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NATIONAL ASSOCIATION OF PERIANESTHESIA NURSES OF CANADA

www.napanc.org

THE "EYE OPENER" NEWSLETTER

President's Address

From the President
Paula Ferguson

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NAPAN©

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All provincial reports are included throughout the issue, Pages 4-11.

Reminder: Please renew your membership with your provincial association to ensure your membership in NAPAN©

Second Edition of NAPAN©'s

"Standards for Practice" are now available!!! Go to: [Standards](#) on NAPAN©'s website

Order form included inside this newsletter!

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PRESIDENT'S ADDRESS: Hello PeriAnesthesia Colleagues and welcome to March, 2012...will winter soon be over? Yes, I think we've survived another one, although this was a remarkably mild winter overall, across the entire country. Other parts of the world inherited our winter this year, and have struggled with great snowfalls. But here, there are already plenty of hints of spring around us: no mountains of snow beside our driveways, occasionally milder temperatures creeping into the double digits, and one clue on my front lawn: my pussy willow tree is already in bloom (it's too early!). But let's talk about what we came here to learn: what's happening within NAPAN©! In a word: PLENTY! They say a rolling stone gathers no moss, well neither does NAPAN©. So sit back and listen to our progress since our last newsletter. First of all, as you know the **Second Edition** of the **Standards for Practice** was launched this past October, and is currently being translated into French. We anticipate the launch of the French version by May, so watch our website for this publication. To order your own copy of the Standards, in either English or French, please use the link to the [order form](#) here and further inside this newsletter.

Our next **conference**, the 11th National, is being hosted by ANSPAN in **Dartmouth Nova Scotia** from **October 19-21, 2012**. The program is nearly complete and registration will open May 1, 2012 on the NAPAN© website: please watch for this date and don't miss out on Early Bird Registration. For more information, visit www.napanc.org and look under "Conference" for "2012 11th Annual National Conference".

Next, YES!!! We will be sponsoring **Bursaries** to this conference again. One lucky registrant from each of the 9 Provincial Associations will be selected for this award and will be given a complementary conference registration. Again, look under "Conference" for "NAPAN© Bursary 2012 Conference" for requirements and the application form.

And now..... drum roll please.....! The BIG news: we have signed an agreement with the **Canadian Nurses Association** to proceed with **Certification**. It is official! We will begin this year to develop this examination, and we will be the 20th specialty to do so. On PeriAnesthesia Nurses Day, February 8, 2012 (how appropriate was that?), I signed on behalf of the entire Board of NAPAN© and submitted the "**Memorandum of Understanding**" (MOU) between NAPAN© and the CNA to seal the deal! But first we must raise funds to support our 50 volunteers who will donate their time and expertise to this project. Our goal is \$25,000. If every PeriAnesthesia nurse in Canada gave just a toonie, we would meet our goal. Won't you help us raise funds to support our hardworking volunteers? Please use this form: [Donor Pledge Form for Certification](#) to send in your cheque for \$2 (or more if you wish) to the NAPAN© office (address on the form). And encourage your colleagues to do the same!

Other suggestions for fundraising include setting up a piggy bank at work and encouraging deposits of loose change, asking for support from your Anesthesia departments, or having a bake sale in support of Certification. Here at NAPAN© we are approaching our industry partners, those who support our conferences and many others. We are raffling off copies of the Standards and all of our Board members have donated to the cause already. We have [Mountie bears](#) and [t-shirts](#) for sale to support this project. Please help us in any way you can....*together we are strong!*

And now for news from across the nation....

Recent Events:

1. **All Provincial Associations** held **PeriAnesthesia Nurses Week** celebrations from February 6-10, 2012.
2. **PANAnac (Northern Alberta)** recently held a workshop in Edmonton, on Feb 11. See what PANAnac is up to at: www.pananac.net
3. **PANAsac (Southern Alberta)** recently hosted a workshop on March 6. Watch their website: www.panasac.ca for details.
4. **ANSPAN (Nova Scotia, including Newfoundland/Labrador)** recently hosted a workshop on February 20th with a presentation on "Obstructive Sleep Apnea".

Upcoming Events:

1. **OPANA (Ontario)** is holding their AGM on April 28, 2012 in St. Catharines. Watch their website: www.opana.org
2. **MAPAN (Manitoba)** is hosting a Spring workshop in Winnipeg on April 28, 2012. Follow this link: [Upcoming Conferences](#)
5. **PANBC (British Columbia)** are planning a social night to network with all our members May 31 2012. Their Conference 2012: Morgan Creek Surrey BC Nov 2012 (date TBA) For more information, visit their website at: www.panbc.net
3. **PANAsac (Southern Alberta)** is hosting several Education sessions: mark your calendars for April 18 and June 13, 2012. Watch their website: www.panasac.ca for details.
4. **PANGS (Saskatchewan)** will be hosting their Conference and AGM in Moose Jaw on September 22, 2012. Info will be available on the [NAPAN© website](#).
5. **QPANA (Quebec)** are hosting their conference on May 5, 2012 in Quebec City. Simultaneous translation will be available. Watch their website: info@aipaq.org for information.
6. **ANSPAN** is hosting the **National Conference: 11th annual**, will be held in **Dartmouth, Nova Scotia from October 19-21, 2012**. Watch the [NAPAN© website](#) for further information!
7. **French translation** of the NAPAN© Standards for Practice will be available soon (May 2012). Watch www.napanc.org for further information.

