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WISPAN Wisconsin Society of Perianesthesia Nurses

PRESIDENT MESSAGE

Happy Fall! Many of you may be getting kids back to school this time of year while getting yourselves settled into a new fall routine. While school is on our minds, it is a great time to consider professional development opportunities for yourself and colleagues. As a hospitalbased peri-anesthesia nurse educator, I want to encourage you to take advantage of educational opportunities that are offered to youno matter how big or small. Whether it is researching a journal article for aromatherapy on Google Scholar or studying for the CPAN/CAPA exam, you should never stop growing in your learning. And while you grow, keep sharing your knowledge with our newer peri-anesthesia nursesthere is nothing like leading by example!

Speaking of learning, I hope we will see you at our Fall and Winter WISPAN Seminars! I am so excited about the new topics that are being offered.

Ann Keenan MSN-ed, RN, CPAN WISPAN board wants to ensure we are hearing the voice of our members for educational topic suggestions. Visit our WISPAN website to contribute your suggestion for an educational topic for our seminars. We will keep this open indefinitely as we continue to move forward with future conference planning. Thank you for bringing forward what you want to learn! This will help us hear your voice while keeping WISPAN on the cutting edge of learning opportunities.

> Lastly, I would like to take an opportunity to invite our WISPAN members to consider running for a position on our WISPAN board of directors. In the spring, we will be holding elections for the following positions:

- 1. Standard Operations
- 2. President Elect

A board position is an excellent opportunity to serve your community of peri-anesthesia nurses and promote our specialty. Simply fill out this interest form or contact any board member to find out more.



September 2022 Volume 43, Issue



WISPAN Finances are as stated: E. Bates

Mutual Fund

\$10,302,05

Savings

\$6,024.07

CD

\$21,981.63

Checking

\$14,717.98

September 25, 2022

Perianesthesia Nurse Daisy Nominees (Mar-June):

(UW Hospital FDS/OSC, preop & phase II)

- 1. Michelle Hornung RN
- 2. Franklin Espinosa RN
- 3. Jessica Wagner RN
- 4. Alisha Nolden RN
- 5. Troy Willihnganz RN
- 6. Bailey Leonard RN

Upcoming Scholarship Application Deadlines:

- CAPA / CPAN Certification and Recertification Scholarships – 9/15/2022
- 2023 ASPAN National Conference Scholarships 1/15/2023

3. WISPAN Fall Seminar Scholarships – 9/23/2022

4. 2023 CAPA / CPAN Certification / Recertification Scholarships – 2/15/2023

Scholarship Winners Year to Date 2022:

2022 WISPAN Winter Seminar

Pamela Schreiner

2022 ASPAN National Conference Virtual Scholarship

Brenda Gillingham

Sue Olson

2022 ASPAN National Conference In Person Scholarship

Jennifer Paquette

2022 ASPAN National Conference First Timer Scholar-

Rhiannon Gatton

2022 Spring CAPA / CPAN Certification / Recertification

No applicants / no winners

Raffle Winners from the WISPAN Winter Seminar

WISPAN One Day Seminar

Krista Stier

Carrie Kittell

ASPAN / WISPAN Membership

Lori Mortensen

Gwen Frohmader

ASPAN Book / Publication from Gold Leaf Award

Rhonda Gessler

Scholarship Updates from the WISPAN Scholarship Coordinator: Cyndi Siebel Mohler BSN RN CPAN

At our Board meeting in August, we began discussions on what our 2023 ASPAN National Conference Scholarships will look like. Our written policy is for In Person scholarships. WISPAN had modified this to all virtual scholarships when the conference was all virtual in 2021. In 2022 WISPAN had a combination of in person and virtual scholarships. As we learn more about the 2023 ASPAN National Conference the board will decide regarding the types of scholarships offered. Please attend our virtual board meetings if you have any suggestions, questions, or comments regarding the scholarships. You can also email me directly with any suggestions, questions, or comments regarding the scholarship program.

WISPAN had no new scholarships awarded since the last newsletter. No applications were received for Mission Nursing Grant or for Nursing Continuing Education scholarships.

