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Palmetto Pulse

SOUTH CAROLINA ASSOCIATION OF PERIANESTHESIA
NURSES



SCAPAN CORE PURPOSE

The core purpose of the South Carolina Association of Perianesthesia Nurses is to promote excellence in all aspects of Perianesthesia Nursing practice through education, specialty certification, nursing research, support for specialty certification, and ASPAN Standards in an environment this is respectful of others and adaptive to change

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President's Message

Dear SCAPAN Members,

So far 2011 has been a very good year for SCAPAN. We kicked the year off with Denise O'Brien speaking in Greenville. Because there were 200 attendees SCAPAN was able to use the profits from this conference to assist 13 SCAPAN members attend the 30th ASPAN Conference in Seattle. This was an impressive start for PANAW (PeriAnesthesia Nurse Awareness Week). If you are not able to join us in Seattle, make plans now to attend next year. The ASPAN 2012 Conference will be in Orlando, Florida.

SCAPAN has three more educational opportunities this year. The Midlands District has Chris Pasero speaking in Columbia on March 26th. Her topic is **Influencing Patient Outcomes through Assessment and Management of Pain**. Chris is a pain management author, educator and clinical consultant from El Dorado Hills, California. She is a brilliant speaker. In August (date TBA) the Coastal District of SCAPAN will have their annual Summer School for the PeriAnesthesia Nurse. And in October, SCAPAN's Annual Fall Conference will be in the Coastal area, since we rotate the Fall Conference. The plan for 2012 will be in the upstate area. SCAPAN's goal is to have at least one educational opportunity in each of the three districts every year.

SCAPAN's membership is at 225. We have 49% of our members who are certified (CPAN or CAPA or both). This is an exceptional number of PeriAnesthesia certified nurses. This is evidence to our dedication to our profession.

SCAPAN needs you. It seems to me that many of the same people doing most of the work in maintaining SCAPAN. We need your ideas and suggestions. We need your time and energy. Please volunteer to serve SCAPAN. In October, we will need to elect new board members and officers. Being a board member has been very rewarding for me. Are you unable to take on a full time position? Every conference needs set up & cleaning assistance. Contact your district president and ask what you can do on a local level. All three district presidents contact information can be found on the SCAPAN web site. I am requesting each of you to be all you can be for SCAPAN. Volunteer to help.

- What do you want from SCAPAN?
- Is there someone you want to come to South Carolina to speak?
- Do you want a topic to be included in a future conference?
- Tell me what you want and expect from SCAPAN.

And finally, as you can see we have a new name for our newsletter! Our old name - Eye Openers - was the same name as the Texas Component. So, we put a call out to the membership last month to come up with a name that reflects us. We had many awesome names suggested, but Palmetto Pulse won by a majority BOD vote. The winner was Karen DiLorenzo-Thames. Karen will free registration to our Fall Conference 2011 and a 1 year free membership to ASPAN. Thanks to all who submitted a name.

Thanks again for all your support, Nancy Z. (nanzar@msn.com)

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Letters to the Editor

Please send all correspondence to SCAPAN, PO Box 13976, Charleston, SC 29422, or email letters to karen.thames@rsfh.com use **'letter to the editor'** in the subject line.

We look forward to hearing from YOU!

The deadlines for submission to Palmetto Pulse are:

February 28
July 15
November 15

NEWS FROM NATIONAL

It's almost time to celebrate as we travel to ASPAN's 30th National Conference at the New Seattle Sheraton Hotel. Do you have your bags packed? Are you ready?

The Development team wanted to take this opportunity to let every Component, and every individual know about all of the Development activities at National Conference. ASPAN Development supports educational scholarships, research projects, and many other ASPAN activities throughout the year.

