



Thank you to Our Conference Committee



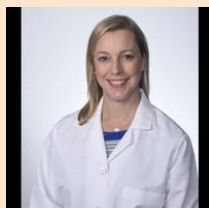
& Our Exhibitors and Sponsors!



It was a great conference thanks to our FOHC Committee and all the members who helped make this a spectacular event. Some of the comments we received: *Excellent...the food was great...I loved the networking... Dr. King was a hoot...I loved being with all the members...Bring David H back next year.* The accolades went on and on. Although the number was down on member attendance, we were a mighty enthusiastic group.

Planning has already started for next year. Please save the date. 2023 Conference which will be October 12-14th. The Theme is “The Journey of the Occupational Health Nurse. Evolution-Revolution.” Don’t miss out on another year. The conference will be again LIVE at the spectacular Orlando World Marriott. We received great suggestions for next year’s topics. If you are interested in helping with the conference or have suggestions for topics please contact one of the Board Members.





PRESIDENT'S REPORT

Stephanie Weinsier DNP

It is my honor to continue supporting FSAOHN as we ease our organization into 2023 while welcoming our incoming President Tessa Stanaland. I am very appreciative of our Board who has continued to persevere, leading this organization through some difficult times and novel challenges. Collectively, we strive to fulfill the FSAOHN mission, provide education and networking opportunities, and support Florida's occupational health nurses whose practice is evolving daily! It truly seems as if a revolution is at hand with advancing practice, technology, new ways of working, learning, and networking, and varied specialties, even within our own industry of occupational health. FSAOHN and the Board welcomes member involvement, and we encourage you to be active, volunteer for a committee, run for a board position, share practice challenges and resources, and expand your knowledge. It can be fun and professionally rewarding. Thank you for your membership, your support, and for allowing me to serve as your FSAOHN President. Together, we can continue to advance the profession of occupational and environmental health nursing in Florida, something we have continued to do since 1961! Feel free to reach out to me at sweinsier@bellsouth.net with any needs, requests, or feedback.

4th Quarter 2022



President Elect

Tessa Stanaland RN, BSN

In Washington



ICAN Act Introduced in Senate

On Thursday, Dec. 8, the Improving Care and Access to Nurses (ICAN) Act was introduced in the Senate by Sen. Jeff Merkley (D-OR). This first-of-its-kind legislation was originally introduced in the House of Representatives on Sept. 13. AANP [applauds](#) the legislation's goal of promoting patient access to health care, delivered by the provider of their choice, by removing outdated Medicare and Medicaid barriers on nurse practitioners (NPs) and other advanced practice registered nurses (APRNs).

Specifically, this bill would authorize NPs to order and supervise cardiac and pulmonary rehabilitation, refer patients for medical nutrition therapy, certify and recertify a patient's terminal illness for hospice eligibility, have their patients fully included in the beneficiary attribution process for the Medicare Shared Savings Program, perform all mandatory examinations in skilled nursing facilities, certify when their patients with diabetes are in need of therapeutic shoes, and more. Removing these barriers is consistent with recommendations from several organizations, such as the National Academy of Medicine, the American Enterprise Institute, the Brookings Institute, the Bipartisan Policy Center, the World Health Organization, the National Governors Association and the Federal Trade Commission.

AANP urges every NP to utilize the [AANP Advocacy Center](#) and contact their elected officials to encourage them to support the ICAN Act.

AANP Government Affairs aanp@aanp.org Accessed 12/13/22

4th Quarter 2022



MEMBERSHIP UPDATE



We are grateful to all of our renewing members and welcome our new members and students to FSAOHN and our local chapters. Choosing to join AAOHN AND FSAOHN AND your local chapter listed below, will provide all the benefits of all levels of the organization. Remember when you join to designate which chapter WITH AAOHN that you would like to join. The following chapters welcome your membership. Please email the President of the local chapter in your area. If you are not close to a chapter, FWCAOHN offers members both virtual and in person meeting & CE offerings. Check with the other chapters, if they too are able to provide virtual meetings.

