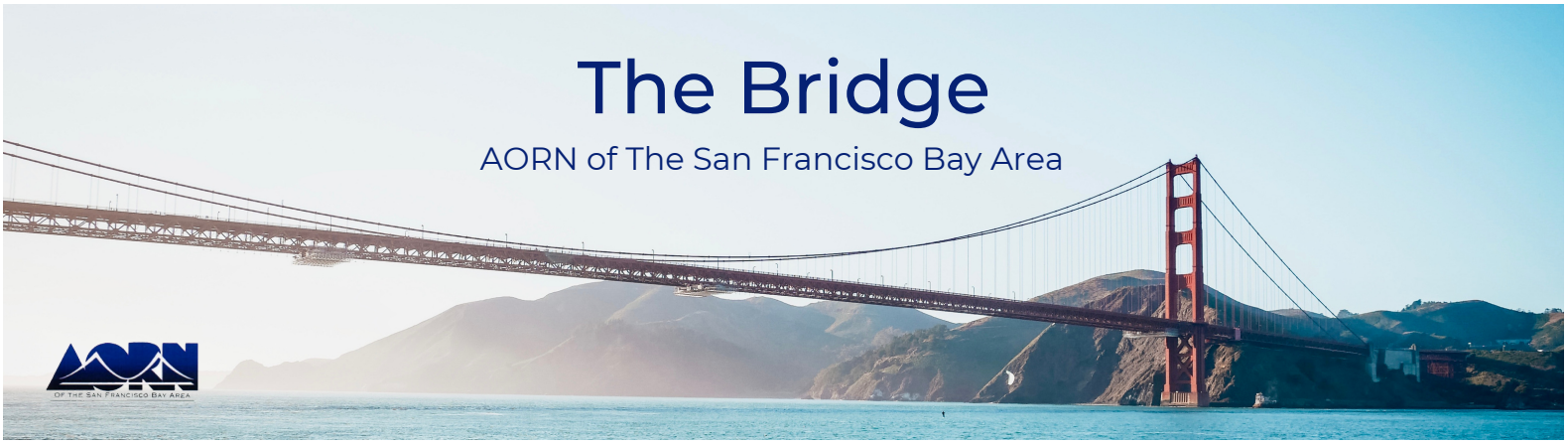

The Bridge

AORN of The San Francisco Bay Area

Chapter #0512

November 2021

Co-President's Message

Did any of us ever think we would live to experience the current global crisis caused by the Covid pandemic? I find myself asking the same questions over and over. When will it end? Why did vaccination get politicized in the first place? Where would we be if no one took the polio or smallpox vaccines? Isn't this proof science works? Why can't those not getting vaccinated see the very straight dotted line between vaccination and control of this virulent I see? I return to the same conclusion; we are not yet getting ahead of this thing. We are merely monitoring the vaccine rate, and thus the Covid virus spread, as we do when administering an antibiotic to achieve therapeutic levels; watching it peak and trough and hoping eventually it will do the trick. However this analogy only goes so far.

This difference is, other variables prohibit reaching that therapeutic range we should be able to achieve. These variables include misinformation, lack of education and common sense, a misplaced sense of entitlement of an individual's right at the expense of humanity, disregard for public health, and perhaps even the belief vaccination is about power and control. For some individuals and groups the Tuskegee studies come to mind and are associated with forced vaccinations and some cases of serious side effects. So, what variable will have us turn the corner? What does this have to do with the profession of Nursing and specifically Perioperative Nursing? Everything!

Regardless of one's political beliefs and values our foundation of practice is the data driven evidence base generated by quality research findings. Lifelong learning, staying up to date with the current (and even changing) science, and implementing evidence-based practice validates clinical interventions and yields the empowerment to call nursing a profession by definition criteria. This body of research is the foundation for our standards of practice. This is nursing science. (Continued on page 3)

Upcoming Events

Dec. 2	AORN Live Webinar
Dec. 11	Education Program & Holiday Party, Burlingame
Dec. 31	Application deadline - First-Time Expo Attendee Scholarship
Dec. 31	Application deadline - Chapter Delegate
Jan. 6	Chapter Board Meeting via Zoom, 7pm
Jan. 22 & 23	AORN Prep for CNOR
Jan. 29	MedShare volunteer morning
Feb. 3	Chapter Board Meeting via Zoom, 7pm

Acknowledging the good that you already have in your life is the foundation for all abundance.

