



Breathline

Volume 35, Issue 2
March/April 2015

INSIDE:

PRESIDENT'S MESSAGE: Igniting Professionalism: It's Your Turn!

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

Journey is defined as “traveling from one place to another; distance, course or area traveled; and passage or progress from one stage to another.”¹ This year has been all of that and more! It hardly seems possible that San Antonio is just around the corner and I will be passing the torch to Vice President/President-Elect Armi Holcomb. Other descriptors of this past year's journey include breathtaking, amazing, exhilarating, productive, purposeful and enlightening. As president, it has been my honor to serve the ASPAN membership, continuing the legacy created by the ASPAN founders, while strengthening and positioning the Society for the future.

ASPAN continues to be over 14,000 members strong! As I have traveled across the country, I never tire of waving my ASPAN flag listing the many benefits of membership, including: **FREE** *Journal of PeriAnesthesia Nursing (JoPAN)* subscription, discounted seminar and conference fees, \$100.00 off certification exam fees, access to *Breathline*, scholarships, research grants and free contact hours. Personally, the most important benefit has been the professional networking. The ability to reach out and contact colleagues when challenges or concerns arise is priceless. My experience has been, that even though similar issues are occurring across the country, the ability to have the conversation and opportunities to collaborate are empowering and enlightening. While you may not be able to immediately resolve a concern, the amount of problem-solving information and solutions received can be incredible.



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

My message this year has been ***Igniting Professionalism: Excellence in Practice, Leadership and Collaboration***. While these are characteristics embedded in ASPAN membership, reflection on these qualities is refreshing and invigorating. Listening, engaging in professional practice, mentoring, networking, demonstrating integrity and accountability are behaviors inherent to the professional perianesthesia nurse. Demonstrating and modeling them can be challenging at times, but understanding their importance will guide your practice. Creating a work environment that provides nurturing and support to colleagues allows for excellence in safe patient care. When a cohesive team “owns” their practice, patient outcomes flourish. Adhering to and implementing the ASPAN Standards into personal practice ensures continuity of patient care across all perianesthesia settings with a focus on safety. Sharing your knowledge of the Standards with colleagues, clinical leadership and administration strengthens the importance and value of incorporating them into best practice and cementing your reputation as a perianesthesia expert.

Incorporating ASPAN's compelling vision into your work environment is my call to action for all of you. Speak to the fact that we are “the leading association for perianesthesia education, nursing practice, standards and research.”² Articulate ASPAN's goals:

1. ASPAN will be its members' indispensable resource for perianesthesia education and knowledge.



2. ASPAN will be the influential advocate for perianesthesia safety, public policy, nursing practice and standards.
3. ASPAN will be the recognized source of perianesthesia information for the healthcare community and the public.
4. The art and science of perianesthesia practice will be advanced through research and evidence-based practice.²

Become an authority for peers, both locally and nationally, on the benefits of membership in a specialty organization and its impact on personal professional practice. Be involved in helping establish best practices at the bedside in your organization. Always offer solutions, or be prepared to dialogue and brainstorm practice improvements. Be available to assist peers looking for resources to study for certification or to take advantage of educational seminars to enhance perianesthesia practice and knowledge. ASPAN offers all of this and more. Encourage participation locally and nationally. The strength of ASPAN depends on volunteers making the commitment to keep ASPAN's compelling vision a reality!

Finally, I offer heartfelt appreciation and gratitude for all of you and for those of you who have challenged yourselves to become active in ASPAN, either locally or nationally. It has been my plea-

sure to work with this dedicated group of individuals, and I look forward to continuing this relationship in the future. Without ASPAN's National Office staff to assist all of us along the way, our journey would be much more difficult. They are the fuel that keeps all of the many projects moving forward so that ASPAN's mission initiatives are completed. They would love to see all of you, if you get to Cherry Hill! Please, do not hesitate to stop by and say hello. Again, thank you for a tremendous year and a very exciting journey!

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1. Journey. Available at: <http://dictionary.reference.com/browse/journey%20?&o=100074&s=t>. Accessed January 8, 2015.
2. American Society of PeriAnesthesia Nurses. 2015-2017 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. Cherry Hill, NJ: ASPAN; 2014.



ASPAN Scholarship Program Accepting Applications

The ASPAN Scholarship Program is a member benefit designed to provide financial assistance to ambulatory surgery, postanesthesia, preanesthesia and pain management nurses aspiring to enhance their abilities to contribute to the perianesthesia nursing community.

Applicants must be current Active Category members of ASPAN and a component for the past two full years prior to the application deadline, and currently participating in component or ASPAN national activities. Scholarship information is available online only. Specific eligibility requirements for each type of scholarship are detailed in the instructions and required items lists on the **Scholarship Program Web page**, or from www.aspan.org, select **Members / Scholarship Program**.

