

SPRING 2018

# Carolinas College

— OF HEALTH SCIENCES —



## THE EVOLVING HEALTHCARE ENVIRONMENT

**Dr. Derek Raghavan, president of  
Levine Cancer Institute, and other key  
Atrium Health leaders weigh in**

# By & Large

*"Everything is in a continuous state of evolving, refining, improving, adapting, enhancing...changing. You were not put on this earth to remain stagnant."*

– Steve Maraboli



I have been thinking about the nature of evolution lately. Not the scientific theory, but the process of change. Since becoming president of Carolinas College of Health Sciences, much has changed. In the pages of this magazine, we have shared our journey of transformation to better meet the needs of the evolving healthcare environment. We continue this journey in 2018.

In late 2017, we made the decision to transition most of our continuing education programming to Charlotte AHEC. In doing so, these programs will have the opportunity to grow, thanks to AHEC's established infrastructure and strong foundation. Along with this, we discontinued the Nurse Aide program, effective March 2018. Although these decisions were quite challenging, I am confident they will ultimately allow Carolinas College to work more efficiently at focusing on our strategy of growth, value and fulfilling the future workforce needs of Atrium Health (formerly Carolinas HealthCare System) and the greater healthcare community. The changes will provide the resources necessary to continue our expansion into baccalaureate and post-baccalaureate programs, while continuing to build upon our current successful programs.

Fortunately, some things don't change. In this edition of our magazine, you will find our 2017 Annual Report and the strong

outcomes we achieved. You will read about the evolving healthcare environment from the words of key industry leaders. You will also learn

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more about how we maintain quality in nursing education, how we are partnering with Carolinas Medical Center to offer an innovative Computed Tomography course, and our plans to offer a Learning Symposium focused on patient-centered care. Great things are happening at Carolinas College.

Even though we seem to be in a continuous state of evolving, refining, improving, adapting and enhancing, the quality of our education has not changed. My job is to ensure this never changes. Clearly, I was not put on this earth to remain stagnant.

T. Hampton Hopkins, Ed.D

# Carolinas College

## — OF HEALTH SCIENCES —

A publication for alumni and friends of Carolinas College of Health Sciences, part of Atrium Health



### COVER STORY

## The Evolving Healthcare Environment: Shifting to Value-Based Care

Healthcare reforms are forcing change, pushing some risk and responsibility to the provider level. Learn how asking the right questions, challenging our processes and keeping populations healthy in their communities is allowing our providers to deliver value — and quality care.

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### SPECIAL INSERT

## 2017 Annual Report

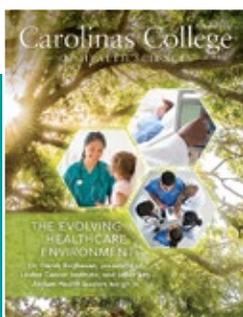
Join us in celebrating our 2017 accomplishments and looking with anticipation towards a bright future.

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#### ABOUT THE COVER

The shift to value-based care is an answer to healthcare's Triple Aim: improving the health of populations, enhancing the patient experience, and reducing costs.

Carolinas College of Health Sciences Magazine is a publication of the College, part of Atrium Health.

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**PUBLICATIONS MANAGER** Ruthie Mihal

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## GENERAL STUDIES

### Celebrating the First Associate of Science Graduate

► On December 15, 2017, General Studies faculty, staff and students had the honor of watching Jennifer Pata, the program's first graduate of the associate of science track, walk across the stage. This is an exciting moment as Carolinas College continues our work to help students achieve their goals and move closer to becoming leaders in healthcare professions.

By *Jared Smith, MS*  
Program Chair, General Studies



General studies faculty members Tracy James, Carla Hanbury, Heather Fasano and program chair Jared Smith congratulate graduate Jennifer Pata (center) on her achievement.

## CLINICAL LABORATORY SCIENCES

### Clinical Laboratory Sciences Looks to the Future

► Susan B. Thomasson, MEd, MT(ASCP)SH, LMBT, who served as director of the continuing education department until its closing, accepted a new role as chair for the clinical laboratory sciences programs. Under her leadership, the department is busy preparing for two NAACLS (National Accrediting

Agency for Clinical Laboratory Science) self-studies. Both the Medical Laboratory Sciences (MLS) and Histotechnologist (HTL) programs have reaccreditation site visits scheduled for spring 2019.

Both MLS and HTL 2017 graduates had 100 percent Board of Certification passing rates, as well as 100 percent placement rates in their respective fields. Of these graduates, 57 percent of MLS and 43 percent of HTL were placed within Atrium Health. Current teammates who would like to become certified in microbiology (M(ASCP)) may enroll in the microbiology only course this spring. Students who successfully complete this course will be eligible to sit for the ASCP exam. Lastly, six new MLS students and four new HTL students were welcomed in January. These students joined the seven MLS students who started in August 2017.

By *Susan B. Thomasson, MEd, MT(ASCP)SH, LMBT*  
Program Chair, Clinical Laboratory Sciences

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# NURSING.SCHOOL.

Work toward your BSN, while you work.

## *Bachelor of Science in Nursing*

Carolinas College of Health Sciences is launching a new Bachelor of Science in Nursing. Our program is designed to help current nurses maintain a work/life/education balance. In fact, all courses are accessible online. And at CCHS, you'll have the full support of faculty, staff and fellow students to ensure your success. Classes begin Fall 2018. Learn more by calling 704-355-5043.





NURSING

## Nursing Program Positioned for ACEN Reaccreditation

After months of hard work and preparation, the Nursing program successfully completed its ACEN accreditation visit (Accreditation Commission for Education in Nursing) in February 2018. Preliminary results found the program to be in compliance with all six standards. The program was noted to have several strengths, including excellent NCLEX pass rates and job placement rates, as well as strong partnerships with Atrium Health and the Carolinas Simulation Center. Site visitors have recommended affirmation of accreditation with a review in eight years. Next, the evaluation review panel will convene in May to review the findings; then, the board of commissioners will meet in July. The program will receive official notification in August regarding reaccreditation.

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“Having external peer reviewers recognize the excellence of our Nursing program confirms that we are meeting our mission of transforming lives by educating, engaging and empowering healthcare professionals,” says Dr. Lori Bequette, provost of Carolinas College of Health Sciences.

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“We usually feel confident that we offer value by providing a high-quality education, complemented by an excellent student experience,” says Dr. Lori Bequette, provost of Carolinas College of Health Sciences. “Having external peer reviewers recognize the excellence of our Nursing program confirms that we are meeting our mission of transforming lives by educating, engaging and empowering healthcare professionals.”

*By Cathy Borysewicz, MSN, RN-BC, CNE; Program Chair, Nursing*

RADIOLOGIC TECHNOLOGY

## Program Changes Prepare Students for Registration and Certification

In an effort to increase efficiencies and better prepare students for the American Registry of Radiologic Technologists (ARRT) Registry examination upon graduation, the Radiologic Technology (RT) program utilized computer-based testing for all examinations throughout 2017. The program also adopted a flipped-classroom approach in the Applied Radiography I course, allowing for more hands-on time in the energized lab for procedure demonstration and practice. The flipped-classroom approach will continue for the Applied Radiography II course in spring 2018.

Our program will offer a Computed Tomography (CT) class beginning May 2018, the first of which will be comprised of May 2018 graduates. The RT program is working collaboratively with Carolinas Medical Center CT administration and management to ensure a robust curriculum and student learning objectives. Upon completion of this class, students will be ARRT CT Registry eligible.

In April 2018, the North Carolina Society of Radiologic Technologists (NCSRT) annual conference was held in Asheville, NC. During this two-day conference, students were invited to participate in a mock ARRT Registry examination, attend presentations on patient care and procedures in radiology, as well as review sessions on equipment operations, radiation biology and radiation physics. There were opportunities to network with students from other RT programs across the state.

Lastly, our program continues to be dedicated to community outreach. During 2017, our students volunteered for several community service projects within Charlotte-Mecklenburg, including the Men's Shelter of Charlotte, Crisis Assistance Ministry of Charlotte and North Carolina MedAssist. Several volunteer projects are already scheduled for 2018 as well.

*By Jodie Huffstetler, MAEd, RT(R)  
Program Chair, Radiologic Technology*



CCHS nursing students playing with children at village clinic, Cayo District, Belize, CA. Student nurses are: (top row) Andrea Nielsen, Madison Gross (bottom row) Taylor Alford, Megan Roper, Andrea Field

## Transcultural Nursing Students Prepare for Belize

Nursing students from Carolinas College of Health Sciences are preparing for the fourth annual trip to Belize. As part of their clinical experience for Transcultural Nursing (NUR 160), these students travel to Central America to receive hands-on healthcare training in a developing country. They'll organize and participate in cardiac outreach clinics, nurse-run village clinics, family education events and community health visits and screenings.

Student participation in fundraising efforts is an expectation of the course. Funds raised by students are used to purchase items needed for both the medical providers and people of Belize. In the past, these funds have provided stethoscopes, glucometers, sphygmomanometers, over-the-counter medications, prenatal vitamins, first aid supplies, clinic supplies, pediatric care supplies, school backpacks and toys for disabled children. One of the fundraising highlights of the 2017 trip was the purchase of a new EKG machine (including electrodes and paper gel) that was donated to a physician serving the Toledo district, one of the most remote sections of Belize.

**We welcome alumni support and appreciate your generosity as we prepare to embark on our next visit.**

- To donate online, please make a gift at [GiveCarolinas.org/CCHS](http://GiveCarolinas.org/CCHS), including a note directing the funds to the 2018 Belize Clinical Experience.
- Checks also may be made payable to the CCHS Advancement Fund and mailed to: Carolinas College of Health Sciences, Attn: Belize Clinical Experience, PO Box 32861, Charlotte, NC 28232

Radiation oncology is constantly in a state of change, forcing us to continually adapt to dramatic advances in technology and transform practice through the integration of new research and standards of care. Yet our goal has remained the same: to deliver damaging radiation to cancer cells, while preventing harm to surrounding normal tissues. In fact, every innovation has been born of our attempts to better achieve this goal.

## RADIATION THERAPY

# Adaptive Radiation Therapy: The Next Big Thing?

In recent years, improved imaging techniques and better control of dose delivery has allowed physicians to dramatically increase dosage to various tumors, while achieving declines in the normal tissue effects. And though these changes have revolutionized the field, it appears a new revolution may already be just around the corner: The next new wave may come in the form of adaptive radiation therapy.

Through adaptive radiation therapy, we seek to combine current advances in the physics of radiation delivery with the ability to constantly evaluate radiobiological response. Ongoing evaluation of biological response relies on imaging modalities that can provide feedback regarding molecular and cellular activity. Currently, we use a combination of Positron Emission Tomography (PET) and Magnetic Resonance Imaging (MRI). While PET is commonly utilized to evaluate molecular activity during the initial planning process, it lacks the ability to provide immediate

feedback due to the time needed for cells to absorb the required radioactive tracers.

