

April 2024

Iowa Society of Perianesthesia Nurses



Awakening News

Volume 34- issue 4

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June 18, 2024

ISPAN board meeting

April 27-May 1, 2025

ASPAN national Conference. Dallas, TX

ISPAN President's Message

2024 Orlando National ASPAN Conference was not my first rodeo! Ironically, my first national conference was in Orlando in 2006. I was new to Perianesthesia nursing and the excitement of learning all things Perianesthesia was electrifying. I heard terms like Phase I and Phase II post anesthesia care, learned ABC's of the PACU, and started to understand not all Perianesthesia units are structured the same way. In the beginning, I had no idea ASPAN wrote standards that guide my practice. After attending a few more conferences, I learned about the CPAN/CAPA certification process. During the 2023 Denver Conference, I was introduced to the ASPAN governance process. I sat in the Representative Assembly (RA) not fully understanding the role of a representative.

This year I was more prepared to represent Iowa at the Annual Representative Assembly. We had five resolution statements that were voted on and adopted. These can be found on the **ASPAN webpage** under the **About/Governance** tab. We talked about climate change, capnography, non-operating room anesthesia, addition of glossary to the 2025-2026 practice standards, and approved the Standards Strategic Work Team recommendations for revisions and additions to the 2025-2026 ASPAN Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements. My understanding of our professional organization has grown over the years; but one thing has not changed, the educational opportunities at national conferences are the stars of the show! I always find something new to inform my practice.

Continued next page



Kris Franken RN, CAPA

ISPAN president

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Website: <https://ispan.nursingnetwork.com>

Facebook: Iowa Society of Perianesthesia Nurses-ISPAN

ISPAN president's message continued

Ideas I am taking back to my hospital include: implementing video education as part of our discharge instructions, using a QR code so patients can access the video instructions from their EMR, suggest a formal discharge instruction review process, using milestones and engaging pediatric patients with purposeful play, and giving our peds patients a job during their hospitalization.

I learned elderly patients are defined as patients over the age of 60. What? That hits too close to home. Elderly noncompliant CPAP patients should be instructed to consistently wear their CPAP for at minimum seven days postoperatively due to increased risk for respiratory depression related to anesthetics and narcotics.

I knew nothing about governmental affairs. The speaker explained how to write your state representative and the importance of preparing an elevator speech (1–2-minute speech about your topic). He encouraged attendance at Nurse's Day at the Capitol. He referenced the **ASPAN webpage** for guidance. Go to **Publications and Resources/ Advocacy/Governmental Affairs** for more information.

There were so many interesting concurrent educational sessions. It was hard to decide on which ones to attend. One good thing to come out of covid, in-person attendees can watch the video sessions at no extra charge. It was part of the initial registration price. This year's conference was packed with lots of educational offerings and networking opportunities. I hope to see more lowans in Dallas, TX in 2025.



Kris Franken RN, CAPA

ISPAN president



2024 ASPAN National Conference Orlando

Holly Meis
RN, BSN.

So grateful to have the opportunity to attend the ASPAN National Conference this year in Orlando, Florida in person after participating virtually the past few years due to covid.

I participated in the room sharing this year and met two lovely nurses. One was from Florida and the other nurse was from Maryland who was speaking for the first time at a session about Pediatric Assessment. Unfortunately, neither of them knew who Caitlyn Clark was, so go figure !



I always try to attend the Standards and Practice Recommendations session traditionally given by Jacque Crosson, and there are always a lot of questions about staffing recommendations. After retiring from my hospital after 37 years, I've been working at a Surgery Center that brings a lot of patients out with oral airways. Their practice has been to have a respiratory therapist watch the airway of your second patient if you have another patient in the Phase 1 recovery. I discussed my concerns with this scenario during the questions and answer period at the end of the session and was told this did not meet the safe staffing standard of the 1 nurse to 1 patient ratio when an oral airway was present. I took this back to my leadership team, and now my manager is staffing one to two nurses to float and also be available to manage airways.

I also attend any session given by Maureen McLaughlin, who is an amazing speaker. Her sessions she gave this year were "While You Were Sleeping: Anesthesia Essentials for the Perianesthesia Nurse", "Anesthesia Stat to the PACU: Post operative Airway Emergencies", "What's Wrong with this Perianesthesia Patient; Clinical Scene Investigates" and "Current Trends, Questions and Answers", and I attended all four.

