



# Historic partnership



## NRH and OU join forces

Norman Regional Health System Chief Nursing Officer Brittnei McGill, MSN, RN, CCRN (left) and OU College of Nursing Dean Julie Hoff, PhD, MPH, RN announced a new partnership this past week.

by Bobby Anderson, RN - staff writer

When Julie Hoff, PhD, MPH, RN first became dean of the Fran and Earl Ziegler College of Nursing she stressed the importance of higher education and healthcare facilities coming together for the common good of educating nurses.

Hoff took a major step in that direction last week as she was able to announce OU's Bachelor of Science in Nursing programs would be expanding

onsite into the Norman Regional Health System and Duncan Regional Hospital.

The partnership will create a satellite location of the College of Nursing at Norman Regional's two hospitals - Norman Regional Hospital and the Norman Regional HealthPlex - as well as Duncan.

Hoff said she looks forward to additional

partnerships in the future with other healthcare facilities.

"It benefits everyone," Hoff said. "There might be cultural things we need to work through but the state needs nurses that can lead."

Students entering into this program will

## PARTNERS

Continued from Page 1

not only get clinical experience at the hospitals, but they will also attend class in the Norman Regional Hospital Education Center.

Norman Regional will provide unique hands-on training.

Norman Regional Chief Nursing Officer Brittni McGill said the partnership is one-of-a-kind.

"I like that we can take the best of both organizations and make it into something that fits both people equally. It truly is a partnership," McGill said. "It's something we've created from scratch so it's ours to develop over time."

McGill noted the partnership could eventually allow for an onsite DNP or MSN program or other needed educational track.

A number of OU Nursing students hail from Norman. McGill said there's no reason they shouldn't be able to train in their hometown.

"Our hope is we can keep them in this community and work for the health system that provides care to this community so it's truly meeting the health system's mission," McGill said. "The sky is the limit."

Oklahoma and the nation are experiencing a severe nursing shortage. According to The American Nurses Association, more registered nurse jobs will be available through 2022 than any other profession in the United States.

The US Bureau of Labor Statistics projects that 11 million additional nurses are needed to avoid a further shortage. Employment opportunities for nurses are projected to grow at a faster rate (15%) than all other occupations through 2026.

"Ever since our university's earliest years, OU nurses have fulfilled our life-changing purpose – heroic work that continues today," said OU President Joseph Harroz Jr. "The nationwide chronic shortage of nursing professionals impacts all of us, and it's often a dilemma caused by limited class sizes and a lack of qualified instructors. Further expanding our superior nursing education to locations beyond the OU Health Sciences Center is a vital step toward ensuring Oklahomans receive superb care today and for a lifetime."

Norman Regional Health System is a multi-campus system that serves the healthcare needs of south central

Oklahoma. It is currently comprised of two acute-care hospitals in Norman. Norman Regional Hospital located on Porter Avenue is licensed for 219 beds and offers a full range of services. The Norman Regional HealthPlex, on Interstate 35 is licensed for 168 acute care beds. The Health System also operates Norman Regional Moore, which houses an Emergency Room, physician offices, imaging, lab, physical therapy and more.

Norman Regional Health System also provides outpatient diagnostic centers, emergency medicine services, physician services, centers of excellence, medical equipment supplies, a primary care network, telehealth virtual care services and employer health services. The Health System has grown to employ more than 3,500 people and has 356 physicians credentialed on the Medical Staff.

Norman Regional is transforming healthcare in the community it serves with the Inspire Health plan. The plan has five core components: HealthPlex acute care expansion Ambulatory Pavilion and Cancer Center, a new Freestanding Emergency Department+ (plus

ancillary services) in East Norman, a Behavioral Health Center and the revitalization of the historical Norman Regional Hospital (Porter) campus. These projects are tentatively set to be completed by 2023.

Applications for all Fran and Earl Ziegler College of Nursing programs are now open. Students interested in applying to the BSN program should visit the Fran and Earl Ziegler College of Nursing website for instructions.

Applications are due no later than February 1, 2022 for the Traditional BSN program at Norman Regional Health System.

