



Breathline

Volume 30, Number 6

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Beyond Accountability to Self

In the last issue of *Breathline*, we looked at professional accountability and the obligation a nurse has to self, as indicated in the *Code of Ethics for Nurses*.¹ The focus for this column explores a provision that addresses the nurse's accountability to the nursing profession. Provision 7 states, "The nurse participates in the advancement of the profession through contributions to practice, education, administration and knowledge development."² Whether at the bedside, in the classroom, or as nurse leaders, we all have opportunities to advance perianesthesia nursing. Each of us can impact our profession.

Nurses advance the discipline by modeling professional responsibility and integrity. ASPAN's *Perianesthesia Standards for Ethical Practice* lists aspects of professional responsibility which include: adhering to regulatory policies and standards; ensuring comparable levels of care for patients receiving sedation or anesthesia; demonstrating stewardship with resources; collaborating with the healthcare team to provide optimal patient care; safeguarding the confidentiality of patient information; and protecting patients from incompetent, unethical or questionable practice.³

Reinvent Opportunities

While this list of responsibilities may seem daunting, you are modeling professional accountability and making a difference every day. Recall the times you thought of a better way to provide quality or safer care to your patients. Perhaps it involved providing information on better equipment to perform nursing work, or sharing evidence based research to change a procedure or process. Perianesthesia nurses also have the opportunity to meet this obligation through mentorship, both in the workplace or through involvement with an ASPAN component or its national organization.

Mentorship is key for professional growth and development. When you think of mentorship, do you envision a more seasoned nurse providing support to a new



Kim Kraft, BSN, RN, CPAN
ASPN President 2010-2011

graduate nurse or an experienced nurse newly entering a perianesthesia nursing practice environment? In reality, a nurse does not have to be seasoned in a particular practice to mentor others. For example, the novice perianesthesia nurse may share knowledge about the basics of performing evidence based literature reviews with his or her more experienced coworkers who haven't formally opened a textbook in decades, or may help a colleague master new electronic documentation on a (gasp!) computer.

Opportunity Knocks

The ASPAN Up & Comers program offers a formal mentorship opportunity for nurses who wish to explore their potential. Not every mentee in the group aspires to become involved at the component or national level. Some are interested in developing skills for public speaking or writing for publication. Each mentee is matched to a mentor who has the requisite skill set or experience that fits the novice's goals.

Perianesthesia nurse educators are charged with advancement of the profession through knowledge development and dissemination. This can be accomplished by providing newly hired nurses and established coworkers with up-to-date educational materials, such as competency-based orientation programs, recent research findings with associated practice implications, and journal articles that offer new information and best practice strategies. ASPAN is meeting the responsibility for knowledge development through two avenues – one clinical and one academic. The Orientation Strategic Work Team (SWT) is now developing a perianesthesia education program for the inexperienced and/or new graduate nurse. The SWT is building upon ASPAN's *Competency Based Orientation and Credentialing Program for the Registered Nurse in the Perianesthesia Setting*⁴ by transferring publication content into online learning modules containing current case study information. The Advanced Perianesthesia

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Celebrating 30 years of perianesthesia nursing excellence: 1980 - 2010.



Degree SWT was created to design, develop and/or deliver course content in concert with Wilmington University's requirements necessary to earn an ASPAN sponsored Graduate Perianesthesia Advanced Degree education program.

Nursing leadership can advance the profession by supporting established ASPAN practice standards as they relate to different perianesthesia points of care, and empowering nurses to deliver the very best care possible. Leaders can provide a safe environment in which nurses practice by ensuring it is free from verbal/physical threats or inadequate staffing. This is not always an easy task in today's economic and social climate. Strong nursing leaders at the bedside have long been recognized as a way to decrease errors and improve patient safety.

Impact the Standards

Provision 7 also calls on professional nurses to develop, maintain and implement professional standards. To that end, the ASPAN Clinical Practice Committee fields perianesthesia nursing practice queries from around the globe. The incoming questions are categorized and reviewed by members of the Standards & Guidelines Committee, in conjunction with Evidence Based Practice Committee members, to identify emerging perianesthesia practice trends and develop or revise current standards of practice utilizing evidence based research. When relevant evidence is lacking, the Research Committee supports nurses by promoting perianesthesia research priorities, providing grants for research projects, disseminating

research findings, and networking with other nursing organizations to identify current nursing research issues.

In the very near future, nurses will occupy an even greater role as healthcare reform takes shape in our country. The new focus will involve nurse-led delivery of care, and nursing will be empowered to change the traditional physician driven care model. It is key that nurses become accountable for the advancement of our profession in order to be prepared for this paradigm shift.

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Issue	Deadline
January	November 1
March	January 1
May	March 1
July	May 1
September	July 1
November	September 1

PeriAnesthesia Nurse Awareness Week (PANAW)

February 7-13, 2011

Marcelene McLure, RN, CPAN – Membership & Marketing Committee Member

Why are perianesthesia nurses so special? I believe this specialness is related to the diversity of our patient population. Perianesthesia nurses' skill sets cross over into every other patient care arena. For example, we do not exclusively practice neurological, orthopaedic, internal medicine, adult or pediatric nursing! Instead, perianesthesia nurses must be knowledgeable about assorted patient ages and stages, medical and surgical conditions, and specialized interventional procedures.

Surgical and procedural patients requiring anesthesia are usually frightened by the unknowns surrounding their care. We are asking those patients to trust us with their safety while at their most vulnerable. Perianesthesia nurses become the patients' eyes, ears and voice; therefore, we must act as strong advocates to ensure every patient realizes the best possible outcome through watchful eyes and expert clinical practice. It's no wonder perianesthesia nurses are special!