NATIONAL CONFERENCE SUPPORT – First of all, as a Component, you are more than welcome to participate in the sponsorship of the National Conference through the donation of any amount of money. You may designate monies to a specific project (i.e. highlighters, pocket planner, etc.) or just indicate in your letter or on your check that it's a donation for National Conference support. All Components will be acknowledged for Conference support regardless of the amount donated. **Send Conference donations to the attention of Connie Jameson, Administrative Assistant. (Your intention to donate needs to arrive by February 18, 2011 to be listed in the Conference Syllabus.)**

15th ANNUAL DREAM WALK – Please join us, bright and early, on Sunday, April 3rd at 6:30am for a walk around the streets of Seattle! Take in the early morning sights and sounds of Seattle and raise money for future ASPAN projects.

I challenge each and every registrant to take the Dream Walk sponsorship form and start searching for sponsors! Let's really *DREAM*... and raise money for the future by "Reinvesting in Your Potential."

EXHIBIT GRAND OPENING / SILENT AUCTION – The exhibits open on Monday, April 4th at 5:00pm as does the *SILENT AUCTION*! For those of you new to the National Conference, the Silent Auction is where you can find the unusual, the bling, a regional or State related item, or that piece of memorabilia that you simply **MUST** take home with you. Bids are taken up until the close of exhibits on Wednesday, April 6st at 9:00am, when everyone tries to make sure their bid **WINS**! Don't miss out. Come and bid often. Also, you may donate, as a Component or individual, an item for the Silent Auction. **Contact Connie Jameson, Administrative Assistant on how to send your items ahead of time.**

"Development" LUNCHEON – Come and be a part of the Development Luncheon celebration and this year's Hail, Honor Salute program. Enjoy great food, great friends and listen to an inspiring presentation, **"Be" The Gift and Make Their Day!** You don't want to miss being a part of this great luncheon. Keep in mind that proceeds from this luncheon help to provide scholarships and services to ASPAN members. Help ASPAN be all that it can be!

See YOU there!!

Research-With ASPAN's Help, You Can Do It!

By Lori Sutton, BSN, RN, CPAN

Got a burning question and want some guidance finding the answer? ASPAN provides a wealth of information to help the front-line nurse learn to conduct research and participate in evidence-based nursing practice.

ASPAN believes nursing research is extremely important, as evidenced by Standard V in the 2010-2012 PeriAnesthesia Nursing Standards and Practice Recommendations: Research. In this standard ASPAN describes ways in which PeriAnesthesia nurses can and should participate in research. ASPAN also believes that in addition to participating in research to develop new knowledge, PeriAnesthesia Nurses should use evidence to guide their daily practice.

ASPAN provides many resources to PeriAnesthesia Nurses to help meet this goal. Research is one of the main headings on the ASPAN homepage. If you mouse over it, it drops down to reveal information about the research and evidenced-based practice committee, research grants, research abstracts, and internet links

to other helpful information. Under research information, you'll even find a link to the entire ASPAN Research primer, a gold mine of information that provides guidance for every step of conducting a research project.

SCAPAN also can provide assistance with research and evidence-based practice. SCAPAN members have conducted research and evidence-based projects and will be presenting them at the 2011 ASPAN National Conference in Seattle. If you are interested in conducting a research or evidence-based project, contact me or any member of the SCAPAN Board of Directors for assistance. We can help you find resources to help you accomplish your goals!

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Congratulations to

Suzanne Steele

She won the SCAPAN Points System Award for 2010!

She wins 1 point per activity for a maximum of \$300!!

YOU can win too!

**Submit your application (see below)
by January 10, 2012!**

Coastal District Report

CAPAN had a meeting on February 23, 2011 with guest speaker, Lori Edgar, FNP who spoke on "Lower Extremity Bypass Surgery." We also discussed plans for the fall state conference which is going to be held in October in the Coastal region (site & topic to be determined.) Elections were then held. Dianne Jenkins elected Secretary (2 yr term) and Donna Daniel and Joy Davis as Board of Directors (1yr term). We did not have any nominations for VP/President Elect. We are open to nominations so PLEASE Coastal members, we need your support! Contact me at Shirley.wetzstein@rsfh.com if interested.