"This a very exciting time," Hoff said. "I want to thank Brittni and (NRH CEO) Richie Splitt for agreeing and having the courage to partner with us on this endeavor because the only way we are going to be able to educate more nurses is through partnerships."

"Right now, I compete with Brittni for master's and doctorally-prepared nurses. I need them to teach, she needs them to practice. We don't want to compete, we want to work together and strengthen nursing in ways that will help Oklahoma."

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## AHCA/NCAL Applauds CDC, FDA for Approving Booster Shots for Long Term Care Residents, Workers

The American Health Care Association and National Center for Assisted Living (AHCA/NCAL) released the following statement in response to the recommendations by the Centers for Disease Control and Prevention (CDC) as well as the Food and Drug Administration (FDA) to approve booster shots of the Moderna and Janssen (Johnson and Johnson) COVID-19 vaccines for certain individuals, including residents and health care workers in long term care.

The following statement is attributable to Dr. David Gifford, chief medical officer of AHCA/NCAL: "Once again, we appreciate the FDA and CDC for thoroughly examining the data and following the science to help protect Americans, including our nation's most vulnerable, from COVID-19.

All long term care residents and staff members will now be eligible to receive a booster shot thanks to these expanded recommendations. Additionally, the ability to mix-and-match vaccines for the booster dose will make it easier for long term care facilities to swiftly access these vaccines for their residents and staff.

"The rollout of the Pfizer booster shot has gone incredibly well in long term care, and we are confident that adding Moderna and Johnson and Johnson into the mix will catapult our efforts. We appreciate the partnership of federal and state governments as well as long term care pharmacies and other vaccine providers to make these vaccination efforts in nursing homes and assisted living communities efficient and successful."

# OMRF experts recommend flu shot before October ends

Following record lows of influenza last year thanks to Covid-19 precautions, the flu is again circulating in Oklahoma and the U.S. Only time will tell how severe the season will be. Still, experts at the Oklahoma Medical Research Foundation advise starting your defense with a good offense.

"The flu is returning, and it's up to us to deal with it," said OMRF immunologist Linda Thompson, Ph.D., who studies influenza. "Just like Covid, if we get vaccinated, wear masks, and stay home when we're ill, there will be fewer cases."

In a year when Covid-19 vaccines have dominated the headlines, many may not see the importance of yet another shot. A survey released this month from the National Foundation for Infectious Diseases found that 44% of adults were either unsure or do not plan to get a flu vaccine this year.

But with health care facilities across Oklahoma strained from the

recent surge in coronavirus cases, fighting flu is critical, said OMRF Vice President of Clinical Affairs Judith James, M.D., Ph.D.

"The first priority is the initial Covid-19 vaccination series," said James, who holds the Lou C. Kerr Endowed Chair in Biomedical Research at OMRF. "But like Covid-19, influenza is a dangerous and highly contagious respiratory virus."

James added that flu shots are crucial for pregnant women and people with chronic illnesses such as diabetes, autoimmune disorders and heart or lung disease. "These groups are at high risk for severe complications from flu," she said.

Typically, said Thompson, the shot is 40-60% effective at preventing a person from contracting the virus when the circulating flu strains are well-matched with those used to make the vaccine. Each year, Food and Drug Administration officials work with health authorities worldwide to identify the most common flu strains and formulate a vaccine.

"Scientists pay special attention to the Southern Hemisphere because their flu season arrives ahead of ours," said Thompson, who holds OMRF's Putnam City Schools Distinguished Chair in Cancer Research. "The flu mutates rapidly every year to evade our defenses. That's why it is important to get a shot annually."

But even if you contract the flu after vaccination, said James, there's usually a benefit to receiving the shot. "In most people, vaccination leads to a less severe bout of the virus. It also prevents many hospitalizations and ICU



Oklahoma Medical Research Foundation scientist Linda Thompson, Ph.D.

admissions," she said.

To protect against flu, wear a mask in crowded indoor spaces and wash your hands regularly. But, James said, "The first step in protecting yourself and those around you is timely vaccination. Ideally, everyone eligible should get their flu shot by the end of October."