Scholarships offered:

- \$1,000 for Bachelor of Science in Nursing, Master of Science in Nursing or Doctorate in Nursing
- \$500 for ASPAN National Conference Attendance
- \$299 for CPAN or CAPA Certification Exam fees
- \$500 for Humanitarian Mission
- Two Nurse in Washington Internship (NIWI) program scholarships

ASPAN's Scholarship Program postmark deadline is **July 1, 2015.*** 

*ICPAN registration fee scholarship postmark deadline is May 1, 2015. For information, see visit the ICPAN Scholarship page on www.aspan.org.



ASPAN® Breathline

Published by the American Society of
PeriAnesthesia Nurses™

Indexed in the
Cumulative Index to Nursing
Allied Health Literature (CINAHL)
Address changes and administrative
correspondence to:

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Deadlines for inclusion in *Breathline*:

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

Welcome to Texas – The Lone Star State!

ASPAN's 34th National Conference, April 26 – 30, 2015

Cindy Hill, BSN, RN, CPAN, CAPA

National Conference SWT Coordinator

The ASPAN 34th National Conference will begin in San Antonio, Texas, in about a month. Educational sessions are packed with a variety of well-known speakers, and those who are new to the ASPAN venue. The theme of "Igniting Professionalism: Excellence in Practice, Leadership and Collaboration," holds true wherever you work in perianesthesia nursing practice. Each topic has something new and exciting to add to our arsenal of patient care techniques. Search through the conference brochure for the topics that best suit your area of practice and need for knowledge.

Networking Opportunities

Attending conference allows each of us to **network with perianesthesia nurses from across the nation and the world.** It is always fun to find old friends and catch up with each other's lives since we last met, but it can be even more fun to take a chance and meet new people at conference. Find a first time attendee or someone you have never met to begin a conversation that may well grow to another "old" friendship in the future. Give of your knowledge and help the newcomers find their way through the maze that is the conference! Take the time to unwind from the busy schedule of life and work and just have some fun out on the town.

Education Abounds!

Saturday and Sunday offer **pre-conferences** by Chris Pasero and Denise O'Brien that are guaranteed to increase your knowledge and add extra contact hours to your card. The conference **continues through Thursday**, ending with a **post conference** presented by Brenda Jahnke about the effect of anesthesia on women's health. The keynote speakers are sure to bring thought provoking information as well as humorous reflection. The sessions starting on Tuesday and ending on Wednesday bring a variety of professional, research, pediatric, critical care and safety topics for your pleasure.

Business and Pleasure

The **Representative Assembly** will convene on Sunday to conduct the business of ASPAN. It is open to anyone who would like to see the ASPAN leaders in action, as it gives reports on the past year, conducts board of director elec-

tions, and sets out discussion about topics that are central to the practice of perianesthesia nursing. It is an eye-opening experience and exciting process to behold. Sunday is also party time as we **"Boogie Back to Texas" for Component Night!** Bring your favorite costume that speaks to the history of Texas and prepare to have fun! Tuesday evening is the **President's Reception** complete with music, dancing, and snacks. Please come celebrate with President Jacque Crosson, and congratulate her on a year of success and achievement!



Cindy Hill
BSN, RN, CPAN, CAPA
National Conference
SWT Coordinator



◀ Bluebonnets,
Hill Country

Lots of Activities Outside of Conference

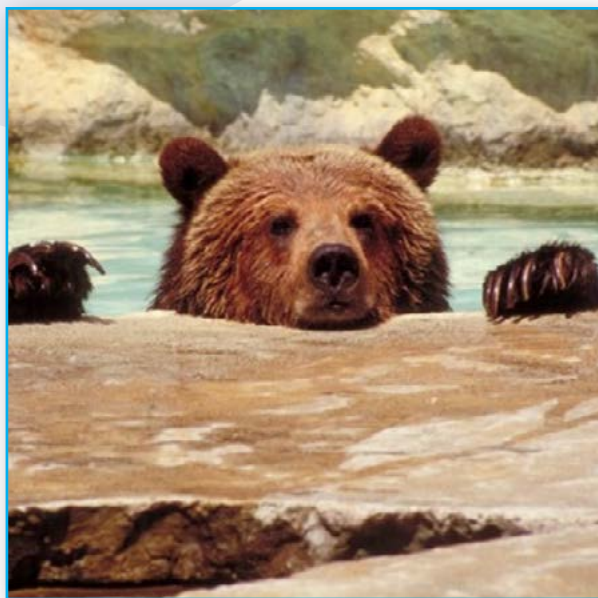
The **Hill Country of Texas** offers many ways to take time out for enjoyment. **San Antonio Festival 2015** occurs April 16 – 26, 2015, just in time for ASPAN's arrival to the city. It makes it easy to arrive a couple days early prior to conference to have some fun. There are many **wineries in the area** for those who have a taste for the vine. Simply use the Internet to find "Hill Country, Texas" wine for a listing of weekend activities with the wineries in the area. There are many small towns in the area that are **treasure troves** for those who like to shop for antiques. The cultural diversity of the area also offers a **giant table of various foods** from which to choose. The **beauty of the countryside** is worth taking a drive to view the wildflowers and greenery of the Hill Country. There are natural caves and caverns complete with bats to