~ Eckhart Tolle

2021/2022 Chapter Officers & Board

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Co-President's Message (continued from page 1)

Research findings give us the “why” to support the “what, when, where, and how” of every move we make as the patient advocate. It elevates us from task-oriented behavior to critical thinking rationale for the interventions we implement. Advocacy is a word liberally tossed around as the primary role of the perioperative registered nurse. How many times have you said this out loud when challenged for ensuring safe care? “As the patient advocate I must.... “. But have you thought about what it really means or what gives each nurse the power to assert the role? It is the evidence base generated from multi discipline growing bodies of knowledge and research that gives us this power. It is the science, remembering the science is ever evolving and some information even short lived. For example, the use of hormone replacement therapy for post-menopausal women. Ongoing investigation made it not nearly as advised when serious side effects were discovered.

Nursing is also an art. The “art” portion of our practice is reflected in our intuition and the qualitative skill set we gain with experience. Patricia Benner’s work clearly establishes this in her “Novice to Expert” conceptual framework. We use the art of nursing during pre-operative interviews, particularly when we assess body language of our patients and their families and when interpreting all the other non-verbal forms of communication. We use the art of nursing when we anticipate a surgeon's need for a suture, supply, or instrument and we have it “at the ready” before they ask for it on the field. We use the art of nursing when we need to delegate, collaborate, and coordinate care. We’ve gotten so skilled all of this is transparent to others and we forget it ourselves.

It is the balance of art and science in our daily practice that best serves our patients, their families, and our communities as we continue to ride the peaks and troughs. I am hopeful each perioperative registered nurse will find that balance to change the trajectory of the pandemic from the ups and downs to an upward only trend and gain understanding of individual power to influence changes needed to make that happen.

Respectfully,
Colleen A. Fiammengo SNIV, MSN, BSN, CNOR, PHN, CCM

Clinical Corner

A Nurse asks: We have a surgeon who keeps dropping the bovie pencil on the drapes after he uses it. We “remind” him to put it back into the holster and tell him it could cause a fire, but he keeps doing it. Do you have any suggestions on how to get him to stop?

Answer: One suggestion- keep the bovie pencil and holster next to the scrub person. When the surgeon needs it, he will have to ask for it. The scrub can then replace it in the holster after each use.

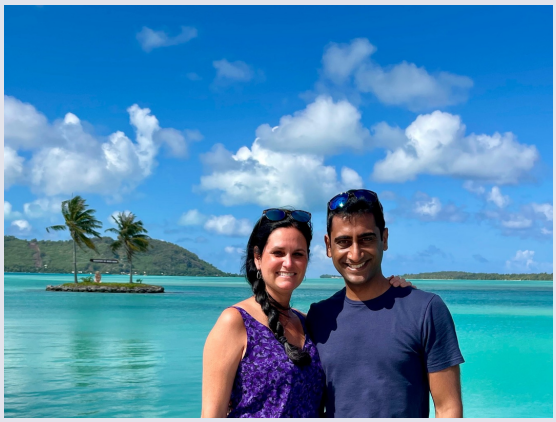
Suggestion 2- Every time the surgeon places the pencil in the holster, thank him in a low-key voice. Don’t make a big deal out of it, but reinforce his good practice each time. After receiving praise from several scrubs, he should start to develop the good habit.

If you have any questions about clinical issues, please contact Alice Erskine, MSN, RN, CNOR at aerskine52@comcast.net.