Shirley Wetzstein, President, Coastal District



Central Midlands District Report

March 26, 2011 is the Midlands Chapter Spring Conference. It will be held at the Embassy Suites Hotel in Columbia, SC. Chris Pasero to speak on "Influencing Patient Outcomes Through Assessment and Management of Pain". Up to 300 people will be able to attend. This conference will be open to Nurse's (6.5 contact hrs.) and CRNA's (6 contact hrs.). The flyer is on the SCAPAN website for you to print and send back in. We want to fill to capacity, so please come. Also, an ASPAN membership will be given away at the conference. At our last meeting, an ASPAN membership was given away and 6 PANAW Tote bags and 6 Lunch coolers were given away. We had a round table discussion about issues in PACU in the Midlands area hospitals.

Suzanne Steele, President, Midlands District

Piedmont District Report

We are still reeling from the fabulous turnout for the ASPAN sponsored Denise O'Brien MSN, RN, ACNS-BC, CPAN CAPA, FAAN presentation "The Complexities and Challenges of PeriAnesthesia Nursing: Across the Ambulatory and PeriAnesthesia Continuum" held at Greenville Memorial Hospital on January 29th. Ironically, we were hoping to have at least 100 attendees, so when our registration continued to grow, we were blown out of our shoes. We had just over 200 attendees, and the evaluations were outstanding. Nancy Z. and I brought out last year's National Conference ASPAN Mardi gras beads to identify local members for assistance with directions or issues. I need to offer a very big thank you to everyone on the Upstate team that pitched in to help us make this conference successful. Fellow PAPAN members and GMH PACU Staff included Cindy Morgan, Vice President, Paige Wilson, Linda Yoder, and Sue Lutz who acted as our registration staff, while David Florek and Mary Ellen Handley assisted with directions and housekeeping duties. And a very special thanks to Mary Rogers of St. Francis Hospital, she volunteered to pick up Denise, our speaker, for us on Friday, while we were holding our first Board Meeting of the year. Due to some weather issues, she waited patiently for Denise, whose flight came in later than planned. Also, Katie Mumblow, Treasurer, and Michele Snipes, Upstate Board Member, both of AnMed Health acted as our contact for the Belton Interfaith Ministries Food Bank, which was blessed to receive the foods and donated funds that our attendees thoughtfully provided. We had two carts fully loaded with boxes of various can goods, cereals, dry goods, and other health foods.

But is now time to come back to earth, our last gathering was at AnMed Health back in December when we held a meet and greet with Katie and Michele's staff to introduce them to SCAPAN/ASPAN organizations. We had such a great turnout, so Nancy and I have been thinking of having a session in the Greenville area in the near future. After checking with the rest of the board on timing, I will be sending out a notice for our gathering. With the season turning into spring, my goal is to have regular meetings, so our upstate members can attend to network, gain insight into PeriAnesthesia Nursing, and seek continuing education opportunities. Any questions or suggestions for upcoming meetings, please email me: donaree@bellsouth.net

Donna R West, President, Piedmont District

Board Member Spotlight



Donna West, MSN, RN
SCAPAN District Director
President, Upstate District

Family: Married for 11 years this June, and my husband have a combined family made up of 3 great children. Michael, 29, lives in Florida with my soon to be daughter in law Jessica, and they gave me my beautiful grand baby girl Gabriella, age 2. Jason, age 28, also lives in Florida and he is working up the Publix Management chain. Stacey is an ICU Nurse that is working on her BSN, and she just turned 24. She lives in New Mexico, and she and her husband are giving me my second grandchild this May, a boy.

Education: ADN Greenville Technical College School of Nursing 1976; BSN University of Central Florida 2006; MSN University of Central Florida 2009

ACTIVITIES: When I have free time, I am reading on my Nook, watching funny or adventure movies, or trying to do beginner scrapbooking. I just wish that I had more time and funds (of course) to travel around the state as well as Europe.