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# OU Health Sciences Center Study Detects ‘Silent’ Atrial Fibrillation in American Indians Using Smartphone-Based

A recently completed study by researchers at the University of Oklahoma Health Sciences Center demonstrated the effectiveness of using a smartphone-based electrocardiogram (ECG) to detect atrial fibrillation among American Indians, a population with increased risk factors for the condition.

Atrial fibrillation, which causes an irregular heartbeat, can lead to stroke, blood clots and heart failure. About half of atrial fibrillation cases are asymptomatic, and 40% to 50% of people with the condition don't know they have it. For some people, having a stroke is the first time they know they have atrial fibrillation.

The study, published in the Journal of the American Heart Association, was conducted in partnership with the Absentee Shawnee Tribal Health System. Patients age 50 and older who were coming to see their primary care provider, and did not have a prior diagnosis of atrial fibrillation, had the option to participate in the study, which ultimately enrolled 1,019 people. Upon their arrival at the clinic, study participants placed their fingers for 30 seconds on a small ECG that connected to an app.

The ECG identified 15 patients who had "silent" atrial fibrillation, meaning they had no symptoms. "That is about 1.5% of the study's enrollment, but to put that into perspective, when we do the same type of ECG in Caucasian populations, we find 0.4% with atrial fibrillation. In the population we worked with, silent atrial fibrillation was three times higher," said OU Health cardiologist Stavros Stavrakis, M.D., Ph.D., lead author of the study.

The study also demonstrated the importance of earlier screening for atrial fibrillation in patient populations considered high-risk. Guidelines currently recommend screening for asymptomatic atrial fibrillation beginning at age 65. However, eight of the 15 patients identified with atrial fibrillation in this study were between 50 and 65, Stavrakis said.

"We had hypothesized that because American Indians have a higher incidence of risk factors, we would find atrial fibrillation in younger ages," he said. "We recommend that screening in American Indians start at a younger age. In addition, because American Indians are significantly underrepresented in research studies in general, we need to conduct further studies focusing on Indigenous populations."

Stavrakis said the study participants were compared to a group of about 1,200 people in the same age range who were patients at the clinic but not enrolled in the study. In that group, doctors identified three cases of atrial fibrillation during standard screening. "Using the standard care, you find significantly fewer numbers of cases," he said.

All patients in the study who were diagnosed with atrial fibrillation were started on blood thinners to decrease the risk of risk of stroke. However, over the course of a year, the clinic increased its overall use of blood

See STUDY Page 5

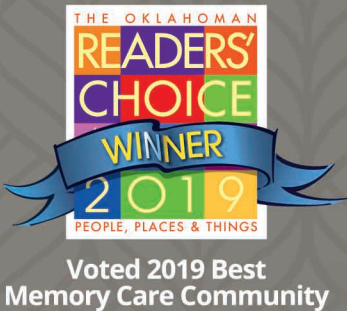


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## STUDY

Continued from Page 4

thinner in patients not in the study but diagnosed with atrial fibrillation.

"We attribute that to raising awareness about atrial fibrillation in the clinic in general among the physicians, nursing staff and patients," he said.

The next step for Stavrakis and his team is to conduct a larger, randomized study in which some patients are screened with the smartphone-based ECG and others are not. He envisions a future where such devices are routine in primary care clinics, or people use them at home if they are in a higher-risk population.

The study is also an important element of the OU Health Sciences Center's ongoing partnerships with Oklahoma's American Indian tribes. The Absentee Shawnee Tribe is a partner in the Oklahoma Clinical and Translational Science Institute, which unites non-profits, American Indian communities, public agencies and primary care

providers in research addressing the poor health outcomes of Oklahomans.

"Dr. Stavrakis and his team here at the OU Health Sciences Center and Dr. Marty Lofgren and his team at the Absentee Shawnee Health System worked beautifully together. This research would not have been possible without mutual respect and clear understanding of what we were trying to accomplish and the benefits for the community. This type of partnership should be the goal of any research partnership," said Lancer Stephens, Ph.D., member of the Kitikiti'sh tribe, Associate Core Director for the Oklahoma Shared Clinical and Translational Resources, and Associate Dean for Sovereignty, Equity, Diversity and Inclusion at the Hudson College of Public Health at the OU Health Sciences Center.



