

# ARIN Vision Vol. 18.2

Send Date: Friday, May 10, 2013

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ARIN Vision



## Incoming President's Message

### *Presidential Speech*



Distinguished Board Members, Members of International AMC, Fellow Association for Radiologic and Imaging Nursing (ARIN) Members:

I am honored to have the opportunity to represent you as the President of ARIN.

Henry Ford's interpretation of collaboration was, "If everyone is moving forward together, then success takes care of itself."

As stated by *Harvard Business Review* (Jan. 2013), "Leaders and organizations are acknowledging that even their best individual efforts can't stack up against today's complex and interconnected problems. They are putting aside self-interest and collaborating to build a new civic infrastructure to advance their shared objectives. It's called collective impact and it's a growing trend across the country."

**Collaboration** is the focus word that I have selected for my presidency term. What does collaboration mean, what is my interpretation of it, and how can we make it work to enable ARIN to be the best it can be, especially in these difficult economic times? **Collaboration** is working together to achieve a goal. It is more than the intersection of common goals seen in cooperative ventures, but a deep, collective, determination to reach an identical objective. The goal, our goal, is to move ARIN forward.

I feel that as an organization, if we are to move forward, we all must work together, collaborate. In order to work together seamlessly, everyone must have the same basic knowledge, needs, and goals. Having come into this position without having served on the board, I had to first understand the



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SUMMER 2013

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workings of the board. I had attended the yearly convention for a number of years, and other than the planning committee, on which I served, I was not really aware of the other committees or the board operations.

I would like to provide you with that basic knowledge of the setup of the organization. Karen Green is the ARIN Executive Director, and is employed by the management company, International AMC. Harriet McClung is the ARIN Account Executive at International AMC. The members of the Board are as follows:

President-Elect: Greg Laukhuf, RN-BC, CRN, NE-BC  
 Immediate Past President: Christy E. Lee, MSN, APRN-BC, CRN  
 Treasurer: Brenda Wickersham, MAV, RN, CRN  
 Secretary: Kathy Duncan, BA, RN, CRN  
 Board Member: Chris Cavanaugh, BSN, CRNI, VA-BC  
 Board Member/Director of Education: Brenda N. Boone, PhD, RN, CRN  
 Board Member/Director of Leadership Development: Kathy H. Baker, MBA, BSN, RN, CCRN, CNRN, NE-BC

The board has dedicated their time to making this organization work. Their hard work has benefited ARIN in numerous ways. I would like to say *thank you* to them for being there for all of us.

The present committees and their functions are as follows:

1. **Awards & Scholarships Committee**: The Awards & Scholarships Committee promotes all of the ARIN award and scholarship opportunities to ARIN members. The committee reviews all applications that are submitted for ARIN annual awards and scholarships, and selects the recipients of the awards. The committee may also make recommendations for new ARIN awards and scholarships.
2. **Chapters Committee**: This committee works with forming chapters to assist them through the steps to being chartered. The committee is also responsible for helping chartered ARIN chapters maintain active status.
3. **Nominating Committee**: This will soon become the Leadership Committee. The Nominating Committee oversees the election of National Officers, Directors, and the Nominating Committee members. The Committee solicits for candidates for the Board of Directors and Nominating Committee from the active ARIN membership. The Committee will select a final slate of candidates for the national election ballot through a process of assessment that is consistent with the criteria and requirements set forth.
4. **Convention Program Planning Committee**: The most time-intensive ARIN committee. The Convention Program Planning Committee is responsible for reviewing the abstracts and coordinating the annual ARIN Convention. A separate Fall Symposium Committee is responsible for reviewing the abstracts and coordinating the annual ARIN Fall Symposium.
5. **Public Policy Representative**: ARIN appoints a Public Policy Representative to monitor ongoing legislation issues that may have an impact on ARIN members. The Public Policy Representative attends the Nursing Organizations Alliance in a legislative training program, the Nurse in Washington Internship (NIWI), on a biannual schedule.
6. **Webinar Committee**: This committee is charged with planning and developing topics for webinars that will enhance radiology and imaging nurses' knowledge in keeping with the ARIN core purpose-to foster the growth of nurses who advance the standard of care in the imaging environment. This includes identifying topics and speakers for future ARIN sponsored webinars and working with

## Award Recipients

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 Diversity

Radiology Nurse's  
 Day

RNCB Announces  
 Recertified  
 Radiology Nurses

ARIN Welcomes  
 New Members

Refer your  
 patients  
 to

***RadiologyInfo.org***

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 information resource  
 for patients

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Available in  
*English & Spanish*




**ARIN Board of Directors  
 2013-2014**

**PRESIDENT**  
 Beth Ann Hackett, MSN,

staff on the preparation of these webinars.

7. **Website Work Group:** This workgroup is for ARIN members interested in overseeing the ARIN website. The ultimate goal of the workgroup will be to identify an ARIN Website Moderator and Website Master to work alongside the ARIN Website Editor; however, the work can be accomplished as an ad hoc work group until the positions are filled.

Board members meet monthly and attend three face-to-face meetings yearly. Committees meet monthly. Members of the board and committees are elected by the membership and board.