EMPLOYMENT: I started my nursing career in the Neonatal Intensive Care at Greenville General Hospital, but I moved to Orlando, Florida in 1984. Throughout my 35 years in nursing, most of my experience has involved some form of Perioperative Nursing Services. I returned back to my home grounds in 2008 when I accepted the Clinical Nurse Educator position at Greenville Memorial Hospital. I have 5 specific units that I cover: Preop, OSC and Main PACU, G I Lab, and the Cross Creek Surgery Center.

MEMBERSHIP INFORMATION - Reinvest in Your Potential!

Currently, **Marilyn Jefferies**, is the membership recruiter leader with 5 new members. It's not too late to recruit new members. Deadline is March 31st for the SCAPAN award (one year free membership), go get recruiting!!

Contact Membership chair, Dianne Jackson at marilyn.jackson@palmettohealth.org, if you have any questions or log on to www.aspan.org

SCAPAN -Willingness to Serve

2011- 2012

The following positions are available:

ELECTED POSITION

Vice President / President Elect 1 yr

(Followed by 1 yr as President and Immediate Past President)

Treasurer 2 yrs

District Director (3 positions open) 2 yrs

SCAPAN COMMITTEE MEMBER: (1 yr)

_____ By Laws / Policy and Procedure
 _____ Education / Research
 _____ Government Affairs / Prof Liaisons
 _____ Finance
 _____ Nominating / Elections
 _____ Membership / Marketing/PR 3

Elected Positions will be filled in October 2011.

You should serve!

Contact ANY SCAPAN board member for details or to express interest

Recipe Corner

Summer is just around the corner
so try this great recipe!

SOUTH CAROLINA CAVIAR

2 can black eye peas drained
 1 green pepper chopped
 1 sweet red pepper chopped
 1 small sweet onion chopped
 8 jalapeno slices peppers chopped or to taste
 4 green onions chopped
 2 cloves garlic minced
 1 pint cherry tomatoes sliced in half
 8 oz any good italian dressing
 3 dashes of tabasco sauce
 Salt and pepper to taste.

Mix Together And Refrigerate At Least 4 Hours

Have a recipe you want to share? Email it to karen.thames@rsfh.com!!

CERTIFICATION – WHAT IT MEANS TO ME!

By Suzanne Steele, BSN, RN, CPAN

The first time I heard about being certified in an area of nursing was 1999. I worked Orthopedics then and a colleague of mine and I drove to a high school in North Carolina and took the Medial Surgical Certification exam. It was a paper test and it took 6-8 weeks to get your results back in the mail. I was pleased to pass this exam and was one of the first nurses in my hospital to become certified. I soon moved to the PACU in my hospital and let my certification lapse.

Ten years from the time I took my first certification exam I decided to become certified in Perianesthesia Nursing. There were a few nurses in my area that had taken the exam earlier and it sparked my interest. I took a few review courses and studied for about 3 months. The exam process was totally different this time. Instead of paper and pencil it was on the computer. Also, you could find out instantly whether you passed or failed by the press of a button. I don't know which process was worse, waiting for 6-8 weeks and stalking the mailman, or pushing the button on a computer and peeking through your hands to see your results. I did pass and am proud to state I am CPAN certified.

I was so excited I went to the leadership team on my unit and told them I would like to help in any way I could to help other nurses get certified. The leadership team on my floor was already planning to foster a culture of certification. They were planning to offer classes twice a week to help the staff get certified.

Twice a year we have a group of nurses commit to taking the exam. We teach classes for 12 weeks before they sit for the exam. Our unit has gone from 8 percent certification to 68 percent. The leadership team has a goal of 100 percent certification. We are well on our way and I am excited to see all of us learning together. We have even sparked some interest from the Anesthesiologists with our questions of the week. We put banners up congratulating the staff that pass. We also frame certificates and put them on the wall in our PACU. Our enthusiasm to learn has also spread to outpatient, holding room, pre-op and interview. Some of these nurses have gotten their CAPA and CCRN certification. Now the other areas have a wall with certification certificates. We also have inspired the OR to have a certification wall.

