



PERIOPERATIVE POTPOURRI

New Orleans - Chapter 1902

February 2015

President's Message

2014- 2015 Officers

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It's here....hope everyone has added a little purple and gold to their green decorations! There is always some holiday or festival to decorate for in New Orleans.

Congratulations to 1902 - AORN of New Orleans. Great news! Our chapter is the Recruitment Rewards Chapter Challenge Champion and the winner of \$1000.00 grand prize. Our chapter recruited 17 new members to AORN throughout the Chapter Challenge contest - Ann Burghardt-Dieck was a 'super recruiter' with 13 new members. Thank you to all members and especially Ann, who had a direct impact on us winning this award. Special recognition to Judy Montello and Bridget Vilorio, both from Children's Hospital, who work closely with Ann, and for their support and willingness to help educate nursing students.

Our Board member, Carrie Thomson, has received a national level individual achievement award. She has been awarded the Young Promising Individual and will receive recognition at Congress in March. Congratulations, Carrie! You are a role model and inspiration to many.

Our chapter has been busy this past month. We hosted our 3rd annual winter seminar on January 17 held at East Jefferson Conference Center. The speakers were great with each topic relevant to what we do everyday! Many thanks to the individuals who assisted with making this day a success - Ann, Frances, Mary Anne, Nathalie, Ramie, and Sharon. We cannot forget our wonderful vendors who supported the chapter through their participation - Deana Murray and Beth Ford, CARE Fusion; Ashley Mohrmann, Microtech (ECOLAB); Madelyn York, Eagle Pharmaceuticals; Marc Cook, COOK Financial Group; Gary Kleinschmidt and Mallory Wallin, Olympus America; Curt Coppock, ERBE USA. Our monthly

meeting was held at Ochsner. Peter Graves presented Combating Surgical Site Infections. Many thanks to Ochsner, Mandy, Jeff, Lloyd and Peter for making this happen for our chapter. Everyone who attended received 1 contact hour.

Hard to believe it is already time for the Nominating Committee to develop a slate of officers for 2015-2016 year. The positions available and willingness to serve form can be found in this newsletter. Our Board would love to see individuals who have not been officers get involved with our Chapter. Think about it - we are here to help you!

The next Chapter meeting will be held at New Orleans Hamburger and Seafood located at 817 Veterans Blvd. Everyone will order from the menu, pay their own tab and then we will discuss the upcoming AORN Surgical Conference and Expo scheduled for Denver, CO, March 7-11. Please make plans to attend - this is a great opportunity to socialize and network with peers.

Thank you for what you do everyday. Have a safe and Happy Mardi Gras!

Respectfully Submitted,



Melissa Guidry

Chapter 1902 Calendar

**Meetings start at
4:30 PM unless
otherwise noted**

**February 25th – Pre-Expo
Dinner at New Orleans
Hamburger and
Seafood Company at
817 Veterans Memorial
Boulevard.**

March 25th – ILH

**April 22nd – VA or
Children's**

**May 27th – VA or
Children's**

**June 24th – Installation
Banquet**

Other important dates:

March 7-11 - Surgical
Conference & Expo in Denver,
Colorado

Education

**These Continuing Education programs are in the
January AORN Journal – check them out . . .**

e 1.1 Symptomatic Spinal Epidural Hematoma After Lumbar Spine Surgery:
The Importance of Diagnostic Skills
Alan H. Daniels, MD, Steven S. Schiebert, DO, Mark A. Palumbo, MD

e 2.2 Back to Basics: Implementing Evidence-Based Practice
LISA SPRUCE, DNP, RN, ACNS, ACNP, ANP, CNOR

Legislative Report by Nathalie Walker, MBA, RN, CNOR

Have you ever wondered what your Louisiana Legislators did in this years 2014 Legislative Sessions? Click on this link <http://www.legis.la.gov/legis/CitatorIndex.aspx?sid=14RS> for a complete summary.

And if you're interested in important dates and activities scheduled for the up coming 2015 Louisiana Session you will find that information at <http://www.legis.la.gov/legis/home.aspx>



Nathalie Walker MBA, RN, CNOR
AORN of New Orleans, DOB
Legislative Chair

Community Outreach Project:

Sharon Giardina brings non-perishable items, hotel shampoos, etc. to the homeless shelter at St. Joseph's Catholic Church on Tulane Avenue. Please bring any of the following items to the next meeting:

- Small bottles of shampoo
- Eye glasses
- Non-perishable foods items
- Socks

Thank you!