Stavros Stavrakis, M.D., Ph.D., lead author of the study.

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Jodi Meacham RN

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# ANA Hails Decision to Prioritize Nurses and Health Care Professionals for Pfizer Booster Shots

The American Nurses Association (ANA) hailed the decision of the US Food and Drug Administration and US Centers for Disease Control and Prevention (CDC) to include nurses and other health care professionals who have received Pfizer-BioNTech's COVID-19 vaccine among those prioritized to receive a booster shot six months after their primary series. The agencies based their decision on emerging evidence that indicates a COVID-19 vaccine booster shot can enhance protection against the virus to prevent serious complications and hospitalizations.

"While we've all grown weary from this pandemic, no other group is carrying this burden like our nation's nurses," said ANA President Ernest Grant, PhD, RN, FAAN. "I am encouraged that many nurses on the frontlines will be able to receive a COVID-19 vaccine booster. ANA is grateful for the CDC's decision to include individuals who are at higher risk of infection due to their occupation and work environment, such as

nurses and health care professionals. Nurses deserve and must have the highest level of protection available to continue providing safe patient care, administering COVID-19 vaccines, and setting an example for millions of Americans."

In a survey of more than 4,500 nurses nationwide conducted by ANA in conjunction with the COVID Vaccine Facts for Nurses campaign in July of 2021, 85% of nurses who responded say they are willing to get a booster shot of the COVID-19 vaccine. In addition to being prioritized to receive COVID-19 vaccine boosters, ANA calls for nurses to be included in planning efforts to administer COVID-19 vaccine booster shots and have timely access to up-to-date resources and education. ANA looks forward to anticipated actions related to approval of boosters for the two other authorized COVID-19 vaccines and additional guidance on the administration of booster doses.

As the nation's nurses continue to feel the burden and strain of

this persistent pandemic, ANA boldly continues its advocacy for a whole of government approach to ensure we have a strong nursing workforce today and in the future. Driving greater investment in nursing education,

improving work environments, and recognizing nurses' immeasurable contributions to health care is how we truly demonstrate a greater value on nursing."



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"Dr. Gray and all of my instructors pray for us before each exam, and I have no doubt they pray for me outside of class too," said student Kyler Wilson-Walker.

There are 4 ways to join this winning program.

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## 2. INTEGRIS Partnership

Individuals with no experience

can apply for a job as a nursing assistant with INTEGRIS Healthcare and enroll as an online student with Oklahoma Christian University. INTEGRIS even offers a \$1,000 signing bonus and tuition repayment! It's a great way to earn a paycheck and a degree with a job that prepares you for class and classes that prepare you for your future.

## 3. Transfer From Another University

Students who begin college somewhere else and transfer to Oklahoma Christian University step into a community of instructors and students who are all about supporting one another. The tightly knit community is known for supporting others, honoring the creator through nursing, providing an environment designed for each student's success and having fun.

## 4. On-Campus

High school graduates who want to become a nurse find their home at Oklahoma Christian University. Students looking for the full college experience are mentored for spiritual, mental and physical growth alongside the rigorous academic program. Living on campus allows students to become a part of the university's traditions, make friendships that last a lifetime and flourish under the guidance of excellent faculty.

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"Dr. Gray and all of my instructors pray for us before each exam, and I have no doubt they pray for me outside of class too." Kyler Wilson-Walker, student.

exactly who they are called to be in a worldwide context. You can find them online at oc.edu or located at 2501 East

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# Free COVID-19 Testing for Age 17 and Under Offered

Free COVID-19 testing for children and adolescents age 17 and younger will be offered daily at Oklahoma Children's Hospital OU Health beginning Tuesday, Sept. 28.

The drive-up testing, conducted in partnership with the Oklahoma City-County Health Department, will be held on the east side of Oklahoma Children's Hospital, 1200 Mark Everett Drive. Hours will be 3 to 7 p.m. Mondays through Fridays, and noon to 4 p.m. on Saturdays and Sundays.


