PRESIDENT’S MESSAGE:
Leading with Knowledge – Serving with Heart
Regina Hoefner-Notz, MS, RN, CPAN, CPN, FASPAN – ASPAN President 2018-2019

It is hard to believe conference has come and gone. I am thrilled toCurrently be serving as your ASPAN president. Thank you for the honor to be of service to this amazing organization. In this Breathline, I have the opportunity to share some of my ideas and thoughts with you.

I love ASPAN. ASPAN has provided me many opportunities for professional growth, but I have appreciated the research, evidence, standards and the multitude of resources it has given me. It has also given me an extended family of nurses who believe in the potential of greatness: great patient care, great professional resources and great support when things seem impossible.

A Disney princess once said: “A dream is a wish your heart makes.” Like Cinderella, sometimes we cannot see our dreams until someone else identifies the dream and you, the dreamer. I didn't dare to dream this big until others saw something in me I did not see. To me, this is the essence of ASPAN. Nurse colleagues see potential in everything we do. There are those that see it beyond their patients, and graciously invite others to come along for the magic carpet ride. To continue to change, we need education, knowledge and a community of our peers. And driving this magic carpet of change is you and it is me and it is ASPAN.

The Disney princess has changed dramatically over the years from a victim of circumstance to a fighter and warrior. These princesses were able to see a vision beyond their own needs and formulate actions to connect their peoples. I see their vision of connection as an opportunity. It is our chance to come home to ASPAN, by growing our components and supporting our organizational roots.

We need to be present every day so we can be counted to be at the table and to be part of the process that directs patient care. Nurses bring what is best about holistic patient care. We cannot take any moment for granted. Today more than ever, this collective voice called ASPAN defines this specialty practice as caregivers, educators, researchers and nurse leaders. Imagine how valuable ASPAN’s united voice is for that one nurse, alone in a small facility, seeking safe practice for patients. This nurse has the strength of thousands. This nurse has ASPAN.

My personal dream stems from being part of a marvelous component, an experience every perianesthesia nurse deserves. As a regional director, I had the privilege of visiting other components and to speak to nurses at the bedside, at the very heart of ASPAN’s purpose. We discussed the need to grow and send ASPAN’s message to every nurse who would listen. The resolve to share ASPAN’s core purpose, its values and PRIDE2 will support each of us as we offer service and care to our perianesthesia colleagues. My dream is to lead with knowledge and to serve with heart.

We are a volunteer organization. I would like to personally invite you to volunteer your time to work with me this year to continue to build this

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organization. According to research from the federal government’s Corporation for National and Community Service, “People who routinely volunteer about two hours per week live longer and experience better physical and mental health than those who do not.”

People mention things that interfere with volunteering, like time limitations and not knowing anyone, but we all get to know each other a little better when we are together at a conference or other event. And, as nurses, we know how much we can do in just two hours. Some hesitate to volunteer because they don’t think they can make a difference, even though so many nurses strongly desire to make a difference. Volunteering isn’t meant to be just about me or you. It’s about contributing to something greater. In a time of social isolation, volunteering creates a human connection with like-minded individuals helping us articulate and live out our ideals.

People volunteer for various reasons. Two reasons that stand out are the ideas of personal development, seen as stretching ourselves or learning new skills. The other reason is a sense of community, of making the world or my piece of it (in our case, a sense of community, of making the world or my piece of it (in our case, ASPAN components are the center of our activity. They are our launching off points to something bigger, but they are also our North Star, providing direction, keeping our bearings and guiding us home.

As I speak about volunteering, I must tie it back to my own ideas of leadership and being of service to others. I want to give you my time and energy as your servant leader. Servant leadership seems intrinsic to nursing; how we serve with strength and humility. Part of my dream is to seek out the leader in every nurse and encourage each of us to add our special something to this organization.

Within ASPAN, this means working together to problem-solve and grow new leaders engaging in the activities associated with running our components through education and with the national organization. It means we all take on some responsibility of moving this organization forward for the betterment of all perianesthesia nurses, recognizing that giving is a gift that will motivate others to give, too.

My goal is to work with you this year, encourage the growth of our components and to humbly support the amazing work we have seen from this organization. I dare to dream big for me and for you. I implore you to reach inside your heart to find that little bit of time to share your knowledge and experience with others. Join with me to continue to create ASPAN’s professional organization as only perianesthesia nurses can. Your home component is your ASPAN heart. Come home to ASPAN and invite others to share this journey with you. This is where heart, service and knowledge come together to live. This is how we will lead with knowledge and serve with heart.