Current Membership

Please remember to renew!

Total Members - 185
 Lifetime - 5
 2/3yr - 24
 Retired - 7
 Associate - 4
 Student Members - 38
 APSNA - 1

When you renew, please check your membership card to see that it states "Chapter 1902. If your name is then not on our Roster and our Chapter does not receive the chapter dues you pay

Invite all Perioperative nurses to our meetings!

AORN Resources



<http://http://www.facebook.com/AORN>



www.ornurselink.org/Pages/home.aspx

3M has upcoming webinars at which you can obtain free CEU's.
<https://promo.3m.com/rc/3MMEDICAL/ipdeducationwebinarcaendar>



<https://twitter.com/AORNofNewOrlean>

(You are seeing it correctly; there is no "s")

Chapter Webpage:

www.aornofneworleanschapter1902.com

Membership due to Lapse

Membership expires on the last day of your renewal month. Here is a reminder that your membership expiration is in the near future:

January

Roxane Elliot
 Katie Faciane
 Cindy Fitzsimons
 Kelly Kuyper
 Eric Landry
 Wendy Navarro
 Katherine O'Bryan
 Michelle Schafly

February

Michelle Blanke	Ardell Fink
Rachal Bourgeois	Allison Gras
Danielle Byrd	Nancy Iovino
Stephen Desalvo	Carol Fischer
Denise Knight	Tammy Sill
Kellie Lagasse	
Brittany Touns	
Carmelite Guenther	
Yazmine Haidar	
Lindsay Kendall	
Catherine Lapeze	
Katherine Stafford	
Carrie Thomson	
Lindsay Zapalowski	

Membership News

Shirley Broussard retired from Ochsner on Jefferson Highway at the end of December after over 30 years of service.

Mary Anne Toledano is the new OR Educator for the EJGH surgery department.

Carrie Thomson has won a national level achievement award from AORN. She will be awarded the Promising Professional Achievement award at Congress 2015

If you have news from your facility

please send any updates to

mstoledano@ejgh.org

Meeting Minutes - from the secretary:

PLEASE REVIEW January Chapter MEETING MINUTES ON PAGES 4, 5, 6 & 7 for approval.

Meeting called to order at 4:36 PM by Melissa Guidry, president. She welcomed everyone to the meeting. She introduced Peter graves, BSN, RN, CNOR, Senior Manager of clinical affairs at IrriMax Corporation in Dallas, Texas. His presentation was titled, "Surgical Site Infections: A Surgical Approach." He started as a peri-operative nurse and is now involved in research.

To decrease infection rates there must be a change in nursing practice. There are approximately 300 to 5,000,000 surgical site infections (SSIs) per year. SSIs are number two in the top five list of the most common hospital acquired infections (HAIs), with UTIs being number one. Seventeen to 32% of all HAIs are from SSIs. The mortality rate of patients who develop a SSI is 3%.

The fiscal impact of SSIs ranges from about \$ 3,000 for a UTI up to \$100,000 for a sternal wound. The US healthcare industry pays more for increased length of stay and increased readmission rates since insurance companies not reimburse hospitals for HAIs. No one really knows the real infection rate. It's hard to track infection rates with patients having surgery. For example, a patient has surgery at a small surgery center and then is admitted to the big hospital when the SSIs is discovered. Hospitals are now communicating with each other and sharing data on patients that developed a SSI.

Every surgical case is tracked for 30 days, or 90 days for cases involving implants. A patient with a urinary catheter in place during their stay develops can develop staph aureus infection. But staph aureus has an incubation period of three to seven days. Patients are sent home before the incubation period is finished. The biggest problem today is resistant organisms. Bacteria that are resistant to antibiotics have a big impact around the world. There have been 2,049,442 illnesses and 23,000 deaths attributed to antibiotic resistant bacterial and fungal infections in the U.S.

The antibiotic era may be coming to an end. In 2013, the associate director for the CDC and leading expert on antibiotic resistance, Dr. Arjun Srinivasan, stated that "we're in the post- antibiotic era". In the 1980's, there were a lot of new antibiotic classes being introduced. Between 1983 and 1987, 16 new antibiotics were introduced. There were only two introduced between

2008 and 2012. It takes about 10 years and billions of dollars to develop a new one. The public needs to be informed about this crisis. For example, mothers need to stop asking for antibiotics for their child when they have the symptoms of a virus.

