

HISTORY AND BYLAWS

OF THE

NORTH CAROLINA BAPTIST HOSPITAL

SCHOOL OF ANESTHESIA

ALUMNI ASSOCIATION

2011

HISTORY OF THE NURSE ANESTHESIA PROGRAM OF THE NORTH CAROLINA BAPTIST HOSPITAL

The birth of the Nurse Anesthesia Program at North Carolina Baptist Hospital was necessitated by the need for increased anesthesia services. The need was created by the movement of the Wake Forest Medical School from a wooded glen of Wake Forest, North Carolina, to a gentle knoll in the Ardmore Community in Winston-Salem, North Carolina.

Beginning of North Carolina Baptist Hospital and Bowman Gray School of Medicine

The Wake Forest Medical School was founded in 1902 as a two-year medical school and the major thrust of transferring the school of Winston-Salem in 1941 was to expand it to a four-year school in association with the clinical facilities of North Carolina Baptist Hospital which had been officially opened on May 6, 1923. The building to house the new medical school was constructed in juxtaposition to the hospital and became known as the Bowman Gray School of Medicine pursuant to the receipt of resources from the Bowman Gray Fund. The first four-year medical class, forty-five students, was admitted in September 1941. The first nurse anesthesia class, two students, was admitted in January 1942, for a one-year course.

Dr. Roscoe Wall Founded School for Nurse Anesthetists

Prior to the establishment of the nurse anesthesia school, there were only four medical physicians who administered anesthesia in the city of Winston-Salem. Dr. Roscoe Wall, one of the four, was requested by Dr. Howard H. Bradshaw, a thoracic surgeon, to serve as an assistant professor in surgery in charge of the new section of anesthesiology in the medical school. To provide sufficient manpower, Dr. Wall petitioned the private duty registry

for “good nurses” to learn the art of anesthesia and he is credited with being the founder of the school.

Although anesthesia education during this period was primarily taught in an “apprenticeship manner,” Lillian Stansfield-Smith, one of the first students, was determined that she not only was going to learn how to give anesthesia but also was going to receive theory as well. While it is true, she laughingly reported, that some of the pharmacology classes during the first year were taught by Dr. Edwin Ford in the “swing on the porch of the nurses’ residence,” nurses, indeed, did receive instruction from him as well as being taught anesthesia techniques by Dr. Wall.

Stanfield-Smith Organizes the School

After completion of the one-year program, Stanfield-Smith was employed for a second year “internship” in the anesthesia section. She actively worked to assure that a “good course” was offered in the interest of the student nurse anesthetist and for improved patient care. She was a dynamic source in the organization and development of the curriculum of the school and the promotion of the educational standards subsequently established by the American Association of Nurse Anesthetists for legitimate schools of anesthesia. She served as the director of the program from 1956 until her marriage in 1963. During her tenure, 110 students graduated the program. During this time the program under the auspices of North Carolina Baptist Hospital. A major challenge for her while serving as director was to enlist the assistance of professors in the medical school, the anesthesiologists, residents, and staff nurse anesthetists to offer classroom instruction for the nurse anesthesia students. To some extent she was successful in the efforts; however, the records indicate that she taught a major portion of the total class hours throughout the years. Stansfield-Smith stated the most significant accomplishment for her was her ability to convince the graduates of the program that the qualifying examination was compulsory. At that time graduates were not required by hospital policy to take the examination; also, an important accomplishment was the excellent accreditation status she maintained from 1952 to 1963. The school was one of the first to be accredited by the AANA.

Pauline W. Hester served as acting director during the summer of 1963 and was appointed assistant director in November 1963. She held that position until January 1967.

Dr. Leroy Crandell Succeeds Dr. Wall As Anesthesiology Section Head

Dr. Wall served as section head of the department of anesthesia until his retirement on January 1, 1957. Dr. Leroy Crandell, his successor, was a “young, energetic, well-known and very capably trained anesthesiologist” from New York Hospital in New York. The New York residency program was chaired by the nationally known anesthesiologist Dr. Phillip Artusio. Stansfield-Smith credits Dr. Crandell with energizing the department of anesthesia. He was interested in quality care and research in anesthesia. In addition, he was very supportive of the nurse anesthesia school. His untimely death on May 10, 1966, created a period of chaos for the department of anesthesia and the school of nurse anesthesia.