MR imaging has always allowed for better soft tissue resolution and delineation. So, for many years, planners have combined MR images with planning CTs to better determine beam and dose placement; however, improvements in MRI techniques now allow clinicians to quickly evaluate the movement of water (diffusion) within tissues and identify characteristics unique to specific structures. Diffusion can be assessed within moments of completing a scan. In short, cells that are more tightly packed and less receptive to cell membrane transfer would be more resistant to the movement of water – and cancer cells tend to exhibit these characteristics. In contrast, normal cells and cells that have experienced membrane damage would allow water to disperse more freely. As a result, new technologies aim to combine MRI units with linear accelerator technology in order to

provide daily assessment of tissue position and cellular response to radiation.

In theory, if units of this kind become commonplace, it may be possible to identify specific regions of cancer activity and dynamically adjust the treatment plan over the course of treatment. This could further improve tumor control while reducing normal tissue effects – a level of precision and constant evaluation that may also allow for shorter overall treatment times. After all, if physicians could more precisely direct treatment to a small group of cells rather than simply a region of an organ, it's likely that the dose delivered per day could increase and, in turn, reduce the overall treatment time from weeks to possibly days. And that just may be the next big thing.

*By Lee Braswell, MPH, RT(R)(T), CMD  
Program Chair, Radiation Therapy*

# Healthcare Reform: Learning How to Learn

I recently took the opportunity to think about both the scope and pace of the changes I've experienced during my career. As a junior in high school, I was assigned the task of preparing a report on the book *Future Shock* by Alvin Toffler. I can't say that I enjoyed this 1970s piece; however, I haven't forgotten its premise – that the pace of change in every area of human endeavor was accelerating so quickly that we would soon become incapable of dealing with it. Today, nearly 50 years later, the points made in this book continue to have major relevance.

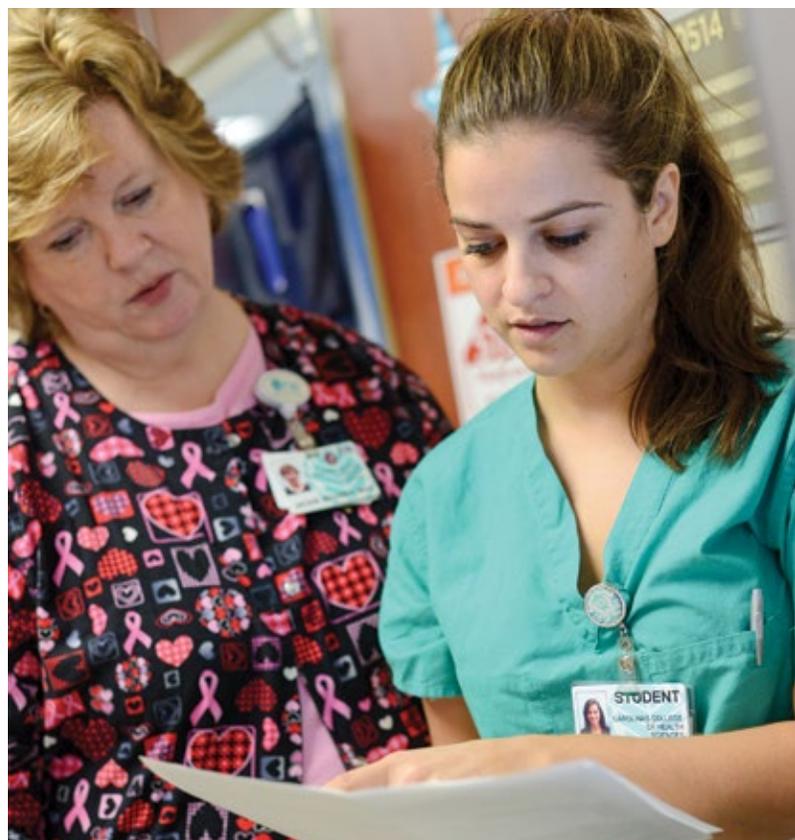
How will our future healthcare workforce continue to successfully adapt to a rapidly expanding body of knowledge? To technological innovations? With massive, incessant change?

I believe that we will keep pace and cope through a revision of our approach to education. All student members of our future workforce will still need to master the basics of their individual fields; however, their primary job as students will be to learn how to learn – to learn how to readily adapt to evidence-informed decision-making, and to learn how to work in teams.

Learning how to learn means understanding that we won't always know everything necessary to make a decision – but instead, knowing where and how to immediately access that information. This will develop as a technology-enhanced skill, but it will require more than the simple ability to perform an online search. The health worker of the future will need the ability to rapidly assess the quality of the information and know how to act upon it without introducing error, harm, the resistance of colleagues or the concern of patients.

Students must cultivate the ability to abandon information sets that become irrelevant and to listen to teammates that may hold more current knowledge. Working in teams means developing the ability to gently guide one another to correct decisions while retaining the confidence of our patients. There will be no room in the future for a captain-of-the-ship mentality in providing health services.

Our future colleagues must know that while technology will enhance our lives, we cannot let it



Our field is based in human-to-human interaction. It is conducted by listening to one another, fostering empathy and focusing on ethical decision-making.

rule our careers. Our field is based in human-to-human interaction. It is conducted by listening to one another, fostering empathy and focusing on ethical decision-making. These human traits will never be supplanted by technology. We must take care to teach them, exercise and perfect them. For in these skills lies the ability to remain connected to purpose, to hold a sense of purpose and to resist the pressures that culminate in burnout.

*By Michael Rublen, MD, MHCM, FAAP, FACHE  
Vice President, Medical Education  
Director, Charlotte AHEC, Atrium Health*



Healthcare is one of the most complex industries worldwide. It's in a state of constant change, ever evolving to keep up with the world around us. Policy changes are happening faster than providers can implement them. So how do we keep up? How do we ensure that our patients receive quality care, regardless of the reforms coming from DC? And how do we prepare our students when the environment is constantly changing?

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The

# EVOLVING HEALTHCARE

E N V I R O N M E N T

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## *Shifting to Value-Based Care*

**H**ere's a snapshot of what we're facing here in the United States: In 2016 we spent \$3.3 trillion on healthcare, according to the Centers for Medicare and Medicaid Services. That translates to \$10,348 per person. (For comparison, only four nations across the globe have a gross domestic product reaching \$3 trillion. And Switzerland, the second highest healthcare spender in 2016, averaged about 31 percent less per person than we did.) Meanwhile, our national budget deficit is at an all-time high. We have an aging workforce, with an estimated 10,000 baby boomers being introduced into Medicare every day. Populations are increasing, and people are living longer. There are more chronic diseases, yet we are facing a shortage of healthcare professionals.

We have more healthcare tools at our fingertips, but using them only adds to the already mounting costs. It doesn't take an economist to realize that this model is not sustainable.

So healthcare reforms are forcing change. Reimbursements have moved from volume-based to value-based, pushing some risk and responsibility to the provider level. Now, to be successful we have to ask the right questions: What's working? What's not working? How can we control costs and reduce waste? What's the right solution for each patient? And how do we accomplish all of this without sacrificing quality or outcomes?

Ultimately, the question is this: How do we drive value?

"As we work to simultaneously improve quality of care and value of care, we're revisiting our processes to see if there's solid evidence, or just habit."

**- DR. DEREK RAGHAVAN**  
**PRESIDENT, LEVINE CANCER INSTITUTE**



### **Boosting Efficiencies**

When reimbursements were volume-based, providers were paid for their services, period – whether tests, images, procedures or simply filling hospital beds. If a Medicare patient was discharged from the hospital only to be readmitted a week or two later, the hospital would be paid for a second time. Today, the government no longer funds Medicare readmissions within 30 days of discharge – and the number of readmissions has dropped exponentially. Reforms like this one are providing an incentive to get it right the first time.

"Today the economic imperative to think about how we care for people is front and center, and there is significant momentum," says Ruth Krystopolski, senior vice president of population health for Atrium Health. "Instead of being paid for each service, we're allotted a bundle of dollars to spread across a patient's care as we see fit. It's forcing us to look more closely at the pathways we choose."

### **Challenging the Status Quo**

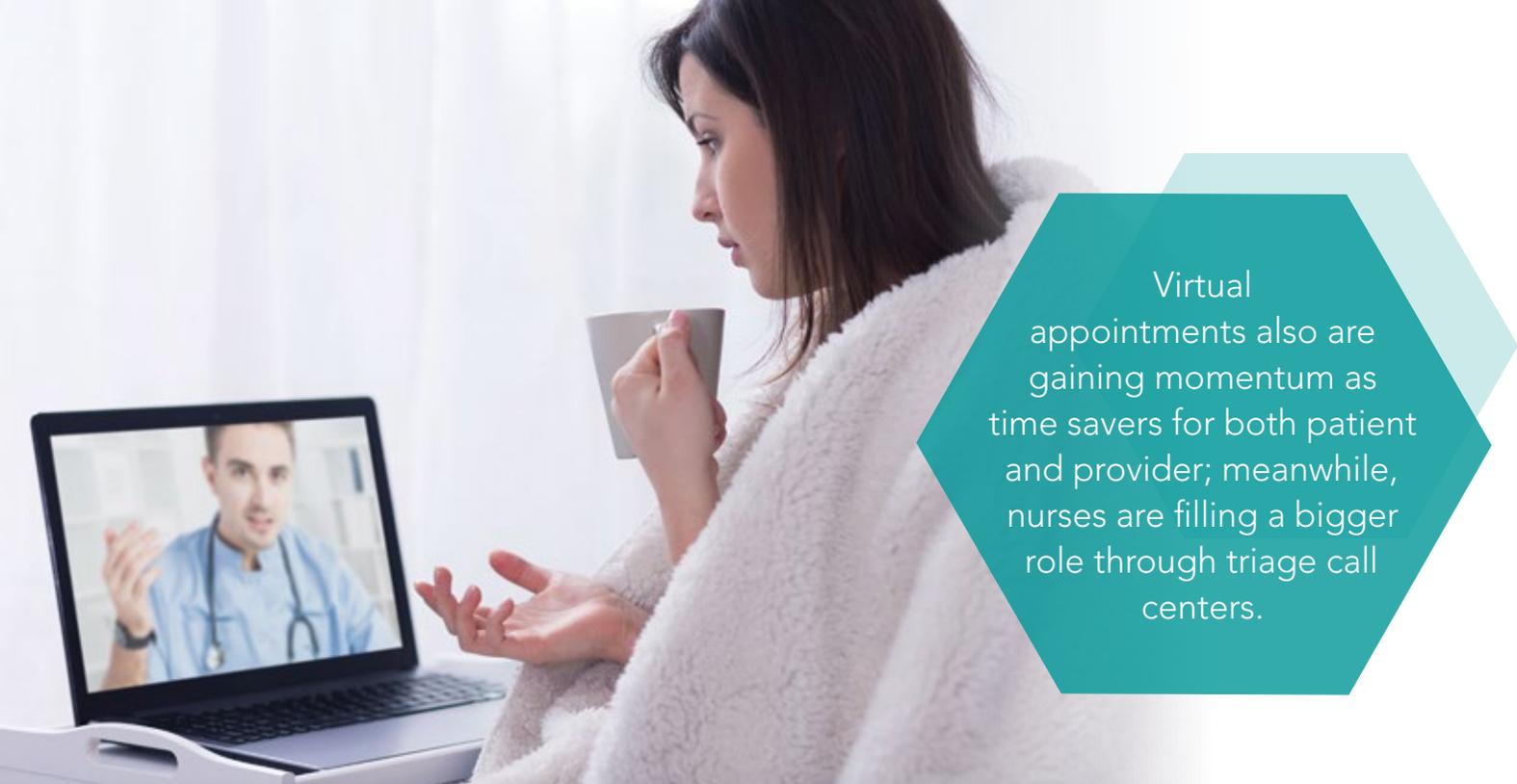
Our providers are driving value by reviewing pathways and looking at hard evidence. "We've had to retrain ourselves to think differently about affordability," says Derek Raghavan, MD, PhD, FACP, FRACP, president of Levine Cancer Institute. "The fact that you can do something doesn't always mean you should. Will it make the patient's life better? Will they live longer? Is it worth the resources?"