REFERENCES
ASPAN Scholarship/Award Program:
Accepting Applications Now Through July 1, 2018!

The ASPAN Scholarship/Award Program is a member benefit designed to provide financial assistance to ambulatory surgery, postanesthesia, preanesthesia and pain management member 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, most importantly, currently participating in component or ASPAN national activities.

Scholarship/award information is available online only. Specific eligibility requirements for each type of scholarship or award are detailed in the instructions and required items lists on the Scholarship/Award Program Web page, or from www.aspan.org, select Members/Scholarship Program or click here.

**Scholarships offered:**
- $1,500 for Bachelor of Science in Nursing, Master of Science in Nursing or Doctorate in Nursing
- $750 for ASPAN National Conference being held May 5-9, 2019, in Nashville, Tennessee
- $1,000 for Humanitarian Missions
- Two $2,000 scholarships for the 2019 Nurse in Washington Internship (NIWI) program
- $314 for CPAN or CAPA Certification Exam fee

ASPAN’s Scholarship Program postmark deadline is **July 1, 2018**.*

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**Meet Me in St. Louis!**

**Leadership Development Institute (LDI)**

Regina Hoefner-Notz, MS, RN, CPAN, CPN, FASPAN
ASPAN President 2018-2019

You are a leader. As a nurse, you can’t help yourself, because your patients depend on your leadership every day to guide them to safety. Let’s take these same leadership skills and continue to hone them into aiding your component and your professional organization. Come to ASPAN’s LDI!

Whether this is your first, fifth or fiftieth time joining us for LDI, it’s always fun to get together with your professional colleagues, learn something new, laugh a lot and network with other component leaders. I would encourage every component to send some of its current leaders, as well as leaders you are helping to groom into component positions. Everyone is welcome to come and participate as we continue to offer information to strengthen ASPAN members’ abilities to lead, not only their components, but ASPAN committees and strategic work teams and other positions at the national level.

We will be meeting in the beautiful city of St. Louis, Missouri, the weekend of September 14-16, 2018. This year, we will have the opportunity to gather in a lovely Marriott hotel which we have not been to before, in the heart of downtown. This will offer easy access to various restaurants and shopping, while providing a new experience for some that may have been to previous LDIs.

My goal as your ASPAN president is to work with you and ASPAN’s talented Board of Directors and National Office to create a memorable weekend that will help strengthen your abilities as an ASPAN leader. Our aim will be to provide you with new ideas to share with your component, as well as the opportunity to connect with like-minded individuals to join with, not only this weekend, but also in the future as you build your ASPAN network. I hope to see many of you there!
NEW MEMBER BENEFITS CAMPAIGN

A new member benefits campaign has begun! Ads are on social media and on the ASPAN homepage, featuring a major benefit of joining ASPAN. If clicked, the ad redirects you to a Web page that lists all of ASPAN’s benefits—and invites you to join ASPAN.

When you see these ads on social media, be sure to Share and Retweet them to your friends and colleagues!

MEMBER-GET-A-MEMBER CAMPAIGN

Last year, over 750 of ASPAN nurses participated in the Member-Get-A-Member campaign, recruiting over 1,000 new members. You can participate in the 2018 campaign—and win prizes for promoting ASPAN by:

• Asking the National Office for free overview brochures and membership applications
• Placing your name as the Recruiting Member on each membership application
• Distributing the materials to your colleagues and encouraging them to join ASPAN

Learn more about the Member-Get-A-Member campaign by clicking here.

Check out the prizes that you can win by recruiting new members by clicking here.

Check out all of the benefits that come with ASPAN membership by clicking here.

In addition to the ASPAN overview brochures and membership application forms, ASPAN has Webcast/Seminar brochures, and Hail, Honor Salute! gift forms.
Clinical inquiry can take several routes, but it always starts with a question. Will black cherry juice improve gout symptoms in the adult male patient? Can ingestion of ginger improve chemo-induced nausea? Does using teach-back during discharge education improve the patient's compliance and complications post hospital discharge?

Ask the Question
Focusing these questions by using a specific format can assist you in finding the answer. The PICO format is a commonly used method. This format focuses your search of the evidence or literature by producing specific searchable terms. It serves as a roadmap in the journey through the literature for Population, Intervention, Comparison, Outcome. If, through this search you are able to answer your clinical question, then a practice change is the next step or completing an evidence-based practice project.

These projects do not produce new knowledge. Instead, they translate existing knowledge into practice changes. These projects are worthwhile and contribute to decreasing variances in patient treatments, thus decreasing costs of healthcare and improving patient outcomes.

