



Breathline

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INSIDE:

PRESIDENT'S MESSAGE: Igniting Professionalism through Listening

What a fabulous week in Las Vegas! Over 2000 attendees were present to network, rekindle friendships, participate in learning opportunities and have a bit of fun on the side. I did not hear if anyone ever saw the ghost of Elvis, but he was certainly present at Component Night along with Frank Sinatra. My hope is that everyone went home only slightly exhausted but with a big smile and ready for San Antonio in 2015!

As we move forward as a specialty in perianesthesia nursing with all of the changes we are facing in health-care, it is a great time to think about listening. Being present at any discussion means truly listening to what others have to say and responding respectfully and professionally. Dianne Schilling, contributor to *Forbes Woman*, listed "Ten Steps to Effective Listening."¹

1. Face the speaker and maintain eye contact
2. Be attentive, but relaxed
3. Keep an open mind
4. Listen to the words and try to picture what the speaker is saying
5. Don't interrupt and don't impose your "solutions"
6. Wait for the speaker to pause to ask clarifying questions
7. Ask questions only to ensure understanding
8. Try to feel what the speaker is feeling
9. Give the speaker regular feedback
10. Pay attention to what isn't said—to nonverbal cues

This is not new information, as we have all heard this before in our professional lives. Whether presenting a lecture in school, addressing a committee of colleagues, or interacting with a peer, these rules for effective listening allow for a respectful exchange of information. When we are not engaged in listening, a true understanding of the message being delivered cannot be received. Can you imagine preparing




Jacque Crosson
MSN, RN, CPAN
ASPAN President 2014-2015

a patient for surgery who is distracted (on his cellphone), disinterested and interrupting constantly? With increasing time constraints, perianesthesia nurses must still deliver their "message" while performing an assessment, getting consents signed, verifying advanced directives along with all of the other responsibilities necessary to get patients optimized for surgery. How much easier this can be when the steps of effective listening are followed?

Perianesthesia nurses all over the country are involved in leadership roles: component boards of directors, hospital committees, governmental affairs groups, managers, directors, teachers, mentors and staff nurses. Developing superior listening skills allows for full, collegial participation in these endeavors while enhancing abilities as an effective leader. Recognition for being a thoughtful, integrated and fully involved member of any team enhances your reputation as a professional. Understanding the value of effective listening is a positive trait that will bring recognition and advancement to a career.

What we do each day as perianesthesia nurses is critical to patient safety. Every encounter requires full engagement so that day-to-day distractions within the department do not deter our concentration or focus. Our patients deserve an attentive, clinically competent nurse with superior listening skills. This allows the patient to feel engaged and important and that their concerns really are being addressed. Our patients continue to express genuine gratitude for the care and respect they receive from their perianesthesia nurses ***Igniting Professionalism through Listening!***

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1. Schilling D. 10 Steps to Effective Listening. Available at: <http://www.forbes.com/sites/womensmedia/2012/11/09/10-steps-to-effective-listening/2/>. Accessed April 30, 2014. 



Start Planning to Showcase Your Accomplishments with Abstracts and Posters for the 2015 National Conference in San Antonio, Texas!

Celebrate Successful Practices abstracts are due by **October 31, 2014**. Categories include patient care, staff education, nursing leadership, preadmit/preop, patient flow, handoff communication/documentation, and unit/environment. Research abstracts are also due **October 31, 2014**. **Start planning now to showcase your accomplishments! Visit the [ASPAN Web site](http://www.aspan.org) for more information.**



SAVE THE DATE

September 5-7, 2014

**Leadership Development Institute
Nashville, Tennessee**

Igniting Professionalism: Excellence in Practice, Leadership and Collaboration

Are you thinking about the Leadership Development Institute coming to Nashville, Tennessee? I certainly hope you are. This weekend event is designed with your input so that it will meet your needs and expectations to strengthen and develop leadership at the component level. Whether you desire the perfect Gold Leaf application, financial strategies, seminar planning, ASPAN Web site navigational "pearls," JBI updates, mentoring, changes in Standards or just plain old networking to name a few, this institute is for you! See you in September. **For more information, [click here!](#)**

Call For Nominations! Create a Winning Team

Twilla Shrout, BSN, MBA, RN, CPAN, CAPA

ASPAN Immediate Past President and Nominating Committee Chair

ASPAN is seeking leaders willing to explore their potential, discover their power and work to continue making positive changes for perianesthesia practice. Qualified and eligible candidates are needed for 2015-2016 ASPAN Board of Director positions:

- Vice President/President-Elect (three-year term)
- Treasurer (two-year term)
- Director for Education (two-year term)
- Director for Research (two-year term)
- Regional Directors: Regions 1, 3, and 5 (two-year terms)
- Nominating Committee (one-year term)(five members)

To be considered for a leadership position:

1. Declare your candidacy as soon as possible, via email to tshrout@aspan.org.
2. An Intent to Place Name in Nomination Form and Conflict of Interest form must be signed electronically and emailed with a date stamp no later than October 1, 2014. Late submissions will be returned.
3. An ASPAN Candidate Profile Sheet and Curriculum Vitae must also be submitted electronically with a date stamp no later than October 1, 2014. Hard copies and faxes will NOT be accepted.

For more information visit the [ASPAN Web site](http://www.aspan.org), or contact Jane Certo at the ASPAN National Office at jcerto@aspan.org or 1-877-737-9696, Extension 213. **The deadline to declare a candidacy is October 1, 2014.**



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Deadlines for inclusion in *Breathline*:

IssueDeadline
JanuaryNovember 1
MarchJanuary 1
MayMarch 1
JulyMay 1
SeptemberJuly 1
NovemberSeptember 1

Willingness to Participate

Armi Holcomb, BSN, RN, CPAN – Vice President/President-Elect 2014-2015

Greetings, colleagues! Hope you are having a wonderful summer enjoying family and friends. This is a great time of year for relaxation, reflection and rekindling of relationships so important for our health and emotional balance. As perianesthesia nurses, we are so busy caring for others that we do not always take time to care for ourselves. A great way to regenerate personally is to participate in your professional organization. The collaboration, networking and relationships you develop both close to home and nationally elevate practice and allow for contin-

ued growth in our specialty. ASPAN has many opportunities for you. Participation in committees, strategic work teams, and specialty practice groups provide the platform to increase knowledge while developing a professional network. Take a moment to visit the ASPAN Web site and complete a Willingness to Participate form. There are so many choices and something for all practice settings. I look forward to hearing from you! **The deadline is October 31, 2014. For more information, [click here](#).** 🌿

ASPAN News

CONGRATULATIONS!

ASPAN NOMINATING COMMITTEE MEMBERS

Congratulations to the newly elected members of the 2014-2015 Nominating Committee!



Clara
Boudreaux
BSN, BS, RN,
CAPA



Deborah Ebert
BSN, RN, CCRN,
CNOR, CPAN,
CAPA, TNCC



Raquel Evans
BSN, RN



Lori Silva
RN, CCRN,
CPAN



Diane Swintek
BSN, RN, CPAN

Recruiter of the Year Award

This year, ASPAN is pleased to recognize Cielito Ascio as the Recruiter of the Year. Cielito hails from Texas and was recognized by her home component, TAPAN, this past fall for her recruitment efforts. Through her tireless efforts, TAPAN and, in particular, the Hill Country and South Texas region have eighteen new members. She is a recruiting dynamo who is keeping ASPAN and TAPAN strong and vibrant. In addition to being a terrific recruiter, Cielito has been highly involved in the activities of her region helping to spearhead the fall seminar. ASPAN is proud to recognize her for recruiting eighteen new members! Keep up the great work, Cielito!

