

BRYAN NOTES



BRYAN NOTES

President - Carmen Sandell '62
Vice-President - Cheryl Miller '65
Secretary - Verla Youngquist '68
Treasurer - Kristine Houser '65

PRESIDENT'S NOTES

It is that time again, and please forgive us once again for being so close to July in getting this out to you all. It seems like I'm on a Merry-go-round and I'm afraid of what's going to happen if and when it stops.

As we get down to deadline, I hope I have been able to shake the branches enough to come up with 2 candidates for Alumni President - seems like not many are interested in running for office --- and, yes I do know that you are busy and involved, but your Alumni Association does have need of your time (maybe just once in your life). So, think it over and get involved in this changing world.

I've tried to think of some news to give you, and I have asked several department heads to write articles for our newsletter - hope you enjoy them!

I'm sure you will also note that we are planning Bryan Alumni First Homecoming Day. Come and help us make this a success and maybe it'll become an annual event. Please also remember that nothing is cheap anymore - especially if you want it nice - so that's why the prices are a little ?? above normal. We can't deplete the funds completely and end up broke!

We have also tried a first as I'm sure you will notice...Our school pin in color on the front page. As I write this, I have no idea how its going to look - guess I'm going on faith and trust in the printers.

Enough chit-chat. I want to thank my officers for the help and support the last two years and wish the new president Good Luck!

Carmen Sandell,
President

LOAN FUND NEWS

As of April 1977, the Student Loan Fund was \$11,903.09 - This is 12.5% of the total amount of the Hospital's Loan Fund of \$95,224.71.

Kristine Houser

TREASURER'S REPORT

Checking Account	\$570.67
Savings	\$663.60
Ruth Kimmel	\$776.79

Two graduates requested and received loans from the Ruth Kimmel Fund to further their education.

Kristine Houser

A HAPPENING!!

Bryan Memorial School of Nursing's 1st Homecoming Day! Come One - Come All - We need your help to make it a success:

AUGUST 6th, 1977
at the School of Nursing
5000 Sumner Street
10:30 a.m. to 4:30 p.m.

A BRUNCH Served from 11 to 1

HOSPITAL TOURS will be every half hour from 1 to 3:30

Come visit friends, make new ones, look at scrap books, year books, class pictures, slides on Bryan Memorial Hospital's history.

Please bring any of your own "Memories" to share with us all. Let's make it a day to remember and then attend the Banquet at the Legion Club, 5730 "O" Street.

SOCIAL HOUR 6:30 P.M.

DINNER at 7:30 P.M.

Make your reservations for the Brunch & Banquet now!!

RESERVATIONS

Bryan's Homecoming

Mail to: Verla Youngquist, Secretary BEFORE AUGUST 2nd
Bryan Memorial Hospital School of Nursing Alumni Association
5000 Sumner Street - Box 120
Lincoln, Nebraska 68506

NAME _____ Graduation Year _____

MAIDEN NAME _____ NAME OF SPOUSE _____

ADDRESS _____

Attending Homecoming Brunch Yes ___ No ___ Guest ___ Fee of 2.00 each enclosed ___

Banquet fee of \$6.50 each enclosed _____

Dues of \$5.00 enclosed ___ or, for non-members service charge of \$5.00 _____

Interested in a Hospital tour? 1:00 ___ 1:30 ___ 2:00 ___ 2:30 ___ 3:00 ___ 3:30 ___

BALLOT

Circle one for each office.

PRESIDENT

Konnie Brady - '76 Health Services Director, Nebraska Wesleyan University

Bob Hahn - '75 Works as Staff Nurse on 5th Floor (Surgical). Just finished working on his degree in Health Sciences for Nurses at Nebraska Wesleyan University.

TREASURER

Colleen Chapp Marvel - '74 Former Staff Nurse on 5th, Now in MICU at Bryan.

Susan Schwindt - '73 Works in ICU & CCU at Bryan.

Hammersky

PROGRESS AND PROMISES OF TECHNOLOGY IN THE RADIOLOGY DEPARTMENT

for: Bryan Nursing Alumni Newsletter - June 1977

by: Lennis Benson, Administrative Director of Radiology

Growth in the technology of radiology has been exponential in recent years, producing a proliferation of devices and sophisticated examinations. The past seven years have seen the addition of nuclear medicine, special vascular procedures, complex movement tomography, ultrasound, xeroradiography, and mobile electronic radiography (C-arm) at Bryan. Coming soon will be computerized x-rays. This growth has added a new dimension to hospital care.