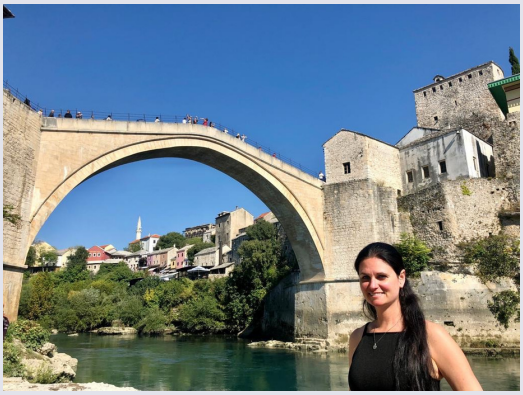
Chapter Officer Spotlight

Tennille Parsons, MSN, RN, NPD-BC, CNOR

Recording Secretary



Where do you work and what is your title/position? UCSF Parnassus, OR Clinical Nurse Educator.
How long have you been an OR nurse? Almost 20 years!
Specialties? I specialize in staff development. When I was a staff/travel nurse I scrubbed and circulated pretty much every service except cardiac surgery and non-kidney transplants. My favorite was always Ortho.
What do you do to relax or have fun outside of work? I am very passionate about traveling and exploring the world as frequently (and extensively) as possible. Most of the time I travel just for fun, other times for surgical mission trips. I also like to spend time outdoors- hiking, snowboarding, and camping.



What inspired you to become an OR nurse? I was a kid who always wanted to help others. I also spent a lot of time in doctors offices/hospitals growing up. After my first broken bone, I became fascinated with surgery. While I was studying pre-med, I discovered the critical role nurses have in surgery and that I could fuel my passion for traveling as a nurse. I knew immediately being an OR nurse was the perfect profession for me.
What do you enjoy about being an OR nurse? Overall, I enjoy working as a team to make a difference in people's lives. More specifically, I've always loved scrubbing and assisting with the magic happening at the field. I also like the fact that no two days are the same and there is always something new to learn. **What are some challenges?** The fact that there is always something new to learn! As an educator, it's not always easy to continuously gain the buy in required to implement change and adopt the ever changing best practices and newest technology.
If you hadn't become a nurse, what career would you have chosen? I wanted to be an orthopedic surgeon until I learned about the great opportunities nursing had to offer.

Thank You MedShare Volunteers!

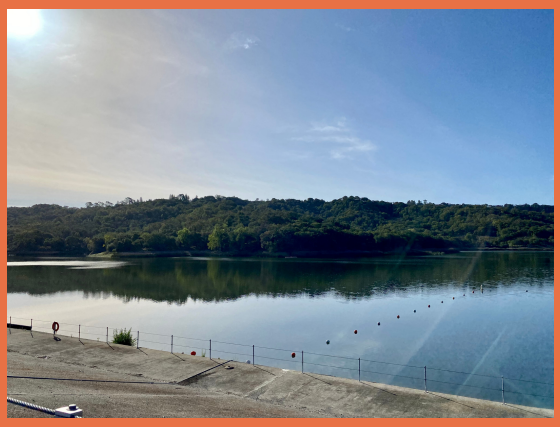
Thank you to the following members and guests who volunteered their time to sort drapes and stainless steel surgical instruments on Saturday, October 16:

Josephine Belmonte	Alice Erskine	Pam Catlett
Joy Chau	Dolly Chan	

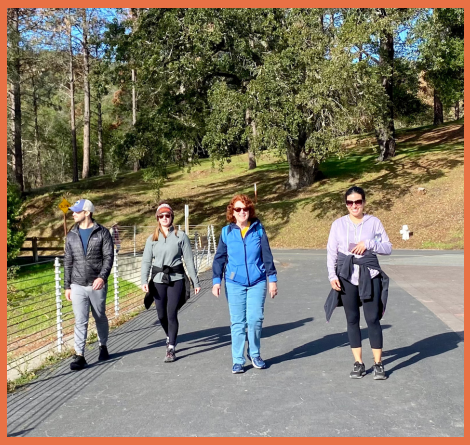
The next MedShare volunteer date for the chapter will be January 29, 2022. Registration will be up on our website in early January. If you'd like to volunteer at MedShare, you can also sign up as an individual volunteer as your schedule allows. Check out available opportunities on their website www.medshare.org.