Congratulations to the 2014 National Conference Strategic Work Team (NCSWT) for organizing an awesome conference!

Members of the 2014 ASPAN NCSWT

Susan O'Day, *Coordinator*
Deborah Ebert
Nancy Strzyzewski
Lori Silva
Cindy Hill
Linda Ziolkowski

Laura Atherton-Bonilla
Twilla Shrout
Jacque Crosson
Katrina Bickerstaff
Linda Wilson
Courtney Papp
Kevin Dill

Frequently Asked Questions

Care of the Perianesthesia Patient Having “Straight” Local Anesthesia

Susan Russell, BSN, RN, JD, CPAN, CAPA – ASPAN Director for Clinical Practice



Susan Russell
BSN, RN, JD, 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.

For purposes of this article, “local anesthetics” are those administered topically or by local infiltration by, or at, the direction of the procedural physician. No anesthesia provider is involved in the patient’s care.^{1,2} Patients receiving “straight local” anesthesia are rarely admitted to a phase I PACU and may be transferred directly from the procedure room to an outpatient discharge area.

Q. Does ASPAN have any guidelines addressing preop documentation for local/minor procedures performed in a hospital?

A. The ASPAN 2012-2014 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements* apply to any setting in which patients are receiving “sedation/analgesia and/or anesthesia for surgical, diagnostic or therapeutic procedures,”³ including those performed under “straight local” anesthesia. The ASPAN 2012-2014 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements* provide a framework for safe patient care and are intended to guide development of facility-specific policies. Consult state/federal regulatory and accreditation requirements when writing policies and procedures for “local only” cases. Rules may include requiring a preoperative history and physical, observing applicable Surgical Care Improvement Project (SCIP) measures, and complying with core measures.

Preoperative Care

ASPAN Practice Recommendation 2, “Components of Assessment for the Perianesthesia Patient,” addresses the components of assessment for the perianesthesia patient. Preoperatively, follow facility approved procedures for identifying the patient and obtaining informed consent. The preop assessment should include the pertinent medical history and a focused physical assessment. Assess the patient’s safety needs and any disabilities which indicate that the patient will need a caregiver/transportation at discharge. Document baseline vital signs, including temperature and pulse oximetry, mental status/level of consciousness, pain level, expectations for pain management and comfort, and skin integrity. Perform a neurovascular and/or neurological assess-

ment as needed. Review and document any medications the patient currently takes, date and time of last doses, and any allergies. Obtain the results of diagnostic studies and/or medical clearance from the patient’s primary physician. The decision to insert an IV should be made in collaboration with the procedural physician. Consider procedural and individual risk factors, including patient age and comorbidities.^{2,3} Begin discharge planning and education at the time of admission.

Postoperative Care

Postoperatively, perform a physical assessment to ascertain any variation from the preop assessment, including vital signs and pulse oximetry. For patients receiving local anesthetics with epinephrine, consider obtaining vital signs at frequent intervals until readings return to baseline, then reassess immediately prior to discharge. Assess the patient’s pain level using the facility’s preferred pain scale. Remember to note location, quality, severity, frequency, duration, and any exacerbating and alleviating factors. Perform neurovascular and neurological assessments as indicated. Document reports of numbness and tingling, as well as decreased strength and mobility. Assess for fall risk as indicated by the procedure, comorbidities and pre-existing physical condition or post procedure findings.³ Note any signs or symptoms of local anesthetic toxicity which could progress to seizures and/or cardiac arrest.⁴

A second frequently asked question related to local anesthesia is as follows:

Q. What does ASPAN recommend to manage post procedure pain for patients who had straight local anesthesia without IV access?

A. Many patients do not require pain medication prior to discharge when local anesthetics are used. Try adjunctive therapies such as ice, heat and repositioning to alleviate discomfort. If the procedure is likely to cause postoperative discomfort, ascertain whether or not the patient has a caregiver/driver to accompany him home. Consider NSAIDs instead of opioid pain medications. Most patients receiving “local only” anesthetics can

tolerate oral medications. If necessary, consider the intramuscular route or dermal patches. In extreme cases, it may be prudent to contact the procedural physician for orders to insert an IV. Review the patient's history for renal or hepatic impairment/failure before administering any medications post-operatively. Observe the patient and reassess for adverse effects if this is a new medication.

Discharge Criteria


Discharge criteria should be established for this patient population. When anesthesia providers are not involved, the medical staff should collaborate to establish safe discharge criteria. It may be necessary to write procedure-specific or physician-specific criteria and orders. For some procedures, extended observation may be necessary to ensure safe patient discharge. Discharge criteria should not be based solely on a time interval.³ Some patients can safely operate a motor vehicle shortly after a procedure while others may require a driver. The need for a responsible adult or a driver after local anesthetics depends upon the patient's post procedure status. In some cases, the patient may be alert and mentally competent, but experiencing numbness/tingling/weakness in a lower extremity, which makes walking and/or driving an unreasonably dangerous activity. Written instructions should be reviewed with the patient prior to discharge. The instructions should include information on how to protect the anesthetized area to prevent injury. Address any questions the patient may have regarding post procedure

activities and follow up care. Incorporate a review of medications the patient will be taking at home. Specifically address when the patient should resume taking his usual home medications and educate the patient if there are prescriptions for any new medications.

Summary

The ASPAN 2012-2014 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements* apply to any patient undergoing a procedure in any setting under any type of anesthesia, including local anesthesia only. The principles of ethical and safe perianesthesia practice serve as the foundation for the ASPAN Practice Recommendations and should be applied every time care is provided.

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2. Association of periOperative Registered Nurses. *Recommended Practices for Managing the Patient Receiving Local Anesthesia in Perioperative Standards and Recommended Practices*, 2013. Available at: <http://aornesubscription.org>. Accessed February 27, 2014. (Must be an AORN member to access this site.)
3. American Society of PeriAnesthesia Nurses. *2012-2014 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. Cherry Hill, NJ: ASPAN; 2012: 36-42.
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Congratulations to ASPAN members who were recognized in nomination for an award by their colleagues for 2014:

Excellence in Clinical Practice Award Nominees

Rosalie Gallagher, BA, RN, CAPA
Susan Garufi, BSN, RN, CPAN
Cathy Henry, BSN, RN, CAPA
Carol Jones, MSN, RN, CPAN
Jean Anne King, BSN, RN, CAPA
Joanne Kulesh, MSN, RN, CPAN
Elizabeth Morse, BSN, RN, CPAN
Amelia Pacardo, BSN, RN, CCRN, CPAN
Noelle Paul, BSN, RN, CAPA, OCN
Mary Rachel Romero, MSN, RN, CPAN, CAPA
Denise Taggart, RN, CAPA, CNLC
Julanne Seefeldt, MSN, RN, CAPA
Georgene Weber, RN, CAPA
Mary Yanolatos, BSN, RN, CPAN
Patricia Zepka, RN, CAPA, PCCN
Antoinette Zito, MSN, RN, CPAN


Award for Outstanding Achievement Nominees

Kathleen Lombardo, BSN, RN, CAPA
Valerie Watkins, BSN, RN, CAPA

Above and Beyond Service Recognition

Of the 32 names placed in nomination for this recognition, these are the ten recipients of the award for 2014:

Sylvia Baker, MSN, RN, CPAN
Linda Beagley, BSN, MS, RN, CPAN
Virginia Brouillette, MSN-Ed, RN, CPAN
Sarah Cartwright, MSN-PH, BAM, RN, CAPA
Brenda Elliott, BSN, RN, CPAN
Stephanie Kassulke, MSN, RN, CPAN
Kim Noble, PhD, RN, CPAN
Lori Silva, RN, CCRN, CPAN
Renee Smith, BSN, MS, RN, CPAN, CAPA
Sana Zamarripa, BSN, RN

Visit the ASPAN Web site for information on how to nominate a deserving colleague for a 2015 ASPAN Award. Visit www.aspan.org Members > Awards. 

