

August 2009

Volume 19, Issue 2

# EyeOpeners

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SOUTH CAROLINA ASSOCIATION OF PERIANESTHESIA NURSES

## SCAPAN MISSION

The mission of the South Carolina Association of Perianesthesia Nurses is to promote excellence in all aspects of Peri-anesthesia nursing practice through education, specialty certification, nursing research and ASPAN standards in an environment that is respectful of others and adaptive to changes.

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## Letter From The President

Wow! 2009 is almost over, and I will only be president for 3 more months! Where has the time gone?! What has SCAPAN accomplished?

If you have been keeping up-to-date with the web site and the newsletters, you know SCAPAN has done so much! WE have attended ASPAN's National Conference, hosted several district educational offerings, collected toiletry items for the homeless shelters, and reviewed policies, just to name some of the stuff. We are currently planning the fall conference in Greenville and gearing up to attend the ASPAN Component Development Institute in Portland, Maine.

What can you do with SCAPAN? How can you contribute your expertise? How can you make a difference? SCAPAN NEEDS volunteers!! There are multiple

SCAPAN board positions available. Your district needs your help! Even if you cannot commit to a 2 year board term, there are multiple volunteer positions with SCAPAN and within the districts. Contact any member for details!

With that being said,

### **YOU CAN MAKE A DIFFERENCE!**

YOU are what keeps SCAPAN going. You are full of ideas that SCAPAN needs! With you, SCAPAN can strive for the best. Become an ACTIVE and participating member of SCAPAN, and help us become the best! The more volunteers SCAPAN has, the better WE are!

An immediate need SCAPAN has is approaching fast. Nancy Z., fall conference coordinator, is in

need of help coordinating the fall conference in Greenville, SCAPAN committees need co-chairs and members, and SCAPAN programs need promotion. With so much going on, I'm sure you can find a way to volunteer and promote SCAPAN!

Come to the fall conference to find out more ways you can volunteer while earning contact hours. There will be speakers on multiple pediatric topics, adult topics government affairs, including a SC representative, the flu, pain management and ethics. The meet-and-greet will take place on Friday night, and SCAPAN will be collecting toys for Shriners Hospital for Children. During the SCAPAN lunch meeting, SCAPAN will be voting on new board members! We NEED YOU to run for

Continued on next page

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**Letters to the Editor**

Please send all correspondence to SCAPAN, PO Box 13976, Charleston, SC 29422, or email letters to [scswete@hotmail.com](mailto:scswete@hotmail.com) or [contact.scapan@gmail.com](mailto:contact.scapan@gmail.com) using 'letter to the editor' in the subject line. We look forward to hearing from YOU!

**Letter From The President**

**...continued**

President Elect/Vice President. Or maybe you would like to serve on the board of directors. If you're good with money, you NEED to run for treasurer! SCAPAN meets about 4 times a year, and most correspondence is done via email. I know you want to make a difference and you would do a great job serving! Encourage your friends and co-workers to run for a board position!

**YOU CAN MAKE A DIFFERENCE!! ♣**

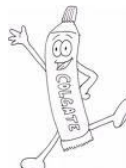


**Community Service Projects 2009**

*SCAPAN is collecting toys for Shriners Hospital for Children. Please bring toys to the fall conference October 10<sup>th</sup>. See flyer (to be mailed mid-August) for details.*



SCAPAN is encouraging all members to collect small toiletry items from hotel stays (or you can buy them) and donate the toiletries to homeless shelters in your area! Let SCAPAN know how many bottles you donate!



**√ It OUT!!**

Check out ASPAN's Website! You can register for conference, fill out forms electronically, learn about Government Affairs, and much more! You have to be logged-in to see the full site!

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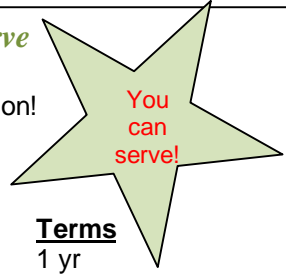
**SCAPAN Email**

[contact.scapan@gmail.com](mailto:contact.scapan@gmail.com)

CONGRATULATIONS  
to  
**Janelle Noell**  
for winning the FREE  
ASPAN Membership  
for 2009, compliments  
of SCAPAN!

