

ARIN Vision Vol. 17.4

Send Date: Thursday, November 8, 2012

Email not displaying correctly? [View it in your browser.](#)

ARIN Vision



President's Message

Bonjour, mes amis... Good day, my friends!



I hope this finds you all safe and sound. The ARIN Board of Directors and ARIN National Office Staff send thoughts and concerns to members who may have been impacted by Hurricane Sandy.

From all preliminary reports, the 6th Annual ARIN Fall Symposium in Pittsburgh, PA, on September 29-30, was a good time had by all! We had a total of 159 attendees, with 30 attending the Imaging Review Course. Both days were filled with very relevant, dynamic presentations and great networking opportunities. The ARIN Program Planning Committee is to be commended for another excellent educational program.

I also want to thank the ARIN Greater Pittsburgh Chapter members and Chapter President Ann Lewis for the warm welcome and hospitality extended to those in attendance. The "Meet and Greet" reception on Friday night, the "goody bags" at registration with local information and local mementos welcoming ARIN members, and the chapter-sponsored door prizes were a wonderful insight into the Pittsburgh area.

The ARIN Board of Directors held a face-to-face meeting on Friday, September 28th. During this meeting, Beth Hackett, Incoming President, and Directors Greg Laukhuf and Chris Cavanaugh, gave a presentation reporting their attendance at the National Alliance Leadership Academy (NALA), held in August in Louisville, KY. NALA is an annual training meeting for newly elected volunteer nursing leaders at a national level.

Based on this presentation, our ongoing work continues with the *Race to Relevance* principals of succession planning for Board leadership, which are aligned with our commitment to keep ARIN relevant to the membership. The Board of Directors is in the very beginning stages of creating an ongoing leadership development program for ARIN members. Whether you want to be a leader at a national or chapter level, the lone ranger leader in your individual organization, or just want to develop leadership skills for purely personal reasons, we are committed to providing resources to achieve those goals. Stay tuned!



VOL. 17, NO. 4
WINTER 2012

In This Issue:

[President's
Message](#)

[ARIN 2013](#)

[Treasurer's Report
Message from the
Executive
Director](#)

[Nursing Alliance
Leadership
Academy
Convention](#)

[From the Vision
Editor: Practice
Updates](#)

[Making the Most
of Your Member](#)

I hope you all took the opportunity to respond to the "ARIN 2012 Needs Assessment Survey," which closed on Friday, November 2, 2012. Member input is vital to future organizational planning. We will provide results of the survey in the near future. Thanks to all who participated!

As an update, I am pleased to announce ARIN has been notified that the *Radiologic and Imaging Nursing: Scope and Standards of Practice* draft document has been recommended to be forwarded to the American Nurses Association Board of Directors for action. Pending final editorial recommendations from the ANA Committee on Nursing Practice and Standards and Guidelines, the Board is committed to completing this project before the end of the year! Thanks to all who responded to the call for Public Comment; your recommendations and suggestions are valued.

I would like all members to be aware that the slate of candidates for election to the ARIN Board of Directors will be presented in the near future. Although you may be weary from the National Presidential campaign, please take the time to vote for your future ARIN Board representatives.

Full steam ahead to the ARIN 2013 National Convention in New Orleans, LA, April 14-17, 2013! The Imaging Review Course will be held April 13 and 14, and Preconvention Workshops will be held Saturday, April 14. Be on the lookout for information regarding an optional event to combine a few of my favorite things in New Orleans!

Laissez les bons temps rouler, Cher. We'll pass a good time!

Sincerely,



Christy Lee, MSN, APRN-BC, CRN
ARIN President

[^top](#)

ARIN 2013

[Profile](#)

[From the Website Editor](#)

[Contact Hour Opportunities](#)

[Annual Vascular Disease Foundation Meeting](#)

[Ohio Radiological Nurses Association](#)

[RNCB Announces Newly Certified & Recertified Radiology Nurses](#)

Refer your patients to

RadiologyInfo.org

The radiology information resource for patients

.....