visit in the Hill Country if you decide to take that drive and have an affinity for small, winged, rodent-like creatures. These areas are surrounded with myths, legends, and ghost stories. The **Schlitterbahn Waterpark and Resort**, in New Braunfels, is a short drive northeast of San Antonio for family activities that involve a lot of water. Plan a visit to **The Alamo** with its unique history located very near the conference hotel. **The River Walk** offers many different activities and restaurants within walking distance of the hotel, which is situated on the River Walk itself.

National Conference is always an exciting time of discovery, motivation, and refreshing one's desire to offer the best of care to the most important reason we exist in nursing.....our patients and their families! I hope you join us in San Antonio, Texas, in April for a rip-roaring good 'ole Texas time! We'll treat you right! 🌿



▲ Footbridge on the River Walk



▲ San Antonio Zoo



▼ Cruise along the River Walk

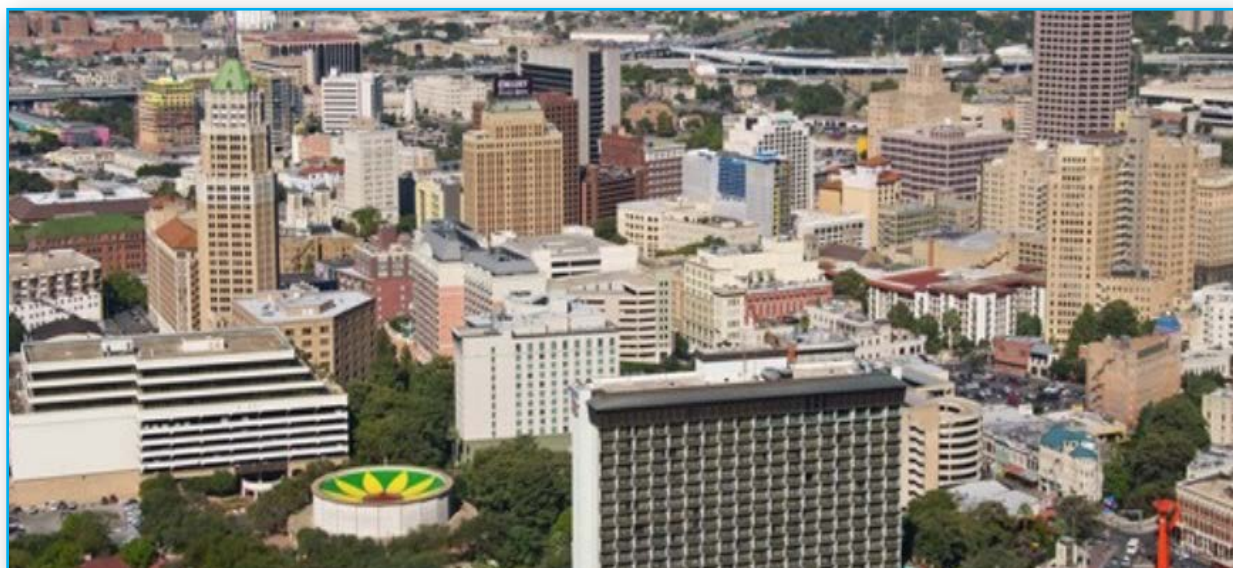


◀ The moon above the Alamo, just a short walk from the conference hotel



◀ Hill Country, western style

▼ City view, San Antonio



Photos courtesy of: San Antonio Convention and Visitors Bureau www.visitsanantonio.com

National Conference Development Activities

Don't miss out on several opportunities to support your professional nursing organization and have some fun while doing so. Development activities at this year's conference will include:

Dream Walk: Treasure Quest

Team up with two or three of your colleagues to solve clues that lead to the finish, where secret treasure awaits. Sunday, April 26, 6:30 a.m.

Development Reception

This event takes place in the one-of-a-kind Lonesome Dove room of the San Antonio Convention Center. The evening will include food, music, giveaways, and program, including Hail, Honor, Salute! gifts. Monday, April 27, 7:30 p.m.

Silent Auction

Support ASPAN by donating an item of interest, bidding on auction items—or both. The Silent Auction is open during Exhibit Hall hours.