I learned a lot about pediatric delirium in the session "Pediatric Emergence Delirium - What is it, How to recognize it and Evaluate". It is most common in the male population, seen with certain medications like versed, and I was introduced to the PAED screening tool and how to use this in my practice.

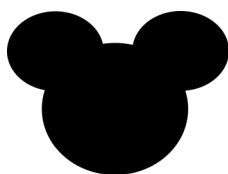
After attending the session "Preoperative Warming: How and Why to Prevent Hypothermia in the Perianesthesia Patient Before it Starts" I am going to request to leadership to purchase an oral thermometer since this is the best measurement of core temperature that can be utilized in the Phase 1 PACU. We use temporal scanners now, which are very inconsistent.

The CPAN, CAPA luncheon and Closing Ceremonies had wonderful inspirational speakers and you couldn't beat the weather when you enjoyed your lunch break outside .

Kris Franken organized a nice meet and greet on Tuesday evening, and I met some nice nurses from Iowa City, Pella and Ames.

The National Conference is all about connecting with other nurses and creating a network of people to collaborate with. I always feel so inspired at the end of the week and ready to make a difference in my professional practice.

2024 ASPAN National Conference Orlando, FL



Changes to CPAN/CAPA CERTIFICATION

To read more about these changes and how they may affect your 2024 recertification, please visit the ABPANC website [here](#).

Highlights of the changes include:

- All contact hours must be perianesthesia related
- The number of required contact hours will be reduced from 90 hours to 70 hours
- The direct versus indirect care categories for contact hours will be eliminated
- The recertification reinstatement period will be extended from 15 days to 90 days
- Recertification by exam option will be discontinued by 2027

Please note the new Recertification Handbook reflecting these changes will not be available until after the close of the fall 2023 recertification window.

Reminders

- CPAN/CAPA Certification fall registration window: July 1 – October 31
- Fall testing window: September 15 – November 15
- Fall Recertification window: July 1-October 31

Learn more at <https://www.cpancapa.org/>

<https://www.cpancapa.org/>

Clinical Practice questions

Holly Meis RN, BSN

Nurse at Surgical
Dunes Center, Dakota
Dunes, SD

Your question: : OR to ICU pt who has come from ICU vented & sedated, upon return (bypassing PACU), does the ICU nurse have to document on the PACU record? Do they need an Aldrete score if they are vented & sedated? EPIC documentation is done in phase of care which ICU does not access. What elements are documented? If a pt bypasses PACU & goes directly to ICU to be recovered by the ICU RN, what training would they need? Pt was vented pre-surgery & post surgery with sedation? Provider to provider handoff has occurred.

Answer: Resource 2B “Standards for Post anesthesia Care” states that “The medical aspects of care in the PACU (or equivalent area) shall be governed by policies and procedures which have been reviewed and approved by the Department of Anesthesiology. “These guidelines are typically incorporated with your facilities policies regarding ICU direct back patients and will vary by institution.

My previous institution encourages direct backs to ICU if there was no change in patient status (sent to OR vented and sedated and returned to ICU vented and sedated). The ICU staff receives report from the anesthesia provider and the OR staff. They document their assessments and chart under the ICU documentation since the patient is “recovered” at the end of their procedure. (The patient has a patent and secure airway, hemodynamically stable, LOC is at preop baseline, pain is controlled, no nausea/ vomiting, motor function is at preop baseline, etc.) (ASPAN, pg.60) The ICU nurse would chart on the incision (if applicable), any dressings, drains, IV lines, and sedation scale. The ICU takes Q1 hour vital signs and Q4 hour assessments and any other ordered parameters. They would not require any specialized training since they are practicing under AACN standards.

Your question: I work as an inpatient PACU nurse at a hospital & was delegated to create a process map for charge nurse transition from day shift to night shift (for effective unit handoff flow, procedures). Do you have any EBM resources or best practice suggestions to share with me?

Answer: This is, in my humble opinion, an interesting question. To begin, I am assuming that the acronym: EBM is standing for Evidence Based Medicine and following through with this assumption, I will tell you that I have been in similar situations during my nursing career and how I wish I had had a “wheel” already invented that I could have refined for my specific area of practice at those times!

ASPAN, does not have any such process maps and the reason for this is, I believe, because individual organizations, departments, units, and individuals have such varying issues and processes that it would be almost impossible to create a tool to assist anyone with this type of request.



