOR CLINICAL AFFAIRS AT THE VETERANS ADMINISTRATION HOSPITAL John H. Newman

VICE CHAIR FOR EDUCATION John S. Sergent

VICE CHAIR FOR FINANCE AND ADMINISTRATION Gregg T. Tarquinio

PROFESSORS EMERITI Fred Allison, Jr., Benjamin J. Alper, F. Tremaine Billings, Thomas G. Burish, Oscar B. Crofford, Jr., Roger M. Des Prez, Irwin B. Eskind, Gottlieb C. Friesinger II, H. Keith Johnson, Alexander C. McLeod, David N. Orth, Lloyd H. Ramsey, Joseph C. Ross, William D. Salmon, Jr., Paul E. Teschan, Alexander S. Townes, Richard M. Zaner

PROFESSORS Carlos L. Arteaga, David M. Bader, Gordon R. Bernard, Italo Biaggioni, William J. Blot, John Dunning Boice, Jr., Matthew D. Breyer, Wendy Weinstock Brown, Raymond F. Burk, Benjamin F. Byrd III, Jorge H. Capdevila, David P. Carbone, Graham F. Carpenter, Alan D. Cherrington, John W. Christman, Larry R. Churchill, Robert J. Coffey, Jr., Richard T. D'Aquila, Stephen Neil Davis, Roy L. DeHart, Robert S. Dittus, Raymond N. DuBois, Jr., J. Stephen Dummer, Sergio Fazio, John M. Flexner, Agnes B. Fogo, F. Andrew Gaffney, Alfred L. George, Jr., Thomas A. Golper, Alan L. Graber, Daryl K. Granner, John P. Greer, Marie R. Griffin, Kenneth R. Hande, Raymond C. Harris, Jr., Thomas R. Harris, J. Harold Helderman, Billy Gerald Hudson, lekuni Ichikawa, Tadashi Inagami, Harry R. Jacobson, Gordon L. Jensen, David H. Johnson, John S. Johnson, Allen B. Kaiser, Herman J. Kaplan, Lloyd E. King, Jr., Mark J. Koury, William J. Kovacs, Sanford B. Krantz, Marvin W. Kronenberg, John M. Leonard, Julia G. Lewis, Richard W. Light, MacRae F. Linton, Peter T. Loosen, James E. Loyd, Mark A. Magnuson, James M. May, Joseph K. McLaughlin, Clifton Kirkpatrick Meador, Barbara O. Meyrick-Clarry, Geraldine G. Miller, Randolph A. Miller, Jason D. Morrow, Harold L. Moses, John H. J. Nadeau, Eric G. Neilson, John H. Newman, John A. Oates, Nancy J. Olsen, Neil Osheroff, Rubens J. Pamies, Theodore Pincus, J. Ann Richmond, L. Jackson Roberts II, David Robertson, Rose M. Robertson, Roscoe R. Robinson, Dan M. Roden, Bruce J. Roth, Mace L. Rothenberg, Donald H. Rubin, Martin P. Sandler, William Schaffner, Friedrich G. Schuening, Gerald Schulman, John S. Sergent, Virginia L. Shepherd, Xiao Ou Shu, Ghodrat A. Siami, Corey M. Slovis, Raphael F. Smith, James D. Snell, Jr., Jeffrey A. Sosman, W. Anderson Spickard, Jr., William W. Stead, William J. Stone, George P. Stricklin, James Ward Thomas II, Douglas E. Vaughan, John Randolph Wilson, Alastair J. J. Wood, Kristy Freeman Woods, Wei Zheng

- ADJUNCT PROFESSORS Paolo Boffetta, Thomas O. Daniel, Michael D. Decker, Raymond M. Hakim, Tetsuro Kono, Carolo La Vecchia, Jorgen Helge Olsen, James R. Snapper, Henrik Toft Sorensen, John P. Sundberg
- CLINICAL PROFESSORS Robert H. Alford, W. Barton Campbell, Robert Seth Cooper, E. William Ewers, Fred Goldner, Jr., Laurence A. Grossman, Clifton Kirkpatrick Meador, William L. Moore, Jr., Harry L. Page, Jr., Thomas Guv Pennington, Lawrence K. Wolfe, Taylor M. Wray
- ASSOCIATE PROFESSORS Mark E. Anderson, Thomas M. Aune, George R. Avant, Joseph Albert Awad, Joey V. Barnett, Paul H. Barnett, Timothy S. Blackwell, Lewis S. Blevins, Jr., Paul E. Bock, Maurice C. Bondurant, Mark R. Boothby, Alan Stuart Boyd, Stephen J. Brandt, Richard M. Breyer, Nancy J. Brown, Philip J. Browning, Brian W. Christman,

Timothy L. Cover, John H. Dixon, Jr., G. Dewey Dunn, Kathleen Mary Egan, Glenn M. Eisen, Darrel L. Ellis, E. Wesley Ely, Frank A. Fish, James T. Forbes, Howard A. Fuchs, David Gailani, Stacey Ann Goodman, Stanley E. Graber, David W. Gregory, David William Haas, James R. Hamilton, Steven K. Hanks, David E. Hansen, Carl G. Hellerqvist, Scott W. Hiebert, Talat A. Ikizler, Kathy Jabs, Spyros A. Kalams, David Michael Kerins, Douglas S. Kernodle, Richard B. Kim, Robert H. Latham, John T. Lee, Christopher D. Lind, Samuel R. Marney, Jr., David J. Maron, William H. Martin, Howard R. Mertz, Shin Mineishi, Barbara A. Murphy, John J. Murray, Katherine T. Murray, Thomas N. Oeltmann, Richard M. Peek, Jr., Robert N. Piana, James W. Pichert, Michael Karl Porayko, Alvin C. Powers, James S. Powers, Stephen Paul Raffanti, David S. Raiford, Deborah W. Robin, R. Michael Rodriguez, Jeffrey N. Rottman, Alan B. Sandler, Richard P. Schneider, James R. Sheller, Walter E. Smalley, Jr., Thomas Stasko, C. Michael Stein, Richard S. Stein, Timothy R. Sterling, Charles W. Stratton, Craig R. Sussman, Yi-Wei Tang, Charles B. Thorne, Mark Stephen Wathen, Arthur P. Wheeler, Scott Matthew Williams, James P. Wilson, Ronald M. Wisdom, Robert J. Workman, Keith Wrenn, Joe Zhizhuang Zhao

RESEARCH ASSOCIATE PROFESSORS Hui-Fang Cheng, Igor Alexandrovich Feoktistov, Kristina E. Hill, Theodore Speroff, Ding-Zhi Wang, Robert Whitehead

ADJUNCT ASSOCIATE PROFESSORS Maria del Pilar Aguinaga, Maciej S. Buchowski, Paul C. McNabb II

ASSOCIATE CLINICAL PROFESSORS Mark S. Averbuch, Philip D. Bertram, Stanley J. Bodner, James R. Cato, Alan G. Cohen, Roy O. Elam III, James P. Fields, Rand T. Frederiksen, Richard W. Garman, Jr., Deborah C. German, John R. Gibson, Francis W. Gluck, Jr., John Hooper Griscom, Jacques Heibig, Marcus C. Houston, Joseph W. Huston, Henry S. Jennings III, Robert M. Johnson, Lester L. Porter III, Judson E. Rogers, Marvin J. Rosenblum, Sol A. Rosenblum, Dan S. Sanders III, Harrison J. Shull, Jr., Paul R. Stumb, James N. Sullivan, Michael D. Zanolli

ASSISTANT PROFESSORS Theodore R. Addai, Mehmet A. Agirbasli, Ban Mishu Allos, Jon R. Backstrom, Jordan D. Berlin, Daniel A. Birchmore, Mark J. Bliton, Karen C. Bloch, James P. Bracikowski, Wilmot C. Burch, Jr., Brenda J. Butka, Javed Butler, Victor M. Byrd, Karen Cassidy, Jin Chen, Sallaya Chinratanalab, Wichai Chinratanalab, Don B. Chomsky, Christine Hwayong Chung, David Robertson Coxe, Thao P. Dang, Dawood Darbar, Stacy F. Davis-Harrison, Mark P. de Caestecker, Catherine L. Dekle, Jan Stallings DeLozier, William D. Denney, Jose J. Diaz, Jr., Wonder Puryear Drake, Tom A. Elasy, Jeannine Z. P. Engel, Christopher D. Ferris, Mary Kathleen Figaro, Stuart G. Finder, Jay H. Fowke, Michael J. Fowler, Haydar Adib Frangoul, Jon Peter Fryzek, James V. Gainer III, Maureen Anne Gannon, G. Waldon Garriss III, William M. Grady, Ralf C. Habermann, David D. Hagaman, Katherine L. Hanson, Norman Chandler Hardman, Jr., Patricia Harrison, Tina V. Hartert, Richard L. Hock, Chukwuemeka Venat Ikpeazu, Waleed N. Irani, Mark W. Jacokes, Madan Jagasia, Shubhada Jagasia, Jim N. Jirjis, Jill L. Jones, Asha Kallianpur, J. Jonas Kalnas, Ayumi Kamina-Shintani, Hilary R. Kaplan, Bernice Karnett, Adetola Kassim, Neelam Kawatra, Diane S. Keeney, Lloyd G. King, Vladimir Kravtsov, Susan Faye Kroop, Tsutomu Kume, Lisa Hood Lancaster, Anthony James Langone, Robin Elizabeth Lapre, Mark A. Lawson, Albert Craig Lockhart, Christina L. MacMurdo, Ernest C. Madu, Glen C. Manalo, Wendy Jones Mangialardi, Pierre Pascal Massion, Charles E. Matthews, Michael E. May, Ingrid Mayer, William H. Maynard, Brendan F. McAdam, Michel Alice McDonald, Catherine C. McGowan, Lisa A. Mendes, Jami L. Miller, Robert F. Miller, Aaron P. Milstone, Sumathi K. Misra, Gilbert W. Moeckel, Brent Robert Moody, Paul L. Moots, David Scott Morgan, Sandra A. Moutsios, Harvey Johnson Murff, Laine J. Murphey, Anne Taggart Neff, Ronald Andrew Nelson, Reid M. Ness, David Bruce P'Pool, Jr., Don J. Park, Leon L. Parks III, R. Stokes Peebles,

Josh Favrot Peterson, Neeraja B. Peterson, Ambra Pozzi, Jan Ellen Price, Debra S. Rankin, William K. Reid, David Reyes, Elizabeth Ann Rice, Ivan M. Robbins, Russell Lawrence Rothman, Katherine L. Ruffner, Ruxana Taherally Sadikot, David G. Schlundt, David A. Schwartz, Donna L. Seger, William E. Serafin, Ayumi Shintani, Lisa Beth Signorello, James E. Sligh, Jr., Bonnie S. Slovis, Jeffrey Roser Smith, Michael Lee Smith, E. Michelle Southard-Smith, W. Anderson Spickard III, Renee A. Stiles, Catherine V. Stober, Munirathinam Sundaramoorthy, Melanie Swift, Takamune Takahashi, Simpson Bobo Tanner IV, Gregg T. Tarquinio, Grace P. Teal, George Edward Tiller, Cristina I. Truica, Karen D. Tsuchiya, Madhuri Vusirikala, Lorraine B. Ware, David D. Weinstein, Susan Wodicka, Patty Walchak Wright, Guanqing Wu, Kenneth W. Wyman, Mary I. Yarbrough, Ruth T. Young, Roy Zent, David Ziao-ming Zhao, Tao Peter Zhong, John A. Zic

RESEARCH ASSISTANT PROFESSORS Vladimir R. Babaev, Pichumani Balagurumoorthy, Olga P. Bondar, Dorin-Bogdan Borza, Marcela Brissova, F. Gregory Buchanan, Nada M. Bulus, Qiuyin Cai, Jian-Kang Chen, Kong Y. Chen, Chun-Hua Dai, Qi Dai, Maria Pia G. DePasquale, Andre Michael Diedrich, Michael M. Dikov, John P. Donahue, Mesut Eren, Andrew Carl Ertl, Daniel J. France, Yu Fei Guan, Chuan-Ming Hao, Stanley B. Higgins, Dawn A. Israel, Prapaporn Kopsombut, Holger Kulessa, Kirk B. Lane, Xia Li, Elizabeth Malone Link, John T. Loh, Zhongjun Luo, Amy S. Major, Hyacinth R. C. Mason, Mark S. McClain, Terri Tiechua Ni, Vadim K. Pedchenko, Laureta M. Perriott, Lara C. Pupim, Zhonghua Qi, Doris C. Quinn, Genbin Shi, Mohammed Sika, Amar B. Singh, Tuulikki Sokka, Narasimhachar Srinivasakumar, Yan Ru Su, Elena E. Tchekneva, Carlos G. Vanoye, Christo Dimitro Venkov, Paul A. Voziyan, Wanqing Wen, Lan Wu, Yuejin Wu, Xiaochuan Xu, Patricia Gale Yancey, Gong Yang, Tao Yang, Yajun Yi, Michail Zaboikin, Rong Zhang, Yahua Zhang

ADJUNCT ASSISTANT PROFESSORS John W. Boldt, Jr., Roberto Cruz-Gervis, Mark Arden Pierce

ASSISTANT CLINICAL PROFESSORS David W. Allen, Vinita Anand, Edwin B. Anderson, Jr., John E. Anderson, Jordan Ross Asher, Kenneth S. Babe, Jr., Michael T. Baker, Robert J. Berkompas, Jia Bi, Margaret M. Brennan, Thomas W. Butler, Michael D. Callaway, Thomas H. Callaway, Angelo Canonico, Quinn Capers IV, John Lai C. Ch'ng, Andre Lemont Churchwell, Keith B. Churchwell, Walter K. Clair, Jack W. Coggeshall, Renee L. Cohen, Marvin Harris Cohn, Marshall H. Crenshaw, Natalie Renee Dickson, Bryce Dixon, Tracey Doering, Glenn C. Douglas, Deborah R. G. Doyle, Eric L. Dyer, David L. Edwards, Steven A. Embry, Jeffrey B. Eskind, Cheryl Ann Fassler, Marquetta L. Faulkner, J. Vance Fentress, Joseph L. Fredi, Gottlieb Christian Friesinger III, Clifford L. Garrard, Jr., James A. Gaume, Mark Dennis Glazer, Mark S. Goldfarb, Robert P. Graham, Jr., Antonio M. Granda, Tina D. Covington Gresham, Connie Allen Haley, David P. Hall, Mary Alice Harbison, William B. Harwell, Jr., James B. Haynes, Jr., A. Clyde Heflin, Jr., David C. Heusinkveld, Michael Hill, Stephen L. Hines, Rob Reid Hood, Robert D. Hoover, Jr., David H. Horowitz, Gwendolyn A. Howard, Aldo A. Ilarde, John W. Interlandi, Susan M. Jacobi, J. Thomas John, Jr., Mark R. Kaplan, James S. Kennedy, Murali Krishna Kolli, Robert P. LaGrone, Ruth E. Lamar, James A. Lancaster, Richard G. Lane, Dana L. Latour, Stanley M. Lee, Russell B. Leftwich, Thomas J. Lewis, Jr., Michael J. Magee, Kevin M. Maquiling, Francisco Mayorquin, Robert Wallace McClure, Debra J. McCroskey, Brian R. McMurray, John R. McRae, Marvin Porter Meadors III, Alvin H. Meyer, Jr., Carl E. Mitchell, Gary L. Mueller, John Adrian Mulder, Patrick B. Murphy, Kevin J. Myers, G. Stephen Nace, Allen J. Naftilan, P. Renee Obi-Brown, Bjarki J. Olafsson, Douglas J. Pearce, James E. Powell, Ann H. Price, Ronald E. Pruitt, Bruce Earle Richards, Thomas Ramsey Richardson, Vito K. Rocco, Gregory P. Rowbatham, Sean P. Ryan, John D. Scott, Daniel K. Skarzynski, Murray W. Smith, William Barney Smith, Suzanne R. Snyder, Eli Steigelfest, John Allen Strupp, Thomas A. Tesauro, John G.

Thompson, Jr., Jon J. Tumen, F. Karl VanDevender, Paul W. Wheeler, Lisa McDonald Whiteaker, Craig Wierum, W. Carter Williams, Jr., Brian D. Williamson, Morgan Jackson Wills, Eugene J. Winter, Bruce L. Wolf, Christina Ynares

SENIOR ASSOCIATE Lynda Denton Lane

ASSOCIATE Victoria L. Harris

INSTRUCTORS Jeffrey B. Boord, Shelley Ellis, Emily M. Garland, Todd Hulgan, Roger F. Johnson, John P. Peach, Satish R. Raj, Samuel Trent Rosenbloom, Christianne L. Roumie, Peter J. Swarr, Richard J. Wall, S. Patrick Whalen, Ursula Poehling Whalen RESEARCH INSTRUCTORS Karen K. Deal, Iordanka Kourteva, Cunxi Li, Taiji Matsusaka, Wendell E. Nicholson, Muhammad Atif Siddigue

ADJUNCT INSTRUCTORS Matthew J. Abbate, John Q. Binhlam, Anna K. Hopla, Jeanette Sison Ilarde, Christopher C. McClure, M. Kevin Smith, Vianne Epino Villaruz, Laura F. Weikert, Bobby J. White

CLINICAL INSTRUCTORS Bradley N. Bullock, William D. Edmondson, Robert M. Hollister, Jeffrey L. Hymes, William H. Pettus, Robert S. Quinn, Howard Lee Salyer, Lucien C. Simpson

ASSISTANTS Daniel W. Byrne, Selvi N. Palaniappan, William H. Swiggart ADJUNCT ASSISTANT Sarah J. White

THE Department of Medicine offers four areas of required course work, two of them in the second year:

Second Year. Two courses: An interdepartmental course which introduces sophomore students to the basic laboratory techniques, methods, principles, and procedures of clinical medicine; and a course in the diagnosis of disease and the application of clinical medicine to patient care.

Third Year. Third-year medical students are assigned to the medical wards for a ten-week period for an intensive inpatient experience.

Fourth Year. Fourth-year medical students participate in an outpatient experience as well as a selective medical clerkship.

The Department of Medicine has many subspecialty divisions, and a number of different elective programs are available.

Required Courses

5011. Laboratory Diagnosis. This course formally introduces the second year medical student to the use of laboratory data in solving clinical problems. The course considers the manner in which tests are performed as well as the pathophysiology underlying abnormal test results. However, the emphasis is on the use of laboratory data in clinical problem solving. The student is expected to gain proficiency in using a logical approach to problem solving across a broad range of clinical problems. Specifically, the student will become proficient in defining a clinical problem, determining what information is needed to solve the problem, and then using the necessary information to either establish a diagnosis or to determine what further information is needed. Basic considerations regarding therapy will also be presented. Among the areas which are covered are anemia, disorders of white blood cells, coagulation and blood banking, limits of testing, kidney disorders including electrolytes and acid-base disorders, gastroenterology, rheumatology, body fluids, genetics, cardiology, and endocrinology. The course is taught primarily in full class lectures. SPRING. Stein.

5012. Physical Diagnosis. The introduction to clinical medicine course for second year students. Emphasizes interviewing skills, acquiring a medical database, and performing a

comprehensive physical examination. Utilizes a mentor system with groups of four students assigned to two faculty tutors who will guide them through history taking, patient examinations, and write-ups. Includes lectures, practical sessions, and patient encounters. SPRING. Rodriguez and staff.

5020. Clinical Clerkship. Third-year medical students participate in a ten-week, inpatient clinical clerkship under the aegis of the Department of Medicine, utilizing the clinical services of the Vanderbilt, VA, and Saint Thomas Hospitals. It is believed that learning is most vivid through direct experience with patients, obtaining histories, doing physicals and laboratory studies, and that it is amplified by reading and intensive contact with members of the teaching staff and house staff. Students are given considerable responsibility under close supervision of the teaching staff. The clerkship is divided into three rotations of which two are general medicine and one subspecialty medicine. Each student is assigned to a faculty/resident team and functions as an apprentice physician with graded responsibility for the evaluation and management of patients admitted to the medicine service. Students participate in all clinical and teaching activities of the service, including daily attending rounds, morning report, noon conferences, Grand Rounds, and the Thursday morning lecture series. In addition, students meet weekly in small groups with an assigned faculty member who conducts preceptor rounds for the entire ten weeks. Spickard and staff.

5013. Introduction to Clinical Nutrition. A multidisciplinary course that is intended to provide students with a practical knowledge of clinical nutrition that can be applied in future patient care. Vulnerable populations are described throughout the life cycle. Basic nutrition assessment and intervention techniques are presented. Useful nutrition resources are highlighted for clinicians and the public. The crucial role of nutrition in disease prevention and management are illustrated. SPRING (First half, second half [3 weeks]). Jensen

5040. Genetics/Interdisciplinary. New developments in genetics provide new insights into pathogenesis and promise to alter the practice of medicine. At the same time, genetic information has implications that affect the individual clinician-patient relationship and beyond, including families, access to insurance, and employment-- effects that could alter the use of this knowledge. This course will be taught using a primarily case-based method and will have the following goals: 1) to introduce students to the basic principles and methods of genetics, 2) to teach students how to obtain a good genetic history and how to find reliable genetic information, particularly using Web-based tools, 3) to use these tools to integrate some of the information learned earlier in the medical school curriculum, and 4) to introduce the ethical, legal, and social implications of genetic information and to provide tools for addressing these issues. SPRING. Clayton.

520. Ambulatory Clerkship. Fourth year. During a four-week unit each fourth-year student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or the emergency service. Leonard and staff.

Microbiology and Immunology

CHAIR Jacek Hawiger
PROFESSORS EMERITUS John H. Hash
PROFESSORS Dean Williams Ballard, Richard T. D'Aquila, Terence S. Dermody, Jacek

Hawiger, J. Harold Helderman, George C. Hill, Alexander R. Lawton III, Theodore Pincus, Donald H. Rubin, Henry Earl Ruley, Subramaniam Sriram, James P. Tam, James Ward Thomas II, Luc Van Kaer, Peter F. Wright

ASSOCIATE PROFESSORS Christopher R. Aiken, Thomas M. Aune, Joey V. Barnett, Mark R. Boothby, Mark R. Denison, G. Neil Green, David William Haas, Sebastian Joyce, Geraldine G. Miller, Nancy J. Olsen, Eugene M. Oltz, Louise A. Rollins-Smith, Paul W. Spearman

ASSISTANT PROFESSORS Timothy L. Cover, James E. Crowe, Jr., Hong Fang, Wasif Noor Khan, Andrew J. Link, Derya Unutmaz

RESEARCH ASSISTANT PROFESSORS Maria Pia G. DePasquale, Xueyan Liu RESEARCH INSTRUCTORS Robert S. Carter, Yi-An Lu, Ruth Ann Veach, Jin-Long Yang, Qitao Yu, Jing Zhou ASSISTANT Danya Liu

THE Department of Microbiology and Immunology provides firstyear students with basic understanding of micro-organisms and the host's response in health and disease. Several electives are also offered.

Required Course

5020. Microbiology and Immunology. Microbiology and Immunology. This provides a comprehensive course of microbiology and immunology encompassing the molecular cell biology of microbial agents and the Immune system, review of pathogenic bacteria, viruses, fungi, protozoa, and parasites. The course consists of lectures, conferences, and laboratory sessions and problem-based small group discussions focused on different pathogenhost relationships. SPRING. Van Kaer and staff.

Molecular Physiology and Biophysics

CHAIR Alan D. Cherrington

PROFESSORS EMERITI Tetsuro Kono, David N. Orth, Charles Rawlinson Park, Robert L. Post

PROFESSORS Albert H. Beth, G. Roger Chalkley, Alan D. Cherrington, Jackie D. Corbin, Stephen Neil Davis, John H. Exton, John C. Gore, Daryl K. Granner, Jonathan Lee Haines, William J. Kovacs, David Michael Lovinger, Robert L. Macdonald, Mark A. Magnuson, James M. May, Jane H. Park, David W. Piston, Roland W. Stein, Kevin Strange, Arnold W. Strauss, David H. Wasserman, P. Anthony Weil, John P. Wikswo, Jr. RESEARCH PROFESSOR Sharron H. Francis

ASSOCIATE PROFESSORS Matthew D. Breyer, Roger J. Colbran, Eric Delpire, Ronald B. Emeson, Owen Patrick McGuinness, Hassane S. Mchaourab, Jason Hall Moore, Richard M. O'Brien, Alvin C. Powers, Linda Sealy, Phoebe L. Stewart, Marshall Lynn Summar, Scott Matthew Williams

RESEARCH ASSOCIATE PROFESSOR K. Sam Wells

ASSISTANT PROFESSORS Aurelio Galli, Maureen Anne Gannon, Anne K. Kenworthy, Robert Allen Kesterson, Jr., Chun Li, Douglas Paul Mortlock, Masakazu Shiota, James S. Sutcliffe, Danny G. Winder, Chao-Lan Yu

RESEARCH ASSISTANT PROFESSORS Charles E. Cobb, Robert K. Hall, Eric J. Hustedt, Shawn E. Levy, Mary E. Courtney Moore, Richard Lee Printz INSTRUCTOR Richard R. Whitesell

RESEARCH INSTRUCTORS Sheng-Song Chen, Fu-Yu Chueh, Habibeh Khoshbouei, Hanane A. Koteiche, Qiaoming Long, Chiyo Shiota, Richard A. Stein, Kelly A. Taylor, Paula Watson-Clevenger, Mary Elizabeth Waltner-Law

ASSISTANTS Amy E. Bazyk, Genea S. Crockett, Molly Hogan Klein, Benita Lynch

THE Department of Molecular Physiology and Biophysics instructs first-year students in the essentials of physiological processes related to organs, tissues, and cells. Students may devise elective course work in any area of Molecular Physiology and Biophysics, in conjunction with a sponsoring faculty member. Opportunities to participate in research activities are available to fourth-year students as electives.

Required Course

5010. Human Physiology. This course consists of lectures, small group discussions, and clinical correlations designed to cover the essentials of human physiology for first-year medical students. SPRING. McGuinness and staff.

Neurology

CHAIR Robert L. Macdonald VICE CHAIR Howard S. Kirshner PROFESSOR EMERITUS John Sloan Warner

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INSTRUCTORS Muhammad Majid Al-Kaylani, Devon V. SharpeSong-Yi Yao RESEARCH INSTRUCTOR Stefan Engstrom

CLINICAL INSTRUCTORS Alan F. Bachrach, Jan Lewis Brandes, James Alan Fry, Shan-Ren Zhou THE Department of Neurology offers instruction in neurobiology to first-year students, seminars in clinical neurology to second-year students, and instruction in diseases of the nervous system to third-year students. Further clinical experience can be attained through specialty clinics offered as fourth-year electives. These clinics include the specialties of pediatric neurology, adult neurology, epilepsy, general neurology, movement disorders, and neuromuscular disease. Clerkships in neurology at affiliated hospitals are available, as electives, in the fourth year. Elective research programs in basic neuroscience or clinical neurology are available to students at all levels.

Required Course

5010. Clinical Clerkship. All members of the third year class are alternately assigned to the neurology wards for four weeks. Students are given direct responsibility for the evaluation and care of patients under the supervision of house staff and faculty. This brief exposure is intended to provide the students with an approach to patients with diseases of the nervous system. (339 MCS). Students will have two, two-week assignments on inpatient services, with exposure to outpatient neurology clinics as well. Kirshner and staff.

Note: Psychiatry and Neurology are given in an eight-week block. During this unit, students will participate in lectures and conferences given by both departments, and they will be assigned for two weeks to a neurology clinical setting and for six weeks to one or more clinical settings in Psychiatry.

Obstetrics and Gynecology

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H. Newton Lovvorn, Jr., Elizabeth Oldfield, Roy W. Parker, John E. VanHooydonk, Glenn A. Weitzman, Laura L. Williams

ASSOCIATE Elizabeth Colvin Huff RESEARCH INSTRUCTOR Ed Organ

CLINICAL INSTRUCTORS R. Terry Adkins, Darrington Phillips Altenbern, Donald R. Barnett, Michael Robert Bishop, Mary Anne Blake, Margaret Mary Brennan, Phillip L. Bressman, Roy P. Burch, Jr., Christina Cain-Swope, J. Calvin Channell, Andrew L. Chern, Katherine L. Clarke, Jackson Daniel Cothren, Donna J. Crowe, Richard John Davis, Nancy Ware Driver, Melanie A. Dunn, Abby C. Eblen, Joe Michael Edwards, Christie Lee Engel, Frederick L. Finke, Mary Anne Finney, Charles M. Gill, Paul A. Green, Jr., Erich B. Groos, Larry D. Gurley, Michael D. Hawkins, M. Bruce Hirsch, Charlie Joe Hobdy, Annette E. A. Kyzer, John W. Macey, Jr., Roseann Maikis, S. Houston Moran, Lisa B. Morgan, Merri B. Morris, H. Clay Newsome III, Sharon Marie Piper, Richard E. Presley, Melissa G. Reynolds, Ron N. Rice, Sherrie A. Richards, Jacqueline Lee Rodier, Robert L. Rosenfeld, Jack M. Rowland, Robin Elizabeth Sandidge, Nicole L. Schlechter, Shali Ricker Scott, Geoffrey H. Smallwood, Stephen M. Staggs, Jill Steier, Wilborn D. Strode, Michael Charles Swan, Catherine M. Thornburg, Anthony E. Trabue, Amy Gregory Weeks, Christine M. Whitworth, Carl E. Wingo, Anne Courter Wise, Grayson Noel Woods

THE Department of Obstetrics and Gynecology provides third-year students with an introductory experience in inpatient and outpatient obstetrics and gynecology. A number of electives are offered at various levels. These include reproductive biology, a high-risk obstetrics seminar, human sexuality, gynecologic pathology, and sex counseling. Research experiences and a clinical clerkship in obstetrics and gynecology are available as electives to fourth-year students.

Required Course

5020. Clinical Rotation. Each member of the third year class is assigned to the Obstetrics and Gynecology Service for eight weeks. The rotation includes three or four two-week rotations at Vanderbilt University Hospital and for some students a two-week rotation at Baptist Hospital.

Vanderbilt University Hospital. Each student will spend four weeks on the obstetrical rotation. While on the Maternal-Fetal Service this will include daily attending rounds and involvement with the Maternal-Transport Service. Students will also be assigned to the Perinatal Group Practice Service. In addition to being involved on Labor and Delivery, students will help manage obstetric patients that are followed in the Vanderbilt Clinic. Each student will spend four weeks on Gynecology. This will consist of either two weeks on the Gynecologic Oncology Service, two weeks on the General Gynecology Service or two weeks on Gynecology at Baptist Hospital. The Oncology Service provides exposure and management of gynecologic malignancies. The GYN oncologists conduct daily teaching rounds. The General Gynecology Service provides exposure to the medical and surgical management of patients seen at the Gynecology Clinic. The two-week rotation at Baptist Hospital provides excellent exposure to operative gynecology and to gynecology in the private practice setting. In addition, students are encouraged to observe surgical cases performed by the Reproductive Endocrinology Service. The eight-week rotation provides a broad-based introduction to the discipline of Obstetrics and Gynecology. Included in the ro-

tation is a lecture series given by the faculty covering general obstetrics, high-risk obstetrics, gynecologic oncology, reproductive endocrinology and general gynecology.

Ophthalmology and Visual Sciences

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ASSOCIATE PROFESSORS Sean P. Donahue, Karen Margaret Joos

ASSOCIATE CLINICAL PROFESSORS John E. Downing, Roy C. Ezell, Gary W. Jerkins, Karla J. Johns, Reginald S. Lowe, Jr.

ASSISTANT PROFESSORS Anita Agarwal, Min Shen Chang, Amy S. Chomsky, Juli Merrill Dean, Jeffrey David Horn, Jeffrey A. Kammer, Louise Mawn, Lawrence Merin, Azizur Rahman, Franco Maria Recchia, Andrew Alan Shinar, Robbin B. Sinatra, Uyen L. Tran RESEARCH ASSISTANT PROFESSOR Jin-Hui Shen

ASSISTANT CLINICAL PROFESSORS Everton L. Arrindell, Brian Stuart Biesman, John B. Bond III, Abraham Pacha Cheij, Edward F. Cherney, Robert L. Estes, Meredith A. Ezell, Walter W. Frey, Stephen E. Grinde, Robert R. Henderson, Deborah Ruark, Deborah D. Sherman, Ira Shivitz, Roy Trent Wallace, Thomas A. Wohl

ASSOCIATES Lori Ann Kehler, David J. Shen, Jeffrey Sonsino

INSTRUCTORS David G. Morrison, Diana Reeves

RESEARCH INSTRUCTOR Verra Rajaratnam

CLINICAL INSTRUCTORS E. Dale Batchelor, M. Terry Burkhalter, George N. Cheij, James W. Felch, Maria Garber, William G. Gates, Michael E. Green, Ralph F. Hamilton, Roderick N. Hargrove, Paul K. Herrell, Henry B. Kistler, Jr., Kimberly A. Klippenstein, Ben B. Mahan, Craig F. McCabe, Jamie Maria Monroe, Y. B. Paranjape, Martin I. Perlmutter, David O. Ranz, Howard R. Rosenblum, Rebecca Jones Taylor, Mary Frances Walker, Roseanna Aileen Webb, Daniel S. Weikert

ASSISTANT Georgia R. McCray

THE Department of Ophthalmology provides second-year students an introduction to ophthalmology and the methodology of clinical science. The department also instructs third-year students, providing them with clinical exposure in ophthalmology. An elective course available in the second year consists of lectures on the basic and clinical aspects of ophthalmology. An elective fourth-year clerkship and clinic provide intensive clinical experience.

Required Course

502. Ophthalmology Clinical Clerkship. Third year. Students may select ophthalmology as a two-and-a-half-week clinical rotation in the surgical subspecialty rotations. The student gains operating room experience, and a series of lectures is presented. Students also participate in general ophthalmology and ophthalmic subspecialty clinics. Staff.

Orthopaedics and Rehabilitation

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ASSISTANTS Robin E. Driver, Jeffrey Gordon

THE Department of Orthopaedics and Rehabilitation offers an introduction to clinical orthopaedic surgery. Elective specialty clinics and an elective clerkship are offered in the fourth year. The department also offers an opportunity for students to do research in orthopaedic surgery.

Required Course

502. Orthopaedics. Third year. Students may elect a two and one-half week rotation in orthopaedic surgery during the surgical clerkship. The experience involves student participation in ward patient care, clinic assignments, operating room experience, and daily conferences. Staff.

Pathology

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RESEARCH ASSISTANT PROFESSORS Kalyani Amarnath, Jian-Xiong Chen, S. Kent Dickerson, Lijun Ma, Susan Renee Opalenik, Ingrid M. A. Verhamme

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ASSOCIATES Maralie Gaffron Exton, Bruce W. Greig

INSTRUCTOR Yasin Kokoye

RESEARCH INSTRUCTORS Rasul Abdolrasulnia, Mayme Lee Lawrence, Sandra J. Olson, Richard L. Roberts, Holly L. Valentine, Jingping Xie

CLINICAL INSTRUCTORS Carla M. Davis, Larry M. Lewis

THE DEPARTMENT of Pathology offers instruction in the study of the pathogenesis of disease and the structural and functional alterations which result from disease, including the natural history of these changes. The elective program includes lecture and laboratory experiences and research programs.

Electives include basic concepts of cancer, neuropathology, gynecologic pathology, clinical pathology, renal pathology, and hematopathology. Electives for third- and fourth-year students, provide experiences in autopsy pathology, surgical pathology, and pathology specialty areas.

Research fellowships are available to post-sophomore students.

Required Course

5010. General and Special Pathology. General and special pathology presented by lectures, organ demonstrations, laboratory work and case studies. Gross and microscopic le-

sions characteristic of various diseases are studied and correlated with clinical data. Computer based lessons supplement other activities. Students participate in autopsies, and are assigned patient problems. FALL. Shappell and staff.

Pediatrics

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CLINICAL INSTRUCTORS Gail L. Addlestone, Norman Albertson, Sudha S. Amatya, Lori L. Amis, Clegg F. Austin, Wendy Pais Baker, Samuel R. Bastian, Leslie Farley Bennett, Kelly Bennie, Kimberly C. Bergeron, Robert J. Berman, Jr., Suzanne Kathleen Berman, Jon E. Betts, Deborah D. Beyer, Janet G. Blackwell, Eve McDonald Boger, Jennifer Bondurant, Linda Diane Brady, Lori Antoinette Breaux, Donald T. Brothers, Jr., Bradley N. Bullock, Thomas Joseph Carr, John Chambers, Stephen H. Claycomb, David Reid Collins, Meri Shaw Collins, Jo Ann Cook, Allison Cummings Couden, William Raymond Davidson, Jennifer Marie Donnelly, Edward D. Eastham, William D. Edmondson,

Timothy H. Eidson, Amy Hurst Evans, Elizabeth Heather Fairbank, Michelle Fiscus, Jill A. Forbess, Rebecca L. Frakes, Beverly A. Frank, Brian S. Gannon, Parham Ghavami, Brad A. Greenbaum, Anne-Marie Ethier Hain, Eddie D. Hamilton, Rodney M. Hamilton, James R. Hanley, Frank Joseph Haraf, Jr., Dana J. Haselton, Anne B. Hawkins, James P. Henderson, Timothy Henschel, Casilda I. Hermo, Wendy L. Hitch, David R. Hudson, Christine W. Hunley, Robert H. Hutcheson, Jr., Mary Heather Johnson, Charles Andrew Jordan, Jason L. Kastner, Samantha Y. King, Neil E. Kirshner, Lawrence A. Klinsky, Michael David Ladd, Melissa Lorraine Lambert, Aubrey Amoo Lamptey, Susan Langone, Deidre E. Lanier, Mark Andrew Lee, H. Brian Leeper, Russell B. Leftwich, Robert Howard Lilliard, Jr., Jennifer B. MacMaster, Timothy C. Mangrum, Joshua M. McCollum, Rhett F. McLaren, Karie McLevain-Wells, Deepak Mehrotra, Dina H. Mishu, Sharon Moore-Caldwell, Jennifer E. Moore, Gabriela Thomas Morel, Chetan R. Mukundan, Gregory J. Myers, Jennifer Braden Myers, Jaygopal Nair, Monica Elaine Wagner Nania, K. Timothy North, Lee Anne O'Brien, Harshila Patel, Sara Jane Fletcher Patterson, Christopher M. Patton, Robin S. Pearson, Matthew L. Perkins, Lisa Marie Petursson, David Piper, Elizabeth Dewees Ponder, Mille Poole, James E. Powell, Jennifer Ragsdale, John M. Rahe, Ravi K. Raheja, Kris Parks Rehm, Rachel M. Ricafort, David A. Richman, Kimberly M. Rosdeutscher, Victoria Rae Rundus, Richard A. Sances, Katharine Schull, Nicholas Barrett Self, Jennifer D. Singleton, Christopher Smeltzer, Susan Lipsky Snyder, Tunde Sotunde, Christina W. Steger, Jill E. Steigelfest, Eric Francis Stiles, Julianne Stout, Lesa Sutton-Davis, Keith Thompson, Phyllis L. Townsend, Parvin Vafai, Vani V. Veeramachanei, Diane Marie Vosberg, Travis T. Walters, Bruce David White, David J. White, Ida Michele Williams-Wilson, Patricia Sticca Williams, Sadhna V. Williams, Stacey M. Williams, William S. Wiseman II, Kenneth N. Wyatt, Tadayuki Yoneyama ASSISTANTS Amy E. Bazyk, Hollye R. Gallion, Mary Fran Hazinski, Carol Kirshner, Malinda Leigh Pennington, Rhonda Phillippi, Julie Elizabeth Rosof

THE Department of Pediatrics provides second-year students an introduction to pediatrics as part of an introduction to clinical medicine. Third-year students participate in a clinical experience on the pediatric wards and clinics and attend a series of clinical lectures and demonstrations.

Electives are available to students in all four years including such courses as signposts of human growth and development; pediatric pathophysiology; pathogenetic mechanisms in clinical infectious disease; pediatrics ward rounds; an introduction to clinical pediatrics; nutrition rounds; the fundamentals of human development; methods of delivering pediatric medical care in rural areas; urban health problems; child behavior and growth and development. There are also clinical selectives and electives in general pediatrics and specialties.

Required Courses

5020. Clinical Clerkship. Each member of the third-year class is assigned to Pediatrics for eight weeks. Six weeks are spent on the Vanderbilt University Hospital pediatric wards. Students participate in all phases of diagnosis and treatment of a wide variety of illnesses of children and infants. Two weeks of the clerkship includes work in pediatric clinics or a pediatrician's office. Besides teaching rounds on the wards and nursery, student lectures are held twice times a week. (5252 VUH) Grand Rounds are held weekly and Chief Resident Rounds are held each Thursday. Problem solving sessions are held during the six-week ward rotation. Access and use of Internet-based learning resources are encouraged. Gigante and staff.

520. Ambulatory Clerkship. Fourth year. During a four-week unit each student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or emergency service. Gigante and staff.

Pharmacology

CHAIR Heidi Elizabeth Hamm

VICE CHAIR Bih-Hwa Shieh

PROFESSORS EMERITI Allan D. Bass, John E. Chapman, Wolf-Dietrich Dettbarn, Joel G. Hardman, Erwin J. Landon, Peter W. Reed, B. V. Rama Sastry, Fridolin Sulser, Jack N. Wells

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RESEARCH PROFESSOR Sydney Spector ADJUNCT PROFESSORS John Thomas Clark, Sukhbir S. Mokha

ASSOCIATE PROFESSORS Mark E. Anderson, Joseph Albert Awad, Joey V. Barnett, Robert J. Barrett, Richard M. Breyer, H. Alex Brown, Nancy J. Brown, Ronald B. Emeson, Alfred L. George, Jr., Vsevolod V. Gurevich, Richard B. Kim, Michael J. McLean, John J. Murray, Katherine T. Murray, Oakley S. Ray, Jeffrey N. Rottman, Bih-Hwa Shieh, C. Michael Stein, Brian E. Wadzinski

ASSISTANT PROFESSORS John J. Bright, Sanika S. Chirwa, Chang Yong Chung, Kevin P. M. Currie, Chand Desai, William A. Hewlett, Richard Ho, Junji Ichikawa, Sabina Kuperschmidt, Michael P. McDonald, Paul E. Moore, Deborah G. Murdock, Laine J. Murphey, Richard M. Nass, Tao Peter Zhong

ASSISTANT CLINICAL PROFESSOR Allen J. Naftilan,

RESEARCH ASSISTANT PROFESSORS Jon Backstrom, Olivier Gilles Boutaud, Songhai Chen, Kathie Louise Eagleson, Igor Alexandrovich Feoktistov, Eugenia V. Gurevich, BethAnn McLaughlin, Xia Li, Stephen B. Milne, Charles D. Nichols, Aurea Fugazzola Pimenta, Christine Saunders, Claus Schneider, Gregg D. Stanwood, Christopher Michael Tan, Dao Wu Wang, Qin Wang, Tao Yang

INSTRUCTORS Maureen Kay Hahn, Uhna Sung

RESEARCH INSTRUCTORS Sean S. Davies, Dayanidhi Raman, Hong-Guang Xie, Ping Yangr

THE Department of Pharmacology is responsible for the instruction of second-year students in the reactions of the human organism to chemical substances. Electives available to second-, third-, and fourth-year students include pharmacokinetics, drug metabolism, cardiovascular pharmacology, molecular pharmacology, psychopharmacology, and drug receptor interactions. A clerkship in clinical pharmacology is offered in

the fourth year. Seminars, research programs, and special course work assignments are also available to fourth-year students as electives.

Required Course

501. Pharmacology. Lectures in which relevant physiology and pathophysiology, therapeutic interventions and the reaction of the human organism to drugs used for therapeutic interventions are addressed in a systematic manner. An average of six lectues a week and two hours of conference work a week, including patient-oriented problem solving, clinical correlation's and conferences in which students learn to evaluate results of drug trials. SPRING. Awad and staff.

Preventive Medicine

CHAIR William Schaffner

PROFESSOR EMERITUS Charles F. Federspiel, Lewis B. Lefkowitz, Jr.

PROFESSORS Roy L. DeHart, William D. Dupont, Marie R. Griffin, David L. Page, Wayne A. Ray, William Schaffner, Yu Shyr

ADJUNCT PROFESSOR Michael D. Decker

ASSOCIATE PROFESSOR Walter E. Smalley, Jr.

RESEARCH ASSOCIATE PROFESSORS Irene Feurer, Theodore Speroff

ADJUNCT ASSOCIATE PROFESSOR Bruce G. Gellin

ASSISTANT PROFESSORS Ban Mishu Allos, Patrick G. Arbogast, D. Dean Billheimer,

Karen C. Bloch, Shiva Gautam, J. Jonas Kalnas, Bonnie LaFleur, Loren Lipworth, Mary I. Yarbrough

ADJUNCT ASSISTANT PROFESSOR Bruce B. Dan

ASSISTANT CLINICAL PROFESSORS Allen Scott Craig, Timothy F. Jones, Marion Angelika Kainer

CLINICAL INSTRUCTOR Robert H. Hutcheson, Jr.

THE Department of Preventive Medicine offers a second-year course in the fundamentals of epidemiology, medical statistics, and the basic principles of public health and preventive medicine. Electives available to students at various levels include biometry; clinical trials and medical surveys; sampling methods; environmental/occupational health; and special projects in public health. A preceptorship in primary health care and clerkships in applied public health, sexually-transmitted diseases, and family and community medicine are also available to second- and fourth-year students as electives.

Required Course

503. Principles of Epidemiology, Biostatistics, and Preventive Medicine. This course introduces and elaborates the principles of the epidemiological method and emphasizes insights for curative and preventive clinical medicine gained through studies of populations. Epidemiological methods permit the identification of risk factors for acute and chronic diseases and suggest strategies for intervention. The course presents the foundations of epi-

demiology and clinical experimentation. The course also reviews major health issues and current developments in the organization, financing and regulating of health services. The course combines classroom presentations with opportunity for class participation, written exercises, which are discussed in groups, and other group discussions. Text and handout materials are used as adjuncts to classroom and group presentations. SPRING. Schaffner and staff.

Psychiatry

INTERIM CHAIR George C. Bolian

PROFESSORS EMERITI Virginia D. Abernethy, Thomas A. Ban, Fridolin Sulser, Warren W. Webb

PROFESSORS William Bernet, Leonard Bickman, Ariel Y. Deutch, Volney P. Gay, Gerald B. Hickson, Howard S. Kirshner, Peter T. Loosen, Peter R. Martin, Herbert Y. Meltzer, Rudra Prakash, Oakley S. Ray, Howard B. Roback, Elaine Sanders-Bush, Richard C. Shelton, W. Anderson Spickard, Jr., Glenn R. Yank

VISITING PROFESSOR Tomiki Sumiyoshi

RESEARCH PROFESSOR Sydney Spector

ADJOINT PROFESSOR Michael Maes

CLINICAL PROFESSORS David Barton, William M. Petrie, S. Steve Snow

ASSOCIATE PROFESSORS George C. Bolian, Thomas F. Catron, D. Catherine Fuchs, Lawrence S. Gaines, Harry E. Gwirtsman, William A. Hewlett, Steven D. Hollon, Robert M. Kessler, Joseph D. LaBarbera, Myung A. Lee, James L. Nash, Paul W. Ragan, William M. Regan, Ronald M. Salomon, Michael G. Tramontana

RESEARCH ASSOCIATE PROFESSORS Junji Ichikawa, Dennis E. Schmidt

ASSOCIATE CLINICAL PROFESSORS Charles Corbin, Jr., J. Emmett Dozier, Jr., Linda S. Godleski, Frederick T. Horton, Jr., Ronald F. Kourany, Kent Kyger, Samuel O. Okpaku, J. Kirby Pate, Judith J. Regan, Nicholas Sieveking, C. Richard Treadway

ASSISTANT PROFESSORS Kimberly P. Brown, Laurel Leslie Brown, Ronald L. Cowan, Elliot M. Fielstein, Alistair James Reid Finlayson, Pamela Fishel-Ingram, Erin Paige Fowler, Deborah Faye Gatlin, Stephen Anthony Montgomery, Scott Rodgers, Jennifer A. Scroggie, Sandra S. Seidel, Samuel Riley Sells III, Michael Henry Sherman, Kitti Lynn Virts, James S. Walker, David D. Weinstein

RESEARCH ASSISTANT PROFESSORS Randy Smith Barrett, Tomas dePaulis, Mary S. Dietrich, Kirsten L. Haman, Vicki S. Harris, D. Hal Manier, M. Diana Neely, Dorothy Durham Tucker

ADJUNCT ASSISTANT PROFESSORS Ann Blair Beasley, Joseph A. Kwentus, Dorothy M. Owens, William Thomas Summerfelt

ASSISTANT CLINICAL PROFESSORS Judith B. Akin, William Anderson, Casey C. Arney, Edward S. Arnold, Robert M. Atkins, Sarah B. Aylor, Michael J. Baron, Ralph I. Barr, Anne P. Bartek, Lynn P. Barton, Elizabeth A. Baxter, Vedavyasa Bhat Biliyar, Henry B. Brackin, Jr., Millicent Branch, Susan H. Bryant, Candice M. Burger, Suzanne D. Butler, Thomas W. Campbell, Keith A. Caruso, Alex Chalko, Tanmoy Chandra, David K. Chang, Craig A. Clark, Michelle Macht Cochran, Jill DeBona, David T. Dodd, Jeri Eileen Fitzpatrick, Sharone Elizabeth Franco, Daniel L. Friedman, Judy Garber, Sharon M. Gordon, John J. Griffin, James R. Hart, Carol B. Hersh, Michael D. Hill, Stephen C. Humble, Roy E. Hutton, Raju V. Indukuri, Shahidul Islam, Robert A. Jack, Robert C. Jamieson, Cynthia A. Janes, Magdalena Janicka, Karl Jannasch, Daniel S. Javier, Harold W. Jordan, William D. Kenner, Jack L. Koch, Jr., Prasad Kondapavaluru, Chandra S. Krishnasastry,

J. Gregory Kyser, Shannon L. Little, Bret W. Logan, Linda S. Lundin, George M. Mathews, James R. McFerrin, Carol Proops Milam, Leonard Morgan, Jr., Saran V. Mudumbi, Paula S. Nunn, Samuel J. L. Pieper, Jr., Rodney A. Poling, Philomina Presentation, Michael W. Propper, C. Edward Qualls, Bhupendra Rajpura, Gilbert W. Raulston, Tanuja Reddy, Karen H. Rhea, Clifford F. Roberson, Richard E. Rochester, Michele Rose, Rebecca J. Rosello, Scott E. Ruder, Jackie L. Schimming, Hal C. Schofield, Indu Senapati, Joseph Sharpe, Amanda Sparks, Phyleen Stewart-Ramage, Brian R. Swenson, Tianlai Tang, Lucas S. Van Orden, Rhonda R. Venable, Melinda J. Waldrop, Glenn Todd Webb, Jane R. Weinberg, W. Scott West, Jackson B.

White IV, Brad V. Williams, Nat T. Winston

SENIOR ASSOCIATE Karen L. Starr

ASSOCIATES Jennifer U. Blackford, Michael John Cull, Helen E. Hatfield, René A. Love,

Lynne L. McFarland, Christopher White

INSTRUCTORS Shahzad A. Faroogi, Theresa Inott, Vatsal G. Thakkar

RESEARCH INSTRUCTOR Michael Bubser

ADJUNCT INSTRUCTOR Helen H. Romfh

CLINICAL INSTRUCTORS Alan J. Lynch, Earl Q. Parrott, William F. Sheridan, Jr.

ASSISTANT Sita M. Diehl

THE Department of Psychiatry presents a series of lectures on human behavior and the practice of medicine to first-year students and instructs second-year students in the diagnosis, etiology, and treatment of basic psychiatric disorders. In the third year, students participate in a clerkship studying various psychiatric problems in both inpatient and outpatient settings.

A number of elective courses offered at various levels include such topics as determinants of human behavior; human sexuality; health and illness, doctors and patients; and children's problems in contemporary society. A number of clerkships, offered to fourth-year students as electives, provide intensive clinical experience in both inpatient and outpatient settings.

Required Courses

5040. Mind and Medicine. This course provides instruction in the psychological, behavioral, social, and developmental aspects of medical illness, the psychological responses of patients to illness, and the doctor-patient relationship. FALL. LaBarbera and staff.

5010. Psychiatry. This course acquaints the second year student with the diagnosis, etiology, and treatment of the basic psychiatric disorders. Small groups in which students have the opportunity to observe patient interviews provides a supplement to the lecture series. SPRING. Rodgers and staff.

5020. Psychiatry Clinical Rotation. Basic goals of this clerkship are to learn the fundamental techniques of psychiatric assessment, differential diagnosis and treatment intervention. Activities include direct patient care and clinical rounds in the company of assigned faculty. The four-week placements include: Vanderbilt University Hospital, VA Hospital, the Psychiatric Hospital at Vanderbilt (Adult/Adolescent/Child) and Middle Tennessee Mental Health Institute. Rodgers and staff.

Note: Psychiatry and Neurology are given in an eight-week block. During this unit, students will participate in lectures and conferences given by both departments, and they will be assigned for two weeks to a neurology clinical setting and for six weeks to one or more clinical settings in Psychiatry.

Radiation Oncology

PROFESSORS Hak Choy, Charles William Coffey II, Michael L. Freeman, Dennis Hallahan ASSOCIATE PROFESSORS Anthony J. Cmelak, Dennis Michael Duggan, Michael L. Freeman

RESEARCH ASSOCIATE PROFESSORS Ling Geng, Sekhar R. Konjeti
ASSISTANT PROFESSORS Robert J. Aus, Anuradha Chakravarthy, Steven R. Goertz, P.
Charles Lin, Bo Lu, Michael Edward Marks, Christopher Scarfone, Ming Teng
RESEARCH ASSISTANT PROFESSORS Debabrata Saha, Jiahuai Tan
RESEARCH INSTRUCTOR Fen Xia

THE Department of Radiation Oncology introduces the discipline of radiation oncology to medical students during their third- or fourth-year clerkships.

In third year, students attend departmental presentations as a part of their clinical rotations and discuss the use of appropriate work-up and treatment of cancer patients.

Fourth-year students may participate in basic science, translational, or clinical research in radiation oncology.

Radiology and Radiological Sciences

CHAIR Martin P. Sandler

VICE CHAIR Jeremy J. Kaye

PROFESSORS EMERITI Joseph H. Allen, Jr., John H. Beveridge, S. Julian Gibbs, Sandra G. Kirchner, W. Faxon Payne, Henry P. Pendergrass

PROFESSORS Malcolm John Avison, Frank E. Carroll, Jr., Benoit Dawant, Dominique Delbeke, Michael L. Freeman, Arthur C. Fleischer, John C. Gore, Richard M. Heller, Jr., Marta Hernanz-Schulman, Jeremy J. Kaye, Robert M. Kessler, Marvin W. Kronenberg, C. Leon Partain, James A. Patton, Ronald R. Price, Martin P. Sandler, Harold Delane Thompson, Norman H. Tolk

RESEARCH PROFESSOR A. Bertrand Brill

ADJUNCT PROFESSORS Arnold Burger, A. Everette James, Jr.

