

Message from the Dean



Yasmen Simonian
PhD, MLS (ASCP)CM, FASAHP
Dean/Presidential Distinguished Professor
Dumke College of Health Professions

In response to the rapidly changing healthcare delivery system and intensified healthcare needs, Annie Taylor Dee School of Nursing in the Dumke College of Health Professions at Weber State University (WSU), seized the opportunity and great challenge in starting the Doctor of Nursing Practice (DNP) program. Today, we are proudly graduating the first cohort and the very first ever doctorate degree offered by WSU.

Graduates, you will have the critical knowledge to provide leadership to the complex field of nursing. You will have the ability to develop innovative competencies needed for patient outcomes and healthcare deliveries. You will be able to educate at a higher level and offer advance practice approaches. You will continue to be the essential and the contributing members of the healthcare team.

We congratulate you on reaching this milestone and achieving your goals. You have worked hard, sacrificed some and experienced much to reach this point in your lives. We trust that you will continue with your professional development and a passion to be on the cutting edge of your healthcare profession. We hope that you will stay in touch with us and let us know of your success. Heartfelt congratulations to you & all the best.

Message from the Chair

Congratulations Wildcats!! Our Annie Taylor Dee School of Nursing is thrilled to join you in celebrating this personal and academic achievement of graduating with your doctorate! As the first graduating class in the Doctor of Nursing Practice-Leadership (DNP-L) track and first doctorate at Weber State University, you are part of a historical moment. This accomplishment is a culmination of many, many hours of sacrifice and hard work. However, it is just the beginning of what will be a successful and rewarding career.

Some advice, as you continue in your quest of lifelong learning and influence our healthcare communities; from one of my favorite books, *The Go-Giver*, by Bob Burg and John David Mann, "Your true worth is determined by how much more you give in value than you take in payment."

May you find value in all your pursuits, both professionally and personally. Thank you for allowing us to be a part of your journey. Our faculty and staff join you in this celebration. I am proud to have you join our nursing family and look forward to the positive impact you will make on our communities. I wish you all the best as you continue to pursue your dreams!!



PhD, RN
Chair/Professor
Annie Taylor Dee School of Nursing
Dumke College of Health Professions

Program Director Remarks



Melissa NeVille Norton

DNP, APRN, CPNP-PC, CNE

Graduate Program Director/Associate Professor

Annie Taylor Dee School of Nursing

Dumke College of Health Professions

Dear Graduates,

Your graduation from the Annie Taylor Dee School of Nursing Doctor of Nursing Practice Program in the Dumke College of Health Professions is an essential personal and professional milestone and deserving of our sincerest congratulations.

As the first doctoral graduates at Weber State University, many individuals celebrate your accomplishments, including the nursing faculty, leadership, and staff who have worked tirelessly to support your learning and growth. As DNP graduates, you are prepared to lead healthcare organizations, translate evidence to improve healthcare outcomes, and advance nursing practice.

We look forward with great anticipation as you advance healthcare locally and nationally.

Congratulations Graduates!

Faculty Remarks



It has been my absolute honor to support the first graduating class of Weber State's Doctorate of Nursing Practice program. These students have achieved amazing things throughout their program and their projects have and will continue to improve patient care. I have no doubt that they will continue to lead the way in a progressive, evidenced-based healthcare system. Congratulations to you all!

Jessica Bartlett
DNP, RN, CNM, IBCLC
Instructor

Thank you all! It has been an honor and pleasure to work with such a dedicated and motivated and trusting group of Doctor of Nursing Practice (DNP) leadership students. Words cannot express (really!) how proud I am to have been part of this journey with you all. You each came to this inaugural DNP program with such rich and diverse professional and personal experiences, and a commitment to professional growth and learning. You are the nurse leaders and change agents of tomorrow in our own local health care communities as well as the global arena. We are all in good hands.



Mary Anne Hales Reynolds
PhD, RN, ACNS-BS
Associate Professor



As a nurse educator, working with this first cohort of DNP Leadership students has been the highlight of my years in academia. These students have accomplished an impressive amount of quality work and their projects will enhance if not save the lives of people within their communities. It has been an honor and a privilege to be part of the program of study for WSU's first graduating cohort of the Post Masters to DNP Leadership and I have no doubt you will make a difference.