We as nurses have learned how to better take care of our patients. We have also learned to ask in-depth question about our area of nursing and the effects of anesthesia on the patient. From this experience I feel I am a better nurse and advocate for my patient. I seek to learn new things and try to teach the other nurses I work with what I have learned. I would encourage all nurses to become certified in their area of expertise. Start the spark in your facility and watch it grow in to a burning desire for knowledge and excellent patient care.

ABPANC UPDATE**By Cheryl P. Coleman, BSN, RN, CPAN**

Greetings SCAPAN Members,

I must begin by telling everyone how excited and proud I am to be a part of such an energetic and enthusiastic component that is truly “reinvesting in its potential “. The push for certification, the educational offering being presented by all of the districts within the component, the large delegation planning to attend this year’s ASPAN conference in Seattle, the Certification poster presentation planned for conference, all leading to excellence in patient care and pride in our component.

It is with great pride, as the American Board of PeriAnesthesia Nurses Certification (ABPANC) board member and coach liaison, that I bring information from ABPANC. I hope that all had a great PANAW week.

Don’t forget National Certified Nurse’s Day will be celebrated on March 19th. There will be a free poster available for downloading on the ABPANC website. I hope your component has remembered to submit a nomination for the Advocacy Award and applied for the Shining Star Award. It will be great to have a CPAN/CAPA Luncheon this year at the conference in place of the early morning breakfast.

We hope to get lots of positive feedback on this change. Please remember to come by the ABPANC booth in the exhibit hall to learn more about CPAN/CAPA certification and The Coach Program as well as practice exams and online testing.

Keep in mind that practice exams are currently on sale as BOGOF (Buy one exam at \$35.00 and get another practice exam free) until December 31, 2011.

Last, but not least, there will be several ABPANC presentations at National conference from Test Taking Strategies to Coaching the Coaches. Please plan to attend as many as you like. Be a Cheerleader for Certification and reinvest in your potential.

Thanks, Cheryl
ABPANC Board member and Coach Liaison
Cherylcoleman11@yahoo.com

American Board of Perianesthesia Nursing Certification, Inc.

**CPAN/CPAP CERTIFICATION INFO**

- [Brand new CPAN/CAPA Practice Exams have launched \(Click here for information\)!](#)
- ABPANC seeks nominations for the Board of Directors - [Click here for information.](#)
- Visit cpancapa.org for more information

Research??? Greek to Me, Translating Research into English

By Donna R West, MSN, RN

Have you ever tried to read a research article and found that it seemed to be written in Greek? It helps to have some of the research components demystified, which allows one to grasp what the authors are trying to get across to the readers. Recently, my co-worker, Sue Seitz, MSN, RN, CNS, provided some of our perioperative staff a short list of research components explanations. I have broken down her 11 components into brief explanations that will hopefully make research articles easier to understand.

Introduction/Background: It tells you a little about the problem and why it is important.

Research Purpose: Provides a broad statement designed to tell you why the research is being done.

Research Question: The research question is a specific question to be designed to generate new knowledge.

Hypothesis: A statement that the author made stating if their research will support or refute the research question.

Review of Literature: A comprehensive review of available studies and literature about the subject. Studies are rated for levels of evidence, some evidence is more supportive – e.g. systematic review of literature, and random control trials are the highest while expert opinion is the lowest.

Methodology: This section has several points, which when broken down explains how the research was done and studies conducted.

- Setting: Where the research took place
- Sample/Size- Tells you what type of clients were included, excluded, as well as how many clients were involved.
- Design: The research question determines the design- some examples are descriptive, quasi-experimental, experimental, longitudinal, and correlational.
- Data Collection/Tools: These talk about how the data will be collected and what tools were used if any.

Data Analysis: This is the area where the authors explain their analysis and it can sound like a foreign language. It is a breakdown of the results from their data collection.

Discussion/Limitations: The authors provide a discussion of the research results and their findings; an example would be explaining some of the limitations in a study due to the size of client sample.