Central Florida: Annabelle.Harte@PremiseHealth.com President

Florida West Coast (FWCAOHN): KarenS.Shumar@ge.com President

Space Coast: catherine.p.dibiase@nasa.gov President

Discounted membership is offered for students and retirees. Keep in touch with your colleagues and meet some new members of our special community.



From the Membership Committee



4th Quarter 2022

CHAPTER NEWS

FWCAOHN



News from the West Coast Chapter

Karen Shumar

Over the past year, we have continued to struggle with work/life balance, but we still provided great networking experiences and informative CNE opportunities both in-person & virtually. We kicked the year off with an OHN Appreciation Lunch Cruise on the Starlight Sapphire. It was so nice to get a break from all the work we have been doing!

Dr. Patel provided a CEU presentation on Heavy Metals and toxins in May. Sue Stewart gave presented in October on Pressure Injection Injuries, which was a new topic for all of us. All members were invited to a 4-hour CEU & Luncheon at the Rusty Pelican. A Self-Study on Med Errors was developed by Trish Figura-Delia and offered to meet licensure requirements. We ended the year with our annual Member's Meeting, dinner sponsored by Peter Predmore who will presented a Virtual Reality Product for stress and pain reduction as well as other medical conditions and Dr Perler did a wonderful lecture with a hands-on show and tell featuring foot and ankle models printed on a 3D printer used for surgery.

We are planning the 2023 Conference which will be from October 12-14th. The Theme is "The Journey of the Occupational Health Nurse. Evolution-Revolution. Held at the Orlando Marriott. The National Conference 2023 will be held March 13-15 in San Antonio, Texas.



CUE

COMMUNICATION-UNDERSTANDING-EDUCATION

4th Quarter 2022

FWCAOHN presently has open positions for a Director and one for the Nominating Committee. We encourage anyone who would like to join the Board and fill these positions to let us know.

At the Conference, there was a discussion regarding the Heart of Florida Chapter folding. Their Past President Donna Schaubert asked that the remaining members of their Chapter be able to join with our Chapter if they fold. Board members voted yes to this. Their members were invited to attend both our October and December meetings.

2023 FWCAOHN Offices & Terms

President: Karen Shumar, COHN-S 1/2023 to 12/2024

President Elect: Sue Stewart, BSH, MBA, DNP 1/2023 to 12/2024

Director: Patricia Figura-Delia APRN 1/2023 to 12/2024

Director: Open

Nominating Committee Chair: Marianne Allen, COHN-S 1/2022 to 12/2023

Nominating Committee: Open

Secretary: Laura Gerycz, RN 1/2022 to 12/2023

Treasurer: Barb Maxwell RN, MHA, COHN-S, CCM, CWCP, QRP, FFAOHN 1/2022 to 12/2023

AAOHN Foundation Scholarships & Grants

Apply Before January 27th (deadline extended from Jan 1)

The AAOHN Foundation is excited to announce the [2023 Scholarship and Academic Award applications](#) are now open! These scholarships and grants support occupational health nurses aiming to continue their personal, professional, and leadership development, or support the mission of AAOHN and the Foundation by improving the health and safety of workers by advancing the field of occupational and environmental health research.

4th Quarter 2022

There are several grant and scholarship opportunities available. Submit your application by **January 27, 2023** to be considered.

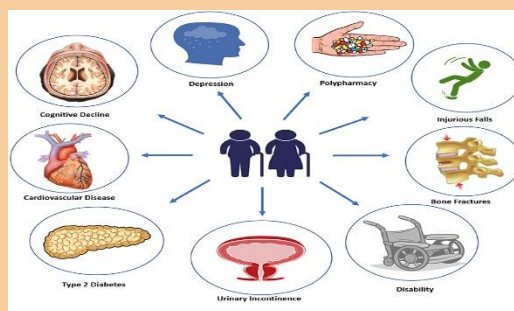
Download and fill out the application packets to apply:

- [2023 Scholarship Packet](#)
- [2023 Grant Packet](#)

Learn more about [AAOHN Foundation Scholarships & Grant opportunities](#) on the AAOHN website.