In closing, I would like to thank ALL of you for celebrating **PeriAnesthesia Nurses Week** this past February 6-10, 2012. For those of you who didn't receive this, please find greetings and words of congratulations to you all from the NAPAN© Executive here: [Congratulations on PeriAnesthesia Nurses Week, 2012!](#)

Please keep in touch with us, and contact us anytime! info@napanc.org and watch the [NAPAN© website](#) for ongoing updates.

Your colleague in PeriAnesthesia Nursing,
Paula Ferguson, RN, MN, President, NAPAN©, 2009-12

2011-12 NAPAN© Executive/Board/Committee Chairs/Contacts Email List



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Marion Power, NS Maureen Landry, NS Marion Power, NS Laura Van Loon, SK Paula Ferguson, ON Paula Ferguson (interim)ON Paula Ferguson, ON Laura Van Loon, SK Laura Van Loon, SK Paula Ferguson, ON Paula Ferguson, ON Angie Winter, AB	Conference Co-Chair, 2012 Conference Co-Chair, 2012 Standards Co-Chair, 2011 Standards Co-Chair, 2011 Website Chair Newsletter Editor Executive Chair Fundraising Chair Nominations Chair International Conference, 2011 Certification Committee, 2009-2014 International Representative, 2012	bluenosenurse@yahoo.ca mmp.landry@ns.sympatico.ca bluenosenurse@yahoo.ca lvnloon2001@yahoo.com info@napanc.org info@napanc.org info@napanc.org lvnloon2001@yahoo.com lvnloon2001@yahoo.com info@napanc.org info@napanc.org angela.winter@albertahealthservices.ca

From the prairies of Saskatchewan, to the waters of Nova Scotia, from the mountains of British Columbia to the orchards of Ontario, NAPAN© is there!





MEMBERSHIP: 84 members

QPANA 19th ANNUAL CONFERENCE

QPANA executive members have been working hard to organize the 19th QPANA Annual Conference in Quebec City 2012. The date is approaching and more things to be accomplished.

In September 2011, the Quebec Order of Nurses (OIIQ) adopted the professional standard for continuing education. In order to conform to this new standard, since January 1st 2012, all Quebec nurses have had to participate annually in a minimum of 20 hours of continuing educational activities, which comprises at least 7 hours of accredited activities. QPANA conferences are considered to be non-accredited continuing education activities.

For the benefit of the participants to the upcoming conference, QPANA executive members are in the process to request the conference to be considered as accredited education activity. Thus, to follow up

NETWORKING FOR PERIANESTHESIA NURSES AND OTHER COLLEAGUES

In order to facilitate and to encourage networking among perianesthesia nurses and other colleagues, QPANA has just launched a Facebook page in English and in French. We would like to invite you to join us. The direct link to QPANA Facebook page is on the QPANA web site (www.aipaq.org or www.qpana.org)

Kind regards,

Thao Le, QPANA President and National Representative

ASK NAPAN©?

Q#1: How much orientation would nurses receive when cross training between pediatricss and adults?

A#1: One response: "We provided some cross training for 2 day surgery staff to work in PACU. The staff were allotted a week of days, and a class day. Unfortunately they are not scheduled frequently enough to feel comfortable, so we have not pursued this avenue again." H. Ead, Ontario

If you wish to reply to this question, please contact KathyLynn.Worthman@easternhealth.ca

NAPAN© does not feel qualified to respond since this question does not fall within our current practice standards.

Q#2: Does anyone have a procedure/protocol dealing with running a Ketamine infusion on a patient (for chronic/intractable pain) in PACU?

Please forward your protocol to kathy.jellow@rqhealth.ca

ASK NAPAN©?

NAPAN© discusses Pain Management in general terms in the Standards for Practice in Resources 4 & 5, pg 124-158.

Q#3:Resource 3 of the NAPAN© Standards for Practice, pg 115, sect. 3.5.1 states "Two Registered Nurses, both competent in Phase I level of care, must be present in the same room at all times where the client is receiving phase I level of care..."

The issue is in our ambulatory care setting: Patients are recovered, phase 1, following Fentanyl and Midazolam, often by 1 RN. The room is connected to the IV therapy area. There is another RN within **calling** distance. I believe that this means 2 dedicated RNs in the area-not one that is busy with other duties and patients?

A#3: NAPAN© does not support solo staffing in Phase I

A#3: "Nurses need to be within viewing distance (not calling distance), since the nurse may not be able to call out. The nurses need to be able to view/monitor other patients in the room. The 2 cases in B.C. where the patients died were in which the one nurse was busy with one

ASK NAPAN©?

patient, and didn't notice the other one who stopped breathing. In both of these cases, there was no other nurse who could see the patients (our standards dictate constant monitoring). 2 nurses need to be in the same room, unless your two rooms are totally open and visible at all times and from all angles." Contact Laurelarcher@shaw.ca with your comments.

