



Dr. Mary Anne Dumas began her nursing career in the Navy Nurse Corps and then moved on to get her NP and work in both clinical settings and academia. She has been very active by testifying on NP issues and serving on several high-level committees working towards removing barriers for APN practice thereby, increasing access to care for millions of Americans. She is nationally certified both as a Family Nurse Practitioner and a Gerontological NP. She is a Fellow of the American Academy of Nurse Practitioners, American Academy of Nursing, and the National Academies of Practice. She has presented nationally, internationally and published on primary care and educational topics.

Interview Abstract

Dr Dumas served in the U.S. Navy for five years and was stationed in large hospital settings in Camp LeJeune Naval Hospital and Oakland Naval Hospital. In these roles she become very autonomous in her practice, roles that required high levels of critical thinking, leadership and “thinking outside of the box”. As a practicing nurse in critical care, Dr. Dumas, knew she wanted to expand her knowledge at a higher level. In 1975, she went on to earn a clinical master’s degree as a Family Nurse Practitioner (FNP). She notes that her first years as an NP were extremely challenging due to the lack of Nurse Practitioner (NP) positions, the lack of support of the New York State Nurses Association and the overall lack of familiarity with the role of the NP. Her overall goal as a Nurse Practitioner was to make a difference in the lives of others – her patients and their families, other students, colleagues and to work to reshape Nurse Practitioner Education.

Biographical Sketch

She earned her BSN from D'Youville College and began her career in the Navy Nurse Corps in critical care. She went on to obtain a Master of Science as a Family Nurse Practitioner from Stony Brook University, PhD in Nursing from Adelphi University, and a federal fellowship in Primary Care Health Policy. She is nationally certified both as a FNP and Gerontological NP. She is a Fellow of the American Academy of Nurse Practitioners, American Academy of Nursing, and the National Academies of Practice. She's held faculty and administrative positions at Stony Brook and Hofstra Universities and established the Hofstra University School of Nursing. Dr. Dumas has independently practiced in primary care at the Northport Long Island Veterans' administration.

Dr. Dumas supported a language change that was accepted in the Affordable Care Act from physician to provider which resulted in an expansion in re-imbursement for health care providers and increased access to care for many. She also testified at the Institute of Medicine, the Future of Nursing Forum, on NP Education. She was appointed by the President to serve on the Defense Health Board Medical Ethics Subcommittee and assists in making recommendations on the Department of Defense Health Safety Issues. She has served as President of the National Organization of NP faculties, Secretary to the Fellows of the American Association of NPs, and the American Nurse Credentialing Center Commissioner of Accreditation. She has also co-authored national NP competencies, policies, and publications and presents nationally, internationally on primary and educational topics.

Dr. Dumas notes that the pivotal moments for NP have been the changes in prescriptive and full practice authority statutes enabling NPs to practice to the full scope of their authority. She notes that the role of the NP has the potential to become the major provider of health care in the U.S. within the next 25 years. Quality NP education is of great importance to not jeopardize the elimination of the role.

Her advice to new graduates is "Be yourself. Quality, integrity, and lifelong learning are essential to achieve excellence to reach your full potential. Engage in advocacy and organizational participation to advance the role and practice of NPs".

Mary Anne Dumas

Interview

AANP Oral History Project

Interview: Dr. Mary Anne Dumas PhD, FNP-BC, GNP-BC, FAANP, FNAP

Date: 11/10/2019

Interviewers Name: Michaelene Jansen

Education: NP program year 1975-1977,
graduate programs year 1977, first class, Stony Brook University; PhD - Adelphi University

Certifications: ANCC: FNP-BC, GNP-BC

Short Bio: Mary Anne Dumas, PhD, FNP-BC, GNP-BC, FAANP, FAAN, FNAP

Dr. Dumas' nursing career has focused on clinical practice, education, and service. She earned her BSN from D'Youville College, Master of Science as a Family Nurse Practitioner from Stony Brook University, PhD in Nursing from Adelphi University, and a federal fellowship in Primary Care Health Policy. She is nationally certified both as a FNP and Gerontological NP. She is a Fellow of the American Academy of Nurse Practitioners, American Academy of Nursing, and the National Academies of Practice.



Dr. Dumas' nursing career began in the Navy Nurse Corps, followed by clinical NP practice and academia. She's held faculty and administrative positions at Stony Brook and Hofstra Universities and established the Hofstra University School of Nursing. Dr. Dumas has independently practiced in primary care at the Northport Long Island Veterans' administration.