### **Levine Cancer Institute is structuring care protocols through Electronically Accessible Pathways (EAPs).**

In working to develop the best evidence-based approach, healthcare teams are determining what's working, what's not working, where a clinical trial will best serve the patient – and when certain tests or treatments are just wasting a patient's time and money. Then, algorithms are developed to share best practices via the intranet. "We're actually discouraging providers from doing things outside of the standard of care. Because when there is evidence to prove that a certain course of treatment works and is affordable – there's value in that."

### **Making Healthcare More Accessible**

Atrium Health has made considerable investments in broadening our physical reach in an effort to become more accessible to our rural communities. "Where you live shouldn't influence how you're treated," says Dr. Raghavan.



Virtual appointments also are gaining momentum as time savers for both patient and provider; meanwhile, nurses are filling a bigger role through triage call centers.

“If you look at outcomes, people in tiny hamlets have universally worse results than people who live closer to big cancer centers. And that’s pretty sad. So we now have 25 branches scattered around North and South Carolina. These pathways allow someone from a small hamlet to get exactly the same quality of care they’d get here in Charlotte.” These satellite clinics are bringing down costs while improving quality of care.

Virtual appointments also are gaining momentum as time savers for both patient and provider; meanwhile, nurses are filling a bigger role through triage call centers. In both scenarios there is opportunity for a healthcare dialogue, where patients are able to express concern and providers can ask all the right questions to determine appropriate next steps. There’s also an opportunity for greater efficiency here.

“Historically, patients have relied heavily on their primary care and specialty physicians. We’ve learned over time that physicians can provide that care more effectively and efficiently in teams,” says Mary N. Hall, MD, chief academic officer of Atrium Health. “There aren’t enough physicians to help each patient make each decision. And even if there were, that model would fail because it’s too expensive, and because physicians are not the best qualified to manage each problem. A comprehensive healthcare team is crucial.”

#### **Making Healthcare Collaborative**

Whole-person health and wellness calls for a team approach. Physicians, advanced clinical practitioners

and nurses need the support of pharmacists, dietitians and behavioral health experts, as well as other specialists depending on the patient’s needs. “Pharmacists are such a partner for us,” says Dr. Hall. “They are just as likely to not recommend a drug as they are to recommend one. And they have always been about reducing waste.” Dietitians also are integral to the team, as they arm patients with the tools they need to be successful when they return to their own communities. But until quite recently, behavioral health was the big missing piece.

“In truth, we’re treating a whole person – not just the physical aspect,” says Martha Whitecotton, RN, MSN, FACHE, senior vice president of behavioral health services for Atrium Health. “If a patient’s mental health is out of sync, it’s going to knock their physical health out of sync – and vice versa.”

#### **Integrating Behavioral Health Services into Primary Care**

Atrium Health has invested greatly in a large-scale pilot to integrate behavioral health services into primary care. “People are very comfortable with their primary care physicians (PCP). They trust them, and through this partnership, we can intervene early in a patient’s mental illness,” says Whitecotton. Today patients are being screened for mental illness during primary care appointments, and any behavioral health treatments or therapies are delivered in partnership with the PCP. “This team approach to patient care allows the physician to remain at the helm, and with the support

of the team the primary care provider feels confident in managing the behavioral health diagnosis. So in a sense we're taking care to where the patient is, whether in the doctor's office or through e-visits. Patients are much more likely to engage in treatment if their primary care doctor is involved."

If an issue arises during an appointment, behavioral health specialists (BHS) can be on-screen via Skype within three minutes, able to join the appointment and interact with the patient in real-time. This affords the patient specialty care in a crisis while freeing the PCP to continue with other patients. This integration has generated positive outcomes and received national recognition, including the 2017 Excellence in Whole Person Care Award, presented by the National Council for Behavioral Health. Our BHS specialists also share best practices with other healthcare systems during a monthly webinar, which consistently draws between 12 and 20 participants from other healthcare systems.

"Integrating behavioral health services into primary care has demonstrated effective results in improving the overall health of the patient and driving down the utilization of high-cost services, like emergency department and inpatient care. Really, this is the essence of value-based care," says Whitecotton. "Our belief is that the return on investment will come down the road, because we'll be able to keep folks healthier and meet the goals and get paid through the value-based system." After all, mental health has a very direct effect on physical health. It's reasonable that a person in a strong

mental state will have an easier time managing diet and exercise and making proactive health choices.

### Focusing on Wellness

In the business of healthcare, nothing is quite as efficient as keeping our populations healthy in the first place. "We will not be successful in a value-based payment system if we are not focused on overall wellness," says Whitecotton. "If you can triage populations 'upstream' and keep them from needing more acute levels of care, it keeps us open to care for folks who do need that kind of care."

Education programs and community screenings for diabetes, obesity, breast cancer, colon cancer – even lung cancer – have helped to identify patients' needs much earlier than if they'd waited to become symptomatic. "Samsung developed the first mobile low-dose CT lung cancer screening unit, and in our first 100 underserved and isolated patients we found five operable lung cancers," says Dr. Raghavan. "The result would have been far different if not for the implementation of this novel approach to community screening. Isolated and underserved populations rarely present with early stage, potentially curable lung cancer if screening is not used."

"Getting out in the community really empowers us, and not just clinically," says Maureen Swick, PhD, MSN, RN, NEA-BC, senior vice president and system nurse executive for Atrium Health. "Ensuring patients' health literacy is so important. We tend to speak in a language that we understand, but we need to be able to speak in a language that our patients understand. And if we can have that conversation in their communities – all the better."



"Getting out in the community really empowers us, and not just clinically. Ensuring patients' health literacy is so important. We tend to speak in a language that we understand, but we need to be able to speak in a language that our patients understand. And if we can have that conversation in their communities – all the better."

**– MAUREEN SWICK, PHD, MSN, RN, NEA-BC  
SENIOR VICE PRESIDENT AND SYSTEM NURSE  
EXECUTIVE, ATRIUM HEALTH**

“It behooves all of us to get to the patient instead of relying on the patient to get to us. We have to meet them where they are. It’s the right thing to do!”

– **MARY N. HALL, MD**  
**CHIEF ACADEMIC OFFICER, ATRIUM HEALTH**

“It behooves all of us to get to the patient instead of relying on the patient to get to us,” says Dr. Hall. “We have to meet them where they are. It’s the right thing to do! And usually providing the right form of care in the right place gets you the best outcome.”

**Alleviating Disparities**

Recent research by the Population Health Institute of the University of Wisconsin at Madison found that clinical care accounts for only 20 percent of a person’s health and wellness. The other 80 percent is impacted by social determinants like air quality, physical activity, safety, poverty, diet/access to healthy foods, employment and health literacy. Factors like these have long been considered outside of our reach. But now, healthcare systems are starting to be more intentional in that space, considering the challenges communities face and how we can work with other community partners to address those needs.

“I can give you the best care possible, but if I send you back to your old environment, it’s probably going to be hard to manage your disease,” says Alisahah Cole, MD, system medical director of community health for Atrium Health. “We’re starting to get very creative in keeping our communities healthy.” In 2016, Atrium Health (then Carolinas HealthCare System) completed a Community Health Improvement study focusing on social determinants of health across 10 counties in North and South Carolina. The findings showed five consistent areas of concern: tobacco use, obesity (adult and pediatric), access to care (primary care, mental health and dental), substance abuse and mental health, and social and economic indicators. Utilizing this data, Atrium Health partnered with Novant Health, the Mecklenburg County Health Department and UNC Charlotte to form the ONE Charlotte Health Alliance. This new collaboration will focus on improving advanced primary care access in communities that have significant social challenges.

For the next three years, food insecurity will be a major focus, with the help of community partners like Second Harvest Food Bank, Loaves & Fishes and other faith-

based partners. “Patients are actually being screened for food insecurity during hospital stays, thanks to money from the Duke Endowment,” says Dr. Cole. “Those that qualify are averaging \$197 per month in food benefits – and showing a significant reduction in hospital readmissions.”

Screenings are being instituted for the other social determinants as well, including financial strain, social isolation and transportation. Clinicians expressed concern with linking patients to resources once these screenings are complete, and now a brand new Community Resource Hub is freely available to anyone at [CarolinasHealthCare.org/CommunityResourceHub](http://CarolinasHealthCare.org/CommunityResourceHub). Simply enter a zip code and view the categories to see resources that are available in each area. “We’ve also taken steps to keep communication lines open with our community partners once a patient has left our care,” says Dr. Cole. “With a patient’s consent, we can follow up to find out whether a patient took advantage of the free transportation, or followed through with a referral. It creates a more holistic team approach. It helps with the transition of healthcare, and it keeps us asking the right questions: How can we work together better, whether the school system, the YMCA or our faith communities, to keep our populations healthy?”

**Surviving – and Thriving – in the Evolving Healthcare Environment**

Healthcare’s Triple Aim is driving everything we do: improving the health of populations, enhancing the experience of care for individuals, and reducing the per capita cost of healthcare. It only makes sense that healthcare is ever evolving – those goals cannot be met without constant change, constant improvement. “We are a community asset,” says Krystopolski. “It’s our responsibility to ensure that we’re using this community asset to the best of our abilities, and that we’re being good stewards of the resources. How can we be efficient? Impactful? We have an obligation to care for our community, and if we can’t be financially sustainable, we can’t fulfill our mission. There are millions of people in our region that are counting on us.”

As for preparing our students to succeed? We couldn’t be better positioned to do so, with our System providing the entire spectrum of care, as well as cross-disciplinary opportunities for interprofessional education. “As we bring different types of students together to learn from and with each other, we will be producing world-class healthcare providers,” says Dr. Hall.