Implications for Nursing: This is where the authors explain what their research is important to nursing and how it can contribute to the body of nursing.

Quantitative Research: Research that has measurable numbers; you may hear it called empiric data. There are several research designs that fall under this category, e.g. descriptive, experimental, and longitudinal.

Qualitative Research: Research that will generate theory. Subject numbers are smaller, usually done to find out about a “lived experience” (phenomenology), or about a culture (ethnological study), recorded conversations, analyze data using an approach e.g. constant comparative analysis.

Implementing Strategies to Increase Preoperative Heparin Administration Compliance

By Christine Wlodarczyk, BSN, CCRN, CPAN

This study is presented by the Inpatient Holding Room staff

(Cheryl C. White RN, CPAN, BSN student, Sarah Slone Mecca, RN, BSN, CCRN, Palmetto Health Baptist, Columbia, SC)

as a part of our Process Improvement Team's research idea to improve patient outcomes. All of the Inpatient Holding Room staff is utilizing the heparin tracking tool and documenting administration compliance.

Purpose

The purpose of this study is to monitor the administration of subcutaneous heparin by nurses to inpatients prior to surgery. The goal is to identify patient care units where strategies need to be implemented to increase heparin administration compliance. Strategies will then be implemented to increase preoperative heparin administration compliance on the identified units.

Background

It was observed the nurses hold ordered subcutaneous heparin for preoperative inpatients. From discussions with nurses during preoperative handoff communication it was discovered that heparin was inappropriately held. NPO past midnight was documented as the hold reason for heparin for three patients. Another nurse documented that the ordered heparin dose was held because the patient was scheduled for surgery. In all four cases, no order was given by the surgeon to hold heparin preoperatively. The surgeons involved in these four cases were questioned if heparin should be held preoperatively; both surgeons responded that unless they wrote an order to hold heparin, heparin should be given to their patients. Despite subsequent discussions with nursing staff regarding the necessity to administer heparin unless there is a hold order, heparin continues to be inappropriately held.

Review of the Literature

A major cause of morbidity and chronic illness in hospitalized patients is venous thromboembolism (VTE) (Leizorovicz & Mismetti, 2004). VTE refers to both pulmonary embolism (PE) and deep vein thrombosis (DVT). VTE complications not only endanger the patient's health, but increase the cost to the patient and hospital as well as lengthen hospital stays. According to Tang (2006), approximately 25 out of every 100 surgical patients develop DVT post-operatively. Unless otherwise contraindicated, the use of heparin-based thromboprophylaxis is currently recommended for pharmacological VTE prophylaxis. Patients at high to moderate risk of VTE and who require swift, safe, and efficient prophylaxis due to surgery or prolonged immobilization are candidates for heparin VTE prophylaxis (Morrison, 2006). According to Karch (2008) 5000 units of heparin may be given subcutaneously two hours before surgery as pharmacological prophylaxis of postoperative thromboembolism.

Methodology

Initially, the Perioperative Supervisor discussed at Manager's Council the need for nursing staff to follow heparin orders. A tool was designed to track heparin administration to preoperative inpatients. Only patients who have an order for heparin and are hospitalized preoperatively are included in the study. Once nursing units that fail to comply with heparin orders are identified, the affected units' nurse managers will be notified and education regarding heparin administration will be presented in staff meetings on these units. In addition, an occurrence report will be documented for future follow up.

Anticipated Results

It is expected that nursing staff will hold heparin for inpatients without an order based on prior observations. The findings will be shared with nurse managers on the affected units and education will be provided using poster board presentation and data from the literature and tracking tool.

Results to Date

This study was formally initiated on January 31st, 2011 and will continue for 30 days using the tracking tool designed. Only one patient has met the criteria to date and heparin was appropriately administered.