Plan Ahead

PANAW is held in early February. Interestingly, for many of us, this week sort of sneaks up on us due to the busy winter holiday season and many end of year activities. Suddenly, before you know it, February arrives and PANAW plans have yet to be made!

PeriAnesthesia Nurses | Exceptional PEOPLE Extraordinary CARE

Vow to start making your PANAW celebration plans today! Visible unit/facility displays and staff member PANAW attire create a perfect opportunity for communication to explain PANAW and all that this celebration represents.

You may wonder what your department or organization can do to spread the word about the value of the women and men practicing in the perianesthesia nursing setting. Here are just a few suggestions:

- Plan an open house to showcase your unit
- Contact the local media and offer to do an interview
- Write a newspaper article or letter to the editor describing the every-day importance of perianesthesia nursing care
- Obtain a proclamation from your local or state representative and display this in your facility
- Purchase 2011 commemorative PANAW items to draw attention throughout the weeklong celebration

Don't miss this incredible opportunity to enlighten others about our great profession and ASPAN, its dedicated specialty nursing organization! 

PeriAnesthesia Nurse Awareness Week is almost here.

This celebration is especially designed for you to display and describe to others the importance of perianesthesia nurses' impact on quality healthcare delivery.

This year, show support for your profession, staff, colleagues and friends with gifts from the American Society of PeriAnesthesia Nurses. Our unique collection of new Awareness Week promotional items can make this year's celebration the best ever!

Click here to see the 2011 PANAW Promotional Items Catalog* or visit www.aspan.org and select the "Events" tab.

**Please place your order by January 24, 2011 to ensure a timely delivery for PeriAnesthesia Nurse Awareness Week.*

PANAW
2011



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Safety Tool Application

Dina A. Krenzischek, PhD, MAS, RN, CPAN, FAAN – ASPAN Safety Committee Chair



Dina Krenzischek

Quality management safety principles are only effective when a workplace design process is successfully implemented. One of the most common tools rooted in quality and improvement is the Plan-Do-Check-Act (PDCA) Cycle, popularized by Dr. W. Edwards Deming. **Plan** focuses on the analysis of information by soliciting ideas and selecting the best plan for improvement. **Do** centers on piloting or full implementation of the plan. **Check** involves the gathering of information to verify whether or not the desired effects of the implemented plan have been achieved. **Act** focuses on sustaining the gains made, or making corrections as needed.^{1,2}

Hand-Off Plan

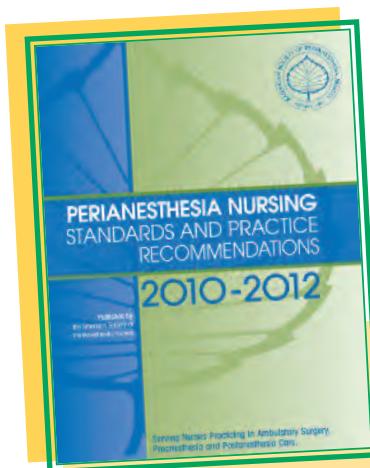
A case of patient identification during hand-off transfer of care may sound simple, and yet errors have been made. The Joint Commission requires at least two identifiers to validate a patient's identity.³ In the *planning* process, the staff recommended a step-by-step process to identify the patient and a checklist was developed to improve and reinforce the practice. The *do* portion included staff education regarding the expectation that hand-off is not complete until a proper identification process has been implemented. This process was piloted for one week and then proceeded to a full implementation. The *check* process showed

consistent change in staff practice, including use of the checklist. In the *act* process, not only did the staff sustain the standard practice, but further required the sending staff member to come to the PACU, identify the patient, and change the identification bracelet if wrong (or place a new bracelet when no bracelet was located on the patient) using two identifiers. Some key success points are: work flow analysis; engagement of management personnel and peers to do the right thing; clear expectations of healthcare team members; a non-punitive approach; recognition and reporting of decreasing error trends; and a targeted goal for defects. The PDCA cycle is simple and easy to follow and is applicable on simple to complex situations. The integration of a staff performance plan provides a practical approach when implementing quality management safety principles.

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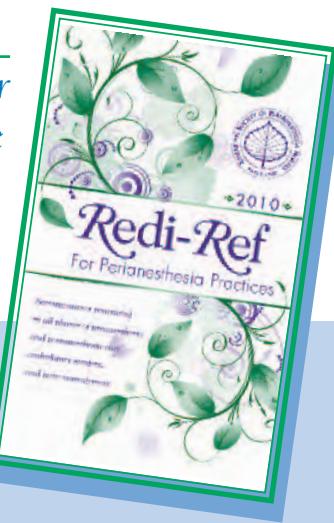
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Frequently Asked Questions

Barbara Godden, MHS, RN, CPAN, CAPA – ASPAN Director for Clinical Practice

The Clinical Practice Committee receives many questions via the ASPAN Web site each month. Committee members then research the answer and respond to the query. This is one frequently asked question.

Q. Can a patient ambulate to the car, or is it required that we take them out in a wheelchair?

A: This question comes up frequently through the questions sent into the Clinical Practice Network. One recommendation for assessment and management to be done prior to discharge, as found in the *ASPAR Standards*, is “arrangements for safe transport from the facility.”¹ The perianesthesia registered nurse (RN) determines the “mode, number, and competency level of accompanying personnel” and method of transportation from the facility based on patient needs.²

With these practice recommendations, it is within the RN’s decision-making scope to determine if a patient can ambulate to the car or be discharged via a wheelchair. Many patients having general anesthesia may still be drowsy upon discharge and would require a wheelchair. If a patient has received only sedation or has undergone a monitored anesthesia care procedure, he/she may feel capable of ambulating to the car. In all cases, whether discharged by wheelchair or ambulation, it is important for a nurse or patient care technician to accompany the patient. Again, according to the *ASPAR Standards*, the RN determines the mode of transportation from the facility as well as the competency level of the accompanying facility personnel.²

Walk or Ride?

