As we enter a new year we would like to thank all of our nurses and associated colleagues for their hard work conducting research and changing practice. We have experienced great success and look forward to meeting our goal regarding developing new knowledge that guides our practice. In this Newsletter you will be able to review our yearly report. Again thank you for your contributions to research and evidenced-based practice.

Susan Houston, PhD, RN, FAAN, NEA-BC
Director of Nursing Research
Baylor Scott & White Health
<table>
<thead>
<tr>
<th>Institution</th>
<th>Protocol Development</th>
<th>IMC Approved</th>
<th>HSB Approved</th>
<th>Active (Data Collection or Analysis)</th>
<th>Publication/Presentation</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>BHCS</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>5</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>7</td>
<td>11</td>
<td>11</td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>BLUMC</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>8</td>
<td>5</td>
<td>0</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td></td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>15</td>
<td>20</td>
<td>7</td>
<td></td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>10</td>
<td>21</td>
<td>35</td>
<td></td>
<td>74</td>
</tr>
<tr>
<td></td>
<td>36</td>
<td>41</td>
<td>48</td>
<td>44</td>
<td></td>
<td>171</td>
</tr>
<tr>
<td>BHVM</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td></td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td></td>
<td>57</td>
</tr>
<tr>
<td>BUMC</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>6</td>
<td>10</td>
<td>10</td>
<td></td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>15</td>
<td>14</td>
<td>15</td>
<td></td>
<td>56</td>
</tr>
<tr>
<td>TMC</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>6</td>
<td>10</td>
<td>10</td>
<td></td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>15</td>
<td></td>
<td>67</td>
</tr>
<tr>
<td>WHMC</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>6</td>
<td>10</td>
<td>10</td>
<td></td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>15</td>
<td>17</td>
<td>17</td>
<td></td>
<td>63</td>
</tr>
<tr>
<td>WHMCP</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>8</td>
<td>8</td>
<td>8</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>18</td>
<td>14</td>
<td>14</td>
<td></td>
<td>62</td>
</tr>
<tr>
<td>BHM</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>4</td>
<td>6</td>
<td>6</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>11</td>
<td>15</td>
<td>20</td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>Baylor Garland</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>5</td>
<td></td>
<td>11</td>
</tr>
</tbody>
</table>
## BHCS Nursing Research Dashboard

<table>
<thead>
<tr>
<th>Publication/Presentation</th>
<th>1</th>
<th>2</th>
<th>2</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>3</td>
<td>6</td>
<td>6</td>
<td>8</td>
</tr>
</tbody>
</table>

### Washbacchi

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>0</th>
<th>0</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protocol Development</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NRC Approved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>IRB Approved</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Active (Data Collection or Analysis)</td>
<td>0</td>
<td>4</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Publication/Presentation</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

### Carrollton

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>0</th>
<th>1</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protocol Development</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>NRC Approved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>IRB Approved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Active (Data Collection or Analysis)</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Publication/Presentation</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

### GHCH

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>0</th>
<th>0</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protocol Development</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NRC Approved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>IRB Approved</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Active (Data Collection or Analysis)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Publication/Presentation</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

### BSH

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>0</th>
<th>0</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protocol Development</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NRC Approved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>IRB Approved</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Active (Data Collection or Analysis)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Publication/Presentation</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

*Total Active (Cumulative since 2010) | 90 | 87 | 84 | 76 |
*Completed (Cumulative since 2010) | 30 | 66 | 85 | 97 |

*Several of these studies are interfacility; therefore, these numbers are inflated.*
“Constant attention by a good nurse may just be as important as a major operation by a surgeon.”

-Dag Hammarskjold

Purposeful Leader Rounding on Patient Satisfaction
PI: Melissa A Winter, RN, MSN, NEA-BC

The Role of Evidence-Based Practice (EBP) in Decision-Making among Clinical Care Nurses
PI: Chidi R Oguh, Doctoral Learner, MHA

Teachback study
PI: Jaci Edelstein, BSN, RN
Our TCU EBP Fellows

Our TCU EBP fellows have again helped Baylor Scott & White Health achieve our mission of supporting our care practices in evidence. Their abstracts in this Newsletter reflect the contributions they have made to applied research. Thank our fellows for their hard work.