Please note: You must be a member of AAOHN to be eligible for grants and scholarships.

[Apply Today](#)



Diabetes Care Guidelines Updated

The American Diabetes Association's Standards of Care for 2023, published in [Diabetes Care](#), highlights recent improvements in clinical and holistic aspects of diabetes management, including new hypertension diagnosis cut-offs and recommendations on sleep health and the role of SGLT2-inhibitors for patients with preserved or reduced heart failure ejection fraction. "This year's annual report provides necessary guidance that considers the role health inequities play in the development of diabetes, particularly for vulnerable communities and communities of color disproportionately impacted by the disease," ADA Chief Executive Officer Chuck Henderson says.

Full Story: [Endocrinology Network](#) (12/12)

Fast Track Status Granted to COVID-19/Flu Combo Vaccine

Pfizer and BioNTech's mRNA-based combination vaccine candidate for COVID-19 and influenza was granted fast track designation by the FDA. The single-dose vaccine contains mRNA strands encoding the original SARS-CoV-2 virus and a strain from Omicron BA.4/BA.5 subvariants as well as the hemagglutinin of four flu strains recommended by the World Health Organization for the Northern Hemisphere in 2022-23.

Full Story: [eMPR](#) (12/9)

Member Spotlight

Susan Stewart



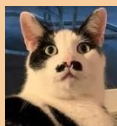
I joined the Army at 18 and served three years as a military police officer before starting a family. I graduated nursing school and subsequently earned a bachelor's degree in general studies, MBA, as well as certificates in post-master's in Nursing Education and forensic nursing. In 2019 I became the first DNP (Doctor of Nursing Practice) graduate of Aspen University.

I have worked in pediatrics, research, and the business world as an occupational health nurse. I taught allied health and business online for nine years at a two-year college and master and doctorate nursing students for two years at Aspen University. I currently work as the Employee Health and Wellness Director for ten hospitals in the Advent Health system. This combines leadership, business, and nursing education and experience.

Between my husband and I we have six grown children. I reside in Tampa Florida with my husband and four "kids" (3 dogs and a cat who thinks he is a dog). Here is my dog/cat - Benjamin Pierre. My daughter gave me my first Grandchild in January of this year.

4th Quarter 2022

What a blessing and an awesome new chapter in my life.



Inhale Occupational Health, Exhale Occupational Asthma

Rhonda Wise-Seda
USF, AGPC, APRN OH Student

Occupational asthma, also known as Baker's asthma, an occupational disease relevant to Occupational Health Nursing. Occupational asthma, according to existing national workplace health surveillance systems, has been the most commonly reported occupational respiratory disease in both the United States and Great Britain for more than two decades (Balogun et al). Specific surveillance, assessment, diagnostic and treatment regimens for work-related asthma are important responses for Occupational Health Nurses. Occupational Health Nurses should be prepared to reduce exposure, maintain effective management of workers afflicted with occupational asthma, and provide educational advancements of this occupational disease. The management of occupational asthma is a significant benchmark according to evidenced-based guidelines and recommendations. Effective management of workers suspected to have occupational asthma involves the identification and investigation of symptoms suggestive of asthma immediately.

The clinically focused priorities of this excerpt reflect occupational asthma and occupational respiratory allergies derived from bakeries. Occupational asthma is the most frequently reported work-related respiratory

4th Quarter 2022

disease in many countries (Nicholson et al). In response to collected data on the long-term effects of inhaling and handling flour, here is an opportunity for practice changes. While not the object of systematic surveillance in most countries, occupational rhinitis has increasingly been recognized as a significant source of morbidity in the workplace, particularly in such high-risk occupations as bakers. Occupational rhinitis has recently gained increased attention, and has been subject to definitions and subclassifications analogous to those of occupational asthma (Balogun). The aim is to identify work related respiratory complications, bring awareness/educational services, and promote protective equipment/technologies for the bakery worker population.