*By Brooke Neal. Brooke is a freelance writer with extensive healthcare industry experience. She works closely with Atrium Health on a regular basis.*



# THE LEARNING SYMPOSIUM

DELIVERING PATIENT-CENTERED CARE IN AN EVOLVING  
HEALTHCARE ENVIRONMENT

MONDAY, OCTOBER 15 • CAROLINAS COLLEGE OF HEALTH SCIENCES

Join Carolinas College and our community partners for this inaugural event offering the greater Charlotte healthcare community access to thought leaders and best practices on delivering excellent healthcare. Designed to bring together healthcare practitioners, educators and consumers, The Learning Symposium features a keynote address by Dr. Susan B. Frampton, president of Planetree International and breakout sessions hosted by a select group of local healthcare professionals. Through dialogue and discovery, this solution-based event will explore innovative strategies that can be employed to improve healthcare and the patient experience.

**HISTORY:** The Learning Symposium is the conception of Elinor Caddell, a 1944 graduate of Charlotte Memorial Hospital School of Nursing (precursor to Carolinas College). Ms. Caddell's career in nursing touched all levels of nursing education in North Carolina, shaped the careers of thousands of nurses and, through them, touched the lives of an untold number of patients. She earned her bachelor's and master's degrees from Duke University and was a faculty member at the Charlotte Memorial Hospital School of Nursing, Duke University and UNC Charlotte, where she helped start the nursing program. The Learning Symposium is inspired by Ms. Caddell's passion for education, her philosophy of caring, compassion and character, and the belief that evidenced-based patient care is the noblest pursuit of the practitioner.

**PLANNING COMMITTEE:** The Learning Symposium is sponsored by Carolinas College of Health Sciences and coordinated by a planning committee representing the healthcare community and clinical healthcare education.

## PLANNING COMMITTEE MEMBERS:

Elinor Caddell (Honorary Chair)  
Hampton Hopkins, Carolinas College (Chair)  
Eric Anderson, Atrium Health, Graduate Medical Education  
Lori Bequette, Carolinas College  
Dena Evans, UNC Charlotte, School of Nursing  
Peggy Harris, Atrium Health, Diversity and Inclusion  
Ruth Hedgpeth, Central Piedmont Community College,  
Health and Human Services  
Lanny Inabnit, UNC Charlotte, Kinesiology and  
Respiratory Therapy  
Laura Leach, Atrium Health, AHEC Library  
Ruthie Mihal, Carolinas College  
Tama Morris, Queens University of Charlotte,  
Blair College of Health  
Rebecca Schmale, Atrium Health, Learning and  
Organizational Development  
Joann Spaleta, Atrium Health, Charlotte AHEC  
Rhonda Weaver, Cabarrus College of Health Sciences,  
Medical Imaging

MORE INFORMATION TO COME VIA MAIL OR EMAIL.



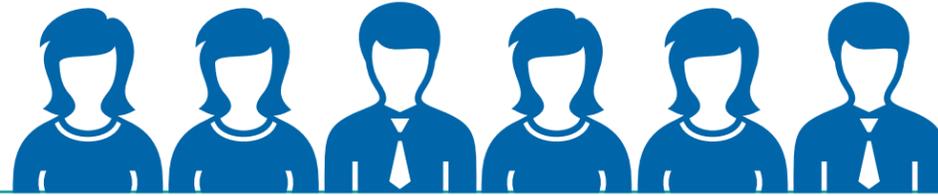
**EDUCATE  
ENGAGE  
EMPOWER**

2017 ANNUAL REPORT





## Who made us GREAT



**593** STUDENTS  
Total Individual Students Enrolled in 2017

**716**  
Continuing Education Students Completing Courses

**446**  
Students Enrolled in Fall 2017



**331** New Students Enrolling in 2017  
27% Minority | 8.5% Male  
23 Median Age

**86** FACULTY & STAFF  
Total Number



**57** FACULTY  
47% Full-time  
53% Part-time / adjunct

## Lifetime Advantage of CCHS Education

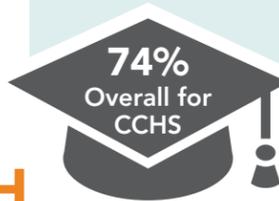
**\$49,800**

Median Salary of Graduates Who Received Federal Aid 10 Years After Entering CCHS / 5% increase

Source: [Collegescorecard.ed.gov](http://Collegescorecard.ed.gov)

### COMPARISONS

Duke – \$77,900	UNC-Charlotte – \$42,700
Wake Forest – \$60,200	Queens University of Charlotte – \$37,600
UNC-Chapel Hill – \$54,100	Wingate University – \$40,400
NC State – \$49,300	Central Piedmont Community College – \$26,300
<b>Carolinan College of Health Sciences – \$49,800</b>	High School Diploma Only – \$25,000



### CCHS Financial History: 4-Year Trend

	2014	2015	2016	2017
REVENUE	\$8,416,631	\$8,590,847	\$8,522,104	\$8,884,623
EXPENSE	8,378,577	8,499,895	8,386,840	8,618,518
OPERATING MARGIN	-\$741,047*	\$90,952	\$435,264**	\$266,105

\*Bad debt reserve was increased by \$779,101 based upon audit recommendations.  
\*\*Bad debt reserve was decreased by \$300,000 based upon financial services review.

### CCHS Advancement History: 4-Year Trend

	2014	2015	2016	2017
ADVANCEMENT FUND	\$585,578	\$581,790	\$679,281	\$811,335
CAROLINAS ENDOWMENT	1,614,492	1,600,364	1,806,228	2,193,831
TOTAL FUND BALANCE	\$2,200,070	\$2,182,154	\$2,248,509	\$3,005,166

## Small School Advantage; HUGE Results

**18** Average Class Size



**5:1** STUDENT TO FACULTY RATIO

STUDENT TO FACULTY RATIO

## HIGH GRADUATION RATES

Graduating within 150% of expected completion time



PASS RATE for first attempt licensure/certification

Programs with 100% pass rate: Histotechnology, Medical Laboratory Science, Radiation Therapy, Radiologic Technology

**SATISFACTION WITH CCHS:**  
Graduates: 4.5 (out of 5), Alumni: 4.6 (out of 5)  
Employer: 4.4 (out of 5)

Employer satisfaction with preparation:

**98.8%** would hire another CCHS graduate



ONLY **3.3%** of Students Defaulted on Federal Loans within 3 Years of Leaving College  
National Average: 11.5%



**85%+ Graduation Rate:** Histotechnology, Medical Laboratory Science, Nursing, Radiologic Technology

Programs with higher pass rates than national average: Histotechnology, Medical Laboratory Science, Nursing, Radiation Therapy, Radiologic Technology

**93%** Job Placement Rate In Field within 6 Months

**89%** of those jobs were within Atrium Health



To learn more about Carolinas College of Health Sciences,  
visit our website at [CarolinanCollege.edu](http://CarolinanCollege.edu).

1200 Blythe Boulevard • Charlotte, North Carolina 28203 • 704-355-5043

# DESTINATION 2020

As we embark on the second year of our Destination 2020 plan, CCHS has much to be proud of. Our continued focus on growth, value and affordability has the college well positioned to reach our destination points by the end of the year 2020. We are making this happen through the hard work of a dedicated team of faculty and staff, a strong population of students and alumni, and a commitment to becoming fully integrated into the fabric of Atrium Health.

## GROWTH

**Growing to be the first and best choice for healthcare education, Carolinas College is:**

- » Expanding retention initiatives to support existing student success.
- » Working collaboratively with Cabarrus College of Health Sciences and Medical Education to offer programs in alignment with the future of Atrium Health.
- » Maximizing enrollment in existing programs.

## VALUE

**Transforming education valued by students, alumni and employers, Carolinas College is:**

- » Integrating contemporary healthcare concepts into college curricula.
- » Streamlining processes and developing standard operating procedures.
- » Enhancing diversity and inclusion.

## AFFORDABILITY

**Increasing the affordability of a CCHS education, Carolinas College has:**

- » Increased the endowment, now valued at over \$3 million, to support student scholarships and long-term operational expenses.
- » Restructured educational programs to focus on areas of growth in clinical laboratory sciences, nursing and radiologic sciences.
- » Identified resources to support the future success of our students and graduates.

The driving force behind all of this is our commitment to educating, engaging and empowering professionals for an evolving healthcare environment. Together, we will continue to create the future of Carolinas College of Health Sciences.



# Carolinas HealthCare System is Atrium Health

On February 7, 2018, Carolinas HealthCare System announced its decision to carry forward the mission of the organization with a new name – Atrium Health. Learn more about the new name, what remains the same, and how the organization arrived at this moment in its history.

“Today, I’m proud to say we’re known as one of the nation’s leading healthcare organizations,” Atrium Health President and Chief Executive Officer Gene Woods says. “Each and every day I have the privilege of witnessing our mission to improve health, elevate hope and advance healing – for all.”

## Planting the Seed

Our organization has never shied away from change. Shortly after opening our doors, our leaders helped form the foundation of what would become the U.S. Army’s 38th Evacuation Hospital Unit. This military hospital unit was made up of civilian physicians, nurses and business leaders who felt compelled to serve their country by caring for the sick and injured during World War II.

In the decades that passed, our organization began to blossom. We weathered the storms of change and, like a mighty oak, our roots grew deep, reaching

even more communities. We became a destination for patients with some of the most severe injuries and complex medical cases, and we provided both compassion and world-class care.

We know that providing the best care can no longer be limited to traditional care settings or geographical borders. Wherever there was a need, we rose to face the challenge: cancer, heart care, children’s care, surgery and transplant, behavioral health, and rural care. When the scope of medical care began to change, we led the way, helping to transform our communities by keeping them healthy – not just taking care of them when they became sick or injured.

## The Gathering Place

Since our inception, our name has been tied to our region. And during this time, it has been a source of pride for each of the communities we serve. And the Tree of Life, our organization’s most recognizable symbol, is more than just a logo. Because of its



## CCHS Happenings

### Faculty Accomplishments

Alisha Borchardt, clinical coordinator for the radiologic technology program, received her Master of Science degree in Instructional Technology from Fort Hays State University in December 2017.

Megan Brazelton, clinical faculty for the nursing program, received her Master of Science degree in Nursing in the Nurse Educator track from Chamberlain University in December 2017.

Dr. T. Hampton Hopkins, president, was named a Pillar of the Profession in March by NASPA-Student Affairs Professionals in Higher Education. This is a lifetime achievement award.



Alisha Borchardt



Megan Brazelton

seasonal growth and renewal, the Tree of Life symbolizes both the preservation and regeneration of life – principles that have always guided our commitment to our patients.

To undergo a name change, it had to be done so with purpose. We would not consider an evolution of our identity that lacked conviction or vision. Our new name will not change who we are or our vision for our patients, communities and our system – to be the first and best choice for care. But it does help provide some clarity in our role as the center of health in the communities we serve.

We know that now is the time to improve health for more people. It's no secret that healthcare is changing. While we continue to lead the way in developing and delivering transformative methods of care, we are committed now as ever to providing the expert care that everyone deserves.

#### **A New Light**

When we started this process, we considered all possibilities. We knew we wanted our brand identity to be something that was rooted in our iconography. We knew that it had to convey both strength and warmth. We knew that it had to be instantly recognizable and easy to remember. Two things became clear through the process: We needed to keep our color, teal, and our Tree of Life – two representations that help define us in our communities.