“There are no secrets to success. It is the result of preparation, hard work, and learning from failure.”

Colin Powell
Implementing a “Turn-Team” in Adult Medical Intensive Care Units (MICU): An Evidence-Based Practice Review

PI: Dara M. Marini, BSN, RN CCRN
Baylor University Medical Center Dallas

Problem/Introduction

Concerns about the number of hospital acquired pressure ulcers (HAPUs) that placed our institution above the national benchmark among our particular patient population led to the development of an evidence-based practice (EBP) project with the PICO question: Does Utilizing a turn team reduce the incidence rate of HAPUs in the adult medical intensive care unit population?

Evidence/Background

Frequent repositioning is a key intervention to help reduce the development of a HAPUs in patients that are high risk due to reduced mobility, sensory perception, moisture exposure, decreased activity, poor nutrition and friction/shear.

Methods/Review of Literature

A review of the literature was conducted by utilizing electronic databases (PubMed, MEDLINE, and Medscape) through Baylor’s Health Sciences Library. The key word “turn team” was searched alone and in conjunction with the following terms: pressure ulcer, pressure ulcer prevention, and pressure ulcer prevalence.

Results

Although it is rumored to have been around for years and practiced at hospitals across the United States, there is little published data supporting the intervention. That said, the studies that were evaluated during the review of literature did suggest an overall decrease in the number of HAPUs after implementation of a turn team.

Recommendations

More evidence is needed to clearly indicate the effectiveness of utilizing a turn team in the adult medical intensive care unit in the reduction of HAPUs. However, several EBP articles suggest that the best method to reducing HAPUs ulcer is a multidisciplinary approach.
Home Care Guidelines For Surgical Patients With Diabetes  
**PI:** Laurie Morrison, BNS, RN CAPA  
Baylor Regional Medical Center Grapevine

**PROBLEM:** This project addresses a gap in educational material available for our surgical patients with diabetes.

**BACKGROUND AND EVIDENCE:** According to the American Diabetes Association (ADA), there are 25.8 million Americans with diabetes, equaling 8.3% of the population. (ADA Statistics, 2013) Patients with diabetes represent a growing population and present unique challenges and surgical risks. Postoperative complications are more likely to occur with perioperative hyperglycemia. (Akhtar, 2010)

**LITERATURE REVIEW:** Maintain blood sugar levels between 80-180 mg/dl postoperatively. The first 48 hours after surgery are critical in preventing complications. Elevated glycemic levels are associated with increased infections, poor wound healing, increased length of stay, kidney and heart problems. Factors influencing glycemic control postoperatively include nutritional intake, medications, decreased activity, stress, infection and pain.

**PICO QUESTION:** In adult surgical patients with diabetes does providing diabetes home care education preoperatively improve glycemic control after surgery?

**METHODOLOGY:** The IOWA Model (Titler et al., 2001) was used. Implementation included:
- Design of EBP home care guidelines
- Perioperative staff and patient education
- Guidelines provided to patient
- Data collection and analysis
- Post-discharge call

**RESULTS:** During a five-week study that included 409 surgical patients, 7% of the patients reported they had diabetes. 61% of these patients recorded postoperative glycemic levels. Five patients reported levels above 180 mg/dl; none reported levels below 80 mg/dl. 80% of the patients contacted felt the home care guidelines were helpful.

**CONCLUSION:** Patient education is an integral part of nursing practice. By providing our surgical patients with diabetes evidence-based home care guidelines, we empower them with knowledge needed to achieve glycemic control and prevent complications postoperatively.
Expanding Pre-Admission Testing: Results on Day of Procedure Cancellations
PI: Holly Neatherlin, RN, BSN
The Heart Hospital Baylor Plano

**Practice Problem** – background/problem clearly identified & relevant to nursing.
A performance improvement project resulted in an additional nurse to the Pre-Admission department. Since the change in the Pre-Admission there has not been an evaluation of the benefit. This lead to an EBP project to determine what outcomes research has shown for a Pre-Admission department.

**Literature/Evidence** – synthesis of evidence to identified practice is evident, search strategy is described
A comprehensive search was conducted of online databases for articles both research and non-research. After review it was determined that a Pre-Admission department helps to decrease same day cancellations through both making appointments in advance and through nurse phone calls made prior to procedure.