Available in English & Spanish



ARIN Board of Directors 2012-2013

PRESIDENT

Christy Lee,
MSN, APRN-BC, CRN

IMMEDIATE PAST PRESIDENT

Linda McDonald,
MSN, RN, CRN

PRESIDENT-ELECT

Beth Ann Hackett,
MSN, APRN-BC, CRN

ARIN 2013 CONVENTION

Committed to Advancing Radiologic and Imaging Nursing



New Orleans

April 14–17, 2013

Imaging Review Course: April 13–14

Preconvention Workshops: April 14

ASSOCIATION FOR RADIOLOGIC & IMAGING NURSING



TREASURER

Brenda Wickersham,
MAV, RN, CRN

SECRETARY

Katherine Duncan,
BA, RN, CRN

BOARD MEMBER

Emily Timmreck,
MSN, RN, ACNP-BC

BOARD MEMBER

Chris Cavanaugh,
BSN, RN, CRNI, VA-BC

BOARD MEMBER

Greg Laukhuf,
RN-BC, CRN, NE-BC

EXECUTIVE DIRECTOR

Karen L. Green,
MHA, BSN, RN, CRN

[Top](#)

Fall 2012 ARIN Treasurer's Report

The ARIN Board of Directors and Dancy Association Management Company continue to work together to maximize the value of your membership dollar. Technology and educational program development remain high priorities, along with professional publications such as the *Core Curriculum* (currently under revision), the *Journal of Radiology Nursing*, the *ARIN Orientation Manual for Radiologic and Imaging Nursing*, *Radiologic and Imaging Nursing: Scope and Standards of Practice*, the Imaging Nursing Review Course, and the Certification Program for Radiologic and Imaging Nurses. Supporting local chapter development to promote meaningful educational and professional collegial opportunities is also high on the priority list. Our organization is well-represented among other national nursing organizations, as our nurse leader volunteers represent your professional practice among nursing colleagues across the board.

The logistics of getting our work done require clear goals, teamwork, efficient and effective

ARIN NATIONAL

OFFICE

(850) 474-7292

866-486-2762

FAX: (850) 484-8762

7794 Grow Drive

Pensacola, FL 32514-7072

arin@dancyamc.com

www.arinursing.org

ARIN Core Purpose

To foster the growth of nurses who advance the standard of care in the Imaging environment.

volunteer and paid staff, a volunteer spirit of membership, and *money*. The truth of our budget is that we operate on a lean schedule, always working to conserve resources. As a relatively small nursing organization, our operating budget requires it. We live in lean times, when we are all asked to conserve resources in our work environments. We nurses are accustomed to lean budgets and accountability for resources.

So, what does *lean* mean to us? The budget for 2012 is based upon a planned income of \$424,505. September budget figures demonstrated that we were at 73% of projected income and 63.68% of the projected expense. We are still in the black, but have a small margin keeping us there. ARIN continues to look at how we do business and doing so as efficiently as possible. Specifically, we need to carefully scrutinize where the biggest source of funds are lost and develop strategies to cut losses and make gains. A significant portion of the deficit continues to be associated with the cost of the annual convention. The larger part of income dollars is derived from membership fees, journal sales, successful conventions, the sale of ARIN products, and educational programs. Efforts to balance the budget are being undertaken, and strong initiatives to secure sponsorship of our programs have been developed. The 2012 Fall Symposium in Pittsburgh saw an increase in vendor support (up to 10) and provided \$2,500 to help defray the expense associated with the symposium, which 159 participants attended. The vendor area was abuzz during the Saturday lunch, as participants exchanged information about products and product support relevant to imaging nursing practice.

As your nursing organization, ARIN is in the process of completing a member survey to capture member interests, background, practice environments, and motivations for maintaining membership. This valuable information will be used to guide program development tailored to expressed member needs and desires. Dollars provide the means to continue association operations, but the more important and relevant asset is you, our valued member. It is you who works in the procedure room, or in diagnostic, therapeutic, interventional, or otherwise, working to maintain a safe and quality environment for patients undergoing potentially life-changing treatments. You are the link between technology and human experience. In meeting your needs as a member, your professional organization will continue to offer meaningful and relevant member services and benefits to assist you in maintaining your professional practice.

As your association Treasurer, I encourage you to participate in ARIN at the local, regional, and national level. Dollar for dollar, ARIN provides you with the tools for professional practice in the radiological and imaging settings. You provide the energy, the heart, and the hands to make it happen. Thank you for what you give. We appreciate your support as we grow into a healthier future. Together, let's work together to make it all happen! The future of our organization belongs to each of us. I encourage you to support your professional organization by actively participating and letting your voice be heard. Encourage your colleagues to join you.