Thank you,

Cyndi Siebel Mohler

WISPANscholarship@gmail.com

Curiosity & checking in

Deb Moengen BSN RN CPAN

Region 3 Director ASPAN BOD

Being curious with others may help us become a strong perianesthesia nurse. Research suggests that being curious might be a social glue that strengthens our relationships. A study found when strangers inquired about each other's personal lives with curiosity they perceived people to be warmer. You can never underestimate the impact you have in another person's life just by checking in on them. If we seek to uncover what's most interesting in each other, we will augment our relationships, and that in turn will lead to more happiness. (Suttie)

Continued below...

CLINICAL PRACTICE QUESTION

Question: What discharge scoring system does ASPAN recommend?

Answer: ASPAN does not endorse a particular scoring scale. Discharge criteria is explained in the ASPAN 2021-2022 Perianesthesia Nursing Standards, Continued Below..........

WISPAN Willingness to Serve click WISPAN-Willingness to Participate

Form (wufoo.com) to check out how you can donate your time and talent to WISPAN! Worried you don't have the time or experience? We can help you! Reach out to any of our Board for questions

How are you? How has ASPAN impacted your practice?

How can I be a resource for you as your regional director? Have you kept up to date on what is happening in ASPAN? Here are a few of the upcoming highlights:

- Professional Development Institute November 4 & Dev
- ♦ Declaring Candidacy: Are you considering running for a national office position? The deadline to declare your candidacy is October 1 st, 2022. There is a plan to have an informational session to learn more about the upcoming positions in September. Watch your emails and website for more information.
- Abstracts and Posters for National Conference 2023 are due October 1st. This is a wonderful opportunity to showcase the hard work you are doing and sharing it with other colleagues.

Strengthening our communication by being curious will glue us together and make us even stronger. I challenge you today to check in and warmly ask others how they are doing, and your happiness will increase!

Suttie, Jill. "Why Curious People Have Better Relationships." 31 May 2017. Greater Good Magazine. Document. 15 August 2022.



Practice Recommendations and Interpretive Statements, "Practice Recommendation 2-Components of Assessment and Management for the Perianesthesia Patient. (Pages 47-55). On page 51 the sidebar states "Each facility should develop discharge criteria for each level of postanesthesia care that may include a postanesthesia scoring system as a component of the assessment. Discharge scoring tools are not required by regulatory agencies." Page 3

CPAN / CAPA Certification:

Journey to Lifelong Learning



Spring Exam Window Dates:

Exam Registration Window — online January 1-March 15

Exam Administration Windows — March 15- May 15



CPAN / CAPA Certification

Congratulations' to all newly certified CPAN and CAPA RN's and to all who recertified.

Certification indicates your commitment, skill and professionalism. For those that are not certificated I would encourage you to take the step to certification. You may ask why. Here are a few reasons to become certificated:

- Validation of specialized knowledge
- * Improves nurses' confidence
- Improves patient care and safety
- * Commit to lifelong learning
- * Increases earning potential

I will encourage you check out the Certification Handbook located on CPAN® and CAPA® Certification

The CPAN/CAPA Test Assured program allows a CPAN/CAPA-eligible nurse to take the exam a second time, in the event that the first attempt is not successful.

The cost of the Test Assured program is \$50.00 in addition to the regular registration fee.

The total fees are as follows:

ASPAN Member
Fee: \$314.00 + \$50.00 =

\$364.00

Regular Registration
Fee: \$424.00 + \$50.00 =

\$474.00

Please feel free to contact a certification coach:

Marlene Nahavandi BSN,RN

CAPA at marlenen@mail.com

MEMBERSHIP & MARKETING

Carol Neumann BSN/ RN CPAN

As of September 27th WISPAN has 230members. Of those members:

- 1. 56 CPAN Certified
- 2. 34 CAPA Certified
- 3. 3 Dual Certified

Make sure to thank your coworkers!! Upcoming celebrations are:

