



PERIOPERATIVE POTPOURRI

New Orleans - Chapter 1902

April 2015

President's Message

2014- 2015 Officers

President

Melissa Guidry, BSN, MPH, RN,
CNOR guidrymelissa@yahoo.com

President-elect

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Linda.Levesque@hcahealthcare.com

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CNOR, Chair

LA State Council Liaison

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Carrie Thomson, BSN, RN, CNOR
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It is now officially Spring and we are feeling the rising temperatures, especially the humidity. As we all know, there is nothing we can do about it but embrace the warmth and crank up the A/C. It is also time for the Nominating Committee, chaired by Ramie Miller, to develop the ballot for 2015-2016. Within this newsletter, you will find the slate of officers to be elected. All of the candidates listed have completed willingness-to-serve forms. At the April meeting, I will ask for nominations from the floor. If there are none, a motion will be made to accept the ballot as published in the newsletter. All members in attendance will vote to accept. I encourage all of you to review the ballot and attend our April meeting - be involved and have your voice heard.

Our Chapter sent eight delegates to the AORN Surgical Conference and Expo in Denver. All eight delegates attended the required sessions and had their voices heard. The House of Delegates voted for a \$35 per year dues increase to start July 2015. There were also two Bylaws changes. The March Business meeting minutes are included in this newsletter and provide additional information concerning the House of Delegates.

We would also like to send special congratulations to Carrie Simpson Thomson for receiving the Promising Professional Award.

The next several months are planned. Our April meeting will be held on the

22nd at Ochsner. We would love to have you join us for dinner and an educational session. Details on the meeting can be found in this newsletter. Our May meeting will be at Tulane on the 27th. June is installation month and we are currently planning an educational session to coincide with our dinner. Please mark your calendars for June 24. Mandy Martin-Sanchez will be installed as our President for 2015-2016. Remember all of these dates are on Wednesday!

There are many events in New Orleans in April. Besides Good Friday and Easter, there is also the Crescent City Classic road race, French Quarter Festival and first weekend of Jazz Fest to name a few. If you plan on partaking in any of these activities, have a great time and be safe! Thanks to all our wonderful members and thanks for what you do everyday to make surgery safe for our patients!

Respectfully Submitted,

Melissa Guidry



Chapter 1902 Calendar

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



**April 22nd
Ochsner Jeff Hwy**

May 27th Tulane

**June 24th –
Chapter 1902
2015-2016 Officer
Installation
Banquet, location
TBA**

Education

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

- 1.2  Delivering Quality Pain Management: The Challenge for Nurses. KIM HAYES, MSN, RN, CPAN; DEBRA B. GORDON, DNP, RN-BC, ACNS-BC, FAAN
- 1  Guideline Implementation: Surgical Attire
LIZ COWPERTHWAIT, BA; REBECCA L. HOLM, MSN, RN, CNOR

Legislative Report by Nathalie Walker, MBA, RN, CNOR

AORN Board Approves 2015 Legislative Priorities Publish Date: 3/2/2015

The Association of periOperative Registered Nurses promotes and responds to legislative and policy issues that impact the practice of perioperative nursing and patient safety in the surgical environment. AORN works collaboratively with health care colleagues, organizations, and decision-makers to advance patient safety and health care improvements in all operative settings, but does not endorse specific candidates.

RN as Circulator: Every surgical patient deserves a dedicated perioperative registered nurse circulator for the duration of any operative or other invasive procedure. AORN actively promotes laws and regulations to ensure the supervisory presence of the registered nurse circulator in the perioperative setting for patient safety.

Registered Nurse First Assistant (RNFA): AORN supports the expanded role of the RNFA by actively working to obtain reimbursement parity for RNFAs at the state-level and in the health insurance marketplaces formed under the Affordable Care Act.