References:

- Karch, A.M. (2008). *2008 Lippincott's Nursing Drug Guide*. Philadelphia, PA: Lippincott Williams & Wilkins
- Leizorovicz, A. and Mismetti, P. (2004). Preventing venous thromboembolism in medical patients. *Circulation*, 110 (IV), IV-13, IV-19.
- Morrison, R. (2006). Venous thromboembolism: Scope of the problems and the nurse's role in risk assessment and prevention. *Journal of Vascular Nursing* 24 (3), 82-90.
- Tang, W. H. W. (2006, June 30). Perioperative DVT prophylaxis. *eMedicine*. Retrieved November 19, 2007 from <http://www.emedicine.com/med/topic3164.htm>

2010-2012 ASPAN Standards... What's New?

By Faye S. Baker, BSN, RN, CPAN

First of all, the name has changed. Formally called 2008-2010 Standards of Perianesthesia Nursing Practice, it is now called **2010-2012 Perianesthesia Nursing Standards and Practice Recommendations**.

Standards provide a framework of care for all patients in all PeriAnesthesia settings. There are five standards instead of eight (the former, *Assessment, Planning and Evaluation* have been combined into **Nursing process**).

Practice guidelines are developed from a systematic review of literature and research. There are two clinical practice guidelines. They include: *Clinical Practice Guidelines for the promotion of Perioperative Normothermia*, *Clinical Guideline for Pain and Comfort*, and *Clinical Practice Guideline for the prevention and/or management of Postoperative Nausea and Vomiting/Postdischarge Nausea and Vomiting (PONV/PDNDV)*. The *Clinical Guideline for Pain and Comfort* has been removed from the standards pending updates.

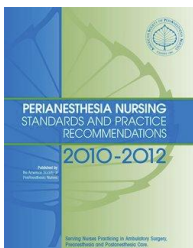
Practice Recommendations are new! They best describe the desirable and achievable level of performance expected of PeriAnesthesia registered nurses. There are nine practice recommendations. **Fast tracking** has been moved from position statements in the 2008-2010 standards to a practice recommendation. **NEW recommendations include: Perianesthesia Care Unit Visitation Guideline for Adult Patients** and **Guideline Regarding the Patient on Contact Precautions**.

Position Statements represent ASPAN's viewpoint on certain issues and support standards of practice. There are thirteen position statements. **NEW position statements include The Pediatric Patient** and **Workplace Violence in the Perianesthesia Setting**. The following position statements have been removed: *Entry into Nursing Practice*, *Perianesthesia Advanced Practice Nursing*, *Cultural Diversity & Sensitivity in Perianesthesia Nursing Practice* and *Advocacy*.

Resources offer recommendations for practice, based on practice guidelines from partnering organizations. There are four resources. **There is one new addition: Association for Radiologic & Imaging Nursing (ARIN) Clinical Practice Guideline. Handoff Communication Concerning Patients Undergoing a Radiological Procedure with General Anesthesia**. The following resources have been removed: *Universal Protocol for preventing Wrong Site, Wrong Procedure, Wrong Person Surgery*, *Resource for infection Control*, and *ASPAN's 2008-2010 Internet Resources*.

2010-2012 PERIANESTHESIA NURSING STANDARDS AND PRACTICE RECOMMENDATIONS

Since its inception in 1984, the American Society of Perianesthesia Nurses (ASPAN) *Standards of Perianesthesia Nursing Practice* provides a framework for the care of a diverse patient population across all PeriAnesthesia settings. The Standards are reviewed and updated biennially, incorporating current evidence-based practice and regulatory requirements and reflecting changing technology and nursing practice.



2010-2012 Standards effective: December 27, 2010
Member Price: \$60.00 / Non-Member Price: \$130.00