CLINICAL PROFESSOR Ronald E. Overfield

ASSOCIATE PROFESSORS Ronald Curtis Arildsen, Joseph P. Bruner, Jeffrey L. Creasy, Thomas S. Dina, Thomas P. Graham, Jr., Theodore C. Larson III, William H. Martin, Murray J. Mazer, Steven G. Meranze, Howard R. Mertz, E. Paul Nance, Jr., Cynthia B. Paschal, David R. Pickens III, Thomas A. Powers, Glynis A. Sacks, Max Israel Shaff, Sharon M. Stein, John A. Worrell

RESEARCH ASSOCIATE PROFESSOR Haakil Lee

ADJUNCT ASSOCIATE PROFESSOR Jeffrey A. Landman

ASSOCIATE CLINICAL PROFESSORS Ronald B. Addlestone, Craig M. Coulam, M. Reza Habibian, Alan J. Kaufman

ASSISTANT PROFESSORS E. James Andrews, Jr., Akilan Arumugham, Joseph M. Aulino,

John J. Block, Peter R. Bream, Jr., Ronald L. Cowan, Bruce M. Damon, Jaydip Datta, Charles V. DePriest, Joseph Diggs, Mark D. Does, Edwin Donnelly, James Christopher Gatenby, Daniel Frank Gochberg, Ewa Grzeszczak, Cheryl R. Herman, Alice A. Hinton, James M. Joers, Farzaneh Sarah Kazimi, Peter M. Lams, Mark A. Lawson, Jackiel R. Mayo, Kevin T. McManus, Henry Moran-Hassan, Victoria L. Morgan, Robert J. Pallow, Todd E. Peterson, Sudha P. Singh, Michael G. Stabin, LeAnn Simmons Stokes, David S. Taber, Curtis A. Wushensky

RESEARCH ASSISTANT PROFESSORS Zhaohua Ding, Martin Lepage, Alan K. Morimoto, William R. Riddle

ADJUNCT ASSISTANT PROFESSORS Susana Martinez Cruz, Christine H. Lorenz, Richard W. Rieck, Bretton C. Smith

ASSISTANT CLINICAL PROFESSORS Roy Ellsworth Erb, Jung Ja Hong, Rita M. Kikkawa, Steven B. Knight, Scott A. Montesi, Christopher Ng, Andrew J. Padgug, Gary Thomas Podgorski, Charles D. Ross, K. James Schumacher, Michael B. Seshul, Gregory R. Weaver, William S. Witt, Margaret B. Wright

ASSOCIATES Jeffrey A. Clanton, George E. Holburn

INSTRUCTORS Brent A. Baldwin, Ricardo Fonseca, Garth P. Graham, Erich Lussnig, John D. Rothpletz

ASSISTANT Mohammad Sib Ansari

THE Department of Radiology and Radiological Sciences introduces the discipline of radiology to medical students during their first-year course in gross anatomy.

The second-year course includes lectures and small group seminars correlating pathological findings and physical diagnostic signs with roentgen findings. In the third year students attend departmental presentations as a part of their clinical rotations and discuss the use of appropriate imaging modalities including computed axial tomography, nuclear medicine, magnetic resonance imaging, digital subtraction angiography, and ultrasound in diagnostic evaluation.

Fourth-year students have at their disposal a variety of audiovisual aids prepared for self-instruction and personally observe and participate in departmental procedures in a didactic lecture series. A clerkship in diagnostic radiology is offered as a fourth-year elective. Other electives available to students at various levels include computer applications in medicine principles in the use of radioisotopes in biology and medicine; clinical nuclear medicine; physics in diagnostic and therapeutic radiology; mammalian radiobiology; and neuroradiology. Clerkships in therapeutic are also available.

501. Introduction to Radiology. Second year. A series of lectures and small group sessions to introduce the student to conventional radiographic methods in the study of various organ systems. Basic principles of imaging and interpretation are emphasized along with indications, contraindications, and risk of the examinations. FALL. Taber and staff.

Section of Surgical Sciences

CHAIR OF THE SECTION R. Daniel Beauchamp

TICE CHAIR FOR SURGICAL RESEARCH James Richard Goldenring

LE Section of Surgical Sciences is composed of the department Surgery, Emergency Medicine, Neurosurgery, Oral and Maxillofacial Surgery, Otolaryngology, Pediatric Surgery, Plastic Surgery, Thoracic and Cardiac Surgery, and Urologic Surgery.

These departments contribute to the interdepartmental course in methods in clinical science. Third-year students participate in a clinical clerkship in which they are assigned to the surgical divisions of Vanderbilt Hospital, St. Thomas Hospital, or Veterans Administration Hospital. Third-year surgical clerks also participate in a series of clinical case presentations. Fourth-year students are required to have one month of senior selective clerkship in general surgery or another surgical specialty.

Surgical clerkships are offered to fourth-year students as electives at affiliated hospitals. Other elective clerkships available to fourth-year students include neurological surgery, cardiovascular surgery, urology, pediatric surgery, clinical oncology, plastic surgery, renal transplantation, and oral surgery. A laboratory research elective and a urology clinic seminar are also available to fourth-year students.

Surgical Division Required Course

5020. Clinical Clerkship. Ten week rotation for five weeks each student in the third year class is assigned to the general surgical divisions of Vanderbilt University Hospital, Nashville Veterans Administration Medical Center or St. Thomas Hospital. Under the direction and supervision of the staff, the student takes histories, does physical examinations and assists the staff in the diagnostic evaluation and clinical management of assigned patients. The other five weeks of the clinical assignment provide two (2) rotations to the specialty services in Cardiothoracic, Neurosurgery, Pediatric Surgery, Urology, Ophthalmology, Plastic Surgery, Anesthesiology, Orthopaedics, Otolaryngology and Renal-Transplant Surgery at Vanderbilt. These rotations provide exposure to a variety of patients with problems in general surgery and in the special fields of surgery. Members of the faculty and/or housestaff hold teaching sessions daily. Students go with their patients to the operating rooms where they are observers and assistants to the staff in surgery, the surgical specialties and anesthesiology. An integral part of this clerkship is the core lecture series in surgery. Small group discussions with Dr. John Tarpley take place weekly while on the subspecialty rotations. Beauchamp, Lomis and staff.

General Surgery

CHAIR C. Wright Pinson

PROFESSORS EMERITI Benjamin F. Byrd, Jr., William H. Edwards, Sr., Walter G. Gobbel, Jr., J. Lynwood Herrington, Jr., H. Keith Johnson, James A. O'Neill, Jr., Vernon H. Reynolds, Robert E. Richie, Douglas H. Riddell, John L. Sawyers

PROFESSORS Naji N. Abumrad, Robert L. Galloway, Jr., James Richard Goldenring, J. Kenneth Jacobs, John A. Morris, Jr., C. Wright Pinson, William O. Richards, David Shaffer, Kenneth W. Sharp, Steven C. Stain, John Leeman Tarpley

RESEARCH PROFESSOR Irene Feurer, Paul J. Flakoll

ADJUNCT RESEARCH PROFESSOR Harold C. Miller

CLINICAL PROFESSOR Joseph L. Mulherin, Jr.

ASSOCIATE PROFESSORS Ravi S. Chari, J. Stephen Dummer, Michael S. Higgins, Michael D. Holzman, Addison K. May, Steven G. Meranze, Richard S. Miller, Thomas C. Naslund, William A. Nylander, Jr., Walter E. Smalley, Jr., John Kelly Wright, Jr.

RESEARCH ASSOCIATE PROFESSORS Kareem Jabbour, Phillip E. Williams

ADJUNCT ASSOCIATE PROFESSORS William C. Chapman, Andrew John Pullan

ASSOCIATE CLINICAL PROFESSORS Roger A. Bonau, William H. Edwards, Jr., Steven J. Eskind, Raymond S. Martin III, Bonnie M. Miller, Douglas O. Olsen, Stanley O. Snyder, Jr., Clarence S. Thomas, Jr.

ASSISTANT PROFESSORS Ysela M. Carrillo, Eugene Prichard Chambers, Jr., Pran Krishna Datta, Jeffery B. Dattilo, Jose J. Diaz, Jr., Dan Alan Dixon, David Lee Gorden, Ana Grau, Oscar D.

Guillamondegui, Jeffrey S. Guy, Raul J. Guzman, Alan Joseph Herline, Mark C. Kelley, Aydin Tarik Kizilisik, Kimberly D. Lomis, Murray J. Mazer, Willie V. Melvin III, Nipun B. Merchant, Jennifer Knotts O'Neill, Alphonse T. Pasipanodya, Marc A. Passman, A. Scott Pearson, John Edward Phay, Philip W. Smith, Kenneth G. Smithson

RESEARCH ASSISTANT PROFESSORS Karen Celeste Hobdy-Henderson, Lynne A. Lapierre, Anna L. Means, Edward Y Zavala

ADJUNCT ASSISTANT PROFESSOR Donald E. Meier

ASSISTANT CLINICAL PROFESSORS Carlton Z. Adams, Jr., Terry R. Allen, Suhail H. Allos, Jeanne F. Ballinger, A.J. Bethurum, Bernard L. Burgess, Jr., Reginald Coopwood, Maria E. Frexes-Steed, Richard J. Geer, Robert W. Ikard, Sabi S. D. Kumar, Jennifer B. Meko, Jonathan C. Nesbitt, Jennifer L. Peppers, Timothy J. Ranval, Charles B. Ross, Henry P. Russell, Richard B. Terry

SENIOR ASSOCIATE Carolyn Watts

ASSOCIATE Margaret Tarpley

INSTRUCTORS Glen C. Balch, Matthew A. Corriere, Keith D. Gray, Hugh L. Houston III, Rami Edward Lutfi, Patrick Jon O'Neill, Alfonso Torquati

RESEARCH INSTRUCTOR Andrey E. Belous

CLINICAL INSTRUCTORS Laura L. Dunbar, Ray Hargreaves

ASSISTANT Mary Fran Hazinski

LECTURER Hal E. Houston

Cardiac and Thoracic Surgery

CHAIR Davis C. Drinkwater, Jr.

PROFESSORS EMERITI William C. Alford, Jr., Harvey W. Bender, Jr., William S. Stoney, Jr. PROFESSOR Davis C. Drinkwater, Jr.

ASSOCIATE PROFESSOR Karla G. Christian

ASSOCIATE CLINICAL PROFESSOR J. Scott Rankin

ASSISTANT PROFESSORS Rashid M. Ahmad, William H. Frist, James P. Greelish, Yenya Hu. Matthew Ninan

RESEARCH ASSISTANT PROFESSOR Paul A. Chang

ASSISTANT CLINICAL PROFESSORS Phillip P. Brown, George R. Burrus, David M. Glassford, Jr., Michael R. Petracek

INSTRUCTORS Chieu D. Nguyen, Arjun Pennathur, Jess D. Schwartz CLINICAL INSTRUCTOR Robert A. Hardin

Neurological Surgery

CHAIR George S. Allen
PROFESSORS George S. Allen, J. Michael Fitzpatrick, Noel B. Tulipan
CLINICAL PROFESSORS Cully A. Cobb, Jr., Alan H. Fruin
ASSOCIATE PROFESSORS Lewis S. Blevins, Jr., Reid Carleton Thompson
ASSOCIATE CLINICAL PROFESSORS Michael E. Glasscock III, Ray W. Hester
ASSISTANT PROFESSORS Paul D. Boone, Joseph S. Cheng, E. Duco Jansen, Peter E.
Konrad, Anita Mahadevan-Jansen, Matthew Marshall Pearson, Kenneth G. Smithson
RESEARCH ASSISTANT PROFESSORS Changqing Kao, James David Stefansic
ADJUNCT ASSISTANT PROFESSOR Robert J. Weil
ASSISTANT CLINICAL PROFESSORS Everette I. Howell, Jr., Scott Crawford Standard
CLINICAL INSTRUCTORS Vaughan A. Allen, Arthur Cushman, James W. Hays

Oral and Maxillofacial Surgery

CHAIR Scott B. Boyd
PROFESSORS EMERITI H. David Hall, Elmore Hill
PROFESSORS Scott B. Boyd, Harry L. Legan, Samuel Jay McKenna
ADJUNCT PROFESSOR Edwin H. Hines
ADJUNCT ASSOCIATE PROFESSOR Charles W. Williams, Jr.
ASSOCIATE CLINICAL PROFESSORS James D. Allen, Samuel E. Lynch
ASSISTANT PROFESSORS Richard Scott Conley, William R. Pettigrew, Sanjay Puttam
Reddi, Richard D. Roth

ASSISTANT CLINICAL PROFESSORS Bill W. Akin, Jeffrey B. Carter, Lindsey W. Cooper, Sr., James L. Dickson, Matthias J. Gorham, Spencer A. Haley, Irwin Hodes, John T. King, Timothy E. McNutt, Terryl A. Propper, Gregory P. Richardson, Stanley C. Roddy, Jr., Ellen G. Shemancik, Henry C. Simmons III, David J. Snodgrass, John Carlos Stritikus

CLINICAL INSTRUCTORS George A. Adams, Jr., F. William Taylor

Otolaryngology

CHAIR Robert H. Ossoff

PROFESSOR EMERITUS R. Edward Stone, Jr.

PROFESSORS Fred H. Bess, James A. Duncavage, James L. Netterville, Robert H. Ossoff, Jennifer A. Pietenpol

CLINICAL PROFESSOR C. Gary Jackson

ASSOCIATE PROFESSORS Brian Bernard Burkey, Thomas F. Cleveland, Mark S. Courey, C. Gaelyn Garrett, David S. Haynes, Theodore C. Larson III, William Russell Ries, Jay A. Werkhaven, Wendell Gray Yarbrough, David L. Zealear

ASSOCIATE CLINICAL PROFESSOR C. K. Hiranya Gowda

ASSISTANT PROFESSORS Stephen W. Bayles, Cheryl R. Billante, Shelagh Ann Cofer, Robert F. Labadie

RESEARCH ASSISTANT PROFESSOR Benjamin W. Y. Hornsby

ADJUNCT ASSISTANT PROFESSOR Mia Alexandra Lee Rosenfeld

ASSISTANT CLINICAL PROFESSORS Alex S. Battaglia, Brian S. Biesman, Mark A. Clymer, Jerrall P. Crook, William L. Downey, Daniel R. Hightower, Thomas W. Holzen, Michael J.

Koriwchak, William Michael Mullins, Warren R. Patterson, Raquel Ann Redtfeldt, Mark E. Reiber, John David Rosdeutscher, Alain N. Sabri, Matthew T. Speyer

INSTRUCTORS George Lee Coppitt III, Michael M. Johns III, Felicia J. Johnson,

Derrick T. Lin, Robert Lorenz, Charles K. Oh, Michael J. Pitman, Damon Andrew

Silverman, Paul G, van der Sloot

RESEARCH INSTRUCTOR Shan Huang

CLINICAL INSTRUCTORS Ronald Cate, Jerrall Paul Crook, Jr., William G. Davis, Mark A. Deaton, Edwin Boyette Emerson, Edward K. Gardner, F. Brian Gibson, David M. Kaylie, William Thomas Moore, Robert C. Owen, John D. Witherspoon

Pediatric Surgery

CHAIR Wallace W. Neblett III
PROFESSOR EMERITUS George W. Holcomb, Jr.
PROFESSOR Wallace W. Neblett III
ASSOCIATE PROFESSOR John B. Pietsch
ASSISTANT PROFESSORS Harold Newton Lovvorn III, Walter M. Morgan III

Plastic Surgery

CHAIR R. Bruce Shack

EMERITI John B. Lynch, Greer Ricketson

PROFESSORS Lillian B. Nanney, R. Bruce Shack

ASSOCIATE PROFESSORS Kevin F. Hagan, Kevin J. Kelly

ASSOCIATE CLINICAL PROFESSORS Jack Fisher, James J. Madden, Jr., Thomas W. Orcutt

ASSISTANT PROFESSORS Ronald M. Barton, Douglas Ray Weikert, J. Jason Wendel, Sean Francis Wolfort

ASSISTANT CLINICAL PROFESSORS Caroline H. Chester, Stephen M. Davis, Joseph B. DeLozier III, Philip E. Fleming, Mary Katherine Gingrass, G. Patrick Maxwell, John David Rosdeutscher

Urologic Surgery

CHAIR Joseph A. Smith, Jr.

PROFESSOR EMERITUS Charles E. Haines, Jr.

PROFESSORS John W. Brock III, Roger R. Dmochowski, Robert J. Matusik, Bruce J. Roth, Joseph A. Smith, Jr.

ASSOCIATE PROFESSORS Mark C. Adams, Michael S. Cookson, Frederick Kirchner, Jr., Steven G. Meranze, Douglas Franklin Milam, William J. Stone

ASSOCIATE CLINICAL PROFESSORS H. Victor Braren, Charles W. Eckstein, Robert H. Edwards, Phillip P. Porch, Jr.

ASSISTANT PROFESSORS Sam S. Chang, Simon William Hayward, S. Duke Herrell III, Susan Kasper, John C. Pope IV, Harriette Miles Scarpero, Ernest R. Smith, Jr.

RESEARCH ASSISTANT PROFESSOR Kichiya Suzuki

ASSISTANT CLINICAL PROFESSORS Robert B. Barnett, Jenny Jo Franke, Keith W. Hagan, David E. Hill, Thomas E. Nesbitt, Robert A. Sewell, Scott B. Shappell

INSTRUCTORS Alexander Gomelsky, Patrick Bryan Leu, Jason K. Sprunger

CLINICAL INSTRUCTORS Raoul Sioco Concepcion, Robert B. Faber, Mark Dudley Flora, Whitson Lowe, John J. Warner

Interdisciplinary Course Work

5010. Introduction to Biomedical Research. Each first year student selects, with the aid of an advisor, a faculty preceptor and completes a project in basic biomedical research. This is intended to provide students with an effective working appreciation of basic laboratory techniques and an opportunity to make observations and assess the validity of their findings, applying the scientific method in realistic problem solving. During the fall semester students will identify the preceptor and begin background preparation for the project. In the

spring semester, two blocks of time are reserved for work on the project. Other responsible faculty includes various faculties of the participating departments. Cherrington and staff.

520. Ambulatory Clerkship. During a four-week unit each fourth-year student participates in a didactic program on issues related to care of patients in an ambulatory setting. The students also work with patients in one of three clinical settings: general medicine, general pediatrics, or emergency service. Hickson and staff.

5020. Ecology of Health Care. Medicine is practiced and health care is delivered in a complex ethical, cultural, and policy environment. This course introduces students to some of the fundamental components of this larger environment, including ethical and legal issues in medical practice, the social and cultural diversity of patients, and the basics of health care financing and organization in the U.S. Materials for study will be wide-ranging, including case studies, essays, reports, poetry, short stories, and films. The course meets in small groups, Mondays, 11:00 –12:30, during the fall term. Churchill.



Faculty



Named and Distinguished Professors

- GEORGE S. ALLEN, William F. Meacham Professor of Neurological Surgery
- CARLOS L. ARTEAGA, Ingram Professor of Cancer Research
- DAVID M. BADER, Gladys Parkinson Stahlman Professor of Cardiovascular Research
- H. SCOTT BALDWIN, Katrina Overall McDonald Professor of Pediatrics
- JEFFREY R. BALSER, James Taloe Gwathmy Clinician-Scientist
- R. DANIEL BEAUCHAMP, John Clinton Foshee Distinguished Professor of Surgery; Chair of the Section of Surgical Sciences
- RANDY D. BLAKELY, Allan D. Bass Professor of Pharmacology
- H. ALEX BROWN, Ingram Associate Professor of Cancer Research
- LONNIE S. BURNETT, Frances and John C. Burch Professor of Obstetrics and Gynecology
- RICHARD M. CAPRIOLI, Stanley Cohen Professor of Biochemistry
- DAVID P. CARBONE, Ingram Professor of Cancer Research Graham F. Carpenter, Ingram Professor of Cancer Research
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- HAK CHOY, Ingram Professor of Cancer Research
- LARRY R. CHURCHILL, Ann Geddes Stahlman Professor of Medical Ethics
- ELLEN WRIGHT CLAYTON, Rosalind E. Franklin Professor of Genetics and Health Policy
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- ROBERT D. COLLINS, John L. Shapiro Professor of Pathology
- DAVID CORTEZ, Ingram Assistant Professor of Cancer Research
- RICHARD D'AQUILA, Addison B. Scoville Professor of Medicine
- STEPHEN NEIL DAVIS, Rudolph H. Kampmeier Professor of Medicine
- SUDHANSU K. DEY, Dorothy Overall Professor of Pediatrics
- ROBERT S. DITTUS, Joe and Morris Werthan Professor of Investigative Medicine
- DAVIS C. DRINKWATER, JR., William S. Stoney Jr. Professor of Cardiac and Thoracic Surgery

- RAYMOND N. DUBOIS, JR., Mina Cobb Wallace Professor of Gastroenterology and Cancer Prevention
- RONALD B. EMESON, Joel G. Hardman Professor of Pharmacology
- ALFRED L. GEORGE, JR., Grant W. Liddle Professor of Medicine
- JAMES RICHARD GOLDENRING, Paul W. Sanger Professor of Surgerical Investigation
- THOMAS P. GRAHAM, JR., Ann and Monroe Carell Jr. Family Professor of Pediatric Cardiology
- DARYL K. GRANNER, Joe C. Davis Professor of Biomedical Science
- JONATHAN L. HAINES, T. H. Morgan Professor in Human Genetics
- HEIDI E. HAMM, Earl W. Sutherland, Jr., Professor of Pharmacology
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- JACEK HAWIGER, Oswald T. Avery Professor of Microbiology and Immunology
- GEORGE C. HILL, Levi Watkins Professor of Diversity
- BILLY G. HUDSON, Elliott V. Newman Professor of Medicine
- TADASHI INAGAMI, Stanford Moore Professor of Biochemistry
- J. KENNETH JÁCOBS, John L. Sawyers Professor of Surgery
- DAVID H. JOHNSON, Cornelius Abernathy Craig Professor of Medical and Surgical Oncology
- JOHN F. KUTTESCH, JR., Ingram Associate Professor of Cancer Research
- ALEXANDER R. LAWTON III, Edward Claiborne Stahlman Professor of Pediatric Physiology and Cell Metabolism
- ANDREW J. LINK, Ingram Assistant Professor of Cancer Research
- JAMES E. LOYD, Rudy W. Jacobson Professor of Medicine
- LAWRENCE J. MARNETT, Mary Geddes Stahlman Professor of Cancer Research
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- HERBERT Y. MELTZER, Bixler/Johnson/Mays Professor of Psychiatry

- JASON D. MORROW, F. Tremaine Billings Professor of Medicine
- HAROLD L. MOSES, Benjamin F. Byrd Jr. Professor of Clinical Oncology
- JOHN J. MURRAY, Elizabeth and John Murray Chair of the Asthma, Sinus, and Allergy Program
- ERIC G. NEILSON, Hugh J. Morgan Professor of Medicine
- JOHN H. NEWMAN, Elsa S. Hanigan Professor of Pulmonary Medicine
- JOHN A. OATES, Thomas F. Frist Professor of Medicine
- MARIE-CLAIRE ORGEBIN-CRIST, Lucius E. Birch Professor of Reproductive Physiology and Family Planning
- ROBERT H. OSSOFF, Guy M. Maness Professor of Otolaryngology
- JOHN A. PHILLIPS III, David T. Karzon Professor of Pediatrics
- JENNIFER A. PIETENPOL, Ingram Professor of Cancer Research
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- J. ROBERT ROBERTS, Ingram Assistant Professor of Cancer Research
- DAVID ROBERTSON, Elton Yates Professor of Autonomic Disorders
- DAN M. RODEN, William Stokes Professor of Experimental Therapeutics

- BRUCE J. ROTH, Paul V. Hamilton and Virginia E. Howd Professor of Urologic Oncology
- MACE L. ROTHENBERG, Ingram Associate Professor of Cancer Research
- EARL RULEY, Ingram Professor of Cancer Research
- SAMUEL A. SANTORO, Dorothy B. and Theodore R. Austin Professor of Pathology
- FRIEDRICH G. SCHUENING, Ingram Professor of Cancer Research
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- SUBRAMANIAM SRIRAM, William C. Weaver Professor of Experimental Neurology
- PAUL STERNBERG, JR., George W. Hale Professor of Ophthalmology
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- MICHAEL R. WATERMAN, Natalie Overall Warren Distinguished Professor of Biochemistry
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 - 1986) [1989]
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- TED L. ANDERSON, Assistant Clinical Professor of Obstetrics and Gynecology; Clinical Assistant Professor of Nursing B.S., M.S. (Southern Mississippi 1976, 1978); Ph.D., M.D. (Vanderbilt 1985, 1993) [1998]
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- STEVEN JOHN WHITE, Assistant Professor of Emergency Medicine; Assistant Professor of Pediatrics
 - A.B. (Franklin and Marshall 1978); M.D. (Pittsburgh 1983) [1992]
- JACKSON B. WHITE IV, Assistant Clinical Professor of Psychiatry B.A., M.D. (Vanderbilt 1965, 1969) [1986]
- NEVA NICCOLE WHITE-GREELEY, Assistant Professor of Pediatrics B.A. (Texas 1994); M.D. (Texas, Houston 1998) [2001]
- LISA MCDONALD WHITEAKER, Assistant Clinical Professor of Medicine B.S. (David Lipscomb 1985); M.D. (Alabama 1990) [2000]
- ROBERT WHITEHEAD, Research Associate Professor of Medicine; Research Associate Professor of Cell and Developmental Biology; Research Associate Professor of Cancer Biology B.Sc. (Queensland 1965); M.Sc. (Queensland [Australia] 1968); Ph.D. (Wales 1975) [1999]

- RICHARD R. WHITESELL, Instructor in Molecular Physiology and Biophysics B.A. (Indiana 1970); Ph.D. (Vanderbilt 1976) [1985]
- JAMES ALAN WHITLOCK, Craig-Weaver Associate Professor of Pediatrics; Director, Division of Pediatric Hematology/Oncology B.S. (Southwestern at Memphis 1980):
 - B.S. (Southwestern at Memphis 1980); M.D. (Vanderbilt 1984) [1991]
- CHRISTINE M. WHITWORTH, Clinical Instructor in Obstetrics and Gynecology B.S. (Memphis State 1978); M.D. (Tennessee 1983) [1991]
- THOMAS C. WHITWORTH, Associate Clinical Professor of Pediatrics
 - B.A. (David Lipscomb 1966); M.D. (Vanderbilt 1970) [1975]
- CRAIG WIERUM, Assistant Clinical Professor of Medicine
 - B.S. (Duke 1984); M.D. (North Carolina 1990) [1995]
- BERNARD A. WIGGINS, Assistant Clinical Professor of Pediatrics B.A. (Fisk 1966); M.D. (Virginia 1970)
- [1978]
 JOHN P. WIKSWO, JR., Gordon A. Cain
 University Professor; Professor of
 Physics; Professor of Biomedical Engineering; Professor of Molecular Physiology and Biophysics
 - B.A. (Virginia 1970); M.S., Ph.D. (Stanford 1973, 1975) [1977]
- KIMBRA S. WILDER, Librarian, Eskind Biomedical Library
 - B.A. (Lincoln Memorial 1995); M.S.I.S. (Tennessee 1996) [1997]
- RONALD G. WILEY, Professor of Neurology; Professor of Pharmacology B.S., M.D., Ph.D. (Northwestern 1972, 1975, 1975) [1982]
- GRANT R. WILKINSON, Professor of Pharmacology
 - B.Sc. (Manchester [England] 1963); Ph.D. (London 1966); D.Sc. (Manchester [England] 2002) [1971]
- ANNETTE WILLIAMS, Librarian, Eskind Biomedical Library B.A. (SUNY, Binghamton 1988); M.L.S. (SUNY, Buffalo 1991) [1993]
- BRAD V. WILLIAMS, Psychiatrist, Student Health Service; Assistant Clinical Pro-

- fessor of Psychiatry B.A., M.D. (Mississippi 1973, 1981) [1985]
- CHARLES W. WILLIAMS, JR., Adjunct Associate Professor of Oral and Maxillofacial Surgery
 - B.S. (Langston 1968); D.D.S. (Meharry 1972) [2001]
- LAURA L. WILLIAMS, Assistant Clinical Professor of Obstetrics and Gynecology B.A., M.D. (Wake Forest 1980, 1984) [1990]
- PATRICIA STICCA WILLIAMS, Clinical Instructor in Pediatrics B.A. (Rochester 1989); M.D. (SUNY, Buffalo 1993) [1999]
- PHILLIP E. WILLIAMS, Research Associate Professor of Surgery
 - B.S. (Middle Tennessee State 1974) [1984]
- SADHNA V. WILLIAMS, Clinical Instructor in Pediatrics

 B.A. (Fmory 1985): M.D. (Tennessee
 - B.A. (Emory 1985); M.D. (Tennessee 1989) [1994]
- SCOTT MATTHEW WILLIAMS, Associate Professor of Medicine; Associate Professor of Pediatrics; Associate Professor of Molecular Physiology and Biophysics A.B. (Chicago 1976); Ph.D. (Washington University 1981) [1999]
- STACEY M. WILLIAMS, Clinical Instructor in Pediatrics B.S., M.D. (Pittsburgh 1990, 1997) [2000]
- W. CARTER WILLIAMS, JR., Assistant Clinical Professor of Medicine B.A., M.D. (Vanderbilt 1953, 1956) [1963]
- IDA MICHELE WILLIAMS-WILSON, Clinical Instructor in PediatricsB.S., M.D. (Vanderbilt 1989, 1993) [1996]
- BRIAN D. WILLIAMSON, Assistant Clinical Professor of Medicine B.A. (Case Western Reserve 1982); M.D. (Ohio State 1986) [2001]
- MORGAN JACKSON WILLS, Assistant Clinical Professor of Medicine B.A. (Princeton 1990); M.D. (Vanderbilt 1996) [2001]
- BENJAMIN J. WILSON, Professor of Biochemistry, Emeritus

- A.B., M.S. (West Virginia 1943, 1947); Ph.D. (George Washington 1955) [1964]
- GREGORY J. WILSON, Assistant Professor of Pediatrics
 - B.A., M.D. (Johns Hopkins 1982, 1987) [1992]
- JAMES P. WILSON, Associate Professor of Clinical Medicine
 - B.S. (Michigan State 1962); M.D. (Johns Hopkins 1966) [1972]
- JOHN RANDOLPH WILSON, Professor of Medicine
 - A.B. (Stanford 1970); M.D. (Harvard 1974) [1993]
- RONALD BRUCE WILSON, Adjunct Assistant Professor of Pathology B.S., D.V.M. (Michigan State 1975, 1977) [1983]
- DANNY G. WINDER, Assistant Professor of Molecular Physiology and Biophysics; Investigator, John F. Kennedy Center for Research on Human Development B.S. (North Georgia College and State University 1990); Ph.D. (Emory 1995) [1999]
- CARL E. WINGO, Clinical Instructor in Obstetrics and Gynecology M.D. (Miami [Florida] 1986) [1994]
- NAT T. WINSTON, Assistant Clinical Professor of Psychiatry
 - B.A., M.D. (Vanderbilt 1950, 1953) [1965]
- EUGENE J. WINTER, Assistant Clinical Professor of Medicine M.D. (Johann Wolfgang Goethe Universität Frankfurt 1974) [1979]
- ANNE COURTER WISE, Clinical Instructor in Obstetrics and Gynecology B.S. (William and Mary 1990); M.D. (Johns Hopkins 1996) [2000]
- WILLIAM S. WISEMAN II, Clinical Instructor in Pediatrics
 B.S. (David Lipscomb 1990); M.D.
 - (Medical College of Georgia 1995) [2000]
- JOHN D. WITHERSPOON, Clinical Instructor in Otolaryngology B.A. (Yale 1964); M.D. (Tennessee
- 1968) [1984] SUSAN WODICKA, Assistant Professor of Medicine

- B.S., M.D. (Vanderbilt 1971, 1975) [1989]
- THOMAS A. WOHL, Assistant Clinical Professor of Ophthalmology and Visual Sciences
 - B.A. (Duke 1981); M.D. (Cincinnati 1988) [1998]
- BRUCE L. WOLF, Assistant Clinical Professor of Medicine
 - B.A. (Amherst 1977); M.D. (Louisville 1982) [1989]
- LAWRENCE K. WOLFE, Clinical Professor of Medicine
 - B.A., M.D. (Vanderbilt 1957, 1960) [1968]
- SEAN FRANCIS WOLFORT, Assistant Professor of Plastic Surgery; Assistant Professor of Orthopaedics and Rehabilitation
 - B.A. (Dartmouth 1983); M.D. (Virginia 1990) [1999]
- ALASTAIR J. J. WOOD, Professor of Medicine; Professor of Pharmacology M.B.,Ch.B. (Saint Andrews [Scotland] 1970) [1977]
- G. WALLACE WOOD, Associate Clinical Professor of PediatricsB.A., M.D. (Vanderbilt 1962, 1966) [1972]
- G. WAYNE WOOD, Assistant in Medical Administration
 - B.S. (Tennessee 1980) [1986]
- RICHARD W. WOODCOCK, Visiting Professor of Hearing and Speech Sciences B.S., M.Ed., Ed.D. (Oregon 1949, 1953, 1956) [2002]
- GRAYSON NOEL WOODS, Clinical Instructor in Obstetrics and Gynecology B.S. (Colorado 1994); M.D. (East Tennessee State 1998) [2002]
- KRISTY FREEMAN WOODS, Professor of Medicine at Meharry Medical College; Professor of Medicine at Vanderbilt B.A. (Oberlin 1977); M.P.H., Ph.D. (Tulane 1981, 1981) [2001]
- STEPHEN C. WOODWARD, Professor of Pathology, Emeritus M.D. (Emory 1959) [1985]
- ROBERT J. WORKMAN, Associate Professor of Medicine
 - A.B. (Princeton 1964); M.D. (Harvard 1969) [1975]

- JOHN A. WORRELL, Associate Professor of Radiology and Radiological Sciences B.S. (McNeese State 1968); M.D. (Vanderbilt 1971) [1989]
- TAYLOR M. WRAY, Clinical Professor of Medicine
 - B.A. (University of the South 1962); M.D. (Johns Hopkins 1966) [1976]
- KEITH WRENN, Professor of Emergency Medicine; Associate Professor of Medicine
 - B.S. (Baylor 1972); M.D. (Emory 1976) [1992]
- CHRISTOPHER V. E. WRIGHT, Professor of Cell and Developmental Biology and Vice Chair of the Department B.Sc. (Warwick 1980); D.Phil. (Oxford 1984) [1990]
- ELLEN P. WRIGHT, Assistant Clinical Professor of Pathology B.A., M.D. (Vanderbilt 1977, 1981)

[1987]

- JOHN E. WRIGHT, Assistant Clinical Professor of Pathology B.S. (Houston 1980); M.D. (Baylor 1984)
- [2002] JOHN KELLY WRIGHT, JR., Associate Pro
 - fessor of Surgery
 B.S. (Vanderbilt 1977); M.D. (Johns
- Hopkins 1981) [1990]
 PATTY WALCHAK WRIGHT, Assistant Professor of Medicine

B.S. (Western Kentucky 1993); M.D. (Alabama 1997) [2002]

- PETER F. WRIGHT, Professor of Pediatrics; Professor of Microbiology and Immunology; Professor of Pathology; Director, Division of Pediatric Infectious Diseases B.A. (Dartmouth 1964); M.D. (Harvard 1967) [1974]
- SETH W. WRIGHT, Associate Professor of Emergency Medicine

M.D. (Michigan 1985) [1989]

- BINGRUO WU, Research Assistant Professor of Pediatrics
 - B.S., M.D. (Nanjing Medical College 1983, 1986); M.S. (Toronto 1992) [2002]
- GUANQING WU, Assistant Professor of Medicine; Assistant Professor of Cell and Developmental Biology M.D. (Nanjing Railway Medical College

- 1982); Ph.D. (Peking Union Medical School 1991) [2001]
- LAN WU, Research Assistant Professor of Medicine
 - M.D. (Tongji Medical [China] 1982) [2001]
- YUEJIN WU, Research Assistant Professor of Medicine
 - M.Sci. (Wuhan [China] 1987); Ph.D. (Tongji Medical [China] 1990) [1999]
- CURTIS A. WUSHENSKY, Assistant Professor of Radiology and Radiological Sciences
 - B.A. (Pennsylvania 1975); M.D. (Pittsburgh 1979) [2000]
- KENNETH N. WYATT, Clinical Instructor in Pediatrics; Clinical Instructor in Nursing B.A., M.D. (Michigan State 1968, 1979) [1984]
- KENNETH W. WYMAN, Assistant Professor of Medicine; Clinical Instructor in Nursing B.S. (Murray State 1986); M.D. (Louisville 1990) [2000]
- FEN XIA, Research Instructor in Radiation Oncology
 - M.Sc., M.D. (Suzhou Medical [China] 1986, 1983); Ph.D. (Harvard 1996) [2002]
- HONG-GUANG XIE, Research Instructor in Pharmacology
 - M.Sc., M.D., Ph.D. (Hunan Medical [China] 1989, 1984, 1995) [2002]
- JINGPING XIE, Research Instructor in Pathology
 - B.Sc. (Changsha [China] 1983); M.S. (Beijing 1986); M.S. (Boston University 1990); Ph.D. (Vanderbilt 1996) [2001]
- XIAOCHUAN XU, Research Assistant Professor of Medicine
 - M.D. (Sun Yat-Sen Medical 1988); Ph.D. (Université des Sciences de Lille [France] 1997) [2001]
- FANG YAN, Research Assistant Professor of Pediatrics
 - B.S. (Nankai [China] 1986); M.D. (Tianjin Medical 1991); Ph.D. (Louisville 1997) [2001]
- PATRICIA GALE YANCEY, Research Assistant Professor of Medicine
 - B.S. (Avertt 1986); Ph.D. (Wake Forest 1993) [2002]

- ELIZABETH YANG, Assistant Professor of Pediatrics; Assistant Professor of Cell and Developmental Biology; Assistant Professor of Cancer Biology A.B., M.S. (Chicago 1980, 1980); M.D.,
- Ph.D. (Stanford 1987, 1987) [1997] GONG YANG, Research Assistant Profes
 - sor of Medicine M.D. (Zhejiang [China] 1984); M.P.H. (Shanghai Medical 1990) [2000]
- JIN-LONG YANG, Research Instructor in Microbiology and Immunology M.D. (Shanghai Medical) [1998]
- NENG YANG, Research Assistant Professor of Cancer Biology B.S. (Hangzhou [China] 1985); M.S. (Zhejiang [China] 1988); Ph.D. (Kyushu [Japan] 1998) [2003]
- PING YANG, Research Instructor in Pharmacology
 - B.S., M.S., Ph.D. (China Pharmaceutical 1993, 1996, 1999) [2001]
- TAO YANG, Research Assistant Professor of Medicine; Research Assistant Professor of PharmacologyB.S., M.S. (Hubei Medical [China] 1979, 1987); Ph.D. (Tromsø [Norway] 1992)
- GLENN R. YANK, Professor of Psychiatry B.A. (Harvard 1971); M.D. (SUNY, Downstate Medical Center 1975) [1997]
- SONG-YI YAO, Instructor in Neurology M.S., M.D. (Shanghai 1979, 1977) [2000]
- JOSHUA L. YARBROUGH, Assistant in Anesthesiology
 - B.S. (Memphis 1993); M.S. (Vanderbilt 1995) [2002]
- MARY I. YARBROUGH, Assistant Professor of Clinical Medicine; Medical Director, Center for Occupational and Environmental Medicine; Assistant Professor of Preventive Medicine
 - B.S., M.D. (Vanderbilt 1976, 1981); M.P.H. (Johns Hopkins 1990) [1994]
- WENDELL GRAY YARBROUGH, Associate Professor of Otolaryngology; Associate Professor of Cancer Biology A.B., M.D. (North Carolina 1985, 1989) [2003]

- AIDA YARED, Assistant Professor of Pediatrics
 - B.S., M.D. (American University of Beirut 1976, 1980) [1986]
- EUGENIA M. YAZLOVITSKAYA, Research Assistant Professor of Biochemistry M.S. (Kiev State 1984); Ph.D. (Palladin Institute [Ukraine] 1997) [2002]
- GRANT R. YEAMAN, Assistant Professor of Obstetrics and Gynecology B.Sc. (Edinburgh 1983); Ph.D. (Dundee 1991) [2001]
- YAJUN YI, Research Assistant Professor of Medicine
 - M.S. (Loyola [Chicago] 2000); Ph.D. (Manitoba 1997) [2001]
- HUIYONG YIN, Research Instructor in Pharmacology
 - B.S. (Tongi 1992); M.S. (Shanghai Institute 1995); Ph.D. (Vanderbilt 2002)
- CHRISTINA YNARES, Assistant Clinical Professor of Medicine B.S., M.D. (Philippines 1968, 1972)
 - B.S., M.D. (Philippines 1968, 1972) [1991]
- TADAYUKI YONEYAMA, Clinical Instructor in Pediatrics
 - B.S. (Duke 1990); M.D. (Medical College of Virginia 1994) [1998]
- PAMPEE PAUL YOUNG, Assistant Professor of Pathology
 - B.A. (Rice 1990); Ph.D., M.D. (Texas, Southwestern 1996, 1998) [2003]
- RUTH T. YOUNG, Assistant Professor of Clinical Medicine
 - B.A. (Duke 1972); M.A. (Minnesota 1974); M.D. (Tennessee, Memphis 1977) [1995]
- CHAO-LAN YU, Assistant Professor of Molecular Physiology and Biophysics B.S. (Taipei Medical 1985); Ph.D. (Michigan 1995) [2001]
- QITAO YU, Research Instructor in Microbiology and Immunology B.S. (Da [China] 1963); Ph.D. (Shanghai Institute 1976) [1995]
- FIONA ELIZABETH YULL, Research Assistant Professor of Cancer Biology B.Sc. (Saint Andrews [Scotland] 1985); D.Phil. (Oxford [England] 1989) [1998]

- MICHAIL ZABOIKIN, Research Assistant Professor of Medicine M.S. (Moscow Physical Engineering Institute 1973); Ph.D. (All-Union Cancer Research Center 1983) [1999]
- RICHARD M. ZANER, Ann Geddes Stahlman Professor of Medicine, Emeritus; Member, John F. Kennedy Center for Research on Human Development B.S. (Houston 1957); M.A., Ph.D. (New School for Social Research 1959, 1961) [1981]
- MICHAEL D. ZANOLLI, Associate Clinical Professor of Medicine B.S. (Memphis State 1977); M.D. (Tennessee 1981) [1992]
- EDWARD Y. ZAVALA, Research Assistant Professor of Surgery B.S. (San Diego State 1978); M.B.A. (Phoenix 1992) [2003]
- DAVID L. ZEALEAR, Associate Professor of Otolaryngology B.S. (California, Davis 1970); Ph.D. (California, San Francisco 1979) [1986]
- ROY ZENT, Assistant Professor of Medicine; Assistant Professor of Cancer Biology

Ph.D. (Toronto 1997) [2000]

- MING-ZHI ZHANG, Research Assistant Professor of Cell and Developmental Biology
 - M.D., M.S. (Xuzhou Medical [China] 1985, 1990) [1997]
- RONG ZHANG, Research Assistant Professor of Medicine
 - M.S. (Dalian Medical [China] 1987); M.D. (Jiangxi Medical [China] 1982); Ph.D. (Saga Medical [Japan] 1995) [1997]
- YAHUA ZHANG, Research Assistant Professor of Medicine
 M.D. (Nantong Medical School 1986)
 [2003]
- DAVID ZIAO-MING ZHAO, Assistant Professor of Medicine
 M.D. (Shanghai Medical 1985); Ph.D.
 (Queensland [Australia] 1992) [2001]

- JOE ZHIZHUANG ZHAO, Associate Professor of Medicine; Associate Professor of Biochemistry

 B.S. (Jilin [China] 1984); Ph.D. (Oregon State 1990) [1995]
- WEI ZHENG, Professor of Medicine; Ingram Professor of Cancer Research M.D., M.P.H. (Shanghai Medical University 1983, 1986); Ph.D. (Johns Hopkins 1992) [2000]
- TAO PETER ZHONG, Assistant Professor of Medicine; Assistant Professor of Cell and Developmental Biology; Assistant Professor of Pharmacology
- B.S. (Shanghai Medical 1987) [2001] BIN ZHOU, Research Assistant Professor
- of Pediatrics M.D. (Nanjing Medical [China] 1986);
 - M.D. (Nanjing Medical [China] 1986) Ph.D. (Toronto 1998) [2002]
- JING ZHOU, Research Instructor in Microbiology and Immunology B.S., M.S. (Ociean University of Qingdao [China] 1978, 1982); Ph.D. (Chinese Academy of Science 1986) [2003]
- SHAN-REN ZHOU, Assistant Clinical Professor of Neurology
 M.D. (Hsu Chou Medical College 1978)
 [1999]
- JOHN A. ZIC, Assistant Professor of Medicine
 - B.S. (Notre Dame 1987); M.D. (Vanderbilt 1991) [1995]
- CARL W. ZIMMERMAN, Clinical Professor of Obstetrics and Gynecology B.S. (Peabody 1969); M.D. (Tennessee 1972) [1978]
- LISA J. ZIMMERMAN, Research Instructor in Biochemistry B.A. (Wilkes 1993); M.S., Ph.D. (Vander-
 - B.A. (Wilkes 1993); M.S., Ph.D. (Vanderbilt 1995, 1998) [2002]
- MARY M. ZUTTER, Professor of Pathology; Director, Division of hematopathology B.S. (Tulane 1976); M.D. (Tuland 1981) [2003]

Register of Students

Information on the first year class was not available by press time.

Second Year Class

Courtney Joy Aavang (B.S. - Illinois) Woodstock, IL

Annukka Aida Rose Antar (B.A. - Harvard) Huntsville, AL

Brian Kenny Armstrong (B.S. - Emory) Memphis, TN

Tracy Lynn Arnold (B.S. - Tulsa) Altus, OK

David William Azar (B.S. - Clark) Swansea, MA

Bonnie Suzanne Bargmeyer (B.A. - Vanderbilt) Centerville, OH

Sanmit Kumar Basu (B.S. - Notre Dame) Granger, IN

John Joseph Belletti (B.A. - Harvard) Manhasset, NY

Parul Pankaj Bhatt (B.S. - Vanderbilt) Martinez, GA

Emily Elizabeth Binkley (B.A. - Harvard) Cambridge, MA

Amy Susannah Black (B.S. - Tennessee [Knoxville]) Franklin, TN

Robert Ernest Boykin (B.S. - North Carolina) Horatio, SC

Eric James Brantley (B.S. - Duke) Nashua, NH

Jacob Forrest Busler (B.S. - Rhodes) Lewisburg, TN

Andrew S Camarata (B.S. - Florida State) Nashville, TN

Kathryn Pierce Celauro (B.A. - North Carolina) Nashville, TN

Evonne Janelle Charboneau (B.S. - Washington) Aberdeen, SD

Cindy Neng-Chi Chin (B.S. - Brown) San Francisco, CA

Guy Travis Clifton (B.S. - United States Military Ac) Houston, TX

Michael Brian Cross (B.A. - Washington University [St. Louis]) Brownsburg, IN

Kyle Clifford Cuneo (B.S. - Cornell) Cincinnati, OH

Elizabeth Louise Dale (B.S. - Massachusetts Institute of Technology) Cleveland, TN

Christine Dean (B.A. - Georgetown) Nassau,

Jean Michele Dobson (B.S. - Vanderbilt) Arkansas City, KS

Keith Cooper Douglas (B.A. - Virginia-Ma) Louisville, KY

Mary Elizabeth Fleming (B.S. - Xavier) Louisville, KY

Julia Howe Francis (B.A. - Vanderbilt) Overland Park, KS

Eitan Ari Friedman (B.S. - Brandeis) Dunwoody, GA

Ryan Fitz Gibbons (B.S. - Westmont) Santa Barbara, CA

Brian Wallace Gray (B.S. - Notre Dame) Carmel, IN

Ryan Joseph Grippo (B.S. - Pennsylvania State) Clearfield, PA

Anita Owen Gupta (B.A. - Virginia-Ma) Portsmouth, VA

Matthew Robert Hall (B.A. - Princeton) Knoxville, TN

Stephen David Humm (B.A. - University Of Redlands) Las Vegas, NV

Kaitlin Campbell James (B.A. - Oberlin) Alexandria, VA

Gautam Jayaram (B.A. - Washington) Orland Park, IL

Douglas Scott Johnson (B.A. - Haverford) Nashville, TN

David Allan Joos (B.S. - Weber State) Ogden, UT

Sveta A Karelsky (B.A. - University Of California-) San Jose, CA

Nicholas James Kassebaum (B.A. - Macalester) Outlook, WA

John Athanasios Kazianis (B.S. - Brown) Cranston, RI

Clinton Dunkel Kemp (B.A. - Princeton) Lancaster, PA

Vijay Khetpal (B.A. - Vanderbilt) Durant, OK

Eric Sung-Y Kim (B.S. - Brown) Victoria, BC

Kerry Lynn Kusz (B.S. - Boston) Iron Mountain, MI

Edwin Seok Kwon (B.A. - Pomona) Walnut, CA

Jacqueline S Landess (B.A. - Indiana University-[Purdue]) Daleville, IN

Matthew Paul Landman (B.A. - Northwestern College) Hull, IA

Timothy Bernard Lautz (B.A. - Harvard) Milwaukee, WI

Tyler Yang Mao Lee (B.A. - University Of California-) San Jose, CA

Natalie Anne Lester (B.A. - Harvard) Columbus, OH

Sabina Nicole Leung (B.A. - Stanford) Naperville, IL

Asha Tendayi Logan (B.A. - Harvard) New York, NY

Edward Alexander McGillicuddy (B.S. - Vermont And) Quincy, MA

Rekha Natwar Mody (B.S. - Vanderbilt) Charlotte, NC

Eniola Fatima Mudasiru (B.A. - Fisk) Lagos, Nigeria

Alison Winesett Newman (B.S. - University Of Florida) Fort Myers, FL

William Jarred Newman (B.S. - University Of Florida) Fort Myers, FL

Ibironke Oduyebo (B.S. - Maryland-Co) Lagos, Nigeria

Andrea Celeste Ojeda (B.S. - Vanderbilt) San Antonio, TX

Bimal Bhupatrai Padaliya (B.S. - Duke) Travelers Rest, SC

Nicholas Demitri Pappas (B.A. - Princeton) Metairie, LA Trusharth Arvind Patel (B.S. - Vanderbilt) Powder Springs, GA

Matthew Reed Peachey (B.S. - Middle Tennessee State) Columbia, TN

James Peacock (B.A. - Harvard) Miami, FL

David Eugene Penner (B.A. - University Of Washington) Longview, WA

Anne Elizabeth Phillips (B.S. - Duke) Milford, OH

Anupam Kumar Pradhan (B.S. - Duke) Bluefield, VA

Andrea Michelle Proctor (B.S. - Vanderbilt) Germantown

David Fredric Ritsema (B.S. - Calvin) Denver, CO

Elisabeth Dianne Riviello (B.A. - Harvard) Indian, PA

Brent Vernon Savoie (B.A. - Vanderbilt) Vienna, VA

Kelly Nicole Sawyer (B.S. - Notre Dame) Dublin, OH

Carol Elizabeth Senkler (B.A. - University Of Maryland-Co) Hockessin, DE

Manish N Shah (B.A. - Princeton) Parsippany, NJ

Purvi Kaushik Shah (B.A. - Washington University) Silver Spring, MD

John Hyoungsub Shin (B.A. - Harvard) Richmond, VA

Nader Ahmed Shourbaji (B.S. - Tulane) Harahan, LA

Neha Mahesh Shroff (B.A. - Dartmouth) North Attleboro, MA

Ty Kanyn Subhawong (B.S. - Vanderbilt) Clarksville, TN

Nichalas Datas Tasada (D.O. Varida da ili) Farada ilia IN

Nicholas Peter Taraska (B.S. - Vanderbilt) Evansville, IN Robert Hill Thiele (B.S. - Virginia) Charlottesville, VA

John Brown Thomison (B.A. - Williams) Nashville, TN

Adam David Tibble (B.A. - Notre Dame) Northville, MI

Claire Anne Turchi (B.A. - Pomona) Lake Oswego, OR

Christopher James Welty (B.A. - Dartmouth) Alamo, CA

Lisa Marie White (B.S. - Tennessee-[Knoxville]) Pelham, TN

Lydia Ann White (B.S. - Tennessee-[Knoxville]) Pelham, TN

Casey Elizabeth Wilford (B.S. - Kentucky) Lexington, KY

Tracey Allyson Wilkinson (B.A. - Northwestern) Nashville, TN

Cynthia Nicole Wilson (B.S. - David Lipscomb) Manassas, VA

Jason Aaron Winston (B.A. - Columbia [New York]) Atlanta, GA

Kristy Marie Wolske (B.A. - Yale) Remer, MN

Dean Jared Yamaguchi (B.S. - California [LA]) Woodland Hills, CA

Lisa Fang Zhao (B.S. - California-) Alhambra, CA

Third Year Class

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ogy)

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School of Nursing

Administration 289 Faculty Council

Standing Committees

Faculty Practice Network 293

Nursing Education at Vanderbilt 295

Academic Program 301

Generalist Nursing Curriculum Specialist Nursing Curriculum

The M.S.N. Degree 317

Advanced Practice Joint Program Degree Requirements

Ph.D. in Nursing Science 331

Pre-Nursing Studies 333

Post Master's Option 337

Continuing Nursing Education 339

Academic Regulations 341

Admission 355

Financial Information 363

Financial Aid

Honors and Awards 371

Honor Scholarships

Courses of Study 375

Faculty 405

Class of 2002/2003 429

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JAMES HARRIS, D.S.N., M.B.A., R.N., C.S., Associate Director of Clinical Support Services,
Veterans Administration

PATRICIA PEERMAN, M.S., R.N.C., Director of Enrollment Management GERALD MURLEY, M.Ed., Director of Instructional Technology CRAIG CARMICHAEL, M.B.A., C.P.A., Director of Finance, Academic, and Research En-

terprise
SARAH RAMSEY, M.Ed., Director of Student Affairs

SARAH RAMSEY, M.Ed., Director of Student Affairs KAREN STEVENS, M.B.A., Director of Marketing and Student Recruitment MELANIE LUTENBACHER, Ph.D., R.N., B.C., Director of Ph.D. in Nursing Science Program

Joint Center for Nursing Research

TBA, Director
NANCY WELLS, D.N.Sc., R.N., Assistant Director; Director of Nursing Research at the
Vanderbilt University Medical Center

Faculty Council

MELANIE LUTENBACHER, Chair MARIA OVERSTREET, Chair-elect MAVIS SCHORN, Secretary SUSAN ADAMS JANE B. DADDARIO KAREN D'APOLITO JENNIFER EZELL MARY JO GILMER ROLANDA JOHNSON LARRY E. LANCASTER MARGARET MCGILL RANDOLPH F. RASCH

Standing Committees

Charges of committees are summarized. For more detailed descriptions of committee charges, see School of Nursing Bylaws, Article V. Committee members for 2002/2003 serve until September of 2003.

Curriculum

The Curriculum Committee is responsible for reviewing and evaluating the curriculum.

Jamie S. Brodie, Chair. Jane B. Daddario, Chair-elect. Carolyn J. Bess, Lorna Kendrick, Maria Overstreet, Jim Pace, Randolph F. Rasch. Ex officio: Linda Norman.

Faculty Council

Susan Adams, Chair. Melanie Lutenbacher, Chair-Elect. Joan King, Secretary. Michelle Salisbury, Senior Senator. Margaret McGill, Junior Senator. Larry Lancaster, Parliamentarian.

Faculty Recruitment and Appointment

The Faculty Recruitment and Appointment Committee is responsible for recruiting and appointing new faculty members.

Anne Moore, Chair. Mary Jo Gilmer, Chair-elect. Suzanne Baird, Janet Carpenter, Charlotte Covington, Carin Schofield, Vaughn SInclair.

Informatics

The Informatics Committee addresses informatics concerns that jointly affect faculty members, students, and staff members and maintains an ongoing process of developing and adapting information technology strategies.

Jerry Murley, Chair. Karen D'Apolito, Chair-elect. Carol Ann Bach, Trish Tragenstin, Elizabeth Weiner. Mamie Williams.

Nominating

The Nominating Committee is responsible for preparing a slate of consenting candidates for chair-elect, secretary, parliamentarian, senator, vacant positions on the Faculty Council, and elected committees

Janet Carpenter, Chair. Jamie Brodie, Mary Jo Gilmer, Anne Moore.

Non-Tenure Track Promotion Committee

This committee is responsible for receiving and reviewing dossiers of persons to be promoted to assistant, associate, and full professor of the practice and makes recommendations to the Dean.

Charlotte Covington, Chair. Carolyn Bess, Sarah Fogel, Anne Moore/Randolph F. Rasch.

