

NURSING

IN ACTION

Careers in health care

Why nursing is the smart choice

The nursing experience of a lifetime

Caring for patients in Thailand

Sex Ed 2.0

These public health MSN students used social media to teach teens

Having it all

The secret to balancing family and school

WHAT MAKES YOU HAPPY?

For Sam Cerniglia, it was finding a profession with purpose after his stint on 'The Voice'

A meaningful life

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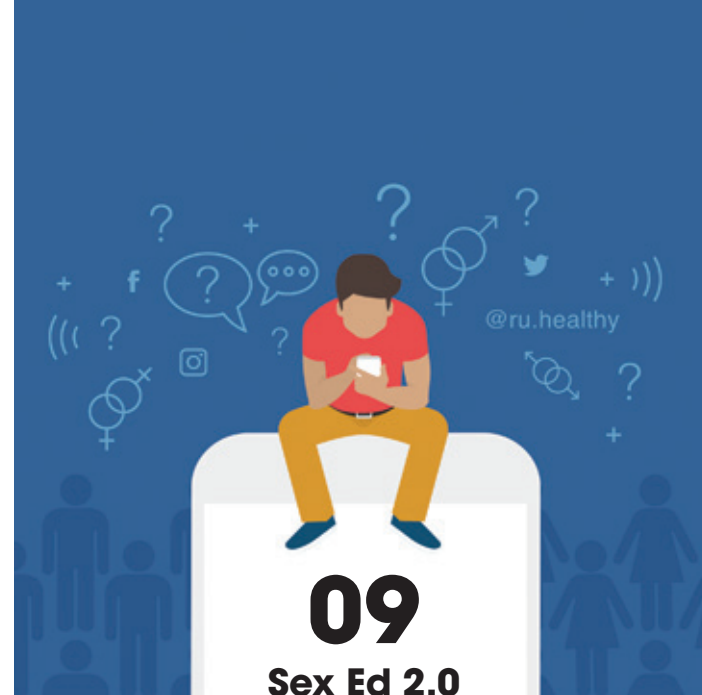
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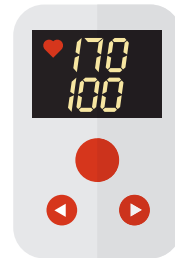


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The Generalist Entry Master's (GEM) / Clinical Nurse Leader (CNL) Program

Ranked #1 by U.S. News & World Report's "America's Best Graduate Schools," our Master of Science in Nursing/Clinical Nurse Leader program is designed for students who already have a bachelor's degree in another field and want to pursue a career in nursing. Our national reputation for clinical excellence helps make our graduates highly sought by top health care employers around the country.

In this magazine you'll get to know our students and graduates of the GEM program – why they chose nursing, what types of experiences they have while in the program and where they are now.



Change Agents

These professionals swapped business suits for nursing scrubs

For some, the business world can feel unfulfilling. These two nursing students found renewal in pursuit of their passion for helping people.

by Korey Huyler



Intense. Fast-paced. Exciting.

Three phrases that describe both nursing school and working as a lawyer. And Generalist Entry Master's (GEM) student Sandy Muhlenbeck knows both jobs well.

Before entering nursing school in fall 2016, Sandy Muhlenbeck worked for nearly 20 years as an attorney. She started as a commercial litigator, then changed her focus to counseling clients on distribution and regulatory issues.

Yes, quite different from nursing.

Muhlenbeck loved working as an attorney, but her perspective changed after her daughter was diagnosed with acute lymphoblastic leukemia in 2009 and was successfully treated at the former Children's Memorial Hospital (now Ann & Robert H. Lurie Children's Hospital of Chicago).

"I was so impressed by the care she and our entire family received," says Muhlenbeck. "Going through a family medical crisis changed my perspective on life a bit, and I realized that while I wanted to continue working, I was less interested in the law and more drawn to nursing. I just couldn't see myself doing what I was doing for 20 more years."

Career redirection

She quit her job and then spent two years taking all the prerequisite classes at a local community college. "I didn't rush," she explains. "Since I didn't have a science background, I felt like taking the extra time would really help."

Muhlenbeck started at Rush in fall 2016 and relishes the experience. "It's kind of fun to be in school when my kids are in school too," says Muhlenbeck, whose children are now 12 and 15. "I have learned so much; the two years [of the GEM program] are action-packed."

So, is she happy she made the career switch?

"I was ready to make the jump," she says. "At the law firm, I was working with big clients, and I was always available to them, but



the work I did felt intangible. For me, nursing flips that dynamic. You have a job and you work those hours, but during that time you're helping people in an appreciable way."

Finding your passion

One member of the Rush faculty, Monique Reed, PhD, MS, RN, also had a different career before she became a nurse. Reed, an assistant professor and program director, has an economics degree from DePaul. After college, she worked in the administration and finance department of a major cable network.

"When the company relocated, I was left to decide on a new career path," she says. "In the early 2000s the economy was not stable, and I didn't feel a passion for the jobs that were available at the time. When I looked at the stable jobs in the area, I saw nursing."

Reed's mother was a nurse midwife at Cook County Hospital (now John H. Stroger Jr. Hospital of Cook County) who emigrated from Jamaica to England then to the U.S. to pursue nursing, so Reed was familiar with the job opportunities of the nursing industry.

"In my first few weeks of class in nursing school in the fall of 2001, I began to see that nursing was indeed my passion, a profession focused on caring for individuals," she says. "Then came the events of Sept. 11, 2001. I recall watching the first responders, news reporters and victims helping each other through the tragedy. The image of people coming together as a community really stuck with me through school."

Reed's economics major also helped prepare her for her current role. As a public health nurse, she works daily with people who must choose between spending limited money and time on preventive health care or on the essentials of daily living such as food, transportation and housing.



#BlackGirlsMove

Determined women help solve the obesity crisis with action

Recent movements like #MeToo and #BlackLivesMatter highlight the gender and racial inequities at play every day in the lives of millions of women and African-Americans. Calling on a rich history and strength that has helped them through a legacy of challenges, the "Black Girls Move" campaign, started by Dr. Monique Reed, acknowledges the power of African-American mothers and daughters to create a movement for themselves to fight obesity and live healthier lives.

Originally funded as a three-year project through BMO Harris Health Disparities Fellowship, Rush University College of Nursing, and Rush University Schwappe Armour, the intervention has been submitted for additional NIH funding.

Diseases like heart disease and diabetes disproportionately affect African-American women. The "Black Girls Move" 12-week program teaches sustainable lifestyle changes for the entire family, including goal setting, healthy eating, motivational techniques and fitness.

For more information on "Black Girls Move," visit blackgirlsmove.org.

After switching careers and continuing her education, Dr. Monique Reed is now a nurse researcher and program director at Rush.

"For some, this impossible decision can lead to early death from preventable chronic illnesses; the lack of money can often feel unfair and even criminal to a mother negotiating buying groceries for dinner or medicine to manage her diabetes," she explains. "Those with the lowest incomes have disproportionately poor health outcomes when compared to wealthy communities. Making decisions with limited financial resources happens in both economics and health care, but instead of focusing on financial institutions and markets in economics, my concern is now on individual and population health."

They never looked back

Reed, too, is incredibly happy with her decision to become a nurse.

"I've never for a minute questioned my decision to transition into nursing," she says. "It's the only career that allows me to create a work/life balance of being present as a wife and mother while merging my passion for improving population health and training future health-care professionals."

Reed regularly advises people looking to change careers.