Appointments are required and can be scheduled through this link: [www.ouhealth.com/covid-test](http://www.ouhealth.com/covid-test). Results will be available in 24 to 48 hours and will be delivered through an online portal. No physician order is required to sign up for testing. The tests provided will be PCR tests, which are highly accurate and usually do not need to be repeated. Test samples will be collected via a nasal swab.

The Centers for Disease Control and Prevention (CDC) recommends that people of any age get tested for COVID-19 if:

- They have symptoms of COVID-19
- They have had close contact with someone with confirmed COVID-19 (within 6 feet of an infected person for at least 15 minutes)
- They have been asked or referred to get tested by their healthcare provider or local or state health department.

The CDC also recommends that, while waiting for test results, young people should stay away from others if possible, especially those who are at higher risk for getting very sick from COVID-19, such as older adults and people with other medical conditions. The CDC also recommends watching for symptoms of COVID-19, which may appear anywhere from two to 14 days after exposure.

COVID-19 vaccine is available to ages 12 and above through OU Health and Oklahoma Children's Hospital OU Health. Find more information at this link: <https://covid.ouhealth.com/covid-19-vaccine/ou-health-vaccine-locations/>



**AIDAN** was a great big brother.

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**AIDAN** had a way about him. He had a way of creating adventure out of everything he did. He wanted to do EVERYTHING and was fully intent on achieving that goal. He had a huge loving heart and was quick to share that love. He was conscious of the feelings of others and always made an effort not to hurt others feelings. He was messy. He was smart. He was a great big brother. It was his interest in church that brought our entire family back to the church. He loved God and he liked to share what he learned. For eight short years his light shone so brightly.

We are so honored that he was able to continue

to do EVERYTHING and to become a donor and save lives.

Organ, eye and tissue donation saves lives. Please make your decision to donate life and tell your family. Register to be an organ, eye and tissue donor on your Oklahoma driver's license or state ID card or register online at [www.LifeShareRegistry.org](http://www.LifeShareRegistry.org). If you don't have a license or state ID card and do not have internet access, call **800-826-LIFE (5433)** and ask for a donor registration card.

**LifeShare**

## SITUATION UPDATE: COVID-19

COVID-19 Cases:	638,957
New Cases	1,049
New Cases 7 day Average	1,012
Active Cases	7,339
CDC/NCHS Provisional Deaths	11,098