ASPAN's State of Finance for Fiscal Year 2013

Katrina Bickerstaff, BSN, RN, CPAN, CAPA – ASPAN Treasurer

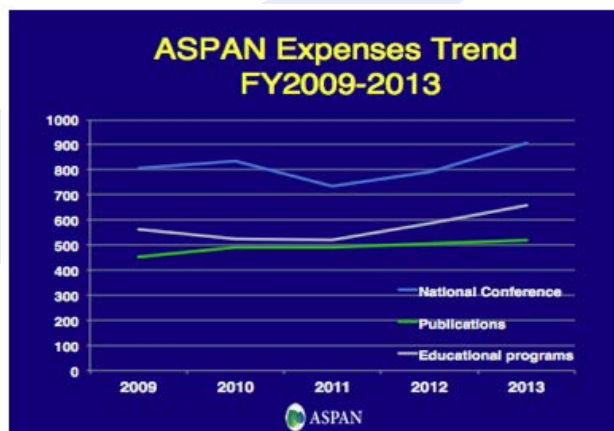


Katrina Bickerstaff
BSN, RN, CPAN, CAPA
ASPAN Treasurer

This year's ASPAN Representative Assembly proved to be very exciting. The agenda included bylaw changes, approval of the recommended changes for the new edition of the ASPAN *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*, and an inspiring presidential report. As ASPAN Treasurer, I also presented an in-depth finance account of fiscal year (FY) 2013. This report encompassed multiple charts and graphic trends that depicted the financial state of ASPAN. ASPAN remains strong and continues to do well financially. Membership income is at an all-time high, education income remains stable, and the sale of ASPAN publications continues to be a substantial source of revenue.

ASPAN's expenses have risen gradually over the last five years. This is likely due to the changing economic times. ASPAN has seen an economic rebound reflected in its expenses. The deep discounted hotel rooms and services, travel, and the cost of producing ASPAN publications have begun to return to pre-recession pricing. ASPAN's operational expenses have remained stable within industry standards. Its general and administrative services increased only slightly from FY2012. The ASPAN national office building has had standard depreciation, with little changes from FY2012 to FY2013. ASPAN's national headquarters continues to be one of its greatest investments.

Despite the slight rise in expenses, ASPAN continues to have solid income. ASPAN has an annual independent auditor report, which com-



prises statements of financial position as of December 31 of each year. At each ASPAN Board of Directors meeting, all expenditures are reviewed closely for ways to keep costs down. This past year FY2013, ASPAN finished strong with a profit of greater than a quarter of a million dollars.

ASPAN is your non-profit organization whose program services include educating members in the care of patients through its national conference, education workshops, scientific journal, specific publications, grants and scholarships. Its focus is to be able to return profits back into these program services to benefit each and every member. ASPAN continues to build upon its solid foundation and grow as the premiere organization for perianesthesia education, research and standards.



An enormous "Thank You" to all the ASPAN National Office Staff.

You always ensure that the conference runs smoothly every year!



SAVE THE DATE

ASPAN's 34rd National Conference
April 26-30, 2015 in San Antonio, Texas.

Safety in Waste Anesthesia Gases

Linda Beagley, MS, BSN, RN, CPAN – ASPAN Safety SWT Coordinator

Safety

Years ago, when I first started working in the PACU, we were taught not to stand too close to the patient when he/she first arrived into a PACU bay. Standing close could result in a face full of exhaled anesthetic gas. However, it was often difficult not to stand close if the patient needed airway support. The smell of anesthetic gas has a definite odor that one can distinguish from bad breath. And we went home tired. So what has changed?

Gaseous Inhalation Agents

The biggest change is the introduction of inhalation anesthetic agents that are extremely rapid-acting, for example sevoflurane.¹ Because of this rapid action, the gas wears off quickly. By the time the patient arrives in the PACU, gases are excreted and the patient is waking up with his/hers eyes open.

Techniques have improved over the years, and during patient emergence the anesthesia provider's goal is to remove the anesthetics. The anesthesia provider communicates with the surgeon about the length of surgery. This collaboration with the surgeon allows the anesthesia provider the ability to manage the vaporizer setting, directing the fresh gas flow setting and minute ventilation to execute an efficient result. As surgery is finishing, the fresh gas flow is increased while the vaporizer setting is decreased.²

Scavenging Systems

Another safety mechanism to protect health-care providers both in the operating room and immediately outside is scavenging systems. The purpose of scavenging systems is to collect and remove vented anesthetic gases from the operating room. Since the amount of anesthetic gas delivered often goes beyond the necessary amount for the patient, the scavenging system removes the excess gas and therefore decreases OR pollution.^{3,4} The volume of gas entering the breathing circuit each minute should equal the same amount leaving it, or barotrauma will result.

Scavenging is either active or passive. Active scavenging systems suck out the gas, whereas the passive mode allows the waste gases to passively move down the corrugated tubing and out through the room's ventilation exhaust grill. Another distinction is whether scavenger interfaces are open or closed.⁴ Each type of interface has different clinical implications. Open interfaces are safer for the patient, have only been on the market for about twelve years and will be found on newer anesthesia machines.

Regulatory Guidelines

Practice guidelines introduced in 1977 by National Institute of Occupational Safety and Health (NIOSH) recommended that anesthetic concentrations in the OR environment be limited.⁵ Prior to this time, anesthesia machines were vented into the surgery room without concern. Since then both The Joint Commission (TJC) and the Occupational Safety and Health Administration (OSHA) have developed guidelines for safe usage. OSHA recommends health workers are not exposed to an eight hour time-weighted average of greater than two (2) parts per million (ppm) halogenated agents when used alone.³ When used in combination with nitrous oxide, the level of exposure of the halogenated agent drops to 0.5 ppm. The Joint Commission has developed stricter practices, and TJC-accredited hospitals are required to have a system in place for monitoring and disposal of hazardous gases.⁵ Facilities are mandated to have a scavenging system in place for removal of anesthesia gases.

Conclusion

Institutions should have processes within the surgical arena ensuring safety mechanisms are followed with the use of scavenging and ventilation systems and random air sampling. A concern is the movement of delivery of anesthesia outside of designate areas other than in surgery.⁵ The request for anesthesia for procedures in radiology and other locations will require the same diligence and safety rules to keep the patient, perioperative/procedural personnel and the environment free of unwanted waste anesthesia agents.

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**Linda Beagley
MS, BSN, RN, CPAN
ASPAN Safety
SWT Coordinator**

Distinguished Service Award of the Past Presidents' Council

Nancy O'Malley, BSN, MA, RN, CPAN, CAPA



▲ Immediate Past President Susan Carter (left) presenting award to Nancy O'Malley

Each year, ASPAN's Past Presidents Council nominates individuals and votes for the one person who has exemplified distinguished lifetime contributions which have had a significant impact on fulfilling ASPAN's core purpose – to advance the unique specialty of perianesthesia nursing. The winner of this prestigious award receives a beautiful engraved crystal bowl and a cash award of \$500.

This year's award, presented during the opening ceremonies of the 33rd National Conference, went to a person known to many of ASPAN's members - Nancy O'Malley!