"I speak to people from all walks of life looking to change their careers," she says. "My advice for all of them — especially in the current climate in which we have more information than ever before about stigma of race, religion, politics, income, sexual orientation and gender — is to get involved. There is a place for you in nursing." 🗨️

Top of the Class

Why smart students are choosing nursing

More and more students are choosing nursing and then discovering it's exactly what they are supposed to be doing.

by Beth Janes

As a bright student set on a profession in health care, Emily Salans considered her options carefully. Friends and family weren't shy with opinions. "They would tell me, 'Well, you're smart enough to be a doctor,'" says Salans.

But she corrected them and said she was also smart enough to become a nurse. And that's just what she did, though her path included important twists, turns and stops along the way.

Salans is now a registered nurse II in the emergency department (ED) of Rush Oak Park Hospital and an instructor at Rush University College of Nursing.

The journey to nursing

Inspired by a high school science teacher, Salans double-majored in chemistry and psychology at the University of Southern California figuring she'd become an educator. But after graduating magna cum laude, she was chosen for a unique opportunity in pharmaceutical sales as part of a pilot program for new grads.

"That's where I first became interested in health care," she says. Sales, though? Not so much. "I really believed in the (medications) and in changing patients' lives, but that wasn't the job."

Salans headed back to school, this time for a PhD in organic chemistry at the University of Michigan. She enjoyed the subject and teaching but decided to leave after earning her master's. The PhD program just didn't feel like the right step into health care either.

She test drove a variety of other jobs, including one in admissions at the University of Chicago Booth School of Business. "But there was this calling to health care that never

went away," Salans says. She volunteered at Ann & Robert H. Lurie Children's Hospital of Chicago — but still, she felt something was missing. "I wanted science back in my life." That's when she realized nursing might be the right career path.

An elevation of status for nurses

While becoming a physician might have made sense for Salans, she felt nursing was a better fit.

"Med school gets touted as the place where you use more science, but we (nursing students) take the same classes and need that science knowledge, too," she says. "If I'm ever sick, I want my nurses to be just as smart as my physicians."

And more and more students like Emily are choosing nursing as their primary career path, says Lisa Rosenberg, PhD, RN, associate dean of students and an associate professor at Rush. No longer are nurses seen simply as physician wannabes or those who couldn't hack medical school.

"Nursing has undergone a status change," Rosenberg says. "The profession appeals to many smart young people today because they can progress academically into advanced practice and leadership positions." They can also take on faculty roles, which can include teaching, writing, research and more. "Prospective students see a variety of opportunities ahead of them and with that comes role flexibility. Salaries are also increasing for nurses working in a hospital and out in the community," she adds.



Emily Salans teaches nursing students during their clinical rotation in the simulation center.

“

If I'm ever sick, I want my nurses to be just as smart as my physicians.



The Art & Science of Nursing

While hospital nurses are the most recognizable, the profession of nursing is appealing because of the variety of career options...

Nurse Practitioner	Consultant
Critical Care Nurse	Author
Forensics Expert	Professor
Entrepreneur	Nurse Midwife
Activist/Politician	Researcher
Psychotherapist	Travel Nurse



I'm the first to lay eyes on a patient and decide what they need.

When interviewing students for the Rush Generalist Entry Master's (GEM) program, Rosenberg says the reason she hears most often why students choose nursing is they want to spend more time with patients. This is a perfect fit for nursing's holistic approach to caring — understanding all the contexts of a person's life that affect their physical and mental well-being is critical. "Nurses don't only focus on what's wrong medically; they need to understand what's going on culturally, socially, environmentally ... to get the best outcomes. That's the complexity; that's the hard part and that is what often intrigues smart students," she says.

The perfect blend of art, science and education

Indeed, Salans enjoys using her academic science background and the analytical part of her brain while caring for patients holistically (physically, emotionally, mentally and spiritually) — spending time with them and educating them.

"I'm the first to lay eyes on a patient and decide what they need," she says. "So I use those critical thinking skills and put my knowledge and skills into practice." She then works with patients on how to manage their chronic illnesses and what to do to avoid ED visits in the future, for example.

And for Salans, not only does she enjoy the patient care aspect, she's immersed herself in other opportunities available to nurses. She serves on various committees and, along with working full-time in the ED, Salans teaches part-time — something she pursued in school despite the rigors of the GEM program.

After noticing students struggling with pathophysiology and medical/surgical skills, she and a classmate teamed up to offer peer review sessions. That led to a position assisting and then as an instructor at the College of Nursing, where Salans teaches a clinical rotation simulation that gives students space and time to practice their skills risk-free.

"On the floor, there isn't always time to slow down and ask questions," she says. "In the simulation center, students can make mistakes and take charge, make decisions and see how their scenarios play out." In addition, she teaches sessions focusing on interprofessional education. In collaboration with medical faculty, Salans runs simulation sessions where nursing and medical students collaborate on multiple cases to learn how the professions can best communicate and work as a team.

Nurses watch and listen

Responsibility is another reason nursing appeals to high achievers like Salans.

"The best health care is a team sport," Rosenberg says. "Physicians, nurses, and the entire health care team must work together for optimal patient outcomes, but nurses are with the patient 24/7. When the status of a patient changes, it is often the nurse who alerts and coordinates the team into a different plan of action."

Salans recently made a change herself. While in her immersion at Rush Oak Park's ED, she noticed that the policy for treatment of sexual assault survivors didn't reflect the current best practice standards. "I have always been interested in sexual assault prevention and survivor treatment," she says. "My original plan was to do education (around the policy)." Instead, she took the initiative to create a new comprehensive sexual assault plan for the ED utilizing state legal requirements and national best-practice standards.