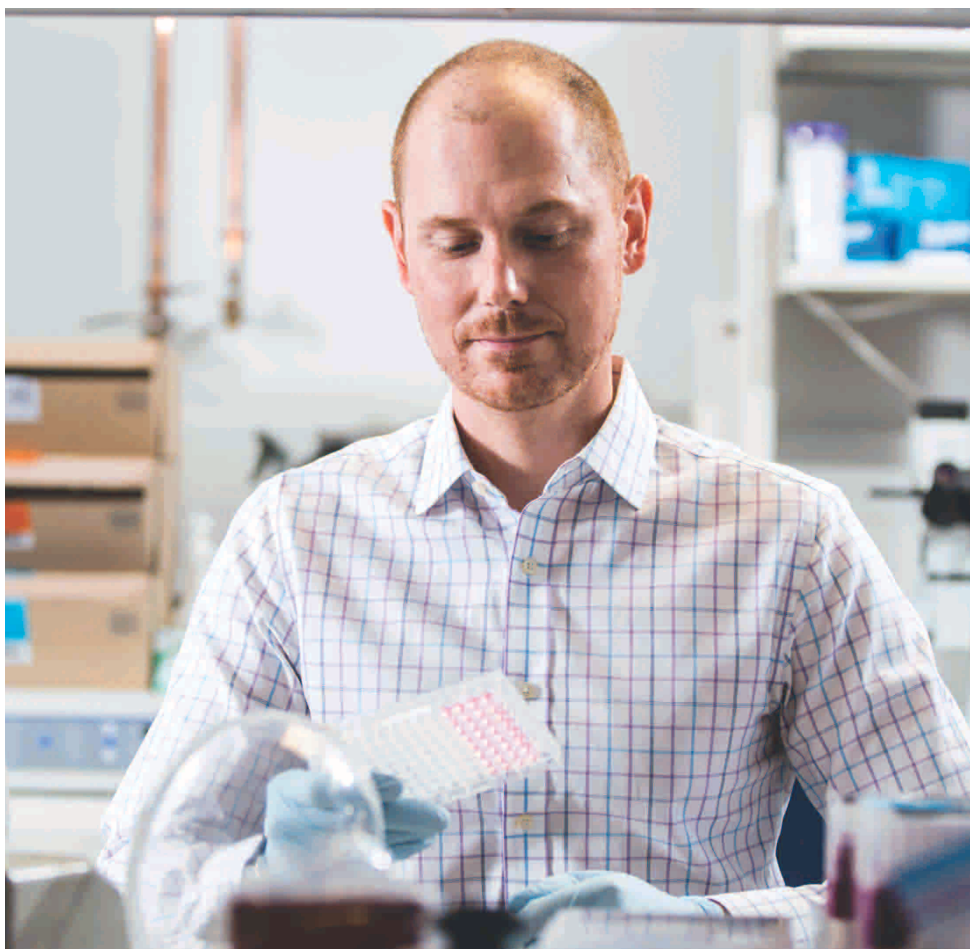
Acute Care OSDH Licensed Facilities/Location**	Recent 3 day Ave. Hospitalizations
	Cases (ICU)
Region 1 (NW)	40 (12)
Region 2 (NE)	37 (9)
Region 3 (SW)	65 (23)
Region 4 (EC)	33 (14)
Region 5 (SE)	20 (5)
Region 6 (Central)	52 (18)
Region 7 (Tulsa)	185 (62)
Region 8 (OKC)	162 (52)
Total	594* (195)
Other Types of Facilities	
Focus Facilities	10 (5)
Rehabilitation Facilities	3 (0)
Tribal Facilities	20 (6)
Other Facilities Total	33 (11)

\*Includes 20 hospitalizations in pediatric beds.

\*\*Focus, Rehabilitation and Tribal Facilities numbers are not assigned to a specific region as their patient populations reside across the state. Information provided through survey of Oklahoma hospitals as reported to HHS as of the time of this report. Response rate affects data. Facilities may update previously reported information as necessary.

Data Source: Acute Disease Service, Oklahoma State Department of Health. \*As of 2021-10-22 at 7:00 a.m.

# OMRF seeks volunteers for osteoarthritis study



Oklahoma Medical Research Foundation physician-scientist Matlock Jeffries, M.D.

The Oklahoma Medical Research Foundation, in collaboration with the University of Oklahoma Health Sciences Center and Oklahoma Sports Science & Orthopedics, is recruiting volunteers with osteoarthritis of the knee to study the progression of the disease.

OMRF physician-scientist Matlock Jeffries, M.D., is a lead researcher on the Systematic Oklahoma Osteoarthritis Epigenetics Research, or SOONER, study. The ongoing research will take place at OUHSC and is open to adults with early moderate osteoarthritis of the knee.

Jeffries' research investigates the role of the microbiome — the collection of thousands of tiny organisms in our digestive tracts — in the body's response to OA. He also studies ways the immune system may predispose an individual to OA progression.

The joint disease is the number one cause of disability in the U.S., and its treatment accounts for the largest procedure expense to Medicare annually. Despite this, Jeffries says, the advancement of the disease in people

is not well understood.

"The purpose of the SOONER study is to identify biological signs that could help predict the severity of the disease," said Jeffries, a board-certified rheumatologist who treats patients at OMRF's Rheumatology Research Center of Excellence. "We're trying to understand which patients are likely to quickly develop strong symptoms so we can help improve treatment options for everyone with OA."

Volunteers will undergo a phone screening to determine eligibility. Once accepted, participants will complete visits twice a year. These visits will include blood draws, microbiome sampling, X-rays to examine joint health and a questionnaire. Participants will be compensated based on participation. Strict Covid-19 protocols are followed to ensure participant safety.

To volunteer or for more information, contact the Oklahoma Shared Clinical & Translational Resources center at 405-271-3480 or [osctr@ouhsc.edu](mailto:osctr@ouhsc.edu).

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