Workplace Safety: Perioperative nurses deserve strong workplace violence protections and safe patient handling programs focused on injury prevention. AORN supports legislation and policies that eliminate manual patient handling. Institutions should also have strong and enforceable safety policies for the operating room environment on such issues as sharps safety, infection control, environmental cleaning, electrical cord placement, and surgical smoke.

Institutions should provide appropriate emergency preparedness supplies and training. AORN supports legislation and regulations that create a safe and healthy work environment such as increased penalties for those convicted of assaults of health care personnel and the establishment violence prevention programs.

Patient Safety Culture: AORN encourages legislative and regulatory efforts to establish an accountable, trusting patient safety culture in the perioperative setting, such as robust whistle blower protections for health care providers and mandatory reporting on safe surgery checklist use.

Professional Practice: AORN protects the perioperative registered nurse's scope of practice and patient safety by engaging in legislative, regulatory, agency, and other stakeholder approaches to RN education, certification, supervision, roles, competencies, and duties.

Health System Improvements: AORN promotes the role of the perioperative registered nurse in achieving the reform goals of cost containment and improved patient experiences and outcomes. Health care system reform efforts should

Continued on page 4

Current Membership

Please remember to renew!

Total Members – 190

Standard - 100

Lifetime – 5

2/3yr - 24

Retired – 10

Associate – 3

Student Members - 46

PEP Tier 1 Large Hospital 2

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.



Please 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/ipdeducationwebinarcalendar>



<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:

March

Stephanie Andrews

Judy Bauer

Jill Donegan

Monica Moliniare

Geri Tannehill

Anthony Woods

April

Kathrine Beaty

Caroline Conway

Mary Jo D'Amico

Rosa Flores-Castellon

Raymie Gogolen

Rosalie Gonzales

Charissa Gordon

Mary K Harvey

Shirley Himel

Summerlin Holzhalb

Anita Jackson

lucy kim

Linda Levesque

Warren Roesch

Mary Anne Toledano

Membership News

Carrie Thomson won
the Promising Professional
Achievement Award at the 2015
AORN Conference and Expo.
Congratulations Carrie!

**If you have news from your
facility**

please send any updates to

mstoledano@ejgh.org

Legislative Report Continued

recognize the contributions of the perioperative registered nurse in improving patient outcomes. AORN also promotes standardized data collection and analysis to advance improvements in patient safety and care quality.

New Advocacy 101 Handbook:

Publish Date: 3/3/2015

[http://www.aorn.org/Advocacy/Supporting Documents/Tools and Resources/Advocacy 101 Handbook.aspx](http://www.aorn.org/Advocacy/Supporting_Documents/Tools_and_Resources/Advocacy_101_Handbook.aspx)

The AORN Government Affairs department just released a new Advocacy 101 Handbook for members. Inside the handbook, you will find a wide variety of information, tools, and resources you can use to be an advocate for the perioperative nursing profession and patient safety.

LEGISLATIVE RESOURCES

Agency for Healthcare Policy and Research
 American Nurses Association Government Affairs
 Locate your U.S. Representative
 Locate your U.S. Senator
 Louisiana Legislature

Nathalie Walker MBA, RN, CNOR



Did you know that you can donate to the AORN Foundation with every Amazon purchase without any extra cost to you?

AmazonSmile. You shop. Amazon gives.

- Amazon donates 0.5% of the price of your eligible AmazonSmile purchases to the charitable organization of your choice.
- AmazonSmile is the same Amazon you know. Same products, same prices, same service. Go to <http://smile.amazon.com/>

SURGICAL
CONFERENCE
& EXPO 2015

NEWS



**Congratulations to
Carrie Simpson
Thomson!**
She was awarded
with the
**Promising
Professional
Achievement
Award**

2015 | ELECTION
Your voice counts!



 **AOR N** SURGICAL
CONFERENCE
& EXPO 2015

The ELECTION results are in!

President-elect: Martha Stratton

Treasurer: Stephanie Davis

Board of Directors: Jay Bowers, Sandy Albright, George Allen,
Jane Flowers

NLDC: Kristy Wheeler and Kristy Simmons



Meeting Minutes - from the secretary:

PLEASE REVIEW the March Chapter MEETING MINUTES on pages 6, 9 and 11 for approval.