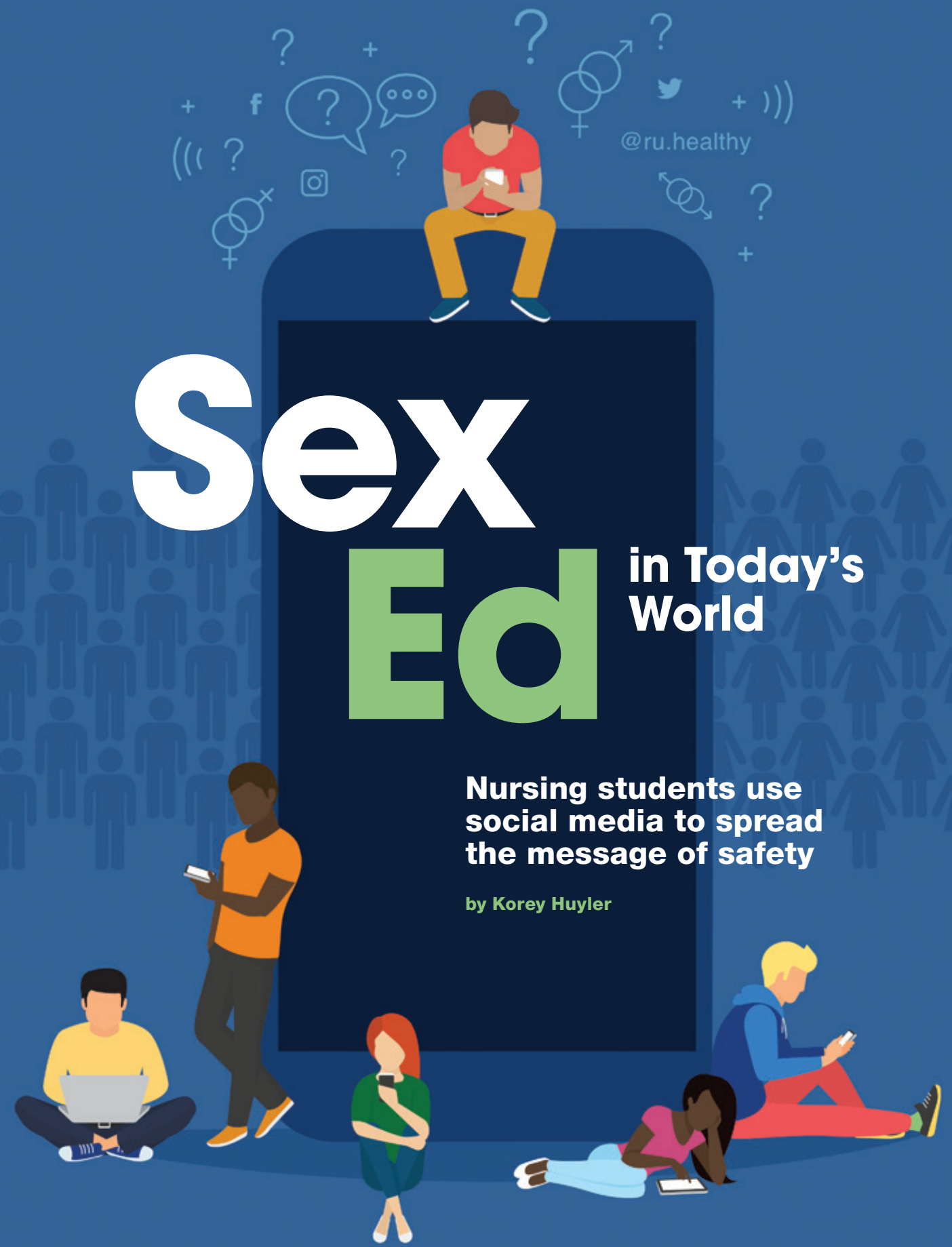
Rosenberg says the best students and nurses are those like Salans — academically capable and genuinely wanting to care for others.

"I work a lot, but I love it," Salans says. "I finally found what I am supposed to be doing." 📍

Sex Ed in Today's World

Nursing students use social media to spread the message of safety

by Korey Huyler



Talking about sex with teenagers can be tricky — giggling, blushing and whispering are part of the norm.

Undaunted, a group of Generalist Entry Master's (GEM) nursing students at Rush University College of Nursing decided the best way to reach and teach today's kids about sex was through social media, answering anonymous questions via a question jar and even role-playing real-life situations with high school students.

Here's the background: For their required public health clinical rotation at Rush, a group of seven nursing students in the same cohort decided to teach a sex education and health class to juniors at Richard T. Crane High School, a medical preparatory CPS magnet school on the West Side of Chicago — a school that is 80 percent low-income. Crane's college preparatory curriculum includes a rigorous science and mathematics sequence and competitive dual enrollment and advanced placement courses for college credit. It also offers an innovative four-year health sciences program that provides practical learning experiences under the supervision and guidance of health professionals.



Allison Heinz, Rachel Rendak and Tiffany Wakim used visuals on Instagram to enhance their sex education course taught to teens at a Chicago public high school.

"For the sex ed class, we developed ways to present the content and curriculum we were given and created an advocacy project for the students," explains Allison Heinz, a Rush GEM candidate and one of the nursing students who teaches the class. "It was challenging, super-rewarding and we made great connections with students in the class."

Intro to Community Health Worker

The Thursdays-only sex ed section was part of a daily Rush-led class called "Intro to Community Health Worker (CHW)." Instead of a typical lecture with a textbook and homework, the Rush nursing students promised to answer any questions the high school students asked, no matter how awkward. They used role-playing to teach the students about difficult situations like sexual violence, peer pressure and even telling a friend you are pregnant.

To complement the school's health sciences-themed curriculum, Crane students shared their newly acquired knowledge with the entire health-focused student body, many of whom didn't get the chance to take the class. The students spread that message in a very Generation Z way.

"The kids created an initiative to spread the word about what we were learning," says Rachel Rendak, GEM candidate and another teacher of the class. "The kids told us that social media was way more powerful than posters in the bathroom or signs around school. They wanted to get up to 100 followers in a two-week period — and they were able to do it." Using the Instagram handle @ru.healthy, the Crane teens and Rush teachers shared information with the entire student body.

Other partnerships between Crane and Rush

The sex ed class is just one part of the Rush-sponsored curriculum at the school located a few blocks from the Rush University campus. Rush became involved with the school about five years ago and now leads two classes for students: the CHW class as well as Health IT, for students interested in a career in the health information technology field.

Creating a positive experience for Crane students is clearly a passion for Rush staff and students. "With high school students and sex-related topics, it is difficult to ensure that the information we are delivering is not being misconstrued with what they may have heard in the past," says Tiffany Wakim, a nursing student leader from this project. "I believe what made this program so successful was that we created a safe zone for students where they could ask questions they might have been embarrassed to ask in other classes. Each lecture and activity was followed with an open discussion that allowed them a chance to process the information and confirm their understanding. The delivery of the content to this age group is more important than anything else. I hope they take what we taught them and make educated decisions for their personal lives. I also hope what we began at Crane will be continued with future classes of nursing students."

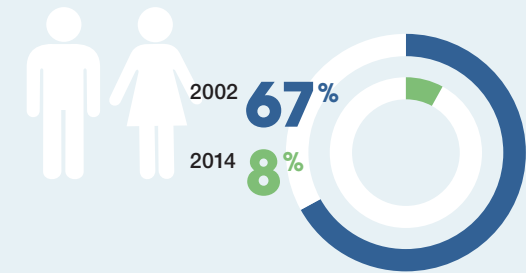
Rush also offers mentoring opportunities, enrichment, professionalism training, field trips to the Rush campus, experiences around Chicago and other community service. And the partnership goes further: Not only did 200 Crane students get part-time jobs at Rush last summer as assistants and summer interns to the patient care technicians, but Rush nursing students hosted a panel for Crane teens, sharing why they chose nursing.

"We have done a variety of things from having a book club to hosting panels about nursing school to offering shadowing for the kids," says Sharon Gates, senior director of community outreach at Rush, who created the Crane program in 2012. "Our experiences grow each year at the school. Our students get an opportunity to hear from the community about what their needs are. For nurses, it's good to work with an ethnicity that is different from your own. Our students walk away from the experience with a whole new view of life."

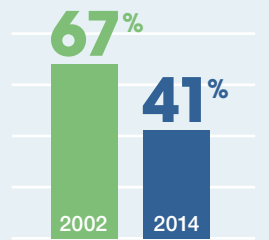
Study finds positive outcomes from well-rounded sex education in schools

The goal of education about human sexuality is to raise sexually healthy adults. A pair of studies published in the Journal of Adolescent Health conclude that limiting teaching to abstinence-only-until-marriage (AOUM) fails to deter teens from risky behaviors and does a genuine disservice. It may also violate their human rights by excluding and stigmatizing certain groups, such as LGBTQ+, and withholding medically accurate information.