Brenda Wickersham RN, CRN, MAV
ARIN Treasurer

[^top](#)

Executive Director's Message: Networking and NOA

It never ceases to amaze me—what you can learn just by saying *hello* and starting a conversation. Some may call this practice a conversation, but what they may not realize is that this the first step to networking!

Networking is defined as the “exchange of information or services among individuals, groups, or institutions; specifically: the cultivation of productive relationships for employment or business” (Merriam Webster at <http://www.m-w.com/>). But I believe networking is more... The exchange that these ideas and insight provide is crucial to developing and expanding one's outlook in a given setting and therefore improving one's organization.

One of my goals as ARIN President (2009-2012) was to foster networking among our members. What I learned from those years solidified my beliefs about the value of peer input and conversation. To date, as the ARIN Executive Director, I have had several opportunities to network with our members, colleagues, and industry leaders in the name of ARIN. The result has led to expanding our respective knowledge of each other and the topic at hand.

So why am I focused on networking? By the time this issue of *Vision* is published, Christy Lee, ARIN President, Beth Hackett, ARIN President-Elect, and I will be getting ready to attend The Nursing Organizations Alliance (NOA) Fall Summit in Nashville, Tennessee. I first attended this meeting as the ARIN President. Can you imagine sitting in a room with the leaders of our national nursing organizations? All of that brain power and prestige in one room. Then realize that while these men and women are role models for all nurses, they are people too, who want to educate, mentor, and offer support to the Fall Summit attendees. The Nursing Organizations Alliance is a coalition of nursing organizations united to create a strong voice for nurses. The Alliance provides a forum for identification, education, and collaboration—building on issues of common interest to advance the nursing profession.

I am looking forward to attending this event. As the ARIN Executive Director, I have the opportunity to network with others and identify where ARIN can bond and benefit with colleagues to coordinate our efforts to increase ARIN's presence in the nursing profession and the imaging environment. As ARIN continues its race for relevance, it is crucial that we focus on our organization's goals and what will benefit our membership, since without you the members, ARIN would not exist. One topic on this year's agenda is *The End of Membership as We Know It*, presented by Sarah Sladek. I am confident that the insight offered during this session will provide crucial evidence as to how ARIN might proceed to structure services and programs that will best serve the ARIN membership. Our membership structure may change but our members will always exist and be in the forefront of ARIN.

This is a great time to be a member of the Association for Radiologic & Imaging Nursing. The focus of the Board of Directors remains on you, the member. To this end, we promise to offer the best services and educational programs possible. Our intent is for ARIN to become stronger and truly the leader of nurses working in the imaging environment.

Karen L. Green, MHA, BSN, RN, CRN
ARIN Executive Director

[^top](#)

Nursing Alliance Leadership Academy Convention

The Nursing Alliance Leadership Academy (NALA) held its yearly convention in Louisville, Kentucky, August 18-19, 2012. The Nursing Organizations Alliance (NOA) is an organization composed of board members, CEOs, Executive Directors, and Presidents from many national and international organizations. NALA is an educational program provided by NOA, targeted to newly elected and emerging leaders as orientation/board leadership development. The overall objective of the program is to provide consistent, effective volunteer governance and leadership education for individuals within Alliance member organizations. This year, we were fortunate to have three members attend—Beth Hackett, MSN, APRN-BC; Greg Laukhuf, RN, CRN, RN-BC, NE-BC; and Chris Cavanaugh, BSN, CRNI, VA-BC. The Association for Radiologic and Imaging Nursing (ARIN) applied for and won a scholarship that allowed Chris Cavanaugh, BSN, CRNI, VA-BC, to attend.

Prior to the start of the conference, each attendee was required to read the book, *Strengths-Based Leadership* by Tom Rath and Barry Conchie. Participants were required to complete an online strengths profile by the Gallup organization. The results were the working basis for the first day of the conference.

The first day was dynamic and covered hard-hitting topics to strengthen and enhance

potential leadership skills. Topics presented included: the reporting relationship between board and chief staff officer, common board issues, succession planning, and building networks through collaborating and connecting. The day ended with a bus tour of Louisville and information regarding its potential as a convention city.