Q#4:Do all PACUs (paediatric and adult) utilize humidified oxygen for every patient on arrival to PACU? We are trying to get rid of our humidified oxygen and just use O2 via mask or all patients (unless their care deems otherwise).

A#4: "Non-humidified oxygen is quite acceptable for short term oxygenation in a patient who does not require the moisture due to copious secretions or a new tracheostomy". If you wish to reply to this question, please contact: KathyLynn.Worthman@easternhealth.ca

NAPAN© addresses this question in the Standards for Practice in Resource 4, pg 124-47.

Website Report:

A. Updates since December, 2011:

1. Updated Provincial application forms, conference updates as requested
2. Updated Certification information page with MOU information
3. Domain (www.napan.org) renewed for 10 years with DotEasy. January, 2012.
4. PeriAnesthesia Nurses Week information updated.

B. New Additions:

1. 2012 National Conference information
2. Added interactive forms for Standards orders, one in English, one in French.
3. Added new Category, "Sponsorship Opportunities for Certification" with Sponsorship Prospectus
4. In progress: Membership login, new photo gallery, interactive order form for Sponsorship of Certification
5. Added Aseptic Surgery Forum's website under "Web Links"

Executive Report

1. PeriAnesthesia Nurses Week greeting from the NAPAN© Executive sent out February, 2012.
2. Signing of MOU on February 8, 2012 (PeriAnesthesia Nurses Day). Countersigned and available for Board circulation by Rachel Bard, Feb. 10, 2012. First deposit of \$5650 (\$5,000 plus HST) towards financial commitment for Certification sent to and received by CNA prior to deadline of Feb. 28, 2012.
3. 2nd Edition of the NAPAN© Standards officially copyrighted: \$50.
4. International Conference: Bids reviewed for next site
5. Mountie Bears and t-shirt sales advertised on website and distributed.
6. 60+ emails to Corporations/Industry partners sent regarding sponsorship of Certification
7. Contract signed with Translator for 2nd Edition of Standards, Francois Aube, Jan. 15 with deadline for translation set at April 15, 2012.



PANA-NAC

MEMBERSHIP: 47 Members

We held a Perianesthesia Symposium: February 11, 2012: 4 speakers and a lunch. This was the second Symposium, which was very well attended and a great recruitment vehicle with 49 at the event. Speakers on capnography; Trach Care; Nerve blocks and a Pain Resource Nurse Program. Planning is already in progress for next year's event.

Several great suggestions for fundraising toward certification came from our meeting:

- Paying one extra dollar for each member to the national group, which we have done
 - Using some of our funds to make a lump sum donation. We will discuss at the next meeting, but an amount of \$1000 has been suggested.
 - We have already initiated piggy banks at the University of Alberta Hospital and staff sweep loose change into the piggy at the end of the shift. (Residents and physicians are encouraged to do the same)

Respectfully submitted by Angie Winter, President, PANANac

National Conference Report, 2012

The 2012 NAPAN© Conference planning is well under way. The conference will take place at the **Holiday Inn Harbourview, Dartmouth, NS** with its spectacular views of **Halifax Harbour**, just a 5 minute ferry ride to downtown Halifax. This is the same venue that we used for the 2006 NAPAN© conference.

The dates are **Oct. 18-21, 2012**. The Standards Committee will meet at the hotel on Thurs., Oct. 18th, the NAPAN© Board meeting and Meet & Greet on Fri., Oct. 19th and then the conference and AGM on the weekend Oct. 20th & 21st. The theme has been decided "Leading the Way...in PeriAnesthesia Nursing". We are well on our way with the plans and the complete program will be available soon. The conference registration dates and fees have been determined and appear on the NAPAN© website.

Registration includes all meals, break refreshments and dinner with entertainment on Saturday, October 20, 2012. Guest tickets will be available for the Saturday evening event. Conference Hotel Room Rate is \$129.00 plus taxes per night.

Maureen Landry & Marion Power, Co-chairs of the 2012 NAPAN© Conference Planning Committee



Canada: Our true north strong and free!

PeriAnesthesia Nurses Group of Saskatchewan



MEMBERSHIP:

PANGS members have been enjoying the mild winter on the prairies this season. The Regina Qu'Appelle Health Region celebrated Perianesthesia Nurses Day on February 8, 2012 with posters around the PACU unit and muffins for the nurses.

The executive met March 5, 2012 via Skype. Discussion is ongoing about the PANGS Conference and AGM in Moose Jaw on September 22, 2012. We will also be discussing funding options for the NAPAN© Conference & AGM in Dartmouth, Nova Scotia this coming October.

PANGS will be meeting May 1st at the Annual Members Links Night at the SRNA Conference and AGM in Regina, Saskatchewan.