SPD—Oct 9-15

Periop—Nov 13-19





<u>nttps://</u> www.cpancapa.org/

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	В		N	G	0
	FASTING LAB AND PT. EATS	PT. COMPLAINS ABOUT ANOTHER NURSE	OFFICE BEEPED ME MORE THEN 6X IN ONE DAY	PT. CANCELLED VISIT AFTER I WAS AT HER HOME	2 NURSES CALL IN
	REFILLS FOR MEDS NOT CALLED IN BY LAST NURSE	DOG BITE	WEEKEND ADMISSION	CALLED MD TO QUESTIONED ORDER	PT. TAKES MORE THAN 10 MINS TO ANSWER DOOR
1	PT. ON PHONE DURING VISIT	CHEWED OUT BY A FAMILY MEMBER	FREE SPACE	OMG HAD TO DISIMPACT HER AGAIN!	AFTER HOURS VISIT
/	PT. HAS 6 HOUSE GUEST	CAN'T FIND MY PATIENT	MISSED VENIPUTURE BECAUSE PT. WIGGLED	NAKED PT. ANSWERS THE DOOR	DECLINES MUCH NEEDED BATH
	ASSISTED LIVING CALLED ABOUT A PT.	NURSES UPSET ABOUT SCHEDULE	PATIENT C/O DOCTOR	PT. WANTS AN ENEMA	HAD TO GO BACK TO THE OFFICE BECAUSE OUT OF SUPPLIES

Our usual colonoscopy equipment is down today, so we're going to be using a tapeworm with a GoPro strapped to its head.



INGO CARD WAS CREATED AND THE THORN YION A TOTAL OF 24 EVENTS.

SES CALL IN, AFTER HOURS VISIT, ASSISTED LIVING CALLED ABOUT A PT., CALLED MD TO QUESTIONED ORDER, CAN'T FIND MY PATIENT,

VED OUT BY A FAMILY MEMBER, DECLINES MUCH NEEDED BATH, DOG BITE, FASTING LAB AND PT. EATS, HAD TO GO BACK TO THE OFFICE

USE OUT OF SUPPLIES, MISSED VENIPUTURE BECAUSE PT. WIGGLED, NAKED PT. ANSWERS THE DOOR, NURSES UPSET ABOUT SCHEDULE,

E BEEPED ME MORE THEN BX IN ONE DAY, OMG HAD TO DISIMPACT HER AGAINI, PATIENT CID DOCTOR, PT. CANCELLED VISIT AFTER I WAS

R HOME, PT. COMPLAINS ABOUT ANOTHER NURSE, PT. HAS 6 HOUSE GUEST, PT. ON PHONE DURING VISIT, PT. TAKES MORE THAN 10 MINS

ISWER DOOR, PT. WANTS AN ENEMA, REFILLS FOR MEDS NOT CALLED IN BY LAST NURSE, WEEKEND ADMISSION.

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Submitted By: Rhiannon A Gatton
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Celebrating Gina Dennik-Champion on her 25-year Anniversary as Executive Director of the Wisconsin Nurses Association.

Thank You, Gina, for all you do for nurses and nursing!

If you would like to join us in celebrating Gina, please consider a gift to either the Nurses Foundation of Wisconsin (NFW) or WINPAC.



On a bright sunny, summer weekend day, my doorbell rang. As I opened the door, I had the pleasure of greeting our local State Representative Warren Petryk. He was making the rounds to in our district saying hi to his constituents, reminding us to vote and "showing up for Wisconsin priorities", (as I like to call it). We had met several times before, as I had attended some different events and discussed some nursing issues with Representative Petryk. I think he was as pleasantly surprised to see me as I was him. We had a wonderful conversation about a variety of topics; of course, health care and nursing were included. It was nice to catch up with him, have some one-on-one time with a Wisconsin government representative and build on our professional relationship. These are so important in the world today. I encourage you to attend town hall meetings, zooms, and just meet with your local representative to establish a name with a face of which to build upon in the future.

Being the WISPAN Governmental Affairs Board member, I am learning and growing all the time, while challenging myself to be engaged in this arena too. I tend to feel we are all on this journey together, as we are all vested Perianesthesia providers. I encourage you to investigate the following:

August Primary Election results:

- A. Do you know who won in your neck of the Wisconsin woods?
- B. What are their major platforms?
- C. Where do they stand on health care issues?
- D. What is coming up?
- E. Important Dates?