The second day of the conference covered the legal and financial issues that arise within organizations. Information regarding budgets and legal pitfalls were shared by a slate of national leaders from the nursing and legal worlds.

This conference provided many opportunities to network and lay foundations for future cross-pollination with nursing colleagues in oncology, orthopedics, nephrology, and emergency room nurses.

Beth Hackett, MSN, APRN-BC, CRN
ARIN President-Elect

[^top](#)

Practice Updates from the *Vision* Editor...

I am sure you, my fellow radiology nurses, are wondering why on earth I am addressing this National Patient Safety Goal (NPSG). We are in the midst of revising our EPIC orders at the University of Minnesota Medical Center, Fairview, and our builder consultant informed us that we needed to add certain language to our order set because this NPSG is being implemented in 2013. So for those of you who are building or revising, I thought I would show you an example of what the compliance individuals wanted.

2012 National Patient Safety Goal Hospital Accreditation Program

Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infections (CAUTI). *

Note: This NPSG is not applicable to pediatric populations. Research resulting in evidence-based practices was conducted with adults, and there is not a consensus that these practices apply to children.

Footnote *: Evidence-based guidelines for CAUTI are located at: Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals [here](#).

Guideline for Prevention of Catheter-associated Urinary Tract Infections, 2009 [here](#).

NPSG.07.06.01

Elements of Performance for NPSG.07.06.01

During 2012, plan for the full implementation of this NPSG by January 1, 2013.

Note: Planning may include a number of different activities, such as assigning responsibility for implementation activities, creating timelines, identifying resources, and pilot testing.

Insert indwelling urinary catheters according to established evidence-based guidelines that address the following:

- Limiting use and duration to situations necessary for patient care
- Using aseptic techniques for site preparation, equipment, and supplies

Manage indwelling urinary catheters according to established evidence-based guidelines that address the following:

- Securing catheters for unobstructed urine flow and drainage
- Maintaining the sterility of the urine collection system
- Replacing the urine collection system when required
- Collecting urine samples

Measure and monitor catheter-associated urinary tract infection prevention processes and outcomes in high-volume areas by doing the following:

- Selecting measures using evidence-based guidelines or best practices
- Monitoring compliance with evidence-based guidelines or best practices
- Evaluating the effectiveness of prevention efforts

Note: Surveillance may be targeted to areas with a high volume of patients using in-dwelling catheters. High-volume areas are identified through the hospital's risk assessment as required in IC.01.03.01, EP 2.

IR Pre-Procedure

Indwelling Urinary Catheter (Foley)

Indwelling Urinary Catheter (Foley)

Routine, effective now

Reason: Other: Groin puncture, inability to adequately empty the bladder with procedure, patient is on bed rest and received sedation

Discontinue catheter when no longer needed per Fairview Urinary Catheter Management Protocol

IR Post-Procedure

Indwelling Foley Catheter Management

Discontinue Indwelling Urinary Catheter (Foley)

Discontinue Foley Catheter: Other – When bed rest is completed according to procedure requirements.

Discontinue catheter when no longer needed per Hospital Urinary Catheter Protocol

Bladder Scan and Straight Cath for urine

Routine effective now PRN

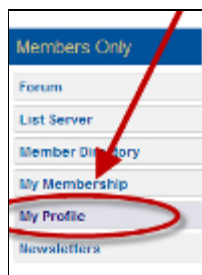
Bladder scan 4 hours post Foley removal if no voiding. Straight catheter if urine residual greater than 300 mL by bladder scan OR use bladder scanner and intermittent straight catheter per unit/population specific criteria or specific provider order. If straight catheterization is required greater than 48 hours, notify the attending provider.

Sharon Lehmann, MS, RN, CNS

[^top](#)

ARIN Membership Directory: How to Make the Most of Your Member Profile

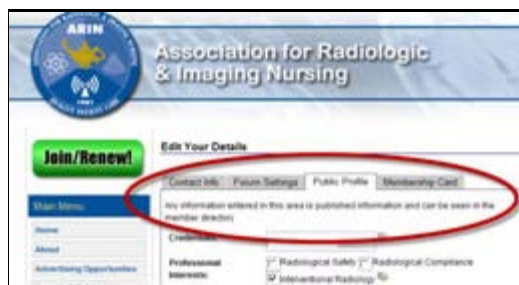
The ARIN membership directory is one of the benefits of membership, allowing you to connect with other ARIN members by name, city, state, or zip code. When an individual becomes a member of ARIN, only the member's name, city, state, and employer name is available for other ARIN members to see.