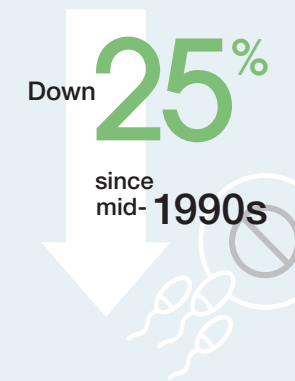
Schools requiring study of human sexuality



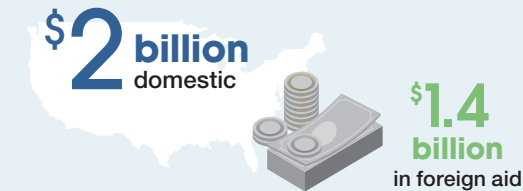
Schools requiring HIV prevention education



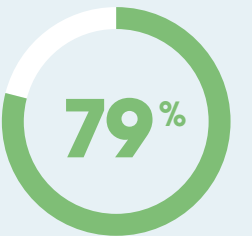
Schools teaching birth control methods



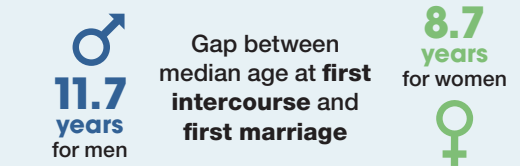
Between 1982 and 2017, U.S. expenditure for AOUM programs



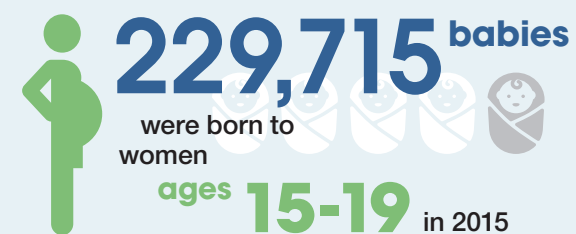
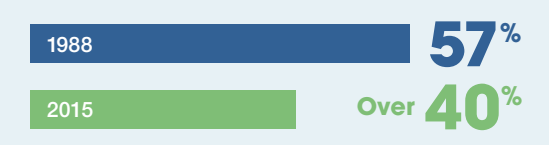
Percentage of Americans who say teens should receive information on abstinence, birth control and sexually transmitted infections (STIs)



The rising age at marriage has led to a substantial increase in premarital sex



Percentage of males and females ages 15-19 who reported having had sexual intercourse by age 18



Comprehensive risk reduction programs have favorable effects on

- Self-reported current sexual activity
- Number of sex partners
- Frequency of sexual activity
- Use of protection
- Frequency of unprotected sexual activity, STIs and pregnancy

Source: Journal of Adolescent Health, [http://www.jahonline.org/article/S1054-139X\(17\)30297-5/fulltext](http://www.jahonline.org/article/S1054-139X(17)30297-5/fulltext)
Centers for Disease Control and Prevention

Empowered Nurses

Effecting change, improving outcomes on hospital units

When Emily Matheson recognized inconsistencies in blood pressure measurement techniques, she decided to do something about it — including educating her fellow nurses.

by Beth Janes



“Oh my gosh — I can’t believe I was doing it wrong!”

That’s the sentiment Emily Matheson, DNP, CRNA, heard from several nurses while conducting her Doctor of Nursing Practice project for Rush University College of Nursing. The topic: taking a patient’s blood pressure.

High blood pressure, which can lead to heart disease and strokes, is incredibly common; almost half (46 percent) of Americans are now considered to have it, according to a 2017 report from the American College of Cardiology and American Heart Association (AHA), which changed the definition of high blood pressure, lowering the bar from 140/90 to 130/80.

“It’s such a basic thing — a vital sign you learn to take in nursing school,” says Matheson, who graduates from Rush’s nurse anesthesia program this month. But she found that mistakes in measurement are quite common, and that’s a problem.

“There are a lot of factors that go into it, and all can influence the outcome,” she says. Simple things like the wrong size arm cuff can alter results anywhere from a few points to 10 or even 30 points, she says.

The good news is those errors aren’t typically life threatening, but accuracy does improve overall patient care. For example, in the cardiac intensive care unit (CICU), providers use blood pressure readings to increase or decrease the dosage of stabilizing medications. If the readings are off, those medications may have unintended effects, necessitating additional treatment or medications.

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A major part of the issue is lack of awareness, which is what I wanted to change.

Outside the hospital, inaccurate blood pressures are also common, Matheson says. At a checkup, for instance, if high blood pressure goes undetected and therefore untreated, it could put strain on a person’s heart that may lead to complications over time. However, experienced medical professionals employ multiple readings at different times to weed out inaccuracies and outliers, she says.

From inspiration to investigation

Matheson became interested in the finer points of blood pressure measurement while working in the CICU at Rush University Medical Center. “I noticed when I took over a patient at shift change, a lot of times the blood pressure cuff wasn’t the right size,” she says.

Her ah-ha moment came after her research uncovered blood pressure measurement guidelines, created by the heart association in 2005, as well as other studies on the topic.

“I hadn’t realized there even were guidelines or how various factors can influence the outcome, and I figured other nurses probably didn’t know either,” Matheson says.

She was right. A unit audit found that about half the time the cuffs used were the wrong size. “Intensive care can be a stressful environment and (cuff size) isn’t always on the top of your priority list,” Matheson says.

So Matheson decided to focus her DNP evidence-based project on the simple but crucial topic of blood pressure measurement. Her goals: Quantify the problem, identify why measurements aren’t taken in accordance with guidelines and create easy ways to improve accuracy for patient safety.

“A major part of the issue is lack of awareness, which is what I wanted to change,” she says.

Improving patient outcomes

Unit leadership was receptive to her plans. After all, translating the current evidence into positive practice changes is an important goal of DNP projects, says Mary Heitschmidt, PhD, APRN, CCRN, director of clinical research for the Rush System and an assistant professor at Rush College of Nursing. “Improving patient outcomes is what we’re all here for.”

Matheson’s approach paid off; now nurses are aware of and following AHA guidelines, and final surveys showed most nurses utilized her interventions. Blood pressure practices are likely to improve for patients outside of Rush, too. Matheson has presented at multiple conferences and hopes to publish her work.



Emily Matheson DNP, CRNA, (right) conducts blood pressure educational sessions with nurses at Rush University Medical Center as part of her DNP project intervention.

“It’s easy in any career to go to work, do your job and go home and not necessarily feel empowered to make changes,” Matheson says. “It was rewarding to teach nurses ... and have them change their practice to make things safer for patients.”

One Student's Journey to a Future in Nursing

What it takes to make a successful career change

It was something in the way hairstylist Rebecca Lyles cared for her salon clients and the people in her community.

by Beth Janes

When one of Lyles' customers suggested she consider a career in nursing, her reaction was immediate. "I thought that sounded ridiculous," says Lyles, who had been a hairstylist for 13 years. "I associated nursing with being in a hospital, and I don't like hospitals and didn't wish to work in one."

The notion started to grow on her. Lyles did some research and discovered all the ways and places nurses practice outside the hospital. That set in motion events that, over time, made a nursing career not only seem not ridiculous but the perfect fit. And — spoiler alert — Lyles graduated last December with a Master of Science in Nursing from Rush University College of Nursing.

Making a career switch

Lyles first pondered a career switch after volunteering as a medical advocate for sexual assault victims. "It got me thinking about how I could incorporate that type of work into my life in a more (full-time) capacity," she says. "What I like to do as a hairstylist — and what I really feel is my calling — is to empower women."

She considered physical and occupational therapy, but nursing felt like the broadest path and best aligned with her interests. So when yet another salon client offered to connect Lyles with a friend who was a psychiatric nurse practitioner, she jumped at the chance. The friend was Julie Worley, PhD, FNP, PMHNP, CARN-AP, an assistant professor at Rush, who would become Lyles' inspiration as a mentor.