NOVERMBER 8th , 2022- Election Day: Check out: Wisconsinvote.org

PLAN FOR THE FUTURE: Register to Vote today: Myvote.wi.gov

Cordially,

Tracy Franchuk BSN RN CAPA BSHCA WISPAN Governmental Affairs Liaison ASPAN Governmental Affairs Strategic Work Team ASPAN Nursing Community Coalition Liaison

Starting a Unit-Based Journal Club!

A great way to re-engage our colleagues in peri-anesthesia nursing practice is to consider if now might be the right time to start up a journal club! A journal club is the bridge between nursing research and practice, and can raise awareness of current issues as well as potential solutions. It can also be a way for nurses to support one another and develop relationships, as well as enhance our professionalism.

Logistics to consider

You will need to obtain leadership support for the idea. Be up front if this is something that the staff will be paid for, or (more typically) is "extra-curricular."
You will need someone to facilitate the group. This would include establishing a consistent schedule (monthly, quarterly, etc.), initially choosing the article and sending a reminder a week or so ahead of time, and starting up the discussion. It is helpful to have a few questions ready for the group ahead of time. After a few sessions, you can ask members who are comfortable to take turns selecting articles and leading discussions.
Will you host an in-person or a virtual session? Although in-person is the preferred route, things can get quite tricky with scheduling and patient care needs. Virtual training could be via Zoom (or a hybrid), or even by creating a blog that members can all contribute to at times that work for them. One platform suggested in the literature is word-press.com.

•Consider your goals for the journal club. Perhaps you interested in evaluating a current practice, or improving the skills of staff to effectively evaluate research. Outlining goals can be useful to keep the group on track.

Benefits and challenges

•An active journal club can be useful to implement or maintain evidence-based practice and develop skills to critique current research. It can increase staff confidence as well as promote lifelong learning.

•Challenges include a lack of confidence or motivation to read articles, the increasing demands on the bedside nurse, as well as difficulty in gaining consensus on meeting times

Getting People to Participate

•Articles should have a link to the unit's population of interest, important diagnoses seen, or common clinical problems to boost engagement. Finding an article related to a clinical problem that is relevant to the department is also helpful.

•Potential incentives include free contact hours, points for a clinical ladder program, a drawing with small prizes for participants or the availability of snacks at in-person meet-

•Be sure to take time to answer the "so what?" question. Why is this applicable to our practice, and are there any take aways after learning this new information?

If any of this sounds intriguing to you personally, please consider joining us at our upcoming WISPAN Journal Club on October 19th! For this session we will review a clinical article from JoPAN related to the use of methadone, which offers 1.5 contact hours!

References

Denehy, J. Starting a journal club. The Journal of School Nursing. 2004; 20(4):187-188

Rosen, J., Ryan, M. A virtual nursing journal club: Bridging the gap between research evi dence and clinical practice. The Journal of Nursing Administration. 2019; 49(12): 610 -616.

Westlake, C., Albert, NM, Rice, KL, et al. Nursing journal clubs and the clinical nurse spe cialist. Clinical Nurse Specialist. 2015; January/February: E1-E10.