Unless you personally update your profile, a member visiting your profile will be able to send you an e-mail but will not know your credentials, your title, area you work in, or other information you choose to share with members.



Updating your information is simple: under the "Members Only" section, click on "My Profile." On top of your profile page, you will click the "Edit" button. Choose "Update your Image" to upload a picture of yourself and "Update your Profile" to add your contact information. While on the "Edit your Details" page, you will have a "Public Profile" tab where you can make some or all of your contact information available to all ARIN members.



You may also print your membership card from your profile page. The "Membership Card" button is located at the very bottom of the page, underneath the president's message.

The ARIN National Office is open Monday-Friday, 8 a.m. to 5 p.m., Central Standard Time (CST). Please contact us if you have questions or require assistance with the website. We can be reached toll free at (866) 486-2762 or via e-mail at arin@dancyamc.com.

[^top](#)

Note from the ARIN Website Editor

My name is Tabatha Fairchild. I am a Registered Nurse at the Atrium Medical Center, Interventional Radiology department, in Middletown, Ohio. I've been a member of ARIN since 2010. I became involved with the ARIN Webinar committee in 2011 when I answered a call on the ARIN website for volunteers. I was then offered and accepted the Web Editor position. I want you to know that I have had no prior website editing experience, but I have had experience as an EPIC OPTIME trainer for the Atrium Medical Center.

My role as ARIN website editor includes:

1. Monitoring the pages and content of the website to ensure the information is current, accurate, and complete, and that it enhances ideas to and among ARIN members.
2. Respond to Board charges regarding use of the website to further ARIN'S core values and goals.
3. Make recommendations to the Board about major changes to the format, design, and content of the website.
4. Evaluate requests for links from the ARIN website for appropriateness and potential conflict of interest.

Being a member of the ARIN Website Workgroup has been a great way to become involved,

meet new people, and learn more about ARIN and interventional radiology nursing around the US. I encourage everyone to become involved, even if you don't have experience. The list server is a great way to talk about information with nurses around the world.

You never know what you may achieve until you try!

Tabatha Fairchild, RN
ARIN Website Editor

[^top](#)

Contact Hour Opportunities

Are you in need of contact hours? Is your CRN coming up for renewal? Were you not able to attend the Fall Symposium? Did you know that webinars are archived on the ARIN web site? If you look on the left side of the homepage at www.arinursing.org, you will find a button titled, "Online Learning." Clicking the button will bring up a list of courses you can sign up for.

As a member benefit, webinars are stored on the ARIN website. You can listen to them when it is convenient for you. One contact hour costs just \$15 - 30, depending on the topic.

The topics available currently include:

Live Webinars:

Patient Protection and Affordable Care Act: A General Overview and Its Effects on Radiology
Anaphylaxis: What is Going On?

Archived Webinars:

Safety in the Imaging Environment
Capnography as an Adjunct Safety Measure
Vascular Access 101
Radiation Protection in the Interventional and Cardiac Suite

Also, watch for a new webinar coming up in December, with Kathy Duncan as the presenter. Her topic is, *What Do You Need to Advance the Standard of Care in Your Radiologic/Imaging Nursing Practice?*

[^top](#)

VESSEL: The Annual Meeting of the Vascular Disease Foundation

The Vascular Disease Foundation Annual Meeting was held in McLean, Virginia September 21-23, 2012. *VESSEL: The Annual Meeting of the Vascular Disease Foundation* covered a vast array of topics that all affect the vascular health of the patients we care for in some way. This meeting serves to educate those who attend, as well as to provide a source of continual networking possibilities. Following are some statistics to be aware of.

Read more about Vascular Disease statistics [here](#).

AAA

- Each year, physicians diagnose approximately 200,000 people in the United States with Abdominal Aortic Aneurysm (AAA).
- Of those 200,000, nearly 15,000 may have an AAA threatening enough to cause death from its rupture if not treated.