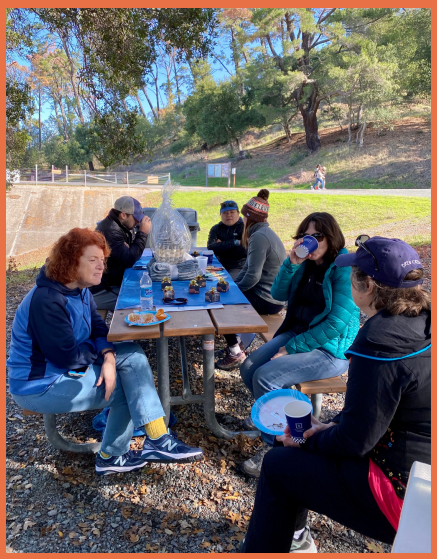
Perioperative Nurses Week Group Hike

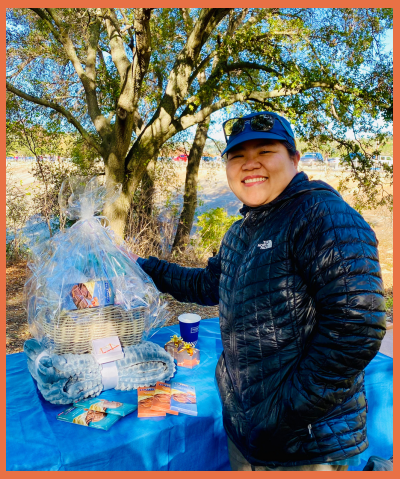
It was a chilly, but beautiful morning for our Perioperative Nuses Week Group Hike on Sunday, November 7th! Everyone enjoyed a stroll around the Lafayette Reservoir and the delicious brunch provided after. Our hike leader, Carmela Palacio, won the raffle prize gift basket!



Special thanks to Cally & Margina for organizing the event and to Cally's husband, Aaron, and Margina's daughters, Jocelyn and Jasmine, for their help too!







AORN Global Surgical Conference & Expo 2022

First-Time Attendee Scholarship

If you've never attended the AORN Global Surgical Conference & Expo, then this scholarship is for you!

AORN of The San Francisco Bay Area is pleased to offer scholarships to two active chapter members who will be first-time attendees at the 2022 AORN Global Surgical Conference & Expo in New Orleans, Louisiana. The scholarships will cover the cost of an individual weekly registration at the early bird rate ($660). To qualify, applicants must demonstrate active participation in AORN of The San Francisco Bay Area over the 2021 calendar year, which will be determined using a point criteria system.

The Education Committee of AORN of The San Francisco Bay Area will review all submitted applications and scholarship winners will be contacted via email by January 8, 2022 and announced on the chapter website. The winners will be awarded their scholarship after submitting proof of registration and attendance at the 2022 AORN Global Surgical Conference & Expo and completing a report for publication on the chapter website about their experience in attending the conference no later than 30 days after the conference.

Please see our chapter website for more information and for scholarship application. Application deadline is **December 31st**!

Be a Chapter Delegate

The AORN Global Surgical Conference & Expo takes place March 19 - 23, 2022 in New Orleans, Louisiana, bringing together perioperative nurses and exhibitors for five days of learning, networking, and inspiration. During the conference there will be more than 200 contact hours available. Hear from renowned speakers and industry experts for new ideas on improving perioperative practice.

Are you interested in attending the conference as a chapter delegate? Serving as a chapter delegate will only enhance your experience. Delegates are voting members of AORN who attend the business meetings during the conference and expo and have the privilege of voting on the business of the Association.
Chapters receive a certain number of delegate seats based on their total chapter membership. Chapter delegates vote on behalf of the chapter membership as a whole.

If you wish to serve as a chapter delegate, submit a willingness-to-serve form by **December 31st**. Chapter delegates will be chosen based on points accumulated for participation in chapter activities and events (a minimum of 6 points in the calendar year is required). All chapter delegates chosen are eligible to receive a stipend. In order to receive the stipend, you must attend all business sessions, vote, and submit an article for the chapter newsletter.

Willingness-to-serve forms and more information can be found at our chapter website. Delegates will be chosen and contacted by January 8, 2022, and an announcement will be posted on the chapter website.

Register

The Impact of Retained Surgical Sharps and Near Misses on Patient Safety

WHY SHOULD YOU ATTEND?