Research or Quality Improvement Project?
However, if the search and synthesis of the literature were not able to answer the clinical question, then a gap in knowledge has been discovered. This represents an opportunity to generate new knowledge through completion of a research or a quality improvement project. But, what are the differences between the two? Here are a few questions with which to begin:

• Is the focus of the project on improving a process specific to your work area?
• Is the focus of the project on improving nursing practice, or care of a specific population?
• Is the knowledge that will be generated through the project intended for local (unit or hospital) use or generalizable?

Quality Improvement
Quality Improvement (QI) projects start with a systematic method for improving outcomes and/or processes based upon continuous quality improvement and management focusing on site specific systems. QI projects generally use LEAN, or Plan, Do, Study, Act (PDSA) model. These projects are often a continuous type of project and have frequent evaluation of the process. Revisions to a process are followed by a data collecting period, then another evaluation of the revision. Generally, QI projects are not hypothesis-driven, but, instead, let the data lead us to the answer.

Research
However, if the project is focused on improving practice, and findings will be appropriate to apply to other settings and intent is for dissemination, then a research project is the direction that should be taken. Research projects start with a burning clinical question leading to rigorous literature search, critical appraisal and synthesizing findings to identify knowledge gaps, through using measurable variables to describe, explain, predict, and/or control the phenomena.

All three of these methods can lead to improved patient outcomes, and improved role/job satisfaction of the nurse who began the journey in clinical inquiry.

Formulate Your Question and Avoid the Status Quo
Do you have a clinical practice question, or often wonder why are we doing something the way we do? Do not just wonder. Instead, formulate your question and search the literature. After all, the answer is in the asking.

Status quo nursing care results in status quo patient care, whereas innovative evidence-based nursing practice results in improved patient outcomes, decreased costs, streamlined care and professional growth of the individual nurse.

REFERENCES
Clinical Practice Hot Topic

Duration of Stay in PACU
Staci Orbell, MSN, RN, CPAN – ASPAN Clinical Practice Committee member

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 some frequently asked questions related to a patient’s minimum length of stay after anesthesia and monitoring patients after receiving medications.

Q: How long does a patient have to stay in PACU after receiving anesthesia? Is there a minimum required time? How long do I have to keep a patient after giving them a medication?

A: There are many factors that contribute to the patient’s ability to progress through the postanesthesia recovery period. It is a common misconception that ASPAN standards dictate a defined time requirement for observation of the patient, e.g., the idea that if a patient receives general anesthesia, e.g., he/she must be observed in Phase I PACU for one hour regardless of how stable the patient may be.

Determining a patient’s readiness for discharge requires the perianesthesia nurse to critically assess every patient based on his/her own unique set of needs against facility-defined criteria. This determination also includes consideration for the type of interventions performed and pharmacologic properties of drugs administered.

ASPN and ASA’s Stance

The ASPAN Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements place an emphasis on defining discharge criteria for each level of postanesthesia care. In addition, elements of a facility’s discharge criteria should be established in collaboration with the department of anesthesiology and medical staff.1

This practice is supported by the American Society of Anesthesiologists’ 2013 Guideline on Postanesthetic Care, stating, “Requirement of a Minimum Mandatory Stay in Recovery: The literature is insufficient to evaluate the effects of a mandatory minimum stay in recovery…..The Task Force consensus is that a mandatory minimum stay is not necessary and that the length of stay should be determined on a case-by-case basis.”2

Medication Monitoring Requirements

A patient’s length of stay will also vary with any additional medications received. The ASPAN Peri-anesthesia Standards, Practice Recommendations and Interpretive Statements do not define required observation times for specific drugs. However, organizations may elect to establish these timeframes independently for certain drugs or patient conditions. ASPAN’s “Position Statement on Safe Medication Administration” states, “Factors to consider when determining a patient’s length of stay following administration of medications include, but are not limited to:

a. Amount, type, and timing of medication
b. Patient response
c. Medication half-life and peak
d. Monitoring capabilities of receiving unit
e. Drug interactions
f. Cumulative effects.”3

An interpretive statement to this position adds further expert commentary. This commentary states: “Current recommendations suggest a minimum of two hours observation following administration of a reversal agent. Current recommendations suggest at least 30 minutes of observation following the last dose of sedative and/or opiate medication unless transferring to same level of care or a unit with comparable monitoring capabilities.”1

Summary

A patient’s ability to progress to the next level of care is not limited to any specific time frame. Rather, discharge should depend upon a patient meeting the facility’s discharge criteria and his/her response to medications received.