If a patient received local anesthetic infiltration into an inguinal hernia site, ambulation must be assessed before the patient is discharged to ensure that the local anesthetic did not affect the lower extremities and an ability to ambulate. For a patient having a laparoscopic procedure, ambulation may enhance elimination of carbon dioxide used during the procedure. Ambulation also enhances oxygenation and elimination of the inhalation anesthetics. Often, having a patient ambulate to the car is a good way to assess the steadiness of the patient’s gait and provides an indication of how well he/she will manage at home. Part of the regular discharge instructions should include a discussion about having a responsible adult walk with the patient to provide support as needed for the first few times he/she ambulates at home.

If necessary, additional home safety ambulation instructions can be given while the patient and a responsible adult are escorted to the car. For example, the instructions may include having the patient get up at intervals to walk around the kitchen in order to get his/her “sea legs” back.



Several factors can influence a nurse’s decision about discharge transport measures

Other patients may require a wheelchair. These include those having lower extremity orthopedic procedures, the elderly, and patients who are still a little drowsy. When the exit door is located a long distance from the recovery area, this may require the use of a wheelchair to safely discharge the patient. In the end, the RN’s decision ultimately falls within the facility policy and procedure regarding whether or not patients must be discharged via a wheelchair. However, the *ASPAR Standards* allow the RN to use his/her assessment skills and clinical judgment as to the mode of patient discharge. Depending on the individual patient, this decision could be discharge via a wheelchair or by ambulation.

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Barbara Godden
Director for
Clinical Practice

The “Gold Standard” Call for Component Gold Leaf Award Applications

Boni Hart, BSN, MA, RN – ASPAN Membership & Marketing Committee Member

Each ASPAN component exists to develop and enhance the individual member's practice. One of the best actions a component can take to reinvest in its potential is to seek to achieve ASPAN's Gold Leaf Award. This award represents the “gold standard” by which ASPAN measures the effectiveness of its components. The award criteria provide a blueprint for component development, achievement and success. For more information about the [Gold Leaf Award, click here](#).

The winning component demonstrates excellence in all aspects of its activities, to include



member development, research, leadership, education and the ability to communicate and establish a presence within its membership and community. Every ASPAN component president should have received a Gold Leaf application packet in October. It is now time to enlist the help of all component members by collecting the appropriate documentation needed to complete and submit an application for consideration. Please be sure that the application is postmarked by the deadline date and remember to include all required validation materials.

THE APPLICATION DEADLINE IS FEBRUARY 1, 2011. 

Call for Resolutions for the 2011 ASPAN Representative Assembly

The ASPAN Resolutions Task Force is announcing the 2011 Representative Assembly (RA) Call for Resolutions for the April 3, 2011 meeting in Seattle, Washington.

The RA is the voting body of ASPAN. As the chief policy determining structure of ASPAN, the RA reviews and acts upon resolutions regarding ASPAN bylaws, policy matters, position statements and other issues related to perianesthesia nursing. If you, as a member, believe there is an issue of this nature that needs to be brought before the RA, please contact the National Office* to have a sample resolution form sent to you.

Amendments to the ASPAN bylaws or any general resolution not requiring a bylaws change must be proposed by at least five (5) Active category members acting as one group. Examples include, but are not limited to:

- A Component Board of Directors (or)
- The ASPAN Board of Directors (or)
- A Standing Committee or Strategic Work Team

SUBMISSION DEADLINE

- Resolution forms relating to ASPAN bylaws, position statements, policy matters or other perianesthesia nursing issues must be received by the ASPAN National Office no later than January 3, 2011.

Upon receipt of a resolution form, the Resolutions Task Force will begin its review and, if questions arise, the lead author will be contacted for clarification. During the RA meeting, the lead author of the resolution must be prepared to speak to the issue.

*Please contact Kevin Dill at the ASPAN National Office: 877-737-9696 ext. 11 or kdill@aspan.org to obtain a sample resolution form and instruction sheet. 

Member Spotlight



Terri Butera (left) together with ASPAN Hosted Seminar presenter, Dr. Kim Noble

The Greater Cleveland PeriAnesthesia Nurses Association (GCPANA), part of ASPAN's Ohio component, held an ASPAN Hosted Seminar in September 2010 at Lake West Medical Center (LWMC). The program was well attended and everyone enjoyed hearing Kim Noble, PhD, RN, CPAN, present the featured lecture topic. GCPANA would like to recognize and thank **Nursing Excellence Award** recipient Terri Butera, RN, from the LWMC perioperative unit. Terri was nominated by her peers, who cited her exceptional perioperative nursing knowledge, compassion and care for patients, along with volunteer work performed in the community. LWMC unit-based awards are announced annually during

National Nurses' Week, and the winners are determined by a review committee comprising facility administrators, anesthesiologists and other physicians. Terri did not know about the award until the day it was presented. Her colleagues notified family members in advance so that they could be present when the award was given. Terri was awarded a scholarship from LWMC, which she graciously donated to GCPANA to support the seminar program's success. Kudos and congratulations go to Terri Butera!

ASPN Historian Esther Watson shares good news about New Jersey/Bermuda PeriAnesthesia Nurses Association (NJB-PANA) colleague **Janet Donoghue, BSN, RN, CPAN**, who received the late **Dr. Joseph Alcaro Award for Excellence in Nursing**, an honor bestowed upon a nurse working in the surgical nursing arena. Janet is the PACU Clinical Coordinator for Morristown Memorial Hospital (MMH), and has served as a past president of NJB-PANA. The MMH PACU nurses are very proud of Janet and send their heartfelt admiration and congratulations! 