Meeting called to order by Melissa Guidry at 16:35. The March 25th meeting was at ILH. Stacy Spiers, RN and Sheila Mays, RN from Molnlycke Health Care presented "Latex or Synthetic (Latex-free) Gloves? Risk Reduction Strategies" for two CE credit from Pfiedler Enterprises.

What is a latex allergy? It is an acquired allergy with no distinction between race and gender. There is no true test or cure for latex allergy. It is a concern for both health care workers (HCW) and the general public. It is acquired after exposure to latex over time.

Latex has long been the "Gold Standard" for glove material. Most HCW are hesitant to change. Powdered latex gloves are the largest single contributor to latex aeroallergen levels in a healthcare facility. Gloves are now being worn to start IV's, in hair salons, nail shops, etc

Proteins enter the body and cause allergies to develop. They enter the body for the first time and the body decides if it likes it or not. If the body does not like it, the second time it is exposed it is sensitive to it. A latent period, however, can last up to 20 years. The body may show signs of sensitivity with mild to severe symptoms. The sensitivity will eventually become a full blown allergy. One out of every five adults has a sensitivity to latex. Kids with spina bifida, congenital urogenital abnormalities, cerebral palsy or have multiple surgeries will have a sensitivity to latex due to the frequent exposure to latex. One out of 50 health care workers convert to an allergy every year. Chemo patients, asthma patients and transplant patients are at risk. Transplant harvest is

usually done with latex gloves.

Latex comes from a plant. Fruits, vegetables and nuts have a similar genetic chain. Bananas, figs, kiwi, peaches, grapes, papaya, nectarines, melon, cherries, strawberries, plums, and pineapple, celery, tomatoes, avocados, potatoes, chestnuts, hazelnuts, wheat and rye are all in the same genetic family. One rubber tree can be milked for 20 years. Once the latex is harvested, the worker starts adding chemicals. Mainly consists of polymer providing strength and elasticity. Also contains sugars, lipids, nucleic acids.

Latex is everywhere. There are 40,000 different household products that have latex. There are 17,600 medical devices with latex, (gloves, syringes, tubing, foley, etc.) Latex exposure can occur through skin absorption, inhalation, ingestion, mucosal absorption and intravenous (rubber stopper).

There are three types of reactions to latex:

1. Irritant Contact Dermatitis-gradual scaling, drying, cracking of skin.
2. Allergic Contact Dermatitis-this is an allergy to the chemicals added to the latex after harvest. Symptoms, which begin six to 48 hours after exposure, are rash, red, raised, palpable area with bumps, sores and cracks. They may have scars from constant exposure.
3. Immediate Reaction Hypersensitivity-this is a true latex allergy. Symptoms occur within minutes or up to two hours after exposure. Symptoms can be redness, hives, itching, facial swelling, urticaria, respiratory

Continued on page 9

Is your facility CNOR Strong?

Two criteria must be met for your facility to be recognized by CCI as *CNOR Strong*:

1. At least 50% of eligible perioperative nursing is staff CNOR certified.
2. Facility consistently recognizes and rewards nurses who become CNOR certified or recertified.

<http://www.cc-institute.org/cnor/cnor-strong>





Get started today on to your free membership!

- ❖ Visit ANA.org and select "My ANA" button.
- ❖ 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.

Need Volunteer Hours for Career 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.

Community Outreach Project:

Please bring non-perishable items, hotel shampoos, etc. to next meeting for the homeless shelter at St. Joseph's Catholic Church on Tulane Avenue. Sharon Guardina will drop them off to the shelter.

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

Thank you!

TRIVIA from the AORN

PERIOP INSIDER

Weekly Newsletter

WHAT ARE THE SEVEN STANDARD PRECAUTION PRACTICES FOR PREVENTING TRANSMISSION OF INFECTIOUS DISEASES?