The competency needed to recognize a patient’s readiness for discharge is based on patient assessment and close communication with the patient’s physician. These nurse-driven assessments are the elements that can influence the patient’s length of stay in the postanesthesia recovery period.

REFERENCES


ASPAN’s Education Scores Gold!
Linda Beagley, MS, BSN, RN, CPAN, FASPAN – ASPAN Director for Education

The 37th ASPAN National Conference is history, with the last education session completed, and closing ceremonies sending us home rejuvenated and excited to share newly gained knowledge with our colleagues. A variety of topics was offered, including two new four-hour sessions on management and speaker development. The conference offered over 100 continuing education hours. Hopefully, you had opportunity to attend conference in Southern California. If not, plans are already underway for the 38th National Conference, May 5-9, 2019, in Nashville, Tennessee. Add it to your professional bucket list to attend!

One of my favorite things to do at conference is to mingle and network with perianesthesia colleagues and discover their education needs along with what new education topics need developing. Both seminar and conference evaluations give an overall idea of what topics would be good for future presentations. However, talking with attendees at national conference truly gives me a better perspective of what YOU really want! No one holds back! I also attended several of the regional meetings led by the regional directors where component leaders shared ideas and requests to bring education to their components.

Perianesthesia Certification Review
One of the most popular seminars is ASPAN’s Perianesthesia Certification Review. This winter, we trialed a new feature of offering the certification review webcast in segments over three consecutive weeks. With the webcast divided into three sections, time was provided to learners to study between weeks, plus develop and ask questions for the next class. For some learners it is hard to sit for multiple hours for education or give up a big chunk of time due to family and work obligations. Over twenty perianesthesia nurses across the country participated in the trial. I think it’s safe to say the trial was a success and will be offered again.

On-Demand Library
Have you been to the library – as in ASPAN’s On-Demand library? This past winter, the Education Provider Committee developed new presentations, searching for high quality content and recording these presentations for all of you to use in extending your perianesthesia knowledge. New presentations on Parkinson’s disease, multimodal pain management, PTSD, and what’s new in orthopedics, just to name a few, are available in the library.

Thinking about getting a group from your component together for education? What about requesting an ASPAN Select presentation? Request deadlines are due February, July or October 15. The application is found on www.aspan.org under the ASPAN Education tab > ASPAN Webcasts and Seminars > ASPAN Select Seminars. Select up to three presentations, reserve a room and AV equipment to host your gathering and let your perianesthesia colleagues know where it will be held.

Participants are required to register through ASPAN and will receive an email on how to complete the evaluation process and receive a certificate of completion. ASPAN mails the host a jump drive with the selected presentations. Afterwards, the host returns the jump drive back to the national office to have the required deposit returned. Ten percent of the net profits are returned to the host component.

JoPAN Continuing Education Articles
Each member can submit up to three JoPAN continuing education articles for free contact hours. In the past, these free articles were only offered during PANAW. Recently, the ASPAN Board of Directors voted to extend the time of submission to be yearlong. In the reading mood? After the three free articles, any other articles members only pay $5.00 to cover the cost of the online evaluation.

Have a wonderful, restful summer! Feel free to contact me with your educational needs at lbeagley@aspan.org.
The **elements** of temperature management

patienthandling.stryker.com

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As the Arizona PeriAnesthesia Nurses Association (AzPANA) Governmental Affairs representative, I felt the need to learn as much as possible about the process of making and passing laws. After getting involved at the state level, and with encouragement from my peers, I applied for one of the American Society of PeriAnesthesia Nurses (ASPAN) Nurse In Washington Internship (NIWI) annual scholarships. I was grateful to receive an award from ASPAN. I then applied for NIWI and began a relationship with the sponsoring organization, Nursing Organizations Alliance (NOA).

Preparation

NOA has perfected the NIWI program into a smooth, educational, and friendly operation. My learning began almost immediately as I prepared for the days in Washington DC. New terminology and formal processes that I vaguely remember from non-nursing classes were resurfacing. NOA outlined the process, and, we had a conference call to clarify information and answer questions.

We researched our congressional representatives and were guided through the process of making appointments with our district legislators. To acquaint ourselves with our representatives, we looked at their voting records, committee appointments, special interests, and current standing on health matters.

We learned that a brief but powerful personal story might be enough to stir the passion in the person you speak with to leverage a positive vote from the legislator. Being a constituent is also vital to the person needing your vote. Visits, and, outlining your requests in a letter are all helpful. Other important homework before asking for support might include: building a relationship with the staff, offering to provide your expertise to the office and staff, and researching and knowing your data.