SCAPAN WINNER  
Congratulations to  
**Kathy Campbell**  
for winning the free fall  
conference registration  
and one night hotel fee  
Compliments of  
SCAPAN!!

*SCAPAN -Willingness to Serve*  
**October 2009 – 2010**  
See Website for Forms Submission!



The following positions are available:

**ELECTED POSITION:**

	<u>Terms</u>
_____ <b>Vice President / President Elect</b> (Followed by 1 yr each as President and Immediate Past President)	1 yr
_____ <b>Treasurer</b>	2 yrs
_____ <b>District Director (3 positions open)</b>	2 yrs

**SCAPAN COMMITTEE MEMBER:**

_____ By Laws / Policy and Procedure	1 yr
_____ Education / Research	1 yr
_____ Government Affairs / Professional Liaisons	1 yr
_____ Finance	1 yr
_____ Nominating / Elections	1 yr
_____ Membership / Marketing/PR	1 yr

**RED positions MUST be filled in October! You should serve!**  
**Contact ANY SCAPAN board member for details or to express**  
**YOUR interest!!**

**JONI'S NAPPA CABBAGE SALAD**

- 1 LARGE HEAD NAPPA CABBAGE SLICED THIN
- 4 SPRING ONIONS SLICED
- 3 PACKS OF RAMEN NOODLES (DISCARD FLAVOR PACKETS)
- 1 CUP SUNFLOWER SEEDS
- 1 ½ CUPS PECANS, BROKEN UP

**DRESSING:**

- 1 CUP OIL
- ½ CUP WHITE VINEGAR
- 1 CUP SUGAR
- 2 TABLESPOONS SOY SAUCE

Melt 1 stick of butter; crush noodles while still in package. Brown the noodles till crispy, watching carefully so as not to burn. Add sunflower seed and pecans and continue to brown. Let cool thoroughly. Add mixture to cabbage and onions. Add dressing when ready to serve.

From the kitchen of Joni Suggs ♣

**Easy Chocolate Delight**  
**(\*Prep & assembly 20" or less)**

- (1) 18 oz package of sandwich cookies (Oreos or similar)
- (2) Large packages dry instant pudding mix (! use chocolate but pistachio, vanilla taste great too!)
- (1) Large container of Cool Whip (or similar)
- (1) 10 oz bag Nestle Crunch, Butterfinger, Kit Kat (or personal choice)
- (l) 9 x 12 pan or a 2 quart serving bowl

1. Crush cookies in paper bag or large plastic bag and spread half of them in pan or bowl
2. Prepare pudding mix as directed on box and spread half on top of crushed cookies
3. Crush candies and spread half on pudding
4. Spread half of Cool Whip\*\* on top of candies
5. Repeat steps 1 thru 4
6. Refrigerate 30" then ready to serve! Enjoy!

\*\* May mix 1 tsp Crème de Menthe or Crème de Cocoa in Cool Whip prior to spreading.

From the kitchen of Alisa Shackelford ♣

## Coastal District Report

### Notes from the Coast:

The Coastal chapter has been busy this summer working on our upcoming **“Summer School Session.”** We have a great ½ day of education and fun planned with a variety of speakers. Get 4 Contact Hours, support a local school (by bringing in some school supplies as our service project) and spend the rest of your weekend enjoying the fun and sun in Charleston, SC. Visit the beaches or tour downtown after supporting your professional organization and improving patient care by maintaining your knowledge with the most current evidence based information on the care of patients experiencing surgery. See attached flyer and mark your calendars now for a productive / fun weekend.