Ann Rocha PhD, APRN, FNP-BC Assistant Professor

Doctor of Nursing Practice Faculty

Suzanne Ballingham-Tebbs

MSN, APRN, FNP Instructor

Kristy Baron

PhD, RN Associate Professor

Jessica Bartlett

DNP, RN, CNM, IBCLC Instructor

Joyce Barra

PhD, RN Assistant Professor

Tamara Bergout

EdD, RN Assistant Professor

Kathleen Cadman

PhD, RN, RAC-CT, CNE Associate Professor

Sally Cantwell

PhD, RN Professor **Valerie Gooder**

PhD, RN, NHDP-BC Professor

Cathy Harmston

DNP, APRN, FNP-BC Assistant Professor

Suzy Heugly

MSN, APRN, FNP Instructor

Rieneke Holman

PhD, RN Associate Professor

Deborah Judd

DNP, APRN, FNP-BC Professor

Jon Kelly

MNA, MAP, RN Assistant Professor

Diane Leggett-Fife

PhD, RN Associate Professor **Melissa NeVille-Norton**

DNP, APRN, CPNP-PC, CNE Associate Professor

Angela Page

DNP, APRN, PNP-BC Instructor

Jamie Wankier Randles

MSN, RN Assistant Professor

Mary Anne Reynolds

PhD, RN, ACNS-BC Associate Professor

Ann Rocha

PhD, APRN, FNP-BC Assistant Professor

Kelley Trump

DNP, MSN, RN, CNE, COI Instructor

Kris Williams

DNP, APRN, FNP-C Associate Professor

Community Partners

We want to send a generous thank you to our community partners for their time, dedication and commitment to our program and students. Without their participation, guidance and assistance we would not have been able to strive in our commitment to students for a high quality and impactful educational experience.

Weber State University aims for a dual mission approach in education by creating community-based learning and public service opportunities, we thank the following organizations for helping us achieve our goal!

Busy Bee Pediatrics

Dixie Medical Center

HCA Healthcare

Huntsman Cancer Center

Intermountain Logan Homehealth & Hospice

Intermountain Healthcare

Jesse Low Pediatric Dentistry

Lakeview Hospital

Nell J Redfield Memorial Hospital

Ogden Clinic

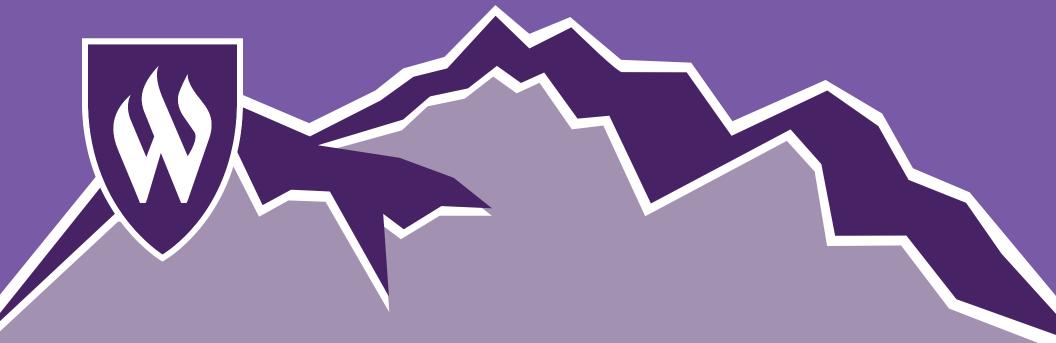
Seager Memorial Clinic

The Clinic-Physical Therapy & Human Performance

Wee Care Pediatrics







Doctorate Projects

Introduction of a Universal Suicide Risk Screening Tool & Follow Up Care in the Emergency Department of a Rural Hospital
EMILY OSTARCEVIC
ANGELA C PAGE
MINDY K ROBERT
Implementing an 8-Week Adaptive Yoga Pilot Program for Persons Affected by Multiple Sclerosis
KRISTYN STEEDLEY
Implementation of a Standardized New Hire Orientation Program
HOLLY WRIGHT
Bedbugs: Increasing Awareness & Educating Providers on Best Practices

Preparing Community Nurses to Respond to Local Disasters: A Quality Improvement Project

PURPOSE

Disaster preparedness organizations at all levels recognize the challenges and limitations associated with responding to local and immediate disasters. Nurses are a valuable and often overlooked resource for disaster responders. However, many nurses lack the necessary disaster training, experience, or resources needed to fulfill this role. The purpose of this Doctor of Nursing Practice (DNP) project was to prepare and educate nurses living in Davis County, and working at Lakeview Hospital, about disaster preparedness and response skills.