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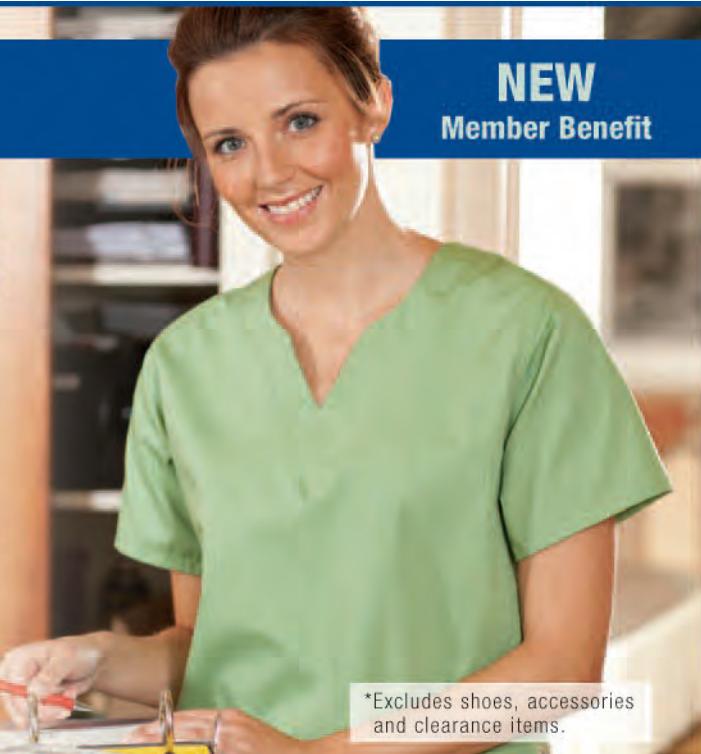
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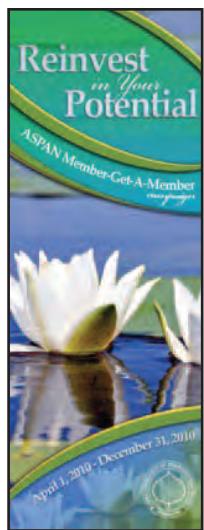
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Member-Get-A-Member (MGM) Campaign

Jane Lind, BS, RN – Membership & Marketing Chairperson

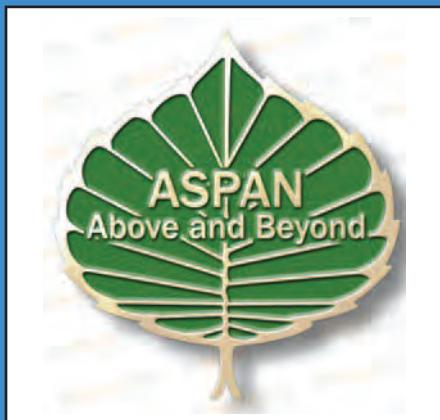
Are you among the 264 ASPAN members who encouraged other perianesthesia nurses to reinvest in their potential during the 2010 campaign cycle? This year's MGM campaign continues through December 31, 2010. **Membership brochures are available for download** on the **ASPAR Web site** (www.aspan.org). Please remember to include your ASPAN membership number on all recruitment applications.

RECRUIT A COLLEAGUE TODAY!

The 2010 recruiter standings and 2011 MGM Campaign information are available simply by clicking on the **ASPAR Web site's "Members" tab**. Remember, the ASPAN Recruiter of the Year is recognized with an award given at the ASPAN National Conference in April. Make 2011 your year to recruit several new members! 

Above & Beyond Service Recognition Awards

ASPAR evolved into the leading organization for perianesthesia nursing practice because of the many contributions made by its dedicated volunteer members. The **ASPAR Above & Beyond Service Recognition Award** (formerly known as the Star Recognition Award) honors members who provide exemplary service to ASPAN and/or a component. The Membership & Marketing Committee recently refined the award criteria, designed a new honoree pin, and gave this program a new name reflective of extraordinary member recognition.



The new pin design for ASPAN's Above & Beyond Service Recognition Award

Beyond Award criteria, nomination procedure and form can be found on the **ASPAR Web site**. Go to www.aspan.org and click on the "Members" tab, click "Awards" from the dropdown menu, and then select "Above & Beyond" from the side menu. Award recipients will be announced at the 2011 National Conference in Seattle, Washington.

Please nominate a deserving colleague for this special recognition award today.

THE DEADLINE FOR NOMINATIONS IS JANUARY 1, 2011. 

Telling Our Stories

ASPAR recently requested clinical narrative submissions to share with the perianesthesia community and lay public as a new feature on its Web site. One goal of this feature is to enhance the public image of perianesthesia nursing by presenting a more accurate portrayal of the work of nurses through their own words and experiences. These individual accounts serve to enhance understanding of the caring practices of nurses.



Nurses have many meaningful practice experiences to share

Please take some time to read the clinical narratives posted thus far and consider submitting a story of your own. We believe that every nurse has an important story to share with others! If you have a clinical narrative or feedback to share, please send it to tclifford@aspan.org. 

ASPAN's 30th National Conference

"Reinvest In Your Potential"

Room Sharing

You may have heard about rain, but the bluest skies you've ever seen are also found in Seattle ... so do come to our beautiful city and enjoy another great ASPAN Conference! Have you thought about sharing this experience? Seattle has so many fun and exciting things to see and do. While a room sharing opportunity allows you to share the cost of attendance, it might also help you enjoy your visit to the city even more. I have shared a room in all but two of my Conference experiences and have always enjoyed the people I've met. In fact, I made new friends, learned how other areas of the country handle different situations, and compared perianesthesia practice problems and ideas. If you've never shared a room before, think about it!