Nursing Student Conduct Council

The Conduct Council addresses issues or concerns of serious misconduct of a non-academic nature on the part of VUSN students and imposes appropriate sanctions.

Sarah Ramsey, Sandra S. Seidel.

School Life

The School Life Committee addresses concerns and issues that affect the quality of school life of faculty, students, and staff; promotes formal and informal programs to enhance the quality of school life; and assists in orientation of international members.

Roberta Bradley, Chair. Jennifer Ezell, Chair-Elect. Julie Hinkle, Patricia A. Peerman, Sarah Ramsey, Mavis Schorn, Mindy Schuster.

Student Admissions and Academic Affairs

The Student Admissions and Academic Affairs Committee is responsible for reviewing and acting upon applications for admission to the School of Nursing; selecting traineeship, honor scholarship, and other appropriate scholarship recipients; reviewing student progress and considering and acting on student petitions for waiver of policy; and recommending to the Faculty Assembly conferral of degrees designating appropriate honors.

Virginia A. Moore, Chair. Rolanda Johnson, Chair-elect. Judy Sweeney, Past Chair. Leslie Coleman, Thomas H. Cook, Terri Donaldson, Sarah Fogel, Geri Reeves. *Ex Officio:* Linda Norman, Patricia Peerman, Karen Stevens

Tenure

The Tenure Committee is responsible for receiving and reviewing dossiers of persons to be promoted to associate professor or to be appointed to a rank holding tenure and makes recommendations to the Dean.

Peter Buerhaus, Janet Carpenter, Kathy Dwyer, Colleen Conway-Welch, Lynda L. LaMontagne, Larry E. Lancaster, Melanie Lutenbacher, Judy G. Ozbolt, Kenneth A. Wallston



School of Nursing Faculty Practice Network

anderbilt School of Nursing has engaged in organized faculty practice for more than ten years. The Vine Hill Community Clinic, established in 1991, serves as the cornerstone of the independent, nurse-managed practices. Clinic operations are comprehensive, functioning similarly—with regard to clinical services, infrastructure, and accountability—to physician practices at Vanderbilt Medical Center. Three TennCare managed care organizations (MCOs) currently assign their enrollees to the clinic where F.N.P.s function as primary care providers (PCPs). In addition, the mental health MCO for TennCare contracts for services with clinic mental health providers. As of December 2002, Vine Hill faculty providers were responsible for 7,000 patients under TennCare. In addition, approximately 1,000 commercial and Medicare patients have elected to seek care from nurse faculty providers. Many are members of the Vanderbilt faculty and staff and their dependents.

The central (and largest) nurse managed care clinic in the Vanderbilt Nurse Faculty Practice Network, Vine Hill Community Clinic, was established in Vine Hill Towers (one of the seven HUD public housing project high rises) with a grant from the W. K. Kellogg Foundation. Residents and surrounding neighborhoods in this medically under-served area have used the clinic to access primary health care, as well as mental services and prenatal care. The location of the clinic in the community has decreased transportation barriers to care for residents and given them readily available, open access to their primary care providers, produced a rich training site for nurse practitioner graduate students, and served as the centerpiece for community health nursing student fieldwork during the

pre-specialty year (B.S.N. equivalent curriculum).

Vanderbilt School of Nursing has a history of providing preventive and primary care, health education, health promotion, and chronic care management to elementary school students and their families at three sites. The initial clinic at Fall Hamilton Elementary was set up in 1995/96. The second clinic at Stratton Elementary was established in 1997, and the third clinic at Park Avenue Elementary opened in 2001. These schools serve neighborhoods with high rates of poverty as evidenced by the number of students qualifying for free and reduced lunch, averaging 90 percent of a total of 1,600 students. School health programs offer a practical and efficient way to positively affect the health of children and families. Schools are the center of the social structure for the student and a significant source of interaction for parents. Through contact with one child, the

school health provider is positioned to influence the health behaviors of the entire family.

The Vanderbilt Midwifery Practice provides women's health and prenatal services for patients at two sites: the Vine Hill Clinic and the West End Women's Health Center. They have delivery privileges at V.U. Medical Center, where they deliver 350–400 babies each year. The faculty midwifery practice is a critical component of the academic program at Vanderbilt, insuring clinical placements during three of four semesters and student access to culturally and economically disadvantaged populations.

The Vanderbilt Faculty Practice Network has piloted primary care service delivery on site at the Domestic Violence Shelter for Davidson and Williamson counties. The Shelter is owned and operated by the YWCA, housing fifty-six women and children. Some of the families reside there for up to one year. In addition to providing a safe living environment, the YWCA enrolls these women in various programs to enable them to successfully manage their lives when they move from the Shelter. Faculty nurse practitioners also manage the care of recently discharged homeless persons who reside in the community respite center while convalescing.



Nursing Education at Vanderbilt

ANDERBILT University School of Nursing has a national reputation for excellence in nursing education and attracts students from across the nation and from several foreign countries.

The School of Nursing was founded in 1909 as the Training School for Nurses of Vanderbilt University Hospital, with a three-year program leading to eligibility for nurse licensure. Under University administration since 1930, the Nursing School became a part of Vanderbilt University Medical Center in 1985. This relationship allows greater opportunity for nursing faculty and students to interact with nursing staff, medical faculty, and medical students in the areas of teaching, research, and practice.

The School of Nursing and Vanderbilt University Medical Center Nursing Services have developed a collaborative, interactive model of nursing practice, education, and research, focusing on quality patient care delivery. This collaborative model accommodates a rapidly and continually changing practice environment. Elements of the model are designed to foster innovation and interdisciplinary activity in an environment that promotes health and job satisfaction.

Accreditation. The school is approved by the Tennessee Board of Nursing. It was a charter member of the Association of Collegiate Schools of Nursing, which later was incorporated into the National League for Nursing (NLN). The M.S.N. program is accredited by the National League for Nursing Accreditation Commission (NLNAC), 61 Broadway, New York, New York 10006; (212) 363-5555, Ext. 153. The Nurse-Midwifery Program is accredited by the American College of Nurse-Midwives Division of Accreditation (818 Connecticut Ave. NW, Suite 800, Washington DC, 20006; phone 202-728-9860). The U.S. Department of Education is located at 400 Maryland Avenue, SW, Washington, DC 20202-0498; phone 800-USA-LEARN (800-872-5327)

Philosophy of the School

The School of Nursing is committed to freedom of inquiry into the natural, social, and human orders of existence, and to stating the conclusions of that inquiry. The School of Nursing fosters excellence in both scholarship and service; a liberal education must concern the whole person. The curriculum requires both liberal arts and professional courses.

The central concepts of our profession are person, environment, health, and nursing. These four concepts interact and serve as the basis for the practice of nursing.

Each person is unique, with intrinsic worth and dignity. Human beings are whole persons, with interacting and interdependent physical structures, minds, and spirits.

The environment consists of all conditions, circumstances, and influences that exist outside one's social system's boundary. An intimate relationship exists between the constantly changing environment and the person. The environment in which we live determines, to a degree, lifestyle and state of health. Development of the individual occurs throughout life within a pluralistic and culturally diverse society.

Health is a dynamic state of being in which the developmental and behavioral potential of an individual is realized to the fullest extent possible. Individuals have the right to pursue that level of health perceived by them to be optimal, taking into account their social and cultural definition of health. The level of health that individuals can attain is directly influenced by the level of health of the families and communities of which they are a part.

Nursing is a professional discipline that seeks to understand phenomena and predict circumstances that affect the health of individuals, families, groups, and communities. The discipline of nursing encompasses science, ethics, politics, and the heritage of nursing. The central focus of the discipline is the diagnosis and treatment of individuals, families, and groups as they respond to actual or potential health problems. The practice of nursing is an art and a science, used to help individuals improve their health potential.

The profession of nursing builds on a liberal education, and a university provides the best possible environment for this kind of education. A liberal education includes fine arts and humanities as well as social, biological, and physical sciences. The synthesis of knowledge from these disciplines, as well as from nursing, will enhance the ability of nurses to understand self, relationships with others, the nature of communities, other cultures, the physical world, current issues, and human values.

The study of diverse disciplines contributes to the ability to think analytically, reason logically, and communicate effectively. Students are expected to continue growing in intellectual and communication skills, using their liberal education to deepen their understanding of nursing and health. University-wide interdisciplinary activities are actively sought for the intellectual exchange and stimulation they provide.

The purpose of graduate education in nursing is to prepare students for advanced practice roles including nurse midwife, nurse practitioner, and nurse manager. At the master's level, graduate study provides the opportunity for in-depth theoretical knowledge, the basis for advanced clinical practice. Students acquire research skills and a deeper knowledge of their nursing specialty.

Graduate education provides students the knowledge and skills for planning and initiating change in a health care system. For potential members of interdisciplinary health care management teams, the focus is on advanced patient care skills that will provide leadership and will influence nursing organizations within a variety of health care settings. It is acknowledged that preparation for the nurse educator role requires education beyond the master's degree.

The first-professional degree in nursing at Vanderbilt is specialty-related and offered on the graduate level. The increase in knowledge and scope of nursing responsibilities, as well as changes in roles, functions, and practice settings, require a post-baccalaureate nursing education that is built on a rich undergraduate liberal education base and a baccalaureate in nursing or its equivalent.

The nursing program leading to the M.S.N. at Vanderbilt constitutes an arena for excellence in nursing practice, as well as a forum for discussion and analysis of issues that affect health care, consumers, the nursing profession, and society. The program is based on a variety of cognitive styles, life experiences, and professional backgrounds, and its flexibility allows all students to achieve the same goals through different options.

Code for Nurses

The school adheres to the American Nurses Association's Code for Nurses. The Code for Nurses is based on belief about the nature of individuals, nursing, health, and society. Recipients and providers of nursing services are viewed as individuals and groups who possess basic rights and responsibilities and whose values and circumstances command respect at all times. Nursing encompasses the promotion and restoration of health, the prevention of illness, and the alleviation of suffering. The statements of the code and their interpretation provide guidance for conduct and relationships in carrying out nursing responsibilities consistent with the ethical obligations of the profession and quality in nursing care. The nurse provides services with respect for human dignity and the uniqueness of the client, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

Organizing Framework

Course sequencing in the M.S.N. program with multiple entry options is designed to move students from (a) basic to advanced knowledge and skill levels, (b) simple to more complex practice situations, and (c) generalist to specialist role preparation. Course objectives include content in the three learning domains: cognitive, affective, and psychomotor, appropriately progressed in each taxonomy.

The curriculum design has three components: prerequisite liberal education requirements, generalist (pre-specialty) nursing courses, and specialist nursing courses. The prerequisite liberal education requirements assist the student in acquiring basic knowledge and understanding of human beings, culture, environment, and health through the study of the arts, humanities, and social, biological, and physical sciences. This basic

knowledge is applied to the study of nursing in the nursing components of the curriculum.

The pre-specialty component of the curriculum consists of clinical and non-clinical courses that contain nursing practice and discipline content at the generalist level. Clinical experiences focus on situations that reflect an understanding of the nursing process and the nursing paradigm in health promotion and maintenance, illness care, and rehabilitation. The theoretical basis for practice is presented in the classroom and provides the scientific knowledge base needed to diagnose and treat human responses to actual or potential health problems. Non-clinical courses focus on the discipline of nursing in the areas of ethics, economics, politics, research, legal issues, health care delivery systems, and the heritage of nursing.

The specialist component of the curriculum is divided into three segments: core courses, specialty courses, and electives. The core courses focus on theory integration into advanced practice nursing, critical analysis of theoretical and research literature in the clinical problem-solving process, and understanding the health care environment. Specialty courses focus on advanced knowledge and skills in a given specialty area to equip graduates to function in complex situations and advanced practice roles, including those of nurse midwife, nurse practitioner, clinical nurse specialist, nurse informaticist, and nurse manager. Electives provide the opportunity to select course work that complements the students' career goals.

Program Goals

The goals of the M.S.N. program are to prepare

- 1. Students for advanced practice roles including nurse midwives, nurse practitioners, clinical nurse specialists, nurse informaticists, and nurse managers who have expertise and advanced knowledge in a specialty area and who can function in complex situations either independently or collaboratively with health care team members;
- 2. Seekers of new knowledge by means of critical thinking, creative reasoning, and scientific investigation in relation to nursing practice and nursing science;
- 3. Disseminators of nursing knowledge and research to consumers and professionals;
- 4. Leaders capable of determining effective strategies that stimulate change within the profession and that lead to a more effective management of the health care delivery system;
- 5. Decision-makers who utilize advanced knowledge and consider ethical principles in serving the needs of individuals and society; and
 - 6. Students who possess the foundation for doctoral education.

All students are expected to meet the above program goals whether they enter the M.S.N. program with a B.S.N. or through the pre-specialty component. Students who enter through the pre-specialty component, however, must also meet transitional objectives upon completion of the pre-specialty nursing courses.

Transitional objectives

On completion of the pre-specialty component, students will be able to:

- 1. Synthesize knowledge from nursing, the humanities, and the biophysical and social sciences into the practice of professional nursing.
- 2. Demonstrate skills in critical thinking, decision making, information management, and use of the nursing process with individuals, families, and groups experiencing complex health problems.
- 3. Evaluate usefulness of and apply research findings to professional nursing practice.
- 4. Teach and counsel individuals, families, communities, and other groups about health, illness, and health-seeking behaviors.
- 5. Provide health care to culturally diverse populations in a variety of environments, both independently and in collaboration with other health care team members.
- 6. Demonstrate leadership qualities in addressing professional nursing and health issues.
 - 7. Demonstrate accountability for decisions about nursing practice.
- 8. Demonstrate awareness of the historical and current aspects of economic, political, legal, and ethical issues related to health care in society.
 - 9. Demonstrate awareness of nursing roles within the health care system.





The Academic Program

25

The Pre-Specialty Component

Webster's defines a bridge as a structure built over an obstacle or a river, etc., to provide a way across. At Vanderbilt University School of Nursing, our pre-specialty component is a sequence of generalist nursing courses bridging to a three semester sequence of specialty nursing courses for the Master of Science in Nursing degree (M.S.N.) for A.D.N. and diploma nurses and non-nurses with and without college degrees. Entry requires 78 hours of undergraduate course work or a college degree.

General Education Courses. 78 semester hours, all of which the applicant must have completed before entering the program. (Details of the 78 prerequisite hours are listed under Admission to the M.S.N. Program via the pre-specialty component.

Pre-Specialty Nursing Courses. 42 hours.

R.N. Pre-Specialty Nursing Courses. 26 hours.

Specialist Nursing Courses. 39 hours.

Pre-Specialty Curriculum Overview

The pre-specialty component consists of 42 hours of generalist nursing courses. (Registered Nurse pre-specialty curriculum consists of 26 hours.) Students entering without a prior degree in nursing complete the pre-specialty courses in three semesters (or a calendar year) of full-time study. Associate degree and hospital diploma registered nurses complete the pre-specialty courses in two semesters of full-time study.

Sample Pre-Specialty Curriculum for Non-Registered Nurse Students

FALL SEMESTER I		HOURS
N215	Foundations of Professional Nursing I	2
N225	Population-Based Health Care	2
N235	Human Experience of Health and Illness across the Lifespan I	4
N245	Fundamentals of Clinical Practice	5
N255	Basic Pharmacology	_2
		15
SPRING SEMESTER II		
N216	Professional Nursing Seminar	1
N226	Health Care Systems: Micro Issues	2
N236	Human Experience of Health and Illness across the Lifespan II	5
N246	Integration of Theoretical and Clinical Aspects of Nursing I	4
N256	Strategies for Improving Self-Care	_2
		14

Leave of Absence

SUMMER	SEMESTER III	
N217 N227 N237 N247	Foundations of Professional Nursing II Health Care Systems: Macro Issues Human Experience of Health and Illness across the Lifespan III Integration of Theoretical and Clinical Aspects of Nursing II	3 2 4 <u>4</u> 13
Sample	Pre-Specialty Curriculum for Registered Nurse Students	
FALL SEM	MESTER I	HOURS
N218 N225 N237 N248 N256	Conceptual Basis for Nursing Practice Population-Based Health Care Human Experience of Health and Illness across the Lifespan III Basic Health Assessment Strategies for Improving Self-Care	3 2 4 3 <u>2</u> 14
SPRING S	SEMESTER II	
N217 N219 N226 N227 N249	Foundations of Professional Nursing II Nursing Practice Seminar Health Care Systems: Micro Issues Health Care Systems: Macro Issues Integration of Theoretical and Clinical Aspects of Nursing	3 2 2 2 12
SUMMER	SEMESTER III	

Classes for the R.N. pre-specialty students are scheduled in a concentrated format of three to four sessions per semester, consisting of four days of classes during each session, to facilitate the student's work schedule. On-line conferencing is required between sessions to keep the student in contact with the faculty. Students must have proficient computer skills and Internet access.

After successful completion of the pre-specialty component, students will enter directly into the specialty master's component. The specialty component in most specialties can be completed in three semesters (one calendar year) of full-time study and follows the same curriculum plan as the direct entry M.S.N. program—39 hours of credit, including core and specialty courses. Please refer to the Specialist Nursing Curriculum for sample curriculum plans in the various specialties.

Pre-Specialty and Specialty: Part-Time Studies

Part-time students should meet with their faculty advisers regularly to update their program of studies. Part-time pre-specialty-level students have five years from first enrollment to complete all M.S.N. degree requirements.

Part-time students who enter with a B.S.N. degree have three years from first enrollment to complete all M.S.N. degree requirements.

Students must check the schedule, however, for availability of courses each semester.

Specialist Nursing Curriculum Overview

Core Courses (10 semester hours)

These courses encompass content that is essential for all master's degree students and allow students across specialties to share experiences.

The scientific inquiry nursing course sequence (Nursing 300, 301, and 302) provides a basis for theory integration into Advanced Practice Nursing and critical analysis of theoretical and research literature in the clinical problem-solving process.

The Health Care Delivery Systems and Transitions to Advanced Practice role courses (Nursing 303 and 304) provide the foundation for understanding the health care environment and the advanced practice nurse's role in health care.

Further application occurs in the specialty offerings subsequent to the foundation course.

Specialty Courses (25 semester hours minimum)

This portion of the master's program consists of didactic and practicum courses in a selected specialty. The didactic courses cover advanced nursing content; the practicum courses place the student in the advanced practice role of nurse midwife, nurse practitioner, or nurse manager. For detailed information about specialty courses, see the section on Specialist Curriculum and the appropriate course descriptions.

Electives (0-6 semester hours)

Students select electives of interest, with the approval of their adviser, based on their professional goals. Options include courses related to the clinical specialty, teaching, or management. Courses available in the School of Nursing, the School of Medicine, Owen Graduate School of Management, Peabody College, and the Graduate School allow nursing students to interact with other professional and graduate students. Some specialty programs of study may not require electives. Students may choose to take electives above the required 39 credit hours.

Specialist Nursing Curriculum

Specialty Courses

Acute Care Nurse Practitioner

Fall I

N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)		
N305a	Advanced Health Assessment/Clinical Reasoning (2 credit hours)		
N305b	Advanced Health Assessment Applications for Acute Care Nurse Practitioners (1 credit hour)		
N306	Advanced Physiological Foundations of Acute Care (3 credit hours)		
N307c	Advanced Pharmacotherapeutics for Acute Care Nurse Practitioners (3 credit hours)		
N340a	Pathophysiology and Collaborative Management in Acute Care I (3 credit hours)		
N346a	Basic Dysrthymias Recognition (1 credit hour)		

Spring II

N301	Research Methods for Advanced Nursing Practice (3 credit hours)
N340b	Pathophysiology and Collaborative Management in Acute Care II 3 credit hours)
N342	Acute Care Nurse Practitioner Practicum (4 credit hours)

Summer III

N302	Theory, Research, and Advanced Nursing Practice (2 credit Hours)
N303	Health Care Delivery Systems (2 credit hours)
N304	Transitions to the Advanced Practice Role (1 credit hour)
N340c	Pathophysiology and Collaborative Management in Acute Care III
	(3 credit hours)
N343	Acute Care Nurse Practitioner Preceptorship (4 credit hours)

Adult Nurse Practitioner/Cardiovascular Disease Prevention and Management

Fall I	
N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305a	Advanced Health Assessment and Clinical Reasoning (2 credit hours)
N305b	Advanced Health Assessment and Applications for the Adult Nurse
	Practitioner (1 credit hour)
N308	Pathophysiologic Concepts (3 credit hours)
N309a	Advanced Nursing Practice in Primary Care of the Adult (3 credit hours)
N309c	Advanced Nursing Practice in Primary Care of the Adolescent
	(1 credit hour)
N309d	Advanced Nursing Practice in Primary Care of the Elderly (1 credit hour)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)

N307 Advanced Pharmacotherapeutics (3 credit hours)

N363b Practicum in Primary Health Care of the Adult (3 credit hours)

N322a Principles of Cardiovascular Health I (2 credit hours)
N323 Practicum in Cardiovascular Health (3 credit hours)

Summer III

N302 Theory, Research and Advanced Nursing Practice: Integration and Application

(2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)
 N365 Adult Nurse Practitioner Preceptorship (4 credit hours)
 N322b Principles of Cardiovascular Health II (2 credit hours)

Elective . (1 credit hour)

Adult Nurse Practitioner/Correctional Health

Fall I

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
 N305a Advanced Health Assessment and Clinical Reasoning (2 credit hours)
 N305b Advanced Health Assessment Applications for the Adult Nurse Practice

(1 credit hour)

N308 Pathophysiologic Concepts (3 credit hours)

N309a Advanced Nursing Practice in Primary Care of the Adult

(3 credit hours)

N309c Advanced Nursing Practice in Primary Care of the Adolescent

(1 credit hour)

N309d Advanced Nursing Practice in Primary Care of the Elderly

(1 credit hour)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)

N307 Advanced Pharmacotherapeutics (3 credit hours)

N363b Practicum in Primary Health Care of the Adult (3 credit hours)

N366a Principles of Correctional Health I (2 credit hours)
N367 Practicum in Correctional Health (3 credit hours)

Summer III

N302 Theory, Research and Advanced Nursing Practice:

Integration and Application (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)
N365 Adult Nurse Practitioner Preceptorship (4 credit hours)
N366b Principles of Correctional Health II (2 credit hours)

Elective (1 credit hour)

Adult Nurse Practitioner/Gerontological Nurse Practitioner

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours) N305a Advanced Health Assessment and Clinical Reasoning (2 credit hours) N305b Advanced Health Assessment Applications for the Adult Nurse Practice (1 credit hour) N308 Pathophysiologic Concepts (3 credit hours) N309a Advanced Nursing Practice in Primary Care of the Adult (3 credit hours) N309c Advanced Nursing Practice in Primary Care of the Adolescent (1 credit hour) N309d Advanced Nursing Practice in Primary Care of the Elderly (1 credit hour) Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)

N307 Advanced Pharmacotherapeutics (2 credit hours)

N363b Practicum in Primary Health Care of the Adult (3 credit hours)

N320a Principles of Older Adult Health I (2 credit hours) N321 Practicum in Older Adult Health (3 credit hours)

Summer III

N320b

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour) N365 Adult Nurse Practitioner Preceptorship (4 credit hours)

Principles of Older Adult Health II (2 credit hours)

Elective (1 credit hour)

Clinical Management

Fall I N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours) N303 Health Care Delivery Systems (2 credit hours) N305a Advanced Health Assessment and Clinical Reasoning (2 credit hours) N308 Pathophysiologic Concepts (3 credit hours) N373 Strategies for Administrative/Clinical Decision Making (2 credit hours) Nxxx Clinical Concentration elective (3 credit hours)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours) N304 Transitions in the Advanced Practice Role (1 credit hour)

N304c Teaching/learning methodology, strategies, and evaluation (1 credit hour)

N307 Advanced Pharmacotherapeutics (3 credit hours) N374 Population Care Management (3 credit hours) Nxxx Clinical Concentration elective (3 credit hours)

Summer III

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N375 Political, Social, and Economic Influences on Clinical Care (2 credit hours)

N376 Clinical Program Development and Evaluation (3 credit hours)

N377 Expert Clinical Care Preceptorship (4 credit hours)

Family Nurse Practitioner

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N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305a Advanced Health Assessment and Clinical Reasoning (2 credit hours)
N305b Advanced Health Assessment and Applications for the Family Nurse

Practitioner (1 credit hour)

N308 Pathophysiologic Concepts (3 credit hours)

N309b Advanced Nursing Practice in Primary Care of the Child (2 credit hours)

N361 Clinical Topics in Family Health Transitions (4 credit hours)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)

N307 Advanced Pharmacotherapeutics (3 credit hours)

N309a Advanced Nursing Practice in Primary Care of the Adult (3 credit hours)

N309c Advanced Nursing Practice in Primary Care of the Adolescent

(1 credit hour)

N309d Advanced Nursing Practice in Primary Care of the Elderly (1 credit hour)

N362 Practicum in Primary Health Care of the Child and Adolescent (2 credit hours)

Summer III

N302 Theory, Research and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N363a Practicum in the Primary Health Care of the Adult (3 credit hours)

N364 Family Nurse Practitioner Preceptorship (4 credit hours)

Health Systems Management

Fall I

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)
N380 Organizational Dynamics (3 credit hours)

N381 Introduction to Health Informatics (3 credit hours)
N385a Health Care Financial Management (3 credit hours)

Spring	II
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N304 Transitions in the Advanced Practice Role (1 credit hour)

N382 Epidemiology (3 credit hours)

N383 Continuous Quality Improvement and Outcomes Measurement

(2 credit hours)

N386 Management Practicum I (2 credit hours)

Elective I (2 credit hours)

Summer III

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N387 Management Practicum II (3 credit hours)

N388 Strategic Management for Health Care Systems (2 credit hours)

N389 Health Care Management of Populations (2 credit hours)

Elective II (2 credit hours)
Elective III (2 credit hours)

M.S.N./M.B.A. Dual Degree Program: School of Nursing and Owen School of Management

Fall, Year I

Nur 300	Theoretical	Foundations	of Practice	(2 credit hours)
Nui Juu	HILEOLETICAL	i oundations	UI I I actice	(Z CICUIL HOUIS)

Mgt 311 Managerial Accounting (4 credit hours)
Mgt 322 Microeconomics (2 credit hours)

Mgt 331 Managerial Finance (2 credit hours)
Mgt 342 Leading Teams and Organizations (2 credit hours)

Mgt 351 Organizational Management (2 credit hours)
Mgt 361 Marketing Management (2 credit hours)
Mgt 373 Operations Management (2 credit hours)

Mgt 381 Managerial Statistics (2 credit hours)

Spring, Year I

Nur 301 Research Methods for Advanced Nursing Practice (3 credit hours)

Mgt 321 Macroeconomics (2 credit hours)
Mgt 355 Strategic Management (2 credit hours)

Nur 382 Epidemiology (3 credit hours)

Nur 383 Continuous Quality Improvement and Outcomes Measurement

(2 credit hours)

Summer. Year I

Nur 302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

Nur 303 Health Care Delivery Systems (2 credit hours)

Nur 304 Transitions to the Advanced Practice Role (1 credit hour)

Nur 386 Management Practicum I (2 credit hour)

Nur 389 Health Care Management of Populations (3 credit hours)

Fall. Year II

Nur 381 Intro to Health Informatics (3 credit hours)
Nur 387 Management Practicum II (3 credit hours)

Management Concentration Requirements & Electives

Spring, Year II

Management Concentration Requirements & Electives

Neonatal Nurse Practitioner

Fall I

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)

N305c Advanced Neonatal Health Assessment (3 credit hours)
N306c Developmental and Neonatal Physiology (3 credit hours)
N316 Theoretical Foundations of Neonatal Care (2 credit hours)
N317a Neonatal Pathophysiology and Management I (3 credit hours)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)
N307d Advanced Neonatal Pharmacotherapeutics (3 credit hours)

N315 Essential Components of Neonatal Intensive Care Nursing and Introduction to

Advanced Practice Neonatal Nursing Skills (3 credit hours)

N317b Neonatal Pathophysiology and Management II (3 credit hours)

N318 Neonatal Practicum (3 credit hours)

Summer III

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)
N304 Transitions to the Advanced Practice Role (1 credit)

N319 Neonatal Preceptorship (6 credit hours)

M.S.N. Program for B.S.N. Certificate-Prepared Neonatal Nurse Practitioners

Fall I-7 credits mandatory; 6 credits by exam

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)

N306c Developmental/Neonatal Physiology (3 credit hours)
N316 Theoretical Foundations of Neonatal Care (2 credit hours)

N316 Theoretical Foundations of Neonatal Care (2 credit hours)

N305c Neonatal Health Assessment (3 credit hours) - Credit by Exam (written and

demonstration)

N317a Neonatal Pathophysiology and Management I (3 credit hours)—Credit by

written exam

Spring II-6 credits mandatory; 9 credits by exam

N301 Research Methods for Advanced Practice Nursing (3 credit hours)

N307d Advanced Neonatal Pharmacotherapeutics (3 credit hours)

N315 Essential Components of Neonatal Intensive Care Nursing (3 credit hours)—

Credit by validation (completion of procedure checklist)

N317b	Neonatal Pathophysiology and Management II (3 credit hours) – credit by
	written exam
N318	Neonatal Practicum (3 credit hours) - Credit by validation (completion of
	detailed checklist)

Summer III - 7 credits mandatory: 4 credits by exam

Summer m—7 credits mandatory; 4 credits by exam		
N302	Theory, Research and Advanced Nursing Practice: Integration and Application	
	(2 credit hours)	
N303	Healthcare Delivery Systems (2 credit hours)	
N304	Transitions to the Advanced Practice Role (1 credit hour)	
N319	Neonatal Preceptorship (6 credit hours)—4 credits by validation (completion	

of detailed checklist) and 2 credits integration using case studies

Nurse-Midwifery

Fall I N300 N305a N305b N306b N308 N327a N333	Theoretical Foundations of Advanced Nursing Practice (2 credit hours) Advanced Health Assessment and Clinical Reasoning (2 credit hours) Advanced Health Assessment and Applications for Nurse-Midwifery (1 credit hour) Reproductive Anatomy and Physiology (2 credit hours) Pathophysiologic Concepts (3 credit hours) Women's Health for Advanced Practice Nursing I (3 credit hours) The Cultural Context of Women's Health Care (2 credit hours)
Spring II N301 N307 N309a N330 N331	Research Methods for Advanced Nursing Practice (3 credit hours) Advanced Pharmacotherapeutics (3 credit hours) Advanced Nursing Practice in Primary Care of the Adult (3 credit hours) Antepartal Care for Nurse-Midwifery (3 credit hours) Nurse-Midwifery Practicum I (3 credit hours)

Summer III	
N302	Theory, Research and Advanced Nursing Practice: Integration and
	Application (2 credit hours)
N303	Health Care Delivery Systems (2 credit hours)
N304	Transitions to the Advanced Practice Role (1 credit hour)
N334	Skills for Nurse-Midwifery (1 credit hour)
N335	Practicum in Intrapartum/Postpartum Nurse-Midwifery Care (3 credit hours)
N336	Intrapartum/Postpartum Nurse-Midwifery Care (4 credit hours)
N337	Practicum in Neonatal Nurse-Midwifery Care (1 credit hour)
N338	Neonatal Nurse-Midwifery Care (1 credit hour)
Fall IV	

N304b Nurse-Midwifery Role Synthesis, Exploration, and Analysis (2 credit hours) N339 Advanced Clinical Integration Experience for Nurse-Midwifery (5 credit hours)

Nurse-Midwifery/Family Nurse Practitioner

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Fall I N300 N305a N305b N306b N308 N327a N333	Theoretical Foundations of Advanced Nursing Practice (2 credit hours) Advanced Health Assessment and Clinical Reasoning (2 credit hours) Advanced Health Assessment Applications for Nurse-Midwifery (1 credit hour) Reproductive Anatomy and Physiology (2 credit hours) Pathophysiologic Concepts (3 credit hours) Women's Health for Advanced Practice Nursing I (3 credit hours) The Cultural Context of Women's Health Care (2 credit hours)
Spring II N301 N307 N309a N330 N331	Research Methods for Advanced Nursing Practice (3 credit hours) Advanced Pharmacotherapeutics (3 credit hours) Advanced Nursing Practice in Primary Care of the Adult (3 credit hours) Antepartal Care for Nurse-Midwifery (3 credit hours) Nurse-Midwifery Practicum I (3 credit hours)
N302 N303 N304 N334 N335 N336 N337 N338	Theory, Research and Advanced Nursing Practice: Integration and Applications (2 credit hours) Health Care Delivery Systems (2 credit hours) Transitions to the Advanced Practice Role (1 credit hour) Skills for Nurse-Midwifery (1 credit hour) Practicum in Intrapartum/Postpartum Nurse-Midwifery Care (3 credit hours) Intrapartum/Postpartum Nurse-Midwifery Care (4 credit hours) Practicum in Neonatal Nurse-Midwifery (1 credit hour) Neonatal Nurse-Midwifery Care (1 credit hour)
Fall IV N304b N309b N339	Nurse-Midwifery Role Synthesis, Exploration, and Analysis (2 credit hours) Advanced Nursing Practice in Primary Care of the Child (2 credit hours) Advanced Clinical Integration Experience for Nurse-Midwifery (5 credit hours)
Spring V N309c N309d N361 N362	Advanced Nursing Practice in Primary Care of the Adolescent (1 credit hour) Advanced Nursing Practice in Primary Care of the Elderly (1 credit hour) Clinical Topics in Family Health Transitions (4 credit hours) Practicum in Primary Health Care of the Child & Adolescent (2 credit hours)

Summer IV

N363a Practicum in Primary Health Care of the Adult (3 credit hours)
N364 Family Nurse Practitioner Preceptorship (4 credit hours)

Nursing Informatics

Fall I N300

Theoretical Foundations of Advanced Nursing Practice (2 credit hours)

BMIF300

and 300a Foundations of Biomedical Informatics and Evidence-Based Medicine

(4 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N381b Networks and Internet Applications for Health Care Professionals

(2 credit hours)

N393a Web Development for Health Care Applications (3 credit hours)

Spring II

N301 Research Methods for Advanced Nursing Practice (3 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N383 Continuous Quality Improvement and Outcomes Measurement (2 credit hours)

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Elective (if educational informatics) (2 credit hours)

N390b Database Design for Health Care Applications (2 credit hours)

N392a Informatics of Clinical Practice (2 credit hours)

OR

N393a Curriculum Strategies for Health Professional Education (2 credit hours)

Mt 321 Technical Project Management (3 credit hours)

Summer III

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N392b Clinical Informatics Practicum (4 credit hours)

OR

N393d Educational Informatics Practicum (4 credit hours)

N392c Informatics of Evidence-Based Practice (3 credit hours)

OR

N393b Educational Evaluation for Learning in the Health Professions (3 credit hours)

N393c Consumer Healthcare Informatics (2 credit hours)
N394 Seminar in Nursing Informatics (2 credit hours)

Pediatric Nurse Practitioner

Fall I

N300 Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305d Advanced Health Assessment in Family-Centered Pediatric Practice

(2 credit hours)

N305e Advanced Health Assessment Applications for the Pediatric Nurse Practitioner

(1 credit hour)

N308 Pathophysiologic Concepts (3 credit hours)

N311 Health Promotion of Behavior Development: Birth through Adolescence

(2 credit hours)

N312a Advanced Practice Nursing in Pediatric Primary Care, Part I (2 credit hours)

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N301	Research Methods for Advanced Nursing Practice (3 credit hours)
N307e	Advanced Pharmacotherapeutics in Pediatrics (3 credit hours)

N312b Advanced Practice Nursing in Pediatric Primary Care, Part II (4 credit hours)

N314a Practicum Pediatric Primary Health Care (4 credit hours)

Summer III

N302 Theory, Research, and Advanced Nursing Practice: Integration and

Applications (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N313 Current Issues in the Delivery of Pediatric Primary Care (3 credit hours)

N314b Advanced Pediatric Primary Care Preceptorship (4 credit hours)

Psychiatric-Mental Health Nurse Practitioner

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N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305a	Advanced Health Assessment and Clinical Reasoning (2 credit hours)
N350	Models and Theories of Psychiatric-Mental Health Nursing (2 credit hours)
N351	Theoretical Foundations and Practicum in Psychiatric–Mental Health Nursing
	with Groups and Families (3 credit hours)
N352	Neurobiology and Diagnostic Systems for Psychiatric Disorders (2 credit hours)

N353 Psychopharmacology (2 credit hours)

Spring II

N301	Research Methods for Advanced Nursing Practice (3 credit hours)
N305b	Advanced Health Assessment Applications for Psychiatric-Mental Health

Nursing (1 credit hour)

N308 Pathophysiologic Concepts (3 credit hours)

N354 Theoretical Foundations in Psychiatric–Mental Health Nursing with Groups

and Families (3 credit hours)

N356 Practicum in Psychiatric–Mental Health Nursing – Individuals, Groups

and Families (3 credit hours)

Summer III

N302	Theory, Research, and Advanced Nursing Practice: Integration and
	Applications (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N307a Primary Care Pharmacotherapeutics for Psychiatric–Mental Health Nurse

Practitioners (2 credit hours)

N357 Psychiatric Issues Within Specialty Populations (2 credit hours)
N358 Psychiatric–Mental Health Nurse Preceptorship (4 credit hours)

Women's Health Nurse Practitioner

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Fall I	
N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305a	Advanced Health Assessment and Clinical Reasoning (2 credit hours)
N305b	Advanced Health Assessment Applications (1 credit hour)
N308	Pathophysiologic Concepts (3 credit hours)
N327a	Women's Health for Advanced Nursing Practice I (3 credit hours)
N327b	Women's Health for Advanced Practice Nursing II (3 credit hours)
Spring II	
N301	Research Methods for Advanced Nursing Practice (3 credit hours)

N301	Research Methods for Advanced Nursing Practice (3 credit hours)
N307	Advanced Pharmacotherapeutics (3 credit hours)
N309a	Advanced Nursing Practice in Primary Care of the Adult (3 credit hours)
N309c	Advanced Nursing Practice in Primary Care of the Adolescent (1 credit hour)
N328	Practicum in Women's Health (3 credit hours)

Summer III

Summerm	
N302	Theory, Research and Advanced Nursing Practice: Integration and
	Application (2 credit hours)
N303	Health Care Delivery Systems (2 credit hours)
N304	Transitions to the Advanced Practice Role (1 credit hour)
N326	Women's Health Issues (1 credit hour)
N329	Preceptorship in Women's Health (6 credit hours)

Women's Health Nurse Practitioner/Adult Nurse Practitioner

Fall I					
N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)				
N305a	Advanced Health Assessment and Clinical Reasoning (2 credit hours)				
N305b	Advanced Health Assessment Applications (1 credit hour)				
N309a	Advanced Nursing Practice in Primary Care of the Adult (3 credit hours)				
N327a	Women's Health for Advanced Practice Nursing I (3 credit hours)				
N327b	Women's Health for Advanced Nursing Practice II (3 credit hours)				

Spring II

N301	Research Methods for Advanced Practice Nursing (3 credit hours)
N307	Advanced Pharmacotherapeutics (3 credit hours)
N308	Pathophysiologic Concepts (3 credit hours)
N309c	Advanced Nursing Practice in Primary Care of the Adolescent (1 credit hour)
N309d	Advanced Nursing Practice in Primary Care of the Elderly (1 credit hour)
N328	Practicum in Women's Health (3 credit hours)

Summer III

N302 Theory, Research and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N303 Health Care Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N326 Women's Health Issues (1 credit hour)

N329 Preceptorship in Women's Health (6 credit hours)

Fall IV

N363 Practicum in Primary Care of the Adult (3 credit hours)
N365 Adult Nurse Practitioner Preceptorship (4 credit hours)

M.S.N. Program for B.S.N. Certificate-Prepared Women's Health Nurse Practitioners Who Live at a Distance

Fall I

N300	Theoretical Foundations of Advanced Nursing Practice (2 credit hours)
N305a	Advanced Health Assessment and Clinical Reasoning (2 credit hours)

N305b Advanced Health Assessment Applications (1 credit hour)

N308 Pathophysiologic Concepts (3 credit hours)

N309a Advanced Practice Nursing in Primary Care of the Adult (3 credit hours)

N327a Women's Health for Advanced Practice Nursing I (3 credit hours)

N327b Women's Health for Advanced Practice Nursing II (3 credit hours)

Spring II

N301 I	Research	Methods	for Advanced	Practice	Nursina (3	credit hours)

N307 Advanced Pharmacotherapeutics (3 credit hours)

N309c Advanced Practice Nursing in Primary Care of the Adolescent (1 credit hour)
N309d Advanced Practice Nursing in Primary Care of the Elderly (1 credit hour)

N328 Practicum in Women's Health (3 credit hours)

Summer III

N302 Theory, Research and Advanced Nursing Practice: Integration and

Application (2 credit hours)

N303 Healthcare Delivery Systems (2 credit hours)

N304 Transitions to the Advanced Practice Role (1 credit hour)

N326 Women's Health Issues (1 credit hour)

N329 Preceptorship in Women's Health (6 credit hours)



The M.S.N. Degree

HE Master of Science in Nursing, the first-professional degree in nursing at Vanderbilt, is specialty-related and offered at the graduate level. The increase in knowledge required of nurses and the scope of their responsibilities, as well as changes in roles, functions, and practice settings, require a post-baccalaureate nursing education built on a rich undergraduate liberal education or baccalaureate nursing degree or its equivalent.

Due to the present diversity in nursing programs, educational opportunities must be made available to facilitate progression to the M.S.N. as the first-professional degree. Vanderbilt School of Nursing offers several options for entry into a master's degree program designed to accommodate a variety of cognitive styles, life experiences, and professional backgrounds.

In addition to educating students, the M.S.N. program provides other benefits. Faculty members are engaged in the scientific investigation of nursing practice and theory, innovative nursing care, and participation in national, state, and local activities related to nursing and health care delivery. Thus, they serve as role models for students, the profession, and the public. The program constitutes an arena for excellence in nursing practice and research, as well as a forum for discussion and analysis of issues that affect health care, consumers, the nursing profession, and society.

Acute Care Nurse Practitioner

PROGRAM DIRECTOR Joan E. King PROFESSOR Larry E. Lancaster

ASSOCIATE PROFESSORS Carolyn J. Bess, Joan E. King, Judy Taylor Sweeney

RESEARCH ASSOCIATE PROFESSOR Nancy Wells

CLINICAL ASSOCIATE PROFESSOR Francis W. Gluck, Jr.

ASSISTANT PROFESSOR Michael W. Vollman

CLINICAL ASSISTANT PROFESSORS Roxelyn G. Baumgartner, Jose J. Diaz, Clyde Helfin, Rob R. Hood, Debra M. Mahan, Jane S. Pierce, Viona S. Rice

INSTRUCTORS Andrea Honeycutt, Carin Schofield

ADJOINT INSTRUCTOR Jane H. Greene

CLINICAL INSTRUCTORS Barbara D. Ahlheit, Stephen C. Andrews, Oyetunde T. Bamigboye, Amy L. Cox, Jeffrey F. Binkley, Kathleen M. Burns, Sidney H. Bush-Foster, Diana L. Butorac, Margaret Callahan, Catherine M. Carter, Elizabeth L. Cato, Kalpana K. Deshpande, Peter A. DiCorleto, Janet G. Dunn, Julie Foss, James W. Garner, Jr., Martha E. Greer, Barbara J. Grimm, Arleen L. Hodge, Elizabeth M. Hodge, Linda T. Howerton, Renee L. Howser, Rebecca Jo Ingle, Teresa J. Knoop, David Lemonds, James L. Marcum, Louise M. Mistak, Carl M. Rogers, Ellen Tosh-Benneyworth, Penelope P. Vaughan, Allen B. Wilcox, Catherine S. Wilson, Kenneth W. Wyman

LECTURERS Katherine Boles, Thomas Christenbery, Shawanda Clay, Terri Donaldson, Jennifer Ezell, Julie Hinkle, Maria Overstreet, Jamie Pope, Lucinda Stewart

THE ACUTE CARE Nurse Practitioner specialty is designed to prepare nurse practitioners to provide care for chronically ill, acutely ill, and critically ill patients. Students receive didactic content about diseases across the illness trajectory, thus enabling students to learn about the chronic nature of many illnesses in addition to the acute episodic problems and critical care aspects of these same illnesses. Special options are available in trauma, oncology, nephrology, cardiology, cardiac surgery, orthopaedics ED, diabetes, pulmonary transplantation and rehabilitation, neurology, and HIV. Enrollment in these options will be limited by availability of preceptors. Graduates are currently eligible to sit for the American Nurses Association (ANA) Acute Care Nurse Practitioner Certification exam.

Nurse Anesthesia: Special Option for ACNP Graduates

Students who complete the Master of Science in Nursing (MSN) Program within the Acute Care Nurse Practitioner (ACNP) Program at VUSN and who meet other criteria for admission to Middle Tennessee School of Anesthesia (MTSA) will be eligible for an early interview and potential acceptance decision at MTSA. An early interview/admission process is one that occurs before the general MTSA interview/admission process that occurs in January of each year. The student will be awarded the MSN degree by Vanderbilt upon successful completion of the ACNP program at VUSN, and will be awarded the Master of Science with a Focus in Nurse Anesthesia degree by MTSA upon successful completion of the nurse anesthesia program at MTSA. A student who completes both degrees will be expected to be trained to function in the advanced practice roles of ACNP and certified nurse anesthetist (CRNA). Students who are interested in this option need to contact MTSA for further information about their admission requirements and application process. MTSA contact information: Middle Tennessee School of Anesthesia. P.O. Box 6414, Madison, TN 37116; Telephone: 615-868-6503; or e-mail Dean Mary Elizabeth DeVasher at *ikey@mtsa.edu*.

Adult Nurse Practitioner Program

PROGRAM DIRECTOR Leslie Coleman
PROFESSORS James Pace, Kenneth A. Wallston
CLINICAL PROFESSOR Felicia G. Cohn
ASSOCIATE PROFESSOR EMERITA Barbara F. Grimes
CLINICAL ASSOCIATE PROFESSOR James S. Powers

ASSISTANT PROFESSORS Jamie S. Brodie, Leslie Coleman, Sarah Fogel, Rolanda Johnson, Patricia L. Peerman

CLINICAL INSTRUCTORS Lovely Abraham, John E. Barnett, Nancy K. Bedford, Dara Botts, Robert C. Blakey, Joseph D. Drawdy, Robert G. Falter, Barbara L. Forbes, Diedra L. Freeman, Earl L. Kelly, Patricia O. Kinman, Leonard C. Lindsay, Paula W. McGown, Carol Beth Meador, Deborah G. Montgomery, Nahem A. Naimey, Michael B. Nelson, John C. Nwofia, Janice A. Osten, Anne A. Peterson, Connie K. Root, Robert G. Roy, Warren J. Stoffey, Lois J. Wagner, Ronald J. Waldron, Sarah J. White, Robert M. Wilkinson, Kathleen L. Wolff, Shawnya Black, Robin D. Young

LECTURERS Anne Brown, Melissa Fee, Traci C. Henry, Sharon A. Jones, Jennifer Kim, Lynne McFarland

THE ADULT NURSE Practitioner program at Vanderbilt prepares advanced practice nurses to practice in a variety of adult primary care settings. There is a significant emphasis on disease prevention and health promotion. In addition to a broad foundation of adult primary care, ANP students may choose one of two subspecialty focus areas: Cardiovascular Disease Prevention and Management or Correctional Health. All students, regardless of their chosen focus area, are eligible to become certified as Adult Nurse Practitioners at the completion of the program. The range of clinical sites for ANP students is tremendous and includes ambulatory clinics, private physician practices, cardiology clinics and correctional health facilities, to name a few.

Students in this program gain an understanding of the health care delivery system. They will learn to assess, diagnose and manage common acute and chronic adult health problems and to provide education about health maintenance and disease prevention to patients.

Adult Nurse Practitioner/ Gerontological Nurse Practitioner

PROGRAM DIRECTOR Leslie Coleman

For listing of faculty for Adult Nurse Practitioner/Gerontological Nurse Practitioner, see Adult Nurse Practitioner.

WANDERBILT University School of Nursing is very excited to offer a dual focus program that will allow individuals to gain certification as both an Adult Nurse Practitioner (ANP) and Gerontological Nurse Practitioner (GNP) through the American Nurses Credentialing Center (ANCC). This program began in the Fall 2001. The goal of this dual focus program is to provide individuals who wish to develop expertise in older adult care the opportunity to expand their scope of practice to include adolescents and younger adults. Students who complete this program will be eligible to become certified as Adult Nurse Practitioners and Gerontological Nurse Practitioners.

Dual certification provides the practitioner with the credentials necessary to meet the primary care demands of this entire patient population (adolescents and adults aged twelve and up). Long-term care facilities and assisted living facilities have traditionally been linked to the older adult population. Yet, upon closer look at these facilities, it is not unusual to find younger adults who are the victims of devastating illness, traffic accidents, or drug abuse. Advanced practice nurses can choose to practice in hospitals; private physician practices; home health care agencies; and in long-term care, sub-acute care, or assisted living facilities.

In all, the ANP/GNP dual focus program provides a broad foundation in adult primary care, with significant emphasis on disease prevention and health promotion. Students gain the knowledge and skills necessary to assess, diagnose, and manage common acute and chronic adult health problems, including the unique aspects related to geriatric care. In addition, they will be prepared to educate and counsel patients on health maintenance and disease prevention. Students also gain an understanding of the health care delivery system in this country.

Clinical Management

PROGRAM DIRECTOR Jo-Ann Kamancik
PROFESSORS Judy G. Ozbolt, Bonita Pilon
CLINICAL PROFESSORS Nancy M. Lorenzi, Edwin J. Olsen, Roxanne Spitzer
ASSOCIATE PROFESSOR Debra M. Wujcik
CLINICAL ASSOCIATE PROFESSORS Chris L. Algren, Elizabeth C. Dayani, Marilyn
A. Dubree, Fredia S. Wadley
ASSISTANT PROFESSORS Thomas H. Cook, Susan Cooper, Carol Etherington, Jo Ann
Kamencik, Linda D. Norman, Cathy R. Taylor
CLINICAL ASSISTANT PROFESSORS Marjorie Collins, Jay Harrington, Wilma D.
Heflin, William Nolan, Cynthia K. Winker

THE MASTER of Science in Nursing Clinical Management degree has been designed to provide nurses with the skills and knowledge necessary to function as a clinical nurse expert in the management of clinical care of patient services across the health care enterprise. This program provides an integrated curriculum with a strong emphasis on clinical patient management in health care delivery systems. R.N.s with an A.D.N., Diploma, or B.S.N. are eligible for admission to the program. The Master of Science in Nursing in Clinical Management is a 39-credit program consisting of fourteen courses divided into four components: M.S.N. Core Clinical component, M.S.N. Core component, Clinical Management Core component, and the Expert Clinical Care Preceptorship component.

Classes are offered in a concentrated format of three- or four-day meetings, three or four times a semester. Project work and on-line conferencing are required between sessions. Students must have proficient computer skills and Internet access.

Students who intend to become certified Clinical Nurse Specialists will be eligible to sit for the certification exams specific to their specialty area offered by the American Nursing Credentialing Center.

Family Nurse Practitioner

PROGRAM DIRECTOR Randolph F. Rasch PROFESSORS Roger DesPrez, Randolph F. Rasch, ASSOCIATE PROFESSOR Charlotte M. Covington, Donna B. McArthur CLINICAL ASSOCIATE PROFESSOR Stanley J. Bodner ASSISTANT PROFESSORS Roberta Bradley, Geri Reeves CLINICAL ASSISTANT PROFESSORS Leanne C. Busby, Terry O. Harrison INSTRUCTORS Beverly Byram, Jane Case, Allison DeHart, Catherine E. Reisenberg, Patricia N. Scott, LeeAnne Smith, Clare D. Sullivan, Marilee T. Weingartner, Julie Ann Womack CLINICAL INSTRUCTORS Sharon A. Adkins, Christie D. Arney, John B. Bassel, Angela Becker, Harvey E. Bennett, Dara W. Botts, Virginia L. Bradshaw, Albert R. Brandon, John M. Byrnes, Judith M. Caldwell, G. Summers Chaffin, Judy G. Cole, Elizabeth H. Crowe, Catherine Crumbo, Stephen J. D'Amico, Lisa Diaz-Barriga, Gamal S. Eskander, Leon E. Everett, Linda A. Foster, Krista A. Garner, Lisa Grissom-Pewitt, Nancy Hamlin, Deborah G. Hensley, Lawrence R. Jackson, Jr., Richard C. Johnston, Earnest J. Jones, Ellen O. O'Kelley, Robert T. Lim, Paul F. Mackey, Aureata Majors, Sandra K. Myers, Mohammad Rassekhi, Kimerly A. Rigsby, May L.Rooks, Kyle Rybczyk, Vicki Shaub, Charles R. Sedberry, Thomas C. Whitfield, David W. Yancey, Sarah C. Yeagley

THIS SPECIALTY prepares graduates to deliver comprehensive primary care to individuals, from infancy through adulthood. Emphasis is on acquisition of the knowledge and skills necessary for a family-centered approach to health promotion and intervention in illness. Students gain clinical experience in child and adult primary health care settings. The preceptorship facilitates development of clinical skills that prepare the graduate for the advanced practice role of the Family Nurse Practitioner. Graduates are eligible to sit for either the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP) Family Nurse Practitioner certification exam.

Health Systems Management

PROGRAM DIRECTOR Jo-Ann Kamencik
PROFESSORS Judy G. Ozbolt, Bonita Pilon
CLINICAL PROFESSORS Nancy M. Lorenzi, Edwin J. Olsen, Roxanne Spitzer
ASSOCIATE PROFESSOR Debra M. Wujick
CLINICAL ASSOCIATE PROFESSORS Chris L. Algren, Elizabeth C. Dayani, Marilyn A.
Dubree, Fredia S. Wadley
ASSISTANT PROFESSORS Thomas H. Cook , Susan Cooper, Carol Etherington, Linda D.
Norman, Cathy R. Taylor

CLINICAL ASSISTANT PROFESSORS Marjorie Collins, Jay Harrington, Wilma D. Heflin, William Nolan, Cynthia K. Winker

INSTRUCTOR Terri Crutcher

ADJOINT INSTRUCTOR Myra M. Socher

CLINICAL INSTRUCTORS Gregg P. Allen, Sharon C. Aucoin, Tammy Choate, Mary A. Duvanich, Frances M. Edwards, Nancye R. Feistritzer, Robin C. Ginn, Irene B. Hatcher, Heidi N. Jacobus, Rebecca Rue Keck, Robert D. McArthur, Kate Payne, Susan R. Merrill, Doris C. Quinn, William B. Rogers, Cynthia S. Sandy, Mary E. Schmidt, Robin L. Steaban, Suzanne K. Stone-Griffith, Bernard Turner

LECTURER Debora Shiflett

THIS SPECIALTY prepares graduates for the advanced practice role of nursing and health care management. This specialty is designed to prepare nurses at the graduate level to manage the delivery of nursing and health care services across multiple settings and specialty areas. The curriculum provides a series of integrated learning experiences that focus on the development of individuals with keen analytic and quantitative skills who are capable of leadership and innovation in a dynamic health care system. Graduates acquire the breadth of management knowledge and skills needed to perform effectively and assume leadership positions in health care delivery organizations. Classes are offered in a concentrated format of four- or five-day meetings, three or four times each semester. Project work and on-line conferencing are required between sessions. Student must have proficient computer skills and Internet access.