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Clinical Practice questions— continued

Holly Meis RN, BSN

My suggestion would be that as you develop this tool, that you consider those issues that arise most often, those that create the most upset to routine, and those situations that cause you to lose sleep when you go home after finishing your shift. My next step would be to prioritize those issues as to patient safety and then time allotment. (Perhaps a grid would be a beneficial format [?]) This is a HUGE task and I would strongly recommend that you incorporate some of your colleagues in this process as different people see situations through different lenses and this varied input will (likely) give a much better end product. I would also recommend that you track your issues prior to implementation and then follow-through at specified time frames afterward to see if your process has made an impact on patient safety, patient and staff satisfaction, and management's perceptions on the benefits you've achieved. This would be a great "Celebrate Successful Practices" poster for National Conference in 2025 (just saying...)

If you have a LEAN team at your organization, perhaps you could enlist some assistance from them.

For your benefit, I have done a search (using "Communication process for charge nurse) of JoPAN articles that might be of some assistance to you (My search did not yield very much that looked applicable to your question:

Using Lean Principles as an Implementation Strategy within the EBP Process

Journal of PeriAnesthesia Nursing Vol. 37 Issue 1 p137–142 Published in issue: February, 2022

Cassandra Fowler. Erin Steffen, Christine Mentz

My second to last suggestion for you is that you consult with a Critical Care Charge Nurse from your organization (if you have not done so, already) to see if they have developed such a tool. If so, I would think that there would be many consistent items that you could glean from their experience and practice setting.

Finally, I will ask that your question be passed to the remainder of the Clinical Practice Committee members to see if any of my esteemed colleagues have any help for you



2023-2024 ISPAN BOARD

President:

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VP/President Elect:

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Immediate Past President:

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Governmental Affairs Rep:

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Membership:

Molly Schrader

mollyjschrader@gmail.com

Publications:

Donna Dolezal

Minutes from Winter ISPAN board

ISPAN Meeting Agenda 3/26/24 1930-2030 Zoom

Attendance: Linda Armstrong, Donna Dolezal, Amy Cusic, Kris Franken, Pam Uhrich, Diane Lange, Wendy Rindel, Sheri Parman & Susan Metz

Topics:

1. Committee Reports

a. Secretary Report: Approved January Minutes

b. ISPAN President's Report: Kris Franklin

Next meeting: June 18th, 2024 @ 7:30 PM

i. ISPAN Board Position for March 2024

President: Kris Franken

Vice President: **OPEN**

Treasurer: Diane Lange

Secretary: Sheri Parman

Membership: **OPEN**

Newsletter: Donna Dolezal

Governmental Affairs: Pam Uhrich

Please contact Kris Franklin or Pam Uhrich to discuss willingness to serve.

ii. Kris wants to visit other hospitals of her board members

iii. ISPAN contact list reviewed

iv. ASPAN Report Access (Kris Franklin & Pam Uhrich)

v. Webpage and Facebook Access (Pam Uhrich, Donna Dolezal)

c. Treasurer Report: Diane Lange

i. Financial report

ii. Membership fees are current.

iii. ASPAN denial of RA scholarship.

Teri Baughman- Thank you for applying for financial aid to attend ASPAN's upcoming 2024 Representative Assembly (RA) in Orlando, FL. We had a record number of applicants this year for the Representative Assembly, because of this the committee scrutinized each component's financial position and financial need. With the amount of aid requested for the RA the committee made the decision to fund those components whose total financial assets were below \$16,000.



Minutes from Winter ISPAN board

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Per the documents submitted ISPAN's total financial assets are \$36,869. Unfortunately, ASPAN is unable to provide financial support to ISPAN for the 2024 Representative Assembly. ISPAN may want to evaluate the ratio of funds in their investment's vs having liquid funds available for their expenses. It is also recommended at this time to create a balanced budget without including financial aid from ASPAN because there may be times, such as now, where financial aid may not be available.

Please do not let this deter ISPAN from applying for financial aid in the future, as funds may be available at that time.

Please let me know if you have any questions. I look forward to seeing you in Orlando in April.

Approved \$4500 ISPAN funds to pay for ASPAN National Conference.

Discussion of not expecting funds from ASPAN for the next couple of years

No liquidation necessary.

C. Government Affairs: Position Open Pam covering.

E. Membership report:

Current membership: 82

Renewals:

New Members: 2-3

E. Newsletter/Website Report: Donna Dolezal

Request for articles.

Ideas-Those going to national please write a paragraph or two about the newsletter.

1. New Regional II Director: Tracy Galyon will be stepping down and the new Region II Director will be Linda Allen. Linda will be taking over after the conference .