The SRNA is changing their Transfer of Medical Function categories to Specialty Practice Competencies in 2013. This will impact the TOF skills that PACU Nurses currently use in their practice

Respectfully submitted,
Kathy Jellow, President, PANGS

Ontario PeriAnesthesia Nurses Association



MEMBERSHIP: 205 members

A very warm greeting to you from OPANA .We look forward to spring with longer days and the hope that warmer weather surely will make its way soon across the country. There are presentations located on our website www.opana.org. We are still waiting for a couple and will launch them once received.

OPANA hosted its Board meeting on March 2nd at the RAO building in Toronto and with the opportunity to call in for those who could not attend in person. We have two PeriAnesthesia nurses who work in an oral surgeon's office and have an expressed interest to join the OPANA board after attending our December BOD meeting.

OPANA will propose to make a new position for Director of Free Standing Clinics which we will move to motion for approval at our upcoming AGM on April 28th. We will have a packed agenda at our AGM and we are just working out the details for our speaker and topic for the event. The AGM will take place at the 13th Street Winery on April 28th and we are looking forward to this gathering.

OPANA will hold a raffle at the AGM which will include the NAPAN© Standards. Profits of that raffle will go towards Certification and be donated back to NAPAN©.

Planning has begun for our 2013 Spring Inspirations conference in Ottawa. Keitha Kirkham is Conference Chair and is presently reviewing different venues which will be decided shortly to see what venue suits best. We are excited about going to Ottawa in the spring when the tulips will be in bloom. Lots of work but we are confident we will pull off another great conference. Stay tuned as OPANA's web site will provide information as it becomes available www.opana.org. Our current membership is approximate around 205 and growing. We also continue to generate revenue through the sale of our standards.

Respectfully submitted,
Marianne Kampf,
Past-President, OPANA and NAPAN©
Board Representative



Article: Effect of Perioperative Statins on Death, Myocardial Infarction, Atrial Fibrillation, and Length of Stay: A Systematic Review and Meta-analysis.

Vineet Chopra, David H. Wesorick, Jeremy B Sussman, Todd Greene, Mary Rogers, James B Froehlich, Kim A Eagle and Sanjay Saint. Arch Surg, 147 (2): 181-9 (2012).

Purpose: To assess the influence of perioperative statin treatment on the risk of death, myocardial infarction, atrial fibrillation, and hospital and intensive care unit length of stay in statin-naive patients undergoing cardiac or noncardiac surgery. MEDLINE via PubMed, EMBASE, Biosis, and the Cochrane Central Register of Controlled Trials via Ovid. Additional studies were identified through hand searches of bibliographies, trial Web sites, and clinical experts.

Method: Randomized controlled trials reporting the effect of perioperative statins in statin-naive patients undergoing cardiac and noncardiac surgery were included. Two investigators independently selected eligible studies from original research published in any language studying the effects of statin use on perioperative outcomes of interest. Two investigators performed independent article abstraction and quality assessment. Fifteen randomized controlled studies involving 2292 patients met the eligibility criteria. Random-effects meta-analyses of unadjusted and adjusted data were performed according to the method described by DerSimonian and Laird. Perioperative statin treatment decreased the risk of atrial fibrillation in patients undergoing cardiac surgery (relative risk [RR], 0.56; 95% CI, 0.45 to 0.69; number needed to treat [NNT]).

Findings: In cardiac and noncardiac surgery, perioperative statin treatment **reduced the risk of myocardial infarction** (RR, 0.53; 95% CI, 0.38 to 0.74; NNT, 23) but not the risk of death (RR, 0.62; 95% CI, 0.34 to 1.14). Statin treatment **reduced mean length of hospital stay** (standardized mean difference, -0.32; 95% CI, -0.53 to -0.11) but had no effect on length of intensive care unit stay (standardized mean difference, -0.08; 95% CI, -0.25 to 0.10).

Conclusions: Perioperative statin treatment in statin-naive patients reduces atrial fibrillation, myocardial infarction, and duration of hospital stay. Wider use of statins to improve cardiac outcomes in patients undergoing high-risk procedures seems warranted.

PERIANESTHESIA NURSES WEEK, 2012

February 6-10

HOW DID YOU CELEBRATE?

Greetings were sent from NAPAN©'s Executive: [Click on this link](#) . We have heard from some that food was served, and other interprofessional colleagues helped you to celebrate (OR nurses, Anesthetists).

Some kicked up their feet and danced: Watch this video: [Footloose](#)

In St. John's, Newfoundland, PeriAnesthesia Nurses week was celebrated at the adult sites, Eastern Health. Nurses organized onsite activities such as breakfasts, pot luck meals and catered meals. Cakes were provided by management. Some nursing units sent gifts of food and/or cards to their colleagues in other PeriAnesthesia departments. One unit organized a secret PAN (Perianesthesia nurse)-PAL gift exchange which went on during the week. Several Anesthesiologists provided gifts for a prize draw. Our specialty was well celebrated.