METHODOLOGY

Using the Disaster Management Cycle, a modified virtual program was developed and used to educate and prepare Lakeview Hospital nurses on disaster recognition, assessment, and intervention skills. The program was evaluated using pre and post-surveys. Eight nurses with previous Emergency Room experience from Lakeview Hospital volunteered for the course.

RESULTS

All eight participants demonstrated an increase in knowledge and all reported feeling more confident in responding to a disaster. The experience demonstrated a need for further education and preparation on disaster response for nurses in the community.

IMPLICATIONS FOR PRACTICE

Nurses can be prepared for disasters by participating in appropriate education.
Continued work with both hospitals and community preparedness programs is needed to develop partnerships, establish coalitions, develop measurable objectives, and help solve problems associated with emergency preparedness. This educational program can be used in both university and community settings to teach or re-teach nurses the basics of disaster response and preparedness.



SHANE A. ARCHIBALD

DNP, RN, TNCC

ANNIE TAYLOR DEE
NURSING

Development of Protocols & Guidelines for Adverse Anesthesia Events, Recovery & Discharge in Pediatric Dental Offices

PURPOSE

Utilizing education and simulation to improve knowledge and skills, this Doctor of Nursing Practice project established guidelines to facilitate appropriate responses to adverse anesthesia events in a pediatric dental office. Procedures to ensure safe recovery and timing of discharge were also taught and implemented.

METHODOLOGY

Six pediatric dental assistants and one pediatric dentist participated in two sixtyminute education and simulation events focusing on a coordinated response to adverse anesthesia events. Pre- and posttests, including multiple choice and short answer questions, were used to evaluate participant knowledge, skills, and confidence levels.

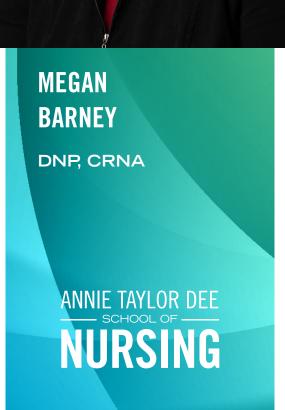
RESULTS

The mean scores on content knowledge improved from 92% to 98% for knowledge after the training. Initially, 14% were 'a little

confident', 72% were 'confident,' and 14% were 'very confident' of their role during an emergent situation. Posttest, the self-assessed "confident' level stayed 72%, but the 'very confident' level increased to 28%. Simulation participants also reported higher confidence in their use of skills needed during adverse events.

IMPLICATIONS FOR PRACTICE

Pediatric dental sedation is a common practice in dental offices, and it is essential to have a plan that the professionals can use to address adverse anesthesia events. The plan should include directions on the appropriate emergent actions, ensuring a safe recovery, and preparing for discharge. This project addressed a gap in education and skills and demonstrated its feasibility in other dental offices to improve dental providers' knowledge and confidence.



Implementation of a Clinical Pathway for Outpatient Management of Oncological Neutropenic Fever

PURPOSE

Febrile neutropenia occurs in approximately 21% of patients receiving chemotherapy for metastatic solid tumors. While some patients will need to be hospitalized for neutropenic fever, low-risk patients can be effectively treated at home by nurse practitioners. The purpose of this Doctor of Nursing Practice project was to develop and implement an evidence-based clinical pathway for the outpatient management of neutropenic fever in oncology patients at Huntsman Cancer Institute in Salt Lake City, Utah.

METHODOLOGY

The Multinational Association of Supportive Care in Cancer risk-stratification tool and guidelines from the American Society of Clinical Oncology were used to develop a clinical pathway to care for oncology patients with neutropenic fever at home. This pathway established a high-quality, cost-effective in-home treatment for neutropenic patients. In the pathway, patients were placed on a five-day "Acute Watch" protocol to reduce hospitalizations.