Information from www.aspan.org

REUSABLE BAGS - Plastic Bag Facts

By: Dianne Jackson, RN, CAPA

- An estimated **100 billion plastic bags are used in the United States every year**
- Worldwide, an estimated **500 billion to 1 trillion plastic bags are used**
- Although plastic bags are recyclable, *less than 3% of them actually are*. The rest end up in landfills, oceans, and as litter
- An estimated **4 billion plastic bags end up as litter each year worldwide**
- 4 out of 10 people believe plastic bags will biodegrade, even though they won't
- In landfills, **plastic bags sit for roughly 1,000 years before decomposing and release toxic chemicals into the soil during decomposition.**
- In our oceans, *plastic debris was found in almost 75% of dead sea turtles in 2002*
- Further, there are reports of problems with entanglement or ingestion of marine debris, including plastic bags, in 86% of all known species of sea turtles
- An EPA ranking of chemicals that produce the most hazardous waste showed 5 of the top 6 were used by the plastics industry
- An estimated 12 million barrels of oil is required to produce the plastic bags used in the US each year

Free Grocery Bags are Not Free

Many stores today offer credits for shoppers that bring their own bags instead of using plastic or paper. Although grocery stores offer bags for "free" the truth is that these bags are not free. Grocery stores have to pay for the bags and pass those costs on to the consumer via higher prices on items in the store. Stores provide credits to customers who bring their own bags as a way of not "charging" those customers for "free" bags. Typically this is not a huge credit, \$0.10 per bag for example. However, the point is that **over time, the reusable bag will pay for itself and in the long run could actually save you money on groceries.**

Shopping Advantages When Using "Reusable Bag"

- Target - Will take \$0.05 off purchase when use reusable bag is used
- Earth Fare - "Choose and Reuse" \$0.05 to friend of Earth Fare (Childhood Obesity)
- Whole Foods - All WFM stores offer at least a nickel-per-bag refund
- CVS - Purchase a "Green tag" for \$.99 and apply to your reusable bag for future discount

SCAPAN Points Award



- ✓ Eligible SCAPAN/ASPAN members can win up to **\$300.**
- ✓ **Points are acquired January 1 to December 31, 2011.**
- ✓ Applications are submitted by January 10, 2012 to SCAPAN BOD Member or post marked by January 10, 2012 SCAPAN PO Box 13976 Charleston, SC 29422 .
- ✓ Details, including eligibility and procedure for distribution of funds, can be found on the SCAPAN website.

Activity	Points	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Total poss.
ASPAN/SCAPAN membership	30	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	30	30
Member of Prof. Nsg.Org. (excludes ASPAN) (per org)	10/yr														10
CPAN/CAPA certification (pts per cert./yr)	30														60
BLS/ACLS/PALS certified (pts per cert./yr)	10														30
BLS/ACLS/PALS instructor (pts per cert./yr)	20/yr														60
Certification other than CPAN/CAPA (pts/cert)	5/yr														n/a
Hospital Committee 15 pts/committee	15														
Recognition of Professional Service (per event)	10														
Participate in informal PACU related research	20														
Participate in published PACU related research	40														
Develop PACU related research project	20	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX		20
Attend PACU related inservice/seminar (per event)	10														
Attend SCAPAN workshop (per workshop)	15														
Attend SCAPAN State Conference	30	XX	XX	XX	XX	XX	XX	XX	XX	XX		XX	XX		30
Attend ASPAN National Conference	30	XX	XX	XX			XX	XX	XX	XX	XX	XX	XX		30
Attend ASPAN Sponsored seminar	15														
Present education program in PACU (per present)	25														
Volunteer for community service (per event)	10														100
SCAPANDistrict officer/district committee member	10	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX		10
SCAPAN State officer/State committee member	20	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX		20
ASPAN National Officer/ National Committee member	30	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX		30
Attend local/district SCAPAN meetings (per meeting)	10														
Recruit new members to SCAPAN (per member)	5														
Write article for "Eye Openers" (per article)	20														
Write article for "Breathline" (per article)	30														
Arrange for speakers at SCAPAN district meetings (per mtg)	15														
Help plan SCAPAN conference	20	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX	XX		20
ALL state / district officers / committee members / etc. must be SCAPAN components															

Name: _____ Year: 2011

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of the newsletter,
let us know!*

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you are!
Please update your
demographic info –
especially your
email - at
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They will notify
SCAPAN of your
changes*

PALMETTO PULSE
PO Box 13976
Charleston SC 29422



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