Cake was served in **Bathurst, New Brunswick:**

TELL US YOUR "STORIES FROM THE FRONT (front-line)"! SHARE IMPORTANT INFO, EXPERIENCES AND MESSAGES WITH PERIANESTHESIA COLLEAGUES.

Contact info@napanc.org if you have a story to tell and we will publish it in a future edition of this newsletter!

TELL ME THE PACU ISN'T A CRITICAL CARE UNIT????

Adapted from Rebecca Hartley's "Why I Love My Job", Lancaster PA

Recently, I had the opportunity to care for a severely ill patient that experienced a perforated bowel and needed to come to PACU, since no beds were available in the ICU. PACU Nurses are accustomed to this scenario: extremely ill patients requiring post operative critical care, with unstable hemodynamic, respiratory, cardiac and neurological systems. I personally love these challenges.

The patient arrived with a very low BP and high rate and concentration of vasopressors and of course on a ventilator....sound familiar? But thankfully the Anesthesiologist had provided generous fluids in the Operating Room (5000cc)...and still the patient only produced 40 ml. of urine output.....not nearly enough and a poor sign, but the urometer told the tale of this sick patient.

The Anesthesiologist looked exasperated as they guided the patient into PACU and I asked, "Are you OK?...Can I get you anything?"... "Don't worry we'll get through this together!" I, with the assistance of fellow team members, nurses and assistants, a Respiratory Technologist, hooked the patient to the monitors, transducers, a convective warming system and a ventilator in a calm and deliberate manner....I think we sometimes can do this in our sleep (and probably have). Report was given and taken and I got down to the task at hand.....making the patient better. Titrate this med, add that med and take that one away...as we traveled the rollercoaster of trial and trial again to care for this septic patient.

An influx of doctors gathered at times around the bedside offering suggestions, writing orders and collaborating with me on the patient's care. I offered input and suggestions that were listened to by the physicians at hand, as I continued conscientious and judicious fluid management along with inotrope agents to help the patient. In desperation, the dreaded Levophed was added. You've heard of the saying, "Levophed- Leave 'em dead!" ? That outcome was NOT an option, I was determined!

Soon, the patient stirred...as I spoke to the patient, her eyes opened and she shook her head yes or no to questions. "No pain" ...that's good. "You have a breathing tube in, you've had surgery and you're in the recovery room". (If I only had a dollar for every time I've said that to a patient.) The patient's response was positive news, as I continued the juggle of inotropes and fluids. Additional consultants we called, cultures were drawn and antibiotics were given. The patient's blood pressure was improving! The collaboration and treatment plan seemed to be working!

But.. don't forget the family. I always say, "It is easier on the blissfully unaware patient than on the family that is waiting". Most of us have been there ourselves. It's much easier being on this end of things! Thanks to the waiting room volunteers the daughter, son-in-law and granddaughter came to the PACU. They approached the bedside, obviously distressed and scared. I introduced myself and said, "It's OK, she's awake. Please feel free to speak to her and let her know you are here." The daughter said, "I'm here Mom. I love you. Be strong." The patient responds by mouthing back at her daughter, "I love you too." The daughter turns to me and says, "What should I do now?" looking at me like a young child with eyes full of insecurity. My response is simple, "You need to take care of yourself and your family, while we take care of your Mom. She is going to need you later."

I then reviewed the care we were providing for her mom and what all the equipment was doing to help her. I knew the whole scene with all the tools of my trade were overwhelming to the average layman. The daughter looked at me with sincerity and said, "Thank you for all you are doing for my Mom." to which I responded, humbly "You're welcome." As nurses, it's often hard to take these compliments because caring for patients is just 'WHAT WE DO'. (cont'd next page)

I explained to the family that I would keep them updated and hoped to move their mom to the ICU soon. Time moved on, the epidural infusion was started as the patient's BP improved, since I didn't want the patient to be in extreme pain. Care continued, many physicians continued to visit, updates given and additional meds administered. The patient was improving.

Report was called to a friendly ICU nurse whose tone and reception showed me she too appreciated what I had done, as well as reassured me I was turning my patient's care to another person who cared. I contacted the family again and let them know about the transfer, and that it would be happening soon. The daughter stated "Please tell my Mom her favourite grandson is coming soon to see her." When I told the patient, her eyes met mine as the corners of her lips turned up, she formed a smile around the endotracheal tube, and she shook her head in acknowledgement of what I had told her.

We "packed up" the patient for transport to the ICU with the assistance of a Respiratory Technologist and assisting staff. My role in the care of this patient was nearing an end. Upon arrival to the ICU, care was transferred seamlessly, answering questions from the ICU staff. I then approached the patient and said, "Take care my dear. I hope you feel better soon." The patient opened her eyes and shook her head to respond as I held her hand and said my goodbyes. It was hard to believe our time together was ending.

I left the bedside and the ICU nurses as they too diligently hooked the patient to monitors, transducers and the ventilator...it was like the PACU admission all over again! The family was coming down the hall as I was exiting the ICU, and when they called to me by name, I briefly updated them on "their Mom". They thanked me once again.