# Atrium

## A PLACE...

filled with light

where each and every heartbeat begins

where connections are made

bringing health, hope and healing

## FOR ALL

Carolinas HealthCare System is

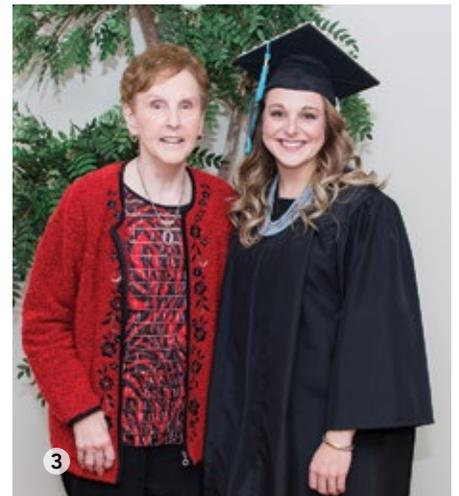


**Atrium Health**

# SEEN & HEARD

The College ended 2017 with celebrations and traditions. December brought with it fall graduation as well as the annual college decorating and toy drive for the Salvation Army. 2018 kicked-off with the College hosting multiple information sessions for the upcoming BSN program, new teammate teammate orientation for many recent grads and a moment in the spotlight for Sam Smith, CCHS student success coordinator.

1. Nursing faculty Tina Lamberta, Dr. Lindsay Munn and Saundra Hammond at graduation.
2. CCHS 2017 fall graduation was held on December 15 at Pritchard Memorial. The Honorable Vi Lyles, Mayor of Charlotte, was the keynote speaker.
3. Kathy Bruce (NUR '64) with the Kathy Bruce Core Values Scholarship recipient and December nursing graduate, Madison Gross.
4. CCHS teammates decorate the College for the holidays and donated TONS of toys for the Salvation Army's Christmas Bureau to help local families.





5



6



7



8



9

5. Nursing students participated in the annual Commitment to Caring ceremony where they ask a loved one to present their college pin during a special ceremony.
6. CLS faculty, Cyndie Hobson teaches microbiology using a new hi-tech microscope with a digital camera attached.
7. Kenielle Albany facilitated various information sessions about the new CCHS RN to BSN bridge program.
8. Strong representation of fall CCHS nursing grads on March 7 at the Atrium Health nursing orientation for new teammates.
9. CCHS Student Success Coordinator, Sam Smith (pictured far right) was invited to appear on FOX 46 GOOD DAY Charlotte to talk about the importance of volunteering, and sharing your time, no matter how busy life can be. It was part of the #showyourgood initiative for SHARECharlotte.

# GRADS *on the go!*

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## Former Patient Becomes Nursing Standout

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Courtney Rosenthal | Nursing, Class of 2012

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*"I am a patient-turned-caregiver. And I'm forever grateful for what CCHS has given me. I hope to someday return all the amazing gifts it has given me."*

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**"I**t's continually amazing to me that I am a nurse today, much less a nurse in the surgical trauma ICU at Carolinas Medical Center," says Courtney Rosenthal, a 2012 CCHS nursing alumnus. The achievement means so much more since Courtney was once a patient herself.

During her sophomore year at The University of North Carolina at Chapel Hill, she struggled with a bout of acute mental illness. It was during this time that Courtney experienced firsthand how powerful a nurse's healing hand can be. Newly imbued with health and coping skills, she went on to earn her bachelor's degree at UNC. While she learned many things at school, the most meaningful was that she wanted to become a nurse.

After graduation, Courtney returned to Charlotte and applied to, what she described as, "the best nursing school around" – Carolinas College. She was determined to become a behavioral health nurse. The day her acceptance letter came in the mail was one of her proudest days.

During Courtney's time at CCHS, she found that she was most drawn to pathophysiology and the caring science. "I was humbled to graduate Magna Cum Laude, receiving the Award for Excellence in Behavioral Health Nursing," says Courtney. "During my preceptorship, I was thrown into the surgical trauma ICU (STICU) and realized I had found my nursing home."

After a wonderful first year of nursing spent in the progressive care unit, Courtney moved on to her dream job in STICU. Since then, she has completed her RN-BSN at the University of North Carolina at Wilmington and received the Award for Excellence in RN-BSN Education. Courtney has worked hard to become a Clinical Nurse III, a CCRN certified nurse, and an honoree included in the Great 100 Nurses of North Carolina in 2017. She even recently applied to graduate school.

Courtney returns to CCHS often to speak with behavioral health students to show that a full, healthy life is possible even with a mental health diagnosis. "I am a patient-turned-caregiver," she says. "And I'm forever grateful for what CCHS has given me. I hope to someday return all the amazing gifts it has given me."

# Alumni Day Trip: Divine Llama Vineyards

SATURDAY, MAY 19, 2018



**L**lamas and wine tasting? Why not? Join us for a day trip to the beautiful and unique Divine Llama Vineyards in East Bend, NC! We've arranged for a day that offers a little something for everyone: wine tasting, lunch and choose-your-own-adventure: relaxing and exploring the vineyard and views on your own, or participating in a one-hour guided llama trek.



## TRIP INCLUDES:

- » Transportation to and from Divine Llama Vineyards (Shuttle will leave from Carolinas College at 10 a.m.)
- » Lunch and Wine Tasting
- » Optional Llama Trek (additional fee)

### MUST REGISTER BY MAY 1

Cost: \$65 per person. \$95 per person with Llama Trek.\*

To register, contact Ruthie Mihal at 704-609-1542 or [Ruthie.Mihal@CarolinasCollege.edu](mailto:Ruthie.Mihal@CarolinasCollege.edu).

*Discounted rates made possible by a generous gift from the CCHS and MSON Alumni Associations.*

# “Nurses care to meet people where they are.”

– JOSEY HAMMOND, NUR '15

Meet Josey and Barbara Howie Blankenship, two CCHS alumni who answered the call to serve – in two very different and unique circumstances.



Josey took a gap year between high school and college to do missionary work in Uganda serving special needs children.

## Peru Missionary

A 2015 alumna of Carolinas College of Health Sciences, Josey Hammond has begun her nursing career in a far different setting than most. She lives in Peru as a practicing missionary, serving populations that traditionally have far less access to quality medical care than we do in the United States.

“Being a nurse here in Peru isn’t really heroic,” says Josey. “Certainly not glamorous. But it’s meaningful, and it’s worthwhile.” Some days Josey spends an hour helping a desperate mother get her sick child to take ibuprofen. Other days she’s pretending to be Spider Man, in hopes that a 5-year-old boy will keep his nebulizer mask in place. Many hours are spent simply filing paperwork, because the clinic has no computer system. And every day she struggles to speak Spanish.

Josey knows that her life as a missionary isn’t what most nursing students imagine of their future careers. “But we don’t become nurses for ourselves – for our own recognition, our own success or self-esteem boost. We become nurses because we care enough to put others first. We care to meet people where they are.” And that’s true whether the patient in need is in the NICU, on the surgical floor, in the emergency room, in a middle school infirmary – or on a dirt road in the Andes Mountains. Nurses answer a call to serve, no matter where they are.

“We may live in a fallen and broken world, but my faith leads me to believe that healing has a purpose, and we’ve been given a gift,” says Josey. “We’re part of the physical healing of this world, one person at a time. So I am grateful to be Spider Man for 20 minutes, because it holds meaning and purpose for a very special little boy.”

## End-of-Life Nurse for Reverend Billy Graham

After 51 years as a hospital nurse, Barbara Howie Blankenship, (NUR '67) retired. But little did she know, her nursing career wasn’t over yet. “I grew up in Buncombe County, near Billy Graham’s home,” says Barbara. “I watched him as a child. So in the later years of his life, when he needed some PRN staff to supervise his nursing care, I answered the call. I was honored and privileged to do so.”

For close to six years, Barbara worked an 8-hour shift two or three days a week, providing care for Reverend Graham in his own home. “It was wonderful,” says Barbara. “It was like being with family. He was such a gentle, caring soul. He had a heart for the Lord and a heart for people.” During her time with Reverend Graham, Barbara and her fellow caregivers enjoyed quiet conversations with him and shared quite a few laughs. He had a dry sense of humor, which she describes as both fun and surprising. “He had a wonderful, caring staff that loved him. He was our boss, but also our mentor. He was good to everyone.”

Thanks to Barbara and others like her, Billy Graham was able to spend his last years, months and days in his own home. He knew that he was in capable hands, and that his family members were receiving the support they needed. “People need care and encouragement,” says Barbara. “It’s a calling we answer as nurses. This is the end of my career, of course, but it’s wonderful to realize how much we’re still needed—especially in the most intimate settings, when people are at the end of life. We don’t ever give up caring for people. This is a job I will never be finished with.”



## EXPLORE THE LAND OF FIRE & ICE

*Iceland – 6 Days / October 19-24, 2019*

**M**ark your calendars and prepare for the trip of a lifetime! The 2019 Alumni Trip to Iceland will take place October 19 – 24. Discover the sites of Reykjavik’s city center before setting off to admire glaciers, geothermal marvels and the ethereal beauty of the aurora borealis.

Iceland develops a completely different appeal during the winter months. Occasional snowfalls make the landscape even more otherworldly, roaring waterfalls freeze into icicles, and the night sky often lights up with one of nature’s most staggering phenomena: the northern lights. Participants will enjoy a personalized flight, handpicked hotels, private transportation, an expert tour director, local cuisine with beer or wine, and tremendous sightseeing with local guides.

- To view complete itinerary or reserve your space, visit [cchs.grouptoursite.com](http://cchs.grouptoursite.com).
- Or call **Go Ahead Tours** at **800-438-7672** using reference group #64860531. For more information, contact Ruthie at 704-609-1542 or [Ruthie.Mihal@CarolinasCollege.edu](mailto:Ruthie.Mihal@CarolinasCollege.edu)

**Go Ahead**



Check out photos from past trips, traveler comments, trip announcements and more on Facebook.

# ALUMNI PATHWAYS



WE LOVE HEARING FROM OUR ALUMNI!  
SHARE NEWS BY CALLING OR EMAILING  
Pat.Lewis@CarolinasCollege.edu (704-355-2029)  
or Ruthie.Mihal@CarolinasCollege.edu (704-609-1542)  
or by sending a message to CarolinasHealthCare.org/  
CCHS-Alumni-Contact-Form.

## Class of 1994

**Tammie Heintzman (NUR)** resigned her position teaching NCLEX test prep at Kaplan Test Prep in California for the last 11 years. She is now back in North Carolina teaching at Chamberlain College of Nursing/DeVry University. Tammie composed the instrumental keyboard music CD that Carolinas College gave to all attendees of 2015 Homecoming.

## Class of 1996

**Erica Cirillo Brinkley (NUR)** is the clinical nursing education manager for the clinical practice and professional development department at the University of Maryland Medical Center-Midtown Campus. She began working at the midtown campus in January 2017, and held the interim position as manager from August to December 2017.