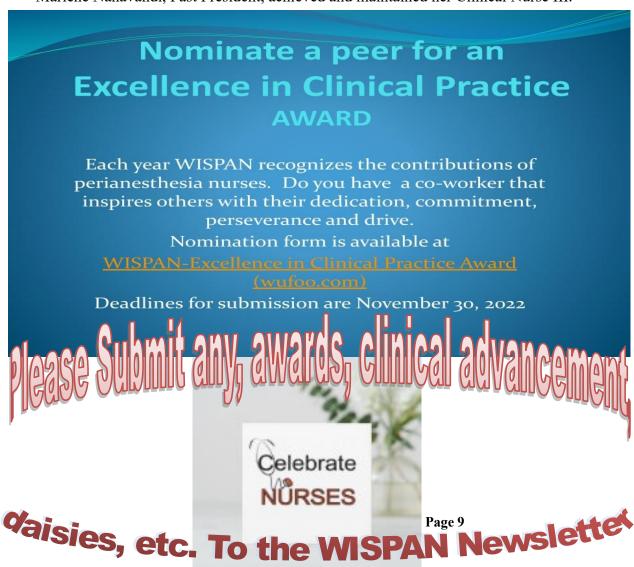
Peripheral Nerve Block Overview

To help support and manage our patient's pain, frequently peripheral nerve blocks will be completed within peri-op. Advantages of peripheral nerve blocks include reduction of pain, decreased use of opioid directly post op that puts patient as risk for respiratory depression or nausea, and can decrease patient's hospital length of stay. Studies have shown that peripheral nerve blocks are frequently well-tolerated and provide regional analgesia that is superior to other opioid interventions. While there are several nerve blocks that can be conducted for specific pain factors or for specific surgeries, the below grid gives an overview of some common nerve blocks, where the block covers, likely surgeries that the specific nerve block would be used for, advantages, and things to consider with the specific nerve block.

Dis. J.	NAVI 24	Surgeries this might be done	A 1	Disadvantages or Things to
Block	Where it covers	for	Advantages	consider with Block
Femoral	covers some of the lateral aspect of the hip as well via the lateral femoral cutaneous nerve.	Hip fx, TKA, ACL repair, quadriceps tendon repair, surgery to the foot, and surgery to the ankle.	(1) Broad coverage; and (2) Easily identifiable landmarks	Causes quadriceps weakness which may lead to falls
Fascia Iliaca	anterior aspect of the thigh and medial aspect of the leg below the knee	Traumatic hip fracture	(1) Easily identifiable landmarks; and (2) Assist in optimal patient positioning for spinal anesthesia (3) often preferred method for hip fx as it directly targets the lateral femoral cutaneous nerve for pain control.	(1) Causes quadriceps weakness which may lead to falls; disadvantage vs femoral nerve block is that it does not cover the intertrochanteric osteotome where they are working for a hip fracture surgery as well.
Sciatic nerve (Anterior, transgluteal, and subgluteal approaches)	foot, ankle, and posterior knee	lower extremity orthopedic procedures involving the foot, ankle, and posterior knee.	(1) Broad lower extremity coverage; and (2) Easily identifiable landmarks	Motor blockade
Popliteal Block	foot, ankle, posterior knee	The popliteal block is performed in conjunction with the saphenous nerve block for surgery involving the foot and ankle	(1) Broad lower extremity coverage; and (2) Easily identifiable landmarks	Motor blockade
Adductor Canal block/ Saphenous	medial aspect of knee, foot, and ankle	various lower extremity orthopedic procedures involving the knee, foot, or ankle (can be done in conjunction with sciatic nerve block). Ex TKA, total knee	Better than the femoral nerve block for motor sparing	Does not provide anesthesia and analgesia to the posterior capsule of knee; and (2) Compared to femoral nerve block, it is less efficacious for analgesia after ACL reconstruction surgery. Quadricep muscle weakness- risk of falls.
Ankle	foot and ankle	forefoot reconstruction, bunionectomy, osteotomy, foot fractures, and toe amputation.	May or may not need US guidance	If pt has ischemia or tissue edema- the block may be less successful
Interscalene	shoulder, proximal aspect of humerus and the distal aspect of the clavicle	shoulder, upper arm or elbow surgery	(1) Easy to perform; and (2) Comfortable for the patient	Hemidiaphragmatic paralysis leading to respiratory compromise in patients with severe COPD; potential for pneumothorax and (2) Not sufficient for elbow, forearm or hand surgeries
Supraclavicular	arm, elbow, forearm and hand	Shoulder, upper arm or elbow surgery, hand, forearm	(1) Fast onset; (2) Easier to perform; and (3) Comfortable for the patient	Possible but low potential for a pneumothorax. Also the block does not cover the inner upper arm where tourniquets are so it will miss tourniquet pain.
Axillary block	upper limb from mid-arm extending distally to the elbow, forearm, and hand.	hand, wrist, forearm, and elbow surgery	1) Easy to perform; and (2) Low complication rate	(1) Often spares the musculocutaneous nerve; and (2) Requires arm abduction
PEC block (PEC1 and PEC II)	Outer breast/chest wall, lateral chest wall. Injection occurs over the lateral, upper chest wall.	Single-sided chest wall surgery, rib fractures, breast surgery.	Covers the anterior chest wall well with some lateral coverage. Anticoagulation: NOT contraindicated in anticoagulated or coagulopathic patients unlike the paravertebral block, for example.	these are bock ANALGESIC blocks that cannot be used as primary anesthetics for chest wall surgery, unlike the paravertebral block or an epidural.