The medical community needs to take better care of the drug supply. They need to match the antibiotic to the proper bacteria. Antibiotic use needs to be restricted to appropriate situations. The commercial use of antibiotics in agriculture needs to be restricted. Farmers are using antibiotics for cows, chickens, agriculture, etc. President Obama put out an executive order last year instructing the USDA to find alternatives to antibiotics use in agriculture. He recently doubled the funding for research on antibiotic resistant organisms.

The experts in antibiotic resistance are making recommendations to which the world should adhere. Medical professionals need to wait for the stat gram stain result before prescribing an antibiotic. One controversial recommendation is to stop using antibiotics in surgical irrigation. The antibiotics in irrigation don't kill on contact, they kill long term. They dwell in the wound and are absorbed into the cells. Another recommendation is educating the public about this problem. Perioperative nurses are the ones using evidenced based practices (EBP) in their guidelines. AORN's recommendations are now in a clearing house. Organizations such as the American College of Surgeons (ACS) have their own recommendations, but ACS endorses AORN's recommendations because AORN uses EBPs.

A collaborative model with a multi-disciplinary bundled approach is needed to solve the issue. This model was used to evaluate chlorhexidine gluconate (CHG). The use of this product came about because of a collaborative, team effort. It was a collaborative effort that brought about SCIP measures. SCIP, the Surgical Care Improvement Project, was introduced in 2003 and was supposed to reduce SSIs by 25% by the year 2010. SCIP helped but it did not meet goal. SCIP became a checklist. Compliance was monitored, and SCIP did lower infection rates. The ACS brought us NSQIP in the 1990's. This is another quality indicator that is used to reduce SSIs. The Joint Commission has its own checklist. All these organizations recognize that SSI's are a big deal.

Continued on page 5 →

Meeting Minutes Continued:

Environmental services has one of the biggest jobs in the hospital. They are one of the most underpaid employees and have the highest turnover rate. What they do is incredibly important. But what hospitals focus on is turnover time between cases. Is quality important? Or is quantity the focus? Does anyone validate terminal cleaning between cases? Is the dwell time of the product being followed? Or is productivity important? Physician satisfaction is what managers focus on. But bugs like vancomycin-resistant enterococcus (VRE) can survive up to seven days on surfaces. If the room is not properly cleaned and then SSI rates will never decrease.

If the paradigm is not changed the medical field will be a victim of it. These are some of the solutions being recommended:

1. Surgical attire: AORN recommends that scrubs be facility laundered. A randomized study was done on home laundered scrubs and hospital laundered scrubs. Cultures were done on worn scrubs, and the results showed that home laundered scrubs had higher bacterial burden on them.
2. Double gloving: staff should double glove on all procedures. Even with perfect hand hygiene, there will still be bacteria on their hands. A needle stick on a single glove can infect a wound.
3. Wear eye protection: eye protection should be worn on all procedures to protect staff from micro-splatter.
4. Traffic in the OR: how often does staff open and close the OR door? Why does the rep have to go in and out of a room to get different sizes for a total joint? Needed supplies should be stocked in the room before the case begins.
5. Scrub sinks: are staff washing their hands before using the alcohol based agents? Alcohol based agents are supposed to be used on clean skin, per the manufacturer's instructions. Is anyone monitoring the process? Residents need to be watched.
6. Sterile processing: how often are instruments being flashed? Why are sets being flashed?
7. Sterile supply storage: should sterile supplies not used in a case be returned to the supply room? Methicillin-resistant Staphylococcus aureus (MRSA) can live on the outside of a sterile package for up to 38 weeks. Hand washing is critical.

8. CHG prep: is the skin clean before we prep? Patients need to be clean entering the OR. Prep needs to go on clean skin. Patients need to bathe the night before and the morning of with CHG soap. If the patient isn't clean, first clean the skin with dial soap, and then prep.

9. Preoperative antibiotic dosing: are we giving the patients the right antibiotic at the right time? Dosing needs to be weight based. Intraoperative re-dosing may be required during longer cases to maintain therapeutic serum and tissue concentrations. If using a cell saver, remember that they wash out antibiotics.

10. CHG prep dry time: is the prep dry before we drape? The manufacturer recommends a three minute dry time. It takes up to an hour for it to dry on hair.

11. Sterile field: is the sterile field being protected? RNs and STs need to protect the sterile field. The longer the case, the bigger the risk of contamination. Follow the protocol for sterile technique and good things happen.