## Class of 2004

**Carrie Martin Berry (NUR)**, husband Jeremy and big brother Paxton welcomed baby boy Kyler in January 2018.

## Class of 2005

**Jane Bridges (NUR)** received her BSN from UNC Charlotte in August 2017. She is currently working for Levine Cancer Institute in the Hematology-BMT outpatient facility.

**Genteal Pelzer (NUR)** was recently appointed as the nursing director of the Heart and Vascular Institute for Presbyterian Medical Center. She has been part of the Novant Health team since 2001 and is an active member of the North Carolina Nursing Association, American Association of Heart Failure Nurses, Society of Vascular Nurses, and North Carolina Organization of Nursing leaders. Genteal is passionate about leadership as well as mentoring and growing other leaders.

## Class of 2006

**Georgia Gates (NUR)** is enrolled in East Carolina University's Doctor of Nursing Practice program with an anticipated graduation date of 2021. She is also engaged to Allen Anthony and planning to marry in the fall of 2018.

## Class of 2006 (continued)

**D'Anna Clark Helms (NUR)** completed her BSN and has begun work on her MSN at Gardner-Webb University.

## Class of 2011

**Charis Mitchell (NUR)** was awarded the 2017 Pinnacle Award from Carolinas HealthCare System (now Atrium Health). The Pinnacle Award was created to recognize, reward and promote the accomplishments of teammates who demonstrate extraordinary attention to the System's core values of Caring, Commitment, Integrity and Teamwork. The award is the highest accomplishment a teammate may receive.



## Class of 2015

**Alina Peck (RT)** married Robert O'Reilly on October 7, 2017.

## Class of 2016

**Suzanna Payne (NUR)** got engaged on October 20, 2017.

**BE A PART OF THIS LEGACY GIVING CIRCLE ...**

In 2015, Carolinas HealthCare Foundation announced the founding of the 1940 Society, a legacy giving circle established to recognize and celebrate those who have generously and thoughtfully included Carolinas HealthCare System in their estate plan.

**1940 SOCIETY**  
BENEFITING  
Carolinas HealthCare Foundation

For more information visit:  
[givecarolinas.org/legacygiving](http://givecarolinas.org/legacygiving)

**IN MEMORIAM**

Mary Moore Casale, NUR '56  
Barbara Patrick Norman, NUR '56  
Nancy Maness Gruber, NUR '58  
Nancy Haas Rhodes, NUR '65

## SHARE YOUR THOUGHTS

We'd love your feedback on the alumni magazine and the content. Feel free to email your thoughts on the magazine or particular articles and we will include your comments in the following edition.

Email [Alumni@CarolinasHealthCare.org](mailto:Alumni@CarolinasHealthCare.org)

## Errors and/or Omissions

*From the Fall 2017 issue*

**Page 31:** Donor Honor Roll / Linda F. Perkins, NUR '67; her generous gift should have been listed in honor of her daughters, Sharon and Samantha.

*We apologize for this error.*

## MARK YOUR CALENDAR

### UPCOMING ALUMNI EVENTS

#### FRIDAY, MAY 4

##### Spring Graduation

3 p.m., Pritchard Memorial Baptist Church

All alumni are invited to attend. Alumni outside of the milestone reunion classes listed below should please RSVP to Pat Lewis at 704-355-7030 or [Pat.Lewis@CarolinasCollege.edu](mailto:Pat.Lewis@CarolinasCollege.edu).

#### FRIDAY MAY 4 AND SATURDAY MAY 5

##### Milestone Decade Reunion Celebrations

Alumni from the classes of 2008, 1998, 1988, 1978, 1968, 1958 and 1948 will be honored during the spring commencement ceremony and with other activities throughout the weekend. More information will be mailed to alumni from those classes.

#### SATURDAY, MAY 19

##### Alumni Day Trip – Divine Lama Vineyard

See page 23 for details.

#### SUNDAY, JUNE 3

##### Alumni Brunch – Brio Tuscan Grill

4720 Piedmont Row  
Charlotte, NC 28210

Join us for a CCHS & MSON alumni brunch. A private room will be reserved for an informal self-pay brunch. Feel free to bring a guest. RSVP by May 27 to Ruthie Mihal at 704-609-1542 or [Ruthie.Mihal@CarolinasHealthCare.org](mailto:Ruthie.Mihal@CarolinasHealthCare.org).



#### FRIDAY, JUNE 8

##### Alumni Night at the Ball Park

7 p.m., BB&T Ball Park

CCHS alumni watch the Charlotte Knights take on the Lehigh Valley IronPigs from the lovely Atrium Health corporate suite at BB&T Ball Park. Invites will go out via email. A limited number of seats are available. Contact Ruthie – Phone/email in brunch listing.

#### JUNE 29 – JULY 9

##### Alumni Trip: Budapest, Vienna and Prague

Keep an eye on the CCHS & MSON Alumni Travel Group Facebook page for photos of the journey!

# LIFETIME & ANNUAL GIVING

*Lifetime Giving Levels have been established to recognize the generous, cumulative giving contributions of the College's donors. Lifetime giving levels are earned through cumulative gifts made to Carolinas College of Health Sciences.*

## **PRESIDENT'S CIRCLE – PLATINUM (\$100,000+)**

Elinor B. Caddell  
Carolinas HealthCare Foundation,  
The Cato Corporation  
Wayland H. Cato, Jr. Foundation  
The Duke Endowment  
The James J. and Angelia M. Harris  
Foundation  
Charles H. Stone Trust

## **PRESIDENT'S CIRCLE – GOLD (\$50,000–\$99,999)**

Carolinas HealthCare Auxiliary  
Sisters of Mercy of North Carolina  
Foundation, Inc.

## **PRESIDENT'S CIRCLE – SILVER (\$25,000 - \$49,000)**

Betty and Donald Anderson  
Hollandsworth Estate  
Lou and Jackie Pfeiffer

## **PRESIDENT'S CIRCLE – BRONZE (\$10,000 - \$24,999)**

Cornelia Edwards Anderson\*  
Mr. & Mrs. DeWitt Black  
Katherine Harrell Bruce  
Martin Cannon Family Endowment  
CCHS Alumni Association  
James W. Crawford  
Peter S. Gilchrist, Jr. Fund  
Dr. Cecil Givens  
Estate of Laura Johnston Guffey  
James & Nancy Day Hill  
Eve B. Hoover, PhD  
Kay A. Roderick  
The Servicemaster Company  
Dr. Ellen & Mr. Bob Sheppard  
Susan Poston Stricker  
Vanguard Charitable

## **LEGACY CIRCLE (\$5,000 – 9,999)**

Charlene M. Brackett  
Hazel Tuttle Borders  
Charlotte Area Educational  
Consortium  
Janet Hunt Clapp  
Alison E. Combs  
Ann A. Doolittle  
George W. Gaffney\*  
Lena Nash Johnston\*  
Lorraine Smith Pelletier

## **1940 SOCIETY**

Betty and Don Anderson  
Elinor Caddell  
Ann P. Miller Charitable Trust  
Irene Millroy\*  
Jacqueline and Louis Pfeiffer  
Earle Spaugh\*  
Charles Stone\*  
Susan and Jack Stricker

\*Deceased

*Annual Giving is the lifeline for building and sustaining Carolinas College of Health Sciences. Each year, hundreds of gifts from alumni and friends, come together and go to work immediately to deliver extraordinary opportunities for learning and discovery. The list below includes those who donated to Carolinas College of Health Sciences from January 1 to December 31, 2017. The College recognizes, appreciates and honors the generosity of these individuals. If your gift is not listed or listed incorrectly, please contact Pat Lewis at 704-355-2029 or Pat.Lewis@CarolinasCollege.edu.*

## **TEAL EXTRAORDINARY (\$1,000 +)**

Betty & Don Anderson, Former program  
chair; Betty Anderson Scholarship  
Anonymous, Phlebotomy Scholarship  
Mr. & Mrs. R. DeWitt Black, Friends of  
CCHS; Helping Hands Scholarship  
Carolinas Pathology Group, P.A.,  
Sautter Cepheid Protocol 156  
James W. Crawford, Friend of CCHS;  
Wilma Wright Crawford (NUR '51)  
Library Fund in her memory.  
Elekta, Inc., For Radiation Therapy  
Program  
Dr. Michael R. Haake, RTT Medical  
Director; CCHS Radiation Therapy  
School Fund

Jim & Nancy Hill, Jr., Jim & Nancy Day  
(NUR '67) Hill Endowed Nursing  
Scholarship; In honor of Linda Perkins  
(NUR '67)  
Christy A. Leyland, NUR '01; In memory of  
Charles Furr  
Martin & Susan McLaughlin, Friends of  
CCHS; McLaughlin Points of Light Gift  
Louis & Jacqueline Pfeiffer, Friends of  
CCHS; Louis & Jacqueline Pfeiffer  
Nursing Scholarship  
Susan Poston Stricker, RT '60; Susan  
Poston Stricker Scholarship  
Charles H. Stone Trust, Stone Scholarship

## **TEAL BOLD (\$500 to \$999)**

The North Carolina Baptist Foundation, Inc.,  
Shirley Black Scholarship (Mercy SON)  
Hazel Tuttle Borders, NUR '51  
Louise Long Cashion, NUR '58; In honor  
of the Class of 1958  
Homecare For The Carolinas, LLC, Friend  
of CCHS  
Eve B. Hoover, Friend of CCHS; Dr.  
Kathleen Revel Nursing Scholarship  
(NUR '48)  
Catherine L. Miller, RT '76; Susan Poston  
Stricker Scholarship  
Sara T. Munday, NUR '05  
Cathy C. Putnam, Friend of CCHS;  
Wilma Wright Crawford Lending Library  
Jeff Reece, NUR '97

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**TEAL STRONG (\$250 TO \$499)**

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Dr. & Mrs. Albert W. Benjamin, Friends of CCHS; Marilyn Gaffney Scholarship  
Janet Hunt Clapp, NUR '51  
Lucy J. Davison, RT '79; In honor of Ellen Sheppard and in memory of Jacob Jackson  
Kristina A. Earle, NUR '96  
Hampton Hopkins, President; In honor of Lori Bequette, Karen Lewis and David Cannon  
Timothy L. Ludwig, RT '94; Susan Poston Stricker Scholarship  
Tiffany C. McArthur, NUR '10; Matching Gift through Wells Fargo Community Support Campaign  
Linda F. Perkins, NUR '67; In honor of Ellen Sheppard, members of the Class of 1967 & her daughters Samantha and Sharon  
Marie Burns Robeson, NUR '54; In honor of Ellen Sheppard

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**TEAL PROUD (\$100 TO \$249)**