Nancy has served ASPAN and her home component, Rocky Mountain PeriAnesthesia Nurses Association (RMPANA), in a wide variety of positions and offices. She has also served on numerous ASPAN committees, strategic work teams and was the Regional Director for Region 1 for two terms. She has written chapters for the 2010 ASPAN *Perianesthesia Nursing Core Curriculum* as well as articles for *Breathline*. Bridging the gap between education

and the art and science of caring, Nancy is a constant role model of compassion, and educates peers on the local, national and international levels. She champions CPAN and CAPA certification sharing her passion for the specialty by mentoring others to achieve their dreams and goals. And last, but certainly not least, Nancy annually gives her knowledge, passion, compassion and skills to others while serving on medical missions in Cambodia. 🌱

Excellence in Clinical Practice Award

Mary Rachel Romero, MSN, RN, CPAN, CAPA

ASPAN's Excellence in Clinical Practice Award recognizes a nurse who consistently demonstrates exemplary perianesthesia clinical practice. ASPAN congratulates its 2014 recipient, Mary Rachel Romero, MSN, RN, CPAN, CAPA, from the University of Colorado Health Systems in Denver.

Mary Rachel serves as a PACU preceptor and earned this recommendation from Kristen Kriegshauser: "[she] spent six months... training, instructing, and teaching me...taking me from a novice nurse to a competent and successful PACU nurse...someone I turn to when I have questions or concerns." Myrna Mamaril, Mary Rachel's former manager, says "her greatest strengths are her enthusiasm and her ability to translate evidence to her bedside practice...Her greatest attributes are her love for nursing and her compassionate care." Not only does ASPAN's award winner excel at clinical practice, her technical expertise extends to training staff on the EPIC EMR. In her spare time, Mary Rachel is engaged in EBP and research projects, hospital and unit-based committees, and volunteer service to both ASPAN and RMPANA. 🌱



▲ Mary Rachel Romero (left) receiving award from President Twilla Shrout

President's Award

Clara Boudreaux, BSN, BS, RN, CAPA

ASPAN
Awards

The ASPAN President's Award is the highest honor bestowed on a member of the society by the ASPAN President. This award is given to an individual who has made an important contribution to the advancement of the nursing profession through strong commitment to the profession and a willingness to work for the benefit of others. This person is also of particular support to the ASPAN President during the year of his/her term.

This year's recipient has been a very special friend to me for some time. I was a newly elected Regional Director in 2006, and her component was my first invitation to speak. She is known for her hospitality and generosity. She is always the first to make sure that any speaker from out of town will be picked up at the airport, and even invited me to come along for a co-workers surprise birthday party. I never have to worry about where to eat, stay or any entertainment during component meetings or even at some of the past national conferences. Sometimes you meet someone and become fast and lasting friends. She is a phone call away and I often call her as I drive home from work to let her know what is going on with work or with my ASPAN travels. She is an active Facebook friend that loves to post ASPAN information. I often see the first "like" from her when I post that I have arrived to an airport or landed at my destination.

She has been very active in her component and even more active with the local district. If she is on the planning committee---I have heard her say "the attendees will always be served a meal they will remember as long as I have anything to do with it." She does not believe in paper plates---only china for the component meetings that she oversees! She has been president of her component and district, and on ASPAN SWTs including a national conference work team in charge of hostesses. I still have to ask her to slow down when she talks because I don't talk Cajun! My choice for the President's Award is Clara Boudreaux from Louisiana.



◀ President Twilla Shrout (left) presenting award to Clara Boudreaux

Award for Outstanding Achievement

Valerie Watkins, BSN, RN, CAPA



▲ Valerie Watkins (left) receiving award from President Twilla Shrout

ASPAN's 2014 Award for Outstanding Achievement winner has been an active leader in her home component for many years. She was the strategic planning chairperson for several years, served as a speaker at the component fall retreat, and most recently led her component as its president.

For ASPAN, she has devoted many years to a wide variety of committees and projects. She is a current member of the Clinical Practice Committee and has been since 2008. She served on the Standards and Guidelines Strategic Work Team from 2010-2013, and Education Approver Committee from 2008-2012. In 2009-2010 she served ASPAN on the Nominating Committee, helping to ensure that ASPAN had qualified members to continue leading the Society.

She was a speaker at national conferences in Seattle and Orlando, speaking eloquently about the role of pre-anesthesia assessment and preoperative testing in keeping our patients safe while in our care. This year's recipient of the 2014 Award for Outstanding Achievement is Valerie Watkins.

GOLD LEAF COMPONENT OF THE YEAR AWARD

Congratulations, ILSPAN!



▲ Diane Swintek (left) presenting the Gold Leaf Award to ILSPAN President Maggie Colabuono

Founded in 1976, the Illinois Society of Peri-Anesthesia Nurses (ILSPAN) serves the perianesthesia nurses of Illinois and eastern Missouri. Its Gold Leaf application highlighted its commitment to its members and to ASPAN.

ILSPAN took recognition to a whole new level when it crafted "Special Consistent Member Recognition" to thank those members who have stayed as active members since the inception of electronic record keeping in 2000. How nice to recognize that commitment in a special way.

The ILSPAN Web site operates as communication central for the membership, and readily highlights goals and goal achievement for the members to follow, as well as access to bylaws, policies and award applications. To ensure that new members feel welcome, ILSPAN includes the

name of a contact person in that district and provides the member with a copy of the bylaws.

Other items that stand out with ILSPAN: over 50% of its members are certified as CPAN or CAPA, and 2% hold dual certification; ILSPAN has established a research corner on its Web site and started a research grant program of which several members have taken advantage; at the national conference in Chicago, its members had three EBP/research poster presentations and seven Celebrate Successful Practices posters.

These are just some of the reasons that ILSPAN has risen to the top and won the 2013 Gold Leaf Component of the Year Award! Congratulations to ILSPAN! 🌿

Congratulations to the Mary Hanna Memorial Journalism Award winners for the 2013 volume year!

BEST PRACTICE CATEGORY

First Place:

Preanesthesia Screening Phone Messages and Rate of Return Based on the Primary Language of the Patient

Terri A. Gray
Janet R. West
Nancy A. Nadolsky

Second Place:

Implementing a Regional Anesthesia Block Nurse Team in the Perianesthesia Care Unit Increases Patient Safety and Perioperative Efficiency

Rebecca Ann Russell
Kimberly Burke
Katherine Gattis

Third Place:

Implementing Primary Care in the Perianesthesia Setting Using a Relationship-Based Model

Melissa Carabetta
Kathleen Lombardo
Nancy E. Kline

CLINICAL ARTICLE CATEGORY

First Place:

Closing the Hand Hygiene Gap in the Postanesthesia Care Unit: A Body-Worn Alcohol-Based Dispenser

William Clayton Petty

Second Place:

A Preoperative Stress Inquiry and a Vulnerable US Military Population

Eric J. Bopp
Dennis L. Spence
Joseph F. Burkard

Third Place:

The Arduous and Challenging Journey of Improving Patient Safety and Quality of Care

Esther Lee

RESEARCH CATEGORY

First Place:

Work and Nonwork-Related Factors Associated with PACU Nurses' Fatigue

Beatrice Hazzard
Karen Johnson
Dzifa Dordunoo
Trisha Klein
Brittany Russell
Patricia Walkowiak

Second Place:

Patients With Aortic Stenosis: Who Should Undergo Noncardiac Surgery in a Rural Hospital

H. Ruth Fletcher
Lisa H. Milhoan
Kirk Evans
Paul N. Austin

Third Place:

Thermal Comfort and Safety of Cotton Blankets Warmed at 130°F and 200°F

Patricia A. Kelly
Susan K. Cooper
Mary L. Krogh
Elizabeth C. Morse
Craig G. Crandall
Elizabeth H. Winslow
Julie P. Balluck



► Journalism Award being handed out by Mary Hanna's daughter, Karen Flanagan (center) and JoPAN Co-editor Vallire Hooper during Opening Ceremonies



Legacy for Life

ASPAN's Legacy for Life program supports the future of perianesthesia nursing through significant, enduring contributions that are applied to perianesthesia education, research, practice and standards. Individuals who reach the momentous level of \$5,000 of support, and components that reach \$10,000 of support, are officially named and introduced as members of the program.