I returned to the PACU mentally and physically drained, but satisfied knowing that I had made a difference. And knowing that my critical care skills and experience had helped me stay calm in a very uncertain situation...and there are many more patients like this every day!. PeriAnesthesia Nursing in the PACU or Phase I phase is as unpredictable as any area one can imagine in health care: we never know what is coming through the door next. It's up to the nurses in this unit to have the knowledge and experience to care for these patients, since the life-saving care that is focussed on the patient is provided by the PeriAnesthesia Nurse, and no one else!

I love the autonomy of reacting quickly in an emergency situation, of the adrenaline rush, and the feeling of being appreciated by medical providers, colleagues and patients for knowing just what to do when a crisis ensues.

That's why I LOVE BEING A CRITICAL CARE NURSE in the PACU!

MADE IN CANADA??? OR NOT? (by the NAPAN© Executive and Board of Directors)

Recently, the 10 Canadian Regulators (our 10 provincial nursing regulatory bodies) voted to give the next version of the CRNE (RN Entrance Examination) to a American company known as NCSBN. They have 120 days to formally enter into a contract with this company, and this deadline is quickly approaching. We must contact our Colleges to urge them to revisit this decision in order to make a "Made-in-Canada" RN entry exam instead! The Canadian Nurses Association (CNA) has developed a petition in this regard. Won't you support Canadian trained nurses by signing this petition? Ask your families, friends and patients to sign up too!

Click on this link to sign the CNA petition: [Sign the petition for a Made-In-Canada RN Entry Exam](#)



International Conference for PeriAnesthesia Nurses 2013:

Dublin, Ireland

Hosted by the Irish Anaesthetic and Recovery Nurses Association (IARNA)



Watch the websites: www.napanc.org, www.icpan.info and www.iarna.ie for further information

EXCITING NEWS!!! NAPAN© is proud to offer again the generous "**NAPAN© Bursary for Conference Registration**" for the 11th National PeriAnesthesia Nurses Conference, being held in Dartmouth, Nova Scotia from October 19-21, 2012. Follow this link for further information and to apply: [NAPAN© Bursary for 2012 Conference](#). For further information regarding this conference, see conference information further in this newsletter or on our website: www.napanc.org. Deadline for applications: **June 30, 2012.**

Fundraising Committee Report



Watching our money grow!

Charitable Status (for receipts for Income Tax purposes). We have just heard from Industry Canada that our request for the changes to the NAPAN© constitution have been approved and now we can apply once again to Revenue Canada for charitable status.

Certification

Donations are eagerly anticipated for our Certification Exam preparations. Use this form:

[Certification Donor Form](#)

Our goal and commitment to the Memorandum of Understanding (MOU) with the CNA is to have the total of **\$25,000** collected by December 31, 2012 for travel, meals and accommodation for the volunteer writers.

Fundraising Ideas

It will take **all of us** to put on our thinking caps and become fundraisers during 2012 for success of the Certification sponsorship challenge. PANANac has offered \$1000 towards the certification fund. They are also giving \$1extra from every membership. A piggy bank has been displayed in one PACU for loose change which will go towards Certification. Corporate sponsorship is being recruited from over 70 companies. T-shirts and Mountie bears are for sale (Order Forms: [T-shirts](#), [Mountie Bears](#)).

Offer your suggestions by emailing info@napanc.org or the Chair of the Fundraising Committee: [Laura Van Loon](#) (email).



PLEASE SUPPORT CERTIFICATION FOR PERIANESTHESIA NURSES OF CANADA TODAY!



MEMBERSHIP: 57 members registered for the 2011 – 2012 year including 5 affiliate members from Newfoundland and 3 members from the USA. We are currently completing a membership drive for 2012-2013. June 20, 2011 was our first meeting for 2011-2012 with 7 in attendance. Our guest Speaker was Angeline Comeau RN BN – “The Power of the Pacemaker”. Our meeting dates for 2011-2012 were chosen. September 19, 2011 – Fourteen people attended. Guest speaker was Dr. Tracey Kok who spoke on “Perioperative Temperature control”. The successful applicant of the 2011 NAPAN© bursary was Marion Power. November 21, 2011 was the first meeting held since returning from the NAPAN© and ICPAN conferences. ANSPAN had 6 members in attendance who shared information from the events. Marion Power gave a brief introduction and overview of the 2nd Edition of our Standards. The standards will continue to be discussed at our weekly Wednesday morning education sessions throughout the year. February 20th was our first meeting of 2012. Dr. Austin Lamb spoke on “Obstructive Sleep Apnea”. We had eleven members present. Our AGM will be held during an evening meeting in May. The date is pending due to speaker availability. It was decided to forgo a formal Education Day due to hosting the upcoming NAPAN© conference in October 2012. **We are both pleased and excited to be hosting the 2012 NAPAN© Conference October 18-21, 2012.** See www.napanc.org for further information. Submitted by Maureen Landry, President ANSPAN.