For those interested in sharing a hotel room, simply submit your name to be included on the "Willingness to Share a Room" list. Please include your full name, home address, e-mail address, contact phone number(s), preferred means of notification, and any particular information you'd like a potential roommate to know.

- The deadline to request room sharing is February 1, 2011
- A room sharing list will be distributed in mid February to those who asked to be included
- Participants must directly contact others on the list to coordinate room sharing arrangements and reservations

E-MAIL WILLINGNESS TO SHARE A ROOM REQUESTS TO:

Bill Swarens, BSN, RN, CPAN

Email: bill5356@msn.com or bill5356@clear.net

You may also contact Bill by phone @ 253-847-6117 or 253-297-2884 with any questions.

The Sheraton Seattle Hotel room reservation deadline is March 4, 2011.

Reservations made beyond this date are based upon a space and rate availability basis only.

Hosts and Hostesses Needed

You are invited to help ASPAN throughout National Conference week at the Washington State Convention Center, April 3-7, 2011. Hosts and Hostesses can participate at National Conference, earn contact hours, and be paid a small stipend to help reimburse Conference expenses! The duties of a Host/Hostess include providing directions within the conference area, staffing the registration booth, facilitating session seating, collecting event tickets, distributing hand-outs, and assisting with Provider

Come to Seattle!

Seattle has much more to boast about than great coffee and giving birth to the grunge music scene ... it has many awesome attractions to capture the heart and mind of any ASPAN Conference-goer. Here are a just few of the fun places available to visit while you're in town:

Center City

- Space Needle
- Seattle Monorail
- Seattle Children's Museum
- Experience Music Project
- Pacific Science Center

Downtown Seattle and the Waterfront

- Pike Place Market
- Seattle Aquarium
- Pioneer Square
- Seattle Waterfall Garden
- Myrtle Edwards Park
- Seattle Art Museum
- Klondike Gold Rush National Historical Park

Greater Seattle and Washington State

- Mount Rainier
- Olympic National Park
- North Cascades
- Mount St. Helens Volcanic Monument

For more information on Seattle area attractions [click here](#) or visit <http://www.seattle.gov/html/visitor>

Make plans now to attend the nation's premier perianesthesia nursing attraction - ASPAN's 30th National Conference!

**Seattle
in 2011**



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And We're Off! "Turning Potential into Practice"

Laura A. Kling, MSN, RN, CNS, CPAN, CAPA - ASPAN Regional Director, Region 4

This year, ASPAN President Kim Kraft challenged all members to reinvest in our potential. As a new ASPAN Board member and Regional Director, I was anticipating the Component Development Institute (CDI) as part of the journey to turn potential into practice. This gathering of ASPAN leaders provided key information and the solid foundation for components to excel. Beautiful Louisville, the famous home of horse racing's Kentucky Derby, provided a welcoming backdrop for the event.

Earlier this year, President Kraft voiced a goal for the CDI to provide hands-on learning, information, resources and networking opportunities for new and continuing volunteer component leaders. ASPAN has long recognized the need to support and develop leaders in order to derive the greatest possible benefit for its components. A mutual goal shared at the CDI is to best serve members by recognizing the potential to advance and actualize possibilities.

The ASPAN Regional Directors, dressed in Derby hats with regional colors, collectively addressed "Action Potential – Building the Professional Team." We also explored our inner artist through "Emergenetics" and the characteristics of teams. Side note: it's probably a good thing we all have day jobs! Friday evening concluded with regional meetings which offered a great time to connect and network about common component issues encountered, such as attracting new membership, member retention and recovery, strategic planning, how to offer meetings over a large geographic area, and newsletter development.

On Saturday, ASPAN Vice President/President-Elect Chris Price began the day discussing the potential to lead. Breakout sessions, a new feature this



ASPN President Kim Kraft (center) provided personal attention to CDI attendees, including Robin Steele (left) and Karen Harson

introduced this year, were met with great satisfaction. Members could attend more sessions and choose programs that would help serve a component's needs. Sessions highlighted budget development, beneficial ways in which to use membership reports, policies and procedures, strengthening practice through certification, conference planning, tips and tools for web-based newsletters, critical elements for strategic planning, and interactive discussions on component business management.

Sunday's sessions emphasized available member resources. Barbara Godden, ASPAN Director for Clinical Practice, presented "Empowered Voices: Using Standards to Advocate." How better to advance practice and strengthen components than through evidence based standards? The Regional Directors reviewed the updated "ASPN 101" PowerPoint resource. This customizable tool is available to all components to support and advance membership recruitment.



Networking group sessions were popular among the attendees

Finally, Immediate Past President Terry Clifford charged component leaders to examine potential in the making by using CDI strategies to discover and nurture new leadership and identify potential ASPAN Up & Comers.

The CDI was a jam-packed weekend filled with energizing ideas. And energizing it was! ASPAN leaders shared relevant experiences and resources to spur new thinking and foster communication networks. Many attendees commented on the value in attending this program. Thank you to all who attended and made this program so engaging and successful. We are on a journey to reinvest in our potential ... and the first stop was Louisville. Onward to Seattle, Toronto and beyond!