Many institutions have various measurements and recognition programs to celebrate the achievements of their nursing staff. At UPH-Meriter, we have a Clinical Advancement program that does just that. The UnityPoint Health-Meriter RN Clinical Advancement program supports the clinical and professional growth of registered nurses. The program is closely aligned with the UnityPoint Health-Meriter mission and the shared governance model. The program rewards the accomplishment of nurses who promote health and wellness, engage in quality improvement initiatives, and support the professional practice of nursing. It serves to increase job satisfaction and retention of nurses who provide direct patient care. I want to recognize members of the Board that work at Meriter who have accomplished advancement in the Clinical Advancement program!

- * Reno Gatton, Awakening Editor, achieved and maintains his Clinical Nurse II.
- * Erin Bates, Treasurer, achieved and maintained her Clinical Nurse II.
- * Marlene Nahavandi, Past President, achieved and maintained her Clinical Nurse III.



Bob was a 45 year old, 6'6" 400 lb gentle giant. He was scheduled for a left arteriovenous fistula revision with Dr. A and he had been through a lot before entering our doors. Just a few weeks prior, he had gotten an infection in his right chest dialysis catheter which progressed to sepsis to which the patient stated he "almost didn't make it". Multiple rounds of antibiotics led him to a c-diff infection. Needless to say, he was tired of the hospital scene and would have preferred not to be there.

Patients who come in to have a fistula completed, whether it is a revision or a creation, have a lot going on. They are chronically ill and need a lot completed before surgery to ensure that they are safe to proceed. Bob was no different. As I pushed Bob in a wheel-chair from the waiting room to the pre-op area, I joked to him that we looked like "Mutt and Jeff" working together because I am the shortest nurse on the unit and he was the tallest patient I had ever worked with. He gave me a little chuckle and I knew it was going to be a good nurse-patient interaction.

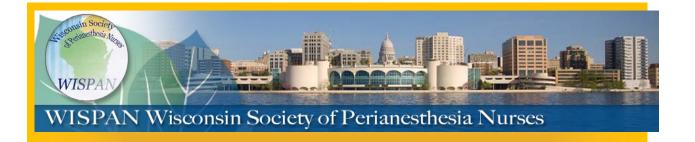
During the admission process, labs were drawn, blood sugar and vitals taken. Contact GI isolation was in place due to his recent history of c-diff and he was scheduled to have a nerve block prior to the procedure. Review of his medication list indicated that he had not taken any medication since prior to dialysis the day before. This included his beta-blocker Coreg. A quick call to the Anesthesiologist to request an order for his home dose of Coreg was completed and the dose was given. Throughout all of the checks that needed to be completed, I explained what I was doing and why it was important for his care. He had his wife, Sally, on facetime on his cellphone during the entire admission process and I video chatted with her as well. I made sure that everything was making sense to her and that all her questions were answered. Dr. A and Dr. B from Anesthesiology met with the patient and discussions were had about his plan of care for the day. Due to his history of COPD and sleep apnea, the Anesthesia team decided that it wasn't the safest option for him to have a nerve block prior to the procedure.