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Catherine Tucker Ashley, NUR '71; In honor of Erin Ashley Flitt (NUR '97)  
Lee Callicutt Abbott, NUR '63  
Robert B. Bates, Friend of CCHS; In memory of Charles Furr  
Cathy N. Battle, NUR '96  
Cynthia Allen Bean, MLS '81; MLS Program  
Letitia D. Bivens, NUR '12  
Barbara Howie Blankenship, NUR '67; In memory of Shirley Crabtree Kendall (NUR '67)  
Ryan W. Blanton, MT '06  
Katherine Harrell Bruce, NUR '64; Katherine Bruce Scholarship  
April Bunn, MT '00  
Mary Frances Coffey Bussey, NUR '64  
Elinor B. Caddell, NUR '44; Elinor B. Caddell Scholarship  
Laura S. Capranica, NUR '05; Ellen Sheppard Scholarship; In memory of my parents Catherine & Charles Seaver  
Kelly Carlisle, NUR '04  
Peggy Harrill Cherry, NUR '64; In honor of Elinor B. Caddell  
Virginia Stuart Cloer, NUR '51; Wilma Wright Crawford Lending Library  
Dorothy Blackburn Coble, NUR '48; In memory of Corene Moore Cannon (NUR '48)  
Brooke B. Crutchfield, NUR '07  
Lynn W. Crutchfield, NUR '67  
Rodney P. Currin, NUR '99  
Daphne Matthews Davis, NUR '54; In memory of James C. Davis, Sr.  
Wayne P. Diggs, Friend of CCHS; Marilyn Gaffney Scholarship  
Margie Coble Eddy, NUR '48  
Martha Cobb Ellinger, NUR '64; In honor of Ellen Sheppard  
Loudivene Williams Eubanks, NUR '58; In memory of Janice Blount Smith (NUR '58)  
Cerese B. Feagans, NUR '01  
Wendy D. Felker, NUR '11  
Virginia Robinson Fesperman, NUR '48  
Frances "Kay" Plyler Fischer, NUR '66  
Barbara Gregory Gabriel, NUR '66; In honor of Kay Plyler Fischer  
Amanda Graves, NUR '15  
Frances Lineberry Hair, NUR '48  
Nan Scarborough Ham, NUR '60  
Wendy L. Hartley, NUR '92  
Brittany L. Harwell, RT '14; Susan Poston Stricker Scholarship  
Williams and Cindy Haynes, NUR '95  
Linda L. Heinzer, NUR '03  
Eric R. Hiatt, NUR '95; In honor of Ellen Sheppard  
Cyndie James Hobson, MT '78; In honor of Kelly D. Shirley  
Jo Holbrook, NUR '93  
Ann Thornley Holland, RT '80; Susan Poston Stricker Scholarship  
Stacey L. Holman, NUR '10  
Jodie Huffstetler, RT '05; Susan Poston Stricker Scholarship  
Nathaniel Huggins, NUR '96  
Mr. & Mrs. Arthur Istrico, Friends of CCHS; In memory of Marilyn Gaffney  
Patricia Jetton, NUR '95  
Sue Hege Jones, NUR '67  
Lila Gilbert Kuehnert, NUR '47  
Meredith W. Large, NUR '05  
William E. Lowry, NUR '11  
Patty McCrary, RT '76; In honor of Susan Poston Stricker  
Susan M. McGann, RT '13  
Mr. & Mrs. Chuck McLucas, Friends of CCHS; In memory of Charles Furr  
Karen Metler, NUR '96  
Anthea C. Miller, NUR '93  
Jo Ann Shoaf Miller, NUR '54; In memory of Merle Chapman Hanna (NUR '54)  
Brice B. Mitchell, RT '10  
Claudia M. Mitchell, NUR '13; In memory of Ramira Mitchell  
Janice McNeely Morrison, MT '75  
Barbara F. Morton, RT '66  
Patti Moughan, RT '13  
Grace McCarter Neinast, NUR '46  
Sally J. Osterhout, NUR '96  
Arina L. Outlaw, NUR '15  
E. Sue Owen, NUR '03  
Margaret Yongue Painter, NUR '57  
Hilda Hine Patterson, NUR '54; In memory of Merle Chapman Hanna  
Marjorie McGinnis Pless, NUR '54  
Christine Lane Potts, NUR '64  
Marina Prannik, NUR '10  
Gail Falls Rogers, NUR '56; Elinor Caddell Scholarship  
Alva Goodman Sells, NUR '58  
Nancy Wilkinston Sigmon, NUR '64  
Timothy S. Sigmon, RT '83  
Joyce Lee Sledge, NUR '56; Elinor Caddell Scholarship

Jennifer L. Smalley, NUR '06  
Brandy N. Smith, NUR '07  
Mary E. Theiling, Friend of CCHS; In honor of Betty Anderson  
Eleonore H. Wanner, NUR '09  
Louise Lee Warren, NUR '53  
Julianne N. Williams, NUR '13  
Tammy H. Wilson, NUR '96  
Mr. & Mrs. Andrew J. Wood, Jr., Friends of CCHS; In memory of Charles Furr  
Janice Gibson Wright, NUR '51; In honor of the Class of 1951  
Conelia Williams Zeedick, NUR '58; In memory of Linda Patton Nance (NUR '58)

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**TEAL LOYAL (UNDER \$100)**

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Alexia Abbott, NUR '10  
Barbara Porter Allred, NUR '63  
Jennifer R. Anderson, NUR '16  
Anonymous, Friend of CCHS  
Shannon Bain, NUR '14  
Elizabeth L. Barnhill, NUR '06  
Katie A. Baron-Duncan, NUR '12  
Mr. & Mrs. John A. Beatty, Jr., Friends of CCHS; In memory of Charles Furr  
M. Ann Corl Beaver, NUR '55; Elinor Caddell Scholarship  
Janice N. Bellamy, CCHS Teammate; In honor of Ellen Sheppard  
Lori M. Bequette, CCHS Teammate  
Rebecca N. Blanchard, NUR '14  
Vicki L. Blazer, RT '74  
Carrie Boggess, NUR '14  
Catherine M. Borysewicz, CCHS Teammate  
Chip Bradley, NUR '13  
Dave Brar, MT '99  
MK Brennan, NUR '96  
Lisa G. F. Brians, NUR '14  
Jane G. Bridges, NUR '05  
Faye Cloninger Bridges, NUR '59  
Melissa Bromley, MLS '15  
Suzanne M. Brown, NUR '94  
R. Brooks Brunnemer, NUR '13  
Eleanor Connor Buckingham, NUR '65  
Taylor Buckner, NUR '13  
Lauren Bugbee, NUR '09  
Peggy Phillips Burdiss, NUR '62  
Jeanette DeWitt Carr, NUR '60; In memory of Chalmers R. Carr  
Anna Elizabeth Carroll, NUR '07  
Jared M. Cashel, NUR '11  
Nancy Lineberry Cathcart, NUR '59; In memory of Ann Howell Mosteller (NUR '59) and Mitzi Parrish Warfel (NUR '59)  
Freida Eubanks Catoe, NUR '59  
Audrea T. Chapman, CCHS Teammate  
Bertha Barber Chisholm, MT '71  
Cole Clark, NUR '14  
Libby Lewter Cole, NUR '59  
Shelley S. Collins, NUR '11  
Jennifer L. Connor, MT '10  
Kyle D. Cook, RT '11; Susan Stricker Scholarship