Goals of the Meeting

Goals of the visit are to solicit support for a bill and educate the legislator or staff about the importance of the bill content. A request for the legislator to support a bill is referred to as an “Ask,” or purpose for the meeting. NOA prepared three “Asks” pertinent to nursing. They all had bipartisan support and were straightforward. They included:

- H.R. 959 / S. 1109 The Title VIII Nursing Workforce Reauthorization Act
- The Title VIII Nursing Workforce Development Programs at $244 million in FY 2019
- H.R. 3692 / S. 2317 The Addiction Treatment Access Improvement Act

Lessons Learned

By the end of the conference, there was a general feeling of satisfaction as we heard stories of the visits. Now that we understand the process, we must keep in mind that much work can be done at home, as most policies are developed at the local level. I left with a greater appreciation for the legislative process, and a new vocabulary.

I encourage other members to become involved at all levels of public policy. A huge thanks to ASPAN, and AzPANA for making it possible for me to attend this most interesting and informative weekend conference.

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What is NIWI?

The annual 2018 Nurse in Washington Internship Program (NIWI) was held in Washington, D.C., March 11-13. NIWI is an educational opportunity sponsored by the Nursing Organizations Alliance (NOA). This program educates nurses of any background or level of education to better understand the legislative process and to learn how to be an effective nursing advocate in local and national government.

The NIWI experience is unique and unlike any other educational program I have attended. Prior to attending the event, the registered attendees were given step-by-step instructions on how to set up an appointment with their respective House Representatives during the NIWI program. During the appointments, we were to share three “asks” with the staffers, to obtain support and endorsement from the legislators. These “asks” are generic in nature, chosen by the Nursing Community Coalition (of which ASPAN is a member) and are related to issues that affect all nurses.

This year, the “asks” were:

• Title VIII Nursing Workforce Reauthorization Act (H.R. 959/S. 1108)\(^1\)
• Title VIII Nursing Workforce Development Programs, $244 million in fiscal year 2019\(^2\)
• Addiction Treatment Access Improvement Act (H.R. 3692/S. 2317)\(^3\)

The program began on Sunday afternoon with lectures on legislation and continued Monday with panel discussions featuring local “Hill” experts and networking. Monday afternoon, we had role playing and explicit instructions and guidance to prepare us for our individual meetings with Congress on Tuesday. Tuesday morning started with breakfast and a briefing, and we were on our way to the Hill!

Why Attend?

With 35 years of nursing experience at the bedside, I have strived to remain current and informed related to my practice. But, I certainly acknowledged I was lacking even a basic understanding of the overall legislative arena.

I recently committed to resurrecting the governmental affairs role in the Maine Society of PeriAnesthesia Nurses (MeSPAN), which had been vacant for several years due to lack of interest. I knew that, in order to be effective in that role, I would need to be more informed. I was encouraged to apply for an award through ASPAN to attend NIWI in 2018, and, was very grateful to be chosen as one of two recipients.

What I Know Now

I was fortunate to actually meet Rep. Chellie Pingree (D-ME), my House Representative from Maine, and have a photo taken with her! I prepared in advance, and shared specific Maine nursing data related to our shortage of nurses, nursing programs and faculty and provided opioid-related death statistics to make the issue more personal to our state.

My interest in governmental affairs is piqued and I am committed to continue to explore, learn, and advocate, including at the local level. My goals are to demystify the legislative process, and, be able to explain and share it in a way that it is understandable and meaningful to every nurse. Knowledge is power, and as nurses, we have a voice with which to be reckoned!

REFERENCES

FOR SOME OF OUR MOST ELITE SOLDIERS, THIS IS THE BATTLEFIELD.

Becoming an operating room nurse and officer on the U.S. Army or Army Reserve health care team is an opportunity like no other. You will develop an expertise in care across the entire age spectrum and the continuum of health care needs. With this specialized team, you will be a leader—not just of Soldiers, but in surgical care.

See the benefits of being an Army medical professional at healthcare.goarmy.com/kj61
Region Three Highlights

Region Three components embraced Immediate Past President Susan Russell’s theme of detecting greatness in their practice through ongoing education and other activities.

**Illinois Society of PeriAnesthesia Nurses: ILSPAN** demonstrated greatness during its fall conference. This day, like all ILSPAN activities, was packed with great topics to promote peri-anesthesia nursing. It also included supporting a local organization, The People’s Resource Center, with attendees bringing non-perishable food or household items to help those less fortunate.