Helen Vos Succeeds Lillian Stansfield-Smith As Director

In December 1963, the fact that at North Carolina Baptist Hospital “there was a school for everything” prompted Helen Vos, CRNA, to leave her Educational Director’s position at Barnes Hospital in St. Louis, Missouri, to accept the position of director of the nurse anesthesia school. Her acceptance of the position also was influenced by Stansfield-Smith’s assurance that she would be required to teach only a few technique courses since the anesthesia residents and others taught the greater portion of the classes. She had served as director for only a short while when she recognized inherent problems involved with the temporary nature of rotating instructors. A reorganization of the curriculum and instructors was immediately implemented.

The experience, qualifications, and dedication of Helen Vos enabled her to endure many inconveniences and hardships. She served as a bulwark of power during the turbulent period produced in the wake of the death of Dr.

Crandell. During these difficult times Dr. Henry Turner, an anesthesiologist resident, provided medical direction for the anesthesia services for approximately one year. Helen served as AANA President from 1965-1966.

Dr. Thomas Irving Assumes Position of Head of the Section on Anesthesiology

In June 1967, Dr. Thomas Irving was appointed the head of the section of anesthesiology. In a period of two and one-half years he developed a section that met all of the criteria for department status. On January 1, 1970, the department of anesthesia was established and Dr. Irving became Chairman of the department. While Dr. Irving was involved with the organizing and revitalizing of the anesthesia section and the residency program, Helen Vos was devoted to upgrading and advancing the school of anesthesia for nurses.

In June 1968, to relieve the undue demands in the operation of the school of anesthesia, Ms. Vos requested Dr. Irving and the hospital assistant administrator, Robert Walker, to approve positions for an administrative and educational assistant; Nancy Elmore, CRNA, and Shirley Crump, CRNA, were employed respectively for these positions on July 1, 1968. In 1969, the nurse anesthesia school became a program under the auspices of the Division (later Section) of Allied Health Programs.

Helen Vos served as program director until her retirement on January 1, 1977. During her administration she established a nationally recognized nurse anesthesia program in the process of graduating 132 students. A significant accomplishment for Ms. Vos was the formulation of a baccalaureate degree completion program for graduates of the school through Mars Hill College, Mars Hill, North Carolina, and Guilford College, Greensboro, North Carolina. In addition, she maintained full accreditation status throughout the thirteen years that she as the director.

Crump Heads School

After serving six months in the capacity of acting director, on July 1, 1977, Shirley Crump was appointed program director. During this transition, through the cooperation and support of Dr. Thomas Irving, the program

became an integral part of the department of anesthesiology, Bowman Gray School of Medicine. Major efforts were directed toward maintaining excellence in the program while attempting to advance the program to a degree-granting status. To accomplish the task, Sandra Maree, CRNA, was appointed Assistant Director in August 1977, and Nancy Bruton, CRNA, was appointed Educational Assistant in January 1980. Nancy Elmore continued in her administrative duties as chief nurse anesthetist and department manager in the department of anesthesia of NCBH. Ms. Elmore's role in coordinating clinical experience for students, assuring adequate supervision and her total commitment for the nurse anesthesia school was evident and essential for the progress made.

The significant accomplishments during this administration include:

1. The continued full four-year accreditation from the Council on Accreditation was maintained and renewed July 1980.
2. All students admitted during this period successfully passed the qualifying examination.
3. The availability of the optional Master of Science in Anesthesia through Bowman Gray School of Medicine began in the fall of '80.

In March 1981, due to the illness of Ms. Crump, it was necessary to make an administrative change in position of director. Sandra Maree became Program Director and Ms. Crump became Program Assistant.

Appointment of New Department Chairman

In June 1982, Dr. Thomas Irving announced his resignation as Chairman of the Department of Anesthesiology. Since Dr. Irving's appointment as Professor and Chairman of Anesthesiology in 1967, 167 student nurse anesthetists completed the anesthesia program at North Carolina Baptist Hospital and successfully wrote the Certificate Examination. His leadership led to substantial growth in the Department of Anesthesia. In addition to numerous contributions to anesthesia education for nurses at North Carolina Baptist Hospital, his involvement on the Council on Accreditation of Nurse Anesthesia Educational Programs helped shape the current and future direction of nurse anesthesia education. Dr. Irving is remembered as an educator, administrator, and friend.