RESULTS

Five patients developed a fever of unknown origin and were placed on "Acute Watch." Four were successfully managed at home and avoided hospitalization. Seven nurse practitioners and five registered nurses were surveyed; they rated the clinical pathway at 9.3 on a scale of 1-10 in outlining the assessment, treatment, and follow-up of febrile patients in the home.

IMPLICATIONS FOR PRACTICE

Nurse practitioners can effectively treat oncology patients with neutropenic fever who are at low risk for complications. The MASCC risk-assessment tool can help to identify patients who are considered low risk for complications. The ASCO guidelines can be adapted to manage oncology patients who develop a neutropenic fever at home. A five-day Acute Watch protocol can effectively reduce hospitalizations in oncology patients.



MARIE BLACKER

DNP, APRN, NP-C

ANNIE TAYLOR DEE
NURSING

Implementation of a Cerebrovascular Accident Education Program in a Neuro Specialty Rehabilitation Unit

PURPOSE

After surviving a cerebrovascular accident or stroke, education and follow-up care can be disjointed and confusing for patients and families. Stroke patients at St. George Regional Hospital Neuro Specialty Rehabilitation Unit need comprehensive stroke education, caregiver training, discharge teaching, and proper follow-up care to prevent costly hospital readmissions. The purpose of this DNP project was to implement an interdisciplinary stroke rehabilitation program to reduce 30-day stroke readmissions and increase patient awareness of the importance of follow-up care.

METHODOLOGY

The project involved using an interdisciplinary team to develop and implement a patient and family education program. The program included a video containing education on stroke management, a standardized discharge checklist, and a post-discharge follow-up phone call. The discharge checklist contained the information that a patient or family member

would need to know before being discharged. The post-discharge phone call was to remind the patient about follow-up care.

RESULTS

Five stroke patients viewed the video. A chart review found that twenty-two patients had complete discharge checklists. Twenty-six patients received a discharge phone call. Twenty-two kept their follow-up appointments. Patient satisfaction scores increased by 4% after the initiation of the education program.

IMPLICATIONS FOR PRACTICE

The transitional education provided for stroke patients and their families is critical. Appropriate education can ensure that patients and families are prepared for life following a stroke. Standardized education has the potential of improving post-discharge recovery and reduces costly readmissions.



ROXANNE BUTTERFIELD

DNP, RN, CRRN



Addressing Burnout in Intermountain Homecare Nurses

PURPOSE

Burnout among healthcare professionals is a significant concern. Job-related stress is a contributing factor for burnout, particularly for home health care and hospice nurses. The purpose of the Doctor of Nursing Practice (DNP) project was to decrease burnout for nurses within Intermountain Homecare and Hospice by providing education and resources.

METHODOLOGY

A pre-test survey of twenty-four nurses working at a regional Intermountain Homecare and Hospice was utilized to evaluate knowledge and resources about burnout. In this survey, 79% of the nurses reported they had experienced burnout, 8% reported they might have, and 12% reported they had not experienced burnout in their career. Using these responses as a guide, an eLearning module was created and implemented utilizing Articulate Storyline. The module incorporated interactive concepts to keep learners engaged. Mindfulness minute

topics were also presented and discussed during monthly meetings.

RESULTS

Following the project implementation, 87% of the nurses reported that their burnout symptoms decreased over the twelve months. All participants found at least two new mindfulness techniques, 87% indicated they would use mindfulness practices in the future, and all stated they wanted to continue using the burnout module.

IMPLICATIONS FOR PRACTICE

This DNP project increased awareness of burnout and the coping skills that can be used to combat burnout. Stress in healthcare is unavoidable, but improving organizational practices and providing education on available resources can combat burnout, improve mental wellness, and help nurses develop coping mechanisms to deal with stress.



HEATHER CLARK

DNP, RN

ANNIE TAYLOR DEE
SCHOOL OF
NURSING



EMILY DAINES

DNP, APRN, FNP-C

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

Screening for Social Determinants of Health in Adolescents in Pediatric Primary Care

PURPOSE

The World Health Organization identifies social determinants of health (SDoH) as the conditions where people live, learn, work, and play and stresses the importance of identifying disparities to improve environments and promote health. The American Academy of Pediatrics advocates for the screening of SDoH in children. Screening at well-child visits allows health care providers to assess social factors influencing patient health. The purpose of this project was to educate providers about SDoH, implement a process to screen adolescent patients at annual well-care visits, and help providers to provide local resources for patients.