Safety is the common tread which ties total worker health together. An emphasis on first things first requires a look back at occupational health nursing's journey. By examining Occupational Health's backstory, seeking in depth recounts, advancement of the profession and higher quality evidence-based practices can be substantiated without compromising integrity. Occupational health is an imperative resource when this effective resource is utilized by the worker population. Individualized risk assessments contribute to identification factors of risky practices. Investigation is necessary, key to reducing the potential contrast to a safe work environment. The analysis of occupational asthma came to fruition. The growth of supermarket bakeries has been progressing steadily for over 20 years, however, and the market share of bread production has increased from 3% by volume in 1984 to 15% in 1999, probably at the expense of the small craft bakeries (Brant).

4th Quarter 2022

The main agents that cause occupational asthma are cereal flours (wheat, rye, barley) and enzymes (Brant). Early identification of symptoms, including mild irritations such as occupational rhinitis, require further investigation. A thorough, comprehensive, clinical, and occupational health history and assessment with early identification onset of newly acquired symptoms. Although the respiratory symptoms in cases of occupational asthma, such as wheezing, dyspnea, chest tightness, cough, and sputum production, are similar to those in cases that are not work-related, their occurrence is modulated by the work-related exposure (Tarlo & Lemiere). The relationship of specific sensitization and occupational asthma has been confirmed in many studies. Innovations in the bakery industry are leading to new allergenic ingredients. A new family of cereal allergens has been identified, including wheat thioredoxin hb (Brant). Appropriate testing including, but not limited to functional and immunological tests provide a target approach to diagnosing. Investigations should be started as soon as the diagnosis is suspected, preferably while the patient is still working, and should be as comprehensive as feasible, including assessment of clinical symptoms, objective confirmation of asthma, testing for skin or serologic specific IgE antibodies when possible, and documentation of symptomatic, functional, and inflammatory changes in response to exposure to occupational agents (Tarlo & Lemiere).

Synergy, cohesiveness between occupational health nurses and workers crystalize the impact for creating safer work environments. Occupational health nurses assess, analyze, and evaluate to arm workers' health from caustic acute or chronic conditions developed from the workplace.

Prevention of Work-related Asthma: Study Search

Prevention Level Primary

4th Quarter 2022

Author Meijster T

Study Year 2011

Country Netherlands

Molecular Weight of

Agent HMW

Agent Category Plants

Specific Agent Flour dust

Occupation Bakers

Outcome/Diagnosis Occupational asthma and rhinitis

Activity Intervention 1. Covenant (education) intervention program Health surveillance intervention

Participation Rate 10,000 workers participated in each of intervention programs, respectively for the 20 years.

Intervention

Effectiveness For without intervention: · Asthma symptoms New cases=1404, Disease years=11,968 For

Covenant intervention program: · Asthma symptoms: New cases = 1098, Disease years=9885 · A benefit f

€16,848,546 over a period of 20 years for a population of 10,000 workers. For Health surveillance

intervention: · Asthma symptoms: New cases=493, Disease years=6649 · An estimated benefit of €44,659,352

for the full 20-year period for a population of 10,000 workers

· Content source: o National Institute for Occupational Safety and Health, Respiratory Health Division

4th Quarter 2022

The most important action to reduce cases of exposure is preventative practices. Those workers who are confirmed to have occupational asthma should be advised to avoid further exposure completely and early in the course of their disease to offer the best chance of recovery (Nicholson et al). Trending bakeries, markets, and businesses within this industry may potentially help facilitate proactive measure in occupational asthma, potentially give way to predictions about future problems within this domain.

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4th Quarter 2022

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Message from the Editor

Trish Figura-Delia



The CUE is developed to keep you updated on current issues related to Occupational Health. It includes educational opportunities and messages from our various Board of Directors and Committee leaders, but it needs more! **The CUE needs you.** I search the web for articles that may be of interest, but I need to know, what are your interests? Submitting scholarly articles is a great way to share knowledge and add to your CV. It would be nice to have “happy news”, comics, recipes, etc. as part of our balance between work and home life. Can you help? Please submit suggestions or articles to me and see your knowledge in print!