Hands-on experience is key for anyone considering a career change, including those thinking of nursing, Worley says. She recommends that, like Lyles, people volunteer somewhere they can interact with patients, such as a nursing home, clinic or outreach center. "It's important to see if you feel comfortable," she says. "Nursing can be such a hard job that I feel like it should be a calling or a passion, which it is for Rebecca."

The importance of a good mentor

At the time of their meeting, Worley was working at Haymarket Center, which treats people with substance abuse disorders. Worley invited Lyles to shadow her. The hairstylist soon became a regular at Haymarket, where she observed Worley's sessions, checked in her patients and even learned to take people's blood pressure.

One day in passing, the clinical director floated the idea of Lyles leading an empowerment program with survivors of sex trafficking.

So Lyles took this suggestion and ran with it. She got a background check and drug test on her own then showed up in the HR department one day asking for an ID badge.

Most people probably wouldn't have been so bold to take on this kind of role but Lyles isn't most people, Worley says.

"I decided to just do it," Lyles says. "I think all my years as a hairstylist taught me about interacting with people you don't know, and it's allowed me to feel comfortable in a lot of different spaces. It's helped me with things I've done both in nursing school and beforehand."

The transition to nursing student

Lyles' Haymarket experiences and persistence helped her feel confident enough to fully pursue nursing.

"It wasn't an easy process," says Lyles, who spent a few years taking prerequisites one at a time at City Colleges of Chicago while working full time. "I wanted to make sure I got A's so that when I was ready to apply to nursing programs, I would have as many options as possible."

Now, with her master's degree in nursing in hand, Lyles has applied to the Indian Health Service, a federal health program that serves Native Americans. "I like community health because it includes primary care and behavioral health and other areas," she says. "You meet people where they're at — when they're more open to education."

And being open to education is something Lyles knows a lot about. 📍



Rebecca Lyles (back left) with her clinical group during their labor and delivery rotation.

After email introductions, the two met for lunch. "She felt like my people," Lyles says. "She was so supportive and really saw me. She didn't try to edit me and wasn't confused about what I wanted to do."

On the other side of the table, Worley felt Lyles would make a great nurse. "I was blown away by her," she says. "The work she'd done as a victim's advocate showed that she already had a heart for helping people."



What Makes You Happy?

**For Sam Cerniglia,
it was finding a profession
with purpose**

The quest for a more meaningful
career became deeply personal for
this reality show contestant/IT guy.

by **Laura Strom**

Did you always know what you wanted to be

when you grew up?

Not all of us had that kind of clarity, even after high school. In fact, about 30 percent of U.S. college students who declare a major will change it at least once, according to the National Center for Education Statistics.

Why do we change our minds? Perhaps we realize we don't like the coursework in our chosen field or find it too challenging. Maybe we have an epiphany that leads us to a new passion. Or maybe we just have so many interests we can't choose one.

Chicagoan Sam Cerniglia knows how challenging it can be to have multiple interests. A love of music led him to pursue a bachelor's degree in music, first studying opera and then contemporary, urban and pop music. Cerniglia wasn't just passionate about music: He has a gift. After auditioning for several American reality-television singing competitions, he made it to the second round on one popular network show.

Afterwards, he continued to perform around the Midwest, drawing a large following of fans. He took a full-time job in IT to help pay the bills and get health insurance. Yet, even though he loved singing and enjoyed his IT job and colleagues, he was unfulfilled.

"I always felt like there was something missing," Cerniglia says.

A new perspective

Then tragedy struck and his quest for a more meaningful career became deeply personal. "When my sister passed away, just about three years ago, we had some amazing nurses and physicians that made such an impact on my family. But it was really her life that challenged me and inspired me to go in search of that unnamed missing element. I thought about a lot of different jobs and careers. Nursing met all of the professional criteria: working with people, flexibility and diversity, the mental satisfaction of the medical field, and lifelong learning."

His wife, friends and other family members were supportive, all agreeing he'd be a great nurse. Still, a few wondered why he wouldn't study to be a physician. But Cerniglia, at long last, knew what he wanted.



Sam Cerniglia and his wife, Angie



"I chose nursing for the hard science of medicine coupled with the emphasis on patient-centered, compassionate care. I made a conscious choice, and the decision to not be an MD," he says. "I want to be a nurse. I want to be bedside."

After reaching out to working nurses to ask about their jobs, researching nursing schools and attending information sessions, Cerniglia was most impressed by the students and administrators who spoke at the Rush University College of Nursing session.

"I actually didn't apply to any other schools. I only applied to Rush," he says.

A second passion

Now in his second term of graduate study at Rush, Cerniglia does more than just attend classes. He helps lead three Rush-sponsored groups that feed his interest in pediatrics. "I love kiddos. They are just so weird and awesome," he says.

Cerniglia is a leader for a health outreach group called Buddies that enlists young student volunteers to visit pediatric patients. He also was selected to "lead the leaders" of a health promotion program called RU Caring. He's also spearheading the launch of a nonprofit group, which he fondly calls his "baby," delivering direct patient care to children in homeless shelters.

“

I think it is human nature to categorize things. And historically nursing has received a gender label. But the advice I have is: The rewards of nursing are genderless.

Rush opened a door . . .



Cathy Catrambone
PhD, RN, Assoc. Professor,
one of Sam's mentors

"As a faculty member, I am passionate about leadership and mentoring our next generation of nurse leaders."

"Recently, I had the wonderful opportunity to observe Sam Cerniglia in action at an interprofessional training session. His ability to connect with all disciplines around the table, and his inclusiveness and organic leadership of the team was compelling. I approached him after the session to share my observations of his leadership potential and offered to serve as a mentor for his journey."



Angela Cerniglia
Sam's wife

"Since Sam found (both) his calling to be a nurse and a home at Rush, I have never seen him happier. I

have watched his career grow and him excel in many different areas. I could not be more proud of the way he is using his gifts to help others in a very tangible way. No matter where he goes, he always makes the world a brighter place, and now he has found a vocation that allows him to do that every day.

"Seeing him drawn to pediatrics is no surprise: Kids have always loved Sam (I call him the baby whisperer). I am pretty sure that's because at heart, he is just a big kid himself!"



When asked what qualities make a great nurse, Cerniglia is resolute. "A great nurse is calm under pressure, a critical thinker, likes math and science or at least has an aptitude for it, is able to build and maintain relationships of all kinds, and is a good, clear communicator because you are the liaison between the provider and the family and the patient," he says. "Most important of all, has a heart for people."

Kelly Karas-Hedrick, RN, MSN, clinical nurse instructor and lecturer at Rush, says she had "the privilege" of being Cerniglia's first clinical instructor, and she watched him grow into the nurse he describes above. "Sam is a great nurse! . . . You truly cannot help but to smile while you interact with Sam, and you leave the encounter feeling that the day just got better," she says.

Cerniglia's "warm, uplifting and caring energy" is not something you can pick up in a lecture or a textbook, she says. "Sam's big heart and sensitivity allow him to deliver care in a comforting and supportive manner. A great nurse is not just competent. A great nurse truly cares."

Cerniglia cares passionately about his music, too. He speaks with warmth about his fans who follow him, though he prefers to call them friends. And he has a message for them.

"I will never stop singing. Music is in my bones. I feel so incredibly blessed to not have only one but two passions that work together so harmoniously, pun intended. I think as a nurse I will have an opportunity to use my music therapeutically, as part of my clinical practice. And I've already started doing that," he says. "Music has such healing properties."