Dr. Francis James, III, Assumes Position of Professor and Chairman, Department of Anesthesiology

In January 1983, Dr. Frank James assumed the position of Chairman, Department of Anesthesiology. Dr. James joined the Department of Anesthesiology at Bowman Gray School of Medicine in August 1969. In 1977 he was appointed Professor, Department of Anesthesia, and in 1978 he became Head of the Section of Obstetric Anesthesia at Forsyth Memorial Hospital. Dr. James was highly respected by anesthesiologists and nurse anesthetists throughout the country. Under his leadership a new era began.

The Decade of the 1980s

The decade of the 1980's focused on the continuation of a quality program, degree completion for program CRNAs, and movement of the program into a graduate framework. During this time, Sandra Maree continued in the position of program director and Nancy Bruton-Maree was appointed assistant director. Patricia Hearn, CRNA, served as clinical-education coordinator from 1983-1986 and Jacqueline DeVinney, CRNA, held that position from 1986-1990.

While the NCBH and BGSM Nurse Anesthesia Program remained a certificate granting program until 1988, degree completion programs were available. One such program offered a baccalaureate degree in biology at Guilford College, Greensboro, NC and the other a Master of Science in Anesthesia through Bowman Gray School of Medicine of Wake Forest University, Winston-Salem, NC. Both of these programs were designed to be completed after earning the certificate.

In January 1986, representatives from the program met with Dr. Patricia Chamings, Dean of the School of Nursing, The University of North Carolina at Greensboro about the possibility of a graduate program in anesthesia nursing. Following many months of intensive effort, agreement was reached. The UNCG School of Nursing in 1988 established a graduate concentration in anesthesia nursing which is conducted jointly with North Carolina Baptist Hospital and Bowman Gray School of Medicine. In

addition to meeting all requirements for certification, graduates who complete the program now earn the Master of Science in Nursing, anesthesia nursing concentration.

The School of Nursing at UNCG received a federal grant of \$215,864 to fund the new graduate specialization in 1989. Those funds represented first year funding under a three year award expected to total \$645,000. The end of the 1980s was a year of growth and transition. A 30 semester hour MSN program for CRNAs was established at UNCG and the first student enrolled in 1988. Attention was given to increased enrollment through expanded clinical sites. Forsyth Memorial Hospital served as the major site for obstetrical anesthesia experience since 1978 and Portsmouth Naval Hospital served as the only site for regional anesthesia since 1973. Affiliation agreements were signed with Iredell Memorial Hospital, Rowan Regional Medical Center, and Moses Cone Hospital in 1991. These sites allowed a small increase in program enrollment and broader clinical experience for students.

From the 1990s to the Millennium

The 1990s was marked by growth in the clinical affiliate sites and expansion in student enrollment. Affiliations continued with Iredell Memorial Hospital, Rowan Regional Medical Center, and Moses Cone Hospital. Moore Regional Hospital served as a clinical site from 1992 to 1994. Addition of these sites allowed the program to increase enrollment from 8 students in 1988 to 18 in 1999. They also continued to provide a broader clinical base for students.

Although administration of regional anesthesia by students would be required by the Council on Accreditation in 2000, the experience continued to be unavailable at Baptist or Forsyth Hospitals. Portsmouth Naval Hospital ended the affiliation in 1997. The National Naval Medical Center served as a clinical site in the summer of 1995. Other sites providing experience with regional anesthesia in the 1990s included Wright-Patterson Air Force Base, Ft. Knox Army Hospital, and Keesler Air Force Base. An agreement was signed with The Children's Hospital in Philadelphia in 1999 to provide advanced pediatric experience to selected students.

In May 1990, Nancy Bruton-Maree, CRNA, resigned to become the program director of the new Raleigh School of Nurse Anesthesia. Patti Dobbins, CRNA, became Assistant Director in May 1990 and Lisa Barbee, CRNA, replaced Jacquie Devinney, CRNA, as Clinical Education Coordinator in 1991. Lisa Barbee was promoted to Assistant Director in 1993 following Ms. Dobbins' resignation. Kasey Bensky, CRNA, became Clinical Education Coordinator in 1993 and was promoted to Assistant Director in 1997. Sherry Owens, CRNA, was appointed Clinical Education Coordinator in 1997.