**Indiana Society of PeriAnesthesia Nurses: INSPAN** demonstrated greatness when ASPAN’s 36th National Conference in 2017 was held in Indianapolis. Members stepped up to the plate and served the rest of ASPAN members and attendees by helping everyone take full advantage of every learning opportunity at this venue.

**Kentucky Society of PeriAnesthesia Nurses: KSPAN** worked to increase membership and widen the impact that peri-anesthesia nurses have on the patients they serve. One activity to widen their influence was to participate in a 5K walk to support CareNet, a pregnancy support service for Northern Kentucky. We know that peri-anesthesia nurses care for patients/people in all phases of life!

**Michigan Society of PeriAnesthesia Nurses: MAPAN** demonstrated its impact on patients through practice when it hosted its spring conference on April 14 in Kellogg, Michigan. While scheduled very close to the same time as ASPAN’s 37th National Conference, this conference allowed MAPAN members the opportunity to promote their peri-anesthesia practice on a more local level.

**Minnesota-Dakotas Society of PeriAnesthesia Nurses: MNDAKSPAN** hosted an interesting and interactive fall conference which allowed attendees to learn and participate in personal application of extending their practice. The intent was to impact a diverse population of patients. Attendees were provided the opportunity to look closely at how each nurse plays a part in the promotion of extending patient care to aid the patient in achieving his/her best possible outcome.

**Ohio PeriAnesthesia Nurses Association: OPANA** supported the local organization of Hope Hollow with donations. This organization supports patients’ families when they come to the Columbus area for various treatments. The greatness of pre-anesthesia nurses extends far beyond the preanesthesia or postanesthesia units!

**West Virginia Society of PeriAnesthesia Nurses: WVSPAN** promotes its greatness through publication of activities on its Facebook page. It publicly promotes the role that peri-anesthesia nurses play politically and professionally. Greatness does not necessarily come in numbers, as this is smallest Region Three component!

**Wisconsin Society of PeriAnesthesia Nurses: WISPAN** scheduled a current topic, opioid awareness, during its winter conference. Each segment of this conference was connected to peri-anesthesia practice and the impact that peri-anesthesia nurses make on the patients we serve.

The 2605 members of Region 3 not only sense their own greatness, but also help their patients detect greatness through education and follow through on the many aspects involved with peri-anesthesia nursing. These aspects include assessing, preparing, teaching, evaluating, altering plans, supporting and caring for diverse populations. This is done while utilizing best practices, research, standards and networking from other components to demonstrate to the public the importance that we, as a specialty, make on those we serve.
ICPAN Report

International Conference for PeriAnaesthesia Nurses (ICPAN) Meets “Down Under”
Helen Fong, MSN, RN, PHN

The famous Sydney Opera House and Sydney Harbor Bridge were the backdrop of Luna Park, the venue of the 4th International Conference for PeriAnaesthesia Nurses in November, 2017. Attendees included 396 nurses from 14 countries and five continents, who met for a four-day conference which was packed with pre-conference workshops, two hospital visits, plenary sessions, delegate forums and the ICPAN biennial general meeting. Some of the 96 American conference registrants were also speakers of the plenary sessions and presented posters.

The ICPAN Board, headed by Dr. Joni Brady (USA), and Fiona Newman, ICPAN Conference Chair, in association with the Australian College of PeriAnaesthesia Nurses (ACPAN) organized the 2017 biennial conference with the theme, Tides of Change - Advocacy, Education, and Research. In addition to the professional learning experience, there were social events including the welcome reception, a riverboat harbor dinner cruise, poster presentations and trade exhibits.

Preconference Offerings and Hospital Tours

Three pre-conference workshops included Writing for Publication, Novice Speaker Workshop, and The Second Victim. These workshops were concurrently offered along with two hospital visits.

The Prince of Wales Public Hospital is a major teaching hospital in Sydney’s eastern suburbs. The other hospital is the Chris O’Brien Lifehouse. It is a non-profit private/public comprehensive cancer center for patients needing diagnosis, tests, treatment, research, and support found under one roof. Dr. Chris O’Brien did not let his diagnoses of grade four malignant glioma deter making his vision a reality. He spent his last four years working on creating a comprehensive cancer center.

Since his death in 2009, his wife Gail continues his legacy. Lifehouse opened in 2013, with nine floors which houses eight operating rooms (150,000 surgeries a year), 15 recovery bays, 20 day surgery bays, 16 ICU beds, and two medical-surgical wings. Each room has a fantastic view of Sydney.