Finding your purpose

Cerniglia has some advice for men considering this traditionally female-dominated career — a stereotype he pushes aside.

"I try hard not to think about what other people think about me," he says. "I think it is human nature to categorize things. And historically nursing has received a gender label. But the advice I have is: The rewards of nursing are genderless."

So how does a man, or woman, know that nursing is right for them?

"The idea of holding someone's hand as they take their last breath, or comforting a family through a cancer diagnosis, or experiencing new parents leaving with their baby from the NICU. . . . If any of these things spark something within you, I'd say do yourself a favor and investigate that feeling. The role of caring for the sick is never limited to one gender," Cerniglia says. "Make your decision based on what makes you happy." 📌

A Meaningful Life

How community service led to a path in nursing

Many nurses find their way to the profession or a specialty through volunteering.

by Beth Janes



Most people who volunteer or participate in community service projects will tell you that they end up benefiting from the experience at least as much as those they help.

However for Cristina Gonzalez, MSN, RN, CNL, CEN, a 2016 graduate of the Generalist Entry Master's program at Rush University, a volunteer trip to Honduras during undergrad did much more: It changed the course of her professional life.

It was spring 2009 and Gonzalez was a junior studying biomedical sciences. "I knew I wanted to do something in the medical field and had been admitted into the physical therapy program — so that was my focus," she says.

She viewed the trip, organized by a group called Global Medical Brigades, as an opportunity to not only help those in need but also to travel, experience a different culture and step out of her comfort zone.

"I speak Spanish, so it was also exciting to get to work as an interpreter for medical professionals," Gonzalez says. For a week she traveled and worked closely with physicians, physician assistants and nurses from the U.S. and a Honduran medical team, giving her a unique perspective. While all provided exceptional care, she says, the nurses made the biggest impression on her.

"They seemed to be able to interact more comfortably on a personal level with patients. I also saw for the first time how nurses spend so much time at the bedside and really consider the whole picture," she says. "I thought, 'Huh, maybe this is something I want to do.'"



Cristina Gonzalez chats with local children on a recent global health trip to Nicaragua.

Community service can help nurses see the need to advocate for those in need of resources, learn to be an advocate and understand the role we can play in influencing political decision-making.

A deeper level of health care

Like Gonzalez, many nurses find their way to the profession or a specialty through volunteering, says Lola A. Coke, PhD, ACNS-BC, RN-BC, FAHA, FPCNA, FAAN, an associate professor at Rush, who has a long history of community service both in the U.S. and Guatemala. "It can provide exposure to a variety of experiences that help people figure out where they want to land when they get a nursing degree," Coke says.

And, while all nurses are trained to take a holistic approach to care, community service lets them practice it on a deeper level because they interact with people in their own environments. That allows for better understanding of the factors — financial, environmental, access to care, social support and more — that affect a person's health and decisions, Coke says. "It helps you remember that everyone has their own home and life and resources and that those things have to be intertwined with the care we provide."

Gonzalez got to experience a little of that in Honduras. "I was really nervous (about translating medical terms) because my Spanish was more conversational," she says. Although she brought a book to help, she didn't use it. "Most patients didn't understand medical jargon anyway — they needed me to explain things in simple terms they could understand."



Making a difference closer to home

Albert Schweitzer Fellowship — Ashley Roché

As medical science continues to advance and the ability to delay death by natural causes progresses, patients are being exposed to more invasive and often painful interventions at the end of life. Seniors who are isolated are particularly prone to these medical interventions due to lack of a living will or medical care proxy, a legal document that designates someone to make health care decisions in case a person is rendered incapable.

Using her Schweitzer Fellowship, Ashley Roché designed a community service project with Little Brothers: Friends of the Elderly, a nonprofit organization providing companionship to isolated seniors in Chicago. Roché spoke with over 50 seniors and 25 staff members and volunteers about end-of-life options and introduced them to the Five Wishes document, allowing them to complete their own paperwork.

"This experience affirmed my belief in the importance of human dignity and ethical decision-making as it concerns end of life care, and it will continue to guide my practice as a critical care nurse," she says.

Little Brothers uses the volunteer guide she created, and Roché continues to work with the organization to further the project and reach more seniors.

The community service mindset

After Gonzalez returned, she felt energized. "Reflecting on the experience, I started thinking, 'What was it that made me feel good and inspired me so much?'" she says. "It was getting to work one on one with patients and see how nurses interacted with them. That fit my personality and the way I like to interact with people."

While not ready to jump into nursing just yet, Gonzalez knew physical therapy wasn't quite the right fit. She graduated with a biosciences degree then took a few years to contemplate her next move before coming back to nursing.

She chose Rush for several reasons, including its focus on community service, Gonzalez says. The College of Nursing, for example, coordinates global health trips to Haiti and the Dominican Republic and facilitates many opportunities in its own backyard, especially with public schools.

For example, for Gonzalez's capstone project, she and a classmate developed educational materials about concussions that they presented to groups at two large high schools on Chicago's West Side.

Gonzalez was a good fit for Rush, too. The college recruits students with a service background and a passion for social justice, while the faculty leads by example, Coke says. "There's no requirement for service, but we instill that giving back is important to who we are as Rush nurses," she says. Like other professors, Coke often talks about her surgical mission trips and leadership roles in professional organizations that work to educate nurses, advocate for patients and influence policy.

She says it's important for nurses to know that community service can encompass more than patient care. "You can belong to a professional organization ... where you exercise your power as a member to improve nursing care and nursing education and that directly impacts health care," she says.

The other piece is social justice. "Community service can help nurses see the need to advocate for those in need of resources, learn to be an advocate and understand the role we can play in influencing political decision-making," Coke says.

Giving back and paying it forward

Gonzalez, now a nurse at a large, Level-1 trauma center in the suburbs, knew that after becoming an RN she wanted to go on another trip with Global Medical Brigades. "The organization and that first trip are what made me want to become a nurse; I wanted to give back," she says.

So this past November, Gonzalez spent a week in Nicaragua and was the only health care provider from the U.S. along with 27 undergrads. "We set up a little ER and I was like, 'This is my zone, I'm comfortable here,'" she says. Although the slower pace took some getting used to, it was a nice break to take her time and interact more with patients — sort of how she remembered the nurses doing in Honduras.

Except this time she was the nurse mentoring and inspiring the students. 📍



Having It All

The secret to balancing family and school

After putting their work lives on hold to raise children, these moms yearned for a career change. They entered the General Entry Master's (GEM) program, specifically designed for career changers who want to pursue nursing.

by **Korey Huyler**

**Car pooling.
Meal planning. Errands.
Earning a master's degree.**

Yes, some moms can do it all.

The GEM program is designed for students who already have a bachelor's degree in another field but now want to pursue a career in nursing. The program focuses on clinical leadership and prepares students to successfully sit for the registered nurse licensure exam and clinical nurse leader certification.

For some mothers in the program, nursing school is a huge career change. One of the current classes includes former lawyers, architects, teachers and doulas. On the other side of the spectrum, there are women who have stayed home for years raising their children. They've decided to return to the workplace and heed a call to nursing.

Nursing Student Brandi McNally: mom, English major, doula

Case in point: Brandi McNally, a mom of three children, ages 14, 11 and 7, who is in her second year of the GEM program. McNally was an English major in college, but she became interested in health care after the births of her two older children, and decided to become a doula and lactation counselor. She says she loved being in the hospital environment but was nervous to dive into nursing school.