METHODOLOGY

Provider knowledge was evaluated using a pretest, then education about SDoH was provided. A process to screen adolescents for SDoH at well checks was implemented for 12 weeks, followed by evaluation. The evaluation was conducted through a post-survey of providers, personal interviews, and chart audits.

RESULTS

Once the screening tool was implemented, 88% of patients in the specified group were screened. Of those, 9.4% screened positive for SDoH needs, and 3.6% requested resources. Provider understanding of SDoH improved from 87% to 100%. The success of the project will be demonstrated by the long-term adoption of screening in the clinic.

IMPLICATIONS FOR PRACTICE

Provider education encourages screening, which can help providers to recognize a patient's need for resources. Ensuring that screening is a permanent part of the clinics protocol will potentially improve patient outcomes. The knowledge gained from this project supports the implementation of SDoH screening in other pediatric practices.

Introduction of a Universal Suicide Risk Screening Tool & Follow Up Care in the Emergency Department of a Rural Hospital

PURPOSE

Suicide rates are particularly high in rural Oneida County, Idaho. In the county medical setting, consistent suicide risk screening was not taking place. The purpose of this Doctor of Nursing Practice project was to determine if the use of a universal suicide risk screening tool and the provision of suicide care resources in a rural emergency department would reduce suicide rates in Oneida County.

METHODOLOGY

Patients presenting to the Nell J. Redfield Memorial Hospital emergency department in Malad, Idaho, were universally screened for suicide risk using the Patient Safety Screener (PSS-3) tool. If patients screened positive, lethal means and safety were discussed. Then, an individualized plan of care was created for the patient, and if necessary, referrals were made.

RESULTS

After introducing the screening tool, 26-47% of all emergency department patients were screened. All patients who screened positive were either transferred to a behavioral health facility, admitted to the hospital, or discharged with mental health resources and referrals.

IMPLICATIONS FOR PRACTICE

Screening for suicidal risk allows clinicians to identify individuals who require intervention. Once they are identified as high risk, an individual plan of care can be created, and the appropriate referrals can be made. This project demonstrated that a better screening process could be implemented, and individuals at risk can be appropriately identified. By identifying and intervening, suicide rates in Oneida County should decline.



CATHERINE HARMSTON

DNP, APRN, FNP-BC

ANNIE TAYLOR DEE NURSING

Improving Human Papillomavirus (HPV) Immunization Rates Through Provider Education

PURPOSE

The human papillomavirus (HPV) is the most common sexually transmitted infection in the United States, causing multiple forms of cancer and genital warts. Although the HPV vaccine has been determined to be safe, immunization rates are low. The purpose of this project was to evaluate provider perceptions of patient barriers to the HPV vaccine. Through education and system changes, provider and patient barriers were addressed.

METHODOLOGY

Increasing HPV immunization awareness included provider education and adding electronic health record (HER) alerts. Patients were educated through posters placed in each room and with follow-up reminder calls. Provider knowledge and perception about the HPV vaccine were assessed through pre and post-surveys. The survey consisted of 7 multiple choice questions and four openended questions. The EHR provided HPV series completion data.

RESULTS

Thirteen providers completed both the pre and post-survey. The post-survey showed improvement in provider knowledge about the HPV vaccine, and 62% of the providers reported they were more likely to strongly recommend the HPV vaccine and look for other opportunities to vaccinate outside of the well-check visit. Overall, HPV immunization completion rates increased from 13.6% to 18.6%.

IMPLICATIONS FOR PRACTICE

HPV immunization completion rates continue to be low in Utah. Educating providers on how to address barriers to the HPV vaccine could improve immunization uptake and decrease cancers caused by HPV. The interventions in this quality improvement project can also be used to improve other immunization rates and thereby decrease preventable diseases.



EMILY OSTARCEVIC

DNP, APRN, FNP-BC



Improving Preschool & Kindergartener Health Outcomes by Integrating a Nurse Practitioner as a Health Consultant in a School-Based Setting

PURPOSE

Children between the ages of three and six are in a period of critical growth and development. A school-based preschool is an ideal location for critical early vision, hearing, speech/language, and immunization screenings to identify problems that could adversely affect a child's learning ability. The purpose of this Doctor of Nursing Practice project was to improve prekindergarten health outcomes by integrating a Pediatric Nurse Practitioner (PNP) as a health consultant in a school setting.

