



Awakening News

Volume 36– issue 1

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ISPAN board meeting:
minutes:

ASPAN board members

Upcoming events:

October 11, 2025 Fall
ISPAN conference Mary
Greeley hospital Ames,
IA

Oct. 11, 2025 ISPAN board
meeting, Ames, IA.

Recharging the Caregiver: Practical Self-Care to Prevent Nurse Burnout



Kris Franken RN, CAPA

ISPAN president

In PeriAnesthesia nursing, we're trained to care for others—but our own well-being often takes a back seat. The emotional toll of caring for patients day in and day out can lead to burnout, also known as compassion fatigue or emotional exhaustion. This growing concern affects nurses across all age groups and specialties, and it's time we prioritize ourselves not just as professionals, but as human beings.

During my time serving on my hospital's Nursing Workforce Council, I had the opportunity to help research and advocate for the implementation of *Zen rooms*—quiet, restorative spaces designed to help staff decompress and recharge during their shifts. These rooms offer a peaceful retreat from the high-stress environment of clinical care, and their impact on morale and mental health has been profound. Our administrative board gave full approval, affirming that mental and physical wellness matters.

However, not every facility has the budget or space to create a recharge room. That's why personal self-care is essential. It's about finding small, meaningful ways to care for yourself throughout the day—whether it's a few minutes of deep breathing, a walk outside, or a moment of reflection. These practices don't require special equipment or dedicated rooms; they require intention and commitment to your own well-being.

Compassion Fatigue by the Numbers

- **56% of nurses** report feeling burned out; **69%** among those under 25.¹
 - **18% of new nurses** leave the profession within a year.²
- Burnout contributes to anxiety, depression, and high turnover.³

Simple Self-Care Strategies

- **Microbreaks:** Step away for 5–10 minutes to breathe or stretch.
- **Mindfulness:** Use apps like *Headspace* or *Calm*.
- **Hydration & Nutrition:** Don't skip meals or water.
- **Peer Support:** Debrief with colleagues after tough shifts.
- **Mentorship:** Build community through shared experience.

Sleep Hygiene: Prioritize rest for recovery and resilience.

Creating a zen room is a powerful step, but self-care starts with you. Whether it's a quiet moment or a walk after work, your well-being is worth the investment.

As ANA President Jennifer Mensik Kennedy said, "Nurses must be supported not only in their clinical roles but in their humanity."⁴

References

1. American Nurses Foundation, *Workplace and Well-being Survey*, 2023.
2. NCSBN, *Impact of COVID-19 on Nursing Workforce*, 2023.
3. National Academy of Medicine, *Clinician Burnout Report*, 2019.
4. American Nurses Association, *Statement on Nurse Burnout*, 2023.



ISpan Fall Conference – October 11, 2025

Join us at Mary Greeley Medical Center in Ames, Iowa, for the ISpan Fall Conference—a day designed to recharge your practice and connect with fellow nurses from across the state. This is your chance to network, share insights, and discover what other hospitals are doing to elevate patient care. Whether you're looking to learn something new, exchange ideas, or simply enjoy great food and conversation, this event offers it all—including 5–6 contact hours toward your continuing education.

Continuing education isn't just a requirement—it's a cornerstone of professional growth. Studies show that nurses who engage in lifelong learning report higher job satisfaction and improved patient outcomes. So come for the snacks, stay for the inspiration, and leave with renewed energy and fresh perspectives. See QR code above for registration or <https://ispan.nursingnetwork.com>

Continued



T-Shirt Scholarship Fundraiser

ISPAN has a few t-shirts for sale. The money raised is going to fund educational scholarships. We have a few colors and sizes available right now. If there is enough interest, we will consider setting up an online store, but for now we have a limited supply. The size and number of shirts available at publication is listed above.