"It was a huge decision for me to return to school after having put a career on hold to stay at home with my children," explains McNally. "It was full of uncertainty as to how I would excel in my coursework while also still being available to my kids." She took her prerequisite classes slowly, coordinating the beginning of the GEM program with the start of full-time school for her youngest child.

Like a few of her classmates, McNally was worried about balancing the nursing program and her family.

"I really felt like a black sheep when I started on my nursing school path and wondered if I could do it," she admits. "I would search online hoping to find guidance from other mothers who had decided to pursue nursing school and had succeeded.

“

It's important for mothers who have taken time off to be primary caregivers to know they have acquired skills that translate well to managing graduate school.



“

The volume of work has been challenging, but it's doable. You just have to plan and prioritize. Being a mom, I definitely know how to do that.

"I happened to know of one other mother who had gone through the GEM program and hung on her every word when she talked to me about how she had made it work for her." McNally says she believes that hearing from other mothers who have succeeded at returning to school and changing careers really helps foster a positive attitude about future achievement. "We can all benefit from mentors when starting on an unknown path, and it's important for mothers who have taken time off to be primary caregivers to know they have acquired skills that translate well to managing graduate school."

Thanks to the camaraderie of other students and the support of her husband, McNally has succeeded in the program and is close to finishing her degree.

"In my cohort, there are eight mothers," she says. "And we are all friendly and supportive of each other. It's nice to be able to talk to others going through the same thing as you. Also, I think as mothers we have all learned to be very efficient with our time, which definitely helps."

Before starting nursing school, she explained her goals and schedule to her kids. "I talked extensively with my children to help them understand how being in graduate school was going to change things for them," she says. "My oldest child has been a wonderful supporter in our family and has helped take care of the younger two after school, which has allowed me to stay focused rather than worrying about child-care transitions."

Nursing Student Yolanda Hernandez: mom, MBA, engineer

Another mother in the GEM program, Yolanda Hernandez, is a mom to four children, ages 9 through 16. She holds an MBA and was formerly a process engineer at an oil and gas company. She decided to switch to nursing school after helping her father fight a serious illness.


"My family had always been in the health care field, but I was lucky to get a scholarship to study chemical engineering — so that is why I became an engineer," Hernandez explains. "But as I got more involved in my father's care, I got very interested in the nursing field and wanted to learn more about it."



She started taking all the prerequisite classes at a local community college and became a certified nursing assistant. "I saw all the nurses who were involved, and it seemed like the right choice for me," she says. "A counselor at college told me about the Rush program, which is two years of school and then you earn an advanced degree."

After talking with her husband, Hernandez decided to apply.

"I knew it wouldn't be easy," she says. "I knew it would be challenging. But I had the support of my husband, family and friends. They played a role in supporting me to further my education. My biggest concern was the kids — who would take care of them and get them to all their after-school activities. But so far, it has worked. My husband and I just work together as a team to get it done."

For Hernandez, the best thing about school is that she has met other mothers in the program. "We offer support to each other," she says. "The volume of work has been challenging, but it's doable. You just have to plan and prioritize. Being a mom, I definitely know how to do that." 



The nursing experience of a lifetime

What happens when you leave your old job and become a nurse volunteer?

by **Beth Janes**

Preparing medication, monitoring patients, helping with hygiene, providing health education — these are typical tasks for any nurse.

But imagine performing them in a remote area halfway around the world in 99-degree heat. Add to that working without the luxury of language and trying to remember customs like never pointing your feet at another person.

Yet also imagine being welcomed into patients' homes as an honored guest and spending quality time with them — celebrating holidays, preparing meals, developing deep bonds.

This scenario was the reality for John M. Freund, RN, a graduate of the Generalist Entry Master's program at Rush University College of Nursing, who worked for 17 months as a nurse volunteer in northeastern Thailand. In 2015, three years after becoming a registered nurse, he and his partner quit their jobs, stored their belongings and set off for the city of Nong Khai — and the experience of their lives.



One of my biggest takeaways was the universality and connectedness of humans. When we take time to know one another, there is so very little that actually divides us.

Embarking on a new path

Freund worked with the Village Outreach Programme in Nong Khai while his partner participated in the Hands of Hope project, both under the umbrella of the Good Shepherd Sisters. While he'd always been open to new experiences, Freund craved something more, especially after being laid off from his corporate job. "I had spent most of my life holding myself back from taking bold steps out of fear of hurting loved ones or failing myself."

So a few months into unemployment, Freund took the bold step of setting aside his MBA and corporate career to pursue nursing.

"I recognized I wanted an alternative work schedule, a career where I felt I was helping people and a career where I had the ability to make a good wage while maintaining the ability to directly interact with the people I helped," he says. "The fact that nursing is a broad field was also important so that if my personal needs changed, I could still find fulfillment."

One such need had already surfaced. While driving one day, he and his partner heard a radio segment about international volunteering. "One of us turned to the other — we can't remember which — and asked, 'Would you be interested in something like that?'" Without hesitation, the answer was "Yes," he says.

Nursing abroad

Nurses are in high demand globally, providing ample opportunity for unique experiences and travel. At Rush, faculty and students



John Freund and now his wife in Thailand

form interprofessional health care teams and travel to developing countries where access to care and resources are limited. Rush's long-term mission: empower those communities to independently provide sustainable care.

The College of Nursing specifically has organized trips to the Dominican Republic and Haiti. Typically, students participate during the later part of their academic program, when they have

more skills and experience. It can be very challenging as students step out of their comfort zones, says Jan Odiaga, DNP, CPNP-PC, an associate professor and director of the Pediatric Primary Care Nurse Practitioner Program, who helps coordinate and participates in trips.

"There's not always running water or electricity — you see and smell things we wouldn't normally encounter," Odiaga says. "It makes you reflect on how we care for vulnerable populations, globally and in our own backyards."

Of the students and staff who gravitate toward global opportunities, she says, "They have to be willing to trust their skills and look at people holistically without judgment." Above all, Odiaga adds, they must go in with open hearts and minds.

Taking the leap

That's exactly what Freund did. Before leaving, he and his partner vowed to say "yes" often and embrace new experiences.

And there were many. They lived and worked in a small compound anchored by short- and long-term care centers that treated patients with HIV/AIDS. Freund also traveled to remote villages to assist and monitor patients living at home.

Although Freund didn't have experience with these populations, his education proved valuable. "Rush focused on giving us the basic knowledge to provide culturally sensitive care and

stressed its importance," he says of the idea that the culture and beliefs of the patient should inform their care.

At first, that meant learning norms and avoiding faux pas. Over time, it evolved into finding ways to educate patients in ways that didn't challenge their beliefs. "For instance, in a culture that believes in reincarnation and that much illness is a result of past misdeeds in this or a previous life, education about the importance of treatment takes on more complexity."

Powerful lessons

Even if you never leave the U.S., going beyond one's backyard provides valuable insight into a culture, Odiaga says. "You start to understand who you are, and how nurses can contribute and function independently." And new and challenging situations help build confidence.

The relationships Freund was able to form — through smiles, knowing looks, goodwill and patience — also taught him that language often isn't necessary.