Nancy Elmore, CRNA, resigned as Director of Nurse Anesthesiology in 1991 and Erwin Stainback, MBA, became Director of Nurse Anesthesiology Services. Ana Miquel, CRNA, was appointed clinical manager in the inpatient operating room and Betty Petree, CRNA, was named as the manager in the new outpatient anesthesia department that opened in June 1990. In December 1997, Ana Miquel Brooker resigned and the department was reorganized and Betty Petree became Assistant Director, Anesthesia Services. She appointed LaDonna Martin, CRNA, and Angie Sinclair, CRNA, as Chief CRNAs, Inpatient OR

Dr. Raymond Roy became Chairman of the Department of Anesthesiology on July 1, 1998. During his first year, an anesthesia educational simulator was purchased and plans were made for the automated patient record. Enrollment in both the nurse anesthesia and residency programs occurred during the first year. Dr. Roy also approved placement of spinal and epidural blocks by student registered nurse anesthetists.

Sandra Maree Ouellette Retires

In July 2005, Sandy Ouellette retired. Ms. Ouellette had been serving as President of the International Federation of Nurse Anesthetists since May, 2004, and incurred a heavy travel schedule that was expected to increase with new international responsibilities.

Sandy Ouellette served as director of the program from 1981 until 2005. During those years, the program changed from a diploma program to a graduate program offering the Master of Science in Nursing Degree (MSN), from the University of North Carolina at Greensboro. During the transition,

a federal grant was obtained. The grant was awarded over three years for total funding of \$645,000.

In addition to graduate level education, the number of clinical sites increased significantly during her tenure. By 2004, clinical education was obtained at NCBH inpatient, outpatient, and pediatric operating rooms as well as 13 clinical sites outside the medical center. These external sites include large and small community hospitals as well as rural hospitals in the area. Expanded clinical capacity allowed the program to increase enrollment from an admission of 8 students annually in 1988 to 20 students each year by 2000. Increased enrollment was critical at a time of CRNA shortages in the area.

During these years, financial support was an issue. In 1992-1993, a relationship was established with the Office of Development and Alumni Affairs at WFUBMC. The first annual solicitation from program graduates and friends of the program was conducted in 1993. Fund raising continued every year since then with attention given to obtaining major gifts as well. This support allowed the program to offer unique educational offerings not possible within an annual operational budget.

In 1998, UNCG's master degree program in nurse anesthesia was ranked eighth in the country by US News & World Report. In 2002, a book entitled "A History of the Nurse Anesthesia Program, Wake Forest University Baptist Medical Center – The University of North Carolina at Greensboro 1942-2002" was published. During Mrs. Ouellette's tenure, the program remained fully accredited, and 308 graduates were highly successful on the national certification examination.

Michael Rieker Succeeds Sandra Maree Ouellette as Director.

In 2005, Dr. Michael Rieker, a 1994 graduate of the Rush University CRNA program, succeeded Mrs. Ouellette as Program Director. Possessing an extensive clinical background, experience with computer-based instructional technology, and a clinical doctorate with emphasis on business and leadership in health care, Rieker was an apt selection to usher the program into its next phase. Rieker set out immediately to continue program expansion to 25 students per class. He also integrated various technological advances and an international study program into school operations. In 2007, the NCBH School of Anesthesia Alumni Association named former

Assistant Program Director, Lisa Barbee as Chair, and Dr. Rieker as an honorary alumnus of the association. With the class of 2007, the program had graduated 646 anesthetists. To strengthen the quality of clinical instruction, 1992 graduate Paul Welty was hired to fill the re-instated position of Clinical Education Coordinator. In the summer of 2007, Sherry Owens retired as Assistant Director. By 2008, Dr. Rieker had brought about expansion of program facilities, including an enlarged and technologically advanced classroom, a student library, and a clinical skills laboratory.