Neonatal Nurse Practitioner

PROGRAM DIRECTOR Karen D'Apolito

ASSISTANT PROFESSOR Karen D'Apolito

INSTRUCTOR/CLINICAL COORDINATOR Roxanne Rie Kersten

CLINICAL INSTRUCTORS Wendy A. Bateman, Bobby B. Byrne, Gloria Cano, Rhonda L. Clifford, Colleen H. Flanders, Darrah D. Fowler, Cheryl M. Furlong, Karen Gannon, Terri T. Gay, Kathy E. Harrison, Sarah E. Hassell, Betty G. Hendel, Muhammed S. Ismail, Nancy L. Kraft, Susan M. Mercier, Jamie L. Nelson, Eric S. Palmer, Kelly S. Shirley, Kristin Sohn, Tracy Vaughn, Sharon H. Wilcox, Jeanne M. Youngkins

LEÇTURERS Teresa S. Jennings, Patricia A. Scott

THIS SPECIALTY is designed to prepare entry-level, advanced practice nurses who provide acute care to ill and convalescent neonates. Emphasis is on the acquisition of knowledge and skill required for the Neonatal Nurse Practitioner role. Graduates of the program are eligible to take Neonatal Nurse Practitioner certification exam offered by the National Credentialing Center (NCC). Student must have proficient computer skills and Internet access.

M.S.N. Program for B.S.N. Certificate-Prepared Neonatal Nurse Practitioners

For listing of faculty for this program, see Neonatal Nurse Practitioner above.

Faculty members have designed a program for B.S.N. Certificate-Prepared Neonatal Nurse Practitioners that recognizes course work completed in the certificate program and years of clinical experience. Eligible credit towards the M.S.N. degree will be determined using either a credit by exam and/or clinical validation system for five courses within the program.

Students with a B.S.N. can obtain a Master of Science in Nursing degree with specialization as a Neonatal Nurse Practitioner in three semesters of part-time study. Students with an ADN can obtain a B.S.N. equivalent in two semesters full-time, then enter the M.S.N. program.

Courses are offered in a modified format that includes three campus visits in Fall, two in Spring, and one in Summer; online conferencing; classroom video-streaming and distributed learning methods. The faculty will work with the student to arrange for a suitable preceptor in the student's home town.

Nurse-Midwifery

PROGRAM DIRECTOR Barbara Petersen

ASSOCIATE PROFESSOR Barbara Petersen

INSTRUCTORS Lori Cabbage, Elisabeth Howard, Jacqui MacMillan-Bohler, Margaret McGill, Mavis Schorn

ADJOINT INSTRUCTORS Susan Cockburn, Katherine E. Eastham, Jacqueline A. Marquis, Diane G. Sharp, Leona M. Wagner, Karen Wolfe

CLINICAL INSTRUCTORS Jill B.Alliman, JoEllen Blake-Wingate, Linda Cole, Cynthia Early, Diane Easton, Linda Foster, Rena P. Harris, Judith Martin, Wanda McClellan, Deborah Narrigan, Letitia C. Rainey, Sarah S. Smith, Deborah J. Wage LECTURER Pamela Waynick

THE NURSE-MIDWIFERY specialty prepares students to manage the obstetric and primary health care needs of essentially healthy women across the lifespan as well as the care of the normal newborn. Nurse-midwifery courses are based on the American College of Nurse-Midwives "Core Competencies for Basic Midwifery Practice: 2002," which include the "Hallmarks of Midwifery Care." Students obtain clinical experience in a variety of nurse-midwifery practices that meet the "Standards of Nurse-Midwifery Practice" of the ACNM.

Graduates will be eligible to take the American College of Nurse-Midwives Certification Council exam. The Nurse-Midwifery program is accredited by the American College of Nurse-Midwives Division of Accreditation (818 Connecticut Ave., N.W., Suite 800, Washington DC 20006; phone 202-728-9860.

Nurse-Midwifery/Family Nurse Practitioner

PROGRAM DIRECTOR Barbara Petersen

For listing of faculty for Nurse-Midwifery/Family Nurse Practitioner, see both Nurse-Midwifery and Family Nurse Practitioner.

THIS PROGRAM is an option of the Nurse-Midwifery Specialty. As a result of the Nurse-Midwifery specialty courses, students are prepared to manage the obstetric and primary health needs of essentially healthy women across the lifespan as well as those of normal newborn infants. Following completion of the nurse-midwifery program, students enroll in select, prescribed Family Nurse Practitioner courses. Emphasis is on expansion of the knowledge and skills required in the management of a family-centered approach to health promotion, risk reduction, and intervention in illness. Through the combination of Nurse-Midwifery and Family Nurse-Practitioner specialties, the Family Nurse-Midwife graduates are prepared as an advanced practice nurse and midwife to deliver comprehensive primary care to individuals from preconception through adulthood.

Students first complete nurse-midwifery requirements, and are eligible to take the American College of Nurse-Midwives Certification Council (ACC) Examination. Following completion of the Family Nurse Practitioner courses, usually in two additional semesters, graduates are then eligible to complete either the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP) Family Nurse Practitioner certification examination. The Nurse-Midwifery Program is accredited by the American College of Nurse-Midwives Division of Accreditation (818 Connecticut Ave. NW, Suite 800, Washington DC, 20006; phone 202-728-9860).

Nursing Informatics

PROGRAM DIRECTOR Elizabeth Weiner PROFESSORS Judy G. Ozbolt, Patricia Trangenstein, Jeff Gordon, Elizabeth Weiner

THE Nursing Informatics program at Vanderbilt prepares advanced practice nurses to serve the profession of nursing by supporting the information processing needs of patient care and management. Nursing informatics is the specialty that integrates nursing science, computer science, and information science in identifying, collecting, processing, and managing data and information to support nursing practice, administration, edu-

cation, research, and the expansion of nursing knowledge. Graduates of this program are known as informatics nurses, recognizing that the person is both a nurse and an informaticist. The informatics nurse is one of the specialties recognized by the American Nurses Credentialing Center with certification via computer-based testing.

The curriculum for this program is drawn from the School of Nursing, the Department of Biomedical Informatics in the School of Medicine, and the Managing IT program in Engineering. As with all nursing specialties, students are required to take the 10 hours of nursing core courses currently prescribed by the faculty. Other core courses are essential in the preparation for more in-depth study in a focus area of concentration. These major core courses present the basics of the informatics area, with cross discipline fertilization from Biomedical Informatics and Information Technology management. The nursing informatics area of specialization is further refined in the following two areas:

Area I. Clinical Systems (Ozbolt & others)

Hospital information systems, electronic patient records, order-entry and reminder/alerting systems, clinical pathways, nomenclature, coding methods, standards, natural language understanding and processing of clinical records, computer record confidentiality and security

Area II. Educational Informatics (Weiner & others)

Computer assisted learning technologies, multimedia collection and cataloguing, strategic planning for technology, evaluation of technology impact, graphics and database tools, basic web page development, principles of online learning, bridging education with practice and research

Pediatric Nurse Practitioner

PROGRAM DIRECTOR Reneé McLeod
PROFESSOR Lynda L. LaMontagne
CLINICAL PROFESSORS John W. Greene, Churku M. Reddy
ASSOCIATE PROFESSORS Mary Jo Gilmer, Melanie Lutenbacher
CLINICAL ASSOCIATE PROFESSORS Ovidio B. Bermudez, Gerald B. Hickson
CLINICAL ASSISTANT PROFESSORS Joseph Gigante, Barbara D. Johnson, Terrell Smith
INSTRUCTORS Elaine Boswell-King, Lani Liehr, Kimberly L. Ray
CLINICAL INSTRUCTORS Margaret S. Anderson, Tanya F. Boswell, Kathleen C. Byington,
Patricia L. Chenger, Priscilla Condon, David E. Danhauer, James R. Hanley, Patti D.
Kamykowski, Ellen G. Levitt, Cindy K. Lybarger, Timothy C. Mangrum, Jonna R. McCracken, Sheila A. Morehead, Lee Anne O'Brien, Sue Ross, Tena A. Simmons, Deborah
T. Tate, John C. Taylor, Ann M. VanderWoude, Laura S. Winslow, Kenneth N. Wyatt
LECTURERS Amy M. Edwards, Heather Flynn, Ann M. Johnson, Amy Kremer, Agnes Read

THE PEDIATRIC Nurse Practitioner specialty is designed to prepare advanced practice nurses who provide primary care to children. A unique feature of Vanderbilt's program is the special emphasis on caring for children with special needs and on the related concerns of their families. Students will also have the option of one semester of further study for specializing in the care of acutely ill children. The program of study provides a broad theoretical and research foundation in advanced concepts of parent, child, and adolescent nursing. Clinical experiences occur across a variety of settings and focus on providing primary care to all children, with particular emphasis on those with special needs. Upon completion of the program, graduates are eligible to sit for the American Nurses Credentialing Center (ANCC) Pediatric Nurse Practitioner (PNP) examination and the National Certification Board of Pediatric Nurse Practitioners and Nurses (NCB) Pediatric Nurse Practitioner exam.

Psychiatric–Mental Health Nurse Practitioner

PROGRAM DIRECTOR Susan Adams
PROFESSOR EMERITA Joyce K. Laben
ASSOCIATE PROFESSORS Susan Adams, Kathleen A. Dwyer, Vaughn G. Sinclair
CLINICAL ASSOCIATE PROFESSORS Gloria W. Calhoun, Ginger Manley
ASSISTANT PROFESSORS Caroline Post Cone, Lorna Kendrick, Debra Jenkins Partee,
Sandra S. Seidel, Jennifer Scroggie, Karen L. Starr
CLINICAL ASSISTANT PROFESSOR Marilynn L. Bodie
INSTRUCTORS Theresa Inott, Gretchen Rauter, Christopher White
CLINICAL INSTRUCTORS Shirley E. Colson, Ann S. Cross, Donna Finto-Burks, Patricia H.
Gaulle, Karen T. Jenks, Christine J. Lamphier, Donna Lynch, John J. Martens, Lynn McDonald, David McMillan, Dawn M. Vanderhoef, Zia Wahid, Walter F. Wilson, Mary A.
Woodward-Smith, Paula Yelverton, Jane C. Zibelin
LECTURERS Jean Blackburn, Carol Groninger, Melissa Brown Paty

als across the life-span within the context of their environment. Course content and clinical practica prepare students to use clinical judgment and critical thinking in the performance of comprehensive (physical and mental) assessments, differential diagnoses, prescription of psychopharmacologic agents, and non-pharmacologic interventions such as case management, individual, group, and family psychotherapy. Students may select clinical sites with an emphasis on child-adolescent, adult, or geriatric populations. Legal, ethical, social, cultural, financial, and policy issues that impact the delivery of mental health services and the PMHNP

role are integrated throughout the curriculum.

Graduates of this program will be eligible to take the American Nurses Credentialing Center (ANCC) certification exams for either the Adult or Family Psychiatric–Mental Health Nurse Practitioner, depending on their area of clinical focus. Additionally, this program provides weekly psychotherapy supervision and clinical experience that meet the eligibility requirements for graduates to take the ANCC certification exams for either the Adult or Child-Adolescent Psychiatric and Mental Health Clinical Nurse Specialist, depending on their area of clinical focus.

Women's Health Nurse Practitioner

PROGRAM DIRECTOR Jane B. Daddario
PROFESSOR Royanne A. Moore
CLINICAL PROFESSORS Luther O. Christman, James F. Daniell
ASSOCIATE PROFESSOR Jane A. Daddario
ASSISTANT PROFESSOR Michele S. Salisbury
CLINICAL ASSISTANT PROFESSORS Ted L. Anderson, Jo M. Kendrick
INSTRUCTORS Suzanne Baird, Virginia A.Moore
ADJOINT INSTRUCTOR Tracie R. Ralph

CLINICAL INSTRUCTORS Julie B. Barrett, Stephanie Bryan, Susan W. Caro, Mary E. Dabrowiak, Rodney Deal, Dana L. DeMoss, Joe M. Edwards, Gertrude I. Fricko-Wright, Gregory A. Gapp, Cheryl A. Glass, Angela Hammond, Susan S. Hargrove, Elizabeth A. Huff, Deborah A. Jones, Tamara Keown, Rena T. Klarich, Jacqueline J. Koss, Bryan R. Kurtz, Beth Lambert, Heather Lambert, James H. Lindsay, William D. McIntosh, Robin E. Mutz, Julie Russell, John V. Spencer, Nancy S. Townsend, Nanette H. Troiano, Hope Wood, Penelope J. Wright

LECTURERS Deborah A. Jones, Margaret Babb Kennedy, Laurie A. Scott, Norma Wall, Penny Waugh

For listing of faculty for Women's Health Nurse Practioner/Adult Health Nurse practioner, see both Women's Health Nurse Practitioner and Adult Nurse Practioner.

*WOMEN'S HEALTH Nurse Practitioner specialty begins with the study of gynecologic, well-woman care and continues with the study of healthy childbearing women. Emphasis is on health maintenance of women throughout the life span. This program prepares students for entry level advanced practice as a Women's Health Nurse Practitioner. A focus on Critical Care Obstetrical Nursing is open to a limited number of students who have practiced as Registered Nurses.

Upon completion of the program, the student will be eligible to sit for the National Certification Corporation Women's Health Nurse Practitioner exam.

Women's Health Nurse Practitioner/ Adult Nurse Practitioner

PROGRAM DIRECTOR Jane B. Daddario

For listing of faculty for Women's Health Nurse Practioner/Adult Health Nurse practioner, see both Women's Health Nurse Practitioner and Adult Nurse Practioner.

Practitioner (ANP) Dual Focus Program is an exciting opportunity for individuals to gain dual certification in both specialties so they can meet the unique healthcare needs of women as well as primary healthcare needs of all adults as they pass from adolescence through the advanced years.

The WHNP/ANP program addresses a range of women's health issues, including normal pregnancy, prenatal management, well-woman healthcare and menopause. In addition, it provides a broad foundation in adult primary care with a significant emphasis on disease prevention and health promotion. Students gain an understanding of healthcare delivery systems in this country. They gain the knowledge and skills necessary to assess, diagnose and manage common acute and chronic health problems of adults, including the unique aspects related to women's health. In addition, they will be prepared to educate and counsel patients on health maintenance and disease prevention.

Students will learn from a group of professional faculty embers who combine classroom instruction with hands-on clinical experience. Graduates of this program have the opportunity to gain dual certification as a Women's Health Nurse Practitioner through the National Certification Corporation (NCC) and an Adult Nurse Practitioner through the American Nurses Credentialing Center (ANCC). As advanced practice nurses, they can practice in various health care settings, including collaborative physician internal medicine and women's health practices, women's health clinics, and hospitals.

Nurse practitioners who are currently certified as Women's Health Nurse Practitioners and who wish to return for a post master's option in the Adult Nurse Practitioner program may submit an educational portfolio for review and determination of additional required course work.

The WHNP/ANP program requires an additional semester of full-time course work. The length of the specialty year is four full-time semesters.

M.S.N. Program for B.S.N. Certificate-Prepared Women's Health Nurse Practitioners Who Live at a Distance

For listing of faculty for this program, see Women's Health Nurse Practitioner.

Faculty members have designed a program for BSN Certificate-Pre-

pared Women's Health Nurse Practitioners that recognizes course work completed in the certificate program and years of clinical experience. Through a portfolio analysis of certificate course work, résumé, and college transcripts, the faculty will review course work and work experience for eligible credit towards the MSN requirements.

Students will be able to obtain a Master of Science degree in Nursing with a specialization in Women's Health in three semesters of part-time course work. Our courses are offered in a modified format that includes campus visits one time per semester for 4-5 days; online conferencing, video-streaming and distributed learning methods.

Joint M.S.N./M.B.A.Program

A joint program leading to the M.S.N./M.B.A. degrees is offered through the health systems management specialty at the School of Nursing and the Owen Graduate School of Management.

The M.S.N./M.B.A. joint-degree program is uniquely designed to prepare nurse managers for top level management in various health care settings. In addition to advanced practice in health systems management, opportunities are provided for advanced practice in financial management, operations management, marketing, accounting, economics, leadership, management, and policy. Admission is required to both the School of Nursing and the Owen Graduate School of Management. Successful completion of the GMAT is required.

Students are required to attend full time and will take approximately 74 hours of required course work in five semesters including one summer of full-time study. Non-credit math and statistics review courses taken at Owen may be required of students in the summer preceding fall enrollment. Nursing and management practice are required in selected courses. Special requirements for admission to the joint degree program are listed under admission criteria for health systems management. Specific curriculum information is available in the Office of Admissions, 229 Godchaux Hall, or by calling (615) 322-3800.

Degree Requirements

For students entering with a B.S.N. degree, the M.S.N. degree is based on a minimum of 39 credit hours. All degree requirements must be completed within three years of first enrollment. The grade of B in each clinical course and an overall B average is required. No more than 9 hours of Pass-Fail credit may apply to the degree. No required core or specialty course may be taken Pass-Fail. No audit courses apply to the degree. Up to 6 hours may be transferred from other schools for graduate courses taken within

the past five years. No credit is awarded toward the degree for courses designated as prerequisite for admission. Students must have a minimum of a 3.0 cumulative grade point average to graduate.

For students entering through the pre-specialty component, the M.S.N. degree is granted on the basis of 81 credit hours. (R.N. pre-specialty students complete 65 credit hours.) In the generalist nursing or pre-specialty component, students must earn at least a *C* in each course. To progress from the generalist to the specialist component, students must (a) complete 42 semester hours of the generalist nursing component with the minimum grade of *C* in each course and (b) earn a cumulative grade average of *B. Students entering the pre-specialty component must complete all M.S.N. degree requirements within five years of initial enrollment*. Students must have a minimum of a 3.0 cumulative grade point average to graduate.

In addition to the ordinary course evaluations, the M.S.N. candidate may be required, at the discretion of the faculty, to take a final comprehensive examination. Such examination shall be completed no later than fourteen days before the degree is to be granted. The candidate for the degree must have satisfactorily completed the M.S.N. curriculum, have passed all prescribed examinations, and be free of indebtedness to the University.

Certification

Students interested in becoming certified in a specialty should consult their program directors for details. Certification is offered through several professional nursing organizations, including the American Nurses' Association. Graduates of each specialty are eligible to sit for the certification exams specific to their specialty. Some exams require documented clinical work hours. Certification examinations from American Nursing Credentialing Center include acute care nurse practitioner, the adult nurse practitioner, family nurse practitioner, psychiatric-mental health nurse practitioner (adult and/or family), clinical specialist in adult psychiatric and mental health nursing, clinical specialist in child and adolescent mental health nursing, pediatric nurse practitioner, and advanced nursing administration examinations. The Nursing Credentialing Center offers the women's health nurse practitioner and neonatal nurse practitioner exams. The National Certification Board of Pediatric Nurse Practitioners offers the Pediatric Nurse Practitioner exam for which Vanderbilt graduates are eligible. The American College of Nurse-Midwives offers the Nurse-Midwifery certification exam.

Ph.D. in Nursing Science

be program prepares scholars for research and teaching careers in major universities and for research positions in public or private sectors of health care. Fields of study emphasize quality of life and quality of care. Quality of life may focus on the individual, family, or community level. Quality of care addresses the processes and outcomes of nursing and health care services. These general areas of study are reflective of the overall research interests and expertise of School of Nursing faculty members and the resources available in the Medical Center, the University, the School of Nursing nurse managed and interdisciplinary care delivery centers, and the Nashville Veterans Administration Hospital. More specifically, faculty research interests include such areas as stress and coping, perceived control, health promotion, clinical outcomes, oncology, pediatric palliative care, impact of chronic conditions on individuals and families, family violence, health psychology/behavioral medicine, life transitions, and symptom management.

Successful applicants to the program are those whose previous academic performance, letters of recommendation, Graduate Record Examination scores, and written goal statement meet admission standards for the School of Nursing and the University Graduate School and whose research and career goals best match the school's research foci and faculty expertise.

The program requires 72 credit hours of study, of which 18 may be transferred from master's course work, pending review and approval by the graduate faculty. The two-year core curriculum of the program (a minimum of 42 hours of formal course work) is organized into three broad areas: phenomena of concern in nursing science; scientific inquiry, including application, testing, and generation of theory; and a minor in an area that supports the student's focus of study. Students work with faculty mentors who guide and oversee their educational program from admission through completion of degree requirements. They participate in intensive research experiences connected with faculty research projects and are exposed to a variety of research designs and analysis techniques. Requirements for the degree include successful completion of advanced course work, a qualifying paper, oral qualifying exam, and dissertation (including oral defense of proposal and findings). Full-time and part-time options are available.

Further information about the doctoral program can be obtained by writing: Ph.D. Program, 226 Godchaux Hall, Nashville, Tennessee 37240, calling (615) 322-3800, or on the Web at www.mc.vanderbilt.edu/nursing/phd.html.



Pre-Nursing Studies

RESHMAN students interested in nursing at Vanderbilt apply for admission to either the College of Arts and Science or Peabody College and indicate that pre-nursing is their intended program of studies. In addition to their faculty advisers in the College of Arts and Science or Peabody College, pre-nursing students will be assigned advisers in the School of Nursing to assist them in planning their program of studies.

Qualified students are admitted to the Master of Science in Nursing program upon completion of 78 prerequisite semester hours of credit or after earning a baccalaureate degree at Vanderbilt. Students are encouraged to write or call the Office of Admissions, 229 Godchaux Hall, (615) 322-3800 for further details of the program or e-mail *VUSN-admissions@mcmail.vanderbilt.edu*.

Pre-Nursing Studies in the College of Arts and Science

Students may obtain both the baccalaureate degree and the M.S.N. degree by combining three and one-half years (seven semesters) of study in the College of Arts and Science with six semesters of study in the School of Nursing. Students will receive the baccalaureate from the College at the end of the eighth semester under the senior-in-absentia program and the M.S.N. from the after completing an additional five consecutive semesters of study. This program of study requires that students complete the general curriculum requirements for the baccalaureate degree and satisfy the prerequisite courses for admission to the School of Nursing. The first three semesters in nursing are accelerated generalist nursing courses and serve as a "bridge" into the Masters of Science in Nursing (M.S.N.) program by preparing students for the NCLEX exam to become a Registered Nurse (RN). These courses also provide the foundation equivalent to the bachelor's degree in nursing for course work in the selected nursing specialty. Upon completion of three semesters of pre-specialty courses, students enter an additional three-semester sequence of courses in their declared specialty in order to earn the M.S.N. degree.

Students must apply to the School of Nursing for admission to the senior year in absentia program during their junior year. Students are subject to all Nursing School admission requirements, and no student is assured of admission to the School of Nursing. Up to 16 hours of School of Nursing courses approved by the College may be counted toward com-

pletion of the undergraduate degree. Upon acceptance to the School of Nursing, students will be assigned an adviser and should schedule an advising appointment.

Students interested in this program should consult Paddy Peerman, Director of Enrollment Management (615-322-3802), or the School of Nursing Admissions Office (615-322-3800) for advice on planning undergraduate studies to meet the program's requirements.

Pre-Nursing Studies at Peabody College

Pre-nursing students at Peabody College may either (a) complete a major in human and organizational development or child development and earn both a B.S. and an M.S.N. through a senior-in-absentia program; (b) complete 78 hours of prerequisite courses and apply for admission to the School of Nursing for their senior year; or (c) complete degree requirements at Peabody and enter the School of Nursing after graduation from Peabody College. Students choosing any of these options must satisfy admission requirements for the M.S.N. program. Upon admission to the School of Nursing, the student is required to complete six semesters (two calendar years) of full-time study to earn the M.S.N.

Students interested in the senior-in-absentia program should refer to the section on Senior-in-Absentia in this catalog as well as to the Special Programs for Undergraduates section in the *Undergraduate Catalog*. Under this option, students complete their first three years of study at Peabody, apply for admission to the School of Nursing during the fall of their junior year, and, upon admission, take generalist nursing courses their senior year, formally transferring to the School of Nursing in the spring semester, after completing 105 hours as Peabody students. Upon successful completion of the fall and spring semester nursing course work, students are awarded the B.S. in human and organizational development or child development. They then continue for an additional four semesters (summer, fall, spring, and summer) to earn the Master of Science in Nursing.

The B.S. degree is conferred by Peabody College at the end of the spring semester. The M.S.N. is conferred by the School of Nursing at the end of the fifth year.

Pre-nursing students at Peabody who elect to complete 78 hours of prerequisite courses and enter the School of Nursing in their senior year will continue to the M.S.N. degree, bypassing the baccalaureate degree. With the M.S.N., however, students are qualified for all professional nursing careers and eligible to apply to the National Council on Licensure Examination (NCLEX) to become a Registered Nurse.

Senior-in-Absentia Programs

The School of Nursing has formalized arrangements with several liberal arts colleges to allow students to combine a baccalaureate degree in liberal arts and a Master of Science in Nursing degree. Students who complete this five-year program of study will have had the experience of dividing their academic career between a liberal arts college and the health sciences center of a major university. This unique combination of study on two differently-oriented campuses provides the student with an excellent nursing education, strongly complemented by study in the humanities, natural sciences, and social sciences.

While specific details vary in each senior-in-absentia program, these programs generally require students to spend three years at their liberal arts college, completing general curriculum requirements for the baccalaureate degree and satisfying the prerequisite courses for admission to the School of Nursing. Students apply for admission to the School of Nursing in the fall semester of their junior year. If accepted, the student enrolls at Vanderbilt in the fall semester of the senior year. After successfully completing the fall and spring semesters of generalist nursing courses at Vanderbilt, the student is awarded a baccalaureate degree from his or her undergraduate school. The student then continues for an additional four semesters (summer, fall, spring, summer) to earn a Master of Science in Nursing from Vanderbilt University.

At the time of publication, senior-in-absentia programs have been formalized with Belmont University, David Lipscomb University, Fisk University, Trevecca Nazarene University, and Vanderbilt University's Peabody College, all in Nashville, Tennessee; as well as Bridgewater College in Bridgewater, Virginia; Mary Baldwin College in Staunton, Virginia; Maryville College in Maryville, Tennessee; Randolph-Macon Woman's College in Lynchburg, Virginia; Wheaton College in Wheaton, Illinois; Birmingham-Southern College, Birmingham, Alabama; Bryan College, Dayton, Tennessee; and Covenant College, Lookout Mountain, Georgia. Please call or write the Director, Office of Admissions, 229 Godchaux Hall, Vanderbilt University, Nashville, Tennessee 37240, (615) 322-3800, for further details.



Post-Master's Option

THE purpose of the post-master's studies program is to provide, for nurses who already hold a master's degree in nursing, an educational route to specialization in an area other than that obtained in their master's program. The program is designed to strengthen or broaden the clinical or administrative capabilities of master's-prepared nurses who are planning a role expansion or role change.

Admission Requirements

- 1. A master's degree in nursing from an NLNAC-accredited program.
- 2. Completed application and official transcript documenting conferral of master's degree in nursing.
 - 3. Current Tennessee nursing license.
- 4. Requirements regarding letters of reference, nursing experience, interview, and prerequisite courses vary according to the area of specialization. Call the Director, Office of Admissions, (615) 322-3800, for further details.
 - 5. Approval by the program director.

Academic Standards

Post-master's students must meet the same academic standards for progression and program completion as M.S.N. students. See Academic Standards section under M.S.N. Students.

Advanced Practice Roles

Post-master's study programs are available in each of the following specialties: acute care nurse practitioner; family nurse practitioner; neonatal nurse practitioner; women's health nurse practitioner; nurse-midwifery; pediatric nurse practitioner; psychiatric mental health nurse practitioner; health systems management; and adult nurse practitioner. Please refer to the specific advanced practice specialty curriculum for sample curriculum plans. For further information, call the Office of Admissions at (615) 322-3800.

"Tapa cloth," an art form indigenous to the Polynesian culture, presented to VUSN by the nurse-midwives of Fiji practicing at the Commonwealth Health Center in Saipan as a gesture of good will and love for the art and science of nursing and midwifery.



Continuing Nursing Education

The Vanderbilt University School of Nursing acknowledges the rapidity of advances in healthcare theory and technologies. These changes and the concurrent expanded roles for advanced practice nurses necessitate on-going education and training to support professional advancement and optimal healthcare. As a result, the Vanderbilt School of Nursing has accepted the concept of lifelong learning as a cornerstone to the educational process. This means that a nurse's formal education is only the beginning of a lifelong commitment to learning. Continuing Nursing Education is the vehicle through which this goal is operationalized.

Vanderbilt University School of Nursing's Office of Lifelong Learning plans, coordinates and evaluates a wide variety of continuing education opportunities. These educational experiences range from hour-long updates to multi-state conferences to web-based courses that are distributed world-wide via the Internet.

The Vanderbilt University School of Nursing is approved as a provider of continuing education in nursing by the Tennessee Nurses Association which is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation.

For further information, contact the Office of Lifelong Learning at (615) 322-1722.



Academic Regulations

ANDERBILT students are bound by the Honor System inaugurated in 1875 when the University opened its doors. Fundamental responsibility for the preservation of the system inevitably falls on the individual student. It is assumed that students will demand of themselves and their fellow students complete respect for the Honor System. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given by the student in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are specifically prohibited under the Honor System. The system applies not only to examinations but also to written work and clinical practice requirements submitted to instructors. The student, by registration, acknowledges the authority of the Honor Council of the Vanderbilt University School of Nursing.

The University's Graduate Student Conduct Council has original jurisdiction in all cases of non-academic misconduct involving graduate and professional students.

Students are expected to become familiar with the *Vanderbilt University Student Handbook* and the *School of Nursing Student Handbook* (on line at www.vanderbilt.edu/student_handbook/ and www.vanderbilt.edu/nursing/current/handbk0304.pdf, available at the time of registration, which contain the constitution and bylaws of the Honor Council and sections on the Graduate Student Conduct Council, Appellate Review Board, and related regulations.

For information concerning academic rules and regulations for the Ph.D. program, consult the *Graduate School Catalog*.

Nursing Honor Council

The Honor Council is an organization that seeks to preserve the integrity of the Honor Code. The membership consists of student representatives from the specialty and pre-specialty levels. Representatives serve for one year from September through August. Officers of the council must be full-time students in good standing. Alternates are elected to serve in the absence of representatives.

Orientation

A required orientation program is held each fall prior to the registration period to acquaint new and continuing students with the school environment. The associate dean may call additional class meetings throughout the year as needed.

A spring orientation is designed for students who enter in the spring semester.

Registration

Each semester, at a time specified in the calendar, all students are required to confer with their academic advisers and register for courses for the next semester. Students should check carefully with their faculty advisers concerning progress toward completing degree requirements and make the necessary revisions in their program of studies. A student who registers late is charged a \$30 late registration fee.

At the time of enrollment, the student must present evidence of the following:

- 1. Registered Nurse students must be authorized to practice in Tennessee (i.e., hold a license in Tennessee or one of the compact licensure states). Refer to http://www.ncsbn.org for more information.
- 2. Adequate hospitalization insurance coverage either through the University insurance plan or by another policy. See the section on the University's Hospitalization Insurance Plan in the front of this catalog for further details.
- 3. Current CPR certification for both adult and child (health care provider course preferred).
 - 4. Student Health clearance for the following:
 - a. Negative results of annual tuberculin skin test or chest X-ray.
 - b. MMR is required of all students born after 1956. For students born before 1957, documentation of Rubella immunity (Rubella antibody titer) or Rubella vaccination is required.
 - c. Hepatitis B vaccination (3-part series).
 - d. Diphtheria/tetanus (inoculated within last ten years).
 - e. Varicella titer (Students testing negative must be immunized).
 - f. Physical exam within the last six months (good physical and mental health).
 - g. Documented attendance at Bloodborne Pathogens Workshop and other required safety sessions annually. Registration will be cancelled for failure to attend required sessions.
 - 5. Other immunizations, titers, or tests as required by clinical agencies.

The School of Nursing requires continuous registration of all degree candidates. Responsibility to maintain registration rests with the student. To retain student status, the student must register each fall, spring, and summer semester or secure an approved leave of absence. Students who are registered for zero hours in order to satisfy requirements for an incomplete grade are considered degree candidates. Students registering for zero hours or only completing an incomplete grade are charged one-half credit hour tuition.

All matriculated students must take a minimum of 6 semester hours each semester. Post-master's students continue to be allowed to take three or more hours each semester in an approved, planned program of studies.

Special students are an exception; by virtue of their non-matriculated status, they are eligible to take a maximum of 7 semester hours. Other exceptions may be requested by written petition to the chair of the Student Admissions and Academic Affairs Committee.

Accidents / Injury / Illnesses

Students are responsible for the costs of tests, treatment, and follow-up care for any accidents, injury, or illnesses that occur while enrolled as students at Vanderbilt University School of Nursing. Students are not entitled to worker's compensation benefits.

Calendar

The official calendar of the School of Nursing is printed at the front of this catalog. A detailed calendar for each semester is distributed at registration. In addition, the Vanderbilt University Calendar is available online at *calendar.vanderbilt.edu*. Students are expected to be familiar with these dates and to conform to them. The *Vanderbilt Register*, issued weekly by the Division of Public Affairs, contains notices of all events and announcements pertaining to the University community. It is the responsibility of the student to keep informed of any event or announcement applicable to the School of Nursing. Failure to know of an officially required event is not an excuse for non-attendance.

Faculty Advisers

Each student will be assigned a faculty adviser who will assist with planning a program of studies and help solve academic problems. The complete program should be approved within the first semester of enrollment. The associate dean for academics serves as adviser to special students.

Program of Studies

During the first semester of study, all students must file an approved program of studies with the faculty adviser. When a change in the program or absence from the school for one or more semesters is anticipated, the student must file an approved change in program form with the adviser. The forms for programs of studies and subsequent changes are available from the director of student affairs. Copies are to be filed with the adviser.

Part-time students must follow the planned part-time program of study. Students taking a leave of absence may be unable to take clinical courses in their planned sequence.

Students who wish to alter the required program of studies may petition to do so by giving justification for the request and proposing an alternative program of study, which must be approved by the academic adviser, program director, and associate dean.

Students who are on academic probation and who wish to alter their program of study must have the proposed program reviewed by the Student Admissions and Academic Affairs Committee.

Change of Course

Dropping a Course. The first five class days of the semester are allocated for necessary changes of course.

Courses may be dropped without entry in the final record within two weeks of the first day of classes. Courses may be dropped only after consultation with the student's adviser and the course instructor. Dropping a course may affect the sequencing of the program of study and may change the student's expected date of completion of course work.

Withdrawing from a Course. Students may withdraw from courses and receive the grade W (withdrawal) according to the date published in the University Calendar. If the course in question is a nursing course, the student will receive the grade W (withdrawal) if less that half of the course has elapsed. Students may not withdraw from a course after the published date in the University Calendar or after the course is half completed. If the course is taken outside the School of Nursing, grade regulations of the appropriate school will apply. A student must be in good academic standing to be eligible to withdraw from a course.

Audit Courses

Students may wish to audit courses in the School of Nursing for which they will receive no credit. Auditing courses requires registration and payment of tuition and is subject to the following conditions:

- 1. Consent of the instructor must be obtained.
- 2. The instructor sets the conditions under which a course may be audited. Failure to meet those conditions is justification for withdrawal of the audit designation.
 - 3. Audits carry no credit.

Pass-Fail Courses

Only elective courses may be taken Pass-Fail. Grades of *C* or above are recorded as *Pass*.

The grade *Pass* is not counted toward grade point averages. The grade of *F* applies as in any other course; although an *F* earns zero hours, the hours attempted are counted in calculating the grade point average. A student who has a choice about taking a course for a grade or Pass-Fail may register on a Pass-Fail basis or may change to Pass-Fail basis within one month of the first day of classes. After this time, one may change from a Pass-Fail to a letter grade basis according to the dates published in the University calendar, but not vice-versa.

No-Credit Courses

A student taking a course on a no-credit basis is required to attend class, take examinations, and do all the work of the course. The student's grade is recorded with the notation that no credit toward graduation is received. No-credit courses do count in computation of the student's academic load and in the computation of tuition.

Class Attendance

At the beginning of the semester the instructor will explain expectations for attendance and participation for a course and their influence on the evaluation process. It is expected that students will attend all nursing classes, laboratory sessions, and clinical experiences.

Course Load

The unit of measure of the student's work load is the semester hour. All references to credit hours are semester hours.

The normal full-time schedule is 12 to 16 hours per semester. A student who wishes to carry more than 16 hours must secure authorization from the associate dean before registration. Students who elect to attend the program part time must follow the planned part-time program of study.

Examinations

Examination policies are determined by the instructor. A record of all grades given during the course and all final examinations and major papers are kept on file by the instructor for one year following the conclusion of the course.

A final examination schedule for pre-specialty courses is issued for each term, allowing two hours for a final examination in each course. Each in-class final examination must be given at the time indicated on the schedule.

A number of alternatives to standard in-class examinations are permitted at the instructor's discretion. These include take-home and self-scheduled examinations, oral examinations, and term papers. A course may have no final examination at all if there are adequate opportunities for evaluation during the semester. A take-home, self-scheduled, or oral examination should be approximately equivalent to an in-class examination. Final examinations must be conducted during the final examination period at the end of the module or at the end of the semester.

Students are expected to take exams at the times specified in the course syllabus. Students must receive permission from the faculty prior to the scheduled exam to take the exam at a different time.

Any student more than fifteen minutes late to an examination must present a satisfactory excuse. No student will be admitted after the first hour.

Grade Reports

Pre-specialty students are notified of mid-semester deficiencies in writing; copies of the notice are sent to the student's faculty adviser and the director of enrollment management of the School of Nursing. Students receiving mid-semester deficiencies are encouraged to meet with the course instructor and their faculty adviser to identify resources available to assist in successfully completing the course.

A final grade recorded by the University registrar may be changed only upon written request of the instructor.

Program Evaluation

Students are expected to participate in program evaluation activities while enrolled in the program and after they have left Vanderbilt. These data will be used for research purposes only. Procedures to protect individual confidentiality will be followed.

Leave of Absence

Leaves of absence are granted for one semester or a maximum of one year. A student must be in good academic standing to be eligible for a leave of absence. Leave of absence forms are available from the School of Nursing director of enrollment management. Students must attach a change in program form to the leave of absence form. Leaves must be approved by the academic adviser and the associate dean. Time spent on leave of absence is included in the total time taken to complete the degree. Since the program runs year round, students must take a leave of absence for any semester they are not in attendance. Students are ineligible for a leave of absence if they have a grade of I (Incomplete) or M (Missed a final examination) for the previous semester. At the end of the leave of absence, the student must notify the director of enrollment management in writing of the intent to return or not to return. A student failing to register at the conclusion of the stated leave period is withdrawn from the University and must reapply for admission unless the leave is extended by the associate dean. Those without authorized leave who do not register are dropped from the rolls and are not considered current students. If they wish to resume study in the School of Nursing, they must reapply for admission.

Alcohol and Controlled Substance Policy

Students are not allowed to attend class, lab, or clinical practice under the influence of alcohol or controlled substances. Students suspected of using such substances will be asked to submit to voluntary urine screening as a condition of progression. Additional information on student impairment is found in the University *Student Handbook* on policies concerning alcohol and controlled substances.

Practica and Preceptorships

All specialties have required practica and preceptorships; students and faculty share the responsibility for locating practica and preceptorship sites. Guidelines for selecting an appropriate site are available from the program director. Students register for a practicum or preceptorship at the beginning of the semester. Students must have an R.N. license to register for a preceptorship. Preceptorship sites are selected based on how they fit with the specialty and the students. Sites may be located outside the Middle Tennessee area. Students are responsible for transportation and lodging associated with clinical experiences.

Clinical preceptors and/or agencies may require a drug screening or criminal background check prior to beginning a clinical practicum. Costs associated with these processes will be the responsibility of the student.

The Board of Nursing is concerned about the number of individuals with criminal conviction histories who apply for licensure as registered nurses. The Board will presume that an applicant is not entitled to licensure, and will therefore deny any application for initial licensure, temporary permit, or renewal following the provisions of the Administrative Procedures Act to a person who has been convicted, and on which conviction the time for appeal has expired, as an adult of any of the following crimes within five (5) years preceding said application of renewal:

- a. Aggravated Assault, as in T.C.A. 39-13-102;
- b. First degree Murder, as in T.C.A. 39-13-202;
- c. Second degree Murder, as in T.C.A. 39-13-207;
- d. Voluntary Manslaughter, as in T.C.A. 39-13-211;
- e. False Imprisonment, as in T.C.A. 39-13-302;
- f. Kidnapping, as in T.C.A. 39-1-303;
- g. Aggravated Kidnapping, as in T.C.A. 39-13-304;
- h. Especially Aggravated Kidnapping, as in T.C.A. 39-13-305;
- i. Robbery, as in T.C.A. 39-13-401;
- j. Aggravated Robbery, as in T.C.A. 39-13-402;
- k. Especially Aggravated Robbery, as in T.C.A. 39-13-403;
- 1. Aggravated Rape, as in T.C.A. 39-13-502;
- m. Rape, as in T.C.A. 39-13-504;
- n. Aggravated Sexual Battery, as in T.C.A. 39-13-504;
- o. Sexual Battery, as in T.C.A. 39-13-505;
- p. Statutory Rape, as in T.C.A. 39-15-506;
- q. Theft of Property, as in T.C.A. 39-14-103 or of services, as in T.C.A. 39-14-104, except as to be a Class A misdemeanor, as in T.C.A. 39-14 105(1);
- r. Forgery, as in T.C.A. 39-14-114;
- s. Falsifying of Educational and Academic records, as in T.C.A. 39-14 136;
- t. Arson, as in T.C.A. 39-14-301;
- u. Aggravated arson, as in 39-14-302;

- v. Burglary, as in T.C.A. 39-14-402;
- w. Aggravated Burglary, as in T.C.A. 39-14-404;
- x. Incest, ad in T.C.A. 39-15-302;
- y. Aggravated Child Abuse, as in TC.A. 39-15-402;
- z. Sexual Exploitation of a Minor, a in T,C.A. 39-17-1003;
- aa. Aggravated Sexual Exploitation of a Minor as in T.C.A. 39-17 1004;
- bb. Especially Aggravated Sexual Exploitation of a Minor, as in T.C.A. 39-17-100
- cc. Assisted Suicide, as in T.C.A. 39-13-216;
- dd. Rape of a child, as in T.C.A. 39-13-522.

The Board of Nursing will also deny an application for initial licensure, temporary permit, or renewal, following the provisions of the Administrative Procedures Act, to persons who were convicted as a juvenile of the following crimes within five (5) years preceding said application or renewal:

- a. First Degree Murder, as in T.C.A. 39-13-202;
- b. Second Degree Murder, as in T.C.A. 39-13-207;
- c. Kidnapping, as in T,.C.A. 39-13-207;
- d. Aggravated Kidnapping, as in T.C.A. 29-13-304;
- e. Especially Aggravated Kidnapping, as in T.C.A. 39-13-305;
- f. Aggravated Robbery, as in T.C.A. 39-13-402;
- g. Especially Aggravated Robbery, as in T.C.A. 39-13-403;
- h. Aggravated Rape, as in T.C.A. 39-13-502;
- i. Rape, as in T.C.A. 39-13-503.

Any individual who applies for initial licensure, temporary permit, or licensure renewal and supplies false or incomplete information regarding the individual's criminal record to the Board on an application for licensure will be denied said initial licensure, temporary permit, or renewal.

Transportation and Lodging

Students are responsible for their own transportation to and from all clinical facilities and field trips. Clinical sites in the specialty year are chosen for their ability to provide clinical experiences consistent with the specialty requirements and the mission of the school. Students should be prepared to travel as much as two hours each way to rural, remote, and underserved areas. Practica and preceptorships may be in out-of-state locations. Students are responsible for the cost of their travel and lodging.

Uniform Policy

The uniform for specialty-level students varies. The faculty designates appropriate professional apparel for students taking specialty nursing

courses. Students in the clinical area are expected to be well groomed at all times

Pre-specialty students are required to have at least two uniforms and one white three-quarter-length lab coat. A navy scrub uniform and either a white scrub or a white nurse's uniform are acceptable.

Vanderbilt uses several different institutions for clinical practice, and the dress code varies for each. Some clinical situations require a white laboratory coat, street clothes (no jeans), or a hospital-provided uniform. The VUSN insignia is required to be sewn on the left sleeve of all lab coats and uniforms. The patch can be purchased at the Vanderbilt Medical Book Store.

A student identification badge, available through the School of Nursing, is always worn when the student is in the School of Nursing or the clinical area. Accessory items needed are a watch with a second hand, and a stethoscope. The only jewelry that may be worn in the clinical area are a watch, a wedding band, small earrings for pierced ears (maximum two per ear), and pins that designate professional organizations. Other visible body piercing will not be allowed in the clinical area.

Academic Standards

Good Academic Standing

Good academic standing is defined as both a semester GPA of 3.0 or higher, a cumulative GPA of 3.0 or higher, and no grade below *C* in a didactic course, and no grade below *B* in a course with a clinical component.

Completion of Program

Students admitted to the M.S.N. program through the pre-specialty component must complete all pre-specialty courses *within two calendar years* and the specialty curriculum *within three calendar years*. Leaves of absence are counted in this time frame.

Students admitted to a M.S.N. specialty with a B.S.N. must complete the curriculum *within three calendar years*. Leave of absences are counted in this time frame.

Grading System

All work is graded by letters, interpreted as follows:

A+, A, A-	4.0 grade points per semester hour
B+, B, B-	3.0 grade points per semester hour
C+, C, C-	2.0 grade points per semester hour
F	0.0 grade points per semester hour
W	Withdrawal

Plus and minus points are not calculated into the grade point average in the School of Nursing. All *F* grades are counted in the computation of grade point ratios, unless the student repeats the course and earns a passing grade.

M: M:ssing a final examination. The designation M is given to a student absent from the final examination who has communicated with the instructor about the absence in advance. The grade F is given if the student could not have passed the course even by passing the final examination or if the instructor was not notified. The final examination must be taken at a time designated by the instructor. The grade M must be removed in the next semester or the grade will automatically be converted to F.

I: Incomplete. Students for whom an extension has been authorized receive the grade *I*, which stands until the work has been made up. The course coordinator or instructor who authorizes the extension confers with the student to establish a final time limit for completion of the missing work. Copies of the agreement are given to the student, the instructor, and the director of enrollment management of the School of Nursing. The grade *I* must be removed in the next semester or the grade will automatically be converted to *F*.

Late work. Essays, book reviews, papers, laboratory reports, etc., must be turned in no later than the last day a particular class meets or earlier if so specified by the instructor. The grade for work not done in compliance with this schedule is zero unless an extension has been granted. The student must present a petition for an extension to the course coordinator or instructor at least a day before the work is due, and the petition must be endorsed by the instructor.

Repeat Courses

Students enrolled in the M.S.N. program may repeat a course only with the permission of the Student Admissions and Academic Affairs Committee.

- 1. A course taken in the School of Nursing may not be repeated outside the school for credit toward the degree.
 - 2. Nursing courses may be repeated only once.

Students who do not earn at least a *B* in a course with a clinical component must repeat that course.

Students may repeat only one course one time. If a student makes below the required grade (*B* for courses with a clinical component, *C* for didactic courses) in another course, they will be dismissed. Courses taken for a letter grade may not be repeated on a Pass-Fail basis, nor may a grade indicating withdrawal or incomplete work be counted in place of a letter grade. Only the latest grade counts in calculation of the grade point average and progress toward a degree.

Core Courses

Students enrolled in the specialist nursing component are required to earn a minimum grade of *C* in the core course component (300, 301, 302,

303, 304). Students who earn *C* grades in these courses, however, must have sufficient grade points to maintain a cumulative grade point average of *B*, or a 3.0 on a 4.0 scale.

Probation

Students are expected to maintain a 3.0 grade point average each semester. The academic performance of students is reviewed at the end of each semester. Students are placed on academic probation unless they earn a 3.0 average each semester. A student who is not making satisfactory progress toward the degree will be dismissed if improvement is judged to be unlikely.

A student may be placed on probation only once during the entire program of study (pre-specialty and specialty). If the student's record in another semester warrants probation, the student will be dismissed. A student who is not making satisfactory progress toward the degree may be dismissed from the School of Nursing or may be advised to go on leave of absence or withdraw. When a student is placed on or removed from probation, letters are sent to the student and the student's adviser.

If a student cannot improve his or her grade point average because the needed course cannot be repeated in the following semester, the student will be continued on probation if satisfactory completion of the course will give the student a 3.0 grade point average.

As the School of Nursing is a professional school, the faculty may, for the purposes of evaluation, render opinion on the student's total ability. A student's promotion in the program is determined by the Student Admissions and Academic Affairs Committee at the end of each semester. The committee, on the recommendation of the student's instructors, program director, and/or academic adviser, promotes only those students who have demonstrated personal, professional, and intellectual achievement consistent with faculty expectations at the student's particular stage of professional development. Students who are deficient in a major area or areas will be required to repeat course/clinical work or to complete additional efforts satisfactorily in order to remedy deficiencies. Students deficient in a major undertaking or who demonstrate marginal performance in a major portion of their work will be dismissed.

Readmission

A student who has been dismissed or has withdrawn from the program may apply to the Student Admissions and Academic Affairs Committee for readmission after an intervening period of not less than one semester. The committee will consider such cases on presentation of substantial evidence of a responsible and successful period of work or study during the intervening period. A former student having successfully completed a tour of duty in the armed forces will be classified in this category. There is no guarantee, however, that a student will be readmitted. This will de-

pend on (a) the faculty's evaluation of the likelihood of the applicant's successful performance in succeeding work; (b) the competition of other applicants; and (c) class space available.

A student readmitted after having been advised to withdraw, or after having been suspended or dropped, is on probation during the first semester back in residence.

Progression

Most required nursing courses are sequential, and a student who fails to pass such a course cannot progress in the nursing curriculum. A student seeking a waiver of this policy must submit a written request to the Student Admissions and Academic Affairs Committee for an exception to the rule.

Students must earn a *B* in any course with a clinical component. If a student earns less than a *B*, they must repeat the course and will not be able to progress in the clinical sequence until a *B* grade is earned.

To progress from the pre-specialty component to the specialist nursing component, students must (a) complete 42 hours of the generalist component with at least a *C* in each didactic course and a *B* in each clinical course, and (b) earn at least a 3.0 cumulative grade point average.

Students who earn less than a *C* in 300, 301, 302, 303, or 304 may not enroll in their final specialty clinical course until 300, 301, 302, 303, and 304 have been successfully repeated.

A student who is deemed ineligible to take the NCLEX-RN may not enroll in a course with a clinical component.

Students must hold an active Tennessee nursing license in order to register for the final clinical preceptorship.

Student Complaint and Grievance Procedure

Faculty members welcome the opportunity to work closely with students to facilitate learning and assist in meeting course objectives. The student should first discuss any concerns regarding an instructor or a course with the instructor involved. If further discussion is needed, the student should contact the course coordinator. If the problem is still unresolved, the student should ask the senior associate dean for academics for assistance.

Additional information on complaint and grievance procedures can be found in the *Student Handbook* (on line at *www.vanderbilt.edu/student_handbook/*).

Withdrawal from the University

Students planning to withdraw from the University should see the director of enrollment management in the School of Nursing to initiate proper procedures.

Essential Competencies for Nursing Practice

Practice as a registered nurse requires many competencies, such as the functional abilities listed below:

- Ability to see, hear, touch, smell, and distinguish colors.
- Ability to speak and write with accuracy, clarity, and efficiency.
- Manual dexterity, gross and fine movements.
- Ability to learn, think critically, analyze, assess, solve problems, and reach judgement
- Emotional stability and ability to accept responsibility and accountability.

All students enrolled in the M.S.N. or post-master's program must satisfactorily demonstrate these competitencies in the didactic, laboratory, seminar, and clinical courses throughout their program of studies.

Eligibility for Registered Nurse (R.N.) Licensure

Students are eligible to apply to the National Council on Licensure Examination to become a Registered Nurse (NCLEX–R.N.) upon meeting the requirements specified by the Tennessee State Board of Nursing and upon recommendation by the faculty and the Dean, when the following requirements have been met: (a) completion of the pre-specialty portion of the curriculum; (b) completion of 9 hours of specialty-level coursework required for the M.S.N.; (c) good academic standing (semester and cumulative grade point average of 3.0 or above); and (d) no grade below a *C* in a didactic course, no grade below a *B* in a clinical course, and no incomplete grades. Students who are ineligible to take the NCLEX–R.N. will not be allowed to register for a course with a clinical component.

Students who are not successful on the first writing of the NCLEX–R.N. will be immediately withdrawn from courses with a clinical component. Once the R.N. license is obtained, the student may enroll in courses with a clinical component. The program of study for full-time students will be altered because of delay in being able to participate in clinical courses. Additional semester(s) will be required to complete clinical courses.

Students who are not Registered Nurses are required to take examinations specified by the senior associate dean to prepare for the NCLEX–R.N. Students will be billed for the examinations through their student accounts.

Change of Address and Telephone Number

Students who change either their local or permanent mailing address or telephone number are expected to notify the School of Nursing director of enrollment management immediately. Candidates for degrees who are not in residence should keep the director of enrollment management informed of their current mailing address and telephone number. Students may also change their address and phone number via the Web. Go to

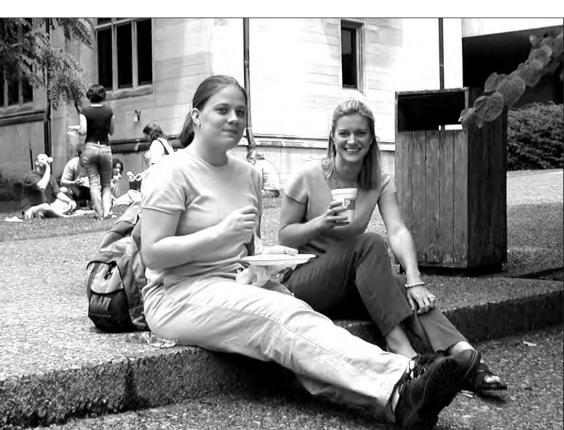
www.vanderbilt.edu. Click on "students," then on "address change." At this point you will be asked to log in by entering your VUNet ID and password. You may then make changes.

Graduation

Degree candidates must have satisfactorily completed all curriculum requirements, have a cumulative grade point average of at least a 3.0, have passed all prescribed examinations, and be free of all indebtedness to the University.

Commencement

The University holds its annual Commencement ceremony following the spring semester. Degree candidates must have completed successfully all curriculum requirements with at least a 3.0 overall GPA and have passed all prescribed examinations by the published deadlines to be allowed to participate in the ceremony. A student completing degree requirements in the summer or fall semester will be invited to participate in Commencement the following May; however, the semester in which the degree was actually earned will be the one recorded on the diploma and the student's permanent record. Students unable to participate in the graduation ceremony will receive their diplomas by mail.



Admission

IRECT admission to the Master of Science in Nursing (M.S.N.) program requires graduation from an NLNAC-accredited baccalaureate program with an upper division major in nursing (B.S.N. degree). Applicants from unaccredited nursing programs will be considered on an individual basis.

Admission without a B.S.N. degree is possible via a generalist nursing pre-specialty or pre-specialty–R.N. component. Qualified students without a B.S.N. enter the Master of Science in Nursing Pre-Specialty Component, a M.S.N. program with multiple entry options.

The curriculum for the School of Nursing places great intellectual, psychological, motor, and sensory demands on students. In accordance with Vanderbilt's non-discrimination policy, the Student Admissions and Academic Affairs Committee is charged with making individualized determinations of the ability of each candidate for admission to successfully complete the degree requirements.

Admission to the M.S.N. Program with a B.S.N.

Admission is based on the following factors:

- 1. *Undergraduate Grade Point Average*. It is recommended that applicants have at least an average of *B* in nursing and a cumulative average of *B*.
- 2. Standardized Test Scores. Applicants are required to have taken the Graduate Record Exam (GRE) within five years of the application date.

Graduate Record Examination Aptitude Test. The applicant should have a composite score of 1,000 or above for the verbal and quantitative protions and a 3.5 or above for the analytical portion. Those with scores below 1500 may be asked, upon faculty request, to provide additional evidence of aptitude. Applicants are reminded to take the test early to meet application deadlines, since it is often several weeks before scores are reported. Information on the GRE may be obtained by writing Educational Testing Service, Box 6000, Princeton, New Jersey 08541-6000, by calling 1-800-808-0090, or by visiting the web site at http://www.gre.org.

Graduate Management Admission Tests (GMAT) are recommended for all students applying for the joint degree program (M.S.N./M.B.A.). The GMAT score may be submitted instead of a GRE score for M.S.N./M.B.A. applicants. Information on the GMAT may be obtained by writing GMAT, Educational Testing Service, Box 6103, Princeton, New Jersey 08541-6103, or by calling 1-800-GMAT-NOW.