PeriAnesthesia Nurses of BC

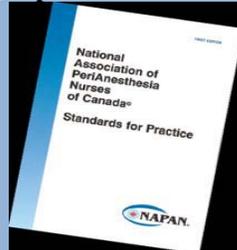


PANBC is growing strong and so far has had a great year. Our paid membership to date for 2012 has reached 80. This is fantastic news. We are growing slowly and are gathering support in BC. Our provincial contract is up in April. It will be an interesting spring. Our union is asking for safe staff nurse/patient ratios. It is nice to see that in the PACU's across BC already maintain these standards thanks to NAPAN© and ASPAN standards. Our standards are holding strong and are being supported by our unions. Thank you to all the nurses who

PANBC cont'd promote safe patient care. We are planning a social night to network with all our members May 31 2012. It will be the first one we have held and are quite excited about it. PANBC is also busy fundraising for our next educational day. The Anesthesia society is being very supportive to date, so we are hopeful that with their support we can have a sustainable future and ongoing learning events. At the AGM we named our new Executive. See our website: www.panbc.net for this information. In order to plan for the **Nov. 3rd Educational day**, we are meeting monthly by SKYPE. It will be called “Climbing the mountains of safe patient care”.

Submitted by Lorna Jensen, President, PANBC

Standards Committee Report



[Standards Order Form \(English\);](#)

[Standards Order Form \(French\)](#)

The Standards Committee has been successful in selling Standards for Practice 2nd Edition. With the special promotion at the National and ICPAN conferences for our members, we sold 99 documents and gave one away to the winner of the annual Standards Survey. Congratulations to Chris Gogas of Sarnia ON who was the winner and had her name and picture in the Eye-Opener! Since the conferences,

Standards Committee Report cont'd

we have sold an additional 71 copies, totaling 170 to date.

Translation of the Standards to French:

Francois Aube is currently underway translating the English Standards for Practice and this will be completed on **April 15th**.

Donations for this version (Fr.) will be accepted until April 15, 2012. Use this form: [Standards Donation Form.](#)

Committee and Meetings

Committee members are now being recruited to begin the **3rd edition** and a meeting arranged for Oct. 18th in Halifax. Our focus will be on the addition of a

Pediatric Resource. We need to recruit members with an interest in this topic from children's' hospitals. There are no Pediatric Standards currently available in Canada. Co-Chairs: Marion Power & Laura Van Loon

Certification Committee Report

The Memorandum of Understanding (MOU) with the CNA has now been revised, approved and signed by NAPAN© President (on PeriAnesthesia Nurses Day, **February 8, 2012**), which includes a commitment of \$25,000 in fundraising efforts to support costs. Corporate sponsorship is being sought. Other fundraising efforts are underway.

Those who have volunteered to assist with Certification Exam development will be contacted by CNA's exam development company, ASI no later than September, 2012. Goal for first Exam: 2014. Please contact info@napanc.org for additional information. Respectfully submitted, Paula Ferguson, Chair.



Manitoba Association of PeriAnesthesia Nurses

On February 8th we celebrated Perianesthesia Nurses Week with a presentation on the “Eggciting World of Fertility Nursing” presented by our own Joan Toms of the Heartland Fertility Clinic. It was a hugely interesting presentation on an area of nursing that is foreign to most, but of interest to so many. We followed up with treats and socializing. An enjoyable evening for our week of celebration. I heard some interesting stories from sites that celebrated in some unique ways.

Plans are well underway for our workshop on April 28th. The theme is “Growing our Perianesthesia Nursing Knowledge”. We will be offering a range of topics such as renal vascular access, cochlear implants, telehealth and a keynote from our CNO of Nursing for Manitoba.

Our AGM is slated for May 16, 2012. We usually have a very small turnout and no exhibitors so fundraising at this event is not feasible.

Membership drive is ongoing for February and numbers should be available in early March.

Respectfully submitted by
Fran Coates, President

VACANCIES & NOMINATIONS FOR NAPAN©

NAPAN© is currently accepting nominations for the following important position, which reports to the Executive Committee:

Newsletter Editor: Training and mentorship will be provided.

NAPAN© is also accepting nominations for the following Executive committee positions:

Secretary-Elect, Treasurer-Elect

The successful applicants will all advance to the office of Secretary and Treasurer in 2013.

Please review these job descriptions by going to:

[Job Descriptions for Executive Positions](#)

NAPAN© requires a minimum of 4 members from 4 jurisdictions represented on the Nominations Committee.

Nomination forms: [Newsletter Editor](#)
[Executive Positions](#)

Place your advertisement for non-time sensitive job postings, educational sessions, conferences or workshops in this newsletter. Contact info@napanc.org

Donations are being accepted towards the translation and printing of the Standards for Practice, 2nd ed. into French. Donors will be recognized with the addition of their name on the outside back cover of this book.

Use this [Standards Donor Pledge form](#). Deadline prior to printing: April 15, 2012.



PeriAnesthesia Nurses of New Brunswick & Prince Edward Island (PANNB/PEI)

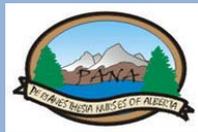


Emails were sent out reminding everyone about PeriAnesthesia Nursing week encouraging them to find time to do something for themselves. In Bathurst we celebrated by having treats provided each day and sharing with other members of the surgical suite.