For more information contact: Dianne Jenkins, President CAPAN Chapter @ 843-709-1641 or by email @ [Dianne.jenkins@rsfh.com](mailto:Dianne.jenkins@rsfh.com)

Flyers have been mailed to all listed SCAPAN members and flyer is on page 8, registration on page 11. ♣

## Central Midlands District Report

Upcoming meetings and educational opportunities TBA ♣

## Piedmont District Report

Please contact Nancy Boyd at [nboyd@ghs.org](mailto:nboyd@ghs.org) for more details. ♣

### Educational Opportunities and Dates to Remember

**August 15** in Charleston, Summer School for the Perianesthesia Nurse

**September 11-13** Component Development Instituted in Portland, Maine

**October 10** in Greenville, SC  
SCAPAN Fall Conference @ Shriners Hospital for Children  
\*\*SCAPAN will be collecting TOYS for Shriners Hospital\*\*

**Nov 25** *EyeOpeners* Submission Deadline for December *EyeOpeners*

**Nov 30** Postmark Deadline to nominate candidates for the Excellence in Clinical Practice Award and the Award for Outstanding Achievement

\*\*Check SCAPAN.com for more dates\*\*





## Governmental Affairs Update...South Carolina ASPAN GA Liaison

Alisa Shackelford, RN, MBA, MA, CCRN

### Summer 2009

I suspect you are amazed as am I at the velocity of incoming information about health care in the news lately? In hindsight I had a column ready with recent updates for "reform – legislation and reimbursement" but that has all changed in the mere 2 weeks that have passed since I wrote it! I would encourage everyone to "stay tuned" to whatever media outlet – format you choose or enjoy - regarding the status of health care and legislative changes that are - will be underway.

Speaking of velocity of information, in any given week I receive ~ 5 online – hard copy periodicals, 12 emails, 5 alerts and 2 to 5 blogs from professional organizations or groups related to healthcare...ASPAN, AORN, AACN, Outpatient Surgery, OR Manager, Daily Briefing, The Advisory Board, MHAUS, AHRQ, NQF, Catholic Healthcare and others....with that in mind this issue will share some of those updates...

### TJC and the NPSG's

The Joint Commission, TJC, continues to address the National Patient Safety Patient Goals, NPSG, along with the ISMP, Institute for Safe Medication Practices. In particular, medication safety and LASA or "look alike sound alike" medications. The National Quality Forum, NQF, along with the Texas Institute for Medical Technology are sponsoring webinars (FREE – visit [www.qualityforum.org](http://www.qualityforum.org) or [www.safetyleaders.org](http://www.safetyleaders.org)) that provide a toll free call in and continuing education for nurses and healthcare professionals with national and international experts on this and other topics. One of my journals had a quiz with examples of commonly mistaken LASA's:"Which of the following addresses anxiety, nausea or itching? Hydralazine or Hydroxyzine? Using the ISMP & NQF suggestions there would be TALL MAN letters to "alert" the practitioner there is a LASA. The following are some of the

strategies they suggest to prevent LASA errors;

1. Tall Man letters: Capitalize the commonly confusing segments of the med to alert practitioners: "EPHedrine" and "EpiNEPHrine" or "HydrOXYzine" and "HydrALAzine"
2. Store LASA's separately or store only 1 strength commonly used if they are to be stored in close proximity.
3. Stick to the VERB approach: Verbalize Every Order and Read it Back (also called the VORB approach) before administering.
4. Use ALERT stickers and double check before administering.

### Patient Safety – Intraoperative Hypothermia and Surgical Site Infections, SSI's

By now your facility is part of the Centers for Medicare and Medicaid Services public reporting for the core measures and surgical site infections. We are keenly aware of the potential impact for reimbursement to facilities who demonstrate poor outcomes. Legislation will continue to develop that will impact reimbursement for hospitals and practitioners based on safety, outcomes and prevention. Furthermore, if the outcomes are poor and consistently so, it is not beyond the realm or authority of CMS to close any facility or suspend practices that do not produce safe outcomes for patients.

As part of my twice yearly performance review as a manager, surgical site infections along with :inpatient falls, VTE prophylaxis, fiscal, growth, employee, patient & surgeon satisfaction and community service are a few of the metrics for which I am held accountable. This year, continuing with our "Journey to Excellence", our facility extended some of those metrics to ALL

employees, (environmental, chaplaincy, dietary, clerical, licensed, CEO, etc.) as safety and prevention are TEAM efforts everyone is accountable for, specifically: inpatient falls, surgical site infections and VTE prophylaxis.