3. Official Transcripts. Applicants must submit one transcript from each post-secondary institution attended.

- 4. *R.N. License.* Authorization to practice as a Registered Nurse in Tennessee is required at the time of registration except for students who have taken the licensing examination but have not received the results. Individuals admitted pending examination results are subject to immediate withdrawal from graduate (300-level) clinical courses if the examination is not passed. Once the license is obtained the individual may enroll in courses with a clinical practice component.
- 5. Letters of Recommendation. Three letters of recommendation are required.
- 6. *Interview*. An interview survey is required. An interview in person or by telephone may be required in certain specialties.
- 7. Goal Statement. A concise statement of your career goals as an advanced practice nurse.
- 8. *Prerequisite Courses*. An introductory course in statistics that includes descriptive and inferential statistical techniques is required for admission.
- 9. *Health History.* Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Hepatitis B vaccine, MMR vaccine, tetanus/diphtheria vaccine, varicella titer, and/or other appropriate immunizations to the Student Health Service before initial registration.
- 10. *M.S.N./M.B.A. Program.* Students applying for the joint degree M.S.N./M.B.A. program must apply and be admitted both to the School of Nursing and to the Owen Graduate School of Management. Application packets for Owen may be obtained by writing to the Office of Admissions and Student Services, Owen Graduate School of Management, Admissions Office, 401 Twenty-first Avenue South, Nashville, Tennessee 37203, or by calling (615) 322-6469.

Applicants may submit transcripts to the School of Nursing. Copies will be forwarded to the Owen Graduate School of Management.

Admission to the M.S.N. Program via the Pre-Specialty Component

The School of Nursing offers several options for entry into the M.S.N. program for applicants who do not hold a B.S.N. degree. Qualified applicants are eligible for admission in the following categories:

- 1. Entry with a non-nursing liberal education baccalaureate degree from an accredited college or university or through a formalized senior-in-absentia program. Such applicants must complete prerequisites in human anatomy, human physiology, lifespan development, microbiology/bacteriology, nutrition, and statistics. Students enter the pre-specialty component where they complete 42 hours of generalist courses. They then complete a minimum of 39 hours in courses for a nursing specialty.
- 2. Entry with an associate degree in nursing or a diploma from an NLNAC-accredited nursing school with 78 semester or 120 quarter hours of transferable credit (see Prerequisite Courses below).

After completing 25 hours of pre-specialty level courses, they complete

a minimum of 39 credit hours in a nursing specialty.

3. Entry with 78 semester or 120 quarter hours of prerequisite courses (see below). Students enter into the pre-specialty program. After completing 42 hours of pre-specialty courses, they complete a minimum of 39 hours in a nursing specialty.

Prerequisite Courses

English (6 hours). English composition, literature, or Vanderbilt courses designated with a "W" meet this requirement.

Humanities (6 hours). Humanities courses are those concerned with human thought, including literature, classics, drama, fine arts, history, philosophy, and religion. Technical or skill courses such as applied music or studio art are not acceptable as humanities courses.

Statistics (3 hours). An introductory course in statistics that includes descriptive and inferential statistical techniques is required. Math 127–128, Math 180, or Psychology 2101P are the courses offered at Vanderbilt that fulfill this requirement.

Social Sciences (9 hours). Social Sciences include psychology, sociology, anthropology, political science, and economics.

Natural Sciences (11 hours). Natural Science courses in human anatomy and physiology (Nursing 210ab) and microbiology (Nursing 150) are required. Chemistry 101a–101b or Chemistry 102a–102b and Biological Sciences 110a–110b are strongly recommended but not required for admission.

Lifespan Development (3 hours). A course in lifespan development that includes birth through late adulthood is required. Psychology 283, Developmental Psychology; Human Resources 1000, Applied Human Development; Psychology 1630, Development Psychology, fulfills the lifespan development requirement.

Nutrition (2–3 *hours*). Nutrition must be taken as a prerequisite course. Nursing 231, Introduction to Nutritional Health, fulfills the requirement for nutrition.

Electives (38–39 hours)

The remaining hours of prerequisites may consist of prior college-level nursing or elective courses, except physical education courses, pass/fail courses, courses with grades lower than *C*, courses taken at unaccredited schools, and nursing courses taken at diploma schools. Students entering with a baccalaureate degree in a field other than nursing must have as prerequisite courses: human anatomy and physiology; microbiology/bacteriology; statistics; lifespan development; and nutrition.

Admission Criteria

Admission to the pre-specialty program is based on the following factors:

- 1. Undergraduate Grade Point Average. It is recommended that the applicant have at least a B average in nursing and a cumulative average of B.
- 2. Standardized Test Scores. Applicants are required to have taken either the Graduate Record Examination or the Graduate Management Admission Test, as appropriate, within five years of the application date. See Admission to the M.S.N. Program with a B.S.N. for recommended scores and additional details.
- 3. Official Transcripts. Applicants must submit one transcript from each post-secondary institution attended.
- 4. Current Licensure or Eligibility for RN Licensure. Registered Nurse students must be authorized to practice in Tennessee. Individuals admitted pending examination results are not eligible for clinical courses until licensure is obtained. Pre-specialty applicants must have a negative criminal conviction history to be eligible to apply for RN licensure. See previous section on Practica and Preceptorships for further details.
 - 5. Letters of Recommendation. Three letters of reference are required.
- 6. *Interview*. An interview survey is required. An interview in person or by telephone may be required in certain specialties.
- 7. *Goal Statement*. A concise statement of your career goals as an advanced practice nurse.
- 8. Health History. Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Hepatitis B vaccine, MMR vaccine, tetanus vaccine, varicella titer (students testing negative are required to be immunized), and/or other appropriate immunizations to the Student Health Center before initial registration.

Applicants who do not meet all the listed criteria will be considered on an individual basis.

Application Procedure

Application forms for the M.S.N. program may be secured from the Admissions Office of the School of Nursing or from the School of Nursing Web site at www.mc.vanderbilt.edu/nursing. A \$50 non-refundable fee is required when the application is submitted. The School of Nursing begins reviewing applications for admission to its new fall class beginning December 1 of the previous year, after which admissions are on a rolling basis. There is no published deadline. Although applicants are encouraged to apply by December 1 of the year before they intend to enroll, there is flexibility. Interested applicants should contact the Admission Office about specific programs.

Admissions decisions are made upon receipt of all application materials. A \$200 non-refundable matriculation fee is required upon acceptance.

Applications are considered current for one year; accepted applicants who do not enroll during that time must reapply for admission. Students

may apply for and be approved for one deferral of admission, not to exceed one year. After one year the student must reapply for admission.

Transfer Credit

Transfer credit is considered for post-baccalaureate courses taken elsewhere within five years of admission upon request on the application form. The program director approves transfer credit for specialty courses and/or elective courses. The senior associate dean approves transfer credit for core courses. If courses are approved, a total of 6 semester hours may be transferred. No credit is awarded toward the degree for courses designated as prerequisite for admission.

Credit by Examination

Registered Nurse students in the specialist component who are certified through a professional nursing organization in the area of specialty practice may obtain credit by examination for selected specialty courses. The credit by examination procedure will verify acceptable knowledge and skill attainment received through national certification at the specialist level. Credit by examination will be limited to a maximum of two specialty courses. Verification of the certification must be sent directly to the School of Nursing by the certifying agency before the student is eligible to register for credit by examination. Full tuition is charged for courses in which credit by examination is earned.

Other courses in the specialist component may be available for credit by examination as determined by the Curriculum Committee or upon petition to the Student Admissions and Academic Affairs Committee. Students may consult their faculty advisers for further information.

International Students

Vanderbilt has a large international community representing approximately one hundred countries. The University welcomes the diversity international students bring to the campus, and encourages academic and social interaction at all levels.

English Language Proficiency. Proficiency in written and oral English is required for enrollment in an academic program. Applicants whose native language is not English must present the results of the Test of English as a Foreign Language (TOEFL) with the application, unless they have demonstrated competence while attending an American institution. International students transferring from unfinished degree programs of other universities in the United States should present TOEFL scores. The International TOEFL is administered at test centers throughout the world at different times during the year. You may access information regarding the TOEFL exam, including registration and sample tests, at http://www.toefl.org. Inquiries and requests for application forms should be

addressed to TOEFL, Box 6151, Princeton, New Jersey 08541-6151 U.S.A. The minimum acceptable score on the Test of English as a Foreign Language is 550.

International student applicants who have completed college or university coursework at an institution in a country other than the United States must obtain a complete course-by-course evaluation of foreign transcripts, degrees, and other official documentation. Evaluating agencies include (1) World Education Services, Post Office Box 745, Old Chelsea Station, New York, NY 10113-0745; telephone (212) 966-6311; Web site: www.wes.org; and (2) Educational Credential Evaluators, Inc., Post Office Box 514070, Milwaukee, Wisconsin 53203-3470; telephone (414) 289-3412; Web site: www.ece.org.

English Instruction. Applicants whose proficiency in English is low or marginal will be required to enroll in an English language program before beginning academic studies. Vanderbilt offers such a program at English for Internationals (EFI). Intensive, semi-intensive, or part-time English study is offered throughout the year. Non-credit enrollment in at least one academic course may be recommended while the student is improving proficiency in English. Academic studies for credit may begin after recommendation by EFI in consultation with the student's academic adviser. For more information, write to EFI, Box 510 Peabody Station, Nashville, Tennessee 37203, U.S.A.; http://www.vanderbilt.edu/EFI.

Financial Resources. To meet requirements for entry into the United States for study, applicants must demonstrate that they have sufficient financial resources to meet expected costs of their entire educational program. Applicants must provide documentary evidence of their financial resources before visa documents can be issued.

United States laws and regulations restrict the opportunity for international students to be employed. Students may be allowed to work off campus only under special circumstances. Many spouses and dependents of international students generally are not allowed to be employed while in the United States.

Health and Accident Insurance. International students, whether attending the University full time or part time, and their dependents residing in the United States are required to purchase the University's international student health and accident insurance unless, in the judgment of the University, adequate coverage is provided from some other source. Information concerning the limits, exclusions, and benefits of this insurance coverage can be obtained from the Student Health Center.

Additional Requirements. Prior to admission, international applicants who are nurses must have taken the Commission on Graduates of Foreign Nursing Schools (COGFNS) examination and the Tennessee licensing examination. Information on the COGFNS may be obtained by writing the commission at 3600 Market Street, Suite 400, Philadelphia, Pennsylvania 19104-2651, U.S.A., or by calling (215) 222-8454. The COGFNS exam is given in March, August, and November in forty-six locations worldwide, though not in Nashville. Information on the Tennessee licensing exam

may be obtained from the Tennessee Board of Nursing; 425 Fifth Avenue, North; 1st floor, Cordell Hull Building; Nashville, Tennessee 37247-1010, U.S.A.; telephone (615) 532-5166; Web site: www.state.tn.us/health.

Information. Assistance in non-academic matters before and during the international student's stay at Vanderbilt is provided by International Student and Scholar Services, VU Station B #351568, Nashville, Tennessee 37235-1568, U.S.A.; http://www.vanderbilt.edu/ISS.

Student Classification

The following classifications apply to all M.S.N. students.

Regular Student. Enrolled full time or part time in the School of Nursing, having met admission requirements.

A full-time student in the program normally will enroll for a minimum of 12 and a maximum of 16 credit hours a semester. Students registered for thesis or master's project (0–3 hours) are also defined as full time. Parttime students carry a minimum of 6 but fewer than 12 hours per semester.

Students entering the M.S.N. program with a B.S.N. degree must complete all degree requirements within three years of first enrollment. Students entering the M.S.N. through the pre-specialty or R.N. pre-specialty component must complete all degree requirements within five years of first enrollment.

Special Student. Enrolled in one or more non-clinical pre-specialty or graduate courses but not working toward a master's degree in the School of Nursing. A limit of 7 credit hours is permitted in this status. Successful completion of courses taken as a special student does not guarantee admission to the M.S.N. program.

To be considered as a special student, an applicant must submit a completed application form with transcripts and the non-refundable application fee at least two weeks before registration. Acceptance into a course is dependent upon availability of space and facilities after full-time and part-time students have been registered.

Registration as a special student requires approval by the senior associate dean for academics. All University and School of Nursing regulations, including the Honor System, apply to special students. Special students who desire to change to regular student status should make application for admission to a specialty following regular procedures.

Requirements for Licensure

Students must meet eligibility requirements for licensure in the state of Tennessee. Please refer to previous section, entitled Academic Regulations, Eligibility for Registered Nurse (R.N.) Licensure for more information on the licensure exam (NCLEX).



Financial Information

UITION for 2003/2004 is \$771 per credit hour.

Rates for tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

The Master of Science in Nursing degree may be completed in three-semesters of full-time study for students who enter with a B.S.N.; students admitted through the pre-specialty component complete the M.S.N. in six full-time semesters. Students admitted through the R.N. pre-specialty component complete the M.S.N. in five full-time semesters. M.S.N. students attend fall, spring, and summer sessions.

The charge for students registered for zero hours of Thesis (N379) or Master's Project (N377) is one-half (0.5) credit hour of the posted hourly tuition. Registration and payment of fees retain student status.

Students taking an incomplete or having a missing grade in a course register for zero hours until removal of the incomplete grade. The charge for each course in which an incomplete is recorded is one-half (0.5) credit hour of the posted hourly tuition. Registration and payment of fees retain student status.

There will be a one-time fee (proposed \$30) for processing transcripts.

Other Fees

Application	\$ 50
Matriculation (nonrefundable)	200
Student activities	108
Student Recreation Center fee	174
Computer laboratory fee (per semester)	25
Laboratory fee for N210a	35
Laboratory fee for N210b	50
Laboratory fee for N245	100
Laboratory fee for N246	50
Laboratory fee for N305a	200
Laboratory fee for N305b	75
Laboratory fee for N305c	150
Laboratory fee for N315a	150
Laboratory fee for N336	75
Liability insurance coverage (per semester)	33
Student health insurance (per year)	1,228
Mosby Assess Test (non-R.N. only)	50
Occupational exposure assessment fee (per year)	40

Expenses for books and supplies will vary by specialty. Equipment such as tape recorders and diagnostic sets will be required for certain specialties.

Hepatitis B vaccine is available, at student expense, through the Student Health Service.

For information concerning tuition for the Ph.D. in Nursing Science, see the *Graduate School Catalog*.

Payment of Tuition and Fees

Tuition, fees, and all other University charges incurred prior to or at registration are due and payable by August 22 for the fall semester and January 3 for the spring semester. All charges incurred after classes begin are due and payable in full by the last day of the month in which they are billed to the student. If payment is not made within that time, cancellation of V-Net (long distance telephone) access for campus residents may result and additional charges to campus dining or flexible-spending accounts may be prohibited.

Students/guarantors will be responsible for payment of all costs, including reasonable attorney fees and collection agency fees, incurred by the University in collecting monies owed to the University. The University will assess a \$20 fee for any check returned by the bank and reserves the right to invoke the laws of the State of Tennessee governing bad checks.

Refunds of Tuition and Dormitory Charges

University policy for the refund of tuition and dormitory charges provides a percentage refund based on the time of withdrawal. Students who withdraw officially or who are dismissed from the University for any reason may be entitled to a partial refund in accordance with the established schedule shown below. Fees are not refundable.

Fall 2003 Withdrawal/Refund Schedule

Week 1	August 25–August 30	100%
Week 2	August 31–September 6	95%
Week 3	September 7–September 13	85%
Week 4	September 14–September 20	80%
Week 5	September 21–September 27	75%
Week 6	September 28–October 4	65%
Week 7	October 5–October 11	60%
Week 8	October 12–October 18	55%
Week 9	October 19–October 25	45%
Week 10	October 26–November 1	40%

No refund after 1 November 2003

Spring 2004 Withdrawal/Refund Schedule
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Week 1	January 12–January 17	100%
Week 2	January 18–January 24	95%
Week 3	January 25–January 31	85%
Week 4	February 1–February 7	80%
Week 5	February 8–February 14	75%
Week 6	February 15–February 21	65%
Week 7	February 22–February 28	60%
Week 8	February 29–March 6	55%
Spring Break	March 7–March 13	
Week 9	March 14–March 20	45%
Week 10	March 21–March 27	40%

No refund after 27 March 2004

Tuition Payment Programs

Tuition payment programs are available through Tuition Management Systems (TMS). Pamphlets describing these plans are available on request from the Office of Student Accounts, VU Station B #351671, Nashville, TN 38235-1671, or the Office of Student Financial Aid, 2309 West End Avenue, Nashville, TN 37203.

Late Payment of Fees

All charges not paid by the specified due dates will be assessed a late payment fee of \$1.50 on each \$100 owed.

Financial Clearance

Current charges can be deferred if a Student Account Agreement is on file in the Office of Student Accounts (the Office of Student Accounts may refuse to allow a deferment if in its judgment the deferment is unwarranted). However, a late payment fee will be accessed each month until the balance is paid. All amounts deferred are due no later than November 30 for the fall semester, April 30 for the spring semester, and July 31 for the May and summer sessions.

No transcript (official or unofficial) will be issued for a student who has an outstanding or deferred balance. Diplomas will be withheld until all bills are paid.

Professional Liability Insurance

Students will be automatically covered with professional liability insurance. Payment of premium is required of all enrolled nursing students at the time of registration. Payment of premium is required regardless of any other professional liability coverage the student might have, even for

students taking only didactic courses. The policy covers only practice as a nursing student and does not extend to coverage of nursing practice outside of the student role.

The annual premium is payable in addition to tuition. Details of the policy are available at the University's student insurance office, and students are encouraged to familiarize themselves with policy details and their responsibility in regard to insurance coverage.

Activities and Recreation Fees

The required student activities and recreation fees entitle students to use the facilities of Sarratt Student Center and the Student Recreation Center. The fees also cover admission to certain social and cultural events and subscriptions to certain campus publications. Specific information on these fees is published on-line annually in the *Student Handbook* at www.vanderbilt.edu/student_handbook/. By payment of an additional fee, students and their spouses may use their identification cards for admission to athletic events.

The student activities fee (Sarratt and University programs) and the student recreation fee will be waived automatically if the student is a part-time student registered for four or fewer semester hours, or if he or she resides, while a student, beyond an approximate fifty-mile radius from the campus as determined by zip code. Students who register late or students who wish to have fees waived due to exceptional circumstances must petition for a waiver through the Office of Campus Student Services, VU Station B #356206, Nashville, Tennessee 37235-6206. A \$10 charge is assessed for processing the waivers of students who register late.

Transcripts

Academic transcripts are supplied by the University Registrar on written authorization from the student. A fee of \$2 is charged for each transcript. Transcripts are not released for students with delinquent accounts. Beginning in the fall of 2003, new students will be charged a one-time, life-time fee (proposed \$30) for processing transcripts.

Thesis/Master's Project

Students who elect to complete a thesis or master's project are required to register each semester from the time of committee and adviser selection until final approval of the completed thesis or project. Students who fail to register each semester are automatically withdrawn from the University and will have to reapply for admission.

Students completing a thesis are expected to provide two bound copies for deposit in the Medical School library.

Students who enter with a B.S.N. are required to complete their thesis or master's project within three years of registering for their first course.

Students who enter through the pre-specialty program are required to complete their thesis or master's project within five years of their first registration.

Financial Aid

The majority of our nursing students take out financial aid. Upon applying, the financial aid packets go out in late February. At that time you would fill out something called a FAFSA (Free Application for Federal Student Aid), which is the paperwork for Federal Subsidized and Unsubsidized loans. Your eligibility is based on your tax information for the previous year. Once complete that paperwork is then mailed electronically to the University Financial Aid Office where you are considered for all types of funding available based on your financial eligibility.

In order to qualify for financial assistance a student must be enrolled for at least six credits per semester and be degree seeking. Need-based aid for graduate students include scholarships and subsidized/unsubsidized loans. Non-need based aid for graduate students include scholarships and unsubsidized loans on which the interest accrues from the date of disbursement.

Student Loans

Student loans comprise the majority of a financial aid package. The Federal Stafford Loan Program is the main source of funds which are borrowed from a lending institution. The Federal Subsidized Stafford Loan is need-based and has a 6-month grace period prior to repayment. The maximum available is \$8,500 per two semesters. The Federal Unsubsidized Stafford Loan is non-need based and also has a 6-month grace period prior to repayment. The maximum available is \$10,000 per two semesters. If a student does not qualify for a subsidized loan, it is possible to receive the entire \$18,500 in an unsubsidized loan. With a subsidized loan, the Department of Education pays the interest on the loan while the student is enrolled in school, during the grace period and any period of deferment. With an unsubsidized loan the student is responsible for payment of the accruing interest and may request that payment be deferred until the grace period expires, at which time the interest is capitalized. All Federal Stafford Loans must be repaid within 120 months, and the variable interest rate on a Federal Stafford loan is based on the 91-day T-Bill and cannot exceed 8.25%.

Once you apply for Federal Stafford Loans, the Financial Aid Office at Vanderbilt is then notified of how much of an award you are going to receive. Based on that information, they will determine how much you are eligible for in a Private Alternative Loan/Signature Loan (based on your credit history) which is a loan from a private bank or lender that should

cover the cost of your living expenses. Financial Aid awards are made after you are accepted to the School of Nursing and have deposited. The Financial Aid office will send you a package of loan awards in late May or early June if you are planning to begin school in the fall, assuming you have completed all of your appropriate financial aid paperwork.

Disbursement of Financial Aid Funds

All financial aid is credited directly to the student account. The financial aid file must be complete in order for available funds to credit the student account. All loans are disbursed in two equal installments to the student's account at the beginning of each semester. Any institutional loan promissory notes and paperwork must be completed and signed before loan funds disburse to the student account. Typically, scholarship funds are disbursed in the same manner.

Applying For Financial Aid

Financial aid is available from several sources for full and part-time qualified students. To apply for federal and institutional funds, the student must complete one application: the Free Application for Federal Student Aid (FAFSA) registration form. The processed data results in an Expected Family Contribution (E.F.C.) figure. This figure, with other financial aid formulas, determines the student's eligibility for financial aid based on federal guidelines.

All external scholarship applications must be initiated by the student. Filing the applications on time will ensure consideration for any internal scholarship and loan funds available. Financial aid forms must be filed annually. Contact the School of Nursing Financial Aid Office at (615) 322-3800 for any forms needed (will be mailed every year in February). If you have questions regarding the application for financial aid, please call Kristie Smith at (615) 322-8986. If you have questions regarding your financial aid award once you have applied for financial aid, please contact Kristie Smith.

Note: Financial aid applications are not available for distribution until January.

Scholarships

All internal scholarships are merit-based and are awarded based on a combination of the student's incoming grade point average and GRE or GMAT score. Full-time enrollment (12 hours per semester) is required to be considered for a scholarship award. Students do not apply directly to any of the scholarship benefactors; they simply need to complete the Internal Scholarship application available in mid-February. All awards are made through the School of Nursing Scholarship Committee according to the requirements of the funding source. Part-time students and post-mas-

ter's students are not eligible for scholarships but may qualify for loans. The School of Nursing maintains an extensive list of scholarships available for women, minorities, and graduate students.

In order for students to be considered for scholarships, they must be accepted to the School of Nursing and have already deposited. The scholarship form is mailed with the entire financial aid packet in late February to students who have applied for admission to the School of Nursing.

How is scholarship determined? The amount of the scholarship is determined and awarded based on academic merit and a combination of the incoming cumulative GPA and GRE of a student.

Full-Tuition Scholarships

Three full tuition, one-year scholarships are offered to incoming students. One is awarded to the highest ranking pre-specialty student. One is awarded to the highest ranking direct-entry student and one to the highest ranking minority student. The rankings are based on the entering GPA and GRE test scores, and the recipients are determined by the Scholarship Committee. There are also three merit-based, one-year, full scholarships awarded to students with the highest GPA's entering their second year of study.

Are there any external scholarships available and how would I find them? Your local library, the internet, religious organizations, your community organizations and civic groups, foundations, fraternities, sororities, and clubs. For a comprehensive, free, searchable database of scholarships, go to http://www.salliemae.com. This will pull up any scholarships for which you are eligible.

External Scholarships and Loan Repayment Resources

The applicant is responsible for contacting all potential external scholarship resources.



Honors and Awards



Sigma Theta Tau

The Iota chapter of Sigma Theta Tau, international honor society of nursing, was installed at Vanderbilt University on 3 June 1953. Sigma Theta Tau is professional rather than social, and its purpose and functions may be compared to other honor societies. Sigma Theta Tau is a member of the Association of College Honor Societies.

Election to membership in the society is limited to students who have shown marked qualities of character, leadership, and ability in nursing and who have maintained a high scholastic average. Students in the direct entry M.S.N. program are eligible for membership after having completed 10 semester hours of the required curriculum. Students in the pre-specialty program are eligible for membership after having completed 22 hours of the required pre-specialty curriculum.

Founder's Medal

The Founder's Medal, signifying first honors, was endowed by Commodore Cornelius Vanderbilt as one of his gifts to the University. The Founder's Medal is conferred annually upon the graduating student in the School of Nursing who, in the judgment of the faculty, has achieved the strongest record in the areas of professional and academic performance in meeting the requirements for the Master of Science in Nursing degree.

Amy Frances Brown Prize for Excellence in Writing

This prize is awarded each year there is a worthy candidate among the graduates of the School of Nursing. The selection is based upon papers submitted to meet course requirements in either the pre-specialty or specialist nursing component of the curriculum.

Specialty Awards

The School of Nursing Specialty Awards were initiated in August 1998 to recognize the most outstanding student in each specialty area. The awards are based on academic achievement, excellence in clinical practice, demonstrated leadership, community service and potential for future contributions to the nursing profession.

Honor Scholarships

Vanderbilt's highly competitive Honor Scholarship program is based on academic merit. Three full Honor Scholarships are awarded each year in recognition of exceptional accomplishment and high promise in the field of nursing. Several partial honor- and need-based scholarships are also available.

Full Scholarships

THE HAROLD STIRLING VANDERBILT (HSV) SCHOLARSHIP honors the memory of the great-grandson of Commodore Cornelius Vanderbilt and president of the University's Board of Trust from 1955 to 1968. The scholarship covers full tuition for three semesters and is awarded annually to an outstanding minority student in the incoming class.

THE JULIA HEREFORD ALUMNI SCHOLARSHIP for a second-year student is awarded annually through the generosity of the Julia Hereford Society and the Julia Hereford Endowed Alumni Scholarship Fund.

THE C. W. KEMPKAU SCHOLARSHIP is awarded annually to an outstanding pre-specialty student in the incoming class.

THE LAURA CATHERINE RANKIN MEMORIAL SCHOLARSHIP for a second year student was established in Laura's memory by her parents, Dr. and Mrs. Allan Rankin, family, and classmates.

THE JULIA BLAIR CHENAULT HONOR SCHOLARSHIP is awarded annually to an outstanding direct-entry student in the incoming class.

THE FRANCES SCOTT MORRISON SCHOLARDHIP for a second-year student was established in 2002. Preference is given to students who had relatives who served during World War II, specifically at Iwo Jima.

Partial Scholarships

THE BURRUS MEDICAL SCHOLARSHIP FOR NURSES was established in 1987 by George R. Burrus, M.D., in honor of his daughters, Lisa, Kate, and Nan, who are Vanderbilt School of Nursing graduates.

THE LILLIAN CARY SCHOLARSHIP is awarded to an M.S.N. student in the Family Nurse Practitioner Specialty. Selection is based on academic merit and financial need.

THE THOMAS CONE SCHOLARSHIP was endowed through a gift from Thomas and Charlotte Cone to be awarded annually to a worthy and needy student who is a single parent.

THE LA JUAN FURGASON SCHOLARSHIP is an endowed scholarship established by Mr. G.A. Furgason in memory of his daughter, a 1967 B.S.N. graduate of the School of Nursing.

THE BOBBIE GILMER SCHOLARSHIP FUND FOR NURSES was established in 1999 by bequest of Bobbie Lee Gilmer.

THE DOROTHY S. GOLDSTEIN SCHOLARSHIP was established by Mrs. Goldstein and is awarded to minority students.

THE HALEY AWARD was endowed through a bequest from James H. Haley Jr. to help support a worthy student of the School of Nursing.

THE WILLIAM RANDOLPH HEARST ENDOWED SCHOLARSHIP FUND was established for minority students. It is awarded to minority students on the basis of merit and need.

THE FRANCES M. HOUSTON SCHOLARSHIP FUND is endowed for the benefit of the School of Nursing. Preference shall be given to students from Cannon County, Tennessee and then to the surrounding counties of Coffee, Dekalb, Rutherford, Wilson and Warren.

THE LIZZIE MINOR HOUSTON SCHOLARSHIP is endowed for the benefit of the School of Nursing. Preference shall be given to students from Cannon County, Tennessee, and then to the surrounding counties of Coffee, Dekalb, Rutherford, Wilson and Warren.

THE SAMMIE S. SHAPIRO-RACHEL S. KELLY SCHOLARSHIP was established by bequests from the estates of these two sisters, both Vanderbilt alumnae, and is supported by contributions from members of their family. It is awarded annually to a worthy and needy student.

THE ELIJAH NEVINS KIRKPATRICK SCHOLARSHIP is supported by the Frank Godchaux III family in memory of Mr. Kirkpatrick, a Vanderbilt alumnus and father of Mrs. Godchaux. It is awarded annually to a student demonstrating both exceptional merit and financial need.

THE JENNIE WAMSLEY LONG MEMORIAL SCHOLARSHIP was established in 1996 by gifts from family and friends. The scholarship is to be awarded to a student in the Psychiatric Mental Health specialty.

THE MILAH P. LYNN SCHOLARSHIP FUND was established in 1996 by a gift from Milah and Stephen Lynn. This scholarship is to be awarded to worthy, needy students.

THE KATHLEEN SUZANNE NELSON SCHOLARSHIP FUND was endowed through a bequest from Dr. Robert A. Nelson, Jr., in memory of his daughter, a 1975 graduate of the school.

THE COLEMAN D. OLDHAM HONOR SCHOLARSHIP was endowed through a bequest from Coleman and Emma Oldham.

THE VALERE POTTER SCHOLARSHIP FUND was established originally by a gift from the late Valere Blair Potter. This scholarship is awarded annually to second year pre-specialty students demonstrating exceptional merit and financial need.

THE TABITHA REEVES SCHOLARSHIP FUND was established in 1998 for students in their second year.

THE PAMELA RICHARDSON MEMORIAL SCHOLARSHIP was established in 1995 by her family and friends in her memory. Pamela Richardson was a VUSN student at the time she died. The scholarship will be awarded annually to a second year student demonstrating financial need and exceptional merit.

THE OLIVIA SMYTHE SCHOLARSHIP FUND was established in 1999 by a gift from her estate. Preference is given to students from Arkansas or Oklahoma who are in good academic standing and have financial need.

THE HILLIARD TRAVIS SCHOLARSHIP FUND is supported by the generosity of Mrs. Hilliard Travis and the late Mr. Hilliard Travis. Several awards are made each year to students in specialties that involve nursing care for children of any age, from neonate through adolescent.

THE JEANETTE AND LEON TRAVIS SCHOLARSHIP FOR NURSING AT ST. THOMAS HOS-PITAL was established by Mrs. Jeanette Travis and the late Mr. Travis for nurses employed at St. Thomas Hospital who wish to pursue the M.S.N. degree at Vanderbilt University School of Nursing. Inquiries regarding this opportunity should be directed to the St. Thomas Career Center, (615) 222-2361.

THE LETTIE PATE WHITEHEAD SCHOLARSHIP FUND is supported by the Lettie Pate Whitehead Foundation. The awards are given to first-year, female pre-specialty students from southern states.

THE ZELLE SCHOLARSHIP was established in 1995. This scholarship is awarded annually to nursing students specializing in chronic care with a focus on rehabilitation nursing.

THE FRANCES HELEN ZIEGLER TUNNELL GRADUATE HONOR SCHOLARSHIP was endowed through the will of this former dean of the School of Nursing and is awarded to a meritorious student with financial need.



Courses of Study



Explanation of Symbols

200-level courses are generalist (pre-specialty) nursing courses or upper-level prenursing courses.

300-level courses are specialist nursing courses.

The University reserves the right to change the arrangement or content of courses, to change the texts and other materials used, or to cancel any course on the basis of insufficient enrollment or for any other reason.

Pre-Nursing Courses

150. Introduction to Microbiology. This course presents a basic introduction to the microbial world, with particular emphasis on the diversity of bacteria and viruses. Morphologic and physiologic principles are explored, as are the processes of pathogenesis and host defenses. The rationale for the use of antimicrobial drugs is also examined. Bacterial genetics and recombinant DNA technologies are included. SPRING [3–4] Rollins-Smith.

210a–210b. Human Anatomy and Physiology I and II. Introduction to the structure and function of the human organism. Integrates the gross anatomical structure of the human body and its organ systems with microscopic structure, physiological function, and homeostatic mechanisms. Emphasis also on the clinical relevance of selected topics. Prerequisite: at least one semester of biology or chemistry. FALL, SPRING. [4-4] Hinkle.

231. Introduction to Nutrition. This course is designed to assist the student in building a foundation of knowledge which may be used to evaluate nutrition information from varied sources. Nutrition research will be integrated with the basic principles of digestion and absorption, the role of specific nutrients in health and illness, and the role of nutrition throughout the lifespan. Topics to be addressed will include nutrition and physical fitness, weight control and fad diets, use and misuse of vitamin and mineral supplements, nutrition and cancer, nutrition and women's health, nutrition and cardiovascular health, and nutrition programs and services available throughout the U.S. public health system. FALL, SPRING. [2] Fleshood and Pope.

Generalist Nursing Courses and Electives.

215. Foundations of Professional Nursing I. This course is the first of a two course sequence addressing professional nursing. This course introduces the student to professional nursing. Historical beginnings, the organization and structure of the professional identity, and role development are explored. Building on this content, students are introduced to theories and models relevant to nursing. Using critical thinking, students will be introduced to clinical

decision-making strategies, theory development and research methods. With guidance, students will analyze and synthesize information from a variety of sources related to professional nursing. FALL. [2] Kennedy and Staff.

- **216. Professional Nursing Seminar.** This course addresses the role of the professional nurse. The student will have the opportunity to explore the dimensions and responsibilities of the professional nursing role by applying legal/ethical concepts and critical thinking skills to selected case studies involving patients in a variety of settings. Prerequisite: 215, 225, 245. Corequisite: 236, 246. SPRING. [1] Kennedy and Staff.
- 217. Foundations of Professional Nursing II. This course is the second of a two course sequence addressing professional nursing. Students will evaluate existing nursing theories and models and apply them to practice. Students will apply appropriate research findings into practice, analyze current developments in nursing, and critique the impact of nursing care on clinical outcomes. Prerequisite: 215, 218. SPRING (RN students only); SUMMER. [3] Bess.
- **218. Conceptual Basis for Nursing Practice.** This course focuses on identification of the unique strengths/perceptions of each RN student and a development of an individualized plan for learning. The course assists RN students in identifying and developing strategies to foster critical thinking, lifelong learning, and nursing practice role development. Theory development and research are introduced as processes essential to the organization and development of nursing knowledge. Limited to RN students. FALL. [3] Bess and Vollman.
- **219. Nursing Practice Seminar.** This course addresses selected topics foundational to the nursing practice role. The RN student will have the opportunity to explore models of nursing practice, credentialing, certification, mentors, collaborative practice, and professional ethics. Limited to RN students. Prerequisite: 218. SPRING. [2] Bess.
- 225. Population-Based Health Care. This course provides the student with an opportunity to explore population-based health care principles of prevention, health maintenance and health promotion within the context of Healthy People 2010. Notably, the course will focus on how these principles are used to increase healthy lifespan, decrease discrepancies in health status and health outcomes for different populations and assure access to preventive services for all. It emphasizes epidemiologic principles and population based holistic health promotion/disease prevention as an integral part of populations at risk for illness, disability, or premature death. Further, the course explores population-based care models and environments in which health care is delivered: community agencies, neighborhoods/communities, schools, the family, and the workplace. Legislation and policy implications for primary, secondary, and tertiary care will be discussed. FALL. [2] Christenbery.
- 226. Health Care Systems: Micro Issues. This course addresses health care systems and their related issues. Course content focuses on leadership and decision making theory, team building, communication and managerial skills. The course also provides information on contemporary trends in the organization and delivery of health care to individuals, families and populations. This course also provides an introduction to health care ethical, legal and policy issues. Quality Improvement will also be addressed in this course. Pre/Corequisite: 225. SPRING. [2] Christenbery.
- **227. Health Care Systems: Macro Issues.** This course addresses issues that relate to the macro system of health care. The course content provides information on contemporary trends in the organization and delivery of health care to individuals, families and populations. The impact of managed care and financial pressures on health care providers is discussed along with outcomes management, informatics, financial management, and economic principles pertinent to the delivery of health care services. Pre/Corequisite: 225 and 226. SPRING (RNs only), SUMMER. [2] Christenbery.

- 235. Human Experience of Health and Illness Across the Lifespan I. Human Experience of Health and Illness Across the Lifespan I. This is the first of three didactic courses examining the human experience of health and illness across the lifespan from infancy through senescence, including the childbearing cycle. The framework incorporates the following concepts and their influence on health and the response to illness: growth and development, gender, lifestyle, value systems, spirituality, ethnicity, environment, and psychosocial, economic, and cultural issues. The impact of these factors on individuals, families, and aggregates/populations/communities will be explored. Basic concepts/knowledge of selected interventions, i.e. pharmacologic, perioperative, and mental health will be introduced. Selected health problems involving the cardiovascular, respiratory, integumentary, and endocrine systems will be presented; the epidemiology, pathophysiology, medical management (pharmacologic, non-pharmacologic, and surgical), and nursing management will be addressed. Health promotion, including primary, secondary, and tertiary, anticipatory guidance, and patient education will be discussed. Validation credit obtained by satisfactory completion of N237. FALL. [4] Inott.
- 236. Human Experience of Health and Illness Across the Lifespan II. This is the second of three didactic courses examining the human experience of health and illness across the lifespan--from infancy through senescence, including the childbearing cycle. The framework incorporates the following concepts and their influence on health and response to illness; growth and development, mental health, gender, lifestyle, value systems, spirituality, ethnicity, environment, and psychosocial, economic, and cultural issues. The impact of these factors on individuals, families, and aggregates will be explored. Selected health problems involving the neurologic (including selected mental health disorders with appropriate treatment modalities and settings), muscular/skeletal, gastrointestinal, sensory (ear, eye, nose), and reproductive (including maternity focus) systems will be presented. The epidemiology, pathophysiology, medical management (nonpharmacologic, and surgical), and nursing management will be addressed. Health promotion, including primary, secondary, and tertiary, anticipatory guidance, and patient education will be discussed. Pre/Corequisite: 215, 235. SPRING. [5] Baird.
- 237. Human Experience of Health and Illness Across the Lifespan III. This is the third of three didactic courses examining the human experience of health and illness across the lifespan--from infancy through senescence, including the childbearing cycle--with an emphasis on increasingly complex and/or chronic health problems. The course provides the student with the theoretical basis to apply principles of chronic illness, including assessment and intervention skills, to at risk populations. FALL (RN students only); SUMMER. [4] Vollman.
- 245. Fundamentals of Clinical Practice. This course is the first of a sequence of three clinical practice courses designed to provide the student with the opportunity to learn and practice the skills of assessment, patient care and care planning in a didactic classroom setting and a simulated laboratory and then in a clinical area for a variety of client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care settings will be utilized for practice. At the end of the course, the student, with minimal faculty assistance and guidance, will be able to analyze data, develop a basic plan of care, safely and accurately implement selected basic nursing interventions, and evaluate the plan's effectiveness. Pre/Corequisite: 215, 225, 235. FALL. [5] Sweeney and Staff.
- **246.** Integration of Theoretical and Clinical Aspects of Nursing I. This course is the second of a sequence of three clinical practice courses. It is designed to provide the student with the opportunity to integrate theory and practice the skills of assessment, patient care, and care planning in a clinical area for diverse client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care

settings will be utilized for practice. At the end of the course, the student with moderate faculty assistance and guidance will be able to analyze data, develop a basic plan of care, safely and accurately implement selected nursing interventions, and evaluate the plan's effectiveness for physiologic and psychosocial health needs. Prequisite: 215, 225, 235, 245, 255. Corequisite: 216, 226, 236. SPRING. [4] Sweeney and Staff.

- 247. Integration of Theoretical and Clinical Aspects of Nursing II. This course is the third of a sequence of three clinical practice courses. It is designed to give the student an opportunity to learn and practice the skills of assessment, patient care, and care planning in a clinical area for diverse complex client populations across the life span (newborn, pediatric, adolescent, adult, older adult, and child-bearing families). A variety of health care settings will be used for practice. At the end of the course, the student, with minimal faculty assistance and guidance, will be able to analyze data, develop a plan of care, safely and accurately implement selected nursing interventions, and evaluate the plan's effectiveness for individuals and their families. Prerequisite: 215, 216, 226, 235, 236, 245, 246; Corequisite: 217, 227, 237. SUMMER. [4] Sweeney and Staff.
- **248. Basic Health Assessment.** Basic Health Assessment. This course is designed to provide the RN student the opportunity to learn and practice the skills of assessment in a classroom, laboratory setting, and then in a clinical area for a variety of client populations across the life span. The student's specialty population will be considered in the choice of health care setting utilized for practice. Limited to RN students. FALL. [3] Wall.
- 249. Integration of Theoretical and Clinical Aspects of Nursing. Integration of Theoretical and Clinical Aspects of Nursing. This course is an introduction to the scope and practice of family and community health nursing. It emphasizes, through didactic and community practice, the promotion and maintenance of the health of diverse populations across the lifespan. The epidemiological process and the nursing process serve as the organizing framework for didactic content and clinical interventions to support family and community health. Social, cultural, economic, environmental, and ethical issues related to specific populations will be explored. Limited to RN students. Prerequisite: 225, 248; Corequisite: 226, 227. SPRING. [3] Fogel.
- **255. Basic Pharmacology.** This course presents an introduction to pharmacologic knowledge, the clinical indications for drug use as a treatment modality, and the role of the nurse in drug therapy. The course will present content on the prototype drug from major drug classifications that serve as a framework for continued self-study of new drug information. Emphasis will be on the drug classifications and their respective prototype drug(s) that are more commonly encountered in drug therapy. FALL. [2] Vollman.
- **256. Strategies for Improving Self-Care.** This course builds on the knowledge of the improvement process, motivation and teaching/learning theories. The course addresses the processes necessary to change individual self-care behaviors. The student applies concepts of change, motivation, learning, and continuous improvement, to selected case studies. Pre/Corequisite: 235, 245 or RN Pre-specialty status or permission of instructor. FALL (RNs only), SPRING. [2] Norman and Bess.

Specialist Nursing Courses and Electives

Enrollment in specialist courses (300 level) requires graduate-level standing and admission to the specialty or permission of the instructor.

- **300.** Theoretical Foundations of Advanced Nursing Practice. This course prepares students to critique, evaluate and utilize theory within their nursing practice. The student applies a wide range of theories from nursing and related disciplines to develop a comprehensive and holistic approach to care. The focus is on mid-range theories with emphasis on integration of theory into advanced nursing practice. FALL. [2] Fogel and Kendrick.
- **301.** Research Methods for Advanced Nursing Practice. This course prepares students to critique, evaluate and use research within their nursing practice. Advanced nursing practice uses a wide range of empirical findings to provide quality health care, initiate change, and improve nursing practice. At the conclusion of the course, the student will be proficient at critiquing and evaluating research findings relevant to advanced nursing practice. Prerequisite: 300. SPRING. [3] Fogel and Kendrick.
- **302.** Theory, Research, and Advanced Nursing Practice: Integration and Application. This course provides a capstone experience, which requires integration of content from previous courses and experiences. Students will identify a clinical problem in their advanced practice nursing specialty, demonstrate an understanding of the research and theory related to this problem, critically analyze the problem and current knowledge, and develop strategies for problem resolution. Pre/corequisite: 300, 301, enrollment in specialty preceptorship or Nurse-Midwifery 335. SUMMER. [2] Fogel and Kendrick.
- **303.** Health Care Delivery Systems. This course provides the student with the understanding of how the business of health care affects the practice of health care. Students analyze and evaluate health care delivery systems. The relationships between various stakeholders including consumers, providers, payers, regulatory agencies, and policy makers and their effect on health care are described. The focus is on economic implications of health planning, organization of personnel and resources, the design of payment systems, and the outcome analysis of health care delivery, including the cost effectiveness of health care services. FALL, SUMMER. [2] Kamencik.
- **304. Transitions to the Advanced Practice Role.** This course builds upon previously acquired knowledge and experience of the professional nurse role. The course focuses on the interaction of the advanced practice nurse with the health care system, colleagues, and client system. Students develop a personal philosophy of practice that is consistent with professional practice standards. This course gives direction in managing careers and modifying clinical practice. An active Tennessee license is required before beginning the final clinical practicum in the specialty component. SPRING, SUMMER. [1] Rasch.
- **304b.** Nurse-Midwifery Role Synthesis, Exploration, and Analysis. Nurse midwives, as advanced practice nurses, are viewed as potential national and international leaders in health care and managers of clinical practices. Successful practice is based on understanding management principles and interpersonal, interdisciplinary and organizational relationships. This course provides opportunity to analyze and interpret organizational structures and the dynamics of NMW practice. Study of the "work" and financial management of NMW practices is provided through case study discussion. Students will complete a project to analyze management principles and interpersonal, interdisciplinary and organizational relationships identified in the business structure of a practice, extrapolate components organizational behavior, and develop strategies to address practice realities, needs and/or dilemmas. Prerequisite: Nurse-Midwifery Courses 305b, 309a, 327, 330, 331, 333, 334, 335, 336, 337, 338 or permission of the Nurse-Midwifery program director. Corequisite: N339 or permission of the Nurse-Midwifery program director. FALL. [2] Petersen.
- N304c. Teaching/learning Methodology, Strategies and Evaluation. This course is designed to provide theoretical and practical experiences in learning and teaching strategies.

Students develop fundamental knowledge of instructional design, techniques of learning, and evaluation of teaching/learning process. The logic and theory of educational measurement is examined. Practical applications of measurement theory to the construction and use of a variety of educational measurement devices is explored. SPRING. [1] Staff.

305a. Advanced Health Assessment and Clinical Reasoning. Students differentiate abnormal from normal findings using advanced assessment techniques, interpret diagnostic study results, and use clinical reasoning to formulate diagnoses for culturally diverse individuals. Students interpret data and problem solve utilizing case studies and surrogate patients. Health promotion and disease prevention strategies are discussed. Prerequisite: Admission to specialty and graduate level standing. FALL. [2] Staff.

305b. Advanced Health Assessment Applications for Psychiatric–Mental Health Nurse Practioner. This course builds on knowledge of advanced health assessment with a focus on clients commonly seen in Psychiatric–Mental health settings. Elements of advanced health assessment are examined conceptually and clinically for practical application to Psychiatric–Mental health populations. Diverse applications are used to expand proficiency in history taking, health assessment techniques, and differential diagnosis. The course emphasizes the integration of assessment strategies that are sensitive to the need of culturally diverse mental health clients. Pre/Corequisite: 305a, graduate-level standing, admission to the PMHNP specialty. SPRING. [1] Adams and Staff.

305b. Advanced Health Assessment Applications for the Adult Nurse Practitioner. This course builds on a knowledge of advanced health assessment, with a focus on clients commonly seen in the adult practice setting. Advanced health assessment techniques are emphasized. Diverse approaches are used in expanding proficiency in conducting histories and physical examinations in clinical laboratory settings with adult clients. Communication techniques unique to the specialty population are emphasized. Systematic and organized health assessments that are sensitive to cultural and developmental needs of adults are explored. Students are introduced to the dynamics of the managed health care environment. Experienced adult nurse practitioners serve as role models in clinical practice. Pre/Corequisite: 305a, graduate level standing, admission to the specialty. FALL. [1] Coleman and Staff.

305b. Advanced Health Assessment Applications for the Family Nurse Practitioner. This course builds on knowledge of advanced health assessment, with a focus on clients commonly seen in the family practice setting. Advanced health assessment techniques are emphasized. Diverse types of approaches are used in expanding proficiency in conducting histories and physical examinations in laboratory and clinical settings. Communication techniques unique to the specialty population are emphasized. Systematic and organized health assessments that are sensitive to cultural and developmental needs are explored. Students are introduced to the dynamics of the managed health care environment. Experienced family nurse practitioners serve as role models in clinical practice. Pre/Corequisite: 305a, graduate level standing, admission to the specialty. FALL. [1] Bradley and Staff.

305b. Advanced Health Assessment Applications for Nurse-Midwifery. This course builds on a knowledge of advanced health assessment with a focus on clients commonly seen in the nurse-midwifery practice setting. Techniques, including communication skills, used in assessment of the health status of women, newborns, and the fetus are developed and refined in laboratory and clinical settings. Diverse applications are used to expand proficiency in history taking and health assessment techniques specifically directed at the health care of women across the lifespan and fetal and newborn assessment. The nurse-midwifery philosophy, management process, core competencies, and standards for practice provide the basis for clinical actions. Pre/Corequisite: 305a, graduate level standing, admission to the specialty. FALL. [1] McGill.

305b. Advanced Health Assessment Application for the Women's Health Nurse Practitioner. Advanced techniques used in assessment of the health status of women are taught. Students in this course have the opportunity to enhance and refine their assessment and diagnostic skills in a laboratory setting. Diverse applications are used to expand proficiency in history taking and health assessment techniques specifically directed at the health care of women, to include antepartum surveillance. Pre/Corequisite: 305a, graduate level standing, admission to the specialty. FALL. [1] Daddario and Staff.

305c. Advanced Neonatal Health Assessment. This course provides opportunities for students to develop the knowledge and skills needed to perform a comprehensive health and gestational age assessment. Data to collect when eliciting a health history, principles of performing a physical and gestational age assessment, diagnostic study interpretations, and examination techniques are stressed in the didactic portion of the course. Critical thinking is emphasized as the basis for synthesis of knowledge regarding the performance of a health histories, physical assessments, and identification of potential diagnostic tests for alterations in clinical findings. Emphasis is placed on the recognition of assessment findings that deviate from normal. A seven-week supervised clinical experience in the regular newborn nursery and neonatal intensive care unit provides students with opportunities to perform health histories, health assessments and gestational age assessments with both normal and preterm infants. FALL. [3] Kersten.

305d. Advanced Health Assessment in Family-Centered Pediatric Practice. Students differentiate abnormal from normal findings using advanced assessment techniques, interpret diagnostic study results and use clinical reasoning to formulate diagnoses for culturally diverse pediatric patients. Synthesizing a systematic, organized, family-centered health assessment that is sensitive to growth and development needs is emphasized. Health promotion and disease prevention strategies are discussed. Pre/Corequisite: Graduate level standing, admission to specialty. FALL. [1] McLeod.

305e. Advanced Health Assessment Applications for the Pediatric Nurse Practitioner. This course builds on knowledge of advanced health assessment with focus on clients commonly seen in the pediatric practice setting. Techniques, including communication skills, used to assess the health status of children and adolescents are enhanced and refined. Diverse clinical experiences are used to develop proficiency in history taking and health assessment techniques with infants, children, and adolescents within the context of family-centered care. Synthesizing a systematic and organized health assessment that is sensitive to growth and developmental needs and which will provide the most pertinent data with the least risk to the infant and child-adolescent is emphasized. Prerequisite: Graduatelevel standing, and admission to the Pediatric Nurse Practitioner Program for Children with Special Needs. Pre/Corequisite: 300, 305d, 307c, 308, 311, 312a. FALL. [1] McLeod.

306a. Advanced Physiologic Foundations of Acute Care. This course provides in-depth discussion of complex physiologic concepts essential for advanced clinical nursing courses in acute care. Physiologic processes related to the central, peripheral and autonomic nervous systems; cardiovascular, respiratory, and renal systems; hematopoeisis, inflammation, immunity, microcirculation, neuromuscular synapse, skeletal and smooth muscle, and acid-base balance are discussed at biochemical, cellular, organ, system, and human organism levels. Hormonal regulation is integrated with various physiologic processes. Emphasis is on integration of physiologic concepts as a basis for understanding interrelationships among complex physiologic processes and as a foundation for understanding advanced pathophysiology. Prerequisite: Courses in undergraduate level human anatomy and physiology. FALL. [3] Lancaster.

- **306b.** Reproductive Anatomy and Physiology. Normal anatomy and physiologic processes of reproduction, including changes during the maternity cycle, are studied. Selected physiologic processes associated with healthy women across the lifespan, human genetics, development of the products of conception, the maternity cycle and the implications for client adaptations are examined. Prerequisite: Approval of the instructor. FALL. [2] McGill.
- **306c. Developmental/Neonatal Physiology.** This course provides an in-depth examination of human genetics and embryologic development of the fetus. The mechanisms involved in cell division, gametogenesis, and inheritance patterns are addressed. The structural and functional development of fetal systems, during critical periods, are emphasized. Normal and abnormal fetal development and alterations in physiology are explored. Environmental factors that influence the structural and functional development of fetal systems are discussed. Clinical implications of alterations in structure and physiologic functioning are also addressed. The legal, ethical and financial implications of genetic therapy, in-vitro fertilization and long-term care of infants with genetic abnormalities are discussed. Prerequisite: Graduate level standing and admission to the NNP specialty level courses. Can be taken as a special student with permission of the instructor. FALL. [3] D'Apolito.
- **307. Advanced Pharmacotherapeutics.** This course is designed to provide students with the knowledge of pharmacokinetics which will enable the student to safely and appropriately select pharmacologic agents for the management of common acute and chronic health problems of diverse populations. Specific content of the course covers representative drugs of a pharmacologic group, indications for use, drug selection, titration of dose, key adverse effects, and monitoring of therapy and alternative therapy. SPRING. [3] Staff.
- **307a.** Primary Care Pharmacotherapeutics for Psychiatric–Mental Health Nurse Practitioners. This course is designed to provide psychiatric–mental health nurse practitioner students with the knowledge of pharmacokinetics of primary-care pharmacologic agents used to manage common acute and chronic health problems of diverse populations of psych-mental clients. Specific content of the course covers representative drugs of a pharmacologic group, indications for use, drug selection, titration of dose, key adverse effects, and monitoring of therapy and alternative therapy. Special emphasis is placed on significant interactions between psychopharmacologic agents and common pharmacologic agents used in primary care. This course is NOT designed to provide psychiatric–mental health nurse practitioner students with a complete primary care pharmacology course. Pre/Corequisite: 305a. SUMMER. [2] Reisenberg and Johnston
- **307c.** Advanced Pharmacotherapeutics for Acute Care Practioners. This course builds on knowledge of the basic principles of pharmacology to establish a knowledge base for clinical judgments in the pharmacologic management and evaluation for individual patients as related to the role of Acute Care Adult Nurse Practitioners. Drug interactions, incompatibilities, side effects, and contraindications are discussed. Appropriate patient education is integrated. Pre/Corequisite: 306a. FALL. [3] Lancaster.
- **307d. Advanced Neonatal Pharmacotherapeutics.** This course provides students preparing for roles within the Neonatal Nurse Practitioner specialty with knowledge of the pharmocotherapeutics for common classifications of drugs used to care for neonates and infants. The physiologic action of selected prescription drugs, unexpected client responses and major untoward effects encountered in diseases of the neonates are discussed. Pharmacokinetic and pharmacodynamic principles, their clinical application and the use of pharmacologic agents in the prevention of illness and the restoration and maintenance of health are emphasized. Emphasis is placed on indications for correct drug choice, usual dose, routes of administration, pharmacological mechanisms in association with drug interactions, adverse

effects; and contraindications for use are included. Discussions of clinical judgments in the management and evaluation of pharmacologic therapeutic agents for neonatal use are emphasized. Pre-requisite: Graduate level standing and admission to the NNP specialty. Can be taken as a special student with permission of the instructor. SPRING. [3] Kersten.