**Key EBP Practices** – proposed practice changes clearly stated
As the EBP researched shows additional staff will help decrease the number of same day cancellations. This is done by increasing the number of appointments of patients seen by physician order and by increasing the number of pre-procedural phone calls.

**Implementation/Pilot Testing** - steps of process evident and clear
The numbers of patients seen by a Pre-Admission nurse and cancellations the day of procedure from the Day Surgery patient logs were tabulated. The dates of data reviewed were 6 months before and after an additional nurse was brought in to the department.

**Outcomes** – (If applicable) outcomes provided are relevant, measureable & specific
The initial review of data showed a 70 patient increase in the amounts of patients seen in the department by physician order and a 0.5% increase in the amount patients cancelled the same day of their procedure. A further evaluation of the data shows that there was a 10% increase in the amount of no show patients and an average of 2.7% decrease in the amount of cancellations for patients the day of their procedure.

“As the EBP researched shows additional staff will help decrease the number of same day cancellations.”
An Evidenced-Based Practice Project to Implement Standardized Education to Improve Obstetric Outcomes
PI: Diana Rich, BSN, RNC-OB, CEFM
Baylor University Medical Center

Problem/Introduction:
The Sentinel Event Alert, "Preventing Maternal Death," Issued by The Joint Commission in 2010, states that early recognition of obstetric hemorrhage is paramount to provide patient safety and improve maternal outcomes. Understanding that hemorrhage is the most common cause of maternal mortality worldwide leads us to the following PICO question: Does implementing standardized education influence the readiness to respond to an obstetric hemorrhage as compared to no standardized education?

Evidence/Background:
Postpartum hemorrhage is a large category with multiple facets. A comprehensive data search uncovered numerous results that ensued in a narrower search. With much discussion the team developed pre- and post-surveys, as well as an educational in-service for the staff.

Methods:
Attendance at the national conference for the Association for Women’s Health and Neonatal Nurses (AWHONN) brought to the forefront our commitment to the health of women and newborns. This conference, along with the IOWA model, helped us to identify clues and gather data within our own organization regarding postpartum hemorrhage. Pretests were compiled and knowledge deficits we identified. An educational presentation was developed that focused on risk factors, uterotonic agents, and definitions of postpartum hemorrhage.

Results:
Post surveys indicated a clearer understanding of the definitions and risk factors used to identify possible postpartum hemorrhage.

Recommendations:
Massive hemorrhage is a leading cause of maternal death. With continued efforts focusing on standardized education for nurses in Labor and Delivery, optimal safety for our patients will be provided.
14 February 2014 — Cincinnati, Ohio, USA
Visit the Honor Society of Nursing, Sigma Theta Tau International (STTI) booth at the SONK Consortium 2014 Annual Conference

27-28 February 2014 — Nashville, Tenn., USA
The Vanderbilt Institute for Global Health (VIGH) presents the Nursing Leadership in Global Health Symposium at the Renaissance Nashville Hotel. Nursing and health care leaders and practitioners from around the globe will gather at this seminal event aiming to prepare participants to improve the health and well-being of vulnerable populations through advocacy and action. International experts will lead discussions on topics ranging from policy and advocacy to leadership and management in resource-limited settings. Email: nlgh2014@vanderbilt.edu

7 March 2014 — Rochester, Minn., USA
Mayo Continuing Nursing Education presents the 2014 Nursing Research Conference – Improving Health Through Self-Management. This conference will focus on research related to individual and community healthcare self-management throughout the lifespan. Research topics may include care delivery models, prevention/wellness promotion behaviors, and acute and chronic disease management. All types of research are welcome. Email: cne@mayo.edu

13-15 March 2014 — Colorado Springs, Colo., USA
The Society of Urologic Nurses and Associates presents the Society of Urologic Nurses and Associates 2014 Annual Symposium at The Broadmoor. Email: suna@ajj.com

3-5 April 2014 — Indianapolis, Ind., USA
Join STTI and the National League for Nursing for the Nursing Education Research Conference at the Hyatt Regency Indianapolis. The event theme is "Bridging the Gap Between Education and Practice." This is a conference of the NLN/Chamberlain College of Nursing Center for the Advancement of Nursing Education and the STTI/Chamberlain College of Nursing Center for Excellence in Nursing Education. Email: events@stti.org
Attend A Conference