In 2008, Paul Welty was promoted to Assistant Director, and Alumna Courtney (Vick) Brown was hired as the Clinical Education Coordinator. With this faculty expansion, the program began to make great strides in the efficiency of its process. Clinical education opportunities in regional anesthesia and pain management were developed, and the obstetric rotation became more focused on labor analgesia. Many long-held processes in the areas of student and program evaluation received technological improvements. Paul returned to a clinical instructor position in 2009, and Courtney Brown succeeded him as Assistant Director. In 2010, Joanne Donnelly was recruited from Northshore University nurse anesthesia program to become the clinical education coordinator. In 2011, Alumni Janice Izlar and Sharon Pearce were serving on the AANA Board of Directors, Michael Rieker was serving on the National Board of Certification and Recertification of Nurse Anesthetists, and student Amy Young was the national student representative. The program was ranked by U.S. News and World Report as the #7 program in the country. As 2011 came to a close, Janice Izlar was seated as the AANA President-Elect, and Emma Batchelder served as AANA student representative, the second consecutive year a student from our program occupied that position.

Closing

As in the past, the fundamental purpose of the Nurse Anesthesia Program is to offer education and experience of high quality to a select group of registered nurses to satisfy the societal need for competent anesthetists. Initially the idea may have been to assure the local availability of nurse anesthetists, however, the program has become an important resource for the entire state of North Carolina and the southeastern region of the United States. The overall philosophy for the education of the student has been expressed for us by Sir William Osler, *“The hardest conviction to get into*

the mind of the beginner is that the education he is receiving in college is not a medical course but a life course for which the work of a few years under teachers is but a preparation.” Therefore, the primary objective of our program continues to be the preparation of our graduates for a life-long study and practice of anesthesia.

**North Carolina Baptist Hospital School of Anesthesia Alumni
Association
Bylaws**

ARTICLE I – Name

This organization shall be known as North Carolina Baptist Hospital School of Anesthesia Alumni Association.

ARTICLE II – Objective

It shall be the objective of this Association to promote the best interest of its members, support North Carolina Baptist Hospital School of Anesthesia, uphold the nurse anesthetists and their relationships with the medical profession, hospitals and contribute to the fellowship of the graduates of North Carolina Baptist Hospital School of Anesthesia.

ARTICLE III – Membership

- A. Membership in this Association shall be limited to nurse anesthetists who have successfully graduated from North Carolina Baptist Hospital School of Anesthesia. Members shall be encouraged to hold membership in the American Association of Nurse Anesthetists.
- B. Honorary membership may be conferred on a person or persons only by the voting body upon recommendations of the Board of Trustees.

ARTICLE IV – Meetings

North Carolina Baptist Hospital School of Anesthesia Alumni shall hold a Biennial Meeting in the uneven year, the date(s) and place to be determined by the Board of Trustees.

ARTICLE V – Biennial Year

The Biennial Year of North Carolina Baptist Hospital School of Anesthesia Alumni Association shall date from June of the uneven year.

ARTICLE VI – Government

- A. The government of the Association shall be vested in a board of five (5) trustees, consisting of a Chairman, Chairman-Elect, Secretary, and two (2) elected trustees.

- B. The officers of the Association shall be elected for a term of two (2) years and may be eligible for one (1) immediate re-elections to the same office, with the exception of the Chairman and the Chairman-Elect. Two (2) trustees shall be elected biennially for a two (2) year term. The regular term of office shall begin immediately following the biennial business meeting.

ARTICLE VII – Duties of Officers

- A. The Chairman shall:
 - 1. Preside at the meetings of this Association and the Board of Trustees.
 - 2. Appoint committees, except the Nominating Committee, subject to the approval of the Board of Trustees.
 - 3. Be a member ex-officio of all committees except the Nominating Committee.
 - 4. Prepare and read at each biennial meeting of this Association a report of the work of the biennial years.
 - 5. Appoint tellers prior to voting.
 - 6. Keep the Board of Trustees informed of Association affairs.

- B. The Chairman-Elect shall:
 - 1. Serve this Association in whatever capacity designated by the Chairman.
 - 2. Assume duties of Chairman in the event of the latter's inability to serve.

- C. The Secretary shall:
 - 1. Keep the minutes of the meetings of the Association and the Board of Trustees.
 - 2. Notify officers of their election and members of their committee appointments.
 - 3. Notify members of meetings thirty (30) days in advance.