METHODOLOGY

Pre-kindergarten health screenings were coordinated between the newly added PNP and school educators, speech/language pathologists, and community partners. A tracking system was established, and data was gathered on students who were screened and referred to and received interventions. Parents and educators completed a post-survey that

evaluated satisfaction with the PNP health consultant's role.

RESULTS

Immunization monitoring and intervention revealed that 99.5% of children were completely immunized compared with 94% of children the previous year. 30% of children were identified as needing referrals for health services compared to 8% from the previous year. The majority of parents and educators were extremely satisfied with the PNP's role and expressed a desire for continuation.

IMPLICATIONS FOR PRACTICE

In a preschool setting, a PNP can positively impact population health management outside of the traditional medical setting. A school-based PNP improves healthcare access, thereby enhancing the common goal of improving young children's health outcomes.



ANGELA C. PAGE

DNP, APRN, PPCNP-BC

ANNIE TAYLOR DEE
SCHOOL OF
NURSING

Implementing an 8-Week Adaptive Yoga Pilot Program for Persons Affected by Multiple Sclerosis

PURPOSE

Multiple sclerosis (MS) is a chronic, immunemediated disease, causing damage to the central nervous system and disabling symptoms. Yoga can be used to improve the physical and psychosocial effects of MS. The purpose of this study was to determine the feasibility and perceived impact of an evidencebased adaptive yoga program conducted online on MS symptoms.

METHODOLOGY

Eight adults with MS participated in a 75-90 minute, once-weekly, online adaptive yoga program for eight weeks, taught by an experienced adaptive yoga therapist. Course content incorporated yoga variations for MS with breathing and relaxation techniques. Participants completed the modified pre- and post-questionnaire from the Yoga Moves MS program. The questionnaire evaluated perceived quality of life (QOL) and symptom ratings of strength, balance, fatigue, sleep quality, cognition, mood, spasticity, social activities, and self-confidence to exercise. The post-test

survey further examined patient perceptions of symptoms following course completion and requested additional program feedback using open-ended questions.

RESULTS

Improved QOL was demonstrated by participants' perceived improvement in balance, mood, spasticity, and self-confidence to exercise. Participants enjoyed interacting with other MS patients and valued the online format during the COVID-19 pandemic for accessibility and the convenience of participating in guided yoga sessions at home.

IMPLICATIONS FOR PRACTICE

Online adaptive yoga is a noteworthy therapy for MS patients to promote self-confidence to exercise and result in a perceived improvement in neurological symptoms. The online yoga program demonstrated significant value and contribution to comprehensive MS care. The program was also found to be feasible, safe, and rewarding.



MINDY K. ROBERT

DNP, MA, APRN, FNP-C, WHNP-BC, MSCN



Implementation of a Standardized New Hire Orientation Program

PURPOSE

New nurses' must be properly oriented to meet regulatory requirements; however, orientation must be standardized to ensure all requirements are met. The purpose of this project was to implement a standardized orientation program for HCA Healthcare to improve the learning experience of new hires, consolidate resources of orientation facilitators, improve consistency in documenting orientation completion, and decrease the number of days from hire offer to start date.

METHODOLOGY

Lewin's Theory of Change guided the discovery, implementation, and evaluation phases of this standardized orientation program. All new hires for HCA Healthcare Mountain Division between March 2020 and January 2021 participated in the standardized orientation program and completed an evaluation. Feedback was also obtained from key stakeholders.

RESULTS

After implementing the standardized orientation, new hires' satisfaction with the orientation process increased by two percent. Regulatory compliance with orientation documentation increased from 73 to 94.5%. The program saved approximately 12 hours per nurse for general orientation and 140 hours for facilitation per month. The program decreased the number of days from hire offer to start date by an average of nine days.

IMPLICATIONS FOR PRACTICE

This Doctor of Nursing Practice project illustrated the improved efficiency and effectiveness of the standardized orientation program. During the process of standardization, the project transitioned to an online program due to the restrictions posed by COVID-19. In addition, the flexibility for new hires to complete orientation online, combined with the budgetary benefits associated with fewer hours paid for attending and facilitating the orientation program, may change how orientation is conducted in the future.