For additional information, contact Doug Hanisch at the National Office: ghanisch@aspan.org or 877.737.9696, ext. 215. 🌱



▲ Social time at the Development Reception

Anesthesia Patient Safety Foundation (APSF) Update

Susan Carter, BSN, RN, CPAN, CAPA – ASPAN Liaison to APSF



Susan Carter
BSN, RN, CPAN, CAPA
ASPAN Liaison
to APSF

The ASPAN president appoints individual members of the organization as liaisons to other professional organizations and groups to represent the Society. One such group is the Anesthesia Patient Safety Foundation (APSF), a subgroup of the American Society of Anesthesiologists (ASA). The appointment to this group is for a three-year term and must be approved by the APSF Board of Directors. I assumed responsibilities from Kim Kraft, MSN, RN, CPAN, and was installed in October 2014 to begin my term, which will expire in October 2017.

APSF Mission

APSF's mission is to improve, continually, the safety of patients during anesthesia care by encouraging and conducting safety research and education, patient safety programs and campaigns and national and international exchange of information and ideas.

Current Issues and Projects

APSF's current foci include a number of issues pertinent to perianesthesia care.

One of these issues is the risk associated with residual neuromuscular blockade in the postoperative areas. This concern has been referred to the ASA Committee on Standards and Practice Parameters. That committee will develop an ASA practice recommendation document

addressing "neuromuscular blockade" in the postoperative period to present to the October 2015 ASA House of Delegates.

In addition, the use and development of emergency manuals and checklists to improve patient safety is a major focus. The intent is to create cognitive aids, or manuals and checklists, that will move individuals away from the traditional reliance on memory, when dealing with high risk, but infrequent events such as a Malignant Hyperthermia (MH) event, arrest scenarios, and other crisis situations. The intent of these aids is for the step-by-step interventions and suggestions contained within the manuals to be utilized and followed, rather than expecting individuals to rely on memory, regardless of how experienced the individuals involved may be.

A subgroup of the APSF membership is currently examining the literature and research related to the SmartTots initiative, and the consensus statement addressing the use of anesthetics and sedative drugs in infants, toddlers and preschool children. The group is investigating current evidence, or lack thereof, relating to the cognitive affects this patient population may experience with exposure to the aforementioned medications and agents. More information will be coming on this topic. 🌱

Introducing Dr. Chris Giordano American Society of Anesthesiologists (ASA) Liaison to ASPAN

Please welcome the ASA's new liaison to ASPAN, Dr. Chris R. Giordano! He is an anesthesiologist at the University of Florida (UF), practicing there for eight years. He received his medical degree from the University of South Florida, and did his anesthesia residency at the University of Alabama-Birmingham. He maintains numerous leadership roles at UF Health, including Assistant Professor in the Department of Anesthesiology at the University of Florida, Division Chief of Liver Transplantation, Director of Medical Student Anesthesiology / Critical Care Clerkship, and Co-Chair of UF Health Sedation Committee, amongst others. Dr. Giordano is a director on the Board of the Florida Society of Anesthesiology, and chairs its annual meeting. He is also an ASA representative serving on the Committee of Surgical and Perioperative Anesthesia.



Chris R. Giordano, MD
ASA Liaison to ASPAN

Dr. Giordano's goal is to continue the close collaborative relationship between ASPAN and the ASA, and to partner with ASPAN on future projects to include articles and panel discussions related to anesthesia care. He is currently an affiliate member of ASPAN.

On a personal level, he lives in Gainesville, Florida with his wife Tracy, who is a nurse practitioner, and daughter Gillian and son Dominic.

ASPAN is extremely fortunate to have such an excellent partner for its continuing collegial relationship. Welcome, Dr. Giordano! 🌱

Those Pesky Alarms!

Linda Beagley, MS, BSN, RN, CPAN

ASPAN Safety Strategic Work Team Coordinator

Several years ago, I had a minor procedure under general anesthesia. Three things I vividly remember was someone crying (it was me), a compassionate nurse medicating me for my pain and an alarm going off. I looked over my shoulder to see my monitor ringing and flashing, alerting my nurse Kathy, of my diastolic blood pressure of 114. "Yikes," my muddy brain was saying. But then I turned back around and saw Kathy on the phone with the anesthesiologist reporting my blood pressure. I knew I was in good hands.

Clinical alarms on hospital equipment are designed to alert the caregiver of a potential failure requiring attention. In many patient care areas there are numerous alarm signals, and the resulting noise and displayed information may lead to desensitizing staff. When this happens, it may cause them to miss, ignore or disable the alarm. If not managed properly, patient safety could be compromised. In 2014, The Joint Commission (TJC) added an additional safety goal of reducing harm associated with clinical alarm systems.¹ Facilities are commissioned to improve the safety of clinical alarm systems.

This Joint Commission hospital safety goal has three phases: establishing alarm system safety as a hospital priority, identifying the most important alarm signals and establishing policies and procedures for managing the alarms. Prior to implementation of these changes, education of the staff is completed. The safety goal has a timeline of two years to complete.