- Ann F. Cox, NUR '67  
 Chadwin Craven, NUR '15  
 Heidi Curette, Nursing student  
 Abigail Dario, NUR '16  
 Betty McAbee Davidson, NUR '54;  
     In memory of Merle Chapman Hanna  
 Gardenia C. Davis, ST '03  
 Jacqueline Davis, NUR '12  
 Helen Crawford Deal, NUR '52  
 Amy J. Delmas, CCHS Nursing Student  
 Cara J. Devine, NUR '12; In memory of  
     Stanley & T.D. Swenson  
 Rebecca A. Dewese, RT '73  
 Jacquelyn D. DiNunzio, NUR '08  
 Mackenzie Domske, NUR '16  
 Michael Dougherty, NUR '13  
 David A. Drevlow, NUR '05  
 Elsie Deese Dye, NUR '54  
 Mr. & Mrs. Thomas J. Eberle, Jr., Friends  
     of CCHS; In memory of Charles Furr  
 Libby Hunter Ebert, NUR '60; In memory  
     of Martha Elledge Myrick and all nurses  
     of Class 1960 who have passed.  
 Elizabeth A. English, NUR '07  
 Kim E. Eul, NUR '98  
 Paige M. Fain, MT '97  
 Mandy S. Ferguson, NUR '13  
 Angela M. Ferrell, RT '01  
 Bethany Folk-Middlebrook, MLS '15  
 Dina K. Forero, NUR '12  
 Stephanie L. Frey, NUR '08  
 Catherine C. Fulginiti, NUR '16  
 Michael L. Fusco, NUR '07  
 Aline M. Gaines, NUR '13  
 Trisha L. Garcia, NUR '12  
 Elizabeth C. Garmon, NUR '93;  
     In memory of Dianne Corder  
 Vivian Auman Gilliam, NUR '54;  
     In memory of Merle Chapman Hanna  
 Jamie Gleason, NUR '16  
 Andrea M. Goulet, NUR '13  
 Karen E. Green, NUR '15  
 Kimberly Greene, EMS '04  
 Teresa Greene, NUR '16  
 Richard D. Griffiths, NUR '06  
 Nancy Coffey Haas, NUR '55  
 Melissa Haber, NUR '13  
 Alesia D. Hamilton, NUR '16  
 Constance A. Hanckel, NUR '06  
 Edith Craver Harris, NUR '53  
 Frances M. Harris, NUR '06  
 Joanne Hart-Wright, NUR '92  
 Tracy M. Hayes, CCHS Teammate  
 Carolyn Baker Hefner, NUR '57  
 James H. Hermann, Jr., NUR '03  
 Margaret Finger Hester, NUR '63  
 Meredith S. Hirsch, NUR '00  
 Unek Hite, NUR '14  
 Doris Little Honeycutt, NUR '50  
 Jamie L. Howell, NUR '08  
 Cassandra Huneycutt, MT '09  
 Clay Ijams, NUR '11  
 Jonathan R. Jackson, RT '07, RTT '10  
 Christina James, NUR '15  
 Andrea Johnson, NUR '13  
 Kellie Karpovich, RT '16  
 Daria Kearse, NUR '14  
 Stacey T. Kern, NUR '14  
 D. Irene Kiker, NUR '56  
 Dawn C. Knight, NUR '11  
 Nicole Knost, MT '08  
 Edith M. Kpaeyeh, NUR '07  
 David Laird, NUR '13  
 Tina Lamberta, CCHS Teammate  
 Edith Posten Larsen, NUR '58;  
     In honor of Elinor Caddell (NUR '44)  
 Anna Grace Lassiter, NUR '11  
 Shontea L. Lawrence, CCHS Teammate  
 Megann N. Lay, NUR '10  
 Lucy G. Lee, MT '82  
 Karen A. Lewis, CCHS Teammate  
 Janette Smith Lowman, NUR '60; In  
     memory of Tom Lowman & in honor  
     of Darrell, Karen, Cheryl and Suzy  
 Karen E. Lucisano, Friend of CCHS  
 Shawn P. Lydon, NUR '13  
 Jennifer L. Mabry, MT '94  
 Janie V. McCloskey, CCHS Teammate  
 L. Michelle McCoig, NUR '07  
 Norma H. McEachern, Friend of CCHS;  
     In memory of Charles Furr  
 Rebecca J. McGinnas, RT '61  
 Mr. & Mrs. James E. McLain, Friends of  
     CCHS; In memory of Charles Furr  
 Dru Meier, NUR '93  
 Lee Ann Meshier, NUR '98  
 Ruth C. Mihal, CCHS Teammate  
 Mendel Miles, Friend of CCHS  
 Christi A. Milledge, NUR '14  
 Tara N. Miltner, Friend of CCHS  
 David T. Mitchell, NUR '07  
 Marilyn Lee Mitchum, NUR '62  
 Peggy Kiser Moore, NUR '61  
 Jamie B. Moore, MT '06  
 Margaret Thomas Morgan, NUR '58;  
     In memory of Barbara Woodall Norris  
     (NUR '58)  
 Phyllis Walters Mork, NUR '61  
 Kristy L. Morley, NUR '12  
 Sarah Moss, RT '11  
 Faye Cloer Mullis, NUR '56  
 Hana M. Munkittrick, NUR '15  
 Zachary J. Murphy, NUR '09  
 Nancy E. Murray, NUR '54;  
     Elinor Caddell Scholarship  
 Christine Gibson Nance, NUR '58  
 Ruby Poole Nance, NUR '48  
 Deronda Sellers Newsom, NUR '55  
 Megan W. Norris, NUR '12  
 Courtney D. Nuckols, NUR '07  
 Jane Harris O'Neal, NUR '57  
 Kristen Pacitto, NUR '16  
 Amy L. Palank, ST '09  
 Marjorie Reynolds Pappaioanou, NUR '63  
 Libby Stinson Patterson, NUR '55; In  
     memory of Ruth Vaughn Pugh (NUR '55)  
 Cynthia Peace, CCHS Teammate  
 Michelle Petersen, NUR '16  
 Peggy Snow Piccioli, NUR '53  
 Muriel Lemmine Pifer, MT '53;  
     In honor of Kathleen Yount (MT '53)  
 Primax Properties, Matching Gift in honor  
     of Joanna Putnam (Wilma Wright  
     Crawford's granddaughter)  
 Tonia J. Pritchard, NUR '02  
 Cheryl L. Pulliam, CCHS Teammate  
 Emilijane L. Raine, NUR '01  
 Mandi H. Raines, NUR '14  
 Cynthia R. Rape, NUR '98  
 Amanda L. Rebol, RT '12  
 Lucia Resende, NUR '11  
 Christine A. Ressler, NUR '12  
 Deborah R. Robinette, NUR '05  
 Kimberly R. Robinson, NUR '98  
 Courtney Rosenthal, NUR '12  
 Carolyn Caskey Rotman, NUR '63  
 Nina Roy, NUR '92  
 Lois V. Russell, NUR '61  
 Mary Spires Rynd, NUR '53  
 Shelley P. Scavo, MT '00  
 Lauren N. Schiavone, NUR '13  
 Alberta Wright Scoggins, NUR '59  
 Jill C. Scott, NUR '13  
 Kristin Scully, NUR '06  
 Courtney Seagle, RT '15  
 Marla W. Seifert, MT '92  
 Ellen Sheppard, President Emeritus; In  
     honor of Janice Gibson Wright (NUR '51)  
 Kelly D. Shirley, CCHS Teammate; In  
     honor of Betty Anderson  
 Joyce Fisher Short, NUR '66  
 Gertrude Meek Sigmon, NUR '49; In  
     memory of Atha Tucker Russell (NUR '49)  
 lashea Simmons, ST '15  
 Mary Ann Jordan Simpson, NUR '60;  
     Elinor Caddell Scholarship in memory  
     of Cecilia "CC" Plancon Waggoner  
     (NUR '60)  
 Shannon W. Sloan, CCHS Teammate  
 Elizabeth "Kit" Sluder, NUR '93  
 Jean Wray Small, NUR '64; In honor of  
     Patricia Flowers Hicks (NUR '64)  
 Morgan E. Smith, NUR '15  
 Samuel Smith, CCHS Teammate  
 Elizabeth T. Smith, NUR '01; In honor of  
     Sherlene Robinson (CCHS Teammate)  
 Lauren C. Smith, NUR '09  
 Marlene Poplin Smith, NUR '60;  
     In memory of Cecilia "CC"  
     Plancon Waggoner  
 Nicole P. Smith, NUR '08  
 Vera Thompson Smith, NUR '60;  
     In honor of all classmates of 1960  
 Monique Smith, NUR '13  
 Sofia Sparger, NUR '15  
 Hallie Sparrow, NUR '15  
 Emily P. Spencer, NUR '13  
 Cathleen A. Stenger, NUR '14  
 Mary Ann Dillard Stewart, NUR '51;  
     In honor of Elinor Caddell  
 Joshua M. Stiles, NUR '07  
 Alecia Strawn, NUR '06  
 Barbara R. Streit, RT '14  
 Alyssa Suarez, NUR '16

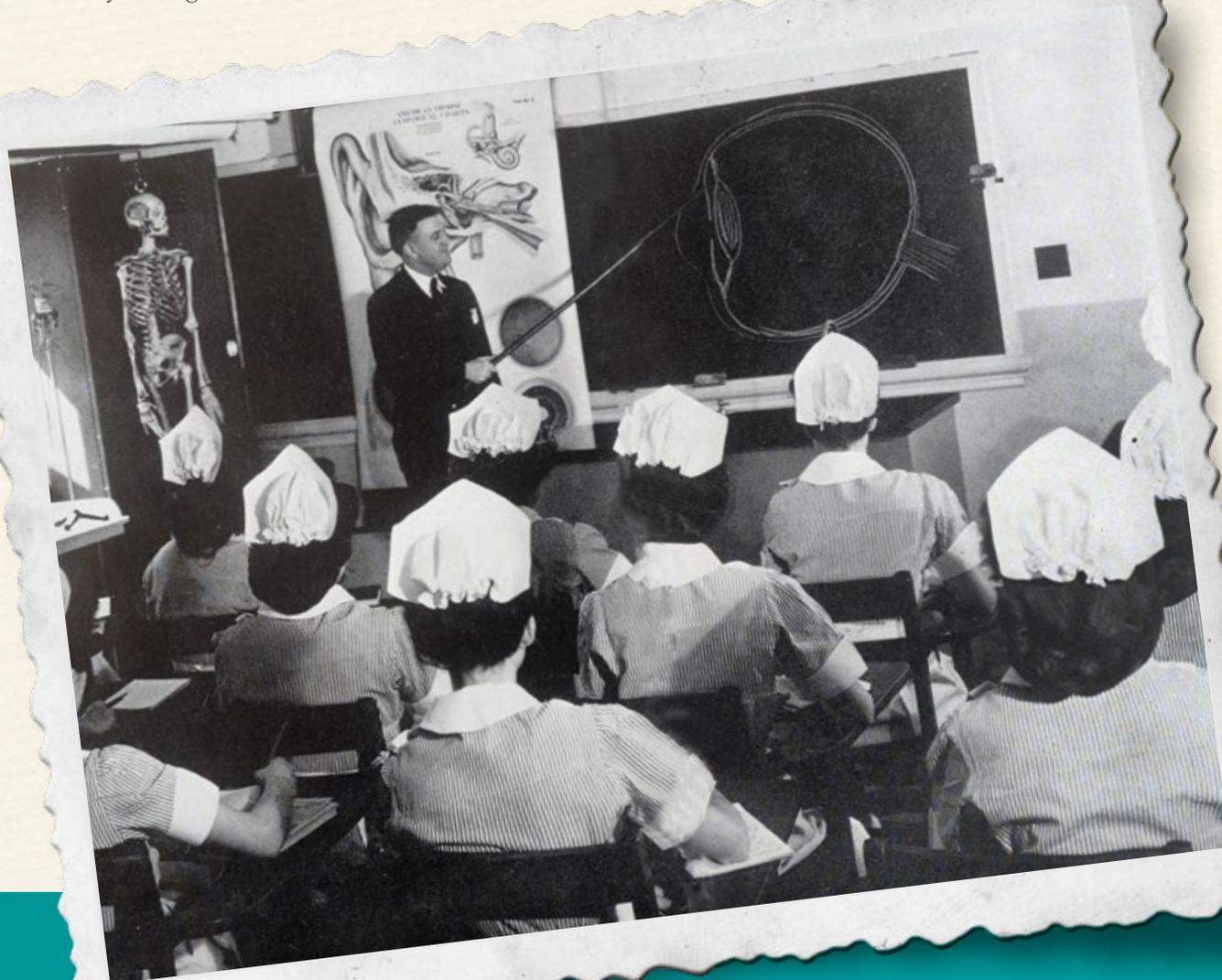
Marianne M. Sweitzer, NUR '15  
Anita Harris Taft, NUR '61  
Rachel M. Teague, NUR '16  
Carol L. Thompson, RT '92  
Nancy Allen Totten, NUR '66  
Katherine Stewart Townsend, NUR '51;  
In honor of Janice Gibson Wright  
Claudia Trower, CCHS Teammate  
Angelia K. Turner, NUR '94  
Laura T. Turpin, NUR '15  
Ashley M. Vernatter, MT '07  
Tracy L. Walling, CCHS Teammate  
Alice E. Ward, CCHS Teammate  
Margaret F. Ware, NUR '51  
Mary Earley Watson, NUR '62

Sue McRee Watson, NUR '53  
Michelle C. Webb, CCHS Teammate  
Elizabeth Webb, NUR '13  
Brenda F. West, NUR '62  
Margaret Parks Westmoreland, MT '71  
Frances Bass White, NUR '50  
Lexine Allen White, NUR '53; In memory  
of Emma Allen Gupton (NUR '48)  
Julia H. Whitmore, NUR '16  
Mr. & Mrs. Leonard J. Whitmore, Jr.,  
Friends of CCHS; In memory of  
Charles Furr  
Amy W. Williams, NUR '15  
Diane Williams, MT '85  
Jules Williams, Friend of CCHS

Lisa Williamson, NUR '14  
Benjamin J. Willis, NUR '09  
Ellen Beam Wilson, NUR '53  
Stacey W. Wilson, MT '95  
Andrea Wilson, NUR '16  
Jennifer S. Wilson, NUR '07  
Alice Hallyburton Wood, NUR '56;  
Elinor Caddell Scholarship  
Caroline D. Wrisley, CCHS Teammate  
Joshua Xiong, ST '11  
Kimberly G. Yarborough, MT '83  
Christopher Yen, NUR '16  
Melissa B. Yow, NUR '98

## PHOTOFLASHBACK

*Stroll down memory lane through photos from CCHS's history dating back to the 1940's.*



This is what nursing education looked like at Charlotte Memorial Hospital in 1946.



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