24-25 April 2014 — Iowa City, Iowa
The University of Iowa Hospitals and Clinics' Department of Nursing presents the 21st National Evidence-Based Practice Conference: Promoting Patient Decision Making with Evidence-Based Practice. The conference will be on 25 April 2014 with a Pre-Conference the afternoon of 24 April 2014 in Iowa City, IA. Evidence will be presented to support collaborative patient and health care team decision making addressing patient-centered outcomes. Elevating the voice of the patient to enhance effective health care will be discussed. Combination of plenary and concurrent sessions will include national and internationally known faculty. CE's available. Email: grace-rempel@uiowa.edu

24-28 July 2014 — Hong Kong
STTI's 25th International Nursing Research Congress will take place in Hong Kong, and the theme is "Engaging Colleagues: Improving Global Health Outcomes." Email: events@stti.org.

4-8 August 2014 — San Antonio, Texas, USA
The Academic Center for Evidence-Based Practice presents the 2014 Summer Institutes on Quality Improvement. Apply evidence and build science to improve care and patient outcomes. Experience a full immersion in the latest advances in health care improvement. Take advantage of back-to-back institutes to improve care and patient outcomes, from research to implementation to outcomes. Email: hallkm@uthscsa.edu

25th Annual Scientific Sessions
Nursing Research: A Bridge to the Future of Healthcare
Celebrating 25 Years of Eastern Nursing Research Society
April 17-19, 2013
Renaissance Boston Waterfront Hotel
Boston, MA

Avoid basing decisions on untested but strongly held beliefs, what you have done in the past, or on uncritical “benchmarking” of what winners do. - Pfeffer (jeffreypfeffer.com)
**Nursing Research Grant Opportunities**

**Sigma Theta Tau International/Rehabilitation Nursing Foundation Grant**

**Purpose**
To encourage research related to rehabilitation nursing.

**Research Funding**
Funds for the grant are provided by RNF and Sigma Theta Tau International.

<table>
<thead>
<tr>
<th>Grants available:</th>
<th>1 per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding:</td>
<td>$4,500 (max)</td>
</tr>
<tr>
<td>Deadline:</td>
<td>1 March 2014</td>
</tr>
<tr>
<td>Funding date:</td>
<td>January 2015</td>
</tr>
</tbody>
</table>

**For an application please contact:**
Rehabilitation Nursing Foundation
4700 West Lake Avenue
Glenview, IL 60025
Phone: 800.299.7530 or 847.375.4710
E-mail: info@rehabnurse.org
www.rehabnurse.org/research/rese

**Sigma Theta Tau International/Association of Nurses in AIDS Care Grant**

**Purpose**
The purpose of the Sigma Theta Tau International/Association of Nurses in AIDS Care Grant research grant is to encourage research career development of nurses through support of clinically oriented HIV/AIDS research and increase the number of HIV studies being done by nurses. This includes studies focused on HIV prevention, symptom management, promotion of self-care and adherence. Proposals for pilot and/or developmental research may be submitted for the grant.

**Research Funding**
Funds for this grant are provided jointly by ANAC and Sigma Theta Tau International.

<table>
<thead>
<tr>
<th>Grants available:</th>
<th>1 per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding:</td>
<td>US $2,500 (max)</td>
</tr>
<tr>
<td>Deadline:</td>
<td>1 April 2014</td>
</tr>
<tr>
<td>Funding date:</td>
<td>1 August 2014</td>
</tr>
</tbody>
</table>

**Contact Information**

[Research Services](#)
Sigma Theta Tau International
Phone: 888.634.7575 (US/Canada) or +1.317.634.8171 (International)
Fax: +1.317.634.8188
**Attend A Conference**

**Sigma Theta Tau International/ Midwest Nursing Research Society Research Grant**

**Purpose**
The purpose of the Sigma Theta Tau International/Midwest Nursing Research Society research grant is to encourage qualified nurses to contribute to the advancement of nursing through research; proposals for pilot and/or developmental research may be submitted. All research topics and designs are eligible for support. Multidisciplinary, historical, and international research is encouraged.