Nuclear medicine (organ imaging or isotope scanning) began in 1970 with one Gamma camera and 633 procedures the first year. A second Gamma camera was added in October 1975. A total of 1,886 procedures were completed last year. The following types of scans are performed, in order of their popularity in medical diagnosis at Bryan: brain, liver, bone, lung, thyroid, gallium, pancreas, renal, Meckels (stomach), and heart.

The latest two techniques were added in February 1977--ventilation lung and gallium scans. Ventilation lung scans are used as an adjunct to perfusion lung scans in detecting lung pathology. They involve the administration of radioactive Xenon gas through an automated ventilation module with resultant display of lung anatomy and physiology on photographic film via Gamma camera. Gallium scans are of particular importance to oncologists in detecting tumors. Gallium is also useful locating infections. Radioactive Gallium 67 is injected and multiple follow-up scans of various body areas (abdominal and lymphatic) at intervals up to 72 hours post-injection.

Diagnostic vascular procedures such as arch studies, femoral, cerebral, renal arteriograms, and venograms have been performed in the department for many years. However, in 1974 a room dedicated to performing vascular type procedures only was opened. Equipment which permits two different planes of the body to be x-rayed simultaneously and in rapid succession (4-6 per second) to demonstrate the flow of contrast material through arteries is available. Heart catheterizations and coronary arteriograms which are similar continue to be performed in Cardiopulmonary laboratory. The nursing and scrub staff serves both locations.

Body section x-rays sometimes called tomograms, laminograms or planigrams have been used for years to demonstrate anatomic structures which are obscured by overlying and underlying structures on conventional x-rays. Some examples include the ducts of the gall bladder, small bones of the inner ear, facial bones, suspected tumors and lesions in the chest, and various other body parts. Equipment that coordinates the movement of the x-ray tube and film during exposure enables cross-section images of specific body parts free and clear of overlying and underlying structures. A device called the Stratomatic (Polytome by some) purchased in 1974 permits looks at extremely small structures, up to millimeter intervals if desired. Previous techniques permitted only centimeter peeks.

Ultrasound, available since World War I but only recently finding application in medicine is making dramatic strides in the diagnosis of many internal organs. Sound waves, unlike x-rays, are utilized and work on the principle of sonar used in ships and boats to detect submarines, fish and underwater obstructions. Echocardiography is a dynamic non-invasive application for examining the opening and closing of heart chambers and valves. Additions to the basic echocardiographic unit purchased in 1971 were made permitting ultrasound imaging of other body parts in 1975. Inaudible sound waves are transmitted and recorded photographically on film as returning echoes. Abdominal and particularly pelvic organs, difficult to see by conventional x-ray and nuclear medicine techniques, are demonstrated. Obstetricians use it extensively in evaluating fetal development, general surgeons for non-functioning gall bladders, ophthalmologists for evaluating the eye, urologists for bladder pathology, internists for pancreas and other organs to name a few. It has some limitations in organs containing air such as the lungs and bowel and bone since sound does not transmit through either well. Over 1,000 ultrasound examinations were completed in 1976.

Xeroradiography, added in August 1975, utilizes ordinary diagnostic x-ray and a sophisticated recording medium in place of x-ray film to provide outstanding detail particularly in soft tissues. This technique is used predominately in examination of the breast. It is also useful for demonstration of foreign bodies such as fish bones in the neck which are often not visualized on conventional x-rays. Xerox Corporation developed this process using the technology of the Xerox office copier to process x-ray images on paper.

A mobile C-arm fluoroscope was recently acquired (May 1977) for use in surgery for hip pinning, pacemaker insertions, colonoscopies etc., where it is necessary to have instant x-ray images. The image is displayed electronically via a TV screen with replay capabilities. In addition to speed, a considerable reduction in x-ray exposure can be made over conventional methods.

Another technique which is a take-off from body section radiography is revolutionizing medical diagnosis. It is called computerized axial tomography (CAT for short). CAT scanning involves the use of a computer in conjunction with certain conventional components to generate a three-dimensional image of the differences in body density or regional body function. CAT got its start in 1971 in London. The first units were only capable of doing head scans. In November 1975 total body scanners were released.

CAT scanning constitutes a significant advance over previous diagnostic techniques that are limited to a two-dimensional x-ray film presentation of three-dimensional differences in body density. For example the traditional x-ray is usually limited to the demonstration of the differences of density or structure in bone encompassing the brain; while CAT scanning allows the radiologist to observe not only the bony structures, but subtle details of internal brain structure such as ventricles, white and grey matter. It has the advantage of being non-invasive consequently not subjecting the patient to the hazard or discomfort of invasive techniques.