REFERENCE

1. Browning G. *Emergenetics: Tap into the new science of success*. New York: Harper Collins; 2005.

Thank you to the CDI attendees who submitted photos for this article:

Marigrace Clarke

Terry Clifford

Armi Holcomb

Patrice Moffett

Kathy Paskewitz

Robin Steele



NPANA's (from left) Maria Bell, Virginia Longo and Rebecca Ettien enjoyed a night out in Louisville



Andrea Roane (left) and Carol Davis represented the Mississippi component



Host city Louisville, Kentucky was a winning bet for 2010 CDI attendees

Iowa members Cathy Tigges (left) and Deb Mueller

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ASPN Trivia: A Retrospective Look at the Shaping of Our Organization

Lois Schick, MN, MBA, RN, CPAN, CAPA- ASPAN Past President 2008-2009

New ASPAN members, and those who have been members since 1980, plus the five members who attended all 29 National Conferences, may enjoy a look back to discover – or rediscover - ASPAN trivia. **DID YOU KNOW ...**

- The founding meeting was held in November, 1979 in Chicago, Illinois.
- American Society of Post Anesthesia Nurses (ASPN) was incorporated and the first Board of Directors met in October 1980 in Orlando, Florida.
- The first ASPAN President was Ina Pipkin from Seattle, Washington.
- There have only been four editors since *Breathline* began publishing in 1981: Marie Darcy, Nancy Burden, Jackie Ross and Joni Brady.
- The first National Conference was held in April, 1982 in St. Louis, Missouri. Five ASPAN members have attended all 29 National Conferences: Jane Ehrhardt from New Orleans, Louisiana; Elizabeth Martin from Houston Texas; Deborah Niehaus from Cincinnati, Ohio; Lois Schick from Denver, Colorado; and Esther Watson from Morristown, New Jersey.
- Since the 1986 debut of the *Journal of PostAnesthesia Nursing (JOPAN)*, there have been seven editors: Anne Allen, Denise O'Brien, Kathy Carlson, Susan Goodwin, Joan Bauer, Vallire Hooper, and Jan Odom-Forren.
- ASPAN President Meg Stroud [Danielson] declared the first Post Anesthesia Nurse Awareness Week (PANAW) in 1987.
- In 1989, the 10th National Conference was held in Cincinnati. The first ASPAN President's Award was given to Marie Darcy by President Anne Allen.



Ina Pipkin, BSN, RN,
ASPN's first president



"The Five Amigas" (from left) Esther Watson, Lois Schick, Deborah Niehaus, Elizabeth Martin, and Jane Ehrhardt were together once again at the 2010 National Conference in New Orleans, LA

- In 1983, Guidelines for Standards of Care were developed. Members were encouraged to change their unit's name from Recovery Rooms and Post Anesthesia Rooms to Post Anesthesia Care Units.
- A *PostAnesthesia Nursing Certification Review* book was written in 1984. The first journalism awards were given out at the San Diego National Conference that year.
- American Board of Postanesthesia Nursing Certification (ABPANC) was established in 1985.
- The *Redi-Ref* publication came on the scene in 1986.
- The first Certified Post Anesthesia Nurse (CPAN) examination took place in November 1986.



Numerous scrapbooks house photos and mementoes of the events and people who have shaped the Society from its earliest days through to today

- *Standards of Postanesthesia Nursing Practice* was published in 1991. The first Outstanding Achievement Award and Excellence in Clinical Practice Award was presented at National Conference that year. Provider and Approver Education Status by American Nurses Credential Center (ANCC) began. ANCC is the accrediting organization allowing ASPAN to provide contact hours for education programs and to approve education programs.
- Nominating Committee members were elected rather than appointed beginning in 1992. ASPAN's first million dollar budget was approved that year.
- The ASPAN Foundation was chartered in 1993. A joint Ambulatory Surgery symposium with the Association of Operating Room Nurses (AORN) occurred in San Diego, CA in October of that year. The Best of *Breathline* manual, containing articles from 1981 to 1992, was published.

ASPAN CELEBRATES ITS 30TH ANNIVERSARY: 1980 - 2010



ASPAN Parliamentarian David Wharton thumbs through a 25-year collection of ASPAN Directories containing names of countless members who served the Society over the years

- In 1994, the first Certified Ambulatory Post Anesthesia (CAPA) examination was offered. The 10,000th member joined ASPAN. A Transformation Task Force was created to redesign ASPAN structure. ASPAN's Scholarship program began, under the oversight of the ASPAN Foundation. The first Volunteer Leadership Institute was held in the fall. The first Gold Leaf Component of the Year Award was presented to the Florida Peri-Anesthesia Nurses Association (FLASPN).

- In the fall of 1994, the CEO of ASPAN's former management company, The Phenix Corporation, embezzled \$600,000 from ASPAN. In late 1994, ASPAN's retained a new management company, Slack Incorporated, Thorofare, New Jersey. Kevin Dill was hired as the new Executive Director in February of 1995.
- ASPAN changed its name to the American Society of PeriAnesthesia Nurses in 1995. The first Component Newsletter Contest was held that year.
- The ASPAN Web site (www.aspan.org) was created and launched in 1996.
- The ASPAN national and component single dues structure began in July 1996.
- In 1997, the *Competency Based Orientation and Credentialing Program* for RNs was first published. JoPAN became available online. The Preoperative Assessment Specialty Practice Group (SPG) was chartered.
- The first Representative Assembly convened at the Philadelphia National Conference in 1998. A Consensus Conference in Perioperative Thermoregulation was held that year.
- ASPAN's first International Conference was held in Honolulu, Hawaii, in 1999. The Management SPG was chartered.
- ASPAN's 20th Anniversary National Conference was held in Kansas City, Missouri.

- ASPAN becomes self-managed in 2000 with its national office based in Cherry Hill, New Jersey. Kevin Dill continues as ASPAN's CEO. A toll-free telephone number was established for membership to contact ASPAN. The Pain Management SPG was chartered.
- A Pain and Comfort Consensus Conference was held in March, 2001. A *Competency Based Orientation and Credentialing Program for Unlicensed Assistive Personnel (UAP) in the Perianesthesia Setting* was published that year.
- Nationally accepted Clinical Guideline for the Prevention of Unplanned Perioperative Hypothermia was published in 2002 and made available on the ASPAN Web site.
- The first Past President's Distinguished Service Award presented to Esther Watson in 2003. ASPAN & American Society of Anesthesiologists (ASA) Patient Education video completed. The Publications SPG was chartered. The first Speaker Development Workshop was held in Albuquerque, New Mexico.