Our membership drive is in place but to date response has been low. We continue to seek a venue and speakers for our annual meeting and education day in September. Presently we have two nurses and one surgeon who are willing to do presentations. It has been decided that we will make this a Friday evening and Saturday event.

One of our greatest challenges is the lack of funding for nurses to attend education days, yet it is so necessary to keep abreast in our workplace.

Respectfully submitted,
Laura McNulty, President PANNB/PEI



PeriAnesthesia Nurses Association - South Alberta Chapter (PANAsac)

remains committed to providing educational sessions that are relevant to our area of practice, as well as topics with the potential of enhancing your lifestyle. Our goal is to strive for the continued success and excellence of PANAsac and its members. Topics we have recently offered include:

- End Tidal CO2 Monitoring (Oridion – Tracy Boivin-Oldale RN, BN – PACU Nurse)
 - “Delayed Emergence” (Dr. Reuben Eng – Anesthesiology Resident)
 - Exposure to Blood and Body Fluids (Dr. Molly Shing - Anesthesiologist)
- Future topics include:
- Air Transport RN with STARS – Shock Trauma Air Rescue Society
 - Worms Eat My Garbage (in celebration of Earth Day) – sorry, this will not be offered in WebEx format
 - Callenetics!
 - Cancer Burden in Alberta from leading Cancer Researcher Dr. Christine Friedenreich
 - Low Dose Ketamine Infusions

Our AGM will be held on **March 6, 2012** where we will adopt a revised version of the Constitution and Bylaws for PANAsac.

Membership dues will be renewed at this time. To date, we have 39 members and growing. Our meetings are gaining in popularity due to the accessibility of the WebEx teleconferencing along with the

Educational component. It is our vision to hold another conference in Alberta later this year or early in 2013 but for now our focus is securing more members.

Respectfully submitted, Dory Glaser,
President

REMINDER:

Join your provincial organization and automatically become a member of NAPAN©.

Volunteers Required! Non-profit associations depend on volunteers to keep momentum going. PeriAnesthesia Nursing will grow with strength in numbers!

This newsletter (the Eye Opener) was named for the Cree word, “napan” which means “Eyes open”.

NAPAN© (National Association of PeriAnesthesia Nurses of Canada) was selected because the acronym “napan” (Eyes open) is an indication of our foresight and vision, and relates to the work that we do professionally.

The NAPAN© logo is in the shape of a large “C” (for Canada) which resembles an eye with the maple leaf as the pupil of the eye.

NAPANc is an Associate Interest group with the Canadian Nurses Association (CNA) and strives to maintain the high standards required in order to maintain the Associate group status.



**CANADIAN
NURSES
ASSOCIATION**

NAPAN©'s 11th Annual National Conference:

October 19-21, 2012

"Leading the Way ... in PeriAnesthesia Nursing"

Holiday Inn Harbourview, Dartmouth, Nova Scotia
([Contact Holiday Inn Harbourview](#))

Conference Hotel Room Rate: \$129.00 plus taxes per night

Conference Registration opens May 14, 2012

HOSTED BY:



Association of Nova Scotia PeriAnesthesia Nurses



CONFERENCE REGISTRATION DATES and FEES:

Early Bird: *May 14 - June 30, 2012*

Member: \$395

Non-member: \$425

Regular Rate: *After June 30, 2012*

Member: \$425

Non-member: \$450

*****Registration includes all meals, break refreshments and dinner with entertainment on Saturday, October 20, 2012.**

Guest tickets will be available for the Saturday evening event.

COMPLETE PROGRAM WILL BE AVAILABLE SOON.

For further information, email: [NAPAN© National Conference 2012](#)



Certification Sponsorship 2012

NAPAN® wishes to thank the following Sponsors, Supporters and Donors who have given so generously in support of Certification Examination expenses for PeriAnesthesia Nurses of Canada

Bronze Sponsors:

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 Manitoba Association of PeriAnesthesia Nurses (MAPAN)

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Dawson & Associates Marketing Services (Printing and Graphics), Waterloo, Ontario
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 Paula Ferguson
 Manitoba Association of PeriAnesthesia Nurses (MAPAN)
 PeriAnesthesia Nurses of Alberta - South Alberta Chapter (PANA-SAC)
 PeriAnesthesia Nurses from the Health Science Centre, St. John's, Newfoundland
 PeriAnesthesia Nurses Group of Saskatchewan (PANGS)
 PeriAnesthesia Nurses of New Brunswick and Prince Edward Island (PANNB/PEI)
 Jean Spotowski
 Laura Van Loon

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Please give generously today! [NAPAN® Certification Donor Form](#)

[NAPAN® Certification Sponsorship Form \(for Corporate Sponsorship Information and application\)](#)

THANK YOU FOR YOUR ONGOING SUPPORT OF PERIANESTHESIA NURSES OF CANADA!