In a recent issue of Outpatient Surgery, hypothermia & surgical site infections were reviewed...in particular the category of "mild hypothermia." Dr. Andréa Kurz of The Cleveland Clinic Department of Outcomes Research reported that "...there is no widely accepted definition for the term "mild hypothermia" but defined it as a temperatures between 34 and 36 degrees C..." The article further reads that a "drop of 1 to 3 degrees in core body temp is relatively common in surgical procedures..." Intraoperative hypothermia develops in 3 Phases with a rapid decrease following induction to a slower linear reduction to a core plateau...." ( S. Insler, DO and D. Sessler, MD.) They further share that the body's core temperature drops most drastically in the 1<sup>st</sup> hour of surgery with the core temp being able to decrease .5 to 1.5 degrees below normal in the 1<sup>st</sup> 30".

As the core temperature of the body decreases so does its ability to defend itself against infection and to deliver oxygen to the periphery. The authors share that "mild hypothermia" can triple the risk of surgical site infection. Considering that postop hypothermia can occur in up to 93% of post op patients, this is an area that EVERY team member can contribute to a better outcome. Our patients, our ability to practice & the "bottom line" of our hospitals and practice centers depend on it.

### Government Affairs Links

Please do visit our SCAPAN website as well as the ASPAN website for

...Continued on next page

## Governmental Affairs Update...South Carolina ASPAN GA Liaison

Alisa Shackelford, RN, MBA, MA, CCRN

Continued...

links to more on government affairs and to Washington, DC. Again, with ~ 2.5 million registered nurses in the US our voices can have a measurable and thunderous **impact** on health policy and legislation....don't be afraid to share yours with the policy makers. This marks the 4<sup>th</sup> year I have served as your GA liaison. This fall, please consider "throwing your name in the hat" to serve as the GA rep for South Carolina...the rewards and benefits are immeasurable! ♣

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### Healthcare Reform

David Kay, RN, MSN, CAPA  
 ASPAN Government Affairs Committee Chair

Here's a great way for you to quickly contact your legislators by phone about health reform:

#### Here's how:

1. Call 877-264-4226 (this is a toll free number and you will not be charged)
2. Press 1 to speak to your Senators, or press 2 to speak with your Representative
3. Enter your zip code when prompted—the system will use your zip code to connect you with the Senators from your state or the Representative for the district where you live.
4. Use or personalize the talking points below to urge your members of Congress to support meaningful health care reform, including a strong public plan option, this year.

You can speak your mind whether you are for or against health reform. If you are in support, there are some talking points provided to you by the ANA below. If you are against, briefly summarize why you are opposed and share that with your representatives' assistants. It is quick and easy. ♣

### Top Leadership Challenges

1. Getting people with differing agendas to work together
2. Balancing competing demands and priorities
3. Motivate and inspire in a world of constant change
4. Accomplish difficult assignments without necessary resources
5. Balance needs of organization with those of individuals
6. Adjust to a faster pace and multidimensional job
7. Stay connected to people; avoid becoming aloof & isolated
8. Build optimism among fearful, skeptical & cynical
9. Establish credibility & trust
10. Make critical decisions from ambiguous & incomplete information
11. Justify necessary unpopular actions and decisions
12. Be a moral & ethical leader in difficult times
13. Learn to live with imperfect solutions
14. Build confidence in followers
15. Handle challenges to your judgment & authority



Source: American Management Association 2003 Survey on Leadership Challenges  
 Healthcare Executive Vol 19, 3 May/June 2004

**ASPAN Region Five Update****Tanya Spiering, BSN, RN, CPAN**

Hello South Carolina!

Wow, where has the time gone? It has been almost 4 months since National Conference and CDI is right around the corner. Well a lot has happened in my life and I am sure yours as well but let me let you in on what is going on in ASPAN.