Standard precautions are the foundation for preventing transmission of infectious diseases and apply to all patients and across all health care settings (eg, hospitals, ambulatory surgery centers, free-standing specialty care sites, interventional sites).

Standard precautions practices include practices for hand hygiene, personal protection equipment (PPE), patient resuscitation, environmental control, respiratory hygiene/cough etiquette, sharps safety, and textiles and laundry. For more information, see the [Guideline for Transmissible Infections](#).

WHY SHOULD DOORS TO THE ORS OR PROCEDURE ROOMS BE CLOSED EXCEPT WHEN MOVING PATIENTS, PERSONNEL, SUPPLIES AND EQUIPMENT?

Researchers have found a significant relationship between the development of surgical site infections and the number of door openings. When the doors are left open, the HVAC system is unable to maintain critical environmental control parameters. Leaving the door open can disrupt pressurization. The ventilation system in the OR is designed to administer air pressure that is greater than the pressure in the semi-restricted area. The ventilation system is also designed to facilitate 20 total room air changes per hour. For more information, see the [Guideline](#) for a [Safe Environment of Care, Part 2](#).

WHERE SHOULD FORMALIN BE STORED FOR THE OR AND PROCEDURE ROOMS?

Formalin should be dispensed and stored in an area other than the OR or procedure room unless ignition sources are not used and the regulatory requirements for locations where formalin is used and stored are met. Storage and use of formalin is regulated by the Occupational Safety and Health Administration and other federal and state health regulatory agencies.

Locations where formalin is used must have:

- posted signs warning of formaldehyde use
- eyewash stations available within the immediate area
- ventilation systems with adequate capacity to maintain levels below the permissible exposure limits (ie, eight-hour total weighted average of 0.75 ppm or 15-minute short-term exposure limit of 2.0 ppm)

For more information, see the [Guideline](#) for Specimen Management.

Meeting Minutes Continued:

anaphylaxis reactions end in death.

If someone knows they have a sensitivity or allergy to latex they have to choose a career carefully. Up to 35 % of HCW have to change jobs when it becomes an issue. They may end up getting a reduction in pay just to get a job where they are not exposed to latex. The cut in pay can be as much as 24%.

The AORN guidelines suggest preventing complications in patients who are allergic or sensitized and minimizing exposure to prevent the development of sensitization. Hospitals need to have a screening questionnaire for natural rubber latex sensitivity. AORN has a good one online. Follow through by questioning the patient about any answers that may be suspicious. There was a 4.7 million dollar award for a wrongful death of a patient who experienced anaphylactic shock. The patient had filled out a questionnaire and had put that she was allergic to chestnuts. No one looked at the form or followed up with her on that answer. Through a root cause analysis, it was shown that staff did not follow their own policies and procedures. That is why the hospital lost the law suit. Dollar signs can make hospitals go latex free.

Hospitals lose a lot of money every year from using latex gloves. Tearing down a back table after learning their patient is allergic to latex, treating an anaphylactic episode, idle OR time and the time it takes to prepare a latex free environment all cost the hospital money. Wasting one pack a week at \$300 a pack would cost \$15,600 in a year.

Surgeons remember the old gloves and may hesitate changing to latex free. Many hospitals are going latex free. The new FDA mandated term for latex free is synthetic.

Melissa Guidry thanked Sheila and Stacy for the presentation and then began the business part of the meeting. The winning ticket for the 50/50 raffle was pulled and Melissa Guidry won \$6.50.

Old business:

Melissa asked if anyone had any changes to the minutes that were posted in the March newsletter. There were no corrections and the meeting minutes were approved.

Treasury Report: Sharon Guardina was unable to attend. Report deferred.