4. Send copies of correspondence and information regarding matters of general business to this Association to the Chairman.
 5. Give a written report at the annual Business Meeting and, upon request, tot the Board of Trustees.
- D. The trustee shall attend meetings of the Board of Trustees.
- E. The Board of Trustees shall meet immediately preceding and following the annual meeting of the Association. A meeting of the Board of Trustees may be called by the Chairman at such time as the business of this Association may require, or upon written request of a quorum of the Board of Trustees filed with an officer of this Association.

ARTICLE VIII – Quorums

- A. Two (2) officers and five (5) members shall constitute a quorum at any annual business meeting.
- B. A majority of the members of the Board of Trustees shall constitute a quorum at any meeting of the Board of Trustees.

ARTICLE IX – Vacancies

- A. Any vacancy that occurs on the Board of Trustees with the exception of the Chairman shall be filled by the Board of Trustees. The member selected shall serve until the next regular election. In the event of a vacancy in the office of Chairman, the Chairman-Elect shall become Chairman and the Board of Trustees shall appoint another Chairman-Elect to serve until next regular election.
- B. In the event of vacancies occurring in committees between Biennial Meetings, the Chairman shall appoint members to fill such vacancies subject to approval of the Board of Trustees.

ARTICLE X – Removal

- A. Any officer, committee or committee member failing to fulfill the duties assigned may be dismissed by a majority vote of the Board of Trustees.

ARTICLE XI – Committees

A. Nominating:

The Nominating Committee shall consist of three (3) active members; two (2) members shall be elected at the annual meeting. The third members, a former officer, shall be appointed by the Board of Trustees. This committee shall elect its own chairman.

1. A ballot shall be prepared by the committee. Additional nominations may be made by submitting the member's name, with a written consent, thirty (30) days prior to the annual meeting to any member of the Nominating Committee.
2. Written consent of the candidate must be obtained before a name may be placed on the ballot.

B. The Chairman, with the approval of the Board of Trustees, shall appoint other committees as they become necessary to carry on the work of this Association.

ARTICLE XII – Amendments

The Bylaws may be amended at any annual meeting of this Association by a two-thirds (2/3) majority of those present and qualified to vote, provided notice of the proposed amendment has been appended to the call for the meeting and mailed at least thirty (30) days prior to the date thereof.

ARTICLE XIII – Voting

A. Who May Vote:

Members and honorary members shall participate in elections and other voting.

B. Nominations:

1. Only members shall be eligible for nominations.
2. Written consent of a candidate must be obtained before a name may be placed on a ballot.
3. Additional names may be written in on a ballot, provided written consent of the candidate has been filed with the Nominating Committee Chairman.

4. Ballots are to be marked and returned no later than one (1) week prior to the annual meeting. The method of conducting the ballot shall be determined by the Board of Trustees.

C. Method:

1. Three (3) Tellers shall be appointed by the Chairman and shall be responsible for election procedures, including counting the ballots, and making an official report to the members. The Tellers shall also be responsible for counting other votes and any business transacted. The Chief Teller shall be responsible for receiving the mailed ballots.
2. A plurality shall elect.
3. The election of offices and trustees may be held by mailed or electronic ballot if so determined by the Board of Trustees.
4. Ballots shall be made available by the Nominating Committee to members qualified to vote, at least four (4) weeks prior to the annual meeting, said ballots to be marked and submitted to the Chief Teller no later than one (1) week prior to the annual meeting.
5. In the event of a tie vote, the tie may be broken by a written ballot at the annual meeting by those present and qualified to vote.

ARTICLE XV – Non-profit Organization Dissolution

In the event of dissolution, no trustee or officer or individual member of the corporation shall be entitled to share in the distribution of assets of the corporation, but such assets shall be donated, transferred, delivered and conveyed to a worthwhile charity or other non-profit organization at the discretion of the Board of Trustees.

ARTICLE XVI – Parliamentary Procedure

Robert's Rule of Order, Revised, shall be the authority for this Association unless otherwise specified in the Bylaws.

Order of Business:

1. Call to Order
2. Roll Call (establishment of quorum).
3. Reading Minutes.
4. Report of Officers.
5. Report of Committees.
6. Unfinished Business.
7. New Business.
8. Announcements.
9. Program.
10. Adjournment.