Pavlova Layer Cake with Raspberries and Peaches

[VIEW RECIPE: PAVLOVA LAYER CAKE WITH RASPBERRIES AND PEACHES](#)

This show-stopping peach and raspberry pavlova cake is just 158 calories per slice. This classic meringue-based dessert with a crisp outer texture and soft, creamy inside will blow guests away at brunches, showers, and teas. We stay seasonal by topping it with fresh peaches and raspberries, but any assortment of berries and stone fruit would work.

4th Quarter 2022

Work Place Violence in Postal Workers

Vivian Oduwo

University of South Florida

Abstract:

Work place violence is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site (OSHA 1995). Postal workers are a risk group for violence because they are public service professionals who often work alone or in isolation, visit areas with high crime rates, work late and interact with different types of people including those with hostile and unstable personalities. This paper uses secondary data to identify and analyze workplace related violence experienced by postal and mail delivery workers in the United States of America. In this paper, the identified work-related violence and the effects are examined under four broad categories as follows; dog bites, violence from fellow coworkers due to unstable work environments and gang violence from rough neighborhood and terrorism.

Injuries from dog bites can cause serious infections by organisms like Rabies and Pasteurella, Violence by coworkers and customers can cause physical injury including death and can cause long lasting psychological effects like Post Traumatic Stress Disorder (PTSD). The occupational nurse plays a significant role in treatment of physically injuries, reinforcing the importance of taking proactive measures to prevent injuries, and also coordinating treatment for psychological effects.

4th Quarter 2022

Violence has increasingly become a major topic of discussion in the society. In the work place, violence can cause occupational injuries that would limit an employee's ability to perform their duties or lower their productivity. Occupational Safety and Health Administration (OSHA,1995) defines work place violence as any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It can be either physical, sexual, deprivation or psychological. Violence ranges from threats and verbal abuse to physical assaults and even homicide. It has become one of the leading causes of injury in the United States and affects employees, clients, customers and visitors. Currently violence is ranked the third leading cause of fatal occupational injuries according to the Bureau of Labor Statistics Census of Fatal Occupational Injuries. Out of the 5,147 fatal workplace injuries that occurred in the United States in 2017, 458 were cases of intentional injury by another person (CFOI, 2016).

Work place violence has been identified as a hazard especially for delivery workers. The violent physical injuries come from customers, coworkers and dogs. These injuries are at times serious enough require to medical attention. The objective of this paper is to discuss the prevalence of these types of injuries, the contributing factors, necessary precautions that can reduce the incidence of attacks and the role of the occupational health nurse is managing and preventing these injuries.

Postal workers are a risk group for violence because they are public service professionals who often work alone or in isolation, visit areas with high crime rates, work late and interact with different types of people including those with hostile and unstable personalities (Phillips, 2017). In addition, consumers are now

4th Quarter 2022

choosing to purchase goods online and in the comfort of their homes. Consequently, the demand for postal delivery workers services has sky rocketed.

Dog bites are one of the major causes of injuries for postal workers. United States Postal Service (USPS) reports that nearly 6,000 postal employees are attacked by dogs nationwide every year (USPS,2019). In 2017, the USPS reported 6,755 postal workers were attacked by dogs in 2017 and 5,714 workers in 2018. Dog bites can inflict pain, injury, or nerve damage. Domestic canines pose great risk for employees during mail delivery and occurs when the mail is delivered into the door slot and the dog bites the employees' hand or when dog perceives the mail man as threat and lunges on them. In a prospective study on epidemiology of dog bites to the face, 105 dog bite cases were reviewed. 30 % of dog bites were in adult ages 16-69. The "significant proportion of adult victims could be explained by professional activities "at risk of a bite," such as postal workers, and home delivery workers." (Toure et al., 2015). These bites can become infected with organisms like Rabies, Methicillin Resistant Staphylococcus aureus (MRSA) and Pasteurella, therefore putting the bite victim at risk for illness or in rare cases death (CDC, 2019). Some injures require multiple reconstructive surgeries and hospitalization. Moreover, these attacks can cause substantial psychological problems such as anxiety, [post-traumatic stress](#), [sleep disorders](#), [phobia](#) of dogs and of one's own image (Touré, Angoulangouli, G & Méningaud 2015). Some of these attacks can be prevented if necessary, precautions are taken by the dog owners and the mail carriers.