- Since May there have been 8 ASPAN seminars and 4 ASPAN Hosted seminars
- The Summer/Fall ASPAN Seminar brochure was recently released with 24 educational offerings
- The Education Approver Committee has been busy approving 3 applications already and with many fall applications in the wings
- The National Conference Strategic Workteam met in June to plan the next get together in New Orleans
- The 2010 National Conference theme has been announce: *Roots of Knowledge, Seeds of Transformation*
- ASPAN was well represented at the British Anesthetic Recovery Nurses Association (BARNA) in June by Lois Schick, Joni Brady and Denise O'Brien.
- Terri Clifford attended the National Association of PeriAnesthesia Nurses of Canada Conference in Toronto in May.
- Jennie Allen and Myrna Mamaril have continued active participation with the Resourcefully Enhancing Aging in Specialty Nursing (REASN) through the development of a series of eight one-hour modules featuring core geriatric competency-based learning providing ASPAN's representation.
- The Education Approver Manual and Approver Application are currently being revised to meet the new ANCC Operational Requirements that go into effect August 1<sup>st</sup>.
- CDI: "Leadership: The Key to Balance" is planned for September 11-13 in Portland, Maine. A total of 11 contact hours will be provided. The slate of topics include an overview of legal issues, recommendations for succession planning and membership recruitment, budget tips, and educational design plans as well as hints to improve ANCC compliance.

On a more personal note our own Chris Price was appointed to lead the Advanced Degree Strategic Work team. In this role she will be responsible for exploration and creation of a work plan for curriculum development associated with a proposed perianesthesia nursing certificated education program.

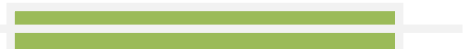
I thought you might be interested to know that ASPAN's total membership as of July of this year is 13,520. The PANAW theme has been chosen-will keep you posted. The ASPAN website is continuously being updated and revised so keep visiting. Going GREEN continues.

I want to thank you again for the opportunity to work with all of you and I hope that all of you will feel free to contact me with any questions or concerns.

Fondly,

Tanya Spiering, BSN, RN, CPAN  
Region 5 Director

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Coastal District of the South Carolina Association of PeriAnesthesia Nurses (CAPAN)

Presents



## “SUMMER SCHOOL” FOR THE PERIANESTHESIA NURSE



**Time:** 7:30 A.M Registration/Continental Breakfast **Location:** St. Francis Hospital Mall Classroom 1  
2095 Henry Tecklenburg Drive  
Charleston, SC 29414  
(843) 402-1000

**Program Time:** 08:00 A.M. – 12:45 P.M.

### **Target Audience:**

Experienced perianesthesia nurses and nurses new to perianesthesia care interested in further developing their knowledge base and strengthen skills.

### **Purpose:**

To provide nurses practicing in the perianesthesia setting with the most current evidence based information on the care of patients experiencing same day surgery.

### **4 Contact Hours Offered**

*The Registration Form is on page 11,  
please photocopy and pass to other interested colleagues.*

OR

Since time is running out, if you want to attend, contact

Dianne Jenkins  
Phone: (843) 709-6218  
Email: [dianne.jenkins@rsfh.com](mailto:dianne.jenkins@rsfh.com)

Need a refresher on heart and lung sounds?

Visit

The Auscultation Assistant at

<http://www.wilkes.med.ucla.edu/inex.htm>

to practice!





## EVIDENCED BASED ANESTHESIA – WHAT’S YOUR CURRENT PRACTICE

Karen DiLorenzo-Thames, MSN, RN, CAPA, CCRN, NE-BC, President-Elect SCAPAN

While attending our National Conference in Washington this past spring, I came across a reference book at the vendor fair. The title was *Evidence-Based Practice of Anesthesiology*. The book goes through the various topics that relate to Anesthesia, exploring key concepts and then provides a summary. List below are some of the summaries for you to see how practice at your facility compares.

### **What Criteria Should Be Used for Discharge after Outpatient Surgery?**

“The success of safe ambulatory surgical care depends on appropriate patient selection and timely discharge. Discharge scoring systems such as the Aldrete score, the postanesthesia discharge score (PADS), and fast-tracking can facilitate safe transition through the three phases of recovery.”