PAD

- One in 3 people age 70 or older has Peripheral Arterial Disease (PAD).

- PAD affects at least 8 to 12 million Americans.
- The disease prevalence increases with age and 12-20% of Americans age 65 and older (4.5 to 7.6 million) have PAD.
- As the population ages, the prevalence could reach 9.6 to 16 million in those ages 65 and older.

STROKE

- Stroke is the number four cause of death and the leading cause of adult disability in the United States.

VENOUS DISEASE

- Ten times more people suffer from venous insufficiency than PAD in the United States. It affects all age groups.
- More than 24 million Americans have varicose veins and 6 million have skin changes associated with Chronic Venous Insufficiency.
- Dangerous blood clots form in the leg veins of more than 2.5 million Americans each year.
- 10-35% of adults have leg veins that do not work properly.
- Half a million Americans have ulcers on their legs caused by diseased veins.
- DVT occurs in approximately 1 person in 20 over his or her lifetime.
- More than 600,000 people are hospitalized for DVT each year.
- DVT with its risk of PE may be the most preventable cause of death among people hospitalized today in the United States.
- Chronic Venous insufficiency (CVI) can cause varicose veins, leg edema, leg pain, chronic skin changes, and non-healing ulcers. These problems may make it difficult to sit or stand for long periods of time, and can make it difficult to work at home or on the job.
- Post-thrombotic syndrome (PTS) may develop following DVT in up to two-thirds of those affected. Pain and leg swelling often limit normal activities.

More than 75 organizations work with patients in the care of vessel health and disease. Below is a list of some of those organizations.

[Vascular Disease Foundation](#) (VDF):

Established in 1998, the Vascular Disease Foundation is the only multidisciplinary national public 501(c)(3) non-profit organization focused on vascular disease with the sole purpose of providing public education and improving awareness about vascular diseases.

[Peripheral Arterial Disease Coalition](#):

The Peripheral Arterial Disease Coalition is an alliance of leading medical organizations, health professional societies, governmental agencies, and corporations united to improve the health and care of patients with PAD.

[Venous Disease Coalition](#) (VDC):

The Venous Disease Coalition (VDC) is a collaborative network of professional and public organizations united by one mission: To increase awareness of venous disease to the public and for health professionals. VDC is a public and interdisciplinary consortium.

Organizations Represented at the Vascular Disease Foundation Annual Meeting:

[Vascular Disease Foundation](#)

- American Association of Cardiovascular and Pulmonary Rehabilitation
- American College of Cardiology
- American Heart Association
- American Society of Hematology
- American Venous Forum
- Society for Clinical Vascular Surgery
- The Society of Interventional Radiology

- Society for Vascular Medicine
- Society for Vascular Nursing
- Society for Vascular Surgery
- Society for Vascular Ultrasound

[Peripheral Arterial Disease Coalition](#)

- American Academy of Nurse Practitioners
- American Academy of Physical Medicine and Rehabilitation
- American Academy of Physician Assistants
- American Association of Black Cardiologists
- American Association for Cardiovascular and Pulmonary Rehabilitation
- American Association of Critical Care Nurses
- American College of Cardiology
- American College of Clinical Pharmacy
- American College of Foot and Ankle Orthopedics and Medicine
- American College of Foot and Ankle Surgeons
- American College of Physicians
- American Diabetes Association
- American Geriatrics Society
- American Heart Association
- American Pharmacists Association
- American Medical Women's Association
- American Osteopathic Association
- American Physical Therapy Association
- American Podiatric Medical Association
- American Society of Hematology
- American Vascular Association
- American Venous Forum
- Amputee Coalition of America
- Angiogenesis Foundation
- Association for the Advancement of Wound Care
- Association for Radiologic and Imaging Nursing
- Association of Vascular and Interventional Radiographers
- Canadian Cardiovascular Society
- Canadian Interventional Radiology Association
- Canadian Chapter Society for Vascular Nursing
- Canadian Society for Vascular Surgery
- Canadian Podiatric Medical Association
- Cardiovascular Research Foundation
- Center for Vascular Awareness
- Centers for Disease Control and Prevention
- Dare to Care
- German Society of Vascular Medicine
- HHS Office of Public Health and Science
- Indian Health Service
- International Federation of Podiatrists
- International Society of Endovascular Specialists
- Men's Health Network
- Minneapolis Heart Institute Foundation
- National Council on the Aging
- National Gerontological Nurses Association
- National Heart, Lung, and Blood Institute
- National Hispanic Council on Aging
- National Lipid Association
- National Medical Association
- National Minority Quality Forum
- National Women's Health Resource Center
- New England Society for Vascular Surgery
- Peripheral Vascular Surgery Society
- Preventive Cardiovascular Nurses Association