The reported number of dog bites has, however, decreased over the last years because most often many workers unfortunately do not file an incident report even though it is required by company policy. In 2016,

4th Quarter 2022

OSHA estimated that half of severe injuries go unreported meaning this data may underestimate the danger of certain workplaces. An intervention that has been credited with this decrease is the use of technology. The mail workers use their scanners during deliveries to record presence of a canine at any address. This is entered into a database that is used to alert all other postal workers delivering mail to that address of the presence of a canine and the need for extra caution. Customers are also asked to indicate in their pick-up application whether they have a dog. This information is also entered into the system and is also used to alert employees delivering mail (United States Postal Service, 2016). Postal employees are given a dog repellent to utilize when attacked by a dog. It is recommended that they have this on hand especially in high risk locations.

Occupational providers can reinforce the use of these resources when educating on prevention of dog bites.

The popular saying “going postal” became popular in the 1990’s when postal workers were killing each other as way of settling unresolved work-related disputes (Worsham 1998). Since then this term is used to describe violence in the work environment. Unsuitable work environments can also be a contributory factor to violence. In postal workers , this is caused by competitive pressures, pay inequity, poor industrial relations and high demand and low autonomy in completing assigned tasks. (Giga, Hoel, Cooper, International Labour, & Sectoral Activities, 2003). If these stressors are not identified and addressed early, they can cause an employee to reach breaking point and trigger physical and psychological aggression.

Gang violence is another example if violence that postal workers are exposed to. There has been reports of mail workers refusing or delaying mail to certain locations due to fear or being victims of gang violence. This was the case in 2013 when residents a Brooklyn area protested an epidemic of late mail. The postal workers

4th Quarter 2022

claimed gang violence made it too dangerous to service the area. (New York Times, 2013). In 2013 the postal service established a Workplace Environment Tracking System as its national repository for workplace environment. This system was to be utilized in managing workplace violence cases. In response to a congressional inquiry in 2015 on their work on sexual assault and harassment of its employees, the postal office reported that from September 1, 2013, through September 2, 2015, the Postal Inspection Service recorded 789 workplace violence cases nationwide, 78 of which were sexual complaints. In the six districts reviewed it was found that 60 out of 145 incidents were employees as the assailants. Seventy-three cases of non-employees attacking employees and 7 cases of employees attacking non employees. (United States Postal Service ,2016). Terrorism poses a risk for the postal sector. It can be considered as a cause of violence in the postal sector that arises from outside the work environment. This is demonstrated when a terrorism agent is shipped by mail and the postal office workers are exposed during receiving and delivery. In October 2001, four workers died from inhalation anthrax and an additional 13 developed cutaneous or inhalational disease as a result of intentional terrorist activity. Despite the fact that the incidence of such attacks have remained low , the threat still remains (OSHA, 2016).Infact there are Anthrax surveillance is continues in more than 200 postal facilities across the and CDC is considering whether to do environmental testing at thousands of mailrooms

Violence to postal workers is not significantly different than in other professions. A study by the National Institute for Occupational Safety and Health (NIOSH) and the U.S. Postal Service revealed that the rate of violence in the postal service, 0.63 per 100,000 workers, is like the rate for all industries of 0.64 per 100,000.8

4th Quarter 2022

(Jonathan, 2001). In highlighting the existing risk for violence in postal workers Phillips, (2017) stated the following:

“You won’t find the United States Postal Service on many lists of the most dangerous workplaces. But that’s because fatality rates are still commonly the only metric used to evaluate danger, which leads to an incomplete picture of the risks of certain jobs. But by looking at severe injuries, it’s now clear that one of America’s most visible professions is also one of its most vulnerable.”