This year, ASPAN is pleased to welcome the four Charter Members of Legacy for Life:

Charter Members:

Karen Flanagan, MSN, RN

Kim Kraft, BSN, RN, CPAN

Myrna Mamaril, MS, RN, CPAN, CAPA, FAAN

Twilla Shrout, BSN, MBA, RN, CPAN, CAPA



▲ Legacy for Life Charter members: from left, Twilla Shrout, Myrna Mamaril, Kim Kraft, Karen Flanagan



ASPAN INTRODUCED LEGACY FOR LIFE AT THE 2013 NATIONAL CONFERENCE IN CHICAGO, ILLINOIS. SPECIFIC GIFTS TO ASPAN AS OF APRIL 14, 2013, ARE AUTOMATICALLY CREDITED TOWARDS THE PROGRAM. FOR ADDITIONAL INFORMATION ON LEGACY FOR LIFE, PLEASE CONTACT DOUG HANISCH AT THE NATIONAL OFFICE AT 856.616.9600, EXT. 215, OR DHANISCH@ASPAN.ORG.

Corporate Sponsors:

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Sponsor of Opening Ceremonies

Baxter Healthcare (Bronze)

Cadence Pharmaceuticals (Platinum)

Hill-Rom (Diamond)

Sponsor of President's Reception

Pacira Pharmaceuticals (Gold)

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Stryker (Silver)

Sponsor of Conference Pocket Schedule

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Sponsor of Closing Ceremonies

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Chesapeake Bay Society of PeriAnesthesia Nurses

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New York State PeriAnesthesia Nurses Association

North Carolina Association of PeriAnesthesia Nurses

Northwest PeriAnesthesia Nurses Association

Ohio PeriAnesthesia Nurses Association

Pennsylvania Association of PeriAnesthesia Nurses

PeriAnesthesia Nurses Association of California

PeriAnesthesia Nurses Association of New Mexico

Rocky Mountain PeriAnesthesia Nurses Association

South Carolina Association of PeriAnesthesia Nurses

Tennessee Society of PeriAnesthesia Nurses

Texas Association of PeriAnesthesia Nurses

Vermont/New Hampshire Association of PeriAnesthesia Nurses

Virginia Society of PeriAnesthesia Nurses

West Virginia Society of PeriAnesthesia Nurses



▲ The Poolside Development Reception



▲ When it got breezy, poolside towels worked to stay warm



◀ The Silent Auction . . . people looking for a great item on which to place their bids!



▲ Everyone rushed in when the exhibits opened



▼ Attendees speaking to vendors about their products



▲ Exhibits are an opportunity to learn about new products

Thank You!

ASPAN would like to thank all the vendors who came to the conference to support ASPAN and share their products with attendees. 🌿

Military and International Reception

The Military and International Reception is held to honor those members in the military, and those attending the National Conference from abroad. This year, the reception was attended by a total of 51 people. Of these 51 attendees, 23 were active duty, reserve, retired, or civilian military from the Department of Defense, Veterans Administration, Army, Navy, Air Force, and Air National Guard. Nine international attendees were present including two from Ireland, four from Canada, and three from Australia.



▲ Kim Noble (right) shares a light conversation with Orland M. Underwood, SFC



▲ Debbie Bickford (left) welcomes a military attendee



◀ Jennie Allen (right) visits with an international attendee

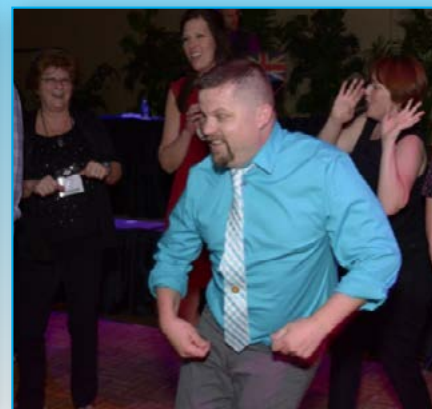
President's Reception

ASPAN gratefully acknowledges Hill-Rom for its sponsorship of the President's Reception! 🌿

► President Shrout enjoys greeting guests at the President's Reception



▼ President Shrout sharing time with friends



▼ All smiles for the photographer



Newsletter Winners

Congratulations to the 2014 ASPAN Component Newsletter Contest Winners!

Pulse of PAPAN
The official newsletter of the Pennsylvania Association of PeriAnesthesia Nurses
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Volume 13 Issue 2
Summer 2013

PAPAN's 30th ANNIVERSARY 1983-2013

PRESIDENT'S MESSAGE
Facing Challenges Together

Kandi Koon PAPAN President 2011-2013

As I transition from vice president-president elect to president my thoughts turn to the challenges we face as an organization and as perianesthesia nurses. PAPAN's Mission Statement details our goals. We struggle with personal finances, busy schedules and less support from our various places of employment as they struggle with government reimbursement. Perianesthesia nurses are balancing their patients' needs and safety while learning computer documentation, learning new skills and working with innovative schedules. I am encouraged to know PAPAN will continue to support and meet the needs of the members.

PAPAN is in the process of updating the website for better access of information regarding the organization's activities and education opportunities. Who knew, thirty years ago when we started the component, that we would be learning computer skills and talking techs terms. However, we must move forward as perianesthesia nurses and as an organization.

PAPAN offers many opportunities to members to receive grants and scholarships for education and research. The information for these member benefits is found on the website and in the newsletter. Take advantage of opportunities to improve and meet your practice requirements.

I will work with other PAPAN officers, directors and committee chairs to plan for the future, identify challenges and goals by implementing strategic initiatives. Together we will move into the future as a stronger organization.

Winner of ASPAN's 2006 Newsletter Contest
PAPAN: 2006 Gold Leaf Component of the Year

PAPAN MISSION STATEMENT
The Association exists to promote excellence in patient care by supporting perianesthesia nurses through education, the exchange of knowledge, research, testing and the support for patient and unique needs of the individual.

Deadline to submit articles for the winter 2014 issue is November 30, 2013

▲ 1-8 pages
PulseLine
PeriAnesthesia Nurses
Association of California
Editor: Ernestine Nunes, RN,
CPAN, CNOR

▲ TIE:
15+ pages
Pulse of PAPAN
Pennsylvania Association
of PeriAnesthesia Nurses
Editor: Evelyn Medycki RN

▼ 9-14 pages
TSPAN Eye Opener
Tennessee Society of
PeriAnesthesia Nurses
Editor: Mary Ellen Patterson,
BSN, RN

▼ TIE:
15+ pages
The Awakener
Georgia Association of
PeriAnesthesia Nurses
Editor: Janice Wilson, BSN,
RN

ARPA Region 5

TSPAN EYE OPENER

Volume 11 Issue 1 Winter 2014

TSPAN Mission Statement
The Tennessee Society of Perianesthesia Nurses exists to promote quality and cost effective care for patients, families, and the community through public and professional education, research, and standards of practice.

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2014: http://www.tspan.org
2013: http://www.tspan.org

Message from your President

With the upcoming year, perianesthesia nursing will face more challenges than ever with health care changes and management. We are asked to do more with less. How we perceive and deal with these changes will determine the success of our units as well as our professional satisfaction and happiness. Several Eleanor Roosevelt quotes apply to these upcoming challenges and changes.