"I have this sense of knowing people in the community despite how little we were able to (converse)," Freund says. "One of my biggest takeaways was the universality and connectedness of humans. When we take time to know one another, there is so very little that actually divides us." 📍

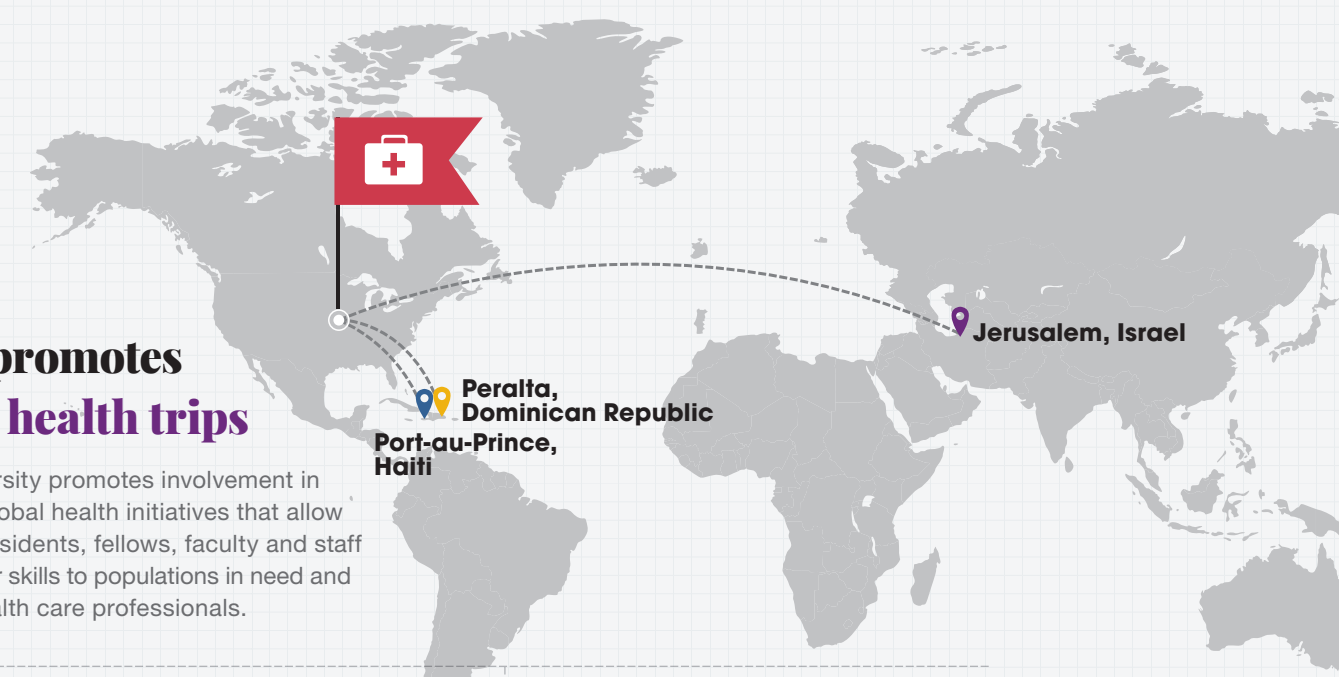
Rush promotes global health trips

Rush University promotes involvement in voluntary global health initiatives that allow students, residents, fellows, faculty and staff to bring their skills to populations in need and grow as health care professionals.

10-12 TRIPS per year



100 PARTICIPANTS annually



From Sports Star to Stellar Student

These college athletes are going “pro” in nursing

Winning athletes and great nurses share more qualities than you might think.

by Daniel Vasquez

Daily rigorous training, physical and mental toughness, unyielding dedication:

Ask any college athlete, and you'll hear these are necessary to excel. And if you want to be a great athlete, you must also be willing to put the team ahead of personal glory.

Some say the same of nurses. It's no surprise then that three former elite athletes are applying what made them successful on the court and field to their pursuit of a nursing career as graduate students at Rush University College of Nursing.

Rosa Powell, Class of '18

From the gate, Powell, a former basketball player at Erskine College in Due West, South Carolina, felt prepared for the rigors of the General Entry Master's (GEM) program.

In high-level sports, she says, “You must learn to work diligently and patiently with a variety of individuals, all of whom have different thoughts and processes, but ultimately have the same goal.” She adds: “The same goes for nursing. You work with a cohort of different medical professionals in order to provide the best care.”

Powell knows about working hard. In high school, she played point guard, but in college, her

coach asked her to become a shooting guard. In taking on the new role, she trained harder than ever. By the time Powell was a sophomore, she had racked up a career-high 21 points in a game.

Powell is ready for the demands of nursing — long hours, changes in work assignments and going above and beyond for patients.

“Just like with basketball, when you begin with 5 a.m. conditioning workouts, you learn to push through and thrive. When you get tired and think there is nothing left in the tank, you continue to push and dig,” she says.

It's not only about physical toughness, though.

“Once I make it to the floor as a nurse, I must be in the best frame of mind,” she says. “With some patients, it will be more of a struggle to make them feel better, but as a health care professional, you can make them feel better by letting them know you will not give up on them.”



Trisha Carr, Class of '18

Among the biggest wins for Trisha Carr, a former soccer player at Wheaton College in Wheaton, Illinois, was when her team made it to the playoffs.

Carr's takeaway: “Everyone has their role on the field,” she says. “If one person isn't giving their all, the whole team suffers.”

Today, Carr has a bigger goal: graduating from the GEM program at Rush. She takes pride in being challenged and is confident that her history of hard-earned endurance and perseverance on the soccer field will help her in nursing classes.

Also helping: Carr's personal motivation for pursuing nursing.

“My younger sister has an autoimmune deficiency,” she says. “I saw a lot of her frustrations ... as well as her praises for the health care she received. My sister motivated me to become part of the solution to the problems of patients. She grew my desire to experience the joy of patient relationships, as well as positive outcomes.”

Barukh Brian Schwadron, Class of '18

Some view rugby as a dangerous sport. But Barukh Schwadron found more than physical challenges during his 12-year career as a player.

“As I got to experience more of the sport — the teamwork, generosity, outrageousness and determination to keep fighting — it became a lifelong passion,” Schwadron says.

He played rugby at the University of Michigan in the position of “hooker.” This complicated role requires specialized skills, including quickly anticipating what to do next with the ball.

“Split-second decision-making and moving people around efficiently is a powerful skill in both rugby and nursing,” Schwadron says. But that wasn't what initially drew him to

nursing; Schwadron served as a medic for his teams and loved the experience. “I've always been passionate about healing, so when deciding on a career, nursing was a way to bring my diverse background to help those in need,” he says.

One highlight of Schwadron's rugby career was playing with the team in Mombasa, Kenya. “Ranked second to last, we pulled an enormous upset over the best team in the country,” he says.

Intense situations and hard work are part of a nurse's job, and experiences like that prepared Schwadron. “Rugby has shown me how hard I can work,” he says. “It also has shown me the power of collaboration, generosity and hospitality, which will be an asset to my career.”



Nursing in Action

Credits

Rush University College of Nursing

Dean Marquis D. Foreman

Executive Editor Lisa Rosenberg, Associate Dean

Editor-In-Chief Rebecca Darmoc, Director of Marketing

Contributors Molly Spurlock, Jennifer Thorndyke, Monica Degenhardt

Studio 1847, A Division of Tronc

Managing Editor Laura Strom

Art Director Ssonyo Son

Account Manager Melissa Bakst

Copy Editor Leigh Hanlon

Proofreader June Casagrande

Writers Korey Huyler, Beth Janes, Laura Strom, Daniel Vasquez

Cover

Pictured Sam Cerniglia

Producer La'Tasha Bennett

Production Assistant Emily Knott

Photographer Hilary Higgins

Photo Assistant Chris Beerbower

Hair Frances Tsalas

Makeup Layanna Wilkerson

Image Credits

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