12. Bacitracin in irrigation: is it good science? Or holy water? Where is the science for using antibiotic irrigation? With antibiotic resistant bacteria, surgical irrigation needs to be revisited. Of the participants of a study, 48 % said it was medically necessary. There is no antibiotic indicated for surgical irrigation. Povidine iodine in irrigation does not guarantee sterility. Some batches of povidine iodine have been found to be contaminated. Can CHG be used for surgical irrigation?

CHG is a soap with surfactants. There is a black box warning on the packaging. It is not indicated for use under the skin. But the CDC just approved a sterile CHG solution with 0.05 % CHG for irrigation. CHG is a positively charged molecule that binds to tissue. Bacteria is a negatively charged molecule. When bacteria comes into the wound, the CHG releases from the tissue and attaches to the bacteria's cell wall and rapidly absorbed. This kills the bacteria quickly. Povidine iodine and antibiotics kill bacteria much slower. Antimicrobials kill on contact. But does 0.05 % CHG have efficacy? Studies have shown it to be effective.

The medical field needs to define the delivery method and volume of irrigation. If you break the integrity of the skin, when to irrigate? Some studies show the percentage of SSIs that involve the incision is 60-80%. Only 20-40% of SSI's are in deep in the wound. Some current studies are irrigating at each closure level.

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Meeting Minutes Continued:

Angiogenesis takes four to six days after surgery. The wound needs to be as clean as possible. It needs to be protected. Antimicrobial dressings reduce the bio-burden and protect the wound.

With decreasing reimbursement, the medical field needs to change the paradigm. Do we adopt CHG irrigation? Is it worth the cost? It's time to decide.

Melissa started the business portion of the meeting at 5:44 PM.

Reports from the Officers, the Board, and Standing Committees:

Minutes: There was no meeting in December.

Treasury Report: Sharon Guardina reports that there is \$5339.74 in the treasury. The chapter made \$2300.74 from the winter seminar. There is still money in the paypal account from the winter seminar that has not been transferred to the account yet. The profit from the vendor fair was \$1200. The silent auction made \$219.00. With 28 participants at the winter seminar we made \$935.00. Sharon is waiting for \$115 from checks that were mailed. The food expense was \$160.00.

Membership: Ann Burghardt-Dieck recruited 13 new members during the AORN Recruitment Rewards Chapter Challenge. We also recruited four new members for a total of 17 new members. Our chapter was the winner of the \$1000.00 grand prize. Ann Burghardt-Dieck was a 'super recruiter'. Thank you to all members and especially Ann, who had a direct impact on us winning this award.

Old business:

The winter seminar was a big success. See treasury report for more details. The thank you notes have been sent out to all speakers for giving their time to our group. Nathalie has reserved the room at EJGH for the next seminar on January 16, 2016.

New business: As mentioned in membership, our chapter was rewarded with recruitment award of \$1000. Thanks Ann!

Carrie Thomson has won national level achievement award from AORN. She will be recognized at congress.

Accountability standards for our chapter are due at the end of February. Our chapter needs to send in a bank statement, the number of delegates last year and who we sent to the leadership conference. The chapter needs to develop a budget to send. Some chapters are not utilizing the AORN money correctly. AORN wants to make sure chapters are using the money correctly.

Shirley Broussard retired at the end of December from Ochsner on Jefferson Highway after over 40 years of service.

The True North Award application was sent in November. No word yet on the winners. If we were chosen it gives us five CNOR recertifications for members and \$1500. The winners should be announced soon.

Nominating committee: The nominating committee is putting together a ballot for the upcoming chapter election. Ramie will be sending out information soon. The chapter needs to replace the president elect, treasurer, three board members and two nominating committee members.



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Meeting Minutes Continued:

Please try to recruit new members to run for office.

The next meeting was scheduled to be a pot luck at someone's home on Feb 25th 4:30. Instead of having it at someone's home it will be the New Orleans Hamburger and Seafood Company on Veterans by Martin Berhman. The address is 817 Veterans Memorial Boulevard. Melissa made a reservation for us for a private room.