In the last 30 years, the number of alarms has increased from six to over 40 in the intensive care units.² The American Association of Critical-Care Nurses (AACN) has written a position statement on the scope of the problem, along with corresponding practice and nursing actions. Suggested recommendations² to help reduce alarm fatigue include:

- Proper skin preparation and placement of ECG electrodes
- Customize the parameters of the ECG monitors to meet individual patient needs
- Reset the monitors after discharge of each patient
- Customize delay and threshold settings on oxygen saturation via pulse oximetry (SpO₂) monitors
- Provide initial and ongoing education about devices with alarms



- Develop unit/hospital policies determining default alarms for the equipment in use
- Monitor only those patients with clinical indications

The design environment of open spaces defines most PACUs, while doing nothing to diminish the sounds emitted from any alarm sounding. Add telephones ringing, voices of caregivers and patients, and the door opening bringing another patient from surgery. These events can all add to the noise volume. ASPAN recognizes the importance of how constant noise and multiple alarms can jeopardize the safety of the PACU patient. The "Principles of Safe Peri-anesthesia Practice"³ addresses this safety concern. In addition, a position statement on alarm fatigue is in the works.

Hearing is the first sense to return while emerging from anesthesia. Keeping the noise level down in the PACU will give patients a soothing environment in which to emerge from anesthesia.

REFERENCES

1. The Joint Commission. 2015 Hospital National Patient Safety Goals. Retrieved from http://www.jointcommission.org/assets/1/6/2015_HAP_NPSG_ER.pdf. Accessed March 16, 2015.
2. Sendelbach S, Jepsen S. AACN Practice Alert: Alarm Management. Retrieve from <http://www.aacn.org/wd/practice/content/practicealerts/alarm-management-practice-alert.pcms?menu=practice>. Accessed December 26, 2014.
3. American Society of PeriAnesthesia Nurses. Principles of safe perianesthesia practice. In ASPAN's 2015-2017 Peri-anesthesia Nursing Standards, Practice Recommendations and Interpretive Statements. Cherry Hill, NJ: ASPAN; 2014:14-17.

Perianesthesia Fatigue and Safety Study

Jackie Ross, PhD, RN, CPAN

Daphne Stannard, PhD, RN, CCRN, CCNS, FCCM



ASPAN will soon launch the Perianesthesia Fatigue and Safety (FaST) Study to explore the relationships between fatigue, safety, and the work environment of perianesthesia nurses. Additionally, the study will provide the ability to examine the relationships between work hours and nurse satisfaction and perceived fatigue.

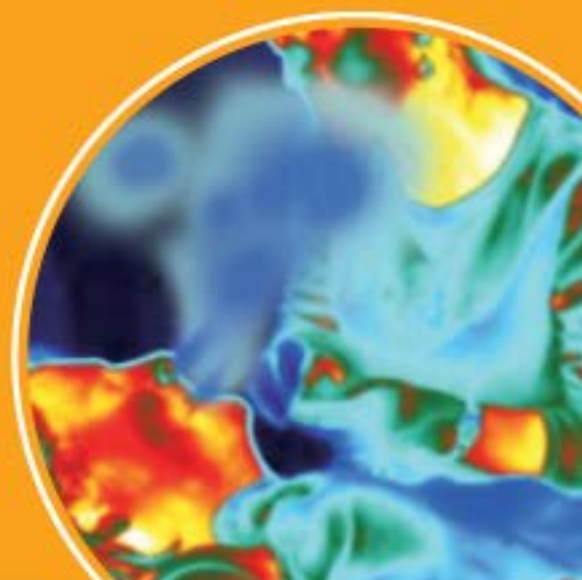
This study will be conducted using an online diary that follows direct care perianesthesia nurses during a two week period. The study will be open for participants for a total of six weeks, so ASPAN members who want to participate can pick which two weeks within the six week window they want. The online diary will ask participants to respond to many questions that are unique to the perianesthesia setting, such as on-call coverage, overflow patients, and staggered scheduling and how those factors may influence nurse fatigue and safety. Additionally, there will be free text boxes for participants to note anything else they want the researchers to know on any given day during the two-week period.

The survey will be administered by an independent survey center. No identifying information is gathered. All ASPAN members will receive an invitation to participate in the study via email. We encourage you to participate in this important study and help to contribute to the advancement of perianesthesia nursing science! 🌱

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Clinical Practice Hot Topic

Aldrete Copyright Dilemma: Where Do We Go From Here?

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. These are two frequently asked questions related to the Aldrete scoring system.



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

Q. *Our hospital uses an electronic documentation system. We have been informed that our use of the “PAR Score” infringes on Dr. Aldrete’s copyright. Effective January 2015, we must either resolve the copyright issue by obtaining a license or change our scoring system.*

Q. *What post anesthesia scoring tools does ASPAN recognize or recommend as an alternative to the Aldrete Score?*

A. From early September through December 2014, the Clinical Practice Committee received over 25 inquiries related to the “Aldrete Score” and copyright issues. In 2013, perianesthesia nurses contacted ASPAN when their PACUs received letters demanding an annual licensing fee if they continued to document with the Aldrete Score. The nurses wondered if this was a scam. ASPAN’s National Office advised the Board of Directors that they were receiving questions about the copyright issue.