Postal Service Office of Inspector General (OIG) approved implementation of measures that would assist with preventing and mitigating workplace violence. The recommendations included, mandatory workforce violence training, training employees on how to use the tracking system for documenting and reporting all incidents and periodic managerial assessments of the workplace.

The primary focus for the occupational health nurse is to use interdisciplinary approach in treatment of stress, injuries or illnesses derived from the work environment, and to provide necessary tools for the employee to prevent work related injury. Emphasis should be placed on reinforcing importance of seeking medical help as soon as injury occurs, reporting any injuries and use proactive measure to prevent any injuries. A good example is to carry a dog repellent. This can not only prevent an attack but also reduce the severity of the injury.

The occupational health professionals can also provide stress management skills and teach employees to identify stress early and reduce the cumulative effect that might lead to an employee “going postal.” Stress

4th Quarter 2022

presentation education should include encouraging employees to take breaks, eating a healthy balanced meal, getting enough sleep and maintaining a healthy work-life balance. Work place violence is an etiological factor for Post-Traumatic Stress Disorder (PTSD). Some survivors and victims of work place violence exhibit signs of PTSD. A study undertaken in 2019 showed that employees exposed to higher frequencies of violence are at greater risk of PTSD compared with nonexposed employees. (Pihl-Thingvad, Andersen, Brandt, & Elklit, 2019) Therefore, work place violence should be used as an additional factor in targeting employees at risk of developing PTSD and timely referrals to mental health providers should be initiated so the employee can get assistance. Most importantly they should be encouraging to discuss job stressors with their supervisors so that early intervention can be applied.

Even though violence among postal workers continues to occur, it is important to acknowledge that violence in other professions is also common. According to the United Bureau of Labor and Statistics, there were 500 workplace homicides in the United States in 2016. More attention needs to be placed on the threat of workplace violence. A timely broader interdisciplinary approach by occupational health providers is vital to promote safety and prevent injury in the entire workforce.

4th Quarter 2022

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4th Quarter 2022

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Job Opportunities



A New Nursing Job was Just Posted Near You!

Occupational Health Nurse

Job Summary

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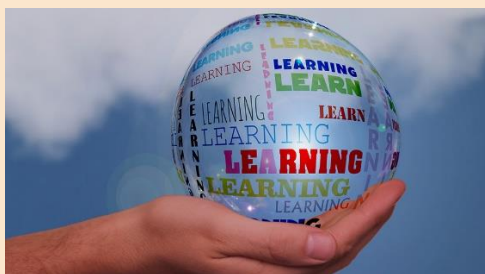
Nurse Practitioner NP or Physician Assistant PA

Tampa, FL - Position at Dispatch Health

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Educational Opportunities



AAOHN Academy

AAOHN Recorded Webinars: AAOHN strives to provide continuing education (CNE) on subjects pertinent to the occupational & environmental nursing professional. Log on to [AAOHN.org](https://www.aaohn.org) for a list of offerings.

Upcoming Conferences

February 9-11, 2023



[Pri-Med South - Primary Care CME/CE Conference & Expo](#)

14.50 CME 14.50 AANP | 1.75 Pharmacology

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Criminal Charges Against Nurses: What You Should Know and What You Can Do

A Free On-Demand Webinar

In February 2019, RaDonda Vaught, RN, was arrested on a criminal indictment and charged with reckless homicide and abuse of an impaired adult after mistakenly administering the wrong medication that killed an elderly patient in 2017. This spring, Nurse Vaught was found guilty and sentenced to three years supervised probation.

Nurses across the United States were shaken by these shocking events. Many are now worried that their mistakes can result in prosecution and possible imprisonment.

Register now to view the on-demand webinar!

Attendance is FREE for both ANA members and non-members.

Registration closes on September 3, 2022 at 1 pm.

SPACE IS LIMITED!

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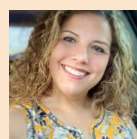
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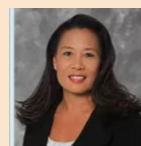
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