- **307e.** Advanced Pharmacotherapeutics in Pediatrics. This course is designed to provide students with the knowledge of pharmacokinetics which will enable the student to safely and appropriately select pharmacologic agents (prescription and over the counter) for the management of common acute and chronic health problems of pediatric clients. Specific content of the course covers representative drugs of a pharmacologic group, indications for use, drug selection, titration of dose, key adverse effects, and monitoring of therapy and alternative therapy. Prerequisite: Graduate level standing, admission to the Pediatric Nurse Practitioners Program; Corequisite: 305d, 205e, 312a. SPRING. [2] McLeod.
- **308. Pathophysiologic Concepts.** This course builds on pre-acquired knowledge of normal human anatomy and physiology. Classic and current research findings form the basis for analysis of pathophysiologic processes and their effect on individual and multiple body systems. Students analyze the effect and progression of selected disease entities in diverse populations across the lifespan. The course provides a foundation for clinical assessment, diagnosis and management of clients experiencing alterations or risks of alterations, in their health status. Pre/Corequisite: Courses in normal human anatomy and physiology. FALL. [3] Brodie and Hinkle.
- **309a.** Advanced Practice Nursing in Primary Care of the Adult. Advanced Practice Nursing in Primary Care of the Adult. This course is designed to provide students with knowledge needed to assess and manage common acute and chronic health problems in the adult population. Multidimensional interventions are discussed (e.g., culturally and environmentally sensitive; health promoting). Corequisite: 305a. FALL. [3] SPRING: Reeves (face to face); FALL: Coleman (distance section).
- **309b.** Advanced Practice Nursing in Primary Care of the Child. Advanced Practice Nursing in Primary Care of the Child. This course presents knowledge necessary for the practice of primary health care of children. Course content includes the principles of health promotion, disease prevention and assessment, and management of common primary health care problems in diverse pediatric populations. Emphasis is placed on developmental needs and the pathophysiologic processes underlying certain conditions. The impact of the family on the health of the child is explored. Students are introduced to the dynamics of the managed care environment. Corequisite: 305a. FALL. [2] Bradley.
- **309c.** Advanced Practice Nursing in Primary Care of the Adolescent. Advanced Practice Nursing in Primary Care of the Adolescent. This didactic course presents knowledge that is necessary for the practice of primary health care nursing of adolescents. Course content includes the principles of health promotion, disease prevention and assessment, and management of common primary health care problems in diverse adolescent populations. Emphasis is placed on developmental needs and the pathophyiologic processes underlying certain conditions. The impact of the family on the health of the adolescent is explored. Students are introduced to the dynamics of the managed care environment. Corequisite: 305a. FALL, SPRING. [1] Bradley.
- **309d.** Advanced Practice Nursing in Primary Care of the Elderly. IIn this didactic course, knowledge is presented that is necessary for the practice of primary health care nursing of the elderly. Course content includes the principles of health promotion, disease prevention and assessment, and management of common primary health care problems in diverse el-

derly populations. Emphasis is placed on developmental needs and the pathophysiologic processes underlying certain conditions. The impact of the family on the health of the elderly is explored. Students are introduced to the dynamics of the managed care environment. Prerequisite: 305a. FALL, SPRING. [1] Kim.

- **311.** Health Promotion of Behavior Development: Birth through Adolescence. This course focuses on the theoretical basis for pediatric advanced nursing practice emphasizing the development of the child and adolescent as an individual within the context of family and society. Using a family-centered approach, this course considers factors, techniques and research which facilitate or interfere with healthy development. Emphasis is placed on developing strategies for providing appropriate anticipatory guidance, health promotion, and disease prevention interventions within the life course. Pre/Corequisite: Admission to PNP specialty or permission of course coordinator. FALL. [2] McLeod.
- **312a.** Advanced Practice Nursing in Pediatric Primary Care I. This is the first course in a two-part pediatric primary care didactic course sequence. Information is presented that is necessary for the practice of primary health care nursing of children and adolescents. Course content includes information related to the principles of health promotion, disease prevention, and assessment and management of common primary health care problems in children and adolescents by pediatric nurse practitioners. Content is presented within a family-centered and developmental perspective and includes content related to advanced pathophysiology, research, psychosocial factors, and ethical considerations. Prerequisite: Graduate level standing, admission to the Pediatric Nurse Practitioner Program; Corequisite: 305d, 305e, 307e. FALL. [2] Anderson.
- **312b.** Advanced Practice Nursing in Pediatric Primary Care II. In this second part of the pediatric primary care didactic course sequence, information is presented that is necessary for the practice of primary health care nursing of children and adolescents. Course content builds upon the information presented in Part I related to the principles of health promotion, disease prevention, and assessment and management of common primary health care problems in children and adolescents. A portion of the course includes information necessary for PNP's to care for pediatric clients with special needs and their families. Using a family-centered and developmental perspective, related advanced pathophysiology, research, psychosocial factors, and ethical considerations are explored. Prerequisite: 305d/e, 307a, 308, 301, 312a; Corequisite: 307b, 314a. SPRING. [4] Anderson.
- **313.** Current Issues in the Delivery of Pediatric Primary Care. The focus of this course is on the pediatric nurse practitioner role in developing, implementing, and evaluating comprehensive care with pediatric clients. Applications of effective strategies with selected families and populations are emphasized. The course provides an opportunity for synthesis of knowledge and skills, including management and communication strategies, health policies and trends, appropriate theories, and ethical principles. Prerequisite: 305a/b, 307a/b, 308, 309b/c, 311, 312, 314a; Corequisite: 314b. SUMMER. [3] McLeod.
- 314a. Practicum in Primary Health Care of Children. This course is a precepted clinical practicum focusing on pediatric health care with two foci: 1) an emphasis on health promotion, management of common health problems, and client education; and 2) an emphasis on the management of special health needs in children. A developmental approach is used in assessing the child and adolescent and formulating the treatment plan. Nursing strategies to educate and assist children and families in adaptation to special health needs will be discussed and implemented. Learners also participate in clinical conferences where various pathophysiological and psychological processes encountered with the child and his/her family will be discussed. The role of the nurse practitioner as a primary health care provider in a

variety of pediatric settings is examined. Learners explore relevant resources/research related to pediatric health care and apply findings to the care of clients. Prerequisite: 305a/b, 306, 307a, 309b/c, 311; Corequisite: 307b, 312. SPRING. [4] Lennon.

- **314b.** Advanced Pediatric Primary Care Preceptorship. The focus of this clinical practicum is on implementation of the pediatric nurse practitioner role in delivering primary care to pediatric clients, including those with special health needs. The preceptorship provides a broad practice experience which allows for synthesis of knowledge and skills acquired in prerequisite and Corequisite coursework. Emphasis is on providing comprehensive care to pediatric clients and families across a variety of practice settings in collaboration with other health professionals. At least 210 of the total clinical hours will be in primary care settings. Clinical seminars will focus on professional role issues for pediatric nurse practitioners and case presentations. Prerequisite: 305a/b, 307a, 308, 309b/c, 311, 312, 314a, RN licensure; Corequisite: 313. SUMMER. [5] Kajihara-Liehr.
- 315. Essential Components of Neonatal Intensive Care Nursing and Introduction to Advanced Practice Neonatal Nursing Skills. This course provides students with an introduction to the advanced practice skills commonly performed by neonatal nurse practitioners. A step-by-step practical approach is taken to describe the procedures. Students demonstrate an understanding of essential intensive care nursery concepts, skill, and equipment necessary for completing direct bedside assessment and care of neonates in a safe manner. The theoretical basis, indications and complications for these skills are emphasized. Students have the opportunity to practice the skills presented in the course under the supervision of experienced Advanced Practice Neonatal Nurses. Students become NRP Certified as a part of this course. The differentiation between normal and abnormal lab values is also emphasized. Prerequisite: 305c, 306c, 316, Corequisite: 317a/b, 307d. SPRING. [3] Scott and Jennings.
- 316. Theoretical Foundations of Neonatal Care. This course focuses on the theory and research related to the health status and care of neonates and infants. Emphasis is placed on theories of attachment, infant growth and development. This course is designed to help students in the use of critical thinking to foster health promotion, primary prevention of illness, and health maintenance. Growth and developmental issues, sleep/wake cycles, crying, newborn laboratory screening, feeding, immunizations, safety, infant behavior and common parental concerns are addressed. Normal variations and minor disruptions in aspects of newborn and infant health are emphasized. Knowledge synthesized from this course provides an essential working foundation for future neonatal/infant course work. Clinical practice in the role of the NNP related to infant outcomes and ethical dilemmas are discussed. Corequisite: 306c. FALL. [2] Jennings.
- **317a. Neonatal Pathophysiology and Management I.** This is the first of two sequential courses in which students examine the pathophysiology and management of ill neonates/infants and their families. Theory and research form the basis for discussions of clinical assessment and restorative care. This course emphasizes the role of the advanced practice nurse in the care of high-risk neonates/infants. Perinatal risk factors associated with variations in neonatal health and functioning are also examined. Prerequisite: Graduate level standing and admission to the NNP specialty level courses; Corequisite: 305c, 306c, 316. FALL. [3] Scott.
- **317b.** Neonatal Pathophysiology and Management II. This is the second of two sequential courses in which students examine the pathophysiology and management of ill neonates/infants and their families. Theory and research form the basis for discussions of clinical assessment and restorative care. This course continues to emphasize the role of the

- advanced practice nurse in the care of high-risk neonates/infants. Integration of previous knowledge of embryology, physiology, pathophysiology, interpretation of lab data, radiologic findings and collaboration with other health professionals is emphasized. Prerequisite: 305c, 306c, 316, 317a; Corequisite: 315. SPRING. [3] D'Apolito.
- **318. Neonatal Practicum.** Clinical practicum and seminars provide opportunities for developing advanced skills in the nursing care of critically ill and recovering neonatal clients. Experiences in facilitating and evaluating continuity of care across several settings are a major thrust. Students work collaboratively with NNPs on unit-based research projects as part of the practicum. Advanced practice nursing roles and expert skills are critically examined in clinical and individual conferences. RN licensure is required prior to beginning clinical hours. Pre-requisite: 305c, 306c, 315, 316, 317a/b. SPRING. [3] Kersten.
- **319. Neonatal Preceptorship.** Students synthesize theory, knowledge, and skills from previous courses within the neonatal nurse practitioner scope of practice. Clinical preceptorships provide students with opportunities to further develop expertise relevant to the assessment and management of groups of neonates. Prerequisite: 305, 306c, 315, 316, 317a/b, 318; all core courses, RN licensure. SUMMER. [6] Green and D'Apolito.
- **320a.** Principles of Older Adult Health I: Health Care Management of the Aged. Students examine selected age-related changes, disease processes and co-morbidity. Pathophysiology, clinical presentations, interventions, and outcomes are identified. Principles of health promotion and prevention and rehabilitation are included. Gerontological theories are critiqued. The role of the Gerontology Nurse Practitioner (GNP) as a provider for older adults is delineated. Pre/Corequisite: 305a/b, 307a/b, 309a/c/d. SPRING. [2] Kim.
- **320b.** Principles of Older Adult Health II. Psychological theories of aging are critiqued. Students examine selected age-related transitions in cognitive developmental and social role and support. Pathophysiology, clinical presentations, interventions, and outcomes are identified. Legal, ethical, economical, social, and policy issues impacting older adults and their care are examined. Pre/Corequisite: 305a/b, 307a/b, 309a/d, 320. SUMMER. [2] Kim.
- **321. Practicum in Older Adult Health.** Students apply the roles and functions of the gerontology nurse practitioner (GNP) in a variety of settings. Students apply selected gerontologic and nursing theories in their care. Knowledge of health, disease processes, and principles of rehabilitation are used in assessing older adults, families, and caregivers. Students develop a comprehensive plan of care. Cultural, social, legal, ethical and policy issues are considered. Students complete their practicum with a nurse practitioner or physician. Pre/Corequisite: 305a/b, 307a/b, 309a/d, 320, 321, 363. SUMMER. [3] Kim.
- **322a. Principles of Cardiovascular Health I.** This course provides students with the clinical knowledge to effectively care for individuals with or at risk for developing cardiovascular disease. The focus is on risk appraisal, including assessment and primary care management of cardiovascular disease. Specific focus is given to the main risk factors associated with the development of cardiovascular disease--hypertension, diabetes, high cholesterol, smoking, and obesity. Management of these co-morbid conditions is presented. Nursing interventions to reduce risk, such as screening, health promotion and case management as well as collaboration within the interdisciplinary health team are critically analyzed. Pre/Corequisite: 305a/b, 308, 309a, 363. SPRING. [2] Coleman.
- **322b.** Principles of Cardiovascular Health II. This course continues to build upon the knowledge gained in N322A. The course provides students with the clinical knowledge to effectively care for individuals with or at risk for developing cardiovascular disease. The focus is on risk appraisal, including assessment and primary care management of cardiovascular disease. Specific focus is given to the main risk factors associated with the development of cardiovascular disease--hypertension, diabetes, high cholesterol, smoking and obesity.

Management of these co-morbid conditions is presented. Nursing interventions to reduce risk, such as screening, health promotion and case management as well as collaboration within the interdisciplinary health team are critically analyzed. Pre/Corequisite: 305a/b, 307, 308, 309a, 322a, 363. Elective for ACNP. SUMMER. [2] Coleman and King.

- **323. Practicum in Cardiovascular Health.** This clinical practicum provides the student with the opportunity to implement the role of the adult nurse practitioner independently while under the supervision of other health care professionals. Students are responsible for providing primary care to individuals with or at risk for developing cardiovascular disease, as well as co-morbid illnesses. Students are responsible for assessment, diagnosis, and therapeutic interventions, including health promotion and disease prevention. Pre/Corequisite: 305a/b, 307, 309a, 322a/b, 363b. SPRING, SUMMER. [3] Coleman.
- 324. Advanced Illness/Palliative Care for Nurse Practitioners. This course is designed to provide advanced practice nurses with the knowledge, skills, and attitudes important to providing care for clients and family members living with advanced illness. Paradigms are explored which link traditional models of both palliative and hospice care to the broader and deeper context of advanced illness in all developmental stages of life and living. The course emphasizes the importance of a holistic perspective and an understanding of the client and family as individuals with diverse spiritual and cultural needs and expectations. Learning activities assist students to identify and recognize their own feelings, needs, and issues regarding chronic care, acute care, advanced care, and issues pertaining to death and dying so that they can effectively serve the multicultural needs of clients and families in a variety of advanced illness contexts. Content includes societal, physical, psychological, ethical, and spiritual aspects of living and dying. Other concepts of critical significance in the course include those related to symptom assessment, control, and management; decision making; communication; grief, loss, and bereavement. Pre/Corequisite: 305a/b, 307a/b, 308, 309a. SPRING, SUMMER. [Variable credit 2-3] Pace.
- **325.** Interdisciplinary Aspects of Death and Dying. This course will introduce the students to selected theory and practice elements of dying and death. The course is designed to help the student develop the knowledge, skills, and influence the attitudes that are essential to therapeutic and compassionate interaction with those facing end-of-life issues. The student will apply a wide range of ideas, beliefs, and understandings from related disciplines and multiple literature domains in order to begin the development of comprehensive and holistic approaches to patient care. Learning activities will assist the students to recognize their own feelings, needs, and issues regarding death and dying so that they can effectively serve the needs of clients and families. Pre/Corequisite: None. SUMMER. [Variable credit 2-3] Pace.
- **326.** Women's Health Issues. In this course, students examine major historical, political and cultural influences on the health and health care of women in the United States. Students develop a woman-centered holistic approach to care, which is the central concept in their women's health nursing practice. Pre/Corequisite: None. SUMMER. [1] Salisbury.
- **327a.** Women's Health for Advanced Practice Nursing I. Consistent with the emerging definitions of women's health and women's health practice, this course examines a full range of health issues unique to women. Women's health specialization includes prevention, the societal and political determinants of health, patient education, and reconceptualization of women's relationships with healthcare providers. Health assessment and maintenance as well as disease identification and treatment will be presented on a wellness to illness continuum. Students utilize current research in women's health and identify potential research opportunities. Pre/Corequisite: 305a. FALL. [3] A. Moore.
- **327b.** Women's Health for Advanced Practice Nursing II. Building on prior knowledge of women's health, students begin to critically examine and evaluation concepts and research

related to pregnancy and childbearing. This course focuses on advanced practice nursing knowledge necessary for the comprehensive assessment and case management of the childbearing family. Concepts include prevention, the societal and political determinants of health, patient education and reconceptualization of women's relationships with health care providers. Pre/Corequisite: 308, 327a. FALL.. [3] Daddario.

- **328. Practicum in Women's Health.** In this practicum, students apply advanced knowledge of normal physiology, pathophysiology, and psychosocial concepts to nursing care of women across the lifespan. This practicum includes specific components of advanced nursing practice from self-directed clinical experience with expert professional nurse/physician preceptors in a variety of settings. Pre/Corequisite: 305a/b, 307a, 309a, 327a/b. SPRING. [3] A. Moore and Daddario.
- **329. Preceptorship in Women's Health.** In the final preceptorship, students are given the opportunity to integrate knowledge and refine advanced practice skills by functioning in the women's health nurse practitioner role. The focus is on the synthesis of theory, knowledge, and skills from previous courses for the women's health nurse practitioner scope of practice. Pre/Corequisite: 328, all core courses, RN Licensure. SUMMER. [6] Daddario and Staff.
- **330. Antepartal Care for Nurse-Midwifery.** Building on prior knowledge of women's health, students critically examine a variety of data, research and published standards of care to develop individualized management plans for antepartal women and families of diverse cultural and socioeconomic backgrounds. The course addresses physiologic, pathophysiologic, psychosocial, legal and ethical issues that affect and are affected by pregnancy. Also discussed are strategies for optimizing outcomes, including preconception and prenatal screening, health promotion, education, and collaboration with other health providers. Pre/Corequisite: 306b, 327a. SPRING. [3] McGill.
- **331. Nurse-Midwifery Practicum I.** Students apply advanced knowledge of normal physiology, pathophysiology and psychosocial concepts to nurse-midwifery care of women and families throughout the lifespan. Students learn specific components of nurse-midwifery management of well women during the preconception, antepartal, and interconceptional periods. Clinical experience is under the guidance of expert professional nurse, nurse-midwife, nurse practitioner, or physician preceptors in a variety of settings. Students have the opportunity to apply principles of teaching and learning in prenatal and primary care visits. Students have the opportunity to identify and discuss legal and ethical issues inherent in clinical practice. Pre/Corequisite: 305a/b, 307a, 327a; Corequisite: 330. SPRING. [3] McGill and Staff.
- **333.** The Cultural Context of Women's Health Care. This course will analyze the historical and social roots of medical, nursing, and midwifery care of women and families. Previous knowledge of health care delivery systems and the socio-economic factors, which shape the context of care, will be drawn upon. The historical development and dynamics that affect the medical and midwifery models of care will be synthesized toward a critical understanding of the present status of women's health care. The course incorporates concepts from medical anthropology and sociology, feminist theory, organizational theory, and cognitive psychology. Prerequisite: none. FALL. [2] Petersen.
- **334.** Skills for Nurse-Midwifery. This course is designed to provide nurse-midwifery students with individualized clinical experiences to meet self-identified objectives based on their prior experience. The student has the opportunity to learn and practice psychomotor skills needed to care for women and newborns during the intrapartum and neonatal periods. Prerequisite:305a/b, 327a, 330. SPRING. [1] Schorn.

- **335.** Practicum in Intrapartum/Postpartum Nurse-Midwifery Care. This course is designed for students to integrate theories and research findings into the management of the care of essentially normal women during the intrapartum and postpartum periods. Building on their knowledge and experience caring for women during the antepartal and interconceptional periods, students have the opportunity to apply the nurse-midwifery management process to an identified caseload of childbearing families during the labor, birth, and postpartum periods. Clinical objectives are achieved in a variety of settings under the preceptorship of experienced certified nurse-midwives and physicians. Prerequisite: 305a/b, 307a, 306b, RN licensure; pre/Corequisite: 336. SUMMER. [3] McGill and Schorn.
- **336.** Intrapartum/Postpartum Nurse-Midwifery Care. This course gives students the opportunity to examine the theoretical basis of intrapartum and postpartum management of the normal woman and the woman experiencing certain deviations from normal. Multidisciplinary theories, concepts, and research are synthesized to develop safe management plans that are culturally and ethically appropriate and applicable to the physical, emotional, and educational needs of the childbearing woman and her family. Methods of providing for maternal and fetal assessment and comfort and of facilitating healthy adaptation to birth and parenting are discussed. Discretionary use of applicable technology and cognizance of legal implications of management decisions are explored. Nurse-midwifery management of selected complications and emergencies of the intrapartum and postpartum periods is addressed. Prerequisite: 305a/b, 306b, 307a. SUMMER. [4] McGill.
- **337. Practicum in Neonatal Nurse-Midwifery Care.** This course is designed for students to integrate theories and research findings into the management of the care of normal newborns. Methods of screening for abnormalities, supporting healthy adaptation to extrauterine life, and facilitating healthy parental-newborn family relationships are applied. Under the guidance of experienced nurse-midwife and physician preceptors, students may have the opportunity to collaboratively manage newborns with common deviations from normal. Clinical objectives are achieved in a variety of settings under the preceptorship of experienced certified nurse-midwives and physicians. Prerequisite: 305a/b, 307a, RN licensure. SUM-MER. [1] McGill and Schorn.
- **338. Neonatal Nurse-Midwifery Care.** This course examines theory and research related to nurse-midwifery management of the normal newborn and strategies for facilitating healthy physiological adaptation and parental-family-newborn relationships. Methods of screening for and collaborative management of common abnormalities are discussed. Prerequisite: 331. SUMMER. [1] Staff.
- **339.** Advanced Clinical Integration Experience for Nurse-Midwifery. The final nurse-midwifery practicum is designed to allow the student an opportunity to assume the responsibility for the management of essentially normal women throughout the life cycle, focusing on the childbearing family. The course provides the opportunity for full scope nurse-midwifery practice, including primary care of the healthy woman and newborn. Students base effective health care delivery on a comprehensive assessment of the family system. A variety of clinical experiences will include alternatives in traditional patient care management, leading to the development of the professional role of the beginning nurse-midwife. Prerequisite: 331, 334, 337, 338. FALL. [5] McGill and Staff.
- **340a.** Pathophysiology and Collaborative Management in Acute Care I. This course explores, at an advanced level, pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic health problems in acute/critical care, including pulmonary and cardiovascular disorders. Each student demonstrates the ability to analyze, integrate, and synthesize pathophysiologic concepts and current research findings

for collaborative management of adult health problems. Pre/Corequisite: 305a/b, 306a. FALL. [3] King.

- **340b.** Pathophysiology and Collaborative Management in Acute Care II. This course explores, at an advanced level, the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic health problems in acute/critical care, including oncology and renal and fluid and electrolyte disorders. Each student demonstrates the ability to analyze, integrate, and synthesize pathophysiologic concepts and current research findings for collaborative management of adult health problems. Prerequisite: 340a. SPRING. [3] King.
- **340c.** Pathophysiology and Collaborative Management in Acute Care III. This course explores, at an advanced level, the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic health problems in acute/critical care, including hematologic, hepatic, endocrine, and gastrointestinal disorders as well as psychosocial needs. Each student demonstrates the ability to analyze, integrate, and synthesize pathophysiologic concepts and research findings for collaborative management of adult health problems. The course goals are met through didactic content and case study analyses. Prerequisite: 340a/b. SUMMER. [3] King.
- **341. Theoretical Foundation of Oncology Nursing.** This course consists of didactic content related to the care of adult patients with neoplastic disorders. The course focuses on primary and secondary prevention, pathophysiologic processes underlying carcinogenesis, treatment modalities, symptom management, and home care for terminal patients. This course enables the student to explore the roles of an Advanced Practice Nurse caring for patients who have cancer or are at high risk for developing cancer. Pre/Corequisite: None. SPRING. [3] Kuhnert.
- **342.** Acute Care Nurse Practitioner Practicum. This course is designed to provide clinical experience in development and application of the roles of acute care adult nurse practitioner. The students apply and evaluate nursing theory and pathophysiologic and psychosocial concepts in planning and delivery of care in clinical settings. The student practices in clinical settings for a total of 280 hours. Clinical conferences are held weekly and focus on pathophysiology, diagnoses, and therapeutic management related to episodic/chronic problems in acute/critical care in the adult population. Prerequisite: 305a/b, 306a, 307c, 340a; Corequisite: 340b. SPRING. [4] King and Staff.
- **343. Acute Care Nurse Practitioner Preceptorship.** This course is the final clinical preceptorship, and it is designed to provide clinical experience in and application and integration of the roles of the acute care adult nurse practitioner. The students apply, synthesize, and evaluate nursing theory and pathophysiologic and psychosocial concepts in planning and delivery of care in clinical settings. The students practice in clinical settings for a total of 280 hours. Clinical conference is held every week and focuses on pathophysiology, diagnoses, and therapeutic management related to episodic/chronic problems in acute/critical care in the adult population. Pre/Corequisite: 301, 305a/b, 306a, 340a/b/c, 342, all core courses, RN licensure. SUMMER. [4] King and Staff.
- **344. Special Topics in Orthopaedics.** This course explores the pathophysiology, assessment, diagnosis, and collaborative management of adults with selected episodic/chronic or critical orthopedic health problems. The course goals are met through didactic content and case study analyses. Each student demonstrates his or her ability to analyze, integrate, and synthesize pathophysiologic concepts for collaborative management of adult orthopedic problems. Prerequisite: 305a/b. SPRING. [2] Staff.
- 346a. Basic Dysrhythmias Recognition. This course is designed to provide the student with the tools to interpret basic cardiac dysrhythmias. Focus is on disturbances in the

- rhythm, such as sinus, atrial, junctional, ventricular, AV blocks, and unusual complexes. Major focus is on recognition of the signs and symptoms of each rhythm disturbance and the collaborative clinical management of each. Health care teaching is included. This course is foundational to interpretation of advanced dysrhythmias and 12-Lead ECG readings. Prerequisite: None. FALL, SPRING. [1] Sweeney.
- **346b. 12-Lead Electrocardiogram Interpretation.** This course provides the student with a systematic format to assess alterations in the cardiac electrical conduction system. Focus is on the 12-Lead EKG changes in order to provide the student with knowledge to interpret the changes, to correlate nursing assessment findings, to anticipate complications, and to collaborate in the management of each patient situation. SPRING. [1] Sweeney.
- **348.** Conceptual Foundations of Nephrology for Adult Acute Care Nurse Practitioners. This elective course consists of didactic content related to the care of adults with renal diseases, with emphasis on pathophysiology, assessment, diagnosis, and collaborative management of patients with acute and chronic renal failure. Concepts of hemodialysis, peritoneal dialysis, continuous renal replacement therapy, and renal transplantation are explored. The role of the acute care adult nurse practitioner in collaborative management is emphasized. Prerequisite: 300, 305a/b, 306, 307c, 340a, 346a; Corequisite: 301, 340b, 342. SPRING. [3] Lancaster.
- **349. Directed Study in Critical Care Nursing.** This course explores principles of critical care nursing, examining specific critical care assessment parameters and skills. The scientific rationale or physiologic basis for each assessment parameter or skill will be examined. In addition, the identification of the need for each assessment parameter or skill based on pathophysiology, implementation of the assessment parameter or skill and the relevant criteria will be discussed. Possible complications and research related to each assessment parameter and skills will then be integrated into advanced nursing practice. Pre/Corequisite: none. SPRING. [Variable credit 1-2] Donaldson.
- **350.** Models and Theories of Psychiatric–Mental Health Nursing. This course introduces a variety of conceptual models and theories related to the practice of psychotherapy. Models of personality development and individual functioning provide a theoretical basis for understanding the development of psychopathology and the selection of appropriate therapeutic strategies. Students apply selected theories to case study material and evaluate the utility of theory-based research findings to specific client populations. Pre/Corequisite: 300. FALL. [2] Sinclair.
- **351.** Theoretical Foundations and Practicum in Psychiatric–Mental Health Nursing. This course provides the theoretical content and clinical practice for assessing, diagnosing, and intervening in dysfunctional coping patterns and psychiatric disorders of individuals across the life span. Laboratory time concentrates on roleplay of initial diagnostic interviews and formulation of differential diagnoses and initial treatment plans. Clinical practicum provides students the opportunity to integrate theory and practice in supervised clinical experiences. Analysis of process dynamics and nursing interventions occurs during supervision. Pre/Corequisite: 305a, 350, 352, 353. FALL. [3] Adams and Staff.
- **352. Neurobiology and Diagnostic Systems for Psychiatric Disorders.** This course presents the theoretical basis for anatomical, biological and psychological aspects of advanced practice in Psychiatric–Mental health nursing. Concepts from neuroanatomy, neurophysiology and pathophysiology, neuropsychiatry, psychiatry, psychology and social sciences are examined for their applications to advanced practice. Diagnostic and Statistical Manual IV, Axis I & II disorders are studied across the lifespan with emphasis on the assessment and/or treatment. Pre/Corequisite: 353. FALL. [2] C. White.

- **353. Psychopharmacology**. This course presents advanced concepts in neuroscience, pharmacokinetics and pharmacodynamics and the clinical management of target psychiatric symptoms, related to the psychopharmacologic treatment of various psychiatric disorders. The course reflects current scientific knowledge of psychopharmacology and its application to clinical problems seen in a variety of settings. Pre/Corequisite: 352 or permission of faculty. FALL.[2] Seidel.
- **354.** Theoretical Foundations of Psychiatric–Mental Health Nursing with Groups and Families. This course introduces a variety of conceptual models and theories related to the practice of group and family psychotherapy. Yalom's theoretical model provides the foundation for understanding group psychotherapy and its application and modification to selected client populations. A survey of current family therapy models and their theoretical bases provides a context for role-play and application to selected family case studies. Emphasis is placed on the integration of relevant theories into practice and the evaluation of theorybased research findings of therapeutic strategies for groups and families with mental health needs. Pre/Corequisite: 350. SPRING. [3] Adams.
- **356.** Practicum in Psychiatric–Mental Health Nursing with Individuals, Groups, and Families. This course builds on the first advanced practicum course by expanding the student's ability to identify and apply concepts, theories, and principles to complex groups. In addition, the student gains skill in implementing planned interventions and analyzing process dynamics with individuals, families, and groups so that patterns in self and others are identified accurately and with regularity. Caseload management skills are further developed. Pre/Corequisite: 351, 354. SPRING. [3] Adams.
- **357.** Psychiatric Issues Within Specialty Populations. This course focuses on the societal, ethical, and systems issues which affect the advanced practice psychiatric nursing role during the delivery of primary mental health care to specialty populations. Emphasis is placed on effective management of current practice issues without compromising the special needs of these populations. These issues deal with the areas of health care policy and financing, legal/ethical decision making, total quality management, health care delivery models, professional and consumer organizations, and crisis evaluation and response. This content is then conceptualized and operationalized related to the advanced practice psychiatric nursing role and its interface with other health care professionals. Pre/Corequisite: 351, 356. SUMMER. [2] Seidel.
- **358.** Psychiatric–Mental Health Nurse Practitioner Preceptorship. This clinical course provides a synthesis experience during which students implement the role of the Psychiatric–Mental health nurse practitioner. The focus is on assessment and intervention with persons with mental illness and persons/populations at risk for mental illness, and primary prevention in mental health. Both direct (assessment and intervention) and indirect (consultation, case management, supervision) roles will be implemented. Collaboration with other health care providers is emphasized. Pre/Corequisite: 356, all core courses, RN Licensure. SUMMER. [4] Adams.
- **361. Clinical Topics in Family Health Transitions.** Concepts and knowledge needed for the family nurse practitioner to assess and manage chronic illness and transitions (e.g., pregnancy, end-of-life) over the lifespan are described. Emphasis is placed on the presentation of the transition or illness within the context of the family, family members' responses, the assessment of teaching needs, provision of appropriate primary care and palliative services, and the use of diagnostic procedures as aids to clinical decision-making. Culturally and environmentally sensitive therapeutic interventions are discussed and evaluated based on client outcomes, safety, cost, and acceptability. Principles of family growth and development are explored and family coping strategies discussed. The role of the family nurse prac-

titioner as an advocate for the family in diverse clinical settings is explored. Pre/Corequisite: 362 or 363. FALL. [4] Rasch.

- **362. Practicum in Primary Health Care of the Child and Adolescent.** This course is a clinical practicum focusing on child and adolescent health care with an emphasis on health promotion, management of common health problems, and client education. A developmental approach is used in assessing the child and adolescent and formulating the treatment plan. Students participate in a clinical rotation in a pediatric health care setting which provides the opportunity for health assessment of the child and adolescent and formulation of a comprehensive plan of care. Clinical conferences highlight various pathophysiological and psychological processes encountered with children and their families. The role of the nurse practitioner as a primary health care provider in a variety of pediatric settings will be examined. Relevant resources/research related to the child and adolescents are explored with the application of findings to the care of clients. Pre/Corequisite: 305a/b, 307a, 309b/c, 361. SPRING, SUMMER. [2] Covington.
- **363a.** Practicum in Primary Health Care of the Adult for the Family Nurse Practitioner. This course is a clinical practicum focusing on adult health care with emphasis on health promotion, management of common acute and chronic health problems, and client education. Students participate in a clinical rotation in adult health care settings, which provide the opportunity for health assessment of the adult and the development of a comprehensive plan of care. Clinical conferences highlight pathophysiological processes and psychological needs of the adults and their families. The role of the family nurse practitioner as a primary health care provider in a variety of adult settings will be examined. Students explore relevant resources related to adult health care and apply findings to client situations. Pre/Corequisite: 305a/b, 307, 308, 309a/d. SPRING, SUMMER. [3] Covington.
- **363b.** Practicum in Primary Health Care of the Adult for the Adult Nurse Practitioner. This course is a clinical practicum focusing on adult health care with emphasis on health promotion, management of common acute and chronic health problems, and client education. Students participate in a clinical rotation in adult health care settings, which provide the opportunity for health assessment of the adult and the development of a comprehensive plan of care. Clinical conferences highlight pathophysiological processes and psychological needs of the adults and their families. The role of the adult nurse practitioner as a primary health care provider in a variety of adult settings will be examined. Students explore relevant resources related to adult health care and apply findings to client situations. Pre/Corequisite: 305a/b, 307, 308, 309a/d. SUMMER. [3] Coleman.
- **364. Family Nurse Practitioner Preceptorship**. In this clinical course, the student implements the role of the family nurse practitioner working with clients across the lifespan and their families in urban and/or rural primary care settings. he focus is on the integration of theory, knowledge, and skills from previous courses within the family nurse practitioner scope of practice. Pre/corequisite: 309a/b/c/d, 362, 363, RN licensure, all core courses. FALL, SPRING, SUMMER. [4] Staff.
- **365. Adult Nurse Practitioner Preceptorship.** In this clinical course, the student implements the role of the Adult Nurse Practitioner working with clients in the primary care setting. The focus is on the synthesis of theory, knowledge, and skills from previous courses for the Adult Nurse Practitioner scope of practice. Prerequisite: All core courses, 363, and RN licensure. SUMMER. [4] Coleman.
- **366a.** Principles of Correctional Health I.This course provides students with basic theories and principles needed to effectively care for individuals and aggregates in correctional facilities. Principles of correctional health and their implications for advanced practice nursing are

introduced. he focus is on health in the correctional facility, including assessment and primary care management of co-morbid chronic diseases, acute illness, and emergency management and procedures. Nursing interventions to reduce risk, such as screening, health promotion and case management as well as collaboration within the interdisciplinary correctional health team are critically analyzed. Pre/corequisite: 305a/b, 309a, 363b, graduate or post-graduate standing. SPRING. [2] Brodie.

- **366b. Principles of Correctional Health II.** This course provides students with a framework for understanding the complexities of the role of an advanced practice nurse functioning in a correctional health setting. The criteria for designing and implementing comprehensive correctional health services, with a special emphasis on health education, health promotion and primary care are examined. Students survey the history of correctional health nursing; critique current roles assumed by advanced practice nurses specializing in correctional health; investigate the complex legal and regulatory frameworks within which correctional health professional practice; and analyze strategies for successful implementation of work site programs to promote health, prevent illness and injury, and to provide quality primary care services to correctional populations. Students develop strategies essential to implementing health education and health promotion programs among adults with low literacy skills, based on current professional literature and research findings. Pre/corequisite: 305a/b, 366a. SUM-MER. [2] Brodie.
- **367. Practicum in Correctional Health.**This clinical practicum provides the student with the opportunity to implement the role of the correctional health/adult nurse practitioner independently while under the supervision of other health care professionals. Students are responsible for providing primary care to inmates with common acute and chronic, as well as co-morbid illnesses, based on current professional literature and research findings. Students are responsible for the assessment, diagnosis and therapeutic interventions, including health promotion and injury prevention. Pre/corequisite: 305a/b, 307a, 309, 366a. SPRING. [3] Brodie.
- **370. Independent Study, Non-Clinical.** Content varies according to individual needs and interest. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the program director, and the student's record. FALL, SPRING, SUMMER. [Variable credit 1–6] Staff.
- **371. Independent Study, Clinical.** A program of independent study in a selected area of nursing practice under the direction of a faculty sponsor. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the program director, and the student's record. FALL, SPRING, SUMMER. [Variable credit 1-6] Staff.
- **372.** Courses Offered Jointly with the School of Medicine. Schedule of courses available in the School of Nursing registrar's office. Prerequisite: consent of the instructor. [Variable credit] Staff.
- 373. Strategies for Administrative/Clinical Decision Making. Synthesis of principles, theories and concepts for effective clinical leadership in today's health care systems. Models of managerial and clinical decision making and communication provide the framework for analyzing complex clinical operational issues. Essential concepts of strategic planning and marketing are discussed Analytical, integrative and decisional skills are developed. Legal, ethical and regulatory dimensions of administrative decisions are examined. Strategic financial planning and application of decision models to evaluate financial and clinical benefits and risks are also examined. FALL [2] Staff.
- **374. Population Care Management.** Students develop the beginning skills in the epidemiologic approach to population based health care systems. Analysis and application of theory

and skills needed to assess, plan and evaluate the care of populations within integrated health systems is a focus. Cultures, ethical, economic and organizational challenges in health settings with populations at risk are explored. Topics include: patient outcomes, health promotion and disease prevention, public-private partnerships and the development of health programs for populations at risk. Strategies used to provide care for selected populations at risk will be examined. A clinical epidemiologic approach using evidence derived from observational and experimental studies of human illness or risk factors for illness are explored. Rational and critical synthesis of available information is emphasized. SPRING. [3] Staff.

- 375. Political, Social and Economic Influences on Clinical Care. An examination of the complex political, economic and social forces that shape the health care delivery systems. This course provides an introduction to general principles of health care organization, financing and regulation. Current policy initiatives are analyzed for their impact on cost, quality, access and the health of populations. This course applies basic economic concepts to analyze the health care market and evaluate health policies. Analysis of the demand for health care, the derived demand for medical care and the demand for health insurance is explored. Supply of medical care by providers and hospitals, medical technology and the role of managed care organizations is explored. SUMMER. [2]
- **376. Clinical Program Development and Evaluation.** Organizational structures in the contemporary health care delivery system are explored. This course focuses on the analysis and application of theory and skills needed to assess, plan and evaluate the clinical care of population within integrated health systems. This course draws on behavioral, social and organizational sciences to analyze effectiveness within integrated delivery systems. Topics include: motivation, group behavior, conflict management, power, decision making, managing change, managerial communication, performance assessment and human resources allocation and budgeting. Analytical decision models will be used to evaluate clinical care coordination/delivery. Content related to planning and evaluating information systems, principles of performance improvement, systems thinking, knowledge based practice and evaluation models will be explored. SUMMER. [3] Staff.
- **377. Expert Clinical Care Preceptorship.** The expert clinical care preceptorship is designed to combine practice and theory to provide an opportunity to apply knowledge and competencies acquired throughout the program of study to actual clinical situations. The theoretical component provides a framework for analyzing organizational cultures, diagnosing organizational problems and developing corresponding strategies around clinical services. The clinical preceptorship component provides the student with mentorship and guidance in developing and refining clinical and program management skills in integrated delivery systems. It is designed to provide students with an opportunity to directly experience clinical systems management through observation and participation as part of a clinical systems management team. Under the guidance of a preceptor, students plan specific learning experiences. Integrated systems will serve as the practice base for clinical experiences. SUM-MER. [5] Staff.
- **380. Organizational Dynamics.**Integral to management practice is the acquisition of theoretical frameworks that explain organizational theories, management models and decision-making strategies related to healthcare systems and care delivery. In addition to providing a conceptual understanding of management practice, this course focuses on the development of interpersonal skills and effective leadership styles through role preparation, communication theories and the application of change strategies. Pre/corequisite: Specialty level status. FALL. [3] Kamencik.
- 381. Introduction to Health Informatics. Health informatics is the management and trans-

formation of health data into information and knowledge to improve health care. This survey course focuses on information systems in clinical settings and the use of databases for outcome management. Students address data management needs in healthcare settings and carry out related database projects. Examples include organizing information pertinent to individual patient care, analyzing data to determine clinical effectiveness, retrieving needed information or knowledge at the point of care, using data to improve management of healthcare enterprises, and assessing the health patterns of populations and aggregates. Learning methods include reading, discussing, attending presentations and demonstrations of working healthcare information systems, and carrying out projects. Pre/corequisite: Basic competency in using word processing, electronic mail, bibliographic or library retrieval systems, presentation graphics, spreadsheets, and databases. These skills are not taught in the course, but students will be required to apply them to carry out course assignments. FALL. [3] Ozbolt.

- **381b.** Networks and Internet Applications for Healthcare Providers. This course explores the structure and function of networks and internet applications as they relate to their use within healthcare. Topics covered include basic concepts of network architecture, standard protocols, information services available and issues of network security. FALL. [2] Gordon.
- **382.** Epidemiology. Epidemiology focuses on the distribution and determinants of disease frequency in human populations. This introductory course prepares the student to begin use of epidemiologic strategies to examine patterns of illness or injury in groups of people. Concepts of health, risk, and disease causality are examined. Implications for development of data-based programs for disease/injury prevention and control as well as policy implications are discussed. Prerequisite: Basic Statistics. SPRING. [3] Belue.
- **383. Continuous Quality Improvement and Outcomes Measures.** This course has two related foci: quality improvement models/methods and the measurement of client outcomes across a broad range of healthcare settings. Students learn the systematic methods of CQI, based on the work of Deming and others. These statistical and applied research methods are linked to the measurement of outcomes. The use of various outcome measurement instruments is explored. Prerequisite: Specialty level status and others by permission of course instructor. SPRING. [2] Kamencik.
- **385a. Health Care Financial Management.** Students in this course apply accounting, economic principles, and financial management strategies to the management of healthcare resources in healthcare organizations. Students acquire a degree of proficiency at computerized spreadsheet utilization to enhance efficient financial analysis. Prerequisite: None. FALL. [3] Shiflett.
- **385b. Health Care Financial Analysis.** This elective course will enhance the accounting, economic principles and financial management strategies that were acquired in N385 by application of more complex financial analysis techniques to the management of healthcare resources in healthcare organizations. Students will be required to use computerized spreadsheets for all financial analyses. Prerequisite: 385. SPRING. [2] Shiflett.
- **386. Management Practicum I.** The students apply concepts of CQI organizational dynamics and outcome measures, informatics, and financial management in a selected healthcare setting. This practicum provides students with an opportunity to work closely with a manager in a variety of healthcare settings. The students experience positive role modeling while contributing to the functioning of the healthcare agency. Students work on agency designated projects throughout the practicum. Prerequisite: 303, 380, 381, 382, 383, 385. SPRING. [2] Kamencik.

- **387. Management Practicum II.** This practicum provides the student with an opportunity to work closely with a manager in one of a variety of healthcare settings. The student has an opportunity to observe and practice management and leadership skills in a healthcare organization. The role of a leader is explored in the context of the changing healthcare environment. In addition, the student works on agency designated projects and presents the process and results of a completed project to the student group. Prerequisite: 380, 386, all core courses, and RN licensure. SUMMER. [3] Kamencik.
- **388.** Strategic Management for Health Care Systems. This course will focus on long-term strategic issues that will affect financing, organization and delivery of health care services. Market driven organizations/services are at the core of the course with emphasis on designing as well as operationalizing strategies at the executive and middle management levels as individuals and part of a team. Pre/corequisite: 303, 381, 382, 383, 385 or special permission of the instructor. SUMMER. [2] Cooper.
- **389.** Health Care Management of Populations. This course provides a framework for students to develop and apply both an ethical and a theoretical framework for population-based care management. Students develop a framework for measuring client satisfaction, quality of care, resource efficiency and explore principles of multidisciplinary collaboration. Prerequisite: 303, 381, 382, 383, and 385 or special permission of the instructor. SUMMER. [2] Pilon.
- **390a.** Web Development for Healthcare Applications. Students will begin this course by observing and critiquing websites in the healthcare area. They will identify features in websites that are effective and features they would want to avoid when developing websites. Then they will learn the skills necessary to develop sophisticated web applications in the healthcare area. Graphics skills will be taught using relatively high end graphics programs such as Photoshop or Paintshop Pro. Sophisticated web applications will be created in DHTML using web editors such as Lectora or Dreamweaver. Basic HTML markup skills will be taught for the purpose of creating interactive web applications through databases in the follow-up course. FALL. [3] Gordon.
- **390b.** Database Design for Healthcare Applications. This course will cover the basics of database design in Microsoft Access. Data tables and data normalization will be explained. Then the students will learn how to put database applications on the web in ASP to create \text{"dynamic\"} websites that are data driven. Examples can include logins to private sites using usernames and passwords, content that changes often, online survey forms, tests and quizzes, messages to digital pagers, clinical log/patient data repositories, and research data collection and archiving. The students will learn how to data mine their databases by running queries that drill down and output the data into an Excel readable format. This format can then be used to input the data into SPSS or any other statistical program. SPRING. [2] Gordon.
- **391a.** Concepts of Clinical Research. The course is designed to provide an overview of the clinical research process and the essential content that will prepare participants to sit for national certification as Certified Clinical Research Professionals (CCRP) by the Society of Clinical Research Associates (SoCRA) or Association of Clinical research Professionals (ACRP) after two years of full time experience in the clinical research professional role (CRP). The course is designed to provide the knowledge base required to function in the role of the CRP. The course provides comprehensive information and practical applications to enable an understanding of the clinical research process and related regulations. SPRING. [2] Wujcik.
- **391b.** Epidemiology and Data Management. The course is designed to provide an overview of content and skills that are essential in preparing participants to be effective in the context of clinical trials research. The course provides comprehensive information and practical applications to enable a basic understanding of epidemiology and data management as applied to clinical trial research. SPRING. [2] Kamencik and Wujcik.

- **391c.** Concepts of Project Management. The course is designed to provide an overview of content and skills that are essential in preparing participants to be effective in defining and delivering clinical research projects. It is designed to provide the knowledge base required to function in the role of a clinical research project manager. The course provides comprehensive information and practical applications to enable an understanding of the project management process for clinical research. SUMMER. [2] Kamencik.
- **391d. Intensive Clinical Research Practicum.** The students apply concepts of the clinical research process in a clinical research setting. This practicum provides students with an opportunity to work closely with clinical research professionals in a clinical research setting. The practicum experiences are designed for each student to provide introduction to all aspects of clinical research or focused to compliment previous research experience. The students experience positive role modeling while contributing to the functioning of the clinical research team. Students work on agency designated projects throughout the practicum. Prerequisite: 391a/b/c. SUMMER. [Variable credit 1-3] Wujcik.
- **392a. Informatics of Clinical Practice.** This course covers nursing classifications and taxonomies, reference terminology, and the computerized patient record (CPR). Strategies for dissemination, access, retrieval, and evaluation of electronic information are explored. SPRING. [2] Ozbolt.
- **392b. Clinical Informatics Practicum.** This course builds on previously acquired knowledge. Students apply concepts and theories in clinical informatics in selected health care settings. This practicum provides students with an opportunity to work closely with a preceptor to design, implement and evaluate clinical offerings that use and integrate nursing science, computer science and information science. SUMMER. [4] Ozbolt.
- **392c. Informatics of Evidence Based Practice.** This course addresses informatics techniques to bring the best available evidence about nursing to the point of care to support the patient's health and decision making. The relationship between standardized languages, electronic documentation systems, and evidence based nursing practice are explored. Use of the internet to select and customize nursing interventions, point of care devices, and web based diagnostic decision support systems are examined. SUMMER. [3] Hinkle.
- **393. Managed Care: Theory, Practice and Future Options.** Managed Care is rapidly dominating the health care financing and delivery system in the U.S. Students in this course will be able to distinguish between the techniques of managed care and the organizations that perform the various functions. Six modules will cover the underpinnings, definitions, origins of managed care, the health care delivery system and the network of health care providers, management of cost, quality and access, operational functions, Medicare and Medicaid and the regulatory and legal aspects of managed health care. Pre/corequisite: None. SUMMER. [2] Kamencik.
- **393a.** Curriculum Strategies for Health Professional Education. This course introduces the student to the foundations of learning theory and learning styles. The impact of technology on learning practices and the appropriate use of technology to facilitate learning is emphasized. Students will create electronic elements for effective learning and use a course management system. Copyright and fair use issues are discussed. Overall curriculum strategies that integrate content, organization, informatics and sequencing of courses are discussed. Design a learning program that integrates learning styles, technology use and a course management system. SPRING. [2] Gordon and Trangenstein.
- **393b.** Educational Evaluation for Learning in the Health Professions. This course explores issues related to evaluating educational offerings that employ technology. The advantages and disadvantages of both traditional and more novel approaches to evaluation are

discussed. Students will learn how to create online surveys along with principles of test and survey management. Issues surrounding online testing including access, privacy, and data input accuracy are emphasized. Overall program benchmarks are explored. SUMMER. [3] Gordon and Trangenstein.

- **393c.** Consumer Healthcare Informatics. This course addresses the consumer's use of electronic information systems and applications to improve their medical outcomes and their health care decisions. How informatics solutions impact the healthcare partnership of provider and patient is explored. Various technology and applications that empower consumers are reviewed. Studies which evaluate the effectiveness of healthcare informatics in patient outcomes are included. SUMMER. [2] Trangenstein.
- **393d.** Educational Informatics Practicum. This course builds on previously acquired knowledge. Students apply concepts and theories in educational informatics in selected health care or educational settings. This practicum provides students with an opportunity to work closely with a preceptor to design, implement and evaluate educational offerings that integrate nursing science, computer science and information science. SUMMER. [4] Trangenstein and Weiner.
- **394. Seminar in Nursing Informatics.** This course addresses the role of the informatics nurse. The student will have the opportunity to explore the dimensions and responsibilities of the nurse informaticist role by applying legal/ethical concepts and critical thinking skills to selected case studies in a variety of settings. SUMMER. [2] Trangenstein.
- **395a.** Concepts of Emergency Response Management. This course is designed to provide an operational overview of nurse executive management in preparing for or responding to a disaster. Because disasters by definition cannot be effectively managed by the application of routine procedures or resources, this course provides needed guidance in a variety of newly defined and emerging areas for nurse executives and managers. The breadth of topics will familiarize students with the tools necessary to carry out nurse executive/manager responsibilities in disaster preparedness and response. SPRING. [2] Staff.
- **395b.** Concepts of Public Health Management of Emergencies/Disasters. This course is designed to provide an operational overview of community and public health management in preparing for or responding to an emergency or disaster. The breadth of topics will familiarize students with the responsibilities and roles of public health professionals in emergency/disaster preparedness and response. SUMMER. [2] Staff.
- **395c.** Healthcare Administrative Decision Making for Emergency Responses. This performance based course is designed to provide an opportunity for health care administrators and managers to develop an understanding and appreciation for clear and appropriate decision-making in response to emergencies and disasters in an environment that is fast paced, stressed and evolving. The design of the course is such that participants (nurse administrators, nurse managers, hospital administrators, physicians, emergency department managers, emergency medical services administrators) will be placed in situations that will require students to make decisions, to deal with the consequences of those decisions, and to coordinate an effective response while experiencing fatigue, frustration and other physical stressors that would approximate an actual emergency situation. The breadth of topics will provide students with the skills and tools necessary to carry out nurse executive/manager responsibilities in emergency/disaster preparedness. SUMMER. [2] Staff.
- 396a. Special Topics: Interpretation of Complex Laboratory and Diagnostic Data in the Adult Patient. This elective course provides the student with the theoretical basis required to perform an in-depth interpretation of selected serum, urine, and radiological diagnostic pa-

tient data. A variety of specialized tests will also be included. Lectures and case studies will provide the student information to assist in developing a differential diagnosis and assessing effectiveness of interventions. Class discussions will examine ways to apply knowledge from laboratory and diagnostic tests to a variety of clinical settings. Other information, such as cost and how to order tests, will also be included. Pre/Corequisite: RN Licensure or permission from instructor and 306. SUMMER. [Variable credit 2-3] Staff.

396c. Special Topics: HIV/AIDS. This course consists of didactic content related to the care of persons with HIV/AIDS. It will enable the student to explore the roles of the nurse in advanced practice HIV/AIDS arenas, understand the pathophyiologic processes underlying HIV/AIDS infection, evaluate the rationale for and the effects of current treatment modalities, and analyze the interrelationships between the physical, psychosocial, spiritual, and political realms associated with the disease. Students taking the course for 3 hours will participate in developing a project pertaining to an area of interest in HIV/AIDS nursing. Prerequisite/Corequisite: None. SUMMER. [Variable credit 1-3] Staff.

396d. Special Topics: Complimentary & Alternative Therapies. Consistent with the emerging definitions of holism & holistic nursing practice, this course examines a full range of complimentary and alternative therapies employed in the delivery of holistic care as well as the societal beliefs and political and economic influences shaping practice. Class members will take an active role in the learning process by developing an information sheet on a therapy of their choosing. All information sheets will be compiled into notebooks that will be distributed to each class member at the conclusion of the course. SUMMER. [2] G. Moore.

396f. Special Topics: Concepts of Emergency Nursing. This course provides students with the knowledge base and skills necessary to render emergency and trauma care. This will provide a foundation for future ACNP role development. The essential evaluation, stabilization and critical time management techniques will be discussed. It is essential that the ACNP functioning in the ER be experienced in the assessment of non-urgent, urgent and emergent conditions. In this course, the ACNP student will learn the techniques, physiology and clinical skills necessary to care for adult patients in an emergency setting. Prequisite: 340a/b, 342, 346. SUMMER. [2] Ezell.

396g. Special Topics: Concepts in Trauma Nursing. This course explores at an advanced practice level, pathophysiology, assessment and diagnosis and collaborative management of adults who have experienced a severe trauma. Each student will demonstrate in writing his or her ability to analyze, integrate, and synthesize pathophysiologic concepts and current research findings for the collaborative management of trauma patients. Pre/corequisite: 305a/b, 340a/b/c, 342. SPRING. [2] King.

396L. Global Populations at Risk: Interdisciplinary Perspectives. An estimated 30 million refugees and asylum seekers exist worldwide, along with hundreds of thousands who relocate for economic reasons. These populations are changing the face of rural and urban communities, forcing systems reform at national and local levels. This course is designed to encourage critical thinking about multicultural issues in global and local settings, exposing students to conceptual and practical information regarding global accommodation of highrisk populations. Aggregates addressed in this course include refugees, political asylees, internally displaced persons and undocumented persons. An interdisciplinary perspective will be applied to a range of legal, economic, religious, health and psychosocial factors affecting the populations in their country of origin and in relocating to the U.S. Prerequisite or Corequisite: N246 or permission of instructor. SPRING. [Variable credit 2-3] Etherington.

396w. Spanish for Primary Care Providers. This course introduces the nurse practitioner student to Spanish words and phrases that will be useful to them in a nurse practitioner setting. Emphasis is on the ability to communicate with the non-English speaking Hispanic

client in primary care settings such as pediatric, family planning and adult health situations. Pre/Corequisite: Must be a student in the specialty year and fulfilled requirements for registration and documentation must be on file in the Associate Dean's office for the following: attendance at annual OSHA training program at the School of Nursing, proof of adequate hospitalization insurance coverage, active Tennessee licensure if the student is a Registered Nurse; current CPR certification for both adult and child; and required immunizations as listed in the Medical Center Catalog. (Students must have an active Tennessee license before beginning the final clinical practicum in the Specialty component). SUMMER. [1] Salisbury.