Inspiring Opening Presentation

Dr. Paula Foran’s (Australia) inspiring opening presentation, Tides of Change: An exciting Future for PeriAnaesthesia Nursing, Let’s Make it Happen!, called for nurses to re-ignite their passion in peri-anesthesia nursing.

This was followed by Owen Ashwell (New Zealand) and Harriet Zych (UK), who shared their volunteer experience teaching a recovery room course to nurses in Cameroon, Africa. They helped the African nurses gain confidence in caring for post-surgical patients even with very limited resources.

Global Speaker, Common Issues

It was difficult to choose which plenary sessions to attend, as there were 32 scientific presentations by prestigious speakers from the Philippines, Greece, Canada, Denmark, Sweden, Australia, and the United States.

In the same token, there were 35 poster presentations from the Philippines, Korea, Canada, Sweden, Australia, Denmark, and the United States. Topics included patient flow in PACU, clinical issues, practice, and research, creation of models and standards, tools and software application for pain management.

The Business of ICPAN

ICPAN business was discussed and conducted during the biennial general meeting at the conference. Presentations were given by ICPAN Board members, and the newly elected 2017-2019 ICPAN Board members were announced. See ICPAN’s Web site for results at www.icpan.org.

Gathering of Nations Forum

The Gathering of Nations is one of the highlights of the conference. It is a delegate networking forum designed to discuss common clinical issues faced in the perianesthesia setting. Dr. Ellen Poole (USA) reviewed the results from the Copenhagen forum two years ago and related the results to existing literature.

Using the interactive program, Shakespeak, Bente Buch and Mette Ring (Denmark) led the global topics with interactive table discussions. Topics included PACU throughput, pain management, and management of patient’s bladder distention in PACU. The results of this robust survey will be reviewed again at the next ICPAN conference. A JoPAN article is pending.

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Closing and Invitation to Next ICPAN Conference

The closing keynote address by Jan Odom-Forren, (USA), PhD, RN, CPAN, FAAN, FASPAN, discussed postoperative patients’ follow-up using a phone application. Dr. Rob McDougal (Australia) presented his work as a Lifebox volunteer making a difference in the lives of the underprivileged. Sue Fossum closed with Nursing Advocacy and Global Implications. Finally, Dr. Joni Brady shared her highlights of the conference and an invitation to the 2019 Biennial ICPAN conference in Cancun, Mexico! 🇲🇽

CERTIFICATION

CONGRATULATIONS TO THE 2018 ABPANC CERTIFICATION ACHIEVEMENT AWARD RECIPIENTS!

This annual award recognizes departments that have achieved a level of certification with at least 75% or 100% of eligible perianesthesia nurses having earned the CPAN® and/or CAPA® certification.

Departments with 100% CPAN®/CAPA® Certification

- Hilton Head Hospital – PACU
- Lowell General Hospital – Surgery Center at Drum Hill
- Oak Hill Hospital – PACU
- Tacoma General Hospital – Baker Day Surgery

Departments with 75% CPAN®/CAPA® Certification

- Amita Health Adventist Medical Center – PACU
- Cedars Sinai Medical Center – PACU
- Cone Health Alamance Regional Mebane Surgery Center
- Goshen Hospital – PACU
- Harmony Surgery Center – PACU
- Jefferson Health NJ – PACU
- Northwestern Lake Forest Hospital – Grayslake Center
- Palmetto Health Baptist Parkridge – Outpatient Surgery
- South Miami Hospital – PACU
- St. Elizabeth Hospital – PACU
- Tower Health – Reading Hospital SurgiCenter
- Tulsa Spine and Specialty Hospital – Recovery
- UPMC Hamot – PACU
- Vail Health – Pre-op and PACU 📈

Contact ABPANC

475 Riverside Drive, 6th Floor, New York, NY 10115-0089  Phone: 800-6ABPANC  Fax: 212-367-4256
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Recognizing Residual Paralysis
Improving Patient Outcomes in Patients Receiving Neuromuscular Blocking Agents

An On-Demand Webcast

FACULTY
Terry Clifford, MSN, RN, CPAN, CAPA, FASPAN
Manager of Perioperative Services
Mercy Hospital
Portland, Maine
Scott Groudine, MD
Professor of Anesthesiology & Surgery
Albany Medical Center
Albany, New York

Visit www.ASPAN.org/Education/ASPAN-Modules-On-Demand to learn and earn free CE.