Bryan has applied for and received approval from the Area Health Planning Agency to spend approximately \$500,000 to acquire a whole body CAT. We expect to have a unit operating by mid 1978. By waiting, we are hopeful that the technology will have a chance to improve and stabilize to the point where we can provide Bryan patients the best possible diagnostic service. Bryan's patients requiring such scans now are being sent to Omaha or Lincoln General.

The age of sophisticated electronics is here. Bryan has come a long way in the last 51 years--from one x-ray room to 10 diagnostic imaging rooms. We, as most hospitals, are not trying to practice "Star Trek" medicine but merely trying to keep up with demands for improved diagnostic methods.

What this means to Bryan is that gradually, strange looking boxes which resemble TV sets with a typewriter attached will begin appearing in different places in the hospital. Admissions will be the first department with machines, better known as terminals. They are scheduled to begin using them for some of their work this month. (June)

When this phase of the system is complete, information on patients when the time of admission will be instantly available to anyone with a terminal who needs to know.

Not only will it be available visually, on the screen, but hard copies (known as paper to non-computer users) will be produced from a station to the terminal called a printer. Hard copies will be needed for admission forms as well as many forms required by federal and state law.

As an example of how the system will work, when the IBM operators and the information desk get their terminals, they will have access to all the records information they need to know about a patient, such as room number, and other census information, whether or not the patient may have been put into the hospital just one time. No more typewritten notes or files. Just a touch of the finger and the information will appear on the screen.

Eventually terminals will be available in almost all departments and in each major station. The shared computer system (with Clarkson Hospital in Omaha) will be slowly phased out so that Bryan's computer will handle all of Bryan's information needs.

It takes a certain, specially trained individual to set up a new hospital computer system. That's why consultants are needed. The Terano firm, computer expert who is overseeing the work, Terano has been involved with the system since it was first recommended to the board of trustees. He set up the detailed systems plan which was submitted to the State Department of Health and granted approval for the project. He will remain until the project is completed sometime in 1978.

John O'Connor, Director of Computer Services, has the responsibility of managing both the ongoing data processing systems (the Clarkson system) and the development of Bryan's new system. "The computer is just a dumb machine," according to O'Connor, "that can perform only as well as it is programmed."

A computer is nothing to be afraid of. It won't take away your job--and it won't produce bedlam in the billing department...admitting...medical records... or anywhere else.

What it will do is make each person who works at Bryan Hospital more efficient. It is a tool to be used by certain employees which will increase the overall productivity of all. Just as the typewriter makes writing letters much faster than doing them in long hand, the computer will have information available at the touch of a finger. Information that perhaps once took three phone calls and a memo to communicate.

Bryan's computer is a PDP 11/70. Not a household word to most people, so don't feel badly if you've never heard of it. It's manufactured by Digital Equipment Corporation, the largest manufacturer in the world, of computers of this type. To throw a little computer jargon at you, the computer can store 176 million characters (individual letters or numbers)-- and that is a lot of words and statistics. In case anyone wants to know, it uses a magnetic disk system to store all those characters.

What this means to Bryan is that, gradually, strange looking boxes which resemble TV sets with a typewriter attached will begin appearing in different places in the hospital. Admissions will be the first department with the machines, better known as terminals. They are scheduled to begin using them for some of their work this month. (June)

When this phase of the system is complete, information on patients taken at the time of admission will be instantly available to anyone with a terminal who needs to know.

Not only will it be available visually, on the screen, but hard copies (better known as paper to non-computer types) will be produced from a sister to the terminal called a printer. Hard copies will be needed for admission forms as well as the many forms required by federal and state law.

As an example of how the system will work, when the PBX operators and the information desk get their terminals, they will have access to all the accurate information they need to know about a patient, such as room number, and other census information, whether or not the patient may have been put into the computer just one time. No more typewritten notes or files. Just a touch of the finger and the information will appear on the screen.

Eventually terminals will be available in almost all departments and in each nursing station. The shared computer system (with Clarkson Hospital in Omaha) will be slowly phased out so that Bryan's computer will handle all of Bryan's information needs.

It takes a certain, specially trained individual to set up a new hospital computer system. That's why consultants are needed. Jim Terrano is a computer expert who is overseeing the design. Terrano has been involved with the Bryan computer since it was first recommended to the Board of Trustees. He drew up the detailed systems plan which was submitted to the State Department of Health who granted approval for the project. He will remain until the project is completed, sometime in 1978.