Expo News: Our chapter sent eight delegates. All eight delegates attended all necessary meetings. Out of 39,707 members, only 1542 members voted. Results read by Melissa: President-elect, Martha Stratton; Treasurer, Stephanie Davis; Board of Directors, Jay Bowers, Sandy Albright, George Allen and Jane Flowers; NLDC: Kristy Wheeler and Kristy Simmons. Congratulations to Carrie Simpson Thomson for winning the Promising Professional Achievement Award.

The House of Delegates (HOD) went very smooth. There were two bylaws changes that were voted on in Denver. One was that the BOD was approved to determine a dues increase within a restrictive range. The maximum that dues can increase is \$10 within any given year. The second change was number of delegates needed for special meetings. When something needs to be approved, there needs to be a special meeting with ten members from all five regions in attendance online.

There was a proposed dues increase voted on in Denver. Effective July 2015, the dues will be increased by \$35 a year. The BOD is looking at being able to pay dues in installments

New business:

Nominating committee: Ramie Miller reported that the ballot has Sarah Hunsucker, Crystal Cook and Ann Dieck running for BOD. We need to vote for two for BOD. Sheila Ostrow is running for treasurer. The ballot will be in the April newsletter.

Education: Mandy Martin-Sanchez has CareFusion talking at the next meeting at Ochsner in Monroe Hall near the cafeteria. Dr. Charles Edmondson will come talk to us. The date is April 22nd and there is no CE credit available for this meeting.

The Installation Banquet location will be announced soon. Café East is a possibility. A talk on "Position for Prevention" given by Kim McCarthy for two CE. The dinner may be sponsored so the money raised would be put in the treasury.

Newsletter: Mary Anne Toledano reported that the April newsletter needs to go out early because she is going out of town. She asked that members please send her their news before Friday, March 27th. The newsletter will be going out on Monday, March 31st.

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New from AORN

myAORN guidelines



Check it out!

<http://www.surgicalproductsmag.com/news/2015/03/myrounding-and-aorn-announce-partnership>

or

http://www.aorn.org/Books_and_Publications/Guidelines/My_AORN_Guidelines.aspx

AORN and MyRounding recently announced their partnership to create a new product called “myAORNguidelines.” MyAORNguidelines enables managers and administrators to easily implement, analyze, and sustain compliance with AORN’s Guidelines for Perioperative Practice in hospitals and ambulatory surgical centers.

The robust application reduces the amount of work and time that is required to audit, report, and give feedback. It automatically identifies the gap between how guidelines are being implemented and optimal adherence to the most current Guidelines. Further, it has a powerful issue management function that allows for issues to be identified, assigned, tracked, and monitored.

The following request comes from Dr. Carol Bickford at ANA's Nursing Practice & Work Environment:

Please consider responding with your recommendations and comments. Do share with others!

ANA’s Nursing Scope and Standards Revision Workgroup invites review and public comment on the draft Nursing: Scope and Standards of Practice, Third Edition. Please read the entire draft document and then submit your comments in the appropriate category. Note the change in the definition of nursing, extensive revision of the scope of practice statement, and refinement of the standards and accompanying competencies, especially for Standards 5 Implementation, 5A Coordination of Care, and 5B Health Teaching and Health Promotion. The workgroup is particularly interested in your thoughts about the addition of the new Standard 17 Cultural Congruence. Go to: <http://www.nursingworld.org/HomepageCategory/NursingInsider/Call-for-Comment-Draft-Nursing-Scope-Standards.html> Closing Date is April 6, 2015.

Meeting Minutes Continued:

Legislative: Nathalie reported that she has submitted the news to Mary Anne Toledano for the April newsletter. Please read the legislative news in the newsletter.

State council: The next meeting will be on April 11th from 10 am to 1 pm. Location TBA. The state treasurer position will be open this summer. Please get in touch with Ramie Miller if you are interested.

Membership: Ann Dieck has clinicals on Wednesdays

and can not make the meetings.

Fund Raising: It's time to start planning the January seminar at EJ. Nathalie Walker and Frances Hughes will start working on getting speakers to come

Bylaws: This year the chapter needs to review the bylaws. Some items may need to be changed.