Retained surgical items continue to be in the top three reported sentinel events according to the Joint Commission. However, reporting of sentinel events to an accrediting organization such as The Joint Commission is voluntary. In fact, Joint Commission reported that less than an estimated 2% of all sentinel events have been reported to them. A "near-miss" is an unplanned event that does not result in patient injury; thus, reporting is rare. A nationwide survey with surgeons, surgical nurses/technicians, and anesthesiologists took place in 2020 to truly understand the frequency and impacts of retained surgical sharps and near miss "sharps" (NMS). A systematic review of retained surgical sharps published in 2021 underscores the need for targeted prevention strategies, including using adjunct technologies to identify retained surgical sharps before a patient leaves the OR. It is imperative for perioperative staff to know the real data on retained surgical sharps in order to develop the appropriate patient safety protocols to reduce retained surgical sharps events, and minimize the time and resources required searching.

WHO SHOULD TAKE THIS COURSE?

This continuing education activity is intended for a perioperative nurse, surgical technologist, or other healthcare professional who wants to learn more or needs to gain knowledge and skills in understanding the impact of retained surgical sharps and near misses.

HIGHLIGHTS

After completing this continuing education activity, the participant should be able to:

1. Define retained surgical sharps (RSS) and near misses related to sharps miscount.
2. Understand the importance of reporting near misses and sentinel events.
3. Describe how a culture of safety can help reduce retained sharps.
4. Describe the impact of retained surgical sharps (RSS) and near miss sharps (NMS) on the patient, perioperative team, and hospital.
5. Identify how leadership can assist in reducing retained surgical sharps.
6. Discuss the role of adjunct technology in preventing retained surgical sharps.

ACCREDITATION INFORMATION

California Board of Registered Nursing

Association of periOperative Registered Nurses is provider-approved by the California Board of Registered Nursing, Provider Number CEP 13019 for **2.0 contact hours.**

NCCT

The National Center for Competency Testing (NCCT) has approved this program for **2.0 contact hours.**

AORN of The San Francisco Bay Area Holiday Party

December 11th (Sat.)
11:30am – 1:30pm
Trapeze Restaurant
266 Lorton Ave., Burlingame

Event includes*:
- 2.0 contact hour class
- 3 course lunch
- Reconnecting with friends

Register at aornsfbayarea.nursingnetwork.com

Continuing Nursing and Allied Health Education Provider

PFIEDLER education
A Division of AORN

*AORNSF is participating in UCSF's virtual toy drive.
A suggested donation of $20 would be greatly appreciated:
https://givingtogether.ucsf.edu/AORNSF

AORN OF THE SAN FRANCISCO BAY AREA

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UCSF Benioff Children's Hospitals

PROJECT Cheer

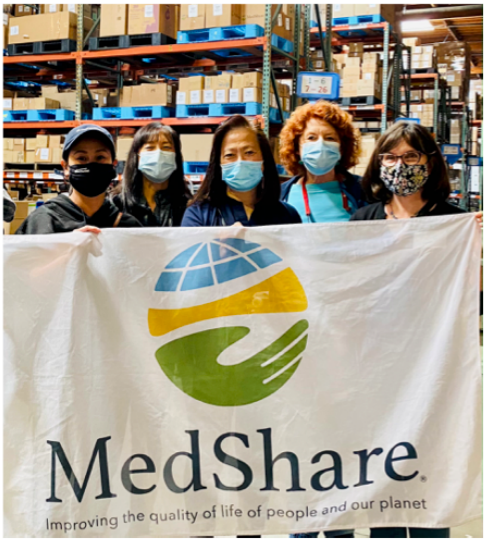
Virtual TOY DRIVE

Help AORN of The San Francisco Bay Area bring some holiday cheer to the patients'/families of UCSF Benioff Children's Hospitals

Donate at https://givingtogether.ucsf/edu/AORNSF

DONATE NOW

VOLUNTEER WITH US!



SATURDAY, JANUARY 29, 2022
9AM TO NOON

Join us as we sort medical supplies for shipment to underserved healthcare facilities in developing countries.

Registration - coming soon!

MedShare
Improving the quality of life of people and our planet

2937 Alvarado Street
San Leandro

Questions? Contact Pam Catlett at p.catlett@att.net

MedShare is a nonprofit organization dedicated to improving the environment and healthcare through the efficient recovery and redistribution of surplus medical supplies and equipment.

medshare.org

Attire:
casual
closed toe shoes
dress in layers

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