If you are interested in a shirt, email Kris with the size, color (blue 1[first] or blue 2[last]), and shipping address. The t-shirts are currently \$25 each. The orders will be filled in the order they are received. If I am out of the shirt, I will let you know as soon as possible. Once I have confirmed your order, I will discuss payment options. Kris email: kfran86@gmail.com

Free CEU's

Log into ASPAN website www.aspan.org



Fall Conference

October 11, 2025

Mary Greeley Medical Center

Ames, IA

Register to attend at:

<https://ispan.nursingnetwork.com>

or

[ISPAN 2025 Fall Conference: Connecting Nurses, Transforming Care | Iowa Society of PeriAnesthesia Nurses | Nursing Network](#)

ISPAN Fall board meeting

October 11, 2025

Ames, Iowa

Follow ISPAN:

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

Facebook: Iowa Society of Perianesthesia Nurses-
ISPAN

Clinical Practice questions

Your question: When a PCA is ordered by a surgeon for postop pain mgmt., is it good practice for the PACU nurse to set up the PCA as a courtesy for the floor? In our facility, the PACU nurse should administer medication ordered by the anesthesiologist unless specifically ordered “to begin in PACU”.

Holly Meis BSN, RN,
CCRN, CPAN

Answer: The PACU nurse provides continuing assessment of the postop patient which includes pain management.

In ASPAN’s 2025/2026 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements under Practice Recommendations (p81) the Recommended Core Competencies for All Phases of Perianesthesia Care, # 15 lists Pain and comfort assessment and management.

Although some facilities, including my own, are allowed for setting up the PCAs for the floor. The order is either written by the surgeon, or it is written by the pain team. We do this primarily as we are assessing the patient in terms of pain and level of sedation by using scoring tools to support our decisions for starting a PCA. Phase 1 staffing allows for the nurse to be present with that patient to monitor their response to the PCA once they’ve started it. This is partially with the consideration that if we wait until a patient goes to the floor that pain management may be delayed due to pharmacy delivery systems as well as a higher nurse to patient ratio on the floor. Although our patients/families have usually been given an introduction to the use of a PCA preoperatively, we continue to teach the patient and family (I am in a pediatric facility). We also use anesthesia orders for primary pain management, but it is usually included in our handoff that the patient will be on a PCA as part of their treatment plan. It is not specifically written in a policy that it should begin but it is part of our process in communication of the treatment plan and continued pain management, which is supported by the care teams.

Practice Recommendation on The Prevention of Opioid-Induced Respiratory Depression in the Adult Patient (p.115) states: All patients are at risk for induced sedation and sion, but some pa- excessive opioid-respiratory depres- and iatrogenic factors tient characteristics particularly high risk. have been defined as



Continued next page

Clinical Practice questions— continued

Guidelines recommend the use of appropriate screening tools to identify patients at high risk for opioid-induced sedation and respiratory depression before the administration of opioids, as well as assessment tools that help to prevent adverse events during opioid administration. On page 116 under(d) Iatrogenic risks, it includes(iii)Patient controlled analgesia (PCA) opioid administration. On page 115, under Position on Practice Recommendations it is stated it recommends that each institution uses an interprofessional approach to develop policies, procedures, and order sets that help to ensure safe opioid administration.

Holly Meis BSN, RN,
CCRN, CPAN

Policies, procedures or practices of setting up a PCA and transporting the patient to the inpatient unit should incorporate 6. Practice Recommendation Safe Transfer of Care: Handoff and Transportation under Safe Transportation (page 90) which include:

- A perianesthesia registered nurse should accompany patients who:
 - Require evaluation, treatment, or are at risk of cardiopulmonary compromise during transport
 - Require a higher phase of care per facility protocol/policy
 - Are required to have an RN transport based on facility policy
 - The perianesthesia registered nurse determines the mode, number, and competency level of the accompanying personnel based on patient needs and also follows facility standards and policies
- The perianesthesia registered nurse determines respiratory supplies required to safely transport a patient requiring supplemental oxygen
- Transport personnel will remain with the patient until the receiving unit personnel are at the bedside to assume responsibility for the care of the patient

In our facility we use EMTs with specific PACU competencies for transporting our patients on PCAs and this is supported in our Transport Team policy. Although there is nothing specific regarding starting PCAs in PACU, the Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements give guidance for establishing policies or protocols within your individual institutions. Of course, it is always recommended that you follow your own hospital/institution's policy.



Clinical Practice questions— continued

Your question: Does ASPAN have recommendations or standards guiding the PACU nurse for discharging a pt. After general anesthesia ? Ex: requiring a pt. Be discharged with someone, not being able to just take an uber/taxi home by themselves ? Our hospital is trying to change the hospital policy to allow us to d/c a pt. with uber or taxi alone after general anesthesia

Holly Meis BSN, RN,
CCRN, CPAN

Answer: In ASPAN's 2025/2026 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements on page 90 under 6. Practice Recommendation Safe Transfer of Care: Safe Transportation

A policy exists to ensure safe transportation of patients

- The perianesthesia nurse addresses discharge plan during preoperative assessment. This can include transportation and support at home
- The perianesthesia registered nurse assures the availability of appropriate transportation of the patient from the facility
- The patient will be discharged with a responsible individual/adult
- A plan exists for those patients who do not have an accompanying responsible individual or reliable transportation (e.g., taxi, ride share.)