Bob was clearly nervous about having surgery and rightfully so considering his recent hospital admission. I sat with him and listened to his stories. Where he had worked and what he enjoyed doing when he wasn't in the hospital were just two of the topics we touched base on. His wife Sally and him had been married for 20 years. They had 2 grown boys and 6 grand-daughters that he loved to spend time with. I told him about my 2 boys and how being a parent to boys takes a lot of energy. The 2 hours I worked with Bob in pre-op went very quickly. As the OR team came into the room ready to take him, he looked at me, grabbed my hand and said, "Thank you Erin. Thank you for being so nice to me and being so professional. I haven't had a lot of nurses be nice to me before." I squeezed his hand and told him that the team was going to take excellent care of him. I treated Bob with the same kindness, care and respect that I treat all of my patients. To him, I was going

above and beyond to take care of him. To me, I was just doing what I love and treating him like he deserved. I only hope that I made as much of an impression on him like he did on me.

Submitted by: Erin Bates, RN/BSN CNII





WISPAN members: Are you interested in getting involved with your component, building leadership skills and networking with Perianesthesia colleagues? If yes, please consider joining some of your current leaders at ASPAN's Professional Development Institute on November 4-5, 2022 to build your leadership skills. "Inspiring the Heart to Care: Sharing the Secrets of Success" Click on the following link to learn more ASPAN Learn: Perianesthesia Development Institute

If you're interested please contact Marlene Nahavandi Past President at

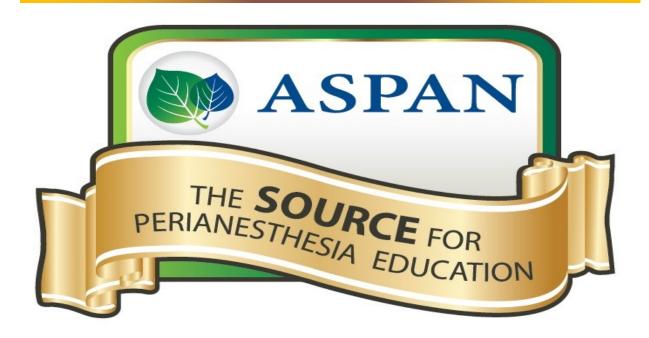
wispanpastpresident@gmail.com or marlenen@mail.com

WISPAN has some funds to assist with travel expenses.

For more information visit the following link:

https://www.aspan.org/Education-Events/PDI-2022

This include: Hotel Reservation group rate, Brochure to event, and Registration details



Rhiannon A Gatton – RN/BSN : Editor Message To Readers

Hello, WISPAN nurses, fall is here! Remember we as nurses are constantly trying educate all people, including ourselves. With that in mind please consider attending the WISPAN Fall Seminar which is online, and the WISPAN Winter Seminar which is currently being planned as a hybrid event. We are at the tail end of COVID so this latter event would allow for us to start reconnection as humans, as well as nurses. The former event will be Saturday, October 8th at Froedtert Hospital in Milwaukee. The following link will offer more information: https:// wispan.nursingnetwork.com/nursingnews/190415-wispan-fall-seminar-saturdayoctober-8th-save-the-date-

Included within the newsletter is another seminar in Kentucky to help expand our leadership skills. Please consider attending and following the link provided. We also should always consider becoming certified. This allows for multiple opportunities, and you can become CAPA, CPAN, or certified in both. Consider contacting a certification coach if interested and attend classes to

become prepared for the exam. At my hospital we recently had someone take the exam and PASS!! Congratulations so Susan McLeish, RN/BSN, MSN, now also CPAN.

Please also remember we always should be celebrating each other, as well as ourselves. Please consider submitting celebrations to The Awakening. I will always make sure to find room to celebrate everyone. Despite any dark times we are dealing with within healthcare, we should always celebrate one another. Also if there are any articles, you've written, say for clinical advancement or being part of your hospitals committee, please consider submitting those to be placed in our newsletter. You would be celebrating yourselves, as well as helping nurses across Wisconsin learn from your accomplishments.

Have a wonderful fall everyone, and always celebrate what you can in life.





NOW ACCEPTING PICTURES, ARTI-CLES, PUZZLES, CELEBRATIONS FOR THE NEXTAWAKENING!!!

Please submit photos, articles or anything that you wouldlike included in The Awakening to the WISPAN editor at: WISPANnewsletter@gmail.com