BMIF300 and BMIF 300a (Lab). Foundations of Biomedical Informatics and Evidence-Based Practice. This course introduces the student to the foundations of Biomedical Informatics and Evidence-Based Medicine; principles of epistemology and of scientific induction, dissemination and teaching of clinical knowledge, literature storage, retrieval, evaluation, and synthesis; formal clinical decision making theory, informatics in health professional education, cognitive errors and biases, principles of health care organization; hospital information systems, electronic patient records, biomedical coding and nomenclature; telemedicine; principles of medical signal analysis, image recognition, medical robotics, and virtual reality applications in medicine. The course will also cover the history of biomedical informatics and resources (associations, journals, books, conferences, centers, software, and people). FALL. [4] Ozbolt. (Graduate School)

Mgt 497. Internet Technology and Applications. Describes the structure and function of the Internet and the information superhighway concept. Topics include the TCP/IP Protocol Suite, Internet information services (e-mail, file transfer, telnet), information resource discovery (the World Wide Web and search engines), "intranetworking" within a corporation, network security and firewalls, the information superhighway concept, and national information infrastructure. Students will learn to script Web pages using HTML and to program in JavaScript. FALL. [2] (Owen School)

MT 321. Technical Project Management. Organizational and human factors involved in the management of technical projects. Systems life-cycle approach used in characterizing project tasks and work flow. Influence of organization's structure, behavior, and processes. Skills needed to develop project team and direct and control project work. Project work definition, scheduling, budgeting, control, and performance evaluation methods. SPRING. [3] (Engineering School)

Doctoral Nursing Courses

NRSC 342. Theory Development in Nursing. The core theory content presented in this first course provides the basis for examining and critiquing structural components and processes used for theory building in nursing. This course examines the nature of theory, theory development as a process, theory development in nursing, and the organization of knowledge for nursing. Specifically, it includes comparative study of significant concepts in nursing and how they relate back to the ideas of Nightingale. Prerequisite: Consent of Faculty. FALL (Even year). [3] LaMontagne.

NRSC 344. Health Promotion in the Community: An Interdisciplinary Approach. Provides an in-depth analysis of health policy issues, research, and community intervention strategies for divers populations. Students conduct a critical analysis of health policy issues and scientific knowledge for a population of interest. [Varies 3] Doctoral Program Faculty.

NRSC 363. Human Responses in Health and Illness. Critical analysis of factors known to influence human responses in health and illness states, using a broad stress and coping perspective as well as theoretical orientations guiding research on human health and illness. Students conduct a critical and reflective analysis of existing and emerging scientific knowledge in a chosen field of study. SPRING (Odd year). [3] LaMontagne.

NRSC 365. Family Adaptation in Health and Illness. Exploration and analysis of current theoretical and empirical approaches to understanding factors that affect health status of families, especially childbearing and child-rearing families and those with members who have chronic illness or conditions. Seminar is topical in nature, with presentations by faculty investigators, visiting faculty and students. [Varies 3] Dwyer.

NRSC 368. Contextual Nature of Health and Health Behaviors. Explores and critically analyzes theoretical and empirical approaches to understanding the interaction of health and environment in affecting individuals' health by examining contextual factors that impact health and health behaviors of various system levels (individual, family, population). Critique and application of selected models of health, health behavior, community organization, health care delivery and policy development as approaches to understanding and impacting selected health phenomena. Students critically analyze and synthesize the literature related to a selected phenomenon of interest. Prerequisite: Consent of faculty. FALL (Odd year). [3] Lutenbacher.

NRSC 379. Special Topics in Nursing Science. Discussion of research and current developments of special interest to faculty and students. May be repeated for credit. Prerequisite: Consent of faculty. FALL, SPRING, SUMMER. [Variable credit 1-3] Staff.

NRSC 380. Knowledge Synthesis in Nursing. Theories and research generated to study phenomena related to nursing are evaluated and synthesized. Strategies for synthesizing extant knowledge in nursing are discussed. SPRING (Even year). [3] Staff.

NRSC 390. Independent Study in Nursing Science. Individualized study and reading in areas of mutual interest to the student and faculty member. Prerequisite: consent of instructor. FALL, SPRING, SUMMER. [3] Staff.

NRSC 392. Comparative Research Methods. This course provides an overview and comparison of quantitative and qualitative methods and designs for nursing research. Critical analysis of quantitative and qualitative research methods will be emphasized. Introduction to descriptive statistics will be applied to the research methods discussed. FALL (Even year). [4] Staff.

NRSC 393. Quantitative Research Methods. This course provides an In-depth analysis of quantitative research methods employed in nursing and health-related research, focusing on topics such as design, sampling, and instrumentation. It includes a review of descriptive univariate statistics and an introduction to bivariate parametric and nonparametric inferential statistics for use with research designs relevant to the health sciences. This latter portion of the course emphasizes the use of SPSS-PC and interpretation of output generated by the SPSS-PC program. Students will begin work on a project to develop a research instrument and establish its psyholmetric properties. Students will also write the first draft of a methodological section of a research proposal, including the IRB submission. SUMMER (Odd year). [3] Wallston.

NRSC 394. Qualitative/Field Research Methods. This course discusses qualitative approaches to research, including their theoretical foundations and practical applications. Although a variety of qualitative methods are discussed, class participants study only one or two selected methods in depth. FALL (Odd year). [4] Staff.

NRSC 395. Research Practicum. This course provides students with exposure to and involvement in the research process. Learning activities are based on student need and interest and determined according to fit with available faculty research programs. FALL, SPRING, SUMMER. [Variable credit 1-3] Doctoral Program Faculty.

NRSC 395.01. Research Practicum on Proposal Writing. This course provides students with exposure to and involvement in the research process. Learning activities are based on student need and interest and are determined according to best fit with available faculty research programs. Prerequisite: Consent of faculty. FALL, SPRING, SUMMER. [2] Staff.

NRSC 396. Bivariate Statistics for the Health Sciences. Introduction to bivariate parametric and nonparametric inferential statistics for use with research designs relevant to the health sciences. Assumes knowledge of basic descriptive statistics. Emphasizes use of SPSS-PC and interpretation of output generated by the SPSS-PC program. Prerequisite: NRSC 392 and NRSC 393, or consent of faculty. SUMMER (Odd year). [2] Wallston.

NRSC 397. Multivariate Statistics for the Health Sciences. An intermediate level course in multivariate inferential statistics. Topics covered include Factorial (N-Way) ANOVA, ANCOVA, MANOVA, MANCOVA, multiple linear regression, logistic regression, factor analysis, time series analysis, cluster analysis, discriminant function analysis, cannonical correlation, survival analysis, path analysis and an introduction to structural equation modeling. Emphasizes use of SPSS-PC and interpretation of output generated by the SPSS-PC program. Prerequisite: NRSC 396 or consent of faculty. SPRING (Even year). [3] Lutenbacher.

NRSC 398. Writing for Publication. Designed to assist students with understanding the publication process improving scholarly writing abilities. A manuscript is prepared and submitted to a selected refereed journal for consideration of publication. SUMMER. [3] Lancaster.

NRSC 399, Ph.D. Dissertation Research.



Faculty



LOVELY ABRAHAM, Clinical Instructor in Nursing B.S.N. (SNDT Women's [India] 1980); M.S.N. (Vanderbilt 1992); R.N. [1995] SCOTT ADAMS, Lecturer in Nursing B.S.N. (Belmont 2000); M.S.N. (Vanderbilt 2001); R.N., P.M.H.N.P. [2002] SUSAN ADAMS, Associate Professor of Nursing B.S.N. (Valparaiso 1972); M.S. (California, San Francisco 1977); R.N.-C.S., A.N.P. SHARON ADKINS, Clinical Instructor in Nursing B.S.N. (Minnesota 1970); M.S.N. (Vanderbilt 1988); R.N. [1998] BARBARA D. AHLHEIT, Clinical Instructor in Nursing B.S. (Memphis State 1981); M.S.N. (Tennessee 1984); R.N. [1988] CHRIS L. ALGREN, Clinical Associate Professor of Nursing B.S.N., M.S.N. (Louisville 1979, 1983); Ed.D. (Vanderbilt 1989); R.N. [1989] GREGG P. ALLEN, Clinical Instructor in Family Medicine; Clinical Instructor in Nursing A.B. (Oberlin 1974); M.D. (Jefferson Medical College 1978) [1998] JILL ALLIMAN, Clinical Instructor in Nursing B.S.N. (Tennessee 1993); M.S.N. (Case Western Reserve 1994); C.N.M. [1997] SUSAN C. ALTENBURG, Clinical Instructor in Nursing B.S.N. (Iowa 1983); M.S. (Colorado 1996); R.N. [1999] ADRIENNE AMES, Clinical Associate Professor of Nursing; Associate Hospital Director, Vanderbilt University Hospital B.S.N. (Virginia 1962); M.S.N. (Vanderbilt 1975); R.N., C.F.N.C. [1977] MARGARET S. ANDERSON, Clinical Instructor in Nursing B.S. (Tennessee 1986); M.S.N. (Vanderbilt 1994); R.N., F.N.P., R.N.C. [1997] TED L. ANDERSON, Assistant Clinical Professor of Obstetrics and Gynecology; Clinical Assistant Professor of Nursing B.S., M.S. (Southern Mississippi 1976, 1978); Ph.D., M.D. (Vanderbilt 1985, 1993) [1998] STEPHEN ANDREWS. Clinical Instructor in Nursing B.A. (Allegheny 1990); M.S.N. (Vanderbilt 1996); R.N. [1998] SARA K. ARCHER, Professor of Nursing, Emerita B.S. (Miami [Florida] 1962); M.S., Ed.D. (Boston University 1965, 1970); R.N. [1969] COLIN ARMSTRONG, Research Assistant Professor of Nursing B.S.N. (California State 1990); Ph.D. (California, San Diego 1998) [2002] CHRISTIE D. ARNEY, Clinical Instructor in Nursing B.S. (Middle Tennessee State 1991); M.S.N. (Vanderbilt 1995); R.N. [2002] MOHAMMAD ARSHAD, Clinical Instructor in Nursing B.S. (Nishtar Medical 1968); M.D. (Nishtar Medical 1972) [2002] LUCILLE H. AULSEBROOK, Professor of Anatomy in Nursing, Emerita B.A., M.A. (Texas 1946, 1947); Ph.D. (Arkansas 1966) [1969] SANDRA AVERITT, Clinical Associate Professor of Nursing B.S.N. (Duke 1967); M.S.N., Ph.D. (Georgia State 1979, 1997); R.N., L.C.C.E. [2003] AMANDA E. BAILEY, Lecturer in Nursing B.S.N., M.S.N. (Vanderbilt 1989, 2000); R.N., A.C.N.P. [2001]

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35

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Samantha Laurelin Drew B.S., United States Air Force Academy	Herndon, Va.
Julie Lynn Elam B.S.(Nursing), Purdue (West Lafayette)	Noblesville, Ind.
Jennifer Marie Hatchel B.S.N., Olivet Nazarene	Indianapolis, Ind.
Ericka Jan Hudson B.S., South Florida	Tampa, Fla.
Heather Sharon Johnson B.S., United States Air Force Academy	Niceville, Fla.
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Margaret Kathryn Jordan B.A., Villanova	Franklin, Tenn.
Yvonne LaHaie B.S.N., Maine (Orono)	Portland, Maine
Timothy L. Magie B.B.A., Oklahoma; M.B.A., Oklahoma City	Nashville, Tenn.
Patience Renee McCoy B.S.N., Southwest Baptist	Springfield, Mo.
Linda Marie McGinty B.S.N., Oklahoma Health Sciences Center	Tulsa, Okla.
Robert Eldon Middleton III Angela Marie Moreschi B.S., David Lipscomb	Los Fresnos, Texas Franklin, Tenn.
Amanda Loraine Newman B.A., Northern Arizona	Cottonwood, Ariz.
Ashley Kristin Nowery B.S.N., Samford	Woodstock, Ga.
Carrie Natalia Owens B.A., Fisk	Nashville, Tenn.
Andrew Nicholas Roach Amanda Muriel Phillips Shaw B.S., Middle Tennessee State	Nashville, Tenn. Wartrace, Tenn.
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Family Nove Describing	
Family Nurse Practitioner	
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Sally Renee Schafer Beltz	West Plains, Mo,.
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B.S., B.S.N., Walla Walla	
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William Donald Clever	Johnson City, Tenn.
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B.S.N., Tennessee (Martin)	Liliueli, lellil.
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B.S.N., Middle Tennessee State	,
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B.S., Tennessee	KHOXVIIIE, TETIT.
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B.A., Maryville Deborah M. Taber	Nashville, Tenn.
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B.S.N., Tennessee Heather Calhoun Quaile	Edmond, Okla.
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The Vanderbilt Clinic

Administration 441

Hospital Medical Board

Vanderbilt University Hospital and The Vanderbilt Clinic 445

Vanderbilt University Hospital Vanderbilt Children's Hospital The Vanderbilt Clinic Additional Services and Facilities Programs in Allied Health Other Health Profession Programs

Hospital Staff 457

House Staff 468

Vanderhule - Literati Cauco Co



Vanderbilt University Hospital The Vanderbilt Clinic



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Vanderbilt University Hospital and The Vanderbilt Clinic: Leading the Way in Medicine

ROM its founding almost a century ago, Vanderbilt University Hospital has grown into the present extensive medical center complex, housing some of the most renowned medical specialists and the latest in medical technology. Although Vanderbilt is home to Nobel laureates and is a recognized center for research in all phases of medicine, it retains the compassion and caring that has underscored its philosophy since its inception.

Vanderbilt University Hospital

Designed to accommodate every patient need, the eleven-story hospital places the latest in technology in an aesthetically pleasing environment.

The skill of Vanderbilt medical and nursing teams is maximized in a setting that promotes quality patient care through efficiency of design. Medically related areas are grouped so patients needing specialized care can be served to the best advantage, as in the Neuro Care Unit. The hospital's lower floors house the Emergency Department, serviced by special elevators that convey patients directly to the operating rooms, labor and delivery, ancillary services such as EEG and EKG, and radiology.

Each of the inpatient towers has a nursing core, so no room is far from a nurses' station. A central area, connecting the two patient towers, contains elevators, conference rooms, and waiting areas for visitors.

Patient-centered care, a result of the collaborative efforts of medical, nursing, and other health care professionals, is the cornerstone of the hospital's mission. This approach led to the reorganization of clinical delivery into Patient Care Centers for Behavioral Health, Cancer, Cardiology/Cardiothoracic Surgery, Children's Hospital, Medicine, Ophthalmology, Orthopaedics, Primary Care, Surgical Services, Transplant, Trauma, and Women's Services. Each center is led by a physician/administrative team that designs care to meet the needs of patients.

Level I Trauma Center and Emergency Department

Vanderbilt University Hospital operates the only Level I Trauma Center in Middle Tennessee. It is one of five in the state. The 20-bed Emer-

gency Department provides care for patients of all ages and is the entry point for 30 percent of hospital admissions. A Pediatric Emergency Department opened in 1997 to offer emergency care and urgent care services in a specialized child/family-focused environment.

LifeFlight

The LifeFlight air medical transport service provides quick access to medical care in emergencies. The rooftop helipad and elevator provides rapid access to the emergency department, operative services, and intensive care units. The service operates within a 150-mile radius of Nashville and is staffed by a team of fully certified pilots and specially trained nurses. The 24-hour dedicated dispatch center is located in Medical Center North.

Vanderbilt Children's Hospital

From three floors of the Vanderbilt University Medical Center to a 206-bed, eight-floor, 600,000 square foot stand alone, state-of-the-art Children's Hospital. That is the journey VCH is undertaking.

The Monroe Carell, Jr., Children's Hospital is on target for opening for patient care by the beginning of 2004. This massive project is the largest in Vanderbilt University's history and has involved intense planning over the last four years.

Once the new Children's Hospital opens, it will be a premier children's hospital by international standards, offering the best in three major areas: first and always foremost, clinical care for children; also essential is the broad-based research that will take place there, as well as the education of physicians and support staff preparing for the next generation of pediatric providers.

Its history, already well established before the completion of the new building, Vanderbilt Children's Hospital is a comprehensive service center including a neonatal intensive care unit, pediatric intensive care, medical units, surgical units, and the only pediatric emergency department in middle Tennessee.

Family Center care is at the core of patient services. Families are encouraged to stay with their children, and in the new facility, every room will be equipped to accommodate the family with comfort and caring.

Vanderbilt Children's Hospital is a pediatric referral center for the middle Tennessee area, including parts of southern Kentucky and northern Alabama. Vanderbilt Children's Hospital is expected to see 9,500 inpatients, perform 10,000 surgeries, and see 35, patients through the emergency department in 2004.

The Vanderbilt Clinic

In 1996, the services of Vanderbilt University Hospital and the Vanderbilt Medical Group were reorganized into patient care centers representing the major categories of care delivered at Vanderbilt. This realignment centers around meeting the needs of our patients, creating a stronger partnership among physicians and managers, and making decisions closer to the point of impact. The patient care centers are as follows:

Cardiology/Cardiac and Thoracic Surgery
Cancer
Women's
Emergency
Children's
Perioperative
Surgery
Behavioral Health
Medicine
Ophthalmology

Day Surgery Center

Day surgery is ideal for many patients who require relatively brief procedures with limited anesthetic and surgical risks. Such operations are performed without overnight hospitalization, decreasing the cost but not the quality of care. The center provides excellent facilities for these procedures, including four operating suites, each with laser capabilities. Adjacent recovery suites and private patient rooms further promote the recovery of the day surgery patient.

An additional ambulatory surgery facility has eight operating rooms, two procedure rooms, and the necessary recovery and holding rooms. This facility enables the Medical Center to meet the growing needs in ambulatory surgery.

Additional Services and Facilities

Burn Center

The Vanderbilt University Burn Center is a twenty-bed specialized facility dedicated solely to the treatment and rehabilitation of burn victims. A highly trained multidisciplinary team of burn specialists provides the latest methods for treating and caring for the burned adult or child. The Burn Center is on the fourth floor of the Round Wing in Medical Center North.

Annette and Irwin Eskind Biomedical Library

Opened in 1994, the four-story library provides an abundance of work stations where faculty, staff, and students can tap into ever-expanding online information services. The library's Information and Education Services Division provides assistance in all aspects of information retrieval, transfer, and management.

Medical Center East

Medical Center East houses Vanderbilt's Surgical Pavilion, Pediatric Ophthalmology, Perinatal Services, the Eye Center, the Children's Hospital Outpatient Center, and the Adult Primary Care Center.

The Vanderbilt Bill Wilkerson Center

The Vanderbilt Bill Wilkerson Center for Otolaryngology and Communication Sciences was created on July 1, 1997, and comprises the Department of Otolaryngology and Department of Hearing and Speech Sciences. The center provides integrated care to patients with communication disorders and diseases of the ear, nose, throat, head, and neck. It is one of the few comprehensive treatment centers of its kind, with expertise in clinical medicine, therapeutic intervention, education, and research. A new facility for the center is currently under construction.

Vanderbilt-Ingram Cancer Center

The E. Bronson Ingram Cancer Center comprises more than 1,000 doctors, scientists, and nurses throughout the medical center campus. The center includes the Henry-Joyce Cancer Clinic and Clinical Research Center; the A. B. Hancock Jr. Memorial Laboratory; the Francis Williams Preston Laboratories of the T. J. Martell Foundation; the Infusion Center, a state-of-the-art facility for outpatient chemotherapy; several inpatient units within Vanderbilt University Hospital and Vanderbilt Children's Hospital; and more than 100 research labs, as well as eleven high-tech shared research facilities. The center also serves as the hub of an affiliate network that links more than a dozen hospitals in Tennessee, Alabama, and Kentucky.

The Vanderbilt Page-Campbell Heart Institute

The Vanderbilt Page-Campbell Heart Institute was established on January 25, 1999. The Heart Institute is a joint venture between Vanderbilt University Medical Center and the Page-Campbell Cardiology Group. It is a freestanding, state-of-the-art facility where comprehensive, clinical heart care is available to patients in a convenient, outpatient environment. The Heart Institute houses the largest cardiology practice in the state of Tennessee, as well as some of the most highly specialized cardiologists in Middle Tennessee.

The Vanderbilt Psychiatric Hospital

The Vanderbilt Psychiatric Hospital is an 88-bed acute psychiatric hospital. Specialized services are offered to children, adolescents, and adults. The hospital includes specialty units that focus on chemical dependency, affective disorders, posttraumatic stress disorders, and thought disorders. Day programs and an intensive outpatient program are offered.

The Vanderbilt Subacute Care Unit

The Subacute Care Unit is a 27-bed unit that is licensed as a skilled nursing facility. It is designed to care for patients who are no longer in need of the intense level of acute care services in the hospital, but are not ready for care in the home and need more intensive care than provided in a traditional nursing facility. Subacute care requires the coordinated services of an interdisciplinary team, including physicians, nurses, social workers, and physical, occupational, and speech therapists. Care does not depend heavily on high technology monitoring or complex diagnostic procedures and instead focuses on the rehabilitative potential of the patients.

Kim Dayani Human Performance Center

The Kim Dayani Human Performance Center, housed in a contemporary 25,000-square-foot facility, is dedicated to achieving the balanced, healthy lifestyle that promotes the body's greatest potential. The center conducts educational, treatment, and research programs in health promotion, with special emphasis on exercise, nutrition, weight management, smoking cessation, stress reduction, fitness testing, cardiac and orthopaedic rehabilitation, and rehabilitation from other chronic diseases. Through its internships and institutes, the center also trains health professionals in the fundamentals and applications of wellness and disease prevention. Vanderbilt faculty, staff, and medical students are eligible to use Dayani's full-service fitness center, which includes a swimming pool, indoor track, weight machines, cardiovascular exercise equipment, aerobics classes, and massage therapy.

Vanderbilt Home Care Services

Vanderbilt Home Care offers a variety of home care services catering to the individual needs of patients. Patients can now receive extended care and medical treatment in their own home. Vanderbilt Home Care offers multidisciplinary team care, coordinated by experienced staff under the direction and supervision of the patient's physician. Services include skilled nursing, occupational and speech therapy, home health aide, and social work. Specialty programs include behavioral health, pediatric, and private duty.

As home care providers, we are caregivers in the patient's own environment, employing all our knowledge, talent, resources, commitment,

and compassion to promote health and independence and to support patients and families through their illnesses. As part of Vanderbilt University Health Care System, we support its research and educational enterprises.

Rehabilitation Services

The primary objective of Rehabilitation Services is to provide comprehensive medical evaluation and treatment programs that help restore physical, social, and vocational capabilities to people with severe physical or cognitive disabilities. This goal is accomplished by offering physical therapy, occupational therapy, speech therapy, social work, nursing and medicine, training in independence techniques, emotional adjustment, pre-vocational evaluation, and post-discharge planning, which includes close liaison with family and community resources. Vanderbilt University Medical Center has two resources for these services.

Stallworth Rehabilitation Hospital, opened in 1993, is the only free-standing facility of its kind in Middle Tennessee. The 80-bed hospital provides both inpatient and outpatient rehabilitation services to adults and children who have suffered strokes, head or spinal cord injuries, or have other orthopaedic or neurological diseases requiring rehabilitation. The hospital contains the Junior Chamber of Commerce Clinic Bowl Gymnasium, which is specially designed for handicapped sports, including basketball, volleyball, and indoor tennis. The Vanderbilt Center for Multiple Sclerosis is also housed in the hospital.

The Stallworth Rehabilitation Center, located in The Vanderbilt Clinic concentrates on the outpatient rehabilitation needs of patients, specializing in treating persons who do not require hospitalization but benefit from such therapeutic interventions as occupational, physical, or speech therapy. This segment of the clinic serves children and adults with orthopaedic, neurological, and post-surgical needs, both acquired and developmental, and works closely with caregivers to increase independence and promote the wellness concept. Specialty services offered only in Middle Tennessee include driver evaluation and training, augmentative communication device assessment and treatment, and wheelchair seating systems evaluation.

Vanderbilt Arthritis and Joint Replacement Center

This multi-specialty research and clinical program for patients with arthritis and rheumatic diseases provides a unique training opportunity for Vanderbilt medical students.

Vanderbilt Sports Medicine Center

Located in McGugin Athletic Center, the Sports Medicine Center is the

site of treatments, research, and education for all types of sports-related and orthopaedic injuries in student, amateur, and professional athletes.

Special Programs

In addition to the special services listed throughout this catalog, Vanderbilt University Medical Center supports many programs in which medical students can receive invaluable experience, including:

- Airway Stenosis Service
- Biliary Disease Consultation and Treatment Center
- Center for Facial Nerve Disorders
- Photon Stereotactic Radiosurgery
- Vanderbilt Asthma, Sinus, and Allergy Program (ASAP)
- Vanderbilt Transplant Center
- Vanderbilt Voice Center

Programs in Allied Health

Vanderbilt University Hospital conducts training programs in five technical areas of allied health professions.

Program in Cardiovascular Perfusion Technology

The Vanderbilt University Medical Center Program in Cardiovascular Perfusion Technology provides a sixteen-month didactic and clinical training course that prepares the graduates for positions as cardiovascular perfusionists in open heart surgery programs. Students receive instruction in anatomy and physiology, pharmacology, pathology, and perfusion technology.

This program in cardiovascular perfusion meets the criteria established by the American Board of Cardiovascular Perfusion and is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The program is directed by the Department of Cardiac and Thoracic Surgery. The program is coordinated and supervised by an education director, medical advisor, program director, and clinical instructors.

Following satisfactory completion of both the coursework and the clinical perfusion experience, a certificate of completion is awarded. Graduates of the program are candidates for certification by the American Board of Cardiovascular Perfusion. Course credits are not transferable.

A Bachelor of Arts (B.A.) or Bachelor of Science (B.S.) degree from an accredited college or university is a minimum requirement. Previous college level coursework must include one year of chemistry and one year of physics, as well as coursework in anatomy and physiology.

Completed applications must be received by 1 February, and student selection will be completed by 1 April for the fall semester, beginning in

September. Acceptance is based on scholastic and professional background, reference evaluations, and personal interviews.

Dietetic Internship Program

The forty-four-week Dietetic Internship Program is designed for the generalist practitioner. It provides an opportunity for practical experience in food service systems management, acute and ambulatory nutritional care, and community nutrition.

Through diverse learning opportunities provided by Vanderbilt's Department of Nutrition Services and specialty units and several area hospitals and community agencies, the dietetic intern achieves an understanding of the dietitian's role in a variety of settings.

Program applicants must have a baccalaureate degree from an accredited college or university and have completed didactic requirements established by the American Dietetic Association. Upon completion of the dietetic internship, the intern will be eligible to take the national registration examination to become a registered dietitian.

Program in Medical Technology

The Program in Medical Technology is an NAACLS–accredited program designed to provide extensive didactic and practical training in laboratory medicine. The program runs from June to June each year and is composed of a six-month "student laboratory" in a classroom setting and a six-month clinical practicum in the Vanderbilt clinical laboratories. Students receive theoretical and technical training in immunohematology (blood banking), hematology, clinical chemistry, immunology, microbiology, and laboratory supervisory and management skills. Emphasis is on a thorough understanding of theoretical concepts and problem solving. Upon completion of the program, students receive a certificate of training and are eligible for all state and national licensure or certification examinations.

Students from affiliated colleges and universities may enter the program after completion of the junior year and the prerequisite courses. These students will receive the baccalaureate degree from their college or university upon successful completion of the program. Students from non-affiliated institutions may apply, with affiliation agreements completed upon acceptance. Students who have baccalaureate degrees and have met the prerequisite requirements may also apply. Applicants holding foreign degrees are required to have transcript evaluations and to pass the TOEFL exam.

Applications should be submitted several months in advance of the application deadline, 1 January, to assure sufficient time for processing information and scheduling interviews.

Program in Nuclear Medicine Technology

The twelve-month training program in clinical nuclear medicine methodology is designed primarily for students who have completed a minimum of three years of pre–radiologic technology work in an accredited college or university. The program prepares graduates for certification as nuclear medicine technologists. Students receive training in atomic and nuclear physics, radiochemistry, patient care and nursing, radiation safety, radiobiology, instrumentation, and computer applications, as well as clinical nuclear medicine (both imaging and in vitro). Students must successfully complete the lecture series and clinical laboratory rotations that are integral parts of the program. Students are also expected to develop certain educational and administrative skills to prepare them for future supervisory positions.

The program is approved as the fourth year externship in a baccalaureate degree program at Austin Peay State University in Clarksville, Tennessee, and Belmont College in Nashville. In addition, on completion of the program, a certificate will be awarded from the Division of Allied Health at Vanderbilt.

The nuclear medicine program is accredited by the Joint Review Committee for Nuclear Medicine Technologists (JRCNMT), and graduates are eligible for national certification examination.

Admission requirements:

Satisfactory completion of three years of college credit at an accredited college or university, including the following:

Chemistry. A minimum of 8 semester hours or equivalent of general chemistry

Physics. A minimum of 12 semester hours or equivalent of general physics

Mathematics. A minimum of 6 semester hours or equivalent of college algebra and statistics. Calculus and analytic geometry are also recommended

Biology. Approximately 24 semester hours or equivalent, including human anatomy and physiology, hematology, medical microbiology, immunology and serology, and bacteriology

Computer Science. A minimum of 6 semester hours or equivalent of introduction to computer science and FORTRAN IV programming

- A minimum overall grade point average of 3.0 (4.0 scale) is recommended. Averages above 2.5 will be considered
- A baccalaureate degree or eligibility for that degree at the completion of clinical training
- Good moral character, pleasant personality, ability to relate to patients

Qualified applicants from any accredited college or university are eligi-

ble for admission. Complete applications must be received by 15 March preceding the expected date of admission. Student selections will be completed by 15 April. Selection is based on scholastic background, references, personal interview, and motivation.

Radiation Therapy Training Program

The Vanderbilt Center for Radiation Oncology offers a twelve month Radiation Therapy Training Program beginning the last Monday in August and finishing mid of August of the following year. Radiation Therapy is the use of high doses of high-energy radiation to kill cancer cells. It is one of the three modalities for treating cancer. Surgery and medication, chemotherapy, are the other two. The Radiation Therapist is an essential member of the Radiation Oncology team. About 50 percent of all people with cancer will be treated with radiation. A combination of two or all three methods is often used.

Students will be in class or clinical Monday through Friday for no more than 40 hours per week. The didactic component consists of over 450 hours per year. Along with faculty members who are radiation therapists, physicists, nurses, and dosimetrists, students have the opportunity to attend presentations by guest speakers from many disciplines. Clinical hours comprise the remaining hours (approximately 1450 hours). Clinical performance is graded based on evaluation by the clinical instructor and successful completion of required clinical competencies. Any treatment delivery by a student is under the direct supervision of a registered therapist.

There are two avenues to fulfill the prerequisite curriculum, graduation from an accredited program in Radiography or completion of the Pre-Radiation Therapy curriculum at Program affiliate, Middle Tennessee State University. All application materials must be received by April 1st. The admission process is competitive, with more applicants than spaces available. Students are selected based on objective criteria on a comparative basis. Each candidate will be notified in writing regarding the status of his/her admission.

The Program is accredited by the JRCERT – Joint Review Committee on Education in Radiologic Technology, 20 N. Wacker Drive, Suite 900, Chicago, IL 60606-2901, e-mail address: *mail@jrcert.org*. Upon graduation, students receive a certificate of completion and are eligible to sit for the national certification exam in Radiation Therapy, the American Registry of Radiologic Technologists (ARRT) Exam.

Other Health Profession Programs

Internships in Nursing

These six-month training programs are designed to train Registered Nurses in specialty areas such as operating room nursing, oncology nursing, pediatric intensive care nursing, general medical-surgical nursing, obstetrical nursing, and emergency nursing. Interns are linked with preceptors for clinical training and do guided independent study in their specialty. Upon completion of the internship, Registered Nurses will have the in-depth knowledge and the well-developed skills required to care for the patient population served by the specialty.

Program in Hearing and Speech Sciences

The M.A., M.S., and Ph.D. degrees in Hearing and Speech Sciences are offered by the Vanderbilt University Graduate School. See the *Graduate School Catalog* for current program information and course listings.

The program of studies leading to the master's degree requires five semesters of academic and clinical preparation, including a l0-week clinical or research externship. The program is both ESB and PSB certified by the American Speech-Language-Hearing Association, with degree requirements meeting and exceeding those required for ASHA certification. Practicum sites include the Bill Wilkerson Center, Vanderbilt University Medical Center, John F. Kennedy Center, VA Medical Center, and several other hospitals in the Nashville metropolitan area.

Preparation for the doctoral degree includes a minimum of two years of academic course work, research competency demonstrated through two projects, and the dissertation. Research interests of the faculty include basic and applied psychoacoustics, speech perception and production, child language acquisition and disability, and audiological management. The division supports a number of research laboratories, including an anechoic chamber, and maintains a MicroVAX II computer and three PDP-11 computers.



Hospital Staff



Anesthesiology

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Pediatrics

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Beveridge, Nancy G. Beyer, Deborah Blackwell, Janet G. Boger, Eve M. Bondurant, Jennifer Elyse Brady, Linda D. Breaux, Lori Brooks, A. Scott Brothers, Donald Bryant, Deborah M. Bullock, Bradley N. Callahan, S. Todd Campbell, Duncan R. Campbell, Susan B. Carr, Thomas Carter, Brian Scott Chambers, John W. Chazen, Eric M. Choudhury, Shahana A. Churchwell. Kevin B. Clayton, Ellen W. Collins, David Reid Collins, Merri S. Cook, Jo Ann Cooper, William O. Cotton, Robert Bell Couch, R. Steven Couden. Allison C. Craft. Lisa T. Crowe, Jr., James E. Daily, Donna K. Davidson, William R. Dees, Mary E. Denison, Mark R. Dermody, Terence S. Deshpande, Jayant K. Dodd. Debra A. Donnelly, Jennifer M. Douthitt, Paul M. Doyle, Thomas P. Dundon, Mary Catherine Dykstra, Elizabeth P. Edmondson, William D. Edwards, Kathryn Margaret Eidson, Timothy H. Engelhardt, Barbara W. Exil. Vernat Fazili, Mohammed F. Fairbank, Elizabeth Heather Fields. John Fiscus, Michelle Dorothy Fish, Frank A. Forbess, Jill Frakes, Rebecca L. Frangoul, Haydar A. Frank, Beverly Ann Freeman, Lee Gannon, Brian S. Gay, James C.

Ghavami, Parham Gigante, Joseph Graham, Jr., Thomas P. Greeley, Christopher S. Greenbaum, Brad A. Greenbaum, Ralph M. Greene, John W. Grzeszczak, Marek J. Gunn, Veronica Hain, Anne-Marie E. Hain, Paul D. Hamid, Rizwan Hamilton, Eddie D. Hamilton, Rodney M. Hanley III, James R. Haraf, Jr., Frank J. Harris, Christopher E. Haselton, Dana Hazinski. Thomas A. Heil, Paul J. Henschel, Timothy M. Hermo, Casilda I. Hickson, Gerald B. Hines, Tiffany Hitch, Wendy Ho. Richard Hudson, David Hummell, Donna S. Hunley, Tracy E. Jabs, Kathy Lee Jackson, Jr., John O. Janco, Robert L. Johns, James A. Johnson, Kevin B. Johnson, Mary Heather Johnston, Margreete G. Jordan, Charles A. Kannankeril, Prince Karadsheh, Michael F. Kastner, Jason Kavanaugh-McHugh, Ann L. Keown, Mary E. King, Elizabeth Kirshner, Neil Edward Klinsky, Lawrence A. Krueger, Elizabeth Kuttesch, John F. Ladd, Michael David Lambert, Melissa Langone, Susan E. Lanier, Deidre Lawton. Alexander R. Lee. Mark Andrew Lee, Stanley M. Lentz, Joseph F. Liske, Michael R. Little, Cheryl Ann Long, Ruth B. Long, William R. Mace, Rachel L. MacMaster, Jennifer Beth Mallard, Robert Mangrum, Timothy Carlton

Mathew, Puthenpurackal M.

McCollum, Joshua McGrew, Susan G.

McLaren, Rhett F.

McLevain-Wells, Karie Ann

Mehrotra, Deepak

Meneely, Raymond L.

Miles, Paul Miller, Ronald

Mishu. Dina

Misra, Reeta Moore, James Donald

Moore, Jennifer E. Moore, Paul E.

Moore-Caldwell, Sharon Y.

Moreau, Gordon Morel, Gabriela Thomas

Morgan, Susan L. Moss III. Charles A.

Moss. Joe P.

Moulton, Dedrick E.

Mukundan, Chetan R. Myers, Gregory J.

Myers, Jennifer Braden

Nania, Joseph J. Nania. Monica E.

Nair, Jaygopal

Najjar, Jennifer Leeper North, K. Timothy

O'Brien, Lee Anne F. Onadeko, Olayinka O.

Oquist, Niki L. Parsh, Brahm S.

Patel. Neal R. Patterson, Sara

Patton, Christopher M. Pawlowski, Yvonne W. Pearson. Robin Sorrow

Peek, Julie T.

Perkins, Matthew L. Peters, Mark T.

Petursson, Lisa Phillips III. John A.

Pierce, Elizabeth P. Plemmons, Gregory S.

Poehling, Katherine A. Polk, David Brent

Price, James S. Putnam, Karen L.

Ragsdale, Jennifer McRedmond

Raĥeja, Ravi K. Reddy, Churku M. Reese, J. Jeffrey Rehm, Kris Parks Ricafort, Rachel M.

Robinson, Patricia F. Rojas, Mario A.

Rosdeutscher, Kimberly M.

Rothman, Alice Rush, Margaret G. Russell, William E.

Rindus, Victoria R.

Sanders III. Dan S. Scholer, Seth J.

Schull, Katharine N.

Self. Nicholas B.

Shankar, Sadhna Mian Shankar, Venkatramanan

Shenai, Jayant P.

Singleton, Jennifer Delane Smeltzer, Christopher P. Sotunde. Babatunde S.

Spagnoli, Anna Spearman, Paul W. Spencer, C. Norman

Stancombe, Bradley B. Steelman, Joel Wayne Steger, Christina W.

Stiles, Eric F.

Stilwell, Jr., Charles A.

Stout, Julianne Strauss, Arnold W.

Summar, Marshall L. Sundell, Hakan W. Swan, Rebecca R.

Tate, Steven M. Taylor, Mary B.

Temple, Patricia C.. Thombs, David D.

Thompson, Julia Thompson, Keith S.

Tiller, George E. Townsend, Phyllis L. Triggs, Elizabeth G.

Tropez-Sims, Susanne Vafai. Parvin

Vandervoort, Robert

Van Eys, Jan

Vastbinder, Earl Edward Veeramachanei, Vani V.

Vosberg, Diane M. Walsh, William F. Walters, Travis

Watson, Sally Ammon Wheeler, Arville V.

White, Bruce D. White, David J. White, Joan W.

White. Neva Niccole Whitlock, James A.

Whitworth, Thomas C. Wiggins, Bernard A. Williams, Ida Michele

Williams, Patricia Williams, Stacey M. Wilson, Gregory J.

Wood, G. Wallace Wright, Peter F. Wyatt, Kenneth N.

Yang, Elizabeth Yared, Aida I.

Yoneyama, Tadayuki

Plastic Surgery

R. BRUCE SHACK, Chief Barton, Ronald M. Chester, Caroline H. Hagan, Kevin F. Kelly, Kevin J. Madden, Jr., James J. Shack, R. Bruce Wendell, J. Jason Wolfort, Sean F.

Psychiatry

GEORGE C. BOLIAN, Interim Chief Akin, Judith B. Arney, Casey C. Barr, Ralph I. Bartek, Anne P. Barton David Bernet, William Biliyar, Vedavyasa Butler, Suzanne D. Campbell, Thomas W. Chandra, Tanmoy Chang, David K. Clark, Craig Cowan, Ronald L. Dozier, J. Emmett Finlayson, Alistair James Reid Fitzpatrick, Jeri E. Franco, Sharone Friedman, Daniel L. Fuchs, Dickey Catherine Griffin, John Gwirtsman, Harry E. Hart, James R. Hersh, Carol Hewlett, William A. Hill, Michael D. Horton, Jr., Frederick T. Humble, Stephen Indukuri, Raju V. Janes, Cynthia Janicka, Magdalenak Javier, Daniel S. Kenner, William Davis Kondapavaluru, Prasad V. Kourany, Ronald F.C. Kyger, Kent Kyser, James Lee, Myung Ae Loosen, Peter T. Lundin, Linda S. Lynch, Alan Margolin, Richard A. Martin, Peter R. Mathews, George McFerrin, James R. Meltzer, Herbert Y. Milam, Carol P. Montgomery, Stephen

Mudumbi, Saran V. Nash, James L. Nunn, Paula S. Okpaku, Samuel O. Parrott, Earl Q. Pate, J. Kirby Petrie, William Prakash, Rudra Presentation, Philomina Ragan, Paul Wilhelm Rajpura, Bhupendra M. Raulston, Gilbert Regan, William M. Rhea, Karen H. Roberson, Clifford Rochester, Richard E. Rodgers, Scott McLaurin Rossello, Rebecca J. Ruder, Scott Salomon, Ronald M. Schofield, Hal Cortney Sharpe, Joseph M. Shelton, Richard C. Sherman, Michael H. Snow, S. Steve Steward-Ramage, Phyleen Swenson, Brian R. Tang, Tianlac Thakkar, Vatsal Treadway, Charles Richard Franklin Van Orden, Lucas S. Webb, Glenn T. Weinberg, Jane R. Weinstein, David D. Yank, Glenn Russell

Radiation Oncology

DENNIS E. HALLAHAN, Chief Chakravarthy, Anuradha M. Choy, Hak Cmelak, Anthony Joseph Goertz, Steven Hallahan, Dennis E. Lu, Bo Marks, Michael E. Teng, Ming

Radiology

MARTIN P. SANDLER, Chief Andrews, E. James Arildsen, Ronald C. Arumugham, Akilan Aulino, Joseph Block, John J. Bream, Jr., Peter R. Carroll, Jr., Frank E. Creasy, Jeffrey L. Delbeke, Dominique Diggs, Joseph Dina, Thomas S.

Donnelly, Edwin F. Fleischer, Arthur C. Fonseca, Ricardo B. Graham, Garth P. Grzeszczak, Ewa Heller, Richard M. Herman, Cheryl Hernanz-Schulman, Marta Hinton, Alice Kaye, Jeremy J. Kessler, Robert M. Lams, Peter M. Landman, Jeffrey Larson III, Theodore C. Lussnig, Erich Martin, William Henry Mayo, Jackiel R. Mazer, Murray J. McManus. Kevin T. Meranze. Steven G. Nance, Jr., Elmer Paul Partain, C. Leon Powers, Thomas A. Roll, John Rothpletz, John Sacks, Glynis A. Sandler, Martin P. Shaff, Max I. Singh, Sudha Stein, Sharon M. Stokes, LeAnn S. Taber, David S. Worrell, John A. Wushensky, Curtis A.

Surgery

R. DANIEL BEAUCHAMP, Chief Bethurum, Alva Jefferson Bonau, Roger A. Bone, Robert C. Burgess, Jr., Bernard Lerris Carrillo, Ysela M. Chambers, Eugene P. Chari. Ravi S. Dattilo, Jeffery B. Diaz, Jose J. Frexes-Steed, Maria E. Gorden, D. Lee Grau, Ana Magdalena Guillamondegui, Oscar D. Guy, Jeffrey S. Guzman, Raul J. Herline, Alan Holzman, Michael D. Houston III, Hugh L. Ikard, Robert W. Jacobs, J. Kenneth Kelley, Mark C. Kizilisik, Aydin Lawson, Laura L. Lomis, Kimberly Dyanne Lutfi, Rami E.

May, Addison K. Melvin III, Willie V. Merchant, Nipun B. Miller, Bonnie M. Miller. Richard Morris, Jr., John A Naslund, Thomas C. Nylander, Jr., William A. Passman, Marc A. Pearson, A. Scott Phay, John Pinson, C. Wright Reynolds, Vernon H. Richards, William O. Ross, Charles B. Russell, Henry Paul Shaffer, David Sharp, Kenneth W. Smith, Philip Wright Stain, Steven Charles Terry, Richard B. Torquatz, Alfonso Wright, Jr., J. Kelly

Thoracic Surgery

DAVIS C. DRINKWATER, Chief Ahmad, Rashid M. Christian, Karla G. Drinkwater, Davis C. Greelish, James Ninan, Mathew Pennathur, Arjun

Urology

JOSEPH A. SMITH, JR., Chief Adams, Mark C. Barnett, Robert B. Braren, H. Victor Brock III, John W. Chang, Sam S. Concepcion, Raoul S. Cookson, Michael Shawn Dmochowski, Roger Eckstein, Charles W. Faber, Robert B. Flora, Mark D. Franke, Jenny J. Gomelsky, Alexander Hagan, Keith W. Herrell, Stanley Hill. David E. Leu, Patric B. Lowe, Jr., Whitson Milam, Douglas F. Pope IV, John C. Scarpero, Harriett Sewell, Robert A. Smith, Jr., Ernest Ross Smith, Jr., Joseph A. Warner, John J.

House Staff

Clinical Fellows

Rashida A. Abbas, M.D. Fawzi Abdel-Latif Abdel-Rahman, M.B., B.S. Robert Lucien Abraham, M.D. Sheikh Sohail Ahmed, M.B., B.S. Corazon Gladys Ajero, M.D. John Brannon Alberty, M.D. Francisco Javier Albornoz, M.D. Muhammed Farhan Anwar Ali, M.D. Rosa Viviana Alvarado Lavin, M.D. Judith Deane Anderson, M.D. Ingrid Beatriz Avalos, M.D. Kanika Bagai, M.B.B.S. Elizabeth Ann Balhoff, M.D. Shichun Bao, M.D., Ph.D. Seema Basi, M.D. Sarabiit Singh Bhalla, M.D. Dinesh Ghanshyam Bhambhvani, M.B., B.S. Brian John Blair, M.D. Kimberly Collis Brennan, M.D. Benjamin Lee Bristol, M.D. Catherine Aileen Brown, M.D. Kimberly Mae Bungcayao, M.D. Luz Minerva Burgos Fuster, M.D. Kelly Marie Butler, M.D. Kecia Nicole Carroll, M.D. Raluca Ioana Cascaval, M.D. Farah L. Cassis, M.D. Suk-vin Chan, M.D. Ingrid Jeanette Chang, M.D. Chad Michael Charapata, M.D. Ripan Chaudhary, M.D. Tobun Toby Cheung, M.D., Ph.D. Peale Chuang, M.D. John Henry Cleator, M.D., Ph.D. Joel Martin Clingenpeel, M.D. Benton Edwards Cofer, M.D. Sonya Rose Collins, M.D. Christopher David Connolley, M.D. Lala Arnoldovna Cornelius, M.D. Matthew Cortez, M.D. Larry Ray Corum, M.D. Melony Kednocker Covington, M.D. Clarence Buddy Creech, II, M.D. Patrick Cooksey Crowe, M.D. Ian Crozier, M.D. Leslie Anne Cuevas, M.D. Kathryn McCrystal Dahir, M.D. Adrienne Monique Darhower, M.D. John Francis DeFrancisco, M.D.

Cardiology Hematology/Oncology Cardiology Pediatric Critical Care Child Development Center Pediatric Gastroenterology Interventional Cardiology Clinical Cardiac Pediatric Hematology/Oncology Neonatology Rheumatology Clinical Neurophysiology Neonatology Endocrinology and Diabetes Nephrology Nephrology Clinical Neurophysiology Pediatric Cardiology Pediatric Radiology Forensic Pathology Hematology/Oncology Nephrology Hematology/Oncology Pediatric Emergency Medicine General Pediatrics Infectious Diseases Pediatric Infectious Diseases Infectious Diseases Nephrology Gastroenterology Ophthalmology and Visual Nephrology Nephrology Cardiology Pediatric Emergency Medicine Neonatology Neonatology Gastroenterology Hematology/Oncology Neonatology Hematology/Oncology Cardiology Pediatric Infectious Diseases Hematopathology Infectious Diseases Rheumatology Endocrinology and Diabetes Nephrology Gastroenterology

Romano Thomas DeMarco, M.D. Kathryn Witcher Dixon, M.D. Jennifer Ann Domm, M.D. Jeffrey M. Donohoe, M.D. Coley Bryant Duncan, M.D. Ryszard Tadeusz Dworski, M.D. Matthew Varnell Dzurik, M.D. Michael Eugene Engel, M.D., Ph.D. Brian George Engelhardt, M.D. Shazia Fazili, M.B., B.S. Edrick Jordan Ferguson, M.D. Maxwell Ellis Fisher, M.D. Pete Pitaya Fong, M.D. Rudolph Nathanial Francis, M.D. Kevin Michael Fussell, M.D. Lynn Ge-Zerbe, M.D. Timothy Daniel Girard, M.D. William Walter Goldsmith, D.O. Emily Denise Graham, M.D. Garland Gary Green, M.D. William Michael Gregg, M.D. Rajan Sureshchand Gupta, M.B., B.S. Scott Osborn Guthrie, M.D. Natasha B. Halasa, M.D. Mark Edward Halstead, M.D. Ashraf Hosni Mahmoud Hamdan, M.B., Ch.B, M.D. Anwarul Hague, M.B., B.S. Michael Lane Hawthorne, M.D. Jennifer Rachel Herrell, M.D. John Lawrence Huber, Jr., M.D. Mei-Tsuey Hwang, M.D. Malik Abd Alsalam Ibrahim, M.B., Ch.B. Dana Ross Janssen, M.D. Roger Frank Johnson, M.D. David Scott Jones, M.D. Mercedes Villanueva Judkins, M.D. Ridas Juskevicius, M.D. Muhammad Bilal Khan, M.B., B.S. Michelle Siew Ching Khoo, M.B., Ch.B., BAO John Thomas Kimbrough, III, M.D., Ph.D. Pushpa Kumari, M.B., B.S. Laurie Macpherson Lawrence, M.D. Laura Louise Lawson, M.D. William Edward Lawson, M.D. Anna Victor York Levy, M.D. Elizabeth Hearon Lindsey, M.D. Matthew Scott Logsdon, M.D. Hector Andres Malave, M.D. Danko Martincic, M.D. Jose Andres Martinez, M.D. Allison Shivers McBride, M.D. Laura Faye McClure-Barnes, M.D. Steven James McElroy, M.D. Sheila Patricia McMorrow, M.D. Julie Ann Means, M.D. Kambiz Merati, M.D. Ryan Ray Meyer, M.D.

Pediatric Urology Pediatric Endocrinologyy Pediatric Hematology/Oncology Pediatric Urology Infectious Diseases Pulmonary Disease & Critical Care Pediatric Cardiology Pediatric Hematology/Oncology Hematology/Oncology Geriatric Medicine Neuroradiology Nephrology Cardiology Pain Management Pulmonary Disease & Critical Care Endocrinology and Diabetes Pulmonary Disease & Critical Care Critical Care Anesthesia Cardiology Cardiology Biomedical Informatics Pain Management Neonatology Pediatric Infectious Diseases Pediatric Sports Medicine Neonatology Pediatric Critical Care Pulmonary Disease & Critical Care Cardiology Hematology/Oncology Nephrology Clinical Neurophysiology Pediatric Cardiology Pulmonary Disease & Critical Care Pediatric Gastroenterology Pediatric Critical Care Hematopathology Geriatric Medicine Cardiology Cardiology Clinical Neurophysiology Pediatric Emergency Medicine Surgical Oncology Pulmonary Disease & Critical Pediatric Cardiology Gastroenterology Hematology/Oncology Cardiology Hematology/Oncology Pediatric Gastroenterology Pediatric Emergency Medicine Hematology/Oncology Neonatology Pediatric Emergency Medicine Hematology/Oncology Hematopathology Pediatric Cardiology

Neuroradiology

Anna Miller, M.D. Ravi Kant Misra, M.D. Heather Lynn Misra, M.D. Amir Modarressi, M.D. James Anthony Sheerin Muldowney, III, M.D. Christopher Joseph Muniz, M.D. Kussav Nassr. M.D. Reza Nazemzadeh, M.D. Chieu Dinh Nguyen, M.D. Douglas A. Nigbor, M.D. Robin Lvnn Obenchain, M.D. Carmine Vincent Oddis. M.D., Ph.D. David Picman Ohmstede, M.D. Henry Ewelike Okafor, M.B., B.S. Martina Ifeoma Okwueze, M.D. Rudolph Nathanial Francis, M.D. Marta Papp, M.D. Joseph Patrick Parker, M.D. Pickens Andrew Patterson, III. M.D. Arjun Pennathur, M.B., B.S. Timothy Ross Peters, M.D. Amy Elizabeth Potter, M.D. David Harding Priest, M.D. Julie Bastarache Prudhomme, M.D. Igor Puzanov. M.D. Naila Naureen Rana, M.B., B.S. Naima Abdul Razzak, M.B., B.S. Tanvanika Phillips Reine, M.D. Melissa M. Rhodes, M.D. Todd William Rice M.D. Robert Lamar Rice, M.D., Ph.D. Dorinda Hall Rouch, M.D. Christianne Louise Roumie, M.D. James Russell Runo, M.D. Pablo Jose Saavedra, M.D. Anup Kumar Sabharwal, M.D. John Stuart Salmon, M.D. Hunter Hastings Sams, M.D. Mohan Sathyamoorthy, M.D. Kimberly Suzanne Shimer, M.D. Saba I. Sile. M.D. Edith Marie Simmons M.D. James Peter Smith, M.D. David Scott Smith, M.D. Heidi Ann Beverley Smith, M.D. Charles Andrew Smith, M.D. Michele Donna Spring, M.D. Manakan Betsy Srichai, M.D. Matthew Blake Stahlman, M.D. Charles Preston Stewart, M.D. Bradly Strohler, M.D. Helen Keipp Bredenberg Talbot, M.D. Bekir Tanriover, M.D. Karen Lynn Tedesco, M.D. Carter Edwin Tharpe, M.D. Lora Denise Thomas, M.D. Jason William White Thomason, M.D.

Infectious Diseases Pulmonary Disease & Critical Care Hematology/Oncology Cardiology Vascular/Interventional Radiology Pain Management Hematology/Oncology Cardiac and Thoracic Surgery Nephrology Hematology/Oncology Cardiology Pediatric Cardiology Cardiology Plastic Surgery Pain Management Neonatology Gastroenterology Pain Management Cardiac and Thoracic Surgery Pediatric Infectious Diseases Pediatric Endocrinology Infectious Diseases Pulmonary Disease & Critical Care Hematology/Oncology Clinical Neurophysiology Infectious Diseases Hematology/Oncology Pediatric Hematology/Oncology Pulmonary Disease & Critical Care Hematology/Oncology Hematology/Oncology General Internal Medicine Pulmonary Disease & Critical Care Cardiology Endocrinology and Diabetes Hematology/Oncology Dermatology Cardiology Neonatology Nephrology Nephrology Nephrology Gastroenterology Pediatric Critical Care Cardiology Pediatric Infectious Diseases Nephrology Cardiology Gastroenterology Pediatric Critical Care Infectious Diseases Nephrology Hematology/Oncology Cardiology Infectious Diseases Pulmonary Disease & Critical Care

Mary Olivia Titus, M.D. Sabrina Mun-Yee Tom, M.D. Patricia Uherova, M.D. Steven Maurice VanHook, M.D. Yihan Wang, M.D. Noel Rabb Wardwell, Jr., M.D. Todd Michael Webster, M.D. Disease Elisabeth Donlevy Willers, M.D. Stephen Joseph Williams, M.D. Robert Earl Williams, Jr., M.D. John Vance Williams, M.D. Matthew Hunter Wilson, M.D., Ph.D. Frank Wong, M.D. Kimberly Ann Worley, M.D. Aubrey Teresa Wright, M.D. Yingbo Yang, M.D., Ph.D. Bryan Eugene Youree, M.D. Wenwu Zhang, M.D.