- Sister to Sister
- Society for Cardiovascular Angiography and Interventions
- Society for Clinical Vascular Surgery
- Society for Vascular Medicine
- Society for Vascular Nursing
- Society for Vascular Surgery
- Society for Vascular Ultrasound
- Society for Women's Health Research
- Society of General Internal Medicine
- Society of Interventional Radiology
- Spirit of Women
- Thrombosis Interest Group of Canada
- WomenHeart
- Vascular Cures

[Venous Disease Coalition](#)

- American Academy of Nurse Practitioners
- American Academy of Physician Assistants
- American Association of Critical Care Nurses
- American College of Cardiology
- American College of Chest Surgeons
- American College of Phlebology
- American Heart Association
- American Osteopathic Association
- American Society of Clinical Oncology
- American Society of Health System Pharmacists
- American Society of Hematology
- American Society for Metabolic and Bariatric Surgery
- American Thrombosis and Hemostasis Network
- American Venous Forum
- Anticoagulation Forum
- APS Foundation of America
- Association for Black Cardiologists
- Association for Radiologic and Imaging Nursing
- Association of Vascular and Interventional Radiographers
- Canadian Chapter: Society for Vascular Nursing
- Canadian Society for Vascular Surgery
- Case Management Society of America
- Diversified Vein and Interventional Clinic
- Hemophilia and Thrombosis Research Society
- Institute for Safe Medication Practices
- Medical Compression Garment Association of North America
- National Blood Clot Alliance
- National Gerontological Nursing Association
- North American Thrombosis Forum
- Preventive Cardiovascular Nurses Association
- Society for Cardiovascular Angiography and Interventions
- Society for Clinical Vascular Surgery
- Society of Critical Care Medicine
- Society of Interventional Radiology
- Society for Vascular Medicine
- Society for Vascular Nursing
- Society for Vascular Surgery
- Society for Vascular Ultrasound
- Spirit of Women
- Thrombosis Interest Group of Canada
- Vascular Cures

Respectfully submitted by Valerie Arne Grossman, BSN, RN

[^top](#)

The Heart of It All: The Ohio Radiological Nurses Association

"The Heart of It All" is a tourism slogan for the state of Ohio and aptly describes the Ohio Radiological Nurses Association (ORNA). Founded in 1990 with a group of nurses from the Northeast corner of the state, it is one of the older chapters of ARIN. It is geographically situated between the Great Lakes Chapter (GLARIN) and the Pittsburgh Chapter, proudly serving the radiology nurses of the Ohio region.

ORNA is currently at work planning a fall education event. Started as a give-back event to radiology professionals, this is our second year co-sponsoring this free, interdisciplinary event. It is held each year on the first Saturday in November during Radiology Technology week. This year, the event will be held on November 3, 2012 at the University Hospitals of Cleveland. The event is a combined effort between Covidien, University Hospitals of Cleveland Department of Radiology, and ORNA. This is a 6-ASRT hour event. Information regarding this event, along with registration details, can be found on the [ARIN website](#).

The Ohio chapter has been in full swing this past year, concentrating on enhancing the infrastructure of the organization. Projects commenced by the group include the update of the chapter bylaws, individualization of the ARIN Chapter Handbook with the addition of leadership materials for officers, and planning the fall 2012 and spring 2013 events. The chapter has undertaken exploration of membership tips shared by other chapters such as NECARIN with the use of Go to Meeting and Dropbox to increase participation of membership over wide geographical areas and the use of the Champion program to increase chapter membership.

ORNA is looking forward to a fun-filled year of growth. Details regarding our spring education event in April 2013 should be posted soon on the ARIN website. If you have the opportunity, we invite you to come join us for the day, in the heart of it all.