2. ASPAN National Conference April 14-18, 2024

ISPAN Members Attending:

Kris Franklin & Susan Metz. RA scholarship denied. ASPAN -Need to liquidate bond. R

President Luncheon: Kris Franklin

Other Iowa people Holly Meis

Amy Cusic and Jen Lalonde (UIHC ASC)

National Conference Support

Sponsoring National Conference by donating funds for general support. ASPAN's Legacy for Life program. ISPAN will be donating \$100.

5. Director II, Tracey Gaylon-

Saturday is ASPAN Board of Director's Meeting -you can sit in on this meeting to see how ASPAN functions.

Meet the Candidates Saturday evening from 6:30-7:30. Location will be announced.

Representative Assembly is Sunday and will be a jam-packed day of learning and deci-



Minutes from Winter ISPAN board

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5. Director II, Tracey Gaylon-

Saturday is ASPAN Board of Director's Meeting -you can sit in on this meeting to see how ASPAN functions.

Meet the Candidates Saturday evening from 6:30-7:30. Location will be announced.

Representative Assembly is Sunday and will be a jam-packed day of learning and decision making for your Association. Please review all the information sent to you in your RA packet, review the candidate profiles and reach out to your membership to determine who they would like to see as board members. Candidates will present themselves and voting will occur for your new Board Members. This is a business casual dress code and is a formal meeting of ASPAN - it will leave you with a sense of awe and amazement if it is your first time as a representative. If you are an alternate or just want to check it out - you can sit in the gallery and observe during open session of the meeting.

Be sure to pick up your packet at the Registration Desk - this will have all your tickets and information for the Conference.

Sunday late afternoon 5:15-6:15 is 1st Timer's orientation - if you are a first timer or have members who will be attending for the 1st time please encourage them to attend - this is some great information that they will be glad to know. This will be repeated Monday Morning from 7:15-8:15.

Sunday evening will be Component Night from 7:00-9:00 with the 80's theme - come dressed for the decade if you choose - it will be a fun night of dancing, mixing, and getting ready for the week.

Monday morning is opening ceremonies! This is an exciting event you will not want to miss! Once again - dress is business casual for the next 3 days.

Certification Luncheon will be Monday from 12:15-2:15.

Monday evening Region 2 - all of you, if possible, will meet in Magnolia 19 meeting room from 7:00-8:00pm. This will be a casual meet-up for you to meet your new Region 2 Director and to put names to faces within our Region. This is an opportunity to network and share ideas and thoughts - please exchange information and utilize these resources within our region - they are a wealth of knowledge. As always, your Region 2 Director is your liaison to ASPAN - please include her on all your component meetings, conferences, and events. She has been a part of ASPAN for many years and will serve you well.

Wednesday morning is the ASPAN Development Breakfast (extra fee). If you have not registered and would like to - reach out to the National Office to see if there is availability.

Wednesday evening will be the President's Reception and is a more "formal" or "dressy" event - it is an opportunity for you to wear those clothing items that rarely see the light of day! It will be another night of dancing and mixing as you prepare to head home.

Thursday morning will be closing ceremonies and you will not want to miss this event - installation of the new officers will occur at this time. The keynote speakers are wonderful and you will enjoy this event.

Please share this email with your membership and with those attending conference so that they can join us when possible.

6. Perianesthesia Nurses Awareness Week (PANAW) February 4-10, 2024: Did any of your areas celebrate?

March 19 Certified Nurses Day. Did any of your areas celebrate? Kris did special prizes for unit. Discuss drawing for ASPAN membership.





ISPAN Summer Board meeting

June 18, 2024

7:30pm

Zoom

ASPAN National Conference

Dallas, TX

April 27– May 1, 2025



ASPAN NEWS:

Check out the Web site at: www.ASPAN.org

Connect with ASPAN for information and education:

ASPAN.Org and Facebook American Society of Peri-Anesthesia Nurses.



ASPAN President-

Lori Silva

MSN RN CCRN CPAN

lsilva@aspan.org



Vice President/President-Elect

Ursula Mellinger, BSN, RN, CPAN,

CAPA



Regional Director Region Two

Linda Allyn, BSN, RN,

CPAN, CAPA

ISPAN MISSION STATEMENT

As a component of ASPAN, ISPAN formally recognizes the purpose and mission of ASPAN. The society is committed to maintaining and upgrading the standard of the specialty, and to the promotion of professional growth of its members.