Copyright Questions

As a non-profit professional nursing organization, ASPAN promotes perianesthesia education, research and evidence-based practice. ASPAN is not in the business of giving legal advice. However, the Board of Directors recognizes that colleagues around the country are concerned about this issue and are scrambling to find answers. ASPAN recommends that you consult your facility administrators, legal department and information technology (IT) department before making any changes or taking any action. There are various rules which safeguard copyrights and you need expert advice. Generally, a work created on or

after January 1, 1978, is protected for the author’s life plus 70 years. Copyrights registered prior to January 1, 1978, were optionally renewable 28 years following the date of creation.¹

To determine whether you are currently using copyrighted materials, or if you are considering adding assessment tools to your documentation system, contact the National Library of Congress, Copyright Office (COPUBS) at www.copyright.gov, or check with your IT department for assistance. Your IT department should be able to tell you which assessment tools are licensed for use in your documentation system. If you are still using a paper chart, consult your facility’s legal department. If you are concerned about issues related to use of an Aldrete Score, identify the version(s) of his postanesthesia recovery score your facility/department uses. Drs. Aldrete and Kroulik published their original version in 1970.² Dr. Aldrete subsequently published additional versions for use in a variety of settings, including outpatient surgery and obstetrics.³ Many facilities use a 10 point version, substituting pulse oximetry for color. Others use the ambulatory surgery version, also known as the Modified Aldrete Score or PARSAP, which includes pulse oximetry and five additional areas of assessment. The maximum score is 20 points.^{3,4,5}

ASPAN Standards

So, what is ASPAN’s advice? ASPAN does not endorse any specific postanesthesia scoring tool or system, and does not require that a scoring system be used as part of the discharge assessment or criteria. ASPAN’s *2015-2017 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements* still include “Practice Recommendation 2, Components of Assessment for the Perianesthesia Patient.” The recommendation lists many components for discharge readiness, including a “Postanesthesia scoring system, if used.” “Practice Recommendation 8, Fast Tracking

the Ambulatory Surgery Patient,” includes the following statement in the recommendations for determining whether to bypass the Phase I PACU: “Scoring systems are a way of assessing readiness for Phase II level of care, and can include White’s Fast Tracking Scoring System, Modified Aldrete, or the Post Anesthetic Discharge Scoring System (PADSS).”⁵ These are just a few examples of postanesthesia scoring tools. ASPAN continues to advise that each facility consult with the department of anesthesia in the development of discharge criteria appropriate for each level of postanesthesia care and the population served. Discharge criteria may include a postanesthesia scoring system as one component of that assessment, but it is not mandatory.⁵

Aldrete Copyright

So what about the Aldrete copyright? A search for the Aldrete Score on the Copyright Office Web site yielded the registration sheet example below, commonly referred to as the Modified Aldrete Score. Copies of documents can be obtained from the Copyright Office. Information regarding usage is in the rights and permission section. In this case, the rights and permissions information is on the original application filed with the Copyright Office.¹

Type of Work: Text

Registration Number / Date: TX0005959049 / 2004-02-02

Application Title: Aldrete post anesthetic recovery score modified for ambulatory anesthesia.

Title: The Aldrete score.

Description: 1 p.

Copyright Claimant: J. Antonio Aldrete

Date of Creation: 1992

Date of Publication: 1994-12-01


Rights and Permissions: Rights & permissions info. on original appl. in C.O.

Names: Aldrete, J. Antonio

The Library of Congress
United States Copyright Office (COPUBS)
101 Independence Ave., S.E.
Washington, D.C. 20559-6000
202-707-3000 or toll-free 877-476-0778
www.copyright.gov

In conclusion, ASPAN has not endorsed any particular scoring system and does not mandate the inclusion of a scoring system as a component of discharge criteria. If your discharge criteria includes use of a postanesthesia score or any other assessment tool your institution did not develop or create, it may be prudent to consult your legal department and/or your IT department regarding copyrights and any potential licenses required for use.

REFERENCES

1. 17 U.S.C., ch 3 § 101-107 (2011); Circular 92: Copyright Renewal Act of 1992, Title 1 of U.S. Copyright Law December 2011. Available at: <http://copyright.gov/title17/circ92.pdf>. Accessed December 31, 2014.
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CERTIFICATION

Study Resources

To be properly prepared to pass the CPAN® or CAPA® exam you must read the Certification Handbook in its entirety. It contains important information about the test blueprints, study references, and test administration details. Successful candidates tell us they followed a lesson plan and studied from multiple resources.

Get 10 valuable study resources at www.cpan-capa.org > resources > study tools

See our NEW free webinar, *"Conquering Test Taking Anxiety and Fear of Failure"*

Certification Activities at the ASPAN National Conference

Join us at the annual CPAN and CAPA Celebration Luncheon, Monday April 27 from 12 – 2 pm. All current and retired CPAN and CAPA certified nurses are invited.