Greg Laukhuf, RN
2012 President Ohio Radiological Nurses Association

[^top](#)

RNCB Announces Newly Certified and Recertified Radiology Nurses

CERTIFICATION

Certification is one of the most important decisions a nurse can make. Certified nurses are recognized by their peers and employers for having achieved a standard of competency in the nursing specialty. The Radiologic Nursing Certification Board, Inc. (RNCB) would like to congratulate the following 3 nurses who passed the Radiology Nurse Certification exam on May 5, 2012 and met the requirements to obtain the Certified Radiology Nurse (CRN) credential.

Carolyn Haithcock, Welcome, NC
Susan Hutchinson, Middletown, DE
Donna Procida, Coram, NY

With these additions, the RNCB would like to inform you of the Certified Radiology Nurse exam results for the May 5, 2012 exam. 62 nurses took the certification exam, with a total of 50 passing. This is a pass rate of about 80.6%.

RECERTIFICATION – May 2012

The Radiologic Nursing Certification Board, Inc. (RNCB) works hard to maintain the standard of excellence among nurses who have made the commitment to set themselves apart as Certified Radiology Nurses by maintaining certification. The RNCB would like to congratulate the following 34 nurses who met the stringent standards to maintain their certification by the end of May 2012.

Sherida Allen - Richton Park, IL
 Agnes Bartek - Sterling, VA
 Susan Benveniste - Boston, MA
 Norma Blair - Manteno, IL
 Tammy Bolen - Walnut Cove, NC
 Jeffry Clarke - Hillsborough, NC
 Jo-Anne Clemens - Tempe, AZ
 Sharice Davis - Chicago, IL
 Nitza de Pedro - Shorewood, WI
 Leslie Deerfield - Minford, OH
 Celia Dokas - Sykesville, MD
 Ganamoney Eccles - Loxahatchee, FL
 Biana Elberg - Brooklyn, NY
 Dawn Grossano - Allentown, NJ
 Ruth Hatcher - Beaumont, TX
 Sandra Hawk - Mebane, NC
 Mary Hill - Jupiter, FL
 Pamela Jones - Catonsville, MD
 Kristin Prentice - Timonium, MD
 Catherine Lozano - El Paso, TX
 Maria Mark - Maywood, NJ
 DeAnn McNamara - Brookline, MA
 Kemilla Mehata - Stamford, CT
 Joyce Page - Loma, CO
 Mercedes Reams - Stuart, FL
 Jennifer Reetz - Fall Creek, WI
 Carol Rupert - South Bend, IN
 Deborah Rupp - Jackson, NJ
 Ronald Schoenfeld - Durham, NC
 Wendy Stigale - West Deptford, NJ
 Ethel Wilbon - Houston, TX
 Barbara Wilcockson - Lakeland, FL
 Cynthia Williams-Queen - Owings, MD
 Eileen Wolper - Belfast, ME

RECERTIFICATION – August 2012

The Radiologic Nursing Certification Board, Inc. (RNCB) works hard to maintain the standard of excellence among nurses who have made the commitment to set themselves apart as Certified Radiology Nurses by maintaining certification. The RNCB would like to congratulate the following 25 nurses who met the stringent standards to maintain their certification by the end of August 2012.

Sandra Armentrout – Carrollton, TX
 Jennifer Bieshaar – Mansfield, TX
 Rebecca Clark – Spokane Valley, WA
 Sindy English – Smithville, MO
 Susan Gaffney – Parsippany, NJ
 Debra Golding – Brookline, MO
 Karen Green – Philadelphia, PA
 Jeannette Hill – Palm Harbor, FL
 Catherine Hull – Wildersville, TN
 Kimberly Jolly – Sumter, SC
 Nancy Kniivila – Auke, AK
 Pamela Lewandowski – Posen, MI

Frances MacCormack – Hillsborough, NJ
Elaine Mara – Grove City, OH
Teresa Maudlin – Brunswick, GA
Robin McClelland – Franklin, VA
Avis Mesi – Millville, NJ
Cynthia Oldaker – Lewisville, NC
Elaina Smith – Rexburg, ID
Deborah Thomas – Casa Grande, AZ
Kaylene Wiley – Olathe, KS
Wendy Williams – Galveston, TX
Elaine Woerner – Atglen, PA
Kathy Zarccone – Seldon, NY

[^top](#)