Plans for patients who lack appropriate transportation may include support from care management, discharge planning services, and communication with patient providers.

This question has come up numerous times at National Conference and ASPAN supports the inclusion of additional ancillary services to assist in providing the safest option for patients being discharged home after receiving anesthesia services.

Every situation has the potential to present its own unique circumstance.

I remember in my former hospital, we had a patient who was homeless that was discharged to the streets outside our hospital facility. This was not ideal, but the reality we face with this special patient population. I also recall one of our surgeons offering a ride home to one of our patients that I came in on call to recover that didn't have a ride home late at night, accompanied by her 13 year old daughter.

Some things to consider while your hospital revises its policy on discharging patients from your institution.

I hope that this information will assist you achieving and promoting safe patient care and evidence-based practice in your facility. A copy of the *2025-2026 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements** can be purchased through the ASPAN website at www.aspan.org



2025-2026 ISPAN BOARD

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Minutes from Fall ISPAN board meeting

June 7, 2025

Residence Inn Downtown Des Moines, IA Called to order at 0905; meeting adjourned at 1305

Next BOD Meeting: October 11th at approximately 4:00 in Ames Iowa at Mary Greeley medical Center following Fall Conference

ATTENDANCE: Kris Franken, Sheri Parman, Pam Uhrich, Susan Metz, Diane Lange, Linda Armstrong

EXCUSED: Donna Dolezal, Meggan Musselman, MaKayla Peters

Topics: Strategic Plan, By-Laws, Education, National Conference and Representative Assembly

1. Committee reports

a. Approve of January minutes: motion Diane Lange, 2nd Linda Armstrong

b. ISPAN presidents Report: Kris Franken Thank You's to the board for their work and dedication to keep ISPAN strong.

Next BOD meeting: October 11th following ISPAN Fall Conference with ZOOM option

i. Board Positions

- President-Kris Franken
- Vice President-President Elect-Open
- Treasurer-Diane Lange
- Secretary- Sheri Parman
- Newsletter- Donna Dolezal
- Governmental Affairs- Pam Uhrich
- Membership Officer- Susan Metz
- Education Chair- Meggan Musselman
- Digital Communication Chair- MaKayla Peters
- Fall Conference Committee- Wendy Rindels, Holly Meis

ii. National Conference Report- RA, Iowa Night Out, ISPAN's Raffle Donation. The ISPAN garden raffle basket earned \$140 dollars for the ASPAN Development activities. ISPAN spent \$75 to create the basket. There was a small gathering for Iowa Night Out. The Representative Assembly was attended by Pam and Sheri this year. Discussions included a proposed change to the ASPAN position statement on anesthesia waste gases (WAGS). There were strong discussions in support of stricter guidelines and arguments against the proposed WAGS position statement change. It was discussed that the PACU should have as many air exchanges as the OR. A new position statement was not adopted at the 2025 RA. Additional topics included Kevin Dill's retirement, the recommendations the consultant group suggested for ASPAN's restructuring, ASPAN members now get free webinars.

iii. Succession planning: The Vice President position remains open, with no current expressions of interest from the membership. Experienced board members have committed to supporting the current President. Still, there is uncertainty about ASPAN's future structure. It's possible ISPAN could be integrated into a new component, though this remains speculative. We expect more clarity at the 2026 RA in San Francisco.

c. Treasurer Report: Diane Motion to approve: Pam, 2nd Sheri

i. Financial Report: Over the past year, ISPAN has spent more than it brought in, and we haven't had a balanced budget in a while. That said, thanks to our investments, we're still in a solid financial position.

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Minutes from Fall ISPAN board meeting

Continued

i. Financial Report: Over the past year, ISPAN has spent more than it brought in, and we haven't had a balanced budget in a while. That said, thanks to our investments, we're still in a solid financial position. (See attached PDF for details.)

ii. Questions or concerns? No additional

iii. Reimbursement tool-how to use the smart app: Diane urged members seeking reimbursement to review the ASPAN Insights tool box for tutorial on the Smart App

d. Membership Report: Susan

Current Membership: 87, ISPAN is still sending welcome letters & renewal letters via email

Education Report Meggan was excused.