"A great deal of fear is a result of just 'not knowing.' We do not know what is involved in a new situation. We do not know whether we can deal with it. The sooner we learn what it entails, the sooner we can dispel our fear." This quote relates to the fact that we don't know how new healthcare laws and changes will impact perianesthesia nurses. However, by being involved and knowledgeable about legislation, hospital trends, and attending unit meetings will allow us to plan, prepare, and understand the rationale behind future changes. The next two quotes will enhance our success when dealing the changes. "You can often change your circumstances by changing your attitude" and "A stumbling block to the pessimist is a steppingstone to the optimist." No one likes or wants change. We are comfortable with where we are in our little niche of our own world or unit. However, it is certain that change will occur whether we want it or not. Whether it is technology, new surgical procedures, new techniques, changing staff, changing managers, (continued on pg. 8)

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Volume: XXXV Issue: 1 December 2013

THE AWAKENER
THE OFFICIAL NEWSLETTER / NEWSBULLETIN OF THE
Georgia Association of Peri Anesthesia Nurses

The Awakener was established in 1977. The Georgia Association of Perianesthesia Nurses (GAPAN) contributes to the advancement of our nursing specialty practice. Rooted in education, the original mission of GAPAN is to establish an organization for networking and advancement of Perianesthesia Nursing with an emphasis on continuing education, community service, and research.

GAPAN MISSION
To promote quality care and enhance excellent Perianesthesia nursing practice through education and leadership.

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PulseLine
Newsletter of the PeriAnesthesia Nurses Association of California
Spring 2013 Vol. 31 No. 1

Susan Carter Leads ASPAN to Chicago

President's Message:
Fertilizer: It's Good for the Soil!

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People's Choice
PulseLine
PeriAnesthesia Nurses
Association of California
Editor: Ernestine Nunes, RN,
CPAN, CNOR

Volume 34, Number 4
July/August 2014

15



ILSPAN gathers for a photo at the Closing Breakfast



Frank and Elvis enjoyed greeting everyone at Component Night



Jody Urquhart entertained with her closing address



Embracing the theme of "Old Las Vegas" during Component Night

National Conference Collage



Jennifer Kilgore sings the National Anthem



Twilla Shrout (left) installs Jacque Crosson as the new ASPAN president



Attendee has an opportunity to ask questions during a lecture



The area for the Celebrate Successful Practices posters and the Research posters is a popular gathering place



Surprise "Flash Mob" dancing "Viva Las Vegas"



From left, Jacque Crosson, Laura Kling, Armi Holcomb, and Twilla Shrout



President Twilla Shrout thanks the Board of Directors after her opening speech

National Conference

continued from page #



Opening speaker Steve Maraboli entertains and inspires



More "Flash Mob" dancing to "Viva Las Vegas"



The theme of "Old Las Vegas" sparked originality

National Conference Collage



Elvis could sing and move, and had many women drooling



Official business of ASPAN took place during the Representative Assembly on Sunday



This group has attended every national conference



Attendee, Angela, found the massage chair

Volume 34, Number 4
July/August 2014

CERTIFICATION

A Record 24 Components Received the ABPANC 2014 Shining Star Award at Annual Conferences

The American Board of Perianesthesia Nursing Certification, Inc. (ABPANC) has announced the recipients of its annual Shining Star Award. A record 24 ASPAN components from across the country were recognized for their role in supporting and encouraging CPAN® and CAPA® certification.

2014 Shining Star Award recipients are:

Arizona – AzPANA
 California – PANAC
 Chesapeake Bay – CBSPAN
 Connecticut - CSPAN
 Florida – FLASpan
 Georgia - GAPAN
 Illinois – ILSPAN
 Indiana – INSPAN
 Louisiana – LAPAN
 Maine – MESPAN
 Massachusetts – MASPAN
 Minnesota-Dakota - MNDKSPAN
 Missouri-Kansas – MOKAN PANA
 Nebraska – NAPAN
 New York – NYSPAN
 New Mexico – PANANM
 North Carolina – NCAPAN
 Northwest – NPANA
 Pennsylvania – PAPAN
 South Carolina – SCAPAN
 Tennessee – TSPAN
 Texas – TAPAN
 Vermont-New Hampshire – VT/NH APAN
 Wisconsin – WISPAN

▼ Component representatives accepted their Shining Star Awards at the 2014 CPAN / CAPA Celebration Luncheon

2014 ABPANC Advocacy Award Winner

Cathy A. Lee, BSN, RN, CPAN, CAPA, CCRN

ABPANC announced the winner of its annual Advocacy Award for promoting excellence in perianesthesia nursing at the CPAN®/CAPA® Celebration Luncheon at the ASPAN National Conference in Las Vegas. Cathy A. Lee, BSN, RN, CPAN, CAPA, CCRN of Vanderbilt Outpatient Surgery Center is the 2014 Advocacy Award winner.

Cathy was selected from many qualified nominations because of her consistent contributions above and beyond normal job responsibilities that directly impact the quality of patient care. Cathy received a beautiful Lladro Statue of a nurse, framed certificate, and a scholarship to cover her next recertification fee.

ABPANC also awarded Cathy's unit with a check for \$350 to be used for certification fees, continuing education, books or study guides. Mary Fran Hammond, her nurse manager, nominated Cathy for the award and received a \$100 cash award.

▼ Cathy Lee (center) receives the 2014 ABPANC Advocacy Award, was nominated by Mary Fran Hammond (left) and presented the award by Patricia Bouchard, ABPANC Board Member (right)



Contact ABPANC

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 Phone: 800-6ABPANC Fax: 212-367-4256

Email: abpanc@proexam.org

Web site: www.cpancapa.org



ASPAN Board of Directors

2014-2015

Board of Directors



ASPAN President

Jacque Crosson, MSN, RN, CPAN

Jacque is the Clinical Operations Manager of the preop and PACU for John C. Lincoln North Mountain Hospital in Phoenix, Arizona. She has over sixteen years of perianesthesia experience caring for patients from simple laparoscopic procedures to complex neurological traumas. A champion of certification, she has taught review classes across the state of Arizona as a certification coach and now as a member of ABPANC's Leader Resource Team. Jacque remains involved in her local component, Arizona PeriAnesthesia Nurses Association (AzPANA), where she has been a past president, and currently serves on the Phoenix education committee. She is active faculty on a variety of perianesthesia topics, including presentations at the component level and at the ASPAN Leadership Development Institute and ASPAN national conferences. Nationally, Jacque has served on ASPAN's Clinical Practice Committee, Research

SWT, Strategic Planning Implementation SWT, Policy and Procedure SWT, Bylaws SWT and Credentials SWT. She served on the ASPAN Board of Directors as secretary from 2008-2012. Jacque resides in Phoenix, Arizona.



ASPAN Vice President/President-Elect

Armi Holcomb, BSN, RN, CPAN

Armi is a SDS/PACU Staff Nurse II at Children's Mercy Hospital and Clinics in Kansas City. She has served as a team leader for the Clinical Practice Committee and Standards and Guidelines SWT. Armi has also participated on the ASPAN Leadership Development Committee, Membership/Marketing SWT and Strategic Planning SWT. Armi served as 2000 National Conference Co-Chair in Kansas City. She is active in MOKAN PANA. She has published in *JoPAN* and is a co-author of ASPAN's "Position Statement on the Pediatric Patient." Armi resides in Overland Park, Kansas.

ASPAN Secretary

Teresa Passig, BSN, RN, CCRN, CPAN, CAPA

Terri Passig is a Learning Specialist for Pre-Op, PACU at Arnold Palmer Hospital for Children in Orlando, Florida. She began her perianesthesia career in 2001. Prior to her perianesthesia journey, she worked in the Pediatric Critical Care arena with over 20 years of experience in patient care, management, critical care transport, and autism research.