Dr. Dumas encouraged and supported a language change in the Affordable Care Act from physician to provider. The change in language was accepted and has resulted in an expansion in re-imbursement for health care providers, and increased access to care for millions of Americans. She has also co-authored national NP competencies, policies, and publications. She testified at the Institute of Medicine, the Future of Nursing Forum, on NP Education, and currently serves on the Defense Health Board Medical Ethics Subcommittee, appointed by the President and making recommendations on Department of Defense Health Service issues. Dr. Dumas' service as President of the National Organization of NP Faculties, Secretary to the Fellows of the American Association of NPs, and American Nurses Credentialing Center Commissioner of Accreditation are a few of organizations which she provides service. She has presented nationally, internationally and published on primary care and educational topics.

When you did become an NP? What was the motivation?

I had been serving in the Navy Nurse Corps in Critical Care, and I felt that I want to expand my knowledge to a higher level. I wanted to earn a clinical Master's Degree, to put my new knowledge to provide a higher level of knowledge. In May 1975 I interviewed for a new NP program at Stony Brook University, knowing that it was preparing me for a clinical role. The population foci being offered were FNP, Neonatal/Perinatal, and adult acute care. I chose FNP.

What experiences did you bring into the role?

I served in the U.S. Navy for five years, two and one half years at each very different duty stations: Camp LeJeune Naval Hospital, located at a Marine Corps base in North Carolina, and Oakland Naval Hospital, in Oakland, California. Both hospitals were large 500 bed hospitals with acute and clinical demanding populations. Navy Nursing provided extremely autonomous practice, requiring high levels of critical thinking, leadership skills, and encouraged “outside of the box”. It built upon a strong BSN program which included one day/week of clinical practicum hours in the sophomore year, and three days/week in the junior and senior years.

Did you experience any challenges? How were they resolved?

My program included 86 credits, 50 credits of science (taken with the Stony Brook first year medical students) as well as clinical and other non-science courses. The program was two years, full-time. The first year included the sciences, and the first summer and entire second year included the clinical courses, which we were included with Family Medicine residents.

It was exciting to take science courses on such a high and demanding level. Success in the science courses required a commitment, engagement and dedication to focus on the coursework seven days per week. Precepted clinic practice hours were intense as well. The FNP's clinical days were 12-14 hours/day with every third night in-hospital call with our preceptor for four and a half days/week.

An initial cohort included 10 students, and within a short time was reduced to five. We were cohesive and relied on the bond with each other to provide strength and support. Many years later I learned that the curriculum was purposefully intended to provide us with an education “no one could contest or say that we weren’t prepared”.

Are there any experiences that you would like to talk about?

During the second year of my NP program I was pregnant with my first child, with the EDC scheduled for the third week of May. I performed all clinical hours as scheduled, and I gave birth to my son, the day following my last clinical day. Our graduation was presided over by the president of the University in a separate ceremony. Our program was considered a major milestone in the University’s and SUNY System’s history. Our program director had promised a large, lavish reception after the graduation to celebrate the occasion; however, lack of funds resulted in a wine and cheese reception with flowers donated by funeral homes!

What was most challenging in your career/ most important?

The first years as an NP were extremely challenging due to the lack of NP positions, lack of support by the New York State Nurses Association, and lack of familiarity with the role of the NP.

The most important part of my career has been to make a difference in the lives of others, e.g. my patients and their families, students, colleagues and shaping NP education.

Is there anything you would want to change?

Although the culture of clinical practice is greatly improved since I began NP practice in 1977, I would like to change the paternalistic, hierarchical culture in which physicians learn and practice to a truly collegial culture. I envision a culture in which physicians and NPs are truly equal, not in their education, but with an appreciation of their unique gifts and humanity that they clinically contribute to clinical practice.

What do you see as pivotal moments in the past years?

The pivotal moments have been changes in prescriptive and full practice authority statutes that have enabled NPs to practice to the full scope of their authority.

What advice would you give to new nurse practitioners?

Be yourself. Quality, integrity and lifelong learning are essential to achieve excellence to reach your full potential. Engage in advocacy and organizational participation to advance the role and practice of NPs.

What do you see as the role of Nurse Practitioners in the next 25 years?

The role of the NP has the potential to become the major provider of health care in the U.S. within 25 years. Quality NP education will be the determining factor whether NPs will become the major provider in 2025. If NP educators flood the market with poorly educated, not ready for practice, the role of the NP will be in jeopardy of being eliminated.