ASPAN's 25th Anniversary celebration featured an incredible historical display that contained this handmade quilt comprising every Conference brochure cover's artwork

- In 2004, the Council of Surgical and Perioperative Safety, consisting of seven organizations, addresses safety issues. The participating organizations included: American Association of Certified Registered Nurses (AANA); Association of periOperative Registered Nurses (AORN); Association of Surgical Technologists (AST); American Association of Surgical Physician Assistants (AASPA); American Society of Anesthesiologists (ASA); American College of Surgeons (ACS); and ASPAN. The President and CEO represented ASPAN at the meeting. In 2004, *Breathline* became available online. The Pediatric SPG was chartered.



Attendees peruse a photo depicting 25 years of Conference brochure cover art during ASPAN's 25th National Conference held in Orlando, Florida

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Nancy O'Malley
Region 1 Director

The Director's Connection Region 1 Roundup

Nancy O'Malley, MA, RN, CPAN, CAPA – ASPAN Regional Director, Region One

This is my fifth year serving as Region I Director. I am so very grateful for the many opportunities I have had after saying, "Yes" to ASPAN Past President Pam Windle years ago when she asked me to, "Just try it!" I have very precious memories of the most dedicated, passionate, and compassionate nurses on planet Earth, and appreciate each of you more than you will ever know.

I again want to recognize Region 1 component leaders who served over the past year. Each has stepped up to take on a leadership role so that their component, and ASPAN, could continue on as the premier organization for perianesthesia nursing.

Regional News

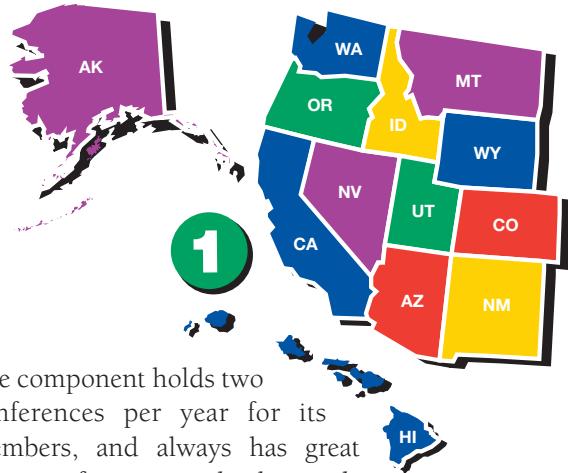
AzPANA is beautiful! President **Ellen Steele, BSN, RN, CPAN, CAPA**, and Vice-President **Maureen Serafin, RN, CPAN**, serve its members. I had the opportunity to speak at the summer conference and work with a terrific team that has fun working together to provide education for colleagues.

PANAC has continued to serve as a model component under the leadership of **Carol Bowen, RN**, and **Cherie Sloan, BSN, RN, CPAN**. This geographically large component is developing chapters in various cities, while hosting larger conferences in different areas of California. These nurses are so fun! They have won many awards and continue to work together to earn more.

HIPAN leaders **Kim Glynn, RN, CPAN, CAPA**, and **Patricia Messerich, RN, CPAN**, had a great year. Over twenty HIPAN nurses attended ASPAN's National Conference in "N'Awlins." Dolly Ireland, MSN, RN, CAPA, CPN, was invited to speak at the component's October conference. I have been so blessed to be able to attend three of the conferences. This component is just stellar!

NevPANA President **Carlito Baginda, BSN, RN**, has been supported by **Chris Squire, BSN, RN, CAPA**, and **Donna Wollman, MSN, RN, APN, CAPA**, to keep this component actively serving its members. Like most small components, it faces the challenge of finding nurses who will join together to provide education and networking needs for nurses living throughout a large state. In January 2010, ASPAN sponsored a certification review seminar in Las Vegas.

PANANM has developed into an even stronger component under the leadership of **Connie Hardy-Tabet, RN, CPAN**, and **Zita Pitcher, RN**.



The component holds two conferences per year for its members, and always has great support from past leaders. The group is vested in sending new leaders to participate in the Component Development Institute – and not just two, but three!

NPANA continues to span across the miles to provide wonderful opportunities for its members. **Patrice Moffet, RN, CPAN, CAPA**, and **Maria Bell, RN, CAPA**, serve this five-state component with meetings held from Montana to Alaska. They lead a talented board of directors possessing a real passion for excellence! The group is currently busy helping Sheri Bowell, RN, CAPA, prepare for the 2011 ASPAN National Conference in Seattle.

RMPANA **Pam Myrum, BSN, RN, CPAN, CCRN**, and **Sharon Hill, MSN, RN, CAPA**, provided a fun, energizing experience for all who attended the "Retreat in the Rockies" Fall Conference. This component has a dedicated team providing education for nurses in Wyoming, Colorado, and the western panhandle of Nebraska, and nurses come from all over to attend!

USPAN President **Robbyn Perry, RN, CAPA**, has been supported by Past President **Lauri Rosenlof, BSN, RN, CAPA**, over the past year. The Utah team is looking for new leaders to develop in order to provide education and networking opportunities for perianesthesia nurses. If you are interested in participating at any level, please contact Robbyn or me.

My greatest reward has been observing nurses in each of these eight components come together to learn and share experiences. I am honored and blessed to have served as ASPAN's Region I Director. Thank you, again, for this experience. It has enriched my life!