John O'Connor, Director of Computer Services, has the responsibility of managing both the ongoing data processing systems (the Clarkson system) and the development of Bryan's new system. "The computer is just a dumb machine," according to O'Connor "that can perform only as well as it is programmed."

Linda Waller serves as nurse liason to both the consultants and O'Connor. She has been involved in preparing the documentation of current, manual procedures which will be converted to new, automated procedures for use by the computer. She is also preparing handbooks to help in training hospital personnel to use the computer.

Bryan is a unique institution with methods of doing things in ways that suit its own needs best. Computer programs must be tailored to these unique needs. Much groundwork has been done by supervisors with the computer people--supervisors who know their own departments best so they communicate how they do things to the computer people so it can be programmed into the system. The computer is a tool of business and must serve the business needs not have the business serve the computer.

Phyllis Titterington, Admitting Supervisor, has been heavily involved in the first phase of the project. This is the admissions, discharges, and transfer system, including bed control and outpatient and Emergency Room registration. She knows first hand how complex setting up a computer system can be. "I know it will be great once it's underway, but getting there is something else."

The computer is here to stay. It will help employees do a better job in serving that all important person at Bryan--the patient.

John O'Connor

SOME "DID YOU KNOWS?"

1. No honor classes sent us any information so you only get that of the Class of 1962 of which the President is a member, having graduated in 1962.
2. Please send us addresses of your classmates if you know them - see the enclosed list of unknowns or "Missing People".
3. A note from Phoebe Alice Koras Clare, Mid-year Class of 1948, who now lives in Cut Bank, Montana, tells us she is retired from nursing but retains an active interest. Phoebe and husband, Marvin, own a Coast to Coast Store and have 7 children.
4. Did you read the Bryan Commoner of February, 1977?

Carmen J. Sandell lives in Lincoln, Nebraska. She is Head Nurse on 6th Floor at Bryan Memorial Hospital; a medical unit with a two bed Oncology Unit with the word to be where aggressive Chemotherapy is to be given.

Carol Cooper Sherman lives on a farm north of Lincoln (Ceresco). Husband, Gary, works at U of Nebraska and farms part time. They have one son. Carol is a Clinical Instructor in the Southeast Community College School of Practical Nursing.

Lois Roker Sockett lives in Lincoln, Nebraska. Husband, Jim, works for Bankers Life. They have two girls. Lois is the office manager for Internal Medicine Group which consists of Drs. Weaver, Cooley, Stitcher, Dyke, Wilson and Caudill.

Sharon Blankenfeld Sievers lives in Omaha, Nebraska. Husband, Don, works at Omaha National Bank as a loan officer. They have 3 girls. Sharon is a homemaker, and is retired from active nursing duty.

Marlene Lenner LaSeur lives in Beatrice, Nebraska and works in one of the hospitals there. She has, I believe, 3 children.

Kathy Cederberg Larson lives in Kearney, Nebraska. Husband, Dick, is a Detective on the Kearney Police Force. Has 2 boys. Kathy is the school nurse at the Youth Development Center - Kearney.

Mary Lou Cradick Yeager lives in Federal Way, Washington. Husband, Kenneth is an Architect. Has 3 children, works part time in a Tacoma, Washington hospital.

Cathy Zier Register lives in Modesto, California. Husband, Mac, is a minister. Has 4 children, works part time, at Doctor's Hospital in the Operating Room

Carol Hiebenthal Vigil lives in Espanola, New Mexico. Husband, Juan. Has 2 children? Works as a homemaker if I remember correctly.

Deanna Craig Christensen lives in Coral Springs, Florida (near Fort Lauderdale). Husband, Dennis, is a school teacher. Has 2 children. Di just finished her degree in Behavior Sciences and Psychology and graduated with honors. Works at Doctor's office

Mavis Carlson Hill lives in Sioux City Iowa. Husband Marlin is a school teacher. Has 3 children. Is a homemaker - retired from nursing Mavis?

Marilyn Powers Mertens lives in Cheyenne, Wyoming. Husband, Roger. Has 3 children. Works at home - think she's retired from active nursing.

Sonnie Tillotson Kyes lives in Boulder Colorado. Husband, Ken, works for IBM. Has 3 children. Sonnie works in one of the hospitals in Boulder as an OR Supervisor.

Dixie Nissen Erisman lives in Boulder, Colorado. Husband, Bob. Has 1 child. Dixie works at one of the hospitals in the City.