Kris provided the education report. The Fall Conference is scheduled for October 11th at Mary Greeley Medical Center in Ames. In June, a Save-the-Date with basic event information will be shared. The event will run all day and include lunch, featuring six speakers. In July, the committee will finalize the speaker lineup, presentations, and biographies. By August, pending approval from MGMCMC, advertising and promotion will begin. The committee is also seeking donations to help cover food costs.

Additionally, ISPAN is hosting a Select Seminar on August 2 at the Lewis and Clark Learning Center in Sioux City. A minimum of six attendees are needed for the event to proceed. Flyers will be distributed throughout the month. Registration fees are \$32 for members and \$85 for non-members, and attendees will receive 4.25 CEUs.

2025 Fall Conference Committee Volunteers? No additional currently. Feel free to reach out to Meggan if you want to help

Look into 2026 Education plans- tabled until Fall Conference Meeting

f. Governmental Affairs Report: Pam: She presented new information on the following topics:

- 2 weeks ago -Iowa was realigned with The Board of Inspections, it was reported that the University of Iowa was informed they would no longer have a provider number for educational CEU's and that the state of Iowa would only provide CEs. More to come about that.

- GLP1 discussion-there is no longer a shortage and compounding GLP1s is supposed to come to an end. Some anesthesia teams have started using abdominal ultrasounds to get a better look at how full the stomach is, basically helping them decide if it's safe to go ahead with anesthesia

- Measles cases are at a 30-year high; Iowa has reported its first case; subject was unvaccinated or only received one dose

- "Big Beautiful Bill" reduces SNAP benefits to the most needy

- In January 2025, President Trump signed Executive Order 14169, which ordered a 90-day pause on all U.S. foreign development assistance programs to conduct a review. Cuts to the HIV medication program in Africa have true consequences. Increase in deaths from HIV and increase number of cases

g. Newsletter Donna was excused. Thanks for your continued great work on the ISPAN Newsletter—your efforts truly make a difference and are so appreciated! Always looking for new articles

h. Digital Communications Chair- MaKayla was excused

Our membership list on NN is not updated & to be accurate we will Our membership list on NN is not updated & to be accurate we will have to manually adjust members as they come and go. Our member list needs to be manually adjusted. Kris will ask ASPAN for permission to add Makayla to the list of people who can access membership list and add that to the list of duties to the Digital Communications Chair list of responsibilities.

2. General Discussions- Wins and Recognitions, 3 ideas for volunteer events for 2025-2026, 3 fun ISPAN events for 2025-2026. We discussed the potential of incorporating a donation drive to coincide with the Fall Conference. Suggestions included partnering with Toys for Tots, collecting items for a local women's shelter, or supporting other Ames-area charities.

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Minutes from Fall ISPAN board meeting

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3. Gold Leaf: ISPAN only had 4 ballots casted for the RA. Goal should be to increase % of participants for 2026. How can we get more participation? See the strategic plan.

The Board decided not to apply for the Gold Leaf Component of the Year Award this year. With our small size and the amount of work involved, we felt it just wasn't the best use of our time and energy right now.

4. Region 2 News with Linda Allyn- no submission this month

6. T-shirts- I have extra T-shirts that are available for immediate purchase \$5 goes to scholarship. We can sell the remainder at the fall conference. Sold 2 more T-shirts at the meeting. total \$65 for the education fund. Interest was expressed in zippered jackets with the ISPAN logo. Kris will check with B5 Branding. The company we used for the T-shirts. The colors mentioned included black, gray, and blue.

7. Finalize and vote on Strategic plan: We've updated the language and goals of ISPAN's Strategic Plan to reflect our direction for the 2025-2026 session. The plan is available upon request.

8. Update and vote on the By-laws: The By-Laws have been reviewed and updated, and the proposed changes will be shared with members for a vote in June. We'll need at least 10% of the membership to approve in order for the updates to be adopted.

9. Formal acceptance of job description. It was brought to the Board's attention that we need to formally accept the updated and amended job descriptions from early 2025. This item will be included for a vote at the October Board Meeting.



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.



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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.