- Shifting from previous traditional discharge criteria by excluding mandatory drinking and voiding will enhance the speedy discharge.
- Patients at low risk for urinary retention can be discharged home without voiding, and should be instructed to return to the hospital if they are unable to void within 6 to 8 hours. Patients at a high risk of urinary retention should be required to void before discharge and display a residual volume of less than 400 mL. If the bladder volume is more than 500 to 600 mL, catheterization should be performed before discharge.
- Patients are no longer required to drink fluids before discharge.
- Regional anesthetic techniques are well suited for ambulatory surgery, but discharging such patients requires specific considerations and patient education, apart from the standard discharge criteria.
- Inclusion of antiemetics in the postdischarge prescription, along with analgesics and other required medication, may improve the patient's overall comfort in postdischarge settings.
- Discharge criteria and discharge scores assess home-readiness but not street fitness as functional recovery may vary depending on the type of anesthetic and type of surgery.
- The presence of a reliable escort, clear written instructions, and clear verbal instructions are crucial for patient safety before discharge.
- If an escort is not available after anesthesia is given, elective admission should be arranged.
- Patients should not drive or operate machinery for 24 hours after ambulatory surgery.

### **Does a Pulmonary Artery Catheter Influence Outcome in Noncardiac Surgery?**

- At the present time the influence of PAC monitoring on perioperative outcomes remains uncertain because significant design flaws are present in all the published trials. Additional research is needed to clearly document the effectiveness or lack of effectiveness of PACs in surgical patients.
- Expert opinion suggests that PA catheterization may benefit patients who are at high risk for complications related to hemodynamic instability during the intraoperative and postoperative periods. Reductions in morbidity and mortality rates will not be observed if physicians and nurses using PACs lack competency in basic technical and cognitive skills.
- Clinician knowledge about the use of PACs in high-risk surgical patients should be improved and user knowledge benchmarks established.

...Continued on Page 10

EVIDENCED BASED ANESTHESIA – WHAT’S YOUR CURRENT PRACTICE...continued

Karen DiLorenzo-Thames, MSN, RN, CAPA, CCRN, NE-BC, President-Elect SCAPAN

**Should All Antihypertensive Agents Be Continued before Surgery?**

“The final recommendations are summarized by agent class in Table 9-5. This chapter is in full agreement with all of the current guidelines, including those from the ACP and the AHA/ACC. Perioperative management of ambulatory antihypertensives must account for the particular antihypertensive agents, the overall risk/benefit profile, and current guidelines, and then adjust the anesthetic plan accordingly.”

**Table 9-5 -- Recommended Preoperative Management of Antihypertensive Medications**

Antihypertensive Drug Class	Recommendation for Morning of Surgery	Sequelae with Discontinuation of Perioperative Therapy	Sequelae with Continuation of Perioperative Therapy
Beta-blockers	Continue	Withdrawal syndrome	Cardiovascular risk reduction
Clonidine	Continue	Withdrawal syndrome	Cardiovascular risk reduction
Calcium channel blockers	Continue	None described	Cardiovascular risk reduction
Alpha-blockers in association with pheochromocytoma	Continue	Severe preoperative and intraoperative systemic hypertension	Systemic hypotension, especially after tumor excision (readily treatable)
Angiotensin blockers (ACEI or ARB)	Discontinue	Significant reduction in risk of intraoperative hypotension	Significant risk of intraoperative hypotension
Diuretics	Discontinue	None described	Possible aggravation of hypokalemia with adverse outcome

ACEI, angiotensin-converting enzyme inhibitors; ARB, angiotensin receptor blockers.

The above excerpts are from: Fleisher, LA (2009). *Evidence-Based Practice of Anesthesiology (2<sup>nd</sup> Ed)*. Philadelphia: Saunders Elsevier. ♣

**Perianesthesia Review Course**

**Patrica B. Moran, RN, BSN, CPAN**

**TARGET AUDIENCE** Licensed Nurses planning to take perianesthesia certification exam or review their skills

**FEE** \$150 for non members; \$50 for AHEC members

**CREDIT** 1.35 CEUs, 13.5 clock hours-AHEC, This CE activity is approved for 13.5 contact hours for licensed nurses.

**Saturday & Sunday, November 7-8**

8:30 AM – 4:45 PM Check in at 8:15 AM

Conference Room A/B-Patewood Center/225 Building-Greenville

For Info, Contact: Donna. R. West, RN, MSN (864) 455-7179 (Office)