Ruth Christoffersen Bell lives in Powell, Wyoming. Husband, Jim, is a teacher. They have 3 children. I believe Chris is retired from active duty and is a homemaker.

Ardie Galbreath Suttuduth lives in Stockholm, New Jersey (45 miles West of New York). Husband, Rich, works for GAF Corporation in Research Management. They have 2 children. Ardie is on the school faculty at William Paterson College in Wayne, N.J. She teaches 4th year Nursing Students in the hospital setting.

Barbara Holz Siems lives in Dewitt, Nebraska. Husband, Wally, is a farmer. They have, if I remember right, 2 children. Barb is a homemaker - retired from active duty (if my memory serves me right.)

To whom it may concern - I have done my classmates whereabouts from memory and Christmas letters so, please forgive me if I'm in error.

C. Sandell

MISSING PERSONS LIST

Class of '31

Ethyl Reibley
 Arleen Petersen (Geiger)
 Esther Smith (Travis)
 Portia Sharpless (Fulton)
 Helen Grapes (Strown)
 Luella Anderson (Wieland)
 Irma McKenzie (Martin)
 Leta Robinson

Class of '32

Alta Harn (Boughn)
 Grace Storing (Traux)
 Ruth Baker

Class of '37

Vivian Hoyle

Class of '41

Ruth Hansen (Mitchell)

Class of '42

Wilma Pitts (Goering)
 Alice James (Cowell)

Class of '47

Jo Ann Weekley (McKnight)

Class of '52

Janet Roubicek (Smith)
 Donna Bogerding (Mitchell)
 Ada Brader (Coffey) (Williams)

Class of '56

Geraldine Peterson (Ek)
 Velda Etmund (Eden)

Class of '57

Mary Nicodemus (Barnes)
 Hannah Moorehead (Braun)
 Mary Ann Schweers (Schwartz)
 Connie Cross (Crews)
 Carolyn Bartlett (Rohrig)
 Donna Ballantine Hankins
 Patricia Webb (Adams)

Class of '61

Marcia Newton (Buske)
 Janice Frost (Cross)
 Barbara Christie (Luethje)

Class of '66

Cheryl Anderson (Myers)
 Janyce Aura (King)
 Edith Merryman (Marshall)
 Anita Whitson
 Linda Purcell (Cook)
 Starlynn Stuhr (Wiese)

Class of '66 continued

~~Mary Ann Bowman (Meisner)~~
 Sharon Abrahams (Baliman)
 Constance Van Metre (Anderson)
 Judith Basler (Frahm)
 Janis Case
 Janet Salinas (Clark)
 Jane Ebmeier (Stolle)
 Teresa Gray (Rennick)
 Victoria Hepperlan (Thomas)
 Cheryl Hildenbrandt (Swanson)
 Evalene Kellog (Hock)
 Loretta Lucas
 DeAnne Martin (Frazier)
 Bethen Melcher (Peterson)
 Linda Bush (Lee)

Class of '67

Connie McMichael (Shruanek)
 Judy Bummers (Roy)
 Pat (Schmidt)
 Jo Vasicek (Smith)
 Jean Gerhardt Jensen
 William Herman
 Verla Davenport (Harding)
 Tatiana Bode
 Lois Meeske (Livingston)
 Barb Miller (Elmquist)
 Sheryl Mehring (Howell)
 Judy Merkel (Snider)
 Sandra Leininger (Forbes)
 Janice Lane (Deinkel)
 Shirley Kiatla (Stout)
 Jane Kivett (Tiedgen)

Class of '71

Janey Waltz (Spilker)
 Leslie Martin (Stoke)
 Patricia Lorenz (Hoover)
 Sue Lang (Schroeder)
 Aloha Schmidt (Stara)
 Vicki Harvey (Fusselman)
 Carolyn Bullis (Hensley)
 Susan Hart
 Kathleen Hoppes (Carlson)
 Brenda Uecker
 Patricia Pohlman (Grummert)
 April Satchell
 Rhoda Jensen (Scott)
 Linda Jones
 Kathryn Kliever
 Barbara Magnuson (Ivy)
 Sandra Loshkojian (Whittman)
 Brenda Morock
 Dorothy Arent (Pojar)
 Suzanne Erickson

Class of '72

Diane Hruza (Post)
 Donna Jean Carter
 (Smith)
 Nancy Masek (Sears)
 Shirley Weller
 Maurine Ritter
 (Russell)

Class of '76

Raechel S. Buller