The following lectures are recommended:

Monday 3:45 – 4:45

Coaching: The Art of Leadership and Mentoring

Tuesday 12:00 – 1:00

Why By Certified? The Benefits and Value of CPAN/CAPA Certification

Tuesday 1:00 – 2:00

CPAN and CAPA Certification: Meeting the Needs of Patients

Wednesday 12:30 – 1:30

Test Taking Strategies – Conquering Fear of Failure

Contact ABPANC

475 Riverside Drive, 6th Floor, New York, NY 10115-0089

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

Email: abpanc@proexam.org

Web site: www.cpancapa.org



"Caring & Sharing: Inspiring Global Connections"

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September 9 – 12, 2015
Copenhagen, Denmark



For more information visit www.ICPAN2015.dk

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Amy Dooley, MS, RN, CPAN
Regional Director, Region 4



Amy Dooley
MS, RN, CPAN
Region 4 Director

Region 4 Highlights

Region 4 of ASPAN comprises the New England states, along with New York, Pennsylvania and New Jersey, which also includes Bermuda. Geographically, Region 4 is the smallest region within ASPAN. This is an advantage for its members. The distance to travel to another component is usually just a car ride away, making it easy to attend conferences. Region 4 is well-represented on the ASPAN Board of Directors with Katrina Bickerstaff from Massachusetts, Dr. Kim Noble and Dr. Linda Lakdawala from Pennsylvania, and me from New Hampshire. Region 4 hosted five ASPAN seminars during the winter-spring session. Region 4 has 2,978 members!

Connecticut Society of PeriAnesthesia Nurses: CSPAN www.ctspan.org

Connecticut successfully completed the incorporation of its component after working diligently to complete the process. Its Web site has been updated to offer the latest information to its members.

Maine Society of PeriAnesthesia Nurses: MESPAN www.mespan.org

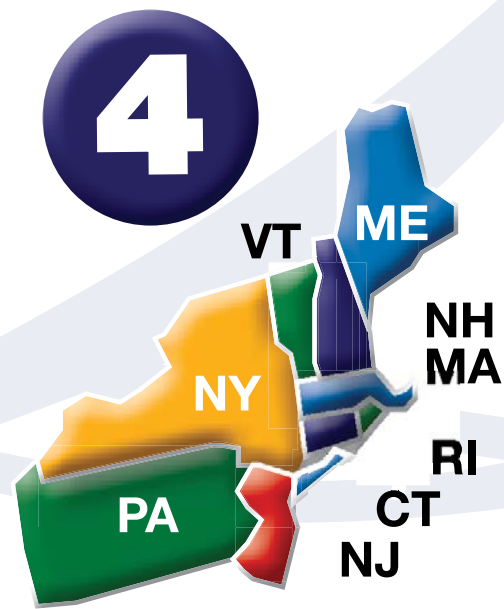
MESPAN has four new members on its Board of Directors, bringing forth new ideas and enthusiasm. Jannifer Dolan-O'Conner mentored Deb Roy in attending the Leadership Development Institute (LDI). The number of members stays consistent at 98.

Massachusetts Society of PeriAnesthesia Nurses: MASPAN www.maspan.org

MASPAN held a planning session for the organization in the summer, followed by a strategic planning retreat in the spring. Members are being mentored to join the Board of Directors in various capacities. MASPAN is currently reviewing its Web site, with an eye towards updating it.

New Jersey/Bermuda PeriAnesthesia Nurses Association: NJBPANA www.njbpana.org

NJBPANA held two successful conferences, with the fall conference in Sewell and the February conference in Bermuda. Members are working on



increasing attendance at conferences, and also used time at the ASPAN National Conference in Las Vegas for some networking.

New York State PeriAnesthesia Nurses Association: NYSPANA www.nyspana.net

The Strategic Plan for NYSPANA follows the outline of Gold Leaf, incorporating the strengths of component development into its planning. A successful state conference was held in Rochester, with Healthy Sisters' Soup & Bean Works as the recipient of its community service project.

Pennsylvania Association of PeriAnesthesia Nurses: PAPAN www.papanonline.org

PAPAN's state conference was held in Gettysburg with several interesting speakers. For the first time, PayPal was used successfully for members to register online. The next state conference will be held September 19-20 in Erie.

Rhode Island Association of PeriAnesthesia Nurses: RIAPAN www.riapan.org

Congratulations to Rhode Island for creating its first Web site! It is full of interesting information and is crucial to its members. RIAPAN received a scholarship from ASPAN, and sent two members to LDI. The fall conference is planned for October 25th.