Terri resides in Orlando, Florida.



ASPAN Treasurer

Katrina Bickerstaff, BSN, RN, CPAN, CAPA

Katrina practices as a staff nurse in the PACU at Brigham and Women's Hospital, Boston, MA. Katrina is in her second term as ASPAN Treasurer. She also served as Regional Director, Region Four from 2008-2010. Katrina is a contributing member to the Resource Development, Digital Media, and Membership/Marketing SWTs. Katrina is an active member of her component, Massachusetts Society of PeriAnesthesia Nursing (MASPAN). Katrina is also a member of ASPMN, AACN, and NNSDO. Katrina resides in Sagamore Beach, Massachusetts.



ASPAN Immediate Past President

Twilla Shrout, BSN, MBA, RN, CPAN, CAPA

Twilla is a same day surgery staff nurse at the Veterans Hospital in Columbia, Missouri. Prior to becoming ASPAN President, she served as ASPAN Regional Director, Region Two for two terms. She has been active on numerous committees and SWT's including: Safety, Membership/Marketing, Education Provider, Education Approver, Credentials, Development, Publications, Nominating, Standards and Guidelines, Strategic Planning, and Succession Planning. She was on the 2000 National Conference Committee and was also the Go Green SWT Coordinator. She proudly received the ASPAN Excellence in Clinical Practice Award in 2011, was a past

ASPAN Pat Hansen Memorial Scholarship honoree and an ASPAN Star. Twilla is an active member of MOKAN PANA. Twilla resides in Bunceton, Missouri.

ASPAN Regional Director, Region One

Deborah Bickford, BSN, RN, CPAN

Debbie is a staff nurse working in the Same Day Surgery PACU at Torrance Memorial Medical Center in Torrance, CA. Her nursing and perianesthesia experience began when

she entered the Army Nursing Corps and the PACU was her first assignment. She has been active in ASPAN committees including Governmental Affairs, Standards and Guidelines, Clinical Practice, Education Approver, Membership/Marketing SWT, Strategic Planning SWT, and the Finance Committee. Debbie is active in her component, PANAC. She also served on the ABPANC Board for six years serving in all capacities including president and as a certification coach. Debbie resides in Torrance, California.



ASPAN Regional Director, Region 2

Jennifer Kilgore, BSN, RN, CPAN

As a perianesthesia nurse at Singing River Hospital in Pascagoula, MS, Jennifer has been at the bedside for fifteen years. She graduated in 1996 with her ADN and completed her BSN at the University of Southern Mississippi. As a member of ASPAN, she participates on the Education Approver Committee and has served on Governmental Affairs Committee. Jennifer enjoys being involved in her state component MSPAN, serving as membership chair, Web site designer, and as a board member. Jennifer resides in Moss Point, Mississippi.

ASPAN Regional Director, Region 3

Tracy Underwood, BSN, RN, CPAN

Tracy began her perianesthesia nursing career in 2005. She has served her home component WVSPAN as president and immediate past president and on several committees. She is currently a member of ASPAN's Membership/Marketing SWT, Research Committee, and Clinical Practice Committee. She is currently finishing her MSN in a Family Nurse Practitioner program. Tracy resides in Kingwood, West Virginia.



ASPAN Regional Director, Region 4

Amy Dooley, MS, RN, CPAN

Amy has been a perianesthesia nurse for thirty years. She currently works in a PACU that cares for phase I and phase II patients. Amy also works as a Clinical Professor at St. Anselm College. Within ASPAN, Amy has participated as a member of the Research Committee, Education Provider Committee, Policy & Procedure Committee, Up & Comers Program, Education Approver Committee, Evidence Based Practice Strategic Work Team, Nominating Committee, and chaired the Election Review Strategic Work Team. Amy speaks professionally at the component, state, national, and international level. Amy is also active within her home component, VT/NH APAN. Amy resides in Nashua, New Hampshire.

ASPAN Regional Director, Region 5

Sarah Cartwright, MSN-PH, BAM, RN, CAPA

Sarah has been active in perianesthesia nursing for 17 years of her 20 year nursing career. She has specialization in preoperative evaluation, followed most recently in Nurse Informatics engaged in Clinical Transformation at Georgia Regents Health System in Augusta, Georgia. Sarah is active in her home component of GAPAN. Within ASPAN, Sarah has served on Clinical Practice, Publications and Governmental Affairs. She was the past coordinator for the Preoperative Assessment Specialty Practice Group. She has been the Ambulatory Surgery columnist for *JoPAN* for the past three years. Certified CAPA in 1999, she has acted as a certification coach and ALRT team member. She lives in Martinez, Georgia.



ASPAN Director for Clinical Practice

Susan Russell, BSN, RN, JD, CPAN, CAPA

Susan Russell is the perianesthesia educator at St. David's Medical Center in Austin, TX. A perianesthesia nurse for 25 years, she has CPAN and CAPA certifications. She is a charter member of ASPAN and currently serves on Clinical Practice Committee, Standards and Guidelines, Bylaws/Policies and Procedures and the Strategic Planning Committee. Susan maintains an active license as a Texas attorney, and uses that knowledge in researching and teaching about nursing practice. Susan is active in her home component TAPAN. She resides in Austin, Texas.



ASPAN Director for Education

Nancy Strzyzewski, MSN, RN, CPAN, CAPA

Nancy has held a variety of positions in perianesthesia nursing, including PACU staff nurse, nurse clinician, and perianesthesia education specialist. Currently, she is an education nurse coordinator in the PACU at the University of Michigan. Nancy has been a member of ASPAN and MAPAN since 1989. Within ASPAN, Nancy is a member of the Education Provider Committee and an ASPAN national speaker. She is a member of the Pediatric and Perianesthesia Nurse Educator Specialty Practice Groups. Nancy resides in Royal Oak, Michigan.



ASPAN Director for Research

Kim Noble, PhD, RN, CPAN

Kim is an Assistant Professor of Nursing at Widener University in Chester, Pennsylvania. Kim teaches in the entry-level undergraduate and graduate nursing programs. Kim has been a perianesthesia nurse for 30 years, and now continues to work in PACU during semester breaks and on-call.

Kim has served on several research priorities as the chair of the ASPAN EBP committee, and now as the Director for Research. She works closely with the Standards and Guidelines SWT to assist in providing empirical data to the Standards biannual revisions. Kim is on ASPAN's Education Provider committee, lecturing nationally and internationally.

Kim resides in Ambler, Pennsylvania. 🌿



ASPAN Chief Executive Officer Kevin Dill – Ex-Officio member (NJ)

ABPANC President Linda Lakdawala, DNP, RN, CPAN – Ex-Officio member (PA)

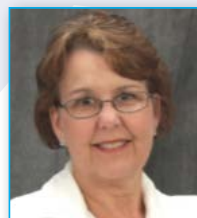
ASPAN expresses its gratitude to these outgoing Board of Director members for their years of dedicated service:



Joni Brady
MSN, RN,
CAPA



Susan Carter
BSN, RN,
CPAN,
CAPA



Laura Kling
MSN, RN,
CNS, CPAN,
CAPA

Board of Directors and Representative Assembly Highlights

April 26 – May 2, 2014 ~ Las Vegas, Nevada

Joni Brady, MSN, RN, CAPA – ASPAN Secretary, 2012-2014



**Joni Brady
MSN, RN, CAPA
ASPAN Secretary,
2012-2014**

What happened in Vegas ... will not stay in Vegas! The Society's work surrounding the delivery of safe and appropriate perianesthesia nursing care is now being shared throughout more than 2,000 ASPAN 33rd National Conference-goers' components and workplaces. While Las Vegas offered countless fun venues and tempting games of chance during Conference week, your Board of Directors (BOD) and Representative Assembly (RA) also met to conduct the Society's important business.