The May 27th meeting will be at Tulane for one CE credit.

Meeting adjourned at 6:35 PM.

AORN OF NEW ORLEANS – CHAPTER 1902 2015 BALLOT

PRESIDENT/ELECT - (select one)

Sharon Guardina

TREASURER- (select one)

Sheila Ostrow

BOARD OF DIRECTORS - (select three)

Ann Burghardt-Dieck

Crystal Cook

Sarah Hunsucker

NOMINATING COMMITTEE - (select two)

Carrie Thomson

Frances Hughes

INSTRUCTIONS FOR VOTING

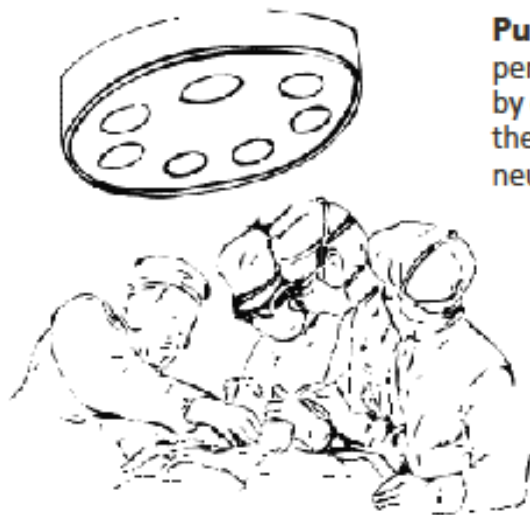
1. Indicate your choices with an "X" in the box in front of the person's name.
2. Place you Ballot in a sealed envelope marked Ballot
3. Place in an additional envelope with either your name if hand delivered or your return address, if mailed.
4. Ballot should be received by mail before, or brought to meeting on, May 27th.

If mailing, please mail to Nominating & Leadership Committee Chair:

Ramie Miller, MSN-HCSM, RN, CNOR
719 Haring Rd.
Metairie, LA 70001

Signature _____ Date _____

SURGICAL INTERVENTIONS FOR THE CRITICALLY INJURED



Purpose: Increase and enhance the knowledge of perioperative professionals in the specialty of trauma by describing and discussing surgical interventions for the treatment of trauma patients including neurosurgery, orthopedic surgery, and general surgery.

| Speaker | Topic |
|--------------------------|---|
| Dr. Alcalde | Maxiofacial Trauma |
| Dr. Collins | Traumatized Upper Extremity |
| Dr. Guzman | Fractures of the Hip |
| Dr. Leach | Mechanisms Sequelae of Ortho Trauma |
| Dr. Lin | Head Trauma |
| Dr. O'Connor | Shock |
| Dr. Swartz | Tibia Fractures |
| Dr. Vieux | Liver & Chest Trauma |
| Dr. Nemitz | Complex Fractures of the Hind Foot |
| Dr. Habib/ Dr. Lawlor | Construction Remolding to Tissue Repair |

Cost: Free

To Register: e-mail darlenemurdock@hotmail.com

Collaborators: Lee Memorial Health System & AORN Neuro, Ortho, & Trauma Specialty Assembly

ELITE SPONSORS



May 2 & 3, 2015 Sat. 0800-1600, Sun 0800-1300

Reception Friday, May 1

Holiday Inn Gulf Coast Town Center

9331 Interstate Commerce Drive

Fort Myers, FL 33913

For Hotel registration call 239-561-1550 or click on the following link: [Lee Memorial 2015 Trauma Seminar](#)

Discount room rates (\$99) for conference attendees. Reference Lee Memorial Trauma Seminar.

This activity has been submitted to the Association of periOperative Registered Nurses, Inc. for approval to award nine contact hours. The Association of periOperative Registered Nurses, Inc. is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Activities that are approved by AORN are recognized as continuing education for registered nurses. This recognition does not imply that AORN or the ANCC Commission on Accreditation approves or endorses any product included in the presentation.