Pediatric Emergency Medicine Pulmonary Disease & Critical Care Hematopathology Infectious Diseases Pathology Pulmonary Disease & Critical Care Endourology, Laparoscopy, Stone

Pulmonary Disease & Critical Care
Infectious Diseases
Pediatric Gastroenterology
Pediatric Infectious Diseases
Nephrology
Pediatric Cardiology
Medical Genetics
Clinical Neurophysiology
Cardiology
Infectious Diseases
Cardiology

Residents

Name	PGY	Title	Service
Oran Sacha Aaronson, M.B.B.S.	5	Resident	Neurosurgery
Asli Saba Abaci, M.D.	5	Resident	Child Psychiatry
Wesley Matthew Abadie, M.D.	1	Resident	General Surgery
Tarek Sami Absi, M.D.	6	Resident	Cardiac and Thoracic Surgery
Allen Dale Adams, M.D., Ph.D.	3	Resident	Medicine
Charles Andrew Adams, Jr., M.D.	6	Resident	Trauma & Surgical Critical Care
Kent Lewis Adkins, M.D.	5	Resident	Urology
David Henry Adler, M.D.	3	Resident	Medicine/Pediatrics
Melody Robin Rice Adler, M.D.	2	Resident	Obstetrics and Gynecology
Hemant Shyam Agarwal, M.B.,B.S.	2	Resident	Pediatrics
Maneesh Ailawadi, M.D.	6	Resident	Cardiac and Thoracic Surgery
Anthony J. G. Alastra, M.D.	6	Resident	Neurosurgery
Jeffrey R. Albea, M.D.	6	Resident	Neurosurgery
Cynthia Ann Allen, M.D.	3	Resident	Pathology
Robert Stanton Amonette, M.D.	2	Resident	Radiology
Shannon Leigh Amonette, M.D.	5	Resident	Radiology
Ivy Marie Andersen, M.D.	2	Resident	Neurology
Jeremiah John Andersen, M.D.	2	Resident	Pathology
Christopher Daniel Anderson, M.D.	3	Resident in	Research General Surgery
Edgard Olbany Andrade, M.D.	4	Resident	Child Neurology
Russell G Andreasen, M.D.	4	Resident	Psychiatry
Frederick Vedder Arndt, M.D.	1	Resident	Medicine
Ryan Wesley Arnold, D.D.S.	1	Resident	Orthodontics
Nathan Edward Ashby, M.D.	1	Resident	Anesthesiology
Douglas Burton Atkinson, M.D.	1	Resident	Pediatrics
Susan Kay Austell, M.D.	3	Resident	Medicine
Mary Thomas Austin, M.D.	3	Resident in	
Folasade Adenike Aworinde, M.D.	3	Resident	Pediatrics
Ahmad Azari, M.D.	2	Resident	Obstetrics and Gynecology
Tarek Mahmoud Aziz, M.B.,Ch.B.	2	Resident	Psychiatry
Elizabeth Ward Bailes, M.D.	2	Resident	Pediatrics

Matthew Bryan Baker, M.D., Ph.D.	7	Resident	Plastic Surgery
Glen Charles Balch, M.D.	4	Resident	General Surgery
Richard Aaron Ballard, D.D.S.	2	Resident	Orthodontics
	3	Resident in Resident	
Philip Quy-Trung Bao, M.D.			
Colin MacLeod Barker, M.D.	3	Resident	Medicine
Christine Alice Barone, M.D.	1	Resident	Emergency Medicine
Petra Maria Baudenbacher, D.D.S.	1	Resident Or	al and Maxillofacial Surgery
Rebecca Marie Bauer, M.D.	1	Resident	General Surgery
Joseph August Baust, Jr., M.D.	3	Resident	Pediatrics
Daniel Becker, M.D.	1	Resident	Medicine
John Conard Belitz, IV, M.D.	2	Resident	Medicine/Pediatrics
	3		
Barry Robert Berch, M.D.		Resident	General Surgery
Tyler William Berutti, M.D.	2	Resident	Pediatrics
Frederic Tremaine Billings, IV, M.D.	2	Resident	Anesthesiology
Matthew Lee Bilodeau, M.D.,Ph.D.	1	Resident	Medicine
Robert John Blair, II, M.D.	2	Resident	Emergency Medicine
Gordon Michael Blanchard, Jr., M.D.	5	Resident	Orthopaedics
Jaime Lynne Bohl, M.D.	1	Resident	General Surgery
Sara Louise Bomar, M.D.	4	Resident	Radiology
	2	Resident	Medicine
Chad S Boomershine, M.D., Ph.D.			
Yvette Angele Bordelon, M.D.	2	Resident	Pathology
Lakshmisarojini Botta, M.B., B.S., M.D.	5	Resident	Addiction Psychiatry
Fouad Ismat Boulos, M.D.	2	Resident	Pathology
Travis Carl Bowles, M.D.	3	Resident	Medicine/Pediatrics
Julie Alicia Boyd, M.D.	3	Resident	Medicine
William Bradley Boyd, M.D.	4	Chief Resident	Pediatrics
Thomas Lane Bradbury, Jr., M.D.	3	Resident	Orthopaedics
William Si Bradham, Jr., M.D.,Ph.D.	1	Resident	Medicine
	3	Resident	Pathology
Shelli Grace Bregman, D.O.			0,1
Terrance Moynahan Brogan, M.D.	4	Resident	Neurology
James Thomas Broome, M.D.	1	Resident	General Surgery
Alyssa Dawn Brown, M.D.	2	Resident	General Surgery
Samuel Floyd Brown, M.D.	4	Resident	Obstetrics and Gynecology
Alexander Jeffrey Brunner, M.D.	3	Resident	Medicine/Pediatrics
Christina My-Phuong Bui, M.D.	3	Resident	Ophthalmology and Visual
Robert Stanley Burcham, M.D.	4	Resident	Radiology
Earle Frederick Burgess, M.D.	2	Resident	Medicine
Matthew Lee Busam, M.D.	3	Resident	Orthopaedics
Jason Charles Buss, M.D.	2	Resident	Emergency Medicine
,			Conord Curacry
Jonathan Edward Buzzell, M.D.	1	Resident	General Surgery
Thomas Frederick Byars, M.D.	2	Resident	Pediatrics
James Brian Byrd, M.D.	2	Resident	Medicine
Thomas Hargrave Cabell, Jr., M.D.	2	Resident	Medicine
Cory Layne Calendine, M.D.	3	Resident	Orthopaedics
Benjamin Carlisle Calhoun, M.D., Ph.D.	5	Resident	Pathology
Ladd Mathew Campbell, D.O.	2	Resident	Anesthesiology
Michael Jay Campbell, M.D.	3	Resident	Pediatrics
Nancy Larrison Campbell, M.D.	3	Resident	Medicine
, ,	2	Resident	
Nicole Diane Canaley, M.D.	_		Psychiatry
Kimberly Ann Candido, M.D.	1	Resident	Medicine
Mary Traylor Capps, M.D.	3	Resident	Pediatrics
Michael Thomas Capps, M.D.	4	Resident	Medicine/Pediatrics
Timothy Mitch Carey, M.D.	3	Resident	Medicine
Douglas Eugene Carlan, M.D.	4	Resident	Orthopaedics
Robert Owens Carpenter, M.D.	3	Resident	General Surgery
Curtis George Carson, M.D.	2	Resident	Anesthesiology
Eric Thomas Castaldo, M.D.	2	Resident	General Surgery
2.15 THOMAG GAGGAGO, MI.D.	_		acricial cargory

Peter Laurence Castro, M.D.	2	Resident	Anesthesiology
,	1	Resident	Medicine
Patrick C. Chang, M.D.			
Chia-Wai David Chang, M.D.	5	Resident	Otolaryngology
James David Chappell, M.D.,Ph.D.	3	Resident	Pathology
	3		
Eric Chen, M.D.		Resident	Ophthalmology and Visual
Anton Chen, M.D.	3	Resident	Otolaryngology
Rebecca Naomi Milstein Cherry, M.D.	1	Resident	Pediatrics
Michael W. Chester, M.D.	1	Resident	General Surgery
Emily Susan Chism, M.D.	2	Resident	Medicine
Chrystal Grupka Clamp, M.D.	2	Resident	Medicine
Travis Matthew Clark, M.D.	5	Resident	Urology
Seth Morris Cohen, M.D.	4	Resident	Otolaryngology
Emily Elizabeth Cole, M.D.	5	Resident	Urology
Bryan R. Collier, D.O.	6	Resident	Trauma & Surgical Critical Care
Irene Frances Connolly, M.D.	3	Resident	Radiation Oncology
John Matthew Conoyer, M.D.	1	Resident	General Surgery
Matthew Abraham Corriere, M.D.	3	Resident in	
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Sean Vincent Costabile, M.D.	3	Resident	Anesthesiology
Alissa Anne Craft, M.D.	2	Resident	Ophthalmology and Visual
Teresa Perry Crase, M.D.	1	Resident	Pediatrics
Edward Cody Crase, M.D.	3	Resident	Radiology
Deidre Denise Crocker, M.D.	2	Resident	Pediatrics
Jerry Jackson Crook, II, M.D., J.D.	1	Resident	Medicine
Ramon Fontanilla Cuevas, M.D.	4	Resident	Neurology
Edward Merritt Cullum, M.D.	3	Resident	Medicine
Michael Cullen Cunningham, M.D.	3	Resident	Medicine
Jeffrey L. Cutler, M.D.	4	Resident	Otolaryngology
Eric Arthur Dame, M.D.	3	Resident	Radiology
Derek Anthony Damin, M.D.	5	Resident	Allergy and Immunology
Melvin Sidney Dassinger, III, M.D.	4	Resident	General Surgery
Lana Davenport, M.D.	1	Resident	Psychiatry
Julie Ann Davis, M.D.	2	Resident	Ophthalmology and Visual
Jennifer Lise Davis, M.D.	1	Resident	Pediatrics
Bryan Matthew Davis, M.D.	2	Resident	Otolaryngology
	5	Resident	, , ,
Robert Frank Debski, M.D.			Pathology
Jamie Nichole Deis, M.D.	1	Resident	Pediatrics
Marc Robert DeJong, M.D.	3	Resident	Medicine
Kellie Anne Klein DeLozier, M.D.	3	Resident	Obstetrics and Gynecology
Jennifer Rebecca Dempsey, M.D.	2	Resident	Dermatology
Michael Karsten Dengel, M.D.	2	Resident	Neurology
Nancy Marie Marguerite Denizard, M.D.	2	Resident	Medicine
Joshua Charles Denny, M.D.	1	Resident	Medicine
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Nikhil Kishor Desai, D.M.D.	1	Resident	Oral and Maxillofacial Surgery
Clinton James Devin, M.D.	2	Resident	Orthopaedics
Jessica Koch Devin, M.D.	2	Resident	Medicine
Paula Herrmann Dinkins, M.D.	1	Resident	Medicine
Edward Jeffrey Dinkins, M.D.	1	Resident	Medicine
Danielle Marie Dion, M.D.	1	Resident	Obstetrics and Gynecology
Ben W. Doke, M.D.	3	Resident	Obstetrics and Gynecology
Stephen Joseph Dolinski, D.O.			<u> </u>
Stephen Joseph Dollinski, D.O.	1	Resident	Psychiatry
Changhong Christine Dong, M.D.	3	Resident	Neurology
Jill Erin Donovan, M.D.	2	Resident	Anesthesiology
Lesly Ann Dossett, M.D.	1	Resident	General Surgery
Valentina Angelova Doumanian, M.D.			Psychiatry
valentina Andelova Doumanian, M.D.			
	2	Resident	
Bradley Kent Draper, M.D.	3	Resident	Dermatology
	3		
Bradley Kent Draper, M.D.		Resident	Dermatology

Andrew Michael Dries, M.D.	3	Resident	Medicine
Ashley Ann Duckett, M.D.	1	Resident	Medicine/Pediatrics
Nathaniel David Dueker, M.D.	2	Resident	Radiology
Christopher Laird Dunnahoo, M.D.	2	Resident	Emergency Medicine
Joy Louise Duong, M.D.	2	Resident	Obstetrics and Gynecology
Truman Markley Earl, M.D.	2	Resident	General Surgery
Joseph Bryan Eby, M.D.	6	Resident	Plastic Surgery
Aaron Wesley Eckhauser, M.D.	2	Resident	General Surgery
Michael Ladd Edgeworth, M.D.	4	Chief Resident	
Kristin Joy Ehst, M.D.	1	Resident	Medicine/Pediatrics
Don Jacob Elazar, M.D.	4	Chief Resident	Psychiatry
Nanette Francine Eldridge, M.D.	3	Resident	Medicine
Gregory Stewart Elliott, M.D.	4	Resident	Radiology
Christopher Randall Ellis, M.D.	4	Resident	Medicine/Pediatrics
Cyrus Conrad Erickson, M.D.	4	Resident	Anesthesiology
Eric Eskioglu, M.D.	5	Resident	Neurosurgery
Sabin K. Ewing, D.D.S.	2	Resident	Orthodontics
Jeffrey John Fanning, M.D.	1	Resident	Pediatrics
Scott Binfield Farnham, M.D.	3	Resident	Urology
John Henry Fasig, III, M.D.	1	Resident	Pathology
	5	Resident	
JimBob Faulk, M.D.			General Surgery
Neville Oscar Fernandes, M.D.	4	Resident	Anesthesiology
Joss Dean Fernandez, M.D.	4	Resident	General Surgery
Alexander Filatov, M.D.	4	Resident	Pathology
Daniel Clark Files, M.D.	1	Resident	Medicine
Kathryn Leigh Finch, M.D.	1	Resident	Medicine
Christopher Chad Findley, M.D.	1	Resident	Emergency Medicine
Kevin Richard Finnegan, M.D.	3	Resident	Medicine
Deidre Michels Fish, M.D.	2	Resident	Obstetrics and Gynecology
Robert Warne Fitch, M.D.	3	Resident	Emergency Medicine
Christine Tobin FitzGerald, M.D., Ph.D.	2	Resident	Pediatrics
Erin Elyse Fleener, M.D.	3	Resident	Medicine
Gregory Allan Fleming, M.D.	1	Resident	Pediatrics
John Robert Floyd, II, M.D.	4	Resident	Neurosurgery
Molly Rae Fortner, M.D.	1	Resident	Medicine
John Randolph Foster, III, M.D.	1	Resident	Anesthesiology
Harold Allen Foster, M.D.	4	Resident	General Surgery
· · · · · · · · · · · · · · · · · · ·	2		Pediatrics
Susan Marie Fowler, M.D.		Resident	
Alexander Sinclair Franz, M.D.	4	Resident	Obstetrics and Gynecology
Jonathan William Frederick, D.M.D.	1		Oral and Maxillofacial Surgery
Lawrence Wilton Freund, D.O.	4	Resident	Anesthesiology
David Jay Friedman, M.D.	4	Resident	Allergy and Immunology
Jennifer Rae Frump, M.D.	2	Resident	Pathology
Russell L. Fry, M.D.	3	Resident O	phthalmology and Visual Sci.
Silpa Bharathi Gadiraju, M.B.,B.S.	1	Resident	General Surgery
Megan Elizabeth Gaffney, M.D.	3	Resident	Medicine
Kim Frances Mary Gardner, M.D.	1	Resident	Pediatrics
Jeffrey Vernon Garrett, M.D.	4	Resident	General Surgery
Carrie Anna Geisberg, M.D.	1	Resident	Medicine
Ginari Rene Gibb, M.D.	1	Resident	Psychiatry
Stephen Kyle Gimple, M.D.	1	Resident	Medicine
Christopher Robert Girasole, M.D.	2	Resident	Urology
Ronald Edward Glenn, Jr., M.D.	5	Resident	Orthopaedics
James Burton Godchaux, Jr., M.D.	5	Resident	Radiology
Lori Rachel Goldman, M.D.	1		3,
,		Resident	Pediatrics
Brian Travis Goodman, M.D.	1	Resident	Anesthesiology
Maje Denise Goodwin, M.D.	1	Resident	Pediatrics

Christina Lynn Gordon, M.D.	1	Resident Emergency Medicine
Joann Stacey Goring, M.D.	1	Resident Medicine
	4	
Keith Demond Gray, M.D.		
Kala Cheryl Gray, M.D.	3	Chief Resident Psychiatry
Joseph Angelo Greco, III, M.D.	2	Resident General Surgery
Cynthia Ann Green, D.D.S.	1	Resident Orthodontics
Jennifer Kiser Green, M.D.	1	Resident Medicine/Pediatrics
Spencer Corey Greene, M.D.	3	Resident Emergency Medicine
Sara Rachelle Grimley, M.D.	3	Resident Medicine
	3	
Jonay Nicole Grimm, M.D.	3	3,
Eric Lee Grogan, M.D.	3	Resident in Research General Surgery
Sara Habibian, M.D.	2	Resident Obstetrics and Gynecology
Elias Victor Haddad, M.D.	2	Resident Medicine
Heather Elise Hagerman, M.D.	1	Resident Anesthesiology
John Wyman Hairr, M.D.	2	Resident General Surgery
Nathan James Hall, M.D.	1	Resident Medicine
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Jennifer Lynne Halpern, M.D.	3	
Sammy Hamid, M.D.	3	Resident Medicine
Kelsey Ann Hamilton, M.D.	2	Resident Pediatrics
David Hall Hammett, M.D.	3	Resident Neurology
Erik Nels Hansen, M.D.	3	Resident General Surgery
Bradley Allen Hardin, M.D.	1	Resident Medicine
David Hardman Harley, M.D.	4	Resident Otolaryngology
Khary Oronde Harmon, M.D.	1	Resident Emergency Medicine
Laura Elizabeth Harper, M.D.	1	Resident Medicine
Heather Lynn Harris, M.D.	4	Resident Child Psychiatry
Neil David Harris, M.D.	3	Resident Emergency Medicine
Adam William Harris, M.D.	2	Resident Radiology
John Matthew Hassan, M.D.	3	Resident Urology
Susan Rescorla Hata, M.D.	1	Resident Medicine/Pediatrics
Allison Romayne Hatmaker, M.D.	2	Resident General Surgery
Geoffrey Edwin Hayden, M.D.	2	Resident Emergency Medicine
		9 ,
Nicole Leigh Heidemann, M.D.	1	Resident Obstetrics and Gynecology
Kimberly McCoy Helms, M.D.	5	Resident Pathology
Scott James Henderson, M.D.	1	Resident Anesthesiology
Michael John Henry, M.D.	3	Resident Ophthalmology and Visual Sci.
Chase Richard Herdman, M.D.	2	Resident Medicine
Mark Daniel Hicar, M.D., Ph.D.	2	Resident Pediatrics
Christine Ongaco Hidalgo, M.D.	3	Resident Pediatrics
Kimberly Brooke Higginbotham, M.D.	2	Resident Medicine
	3	
Bradley Christopher Hill, D.O.		
Charles Christian Hill, M.D.	3	Resident Anesthesiology
William Lyle Hinds, III, M.D.	2	Resident Psychiatry
Timothy John Hinton, M.D.	2	Resident Medicine
Melissa Eaton Hixson, M.D.	3	Resident Medicine
Lam H. Hoang, D.D.S.	1	Resident Oral and Maxillofacial Surgery
Gary Mark Hochheiser, M.D.	8	Resident Cardiac and Thoracic Surgery
Katherine Anne Hoeft, M.D.	1	Resident Pediatrics
	3	
Ryan Michael Holthaus, M.D.	-	Resident Radiology
Sarah Alice Hood, M.D.	4	Chief Resident Obstetrics and Gynecology
Leah Rae Hooker, M.D.	1	Resident Medicine
Samuel Bennett Slade Hooks, III, M.D.	2	Resident Medicine
Orlin Woodie Hopper, II, M.D.	5	Chief Resident Radiology
Stephanie Michelle Horn, M.D.	3	Resident Emergency Medicine
Nikolay Petrov Horozov, M.D.	2	Resident Psychiatry
Theresa Tien-Ho Huang, M.D.	3	Resident Radiology
	2	Resident Medicine
Robert Long Huang, M.D.	_	nesident Medicine

Elizabeth Stack Huebner, M.D.	8	Chief Resider	nt Medicine
Mary Margaret Huizinga, M.D.	1	Resident	Medicine
Martha Elizabeth Huller, M.D.	2	Resident	Radiology
Aaron James Hunt, M.D.	1	Resident	Psychiatry
Helen Wiener Hutcherson, M.D.,Ph.D.	1	Resident	Psychiatry
Carey Kang-lun Hwang, M.D.,Ph.D.	i	Resident	Medicine
James Michael Isbell, M.D.	i	Resident	General Surgery
Rebecca Lynn Isbell, M.D.	1	Resident	Pediatrics
Kent Kunio Ishihara, M.D.	3	Resident	Medicine
•	5		Child Psychiatry
John Albers Williamson Jackson, M.D.	3	Resident	
Gregory H. Jacobson, M.D.		Resident	Emergency Medicine
Sheila Renee' Jeffcoat, M.D.	3	Resident	Anesthesiology
Cameron Campbell Johnson, M.D.	3		Ophthalmology and Visual Sci.
Darren Lemar Johnson, M.D.	1	Resident	General Surgery
Darrin Lee Johnson, M.D.	6	Resident	Nuclear Medicine
Jeffery Chad Johnson, M.D.	2	Resident in R	
Edwin Clay Jones, M.D., Ph.D.	4	Resident	Psychiatry
Timothy W. Jones, M.D.	2	Resident	Medicine
Emma Morvant Jones, M.D.	2	Resident	Pediatrics
Clay Travis Jones, M.D.	1	Resident	Pediatrics
Christopher Michael Jones, M.D.	3	Resident	General Surgery
Sonya Nicole Jones, M.D.	4	Resident	Psychiatry
Martin Ivanov Jordanov, M.D.	3	Resident	Radiology
Jeffrey Brian Jorgensen, M.D.	1	Resident	General Surgery
Ray-Dawn Shontaye Joseph, M.D.	3	Resident	Neurology
Thanos P. Kakoulidis, M.D., Ph.D.	2	Resident	General Surgery
Joseph Michael Kaminski, M.D.	2	Resident	Nuclear Medicine
Christine C. Kane, M.D.	2	Resident	Radiology
Sara Marshall Kantrow, M.D.	2	Resident	Dermatology
Edward Matthew Karl, M.D.	1	Resident	Psychiatry
Melissa Rae Kaufman, M.D.	2	Resident	Urology
Vicki Leigh Keedy, M.D.	2	Resident	Medicine
Kevin Theodore Kelly, M.D.	4	Resident	Anesthesiology
Kristian Reid Kemp, M.D.	1	Resident	Emergency Medicine
William Brian Kendall, M.D.	1	Resident	Anesthesiology
Peggy Lynn Kendall, M.D.	6	Resident	Allergy and Immunology
Terry Robert Ketch, M.D.	3	Resident	Medicine
Kristal Tamara Keys, M.D.	1	Resident	Anesthesiology
Aziz Alexander Khanifar, M.D.	2	Resident	Ophthalmology and Visual Sci.
Heidi Alexandra Kilimanjaro-Davis, M.D.	. 2	Resident	Psychiatry
Shannon Robert Kilkelly, D.O.	3	Resident	Anesthesiology
Dong Wook Kim, M.D.,Ph.D.	3	Resident	Radiation Oncology
Ki Beom Kim, D.D.S.	2	Resident	Orthodontics
Sarah Ann Klizas, M.D.	2	Resident	Medicine
Alexandre Atanassov Koumtchev, M.D.	1	Resident	Psychiatry
Bradley Todd Kovach, M.D.	2	Resident	Dermatology
Tanya Lilliane Marie Kowalczyk, M.D.	2	Resident	Pediatrics
Michael Adam Kremer, M.D.	7	Resident	Neurosurgery
Manickam Krishnamurthy, M.D.	2	Resident	Emergency Medicine
Ari Yaakov Krug, D.M.D.	1	Resident	Orthodontics
Markian G. Kunasz, M.D.	7	Resident	Plastic Surgery
Philip Shih Kuo, M.D.	3	Resident	Medicine
Benji Thomas Kurian, M.D.	2	Resident	Psychiatry
William Bailey Kurtz, II, M.D.	3	Resident	Orthopaedics
Shashidhar (Shash) Kusuma, M.D.	5	Resident	Otolaryngology
Christopher Robert Kuzniak, M.D.	1	Resident	General Surgery
Michael Gerald Lam, M.D.	4	Resident	Anesthesiology

Rachel Marie LaMar, M.D.	2	Resident Obstetrics and Gynecology
,		
Leland Jarnigan Lancaster, M.D.	2	Resident Anesthesiology
Philip Dwayne Lanham, M.D.	4	Resident Radiology
David Lee Lasbury, M.D.	4	Resident Anesthesiology
William Donald Layman, D.M.D.	3	Resident Orthodontics
Truc Minh Le, M.D.	2	Resident Pediatrics
George Rozier Lee, III, M.D.	4	Resident Neurology
Carla Tucker Lee, M.D., Ph.D.	3	Resident Dermatology
	1	
Kevin Jerraine Lee, M.D.		
George S. Lee, D.D.S., M.D.	3	Resident Oral and Maxillofacial Surgery
Jaclyn Mary Lekse, M.D.	2	Resident Ophthalmology and Visual Sci.
Kristina Jo Leland, M.D.	1	Resident Pathology
Joe Preston Lester. D.O.	2	Resident Anesthesiology
	2	
Maria del Pilar Concepcion Levy, M.D.	2	Resident Pediatrics
Adele Maurer Lewis, M.D.	3	Resident Pathology
Rodney Preston Lewis, M.D.	2	Resident Anesthesiology
Charles Matthew Leys, M.D.	3	Resident in Research General Surgery
		3. ,
Susie I-Ching Lin, D.D.S., M.D.	4	Chief ResidentOral and Maxillofacial
Surgery		
Tekisha Urusha Lindler, M.D.	1	Resident General Surgery
Eric John Lindstrom, M.D.	4	Resident Radiology
		3,
Catherine Russell Linn, M.D.	2	Resident Medicine
Mary Caroline Long, M.D.	1	Resident Pediatrics
Eric Daniel Long, D.O.	4	Resident Anesthesiology
William Thomas Lowrance, M.D.	1	Resident General Surgery
	4	Chief Resident Anesthesiology
Stephen Ray Lowry, M.D.		
Karen Lisa Lubell, M.D.	3	Resident Pediatrics
Bryan R. Ludwig, M.D.	1	Resident Medicine
James Matthew Luther, M.D.	3	Resident Medicine
Michael Lyaker, M.D.	3	Resident Anesthesiology
Kamran Mahalati, M.D.	4	Resident General Surgery
•		
Joel Patrick Maier, M.D.	6	Resident Plastic Surgery
Dee Malkerneker, M.D.	1	Resident General Surgery
Brad Edward Maltz, M.D.	1	Resident Medicine
Murali Krishna Mamidi, M.D.	3	Resident Anesthesiology
Alan Lee Mannheimer, M.D.	2	Resident Anesthesiology
,		
Annis Morison Marney, M.D.	1	Resident Medicine
Karen Elizabeth Martin, M.D.	1	Resident Medicine
Jason Brantley Martin, M.D.	2	Resident Medicine
William Jeffrey Mason, M.D.	1	Resident Medicine
Lawrence Edward Mason, Jr., M.D.	3	Resident Radiology
Stephen Edward Mason, M.D.	2	Resident Pathology
Nima S. Massoomi, D.M.D.	1	Resident Oral and Maxillofacial Surgery
Wade Bolton May, M.D.	1	Resident Medicine
Juli Anne McCay, M.D.	4	Resident Pathology
Sara Ann McClintock-Treep, M.D.	1	Resident Pathology
Nicole Streiff McCoin, M.D.	1	Resident Emergency Medicine
Thomas Gerald McConnell, M.D.	1	Resident Pathology
Robert Daryl McCray, M.D.	1	Resident Medicine
James Gordon McDowell, Jr., M.D.	5	Resident General Surgery
	2	
Lusanne Lilly McKenzie, M.D.		Resident Psychiatry
Shauna Leigh Mckinney, M.D.	4	Resident Obstetrics and Gynecology
Jared John McKinney, M.D.	1	Resident Emergency Medicine
William Earl Mcrae, III, M.D.	2	Resident Anesthesiology
Angela Rae McVie, M.D.	3	Resident Pediatrics
Vicente Alonso Mejia, M.D.	6	Resident Trauma & Surgical Critical Care
Lingzhong Meng, M.D.	1	Resident General Surgery

Karen Schilf Meredith, M.D.	2	Resident	Pediatrics
Louis Gregory Meriwether, Jr., M.D.	2	Resident	Medicine
Rebecca Ashley Milam, M.D.	3	Resident	Radiology
Michael Robert Milam, M.D.	3	Resident C	Obstetrics and Gynecology
Alison Nemeth Miller, M.D.	3	Resident	Medicine
Michael William Carl Miller, M.D.	4	Resident	Anesthesiology
Timothy Harold Miller, M.D.	4	Resident	Anesthesiology
Matthew Scott Miller, M.D.	2	Resident	Medicine/Pediatrics
			· · · · · · · · · · · · · · · · · · ·
Eva Kathryn Miller, M.D.	2	Resident	Pediatrics
Jonathon Richard Molnar, M.D.	6	Resident	Vascular Surgery
Sean Ryan Moore, M.D.	1	Resident	Pediatrics
	3		
Derek Edd Moore, M.D.		Resident in Resea	
Sovana Paul Moore, M.D.	4	Chief Resident C	Obstetrics and Gynecology
Jason Ascher Moret, M.D.	4	Resident	Anesthesiology
Alan Kenji Morimoto, M.D.	5	Resident	Radiology
Dustin Grev Morris, M.D.	4	Resident	Anesthesiology
Nick Samuel Morrow, D.M.D.	2	Resident Ora	Il and Maxillofacial Surgery
Jeffrey Scott Mueller, D.O.	4	Resident	Pathology
			0,7
Kenneth Lynn Muldrew, M.D.	3	Resident	Pathology
Eric Scott Mullins, M.D.	2	Resident	Pediatrics
Gregory William Munson, M.D.	1	Resident	Medicine
	2		
Nicole Elizabeth Muscato, M.D.		Resident	Pathology
Roger J. Nagy, M.D.	5	Resident	General Surgery
Andrew Charles Neck, M.D.	2	Resident	Medicine/Pediatrics
Bryce Allen Nelson, M.D., Ph.D.	1	Resident	Pediatrics
Bradford Alexander Nelson, M.D.	3	Resident	Urology
Charles Nguyen, M.D.	1	Resident C	Obstetrics and Gynecology
Alpa Manchandia Nick, M.D.	1		Obstetrics and Gynecology
Mohammad-Reza Nilforoushan, M.D.	4		
			thalmology and Visual Sci.
Wenying Niu, M.D.	3	Resident	Anesthesiology
Sharon Alicia Norman, M.D.	3	Resident C	Obstetrics and Gynecology
David Joseph Norris, M.D.	4	Resident	Anesthesiology
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Liesl Kaye Nottingham, M.D.	5	Resident	Otolaryngology
Daniel Michael Oberer, M.D.	4	Resident	Neurosurgery
Jeffrey Lawrence O'Connor, M.D.	4	Resident	Urology
Shane Damien O'Keeffe, MB, BCh, BAO		Resident	General Surgery
Matthew R. O'Malley, M.D.	3	Resident	Otolaryngology
Melissa Rennella Ortega, M.D.	2	Resident	Neurology
Jose Agustin Ortega, III, M.D.	2	Resident	Medicine
	2		
Katherine Conry Owens, M.D.		Resident	Anesthesiology
Daniel Eric Oxford, D.D.S.	1	Resident	Orthodontics
Kevin Ashley Pace, D.O.	4	Resident	Anesthesiology
Jason Ricklin Pack, M.D.	2	Resident	Radiology
Dipen J. Parekh, M.B.B.S., M.Ch.	4	Resident	Urology
Vikram Praful Patel, M.D.	4	Resident	Anesthesiology
Ashish Shashikant Patel, D.M.D.	1	Resident Ora	Il and Maxillofacial Surgery
	3	Resident	Child Neurology
Anup D. Patel, M.D.	-		0,7
Barron Lee Patterson, M.D.	4	Chief Resident	Pediatrics
Todd Marshall Patton, M.D.	4	Resident	Anesthesiology
Edilgrace Angeles Pecson, M.D.	2	Resident	Pediatrics
Brent Edward Pennington, M.D.	4	Resident	Dermatology
Jason Kyle Pereira, M.D.	3	Resident	Medicine
Andrew Craig Pfaffenbach, M.D.	3	Resident	Medicine
Fenna Tanner Phibbs, M.D.	2	Resident	Neurology
,			
Erin Lea Phillips, M.D.	1	Resident	Medicine
Scott Ashley Phillips, M.D.	2	Resident	Medicine
Paul Douglas Pickering, M.D.	3		Obstetrics and Gynecology
. aa. Douglao i lonolling, w.b.	J		satisfied and dynocology

Ketsia Bersy Pierre, M.D.	1	Resident	General Surgery
Stan Lamar Pope, M.D.	5	Resident	Radiology
		Resident	
Diego Porras, M.D.	2		Pediatrics
Christopher Carroll Potts, D.M.D.	2	Resident	Orthodontics
Benjamin Kuttikatt Poulose, M.D.	3	Resident in Researc	ch General Surgery
John Edward Prioleau, M.D.	2	Resident	Medicine
Christopher Hamilton Raggio, M.D.	1	Resident	Psychiatry
Nawal Ellen Ragheb-Mueller, D.O., Ph.D		Resident	Anesthesiology
Mahfuzur Rahman, M.B.,B.S.	5	Resident	Addiction Psychiatry
	2		
Thomas Patrick Rauth, M.D.	2	Resident	General Surgery
Lindsay Mallard Rauth, M.D.	2	Resident	Pediatrics
Mark Francis Reese, M.D.	5	Chief Resident	Radiology
Elaine Ruth Reinhard, M.D.	4	Resident	Plastic Surgery
Monica P. Revelo Penafiel, M.D., Ph.D.	3	Resident	Pathology
Brent Neil Rexer, M.D., Ph.D.	1	Resident	Medicine
Celina Talea Reyes-Hailey, M.D.	4		stetrics and Gynecology
	3	Resident	Pediatrics
Benjamin Phillip Reynolds, M.D.			
Troy Edward Rhodes, M.D.,Ph.D.	2	Resident	Medicine
Austin Taylor Rich, M.D.	2	Resident	Anesthesiology
Robert Barrett Richling, M.D.	2	Resident	Emergency Medicine
Holly Denise Richter, M.D.	1	Resident	Anesthesiology
John Alston Riddick, M.D.	3	Resident	Medicine
Derek Aron Riebau. M.D.	3	Resident	Neurology
William Patrick Riordan, Jr., M.D.	5	Resident	General Surgery
	3	Resident	
Robert Riviello, M.D.			General Surgery
Jason Booth Robbins, M.D.	4	Resident	Dermatology
Peter Gordon Robertson, M.D.	1	Resident	Medicine
Amy Catherine Robertson, M.D.	2	Resident	Anesthesiology
Ricardo Jesus Rodriguez, D.D.S., M.D.	1	Resident	General Surgery
Christopher D. Roman, M.D.	3	Resident	Radiology
John Danforth Ross, M.D.	5	Resident	Radiology
David Henry Rotter, M.D.	4	Resident	Radiology
Erin Renee Rudzinski, M.D.	1	Resident	Pathology
Jon Andrew Rumohr, M.D.	1	Resident	General Surgery
Stephan Russ, M.D.	1	Resident	Emergency Medicine
Robert Thomason Russell, M.D.	1	Resident	General Surgery
Jon Gregory Sabol, D.D.S., M.D.	1	Resident	General Surgery
Charles Phillip Samenow, M.D., M.P.H.	1	Resident	Psychiatry
Gabriela Beatriz Sanchez, M.D.	1	Resident	General Surgery
Catherine Harriett Sauls, M.D.	2	Resident	Pediatrics
Andrew Ernest Scanga, M.D.	2	Resident	Medicine
Daniel Raymond Scanga, M.D.	5	Resident	Radiology
	3		naulology
Carl R. Schmidt, M.D.		Resident in Research	
Amy Michele Schmitt, M.D.	1	Resident	Pediatrics
Jonathan Gregory Schoenecker,	1	Resident	General Surgery
Jason John Schrager, M.D.	3	Resident	General Surgery
Jennifer Lange Schuberth, M.D.	3	Resident	Medicine
Scott Alan Schuessler, D.D.S.	2	Resident	Orthodontics
Robert Myles Scoggins, M.D.,Ph.D.	2	Resident	Medicine
Warren H. Scott, M.D.	2	Resident	Psychiatry
	1		
Patricia Lee Scott, M.D.			stetrics and Gynecology
Paul Bradley Segebarth, M.D.	2	Resident	Orthopaedics
Kristy Kaye Self, M.D.	2	Resident	Emergency Medicine
James Felder Selph, M.D.	2	Resident	Neurology
John Robert Shannon, M.D.	4	Resident	Anesthesiology
Amy Elizabeth Shaw, M.D.	3	Resident	Medicine
Jason Lee Shipman, M.D.	3	Resident	General Surgery
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Munjal G. Shroff, D.O.	2	Resident	Psychiatry
Matthew Dawson Shuford, M.D.	4	Resident	Urology
Karl Arthur Sillay, M.D.	5	Resident	Neurosurgery
	1		
Scott Douglas Simon, M.D.		Resident	General Surgery
Chasidy Dionne Singleton, M.D.	4	Resident	Ophthalmology and Visual Sci.
Catherine Anne Sipe, M.D.	2	Resident	Pediatrics
India Yount Sisler, M.D.	1	Resident	Pediatrics
Anna Sadika Skelo, M.D.	4	Resident	Ophthalmology and Visual Sci.
Kristen Carol Sladek, M.D.	2	Resident	Medicine
Hamilton Arthur Small, M.D.	4	Chief Reside	
Paige Johnson Smith, M.D.	1	Resident	Pediatrics
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Clay Barton Smith, M.D.	2	Resident	Emergency Medicine
Andrew Harold Smith, M.D.	3	Resident	Pediatrics
Brian Stanley Smith, M.D.	3	Resident	Medicine
Keegan Marcus Smith, M.D.	2	Resident	Pediatrics
Brent Michael Snader, M.D.	4	Resident	Medicine/Pediatrics
Shannon Bishop Snyder, M.D.	3	Resident	Emergency Medicine
John K. Song, M.D.	7	Resident	Neurosurgery
	1	Resident	
Katherine Lindley Spaht, M.D.			Pediatrics
Jonathan Michael Spanier, M.D.	1	Resident	Pediatrics
John Spooner, M.D.	3	Resident	Neurosurgery
Donnie Ray Stacy, II, M.D.	5	Resident	Radiation Oncology
John Michael Stafford, M.D., Ph.D.	1	Resident	Medicine
Craig Michael Starling, D.D.S.	3	Resident	Orthodontics
Frederick S. Starr, M.D.	5	Resident	Child Psychiatry
Darbye McClanahan Steigerwald, M.D.	4	Resident	Anesthesiology
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Charles Bryce Stevenson, M.D.	3	Resident	Neurosurgery
John Hubert Stewart, IV, M.D.	5	Resident	General Surgery
Kristina Lynn Storck, M.D.	3	Resident	Obstetrics and Gynecology
Travis Lane Stork, M.D.	1	Resident	Emergency Medicine
Stephen Anthony Strickland, Jr., M.D.	2	Resident	Medicine
Sebastian Sune Strom, M.D.	2	Resident	Medicine
Thomas Carlyle Stuckey, III, M.D.	2	Resident	Ophthalmology and Visual Sci.
Tammy Lynn Suggs, M.D.	2	Resident	Psychiatry
John Blair Summitt, M.D.	7	Resident	Plastic Surgery
Eric Larry Sumner, M.D.	3	Resident	Medicine
David Antonio Sun, M.D.	1	Resident	General Surgery
Sudheer Jagannath Surpure, D.D.S., M.D.		Resident	Oral and Maxillofacial Surgery
Peter James Swarr, M.D.	4	Chief Reside	ent Medicine
Marcy Marie Swogger, M.D.	1	Resident	Pediatrics
Jane Bowen Taylor, M.D.	1	Resident	Pediatrics
Tahir Tellioglu, M.D.	2	Resident	Psychiatry
Tai Lee Helen Hokulii Temple, M.D.	2	Resident	Emergency Medicine
	3		
Joyce Ming Cao Teng, M.D., Ph.D.		Resident	Dermatology
Kyle Marion Tharp, M.D.	3	Resident	Nuclear Medicine
Karen Christiane Theilade, M.D.	1	Resident	Medicine
Craig Andrew Thieling, M.D.	3	Resident	Medicine
Damita LaShawn Thomas, M.D.	2	Resident	General Surgery
Bradley Phillip Thomas, M.D.	2	Resident	Radiology
Kenneth Tyson Thomas, M.D.	3	Resident in I	
Christopher Bryan Thomas, M.D.	2	Resident	Medicine
Troy David Thompson, M.D.	6	Resident	Plastic Surgery
Andrew Brian Thomson, M.D.	4	Resident	Orthopaedics
Robert Drummond Thornton, II, M.D.	2	Resident	Anesthesiology
Thomas Ward Throckmorton, M.D.	2	Resident	Orthopaedics
Julie Irene Thwing, M.D.	2	Resident	Medicine/Pediatrics
Sergei Nicolayevich Tikhonenkov, M.D.	1	Resident	General Surgery
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Alvin Michael Timothy, M.D.	3	Resident	Medicine
Stephanie Jeanne Todd, M.D.	2	Resident	Pediatrics
Rachel Celeste Toney, M.D.	1	Resident	Medicine
Sherstin Gabrielle Truitt, M.D.	2	Resident	Medicine/Pediatrics
Carson Robert Turner, M.D.	1	Resident	Medicine
Sarah Schafer Turner, M.D.	1	Resident	Anesthesiology
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Leslie Kinsey Tutt, M.D.	5	Resident	Radiology
Nathan Lee Van Zeeland, M.D.	1	Resident	General Surgery
Daniel J. VanHimbergen, M.D.	1	Resident	General Surgery
	3	Resident	Pediatrics
Amy Elizabeth Vehec, M.D.			
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Sandra Vergara, D.D.S.	3	Resident Ora	I and Maxillofacial Surgery
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	1		
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Jeremy D. Vos, M.D.	3	Resident	Otolaryngology
Eric Lee Wallace, M.D.	3	Resident	General Surgery
Mark Wayne Walter, M.D.	2	Resident	Psychiatry
Michael Dale Warren, M.D.	1	Resident	Pediatrics
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Irfan Ahmed Warsy, M.B.,B.S.	1	Resident	Pediatrics
Tanya Catherine Warwick, M.D.	3	Resident	Neurology
Scott Christopher Watkins, M.D.	1	Resident	Anesthesiology
	i		
Amy Lara Weiss, M.D.		Resident	Pediatrics
Jorn-Hendrik K. Weitkamp, M.D.	3	Resident	Pediatrics
Derek Christopher Welch, M.D.	4	Chief Resident	Pathology
Kevin Dale West, D.M.D.	1	Resident Ora	I and Maxillofacial Surgery
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Sean Patrick Whalen, M.D.	8	Chief Resident	Medicine
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Christopher Michael White, M.D.	2	Resident	Medicine
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Richard Oliver White, III, M.D.	2	Resident	Medicine/Pediatrics
Amy Catherine Whitmire, M.D.	1	Resident	General Surgery
Jeffrey Donald Willers, M.D.	5	Resident	Orthopaedics
	1	Resident	Medicine
Bryan Jeffrey Williams, M.D.,Ph.D.			
Jason Rudolf Williams, M.D.	1	Resident	Anesthesiology
Christopher Shawn Williams, M.D., Ph.D.	2	Resident	Medicine
Eric Howard Williams, M.D.	5	Resident	General Surgery
Tamara Lynn Williams, M.D.	5	Resident	Addiction Psychiatry
Carol Louise Willis, M.D.	4	Resident	Pathology
Marshall Thomas Wise, M.D.	2	Resident	Medicine
Justin Edward Wittkopf, M.D.	2	Resident	Otolaryngology
Peter Richard Woitkiewicz, D.M.D.	3	Resident	Orthodontics
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Christopher Todd Wootten, M.D.	2	Resident	Otolaryngology
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Charles Jackson Wray, M.D.	8	Chief Resident	Medicine
Leonard James Wudel, Jr., M.D.	5	Resident in Resea	arch General Surgery
	0		
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Patrick Lee Wupperman, M.D.	4	Resident	Orthopaedics
Fen Xia, M.D.,Ph.D.	3	Resident	Radiation Oncology
Tom Lou Yao, M.D.	2	Resident	Neurosurgery
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Christopher John Yates, M.D.		Resident	Anesthesiology
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Gabrielle Anna Yeaney, M.D.	2	Resident	Pathology
Hong Yu, M.D.	2	Resident	Neurosurgery
James Robert Yu, M.D.	5	Resident	Orthopaedics
John Matthew Yuill, M.D.	4	Resident	Medicine/Pediatrics



Index

25

Academic program, School of Medicine 67 Academic program, School of Nursing 301 Academic regulations, School of Medicine Academic regulations, School of Nursing Academic standards 349 Accreditation, School of Nursing 295 Accreditation, University 28 Activities and recreation fees 103, 363, 366 Acute Care Nurse Practitioner 304, 317 Administration, Medical Center 11 Administration, School of Medicine 43 Administration, School of Nursing 289 Administration, University 9 Administration, Vanderbilt University Hospital and The Vanderbilt Clinic 441 Admission, School of Medicine 55 Admission, School of Nursing 355 Adult Nurse Practitioner Program 318 Adult Nurse Practitioner/Cardiovascular Disease Prevention and Management Adult Nurse Practitioner/Correctional Health 305 Adult Nurse Practitioner/Gerontological Nurse Practitioner 306, 319 Advanced training 75 Advisers 77, 343 Affiliated facilities 25 Alcohol and Controlled Substance Policy Allied health professions 451 Alpha Omega Alpha 97 Ambulatory surgery 447 Anesthesiology 128 Arthritis and Joint Replacement Center 20, 450 Athletic facilities 39 Audiology, Doctor of 64 Audit courses 344 Awards 97, 371

Biochemistry 129

Johnson 37

Biomedical Informatics 130

Board, Hospital Medical 442

Board, Medical Center 10

Black Cultural Center, Bishop Joseph

Board of Trust, University 8 Brain Institute 124 **Buckley Amendment 31** Burn Center 447 Calendars 6, 7, 343 Campus Security Report 37 Canby Robinson Society 26 Cancer Biology 130 Cancer Center, Vanderbilt-Ingram 118, 448 Cardiac and Thoracic Surgery 159 Cardiovascular Perfusion Technology, Program in 451 Career Center 33 Cell and Developmental Biology 131 Centers for Research 118 Center for Research on Human Development, John F. Kennedy 120 Certification, School of Nursing 330 Chairs, professorships, and lecturships 83 Change of Course, School of Nursing 344 Child Care Center 35 Children's Hospital 18, 446 Class of 2002/03, School of Nursing 429 Clinic, The Vanderbilt 18, 439, 447 Clinical Management 306, 320 Clinical Nutrition Research Unit 120 Clinical and Research Ethics, Center for 119 Clinical Research Center 120 Code for Nurses 297 Commencement 81, 354 Committees, standing, Hospital 442 Committees, standing, Medical Center 12 Committees, standing, School of Medicine 43 Committees, standing, School of Nursing Community scholars program 113 Computer resources 25 Continuing medical education 75 Continuing nursing education 339 Counseling services 32 Course schedule, School of Medicine 69 Courses of study, School of Medicine 127 Courses of study, School of Nursing 375 Credit by examination, School of Nursing

359

Curriculum tables 69, 304

Dayani, Kim, Human Performance Center 22, 449
Day Surgery Center 447
Degree requirements, School of Medicine

77
Degree requirements, School of Nursing

324
Degrees offered 28
Diabetes Center 121
Dietetic Internship Program 452
Diabetic Internship Program 452

Disabilities, services for students with 35 Doctoral Nursing Courses 401

Eating on campus 30
Education records 31
Emergency medicine 132
Emergency Room and Trauma Center 445
Employment for spouses 113
Endowed chairs 83
Endowed research funds, School of
Medicine 117
Escort service 36
Examinations, School of Nursing 345
Executive faculty, School of Medicine 43

Extracurricular work 80

Facilities of the Medical Center 17
Faculty Practice Network 293
Faculty, School of Medicine 163
Faculty, School of Nursing 405
Family Medicine 133
Family Nurse Practitioner 307, 321
Fees 101, 363
Fellowships 75, 112
Fellows 268
Financial assistance 58, 105, 116, 367
Financial clearance 102, 365
Financial information 101, 114, 115, 363
Founder's Medal 97, 371
Frist, Patricia Champion, Hall 21
Fuld, Helen, Instructional Media Center 20

Godchaux, Mary Ragland, Hall 20 Grading system 78, 346, 349 Graduate nursing programs 317, 331 Graduate Student Council 29 Grievances, student, concerning grades 78, 352

Health service, student 33, 101, 104
Health systems management 307
Hearing and Speech Sciences 143, 455
Heart Institute, Page-Campbell 448
History, School of Medicine 51
History, School of Nursing 295
History, University 25
Home care services 431

Honor council, graduate nursing 341 Honor scholarships 104, 368 Hospital Medical Board 442 Hospital staff 457 Hospitalization insurance 34, 103, 365 House staff, clinical fellows 468 House staff, residents 471 Housing, University 29

Identification cards (Vanderbilt cards) 30 Information Technology Services 25 Insurance, hospitalization 34, 101, 103, 363 Insurance, liability 101, 103, 363, 365 Interdisciplinary coursework 161 International student and scholar services 37 International students, School of Nursing 359 Internships in Nursing 455

Johnson, Bishop Joseph, Black Cultural Center 36 Joint Center for Nursing Research 289

Late payment of fees 102, 365
Leave of absence 80, 346
Lectureships 90
Liability insurance for students 103, 365
Library, Annette and Irwin Eskind Biomedical 23, 448
Library, Jean and Alexander Heard 22
Licensure, School of Medicine 78
Licensure, School of Nursing 353
Life at Vanderbilt 29
LifeFlight 446
Light, Rudolph A., Hall 18
Loans 110, 367
Lost and found 36
Lung Research, Center for 122

Major courses, School of Medicine 67 Master of Public Health Degree 64 Master of Science in Nursing 317 Master's and Ph.D. course work, School of Medicine 56 Matrix Biology, Center for 123 M.D./Ph.D. program 56, 280 Medical Administration 135 Medical Arts Building 22 Medical Center East 19, 448 Medical Center North 19 Medical Center South 20 Medical College Admission Test 56 Medical Research Building, Ann and Roscoe Robinson 18 Medical Research Building, Frances Preston 19

Medical Scientist Training Program 56, 280 Medical Scholars Program 112 Medical Technology, program in 452 Medicine, Department of 136 Microbiology and Immunology 140 Microscope usage fee 101 Mission Statement, School of Medicine 50 Molecular Physiology and Biophysics 141 Molecular Toxicology, Center in 122 M.D./J.D. joint degree 59 M.D./M.S. in Biomedical Engineering 60 M.D./M.S. in Biomedical Informatics 60 M.D./M.Div. and M.D./M.T.S. 60 M.D./M.S. in Computer Science 61 M.D./M.Ed. program 61 M.D./M.P.H. program 62 M.D./M.B.A. program 62 M.S. in Clinical Investigation 63 M.S.N. dearee. School of Nursing 317 M.S.N./M.B.A. joint degree 308, 329 Named and Distinguished Professors, School of Medicine 163 Neonatal Nurse Practitioner 309, 322 Nephrology Center (George O'Brien Center for the Study of Renal Disease) 123 Neurology 142 Neurological Surgery 159 No-credit courses 345 Nuclear Medicine Technology, Program in Nurse Midwifery 310, 323 Nurse Midwifery/Family Nurse Practitioner 311, 324 Nursing Informatics 312, 324 Nursing, Internship in 455 Nursing Research, Center for 20

Objectives, School of Medicine 52
Obstetrics and Gynecology 143
Ophthalmology and Visual Sciences 145
Oral and Maxillofacial Surgery 159
Organizing framework, School of Nursing 297
Orientation, School of Nursing 341
Orthopaedics and Rehabilitation 146

Otolaryngology 160

Oxford House 20

Parking 37
Pass-Fail courses 344
Pathology 146
Pediatric Nurse Practioner 312, 325
Pediatric Surgery 160
Pediatrics 148
Pharmacology 151
Pharmacology and Drug Toxicity, Center for 123
Ph.D. course work, School of Medicine 76
Ph.D. in Nursing Science 331
Ph.D., School of Nursing 383

Plastic Surgery 161 Police Department 35 Postdoctoral courses 75 Post-master's option 337 Post-residency fellowships 75 Practica and Preceptorships 347 Pre-nursing studies 333, 375 Pre-specialty component, School of Nursing 301Preston, Frances, Medical Research Building 19 Preventive Medicine 152 Professional Doctoral Degree in Audiology 64 Professional liability insurance 103, 351 Probation 351 Program Goals (M.S.N.) 298 Promotion 79 Psychiatric-Mental Health Nurse Practitioner 313, 326 Psychiatry 153 Psychological and Counseling Center 32

Philosophy, School of Nursing 295

Radiation Oncology 155
Radiation Therapy Training Program 354
Radiology and Radiological Sciences 155
Recreation fee 101, 363
Refunds, School of Medicine 101
Refunds, School of Nursing 364
Register of Students, School of Medicine 274
Registration, School of Nursing 342
Regulations, academic 77, 341
Rehabilitation Services 450
Religious life 38
Renal Disease, George O'Brien Center for 123
Reproductive Biology Research, Center for

123
Requirements for M.D. degree 77
Requirements for M.S.N. degree 329
Research centers 118
Research funds, endowed 117
Residency assignments 282
Residency training 75
Robinson, Ann and Roscoe, Medical
Research Building 18

Sarratt Student Center 39
Schedule of courses, School of Medicine 69
Scholarships 58, 104, 105, 368, 372
Schulman Center for Jewish Life 38
Security, campus (Police Department) 35
Senior-in-absentia programs 335
Sigma Theta Tau 371
Specialties, School of Nursing 3317
Specialist Nursing Courses 378

Specialist Nursing Curriculum Overview 303 Sports and recreation 39 Sports Medicine Center 20, 451 Stallworth Rehabilitation Hospital 18, 450 Standing committees, Hospital Medical Board 442

Standing committees, Medical Center 11
Standing committees, School of Medicine 43
Standing committees, School of Nursing
293

Student Health Center 33 Student Summer Fellowships 112 Subacute Care Unit 449 Surgery, general 158

Surgical Sciences, Section of 157

Test of English as a Foreign Language (TOEFL) 359 Thesis/Master's Project, School of Nursin

Thesis/Master's Project, School of Nursing 366

Transfer credit, School of Nursing 359 Transcripts 101, 366

Transportation 348

Trauma Center and Emergency Department 445

Tuition and fees, School of Medicine 101 Tuition and fees, School of Nursing 363 Uniform, School of Nursing 348
University, general information 27
Urologic Surgery 161
United States Medical Licencing Examination 78

Vanderbilt Children's Hospital 18, 446 Vanderbilt Clinic, The 18, 439, 447 Vanderbilt Directory Listings 32 Vanderbilt Psychiatric Hospital 18, 449 Vanderbilt University Hospital 17, 439, 445 Vanderbilt University Medical Board 10 Village at Vanderbilt 20 Visiting medical students 65

Wilkerson, Bill, Hearing and Speech Center 22, 448

Withdrawal from the University 352
Women's Center, Margaret Cuninggim 38
Women's Health Nurse Practioner 314, 327
Women's Health Nurse Practioner/Adult
Nurse Practioner 314, 328
Women's Reproductive Health Research
Center 124