**Research Funding**
Funds for this grant are provided jointly by Sigma Theta Tau International and Midwest Nursing Research Society.

Grants available: 1 per year
Funding: $2,500 (max)
Deadline: 1 April 2014
Funding date: 1 August 2014

**Contact Information**
Research Services
Sigma Theta Tau International
Phone: 888.634.7575 (US/Canada) or +1.317.634.8171 (international)
Fax: +1.317.634.8188

**Sigma Theta Tau International/ Southern Nursing Research Society Grant**

**Purpose**
The purpose of the Sigma Theta Tau International/Southern Nursing Research Society collaborative grant is to encourage qualified nurses to contribute to the advancement of nursing through research. Proposals for pilot and/or development research may be submitted for this grant.

**Research Funding**
Funds for this grant are provided by Sigma Theta Tau International and the Southern Nursing Research Society.

Grants available: 1 per year
Funding: up to US $5000
Deadline: 1 April 2014
Funding date: 1 August 2014

**Contact Information**
Research Services
Sigma Theta Tau International
Phone: 888.634.7575 (US/Canada) or +1.317.634.8171 (International)
Fax: +1.317.634.8188
BHCS NRC Contacts at Your Facility

Baylor All Saints Medical Center at Fort Worth and Andrew’s Women’s Hospital
Suzy Lockwood, PhD, RN, MSN, OCN, FAAN
Suzanne.Lockwood@Baylorhealth.edu
(817)-22-2167

Baylor Medical Center at Carrollton
Theresa Kaplan, MSN, RN
Theresa.Kaplan@Baylorhealth.edu
(972)-394-2318

Baylor Medical Center at Garland
Ruth Robert, RN, MSN, FNPC, CMSRN, PCCN
Ruth.Robert@Baylorhealth.edu
(972)-487-5329

Baylor Regional Medical Center at Grapevine
Marygrace Leveille, PhD, RN, ACNP-BC
Marygrace.Leveille@Baylorhealth.edu
(214)-476-4597

Baylor Heart and Vascular Hospital
Mary Muldoon RN-BC, CEPS
Mary.Muldoon@Baylorhealth.edu
(214)-820-0140

The Heart Hospital Baylor Plano
Alaina Tellson, BSN, RN, CAPA, NE-BC
Alaina.Cyr@Baylorhealth.edu
(469)-814-4627

Baylor Medical Center at Irving
Penny Huddleston MSN, RN, CCRN
Penny.Hu@Baylorhealth.edu
(972)-579-8172

Baylor Medical Center at McKinney
Linda Tjong, RN, MSN, DBA
Linda.Tjong@Baylorhealth.edu
(214)-265-3636

Our Children’s Hospital and Baylor Specialty Hospital
Susan Houston, PhD, RN, FAAN, NEA-BC
Susan.Houston@Baylorhealth.edu
(912)272-9012

Baylor Regional Medical Center at Plano
Eileen Flanagan, RN-BC, MSN
EileenF@Baylorhealth..edu
(469)-814-6880

Baylor University Medical Center
Marygrace Leveille, PhD, RN, ACNP-BC
Marygrace.Leveille@Baylorhealth.edu
(214)-476-4597

Baylor Medical Center at Waxahachie
Suzanne Crumpton RN
Suzanne.Crumpton@Baylorhealth.edu
(972)-923-5710

Baylor Institute for Rehabilitation
Beth Hudson MS, RN, CRRN
bhudson@bir-rehab.com
(214)-820-9977
Contact the BHCS
Nursing Research
Department

Susan Houston PhD, RN, FAAN, NEA-BC
Director of Baylor Health Care System
Nursing Research
Susan.Houston@Baylorhealth.edu
912-272-9012

Marygrace Leveille PhD, RN, ACNP-BC
Nurse Scientist at Baylor University Medical Center
Baylor Regional Medical Center at Grapevine
Marygrace.Leveille@Baylorhealth.edu
214-478-4597
214-820-3357

Morgan Grant BS
Outcomes Data Analyst
Nursing Research
Department
Morgan.Grant@Baylorhealthcare.edu
214-820-6789

Rosie Soto
Administrative Assistant
Nursing Research/Emergency Services
Rosalinda.Soto@Baylorhealth.edu
214-820-3847