The chapter needs to donate an item for the foundation's silent auction at the AORN Expo in Denver. Nathalie Walker suggested the chapter a kindle fire from Amazon Smile so the foundation would get the 0.5% donation as well as have the item shipped straight to the foundation. Sharon Guardina stated that historically the chapter donates \$100 to the silent auction and \$200 donation to the foundation for the foundation challenge. Nathalie suggested the \$200 be earmarked for the Louisiana council scholarship fund. She also recommended that anyone making a donation designate it to the Louisiana council scholarship fund. That way the scholarship fund grows. The Louisiana council scholarship is set up to help an AORN member in Louisiana that is advancing their nursing degree. Nathalie made a motion to donate \$100 to the silent auction and \$200 to the Louisiana council scholarship

fund. No one opposed the motion and it was adopted. Sharon Guardina made a motion that Mary Anne Toledano buy the Kindle on Amazon Smile for the silent auction. Nathalie seconded the motion.

Education: Mandy Martin-Sanchez had nothing to report.

Legislative: Nathalie will be on a conference call Friday with AORN board about new legislative changes. She will keep everyone updated. Virginia and North Carolina are working on an RN circulator bill. Nathalie attended the Louisiana Action Coalition's first interdisciplinary conference in Baton Rouge. It addressed nurses, physicians, PAs, nurse practitioners, etc. The topic was the future of health care in Louisiana. There were 350 people in attendance. Nurse practitioners are trying to be able to work without the barriers and restraints of physicians. Nursing should never be under the medical board. Sharon Guardina stated that that AMA allows physicians to delegate to anyone they want, even unlicensed personnel.

Newsletter: Mary Anne Toledano asked that members please send her their news.

State council: The state council met last month. They are selling t-shirts. If anyone in our chapter buys a shirt the chapter will make about \$3 on each purchase.

Meeting adjourned at 6:22 PM.

Zander CNOR Prep CNOR Exam Prep and Review Course

Crawford Conference Center
East Jefferson General Hospital
March 28-29, 2015

16.0 contact hours provided

Register online at:
www.periop-ed.com

or

Zander Perioperative Education
245 Murphy Lane
Belton, SC 29627

E-mail: wendy@periop-ed.com

Phone: 803-271-0744 ext. 102

Need Volunteer Hours for Clinical Ladder?

The New Orleans Medical Mission needs volunteers. They meet at 625 Distributors Row on Wednesday and Saturday mornings from 9 am 1 pm. They pack inventory to get it ready for shipping to locations in need. If you need volunteer hours they would love your help. They also go on medical missions. They are collecting school uniforms and sports uniforms for Honduras. If anyone is interested in volunteering or have donations please contact Mary Morvant at Robotqueen311@hotmail.com.



AORN SURGICAL CONFERENCE & EXPO 2015 News

March 7-11, 2015

Chapter 1902 is allotted 8 delegates for the 2015 Surgical Conference and Expo. The information has been listed in the newsletter and discussion occurred at the October meeting. The following members have submitted willingness-to-serve forms and have been approved as delegates by the Board.

Melissa Guidry – automatic
Mandy Sanchez - automatic
Sarah Hunsucker
Sharon Guardina

Linda Levesque
Ramie Miller
Mary Anne Toledano
France's Hughes



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- Under 'Have an Account or already a member' section enter:
 - User Name: Enter your email address used for your AORN login
 - Password: Enter your last name, all lowercase. If you have a multiple word last name, eliminate any spaces. You may change your password after initial login.

2015-2016/2017 AORN of New Orleans - Chapter Willingness-to-Serve Form

Officer/Board/Delegate Willingness-to-Serve Form

Chapter # 1902

- I am aware of the eligibility requirements and responsibilities for this position and I have received a copy of the job description/responsibilities for the position.

Indicate position:

- ___ President/Elect (1/1 years)
- ___ Treasurer (2 years)
- ___ Board of Directors (2 years)
- ___ Nominating Committee (1 year)
- ___ State Council Alternate Delegate (2 years)

- I am willing to serve the Chapter in the position indicated for the term indicated on this form.

Indicate term of office:

- ___ 2015/2016 -or-
- ___ 2015/2017

CURRENT Active Membership is Requirement

Please check all others that apply:

Maintained active membership status. (June – May of previous year)

Attended two meetings during current year. (July, August, September, October, January, February)

Attended Chapter Seminar

Volunteer activity record is attached.

Served on at least one committee. (June – May of previous year)

Served on Board for one term. (Applies only to President, President-Elect, or Vice President)

Signature:

Date:

Name (please print):

Address

City

State

Zip

E-mail:

Work phone:

Home phone:

Return 'Willingness-to-Serve' form by March 25th, 2015 to:

Ramie Miller, MSN-HCSM, RN, CNOR
201.681.4636
ramiemiller@yahoo.com
Nominating Committee Chair