It has truly been my honor to serve as your secretary. Throughout many years of ASPAN service, I've been continually amazed by the collective work of perianesthesia colleagues who remain dedicated to make this specialty practice grow and strengthen. This year was no exception! My final report presents a brief synopsis of Board meeting and RA information related to ASPAN's core mission and purpose.

Clinical Practice Committee (CPC)

The prolific CPC teams responded to over 1,000 questions submitted via the ASPAN Web site over the past year, with the most frequently asked question responses published regularly in *Breathline* and on the Web site. Through collaboration with Standards & Guidelines and EBP SWT members, updated evidence-based content for the ASPAN 2015 -2017 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements* was presented to the RA for approval. Over 100 posters were displayed at National Conference this year, with 10 submissions selected for oral poster presentation sessions.

Education Provider Committee

The ASPAN Seminar Series continues to provide perianesthesia education throughout the components and through virtual education modules available on the Web site. Discussion continues regarding new seminar development, with an Education Review Strategic Work Team (SWT) commissioned by President Jacque Crosson to assist in this process. Preparations for the upcoming American Nurses Credentialing Center education program accreditation renewal process are underway.

Evidence Based Practice (EBP) SWT

Implementation of the Joanna Briggs Institute (JBI) scholarship program now supports member engagement in evidence appraisal and its clinical practice translation. An unwanted sedation systematic literature review, in development over the past 24 months, is ongoing with the goal of acceptance for publication by JBI. A hands-on JBI literature review and ranking process workshop was held in Las Vegas, with member access to various research and EBP resources (e.g., the Online Journal Club) readily available on ASPAN's Web site.

Resource Development SWT

The Legacy for Life Campaign recognized four individuals for making a significant and lasting impact on ASPAN and its vital mission through charitable giving. Inaugural Legacy for Life members, recognized at this year's poolside Development Reception were Myrna Mamaril, Karen Flanagan, Twilla Shrout, and Kim Kraft. More information on this special program is available on the [ASPAN Web site](#).

International PeriAnaesthesia Collaboration and Conference

ASPAN continues to dialogue with international colleagues regarding formation of a formal global collaboration for the advancement of perianesthesia nursing. The BOD approved a one-time \$10,000 donation toward ICPAN formation to support its steering committee start-up expenses. The ICPAN 2015 conference (www.icpan2015.dk) will be held in Copenhagen, Denmark, from September 9-12.

Other News

A call for editor was issued for the new ASPAN *Pediatric Competency Based Orientation and Credentialing Program for the Registered Nurse in the Perianesthesia Setting*, and for revision of the *Redi-Ref* publication. Editor interviews are pending.

A SWT was formed to explore options for the development and dissemination of ASPAN Practice Recommendations and Clinical Guidelines.

REPRESENTATIVE ASSEMBLY

Eight Resolutions were approved by 93 credentialed RA delegates this year:

- **Resolution 2014-01: Care of the Perinatal Patient:** this Position Statement supports the development of competencies and education related to the unique needs of this patient cohort
- **Resolution 2014-02: Practice Recommendation: The Prevention of Unwanted Sedation in the Adult Patient:** this evidence-based recommendation informs safe perianesthesia nursing care for patients receiving anesthetics and opioid therapy
- **Resolution 2014-03: A Position Statement on the Nurse of the Future: Minimum BSN Requirement for Practice:** supports current research and evidence-based practice showing that an increased number of BSN-prepared nurses positively impacts patient outcomes
- **Resolution 2014-04: 2015-2017 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*:** the RA approved all content revisions as presented
- **Resolution 2014-05: Bylaws Amendment - Section 7.1 Registered Office and Agent:** amended Section 7.1 to reflect current practice to maintain the Agent of Record's address on file in the National Office
- **Resolution 2014-06: Bylaws Amendment - Article V Board of Directors - Executive Board:** changes resolve identified discrepancies surrounding the addition of an Executive Board as approved by the RA voting body in 2010. The changes affect Article V, Section 5.2.1; Section 5.9.2; Section 5.9.3

- **Resolution 2014-07: Bylaws Amendment - Section 8.2 Submission of Proposed Bylaws Amendments:** this revision aligned the RA Standard Procedures with Bylaws section 8.2. A Resolution submission deadline of 90 days prior to the RA meeting is reflective of current practice
- **Resolution 2014-08: Bylaws Amendment - Section 3.3 Active Category Description Clerical Change:** this revision aligned an approved 2010 ASPAN RA Standard Procedures organizational restructuring oversight with Bylaws section 3.3

Election SWT

This SWT, commissioned after approval of Resolution 2012-05 and led by Coordinator Amy Dooley, MS, RN, CPAN, shared its final recommendations related to ASPAN election procedures. The recommendations included: provision of more specific information regarding elected positions and the election process; earlier access to vetted candidates' information; pursue ways in which to increase persistently low online feedback participation; and revision of online feedback form to include an option to abstain from selecting a candidate(s). 🌱



▲ RA members listening to presentations of ASPAN business

COMPONENT EDUCATION PROGRAMS

October 3-5, 2014 Rocky Mountain PeriAnesthesia Nurses Association (RMPANA) will host its annual Retreat in the Rockies. The event will be at Snow Mountain Ranch, just west of Winter Park, Colorado. For more information, please contact Barb Krumbach at barb.krumbach@comcast.net.

October 31-November 2, 2014 The Florida Society of PeriAnesthesia Nurses (FLASPAN) will host its 45th annual conference entitled "Back to Basics; A Day in the Life of a Perioperative Patient." The event will be at the Wyndham Resort in Orlando, Florida. For more information, please contact Kathi Saball at kmsaball51@gmail.com, Colleen Sibel at colleens1000@comcast.net or visit www.flaspan.com. 🌱



**FOUNDATIONS OF
PERIANESTHESIA PRACTICE**

September 6, 2014

Macon, GA

September 28, 2014 SUNDAY

Nashville, TN

October 11, 2014

Frederick, MD

November 1, 2014

Fairfax, VA

November 15, 2014

Modesto, CA

**PEDIATRICS: LITTLE BODIES,
BIG DIFFERENCES**

September 20, 2014

Eureka, CA

PERIANESTHESIA CERTIFICATION REVIEW

August 9, 2014

O'Fallon, IL

August 16, 2014

Plano, TX

August 23, 2014

*Jacksonville, FL
Hoffman Estates, IL
Baton Rouge, LA
Dayton, OH*

August 30, 2014

South San Francisco, CA

September 6, 2014

La Jolla, CA

September 13, 2014

*Baltimore, MD
Shakopee, MN*

September 20, 2014

Fairfax, VA

September 27, 2014

Newark, DE

October 4, 2014

Islandia, NY

October 18, 2014

Biloxi, MS

October 25, 2014

*Columbia, MO
Fishkill, NY*

November 15, 2014

Springfield, MO

Webcasts - NEW!

August 2, 2014

September 27, 2014

October 11, 2014

November 1, 2014

**PERIANESTHESIA PATHOPHYSIOLOGY AND
ASSESSMENT: A SYSTEMS APPROACH**

November 22, 2014

Altoona, PA

**REFRESHING YOUR PERIANESTHESIA
PRACTICE**

September 6, 2014

*Binghamton, NY
Bend, OR*

September 20, 2014

New York, NY

September 27, 2014

Twin Falls, ID

October 4, 2014

Reno, NV

**SURROUNDING YOUR PRACTICE WITH
EXCELLENCE: LEGALITIES, STANDARDS AND
ADVOCACY**

August 23, 2014

Worcester, MA

September 27, 2014

Indianapolis, IN