Vermont New Hampshire Association of PeriAnesthesia Nurses: VT/NH APAN www.vtnhapan.org

VT/NH APAN successfully created and awarded a research grant that was spearheaded by a member's request. Funding was received from ASPAN enabling four members to attend LDI, two of which were first-time attendees. VT/NH continues to work on bringing new people to its Board of Directors.

PeriAnesthesia Nurse Awareness Week (PANAW) February 2-8, 2015

PANAW was celebrated around the country. Many facilities created posters and tent cards to display and educate others about the role of the perianesthesia nurse. Snacks, lunch and cake were abundant, games and giveaways were held and some facilities celebrated with dinner in restaurants after work. Recognition was provided by facilities through visits from administration and special awards created for perianesthesia nurses. Many perianesthesia conferences were held on Saturday. Throughout these celebrations, perianesthesia nurses demonstrated passion and commitment to their patients and to each other, as they do throughout the year. 🌿



▲ Perianesthesia nurses at Harrington Hospital, Southbridge, Massachusetts, celebrated with cake and lunch

▼ Tom Connor, RN, CCRN, third from left, and longtime perianesthesia nurse, received the first annual Perianesthesia Nurses Award from Vanderbilt University Hospital in Nashville, Tennessee



▼ Rebecca Bell, BSN, MA, RN, CAPA, third from left, received the Excellence in Clinical Practice Award from the Tennessee Society of PeriAnesthesia Nurses (TSPAN). Others in the photo, from left, Tina Tomes, Donna Gardner and Mary Vance



▼ *Kennestone Outpatient Surgical Center, Marietta, Georgia. These perianesthesia nurses celebrated with a “Blast from the Past,” wearing white uniforms and sharing pictures from their nursing school graduations*



▲ *A poster created by a PACU nurse at Holy Family Memorial Medical Center, Manitowoc, Wisconsin*



▲ *CHI Health Lakeside Hospital, Omaha, Nebraska. More cake!*

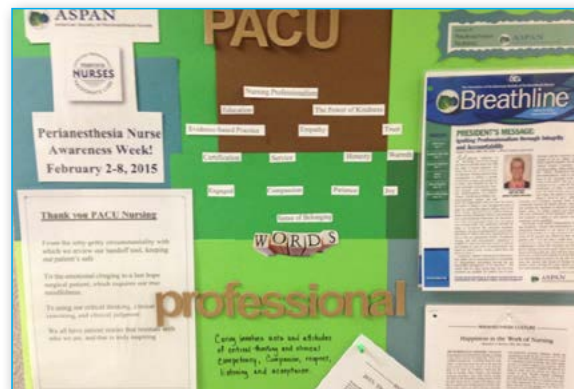
▼ *St. Elizabeth HealthCare, Edgewood, Kentucky. A poster was created listing the years of nursing experience in their PACU. Wow!*



▲ *Johns Hopkins University Hospital PACU having fun during PANAW*



▼ Mayo Clinic, Phoenix, Arizona perianesthesia staff celebrate PANAW with an informative poster



▲ St. Elizabeth HealthCare, Edgewood, Kentucky perianesthesia nurses celebrate PANAW at a local restaurant



▲ Northeast Ohio PeriAnesthesia Nurses Association celebrated with "...what else? Cake and snacks!"



▼ Affinity Medical Center, Massillon, Ohio, perianesthesia nurses celebrated PANAW with cake, along with snacks, lunch, a PANAW trivia quiz and prizes, and recognition in the hospital newsletter

ASPAN 2015

Winter/Spring seminars & webcasts

AMERICAN SOCIETY OF PERIANESTHESIA NURSES

FOUNDATIONS OF PERIANESTHESIA PRACTICE

June 13, 2015
Lafayette, LA

PEDIATRICS: BEYOND THE BASICS

June 6, 2015
Cleveland, OH

PERIANESTHESIA PATHOPHYSIOLOGY AND ASSESSMENT: A SYSTEMS APPROACH

May 30, 2015
Fishkill, NY

June 27, 2015
Waltham, MA

PERIANESTHESIA STANDARDS AND IMPLICATIONS FOR PRACTICE - NEW!

May 30, 2015
Oakland, CA

REFRESHING YOUR PERIANESTHESIA PRACTICE

May 30, 2015
Fairfax, VA

SAFETY BEGINS WITH US

May 23, 2015
Raleigh, NC

SURROUNDING YOUR PRACTICE WITH EXCELLENCE: LEGALITIES, STANDARDS AND

ADVOCACY
June 6, 2015
Tucson, AZ

NEW! LIVE WEBCASTS – FULL DAY PROGRAMS

FOUNDATIONS OF PERIANESTHESIA PRACTICE

June 27, 2015

REFRESHING YOUR PERIANESTHESIA PRACTICE

June 13, 2015

NEW! LIVE WEBCASTS - HALF DAY PROGRAMS

FOUNDATIONS OF PEDIATRIC PERIANESTHESIA CARE

June 6, 2015

PERIANESTHESIA ESSENTIALS II

June 20, 2015