Component Education Program

October 6-7, 2018 Pennsylvania Association of PeriAnesthesia Nurses (PAPAN) will hold its annual PRIDE conference at the Hershey Lodge and Conference Center in Hershey, PA. Attendees have the option of registering for either day or both days. Visit PAPAN’s Web site at www.papanonline.org or contact PAPAN President Rebecca Hartley, rdhartle@comcast.net.

October 5-7, 2018 Rocky Mountain PeriAnesthesia Nurses Association (RMPANA) will hold its 20th annual Retreat in the Rockies. It will be held at the YMCA of the Rockies in Estes Park, Colorado. For more information, visit the RMPANA Web site at www.rmpana.org.

LIVE IN-PERSON SEMINARS

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<th>Topic</th>
<th>Date</th>
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<tbody>
<tr>
<td>Foundations of PeriAnesthesia Practice</td>
<td>August 25, 2018</td>
<td>Atlanta, GA</td>
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<tr>
<td></td>
<td>November 10, 2018</td>
<td>Westford, MA</td>
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<td>Pain Management in the PeriAnesthesia and Critical Care Settings</td>
<td>August 4, 2018</td>
<td>Philadelphia, PA</td>
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<td>Pediatrics: Little Bodies, Big Differences</td>
<td>September 29, 2018</td>
<td>Little Rock, AR</td>
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<td>PeriAnesthesia Certification Review</td>
<td>August 11, 2018</td>
<td>Arlington Heights, IL</td>
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<td>August 11, 2018</td>
<td>Louisville, KY</td>
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<td>August 18, 2018</td>
<td>Fresno, CA</td>
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<td>August 18, 2018</td>
<td>Overland Park, KS</td>
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<td>September 22, 2018</td>
<td>Baltimore, MD</td>
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<td>September 22, 2018</td>
<td>Fishkill, NY</td>
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### LIVE WEBCASTS

#### FULL-DAY PROGRAMS

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<tr>
<td>PAIN MANAGEMENT IN THE PERIANESTHESIA AND CRITICAL CARE SETTINGS</td>
<td>October 20, 2018</td>
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<tr>
<td>PEDIATRICS: BEYOND THE BASICS</td>
<td>September 8, 2018</td>
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<tr>
<td>PEDIATRICS: LITTLE BODIES; BIG DIFFERENCES</td>
<td>November 3, 2018</td>
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<tr>
<td>PERIANESTHESIA CERTIFICATION REVIEW</td>
<td>August 25, 2018</td>
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<tr>
<td>PERIANESTHESIA CERTIFICATION REVIEW (3 Parts)</td>
<td>October 3, 10 and 17, 2018 WEDNESDAYS</td>
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<tr>
<td>PERIANESTHESIA PATHOPHYSIOLOGY AND ASSESSMENT: A SYSTEMS APPROACH</td>
<td>September 22, 2018</td>
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<tr>
<td>PERIANESTHESIA STANDARDS AND IMPLICATIONS FOR PRACTICE</td>
<td>October 27, 2018</td>
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<tr>
<td>REFRESHING YOUR PERIANESTHESIA PRACTICE</td>
<td>October 13, 2018</td>
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<tr>
<td>SAFETY BEGINS WITH US</td>
<td>August 18, 2018</td>
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<tr>
<td>SURROUNDING YOUR PRACTICE WITH EXCELLENCE: LEGAL ISSUES, STANDARDS AND ADVOCACY</td>
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#### HALF-DAY PROGRAMS

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<td>FOUNDATIONS OF PEDIATRIC PERIANESTHESIA CARE</td>
<td>September 23, 2018 SUNDAY</td>
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<tr>
<td>PERIANESTHESIA ESSENTIALS I</td>
<td>August 12, 2018 SUNDAY</td>
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<td>PERIANESTHESIA ESSENTIALS II</td>
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<td>PERIANESTHESIA ESSENTIALS III</td>
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<tr>
<td>PERIANESTHESIA ESSENTIALS IV</td>
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<td>PERIANESTHESIA ESSENTIALS V</td>
<td>November 4, 2018 SUNDAY</td>
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<td>PERIANESTHESIA FOUNDATION</td>
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#### TWO-HOUR PROGRAMS

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<td>ERAS: WHAT YOU NEED TO KNOW FOR ENHANCED RECOVERY AFTER SURGERY</td>
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<tr>
<td>OBSTRUCTIVE SLEEP APNEA IN THE ADULT PATIENT: PUTTING THE PRACTICE RECOMMENDATION INTO PRACTICE</td>
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<tr>
<td>PREVENTION OF UNWANTED SEDATION: PUTTING THE PRACTICE RECOMMENDATION INTO PRACTICE</td>
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