Greenville Memorial Hospital, 701 Grove Road, Greenville, SC 29605

## Summer School for the PeriAnesthesia Nurse

Saturday, August 15, 2009, Charleston, South Carolina  
7:30 AM – 12:45PM

Please print or type. Use a separate form for each registrant. Duplicate as needed.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Telephone Number (\_\_\_\_\_) \_\_\_\_\_

### Fee Schedule: (Make check payable to CAPAN)

Fee:

\$40.00

Group Rate (5 or more from same facility & mailed in at the same time)  
or RSFH employee  \$ 30.00

### Student, non licensed (no contact hours awarded)

\$ 10.00

Total Registration Fee Enclosed \$ \_\_\_\_\_

### Mail registration form & payment to

CAPAN  
PO Box 13976  
Charleston SC 29422

NOTE: Confirmation of registration will not be mailed to participants

----- CUT HERE - RETURN TOP PORTION & SAVE BELOW FOR REFERENCE -----

### Disclosure Statement:

Speakers at continuing education activities are required to disclose to the audience any financial relationships with the manufacturer(s) of any commercial products, goods or services. Any conflicts of interest must be resolved prior to the presentation and announced to the audience. The speakers not have any real or apparent conflicts of interest to disclose or other relationships related to the content of this presentation.

Directions: I-26 East to I-526 West (exit 212B) to Exit 11B (look for the Hospital sign) merging onto Paul Cantrell Blvd. Take left at the light onto Magwood Road, left at the stop sign onto Henry Tecklenburg Drive, right into St. Francis Hospital's parking area.

Parking Information: Free Parking available on-site.

### Summer School for the PeriAnesthesia Nurse

Saturday, August 15, 2009, Charleston, South Carolina

7:30 AM – 12:45PM

St. Francis Hospital Mall Classroom 1  
2095 Henry Tecklenburg Drive  
Charleston, SC 29414  
(843) 402-1000

**Cancellation Policy:** Full refund until exactly two (2) weeks preceding workshop. No refund within two (2) weeks of seminar, but substitutions permitted. CAPAN reserves the right to substitute speakers, if necessary.

## **SCHOOL SUPPLY DONATION**

**As a service project, please bring any type of school supplies (pencils, pens, notebook paper, etc) which we will donate to the local schools**

**For more information or questions contact**

Dianne Jenkins  
Phone: (843) 709-6218  
Email: dianne.jenkins@rsfh.com

*If you have moved or would like a 'hardcopy' version of the newsletter, let us know!*

We're On the Web!!

Visit us at  
[www.scapan.com](http://www.scapan.com)

## Computer-based Testing and ABPANC!

IT'S TIME!

The window for registering for the Fall 2009 CPAN® and/or CAPA® examinations is now open, through September 7th. Visit the ABPANC website at [www.cpancapa.org](http://www.cpancapa.org) and click on the Certification Link, scroll down on the Introduction page and click on APPLY HERE to register online. (ABPANC no longer accepts paper applications.) The examination administration window runs from October 5 through November 14th. .

Don't wait! Register now! If you are already certified, encourage your colleagues to take this step beyond licensure!

### Working together we can fulfill our patient promise!

- ✓ April 6, 2009 CPAN and CAPA examinations were available for Computer Based Testing (CBT).
- ✓ TWO testing windows in April and November, each 6 weeks long!!
- ✓ Dual-certification?? You can take both examinations during the same testing window!
- ✓ Recertification will also be available online beginning Nov. 1, 2009.
- ✓ Apply online for the examination.
  - You only need an email address!
- ✓ No more special test sites!
- ✓ No more waiting for the mail to arrive!
- ✓ Preliminary scores will be available immediately!
- ✓ No prior computer experience necessary!
- ✓ Paper and pencil version of the exam will be offered once a year at the ASPAN National Conference!



Stay tuned to the ABPANC website ([www.cpancapa.org](http://www.cpancapa.org)) for updates! ✦

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