Contact Nancy O'Malley at nomalley@aspan.org

CALL FOR ABSTRACTS

International Conference for PeriAnesthesia Nurses

"Many Practices ... Just One World"

October 2-5, 2011

The inaugural International Conference for PeriAnesthesia Nurses will take place in Toronto, Ontario, Canada at the Sheraton Centre Hotel. This event is sponsored by the American Society of PeriAnesthesia Nurses (ASPN), British Anaesthetic & Recovery Nurses Association (BARNA), Irish Anaesthetic & Recovery Nurses Association (IARNA) and National Association of PeriAnesthesia Nurses, Canada (NAPANC).

International Conference

for
PeriAnesthesia
Nurses



TORONTO, CANADA ~ 2011

Visit www.icpan.info to submit an abstract or to learn more about the conference.

THE DEADLINE FOR SPEAKER ABSTRACTS IS JANUARY 31, 2011.

Certification



The American Board of Perianesthesia Nursing Certification, Inc. (ABPANC) administers CPAN® and/or CAPA® certification examinations. Please visit the ABPANC Web site www.cpancapa.org for complete information about the certification process and upcoming perianesthesia certification testing windows.

Contact ABPANC



ABPANC
475 Riverside Drive,
6th Floor
New York, NY 10115-0089
Phone: 1-800-6ABPANC
Fax: 212-367-4256
www.cpancapa.org

ASPN Hosted Seminars

January 29, 2011 Foundations of Perianesthesia Practice in Greenville, SC. Hosted by South Carolina Association of PeriAnesthesia Nurses (SCAPAN). Contact Nancy Zarczynski at 864-240-2142 or nanzar@msn.com

February 12, 2011 Perianesthesia Certification Review in Greeley, CO. Hosted by Rocky Mountain PeriAnesthesia Nurses Association (RMPANA) District IV. Contact Linda Davis at 970-350-6094 or katiesgrammy@cardinalbroadband.net

February 12, 2011 Perianesthesia Certification Review in New Orleans, LA. Hosted by Southeastern Association of PeriAnesthesia Nurses (SEAPAN), a regional component of the Louisiana Association of PeriAnesthesia Nurses. Contact Fatima Acosta at 504-842-7262 or facosta@ochsner.org

February 19, 2011 Perianesthesia Certification Review in Stuart, FL. Hosted by Martin Memorial Health System. Contact Joan V. Ruby at 772-223-5945 ext. 3205 or vruby@mehs-fla.org

March 12, 2011 Perianesthesia Certification Review in Baltimore, MD. Hosted by Chesapeake Bay Society of PeriAnesthesia Nurses (CBSPAN). Contact Diane Swintek at 443-777-7735 or diane.swintek@medstar.net

March 19, 2011 Perianesthesia Certification Review in Saratoga Springs, NY. Hosted by The Saratoga Hospital. Contact Katherine Riley at 518-580-2881 or kriley@saratogacare.org

April 23, 2011 Perianesthesia Certification Review in Geneva, IL. Hosted by Delnor Hospital. Contact Carolyn Sinclair-Shaw at 630-208-4043 or carolyn.sinclair-shaw@delnor.com

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- The PeriAnesthesia Nurses Association of California (PANAC) was the first component to win the Gold Leaf Component of the Year Award for a second time in 2005.
- An ASPAN National Office Nurse Education Consultant, Linda Wilson, was hired part-time in 2005.
- In 2006, the 25th National Conference took place in Orlando, Florida. For the first time during PANAW, the opportunity for ASPAN members to obtain free contact hours from articles in *Breathline* and *JoPAN* was offered. ASPAN's Up & Comers Program established. The Geriatric and Advanced Degree SPGs were chartered. The ASPAN Star Award was established. ASPAN invited to attend the American College of Surgeons meeting in Chicago in October of that year.
- The Dream Walker Award was established in 2007.
- The *Perianesthesia Data Elements Model* introduced in February 2008. Perianesthesia Nurse Educator SPG chartered.
- 'Go Green' initiative was established in 2009. ASPAN's Web site completely redesigned and re-launched. *Breathline* available online only beginning in March.

• In December of 2009, ASPAN purchased an office building to house its headquarters at 90 Frontage Road in Cherry Hill, New Jersey.

• The International Conference SWT was appointed in 2010 to develop and promote a future International Conference in partnership with three other international perianesthesia nursing organizations. The Informatics SPG was chartered.

WOW! Viewing 'ASPN's Firsts' certainly makes one reflect on how far this not-for-profit organization has come along with its sister organization, ABPANC. Stay tuned...there is much more to come as ASPAN continues to advance the unique specialty of perianesthesia nursing.

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ASPN Seminars

January 15, 2011

Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
Phoenix, AZ

January 22, 2011

Perianesthesia Certification Review
Houston, TX
Colorado Springs, CO
Sacramento, CA

January 29, 2011

Pediatrics: Beyond the Basics
Collinsville, IL
Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
Murfreesboro, TN

February 5, 2011

Perianesthesia Certification Review
Eatontown, NJ
Springfield, IL

February 19, 2011

Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
Albuquerque, NM
Rockford, IL

February 26, 2011

Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
Warwick, RI

March 5, 2011

Pediatrics: Beyond the Basics
San Francisco, CA
Perianesthesia Certification Review
San Antonio, TX

March 12, 2011

Perianesthesia Certification Review
Winston-Salem, NC
Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
Sacramento, CA

May 7, 2011

Perianesthesia Certification Review
Minneapolis, MN

May 21, 2011

Complexities and Challenges of Perianesthesia Nursing: Across the Ambulatory and Perianesthesia Continuum
San Diego, CA

June 4, 2011

Safety Begins With Us
San Antonio, TX
Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy
White Plains, NY 



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