KRISTYN STEEDLEY

DNP, RN, NPD-BC

ANNIE TAYLOR DEE
NURSING

Bedbugs: Increasing Awareness & Educating Providers on Best Practices

PURPOSE

Bedbugs have affected humans worldwide for more than four millennia. Bedbugs are spreading rapidly and becoming a financial, mental, and physical health problem. Many current providers are not familiar with the diagnosis, treatment, and education of patients about bedbug ailments. Homeless and lowincome populations are at increased risk of infestations. The purpose of this project was to increase provider knowledge, awareness, and treatment of bedbugs at a community-based medical clinic.

METHODOLOGY

The Seager Memorial Clinic providers in Ogden, Utah, were given a pre-quiz (N=19) about best practices for bedbug ailments. An evidence-based educational video was then created, and providers watched and took a post quiz (N=16) using an open U-Tube format.

RESULTS

Survey results demonstrated an overall increase in mean provider knowledge scores from 45% to 84% after watching the video. Providers' overall comfort level increased from 63.15% to 93.75%, and high comfort level from 5.23% to 37.5%. The video was also viewed by 110 additional participants from November 21st, 2020, to February 21st, 2021.

IMPLICATIONS FOR PRACTICE

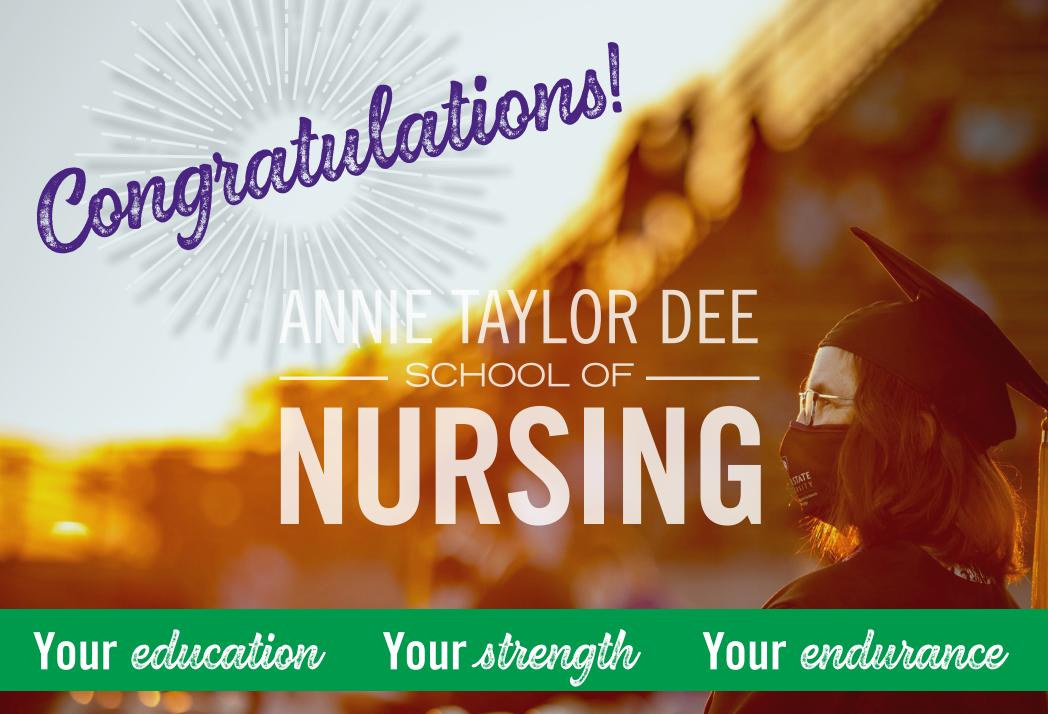
Bedbugs continue to pose health risks for the homeless and low-income patients. Educating providers who care for these patients is critical in identifying and treating any associated issues. This Doctor of Nursing Practice project suggests that bedbug education can impact future practices and substantially improve patient care and outcomes.



HOLLY WRIGHT

DNP, APRN, FNP-C





Is needed now more than ever!

Together, We sowe lives!



WEBER STATE UNIVERSITY

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