The liaisons/affiliate associations ARIN is currently involved with are the American Healthcare Radiology Administrators, the Society of Interventional Radiology (SIR), the Radiologic Nursing Certification Board (RNCB), American Nurses Association (ANA), and RAD-AID. Our currently pending alliance with ANA will allow us to be current in public policy development. ARIN membership has its rewards, as many of you know. Benefits of belonging to the organization include: the *Journal of Radiology Nursing*, the *Vision* newsletter, the *ARIN Core Curriculum for Radiologic and Imaging Nursing* (for which the 3rd edition is currently underway), the forthcoming CRN-ACCN accreditation, the Imaging Nurse Review Course modules, the fall and spring conventions, webinars, leadership development, the *Scope and Standards*, a contract with ANA, the Orientation Manual, Position Statements, and Clinical Practice Guidelines.

The board has been utilizing the book, *Race for Relevance: 5 Radical Changes for Associations* by Harrison Coerver and Mary Byers (ASAE Association Management Press, 2011), to position ARIN in the future healthcare market. The main points in the book include the restructuring of the governance model and committee operations, empowering the CEO and enhancing staff expertise, rigorously defining the member market, rationalizing programs and services, and building a robust technology framework. The board members have been introduced to this concept through a conference sponsored by the Nursing Organizations Alliance. The goal is to position the organization to survive in the current healthcare environment. I encourage all members to purchase and read this book.

This year, we developed and put forth to our members a membership survey. The goal of the survey was to discover what members need from their organization. We have approximately 2,000 members and 221 answered the survey. The results of the survey were sorted into three categories: Education, Reference, and Chapters.

First and foremost, you are requesting more education, and affordable education. We have now designated one of the Board positions as the Director of Education. In developing this role, we have taken into account your requests for access to more educational CEUs, easier access to webinars, the availability of CEUs in the journal, less expensive education, and the opportunity to earn CEUs that count toward certification. The objectives of the Director of Education are to identify and develop opportunities for education, increase CEU opportunities via multimedia formats, improve access to outside CE, and to ensure the provision of yearly CEUs in the journal. The Director of Education will also monitor the Imaging Nurse Review Course, contribute to the *Core Curriculum*, and look for creative ways to provide members with CEUs for certification and recertification.

Secondly, the survey results revealed the need for more reference policies, practice guidelines, and position statements. We are presently working on a revision of the position statements and practice guidelines. We will be

APRN-BC, CRN

**IMMEDIATE PAST  
PRESIDENT**

Christy Lee, MSN, APRN-BC, CRN

**PRESIDENT-ELECT**

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

**TREASURER**

Brenda Wickersham, MAV, RN, CRN

**SECRETARY**

Katherine Duncan, BA, RN, CRN

**BOARD MEMBER**

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

**BOARD MEMBER/Director  
of Education**

Brenda N. Boone, PhD, RN, CRN

**BOARD MEMBER/Director  
of Leadership Development**

Kathy H. Baker, MBA, BSN, RN, CCRN, CNRN, NE-BC

**EXECUTIVE DIRECTOR**

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

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**ARIN Core Purpose**

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

reviewing and revising the strategic plan to move forward in this arena. The Orientation Manual is also being revised, while the *Scope and Standards* was completed this past year. There are also plans for a textbook on new trends in IR for interventional nurses.

Thirdly, the membership survey results revealed needs concerning the Chapters Committee. The Board has several thoughts about how to reorganize the committee. Possible functions for the committee are to:

1. Monitor all chapters to ensure they are maintaining active status. Review with those chapters that are not maintaining active status, determine what the problem is, and correct it.
2. Reach out to radiology nurses who are not involved in a chapter. Market, solicit the formation of a chapter, and encourage membership in ARIN.
3. Assist with forming new chapters. The development of new chapters will possibly include virtual and international chapters.
4. Assist with the development of webinars on topics concerning chapters.

The goals of my presidency are simple:

1. To work collaboratively with ARIN members, and to engage members on the journey to making ARIN the "go-to" organization for information on radiology and imaging nursing and for other nurses caring for patients undergoing a radiological exam.
2. To help ARIN become the leader in imaging nursing and set the standards for others.
3. To increase membership. If everyone in the organization gets one more person to join, we will double our membership.
4. To successfully reorganize the Board to provide ARIN members with the necessary tools to assist them to be the best imaging nurses they can be, even if it means being the lone ranger to a staff member in a larger institution.
5. To maintain financial stability and continue to cut costs, plan cost savings and money generating opportunities, and closely monitor ARIN's financial well being. Presently, we are looking at grants to assist with covering educational costs.
6. To increase involvement in public policy. Changes in healthcare are coming rather quickly with Accountable Care Organizations and Medicare changes. We need to be at the forefront in the current healthcare environment, and should become more involved in public policy by voicing our views as a strong, united organization.
7. To remain abreast of practice changes in the imaging world through the SIR website, the American College of Radiology (ACR) website, and the Joint Commission. We will be sending out eBlasts to members as changes occur and will ensure the information is readily available to the membership.

I am positive that ARIN members have wonderful ideas to make this a greater organization. The question becomes: How does the Board get your ideas and information? To this end, a new page on the ARIN website at [www.arinursing.org](http://www.arinursing.org) will be added to provide a dedicated portal for you to submit your thoughts, ideas, and solutions to enhance the functions of ARIN. The webpage will be called "Your Thoughts." Please share your thoughts. Feel free to contact me or any of the Board members at any time.

This is your organization as well as mine--our *collaborative* organization. Let's work together to gain great success.

Sincerely

President's Signature



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

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## Immediate Past President's Outgoing Message

*Bonjour Mes Amis...* Good day, my friends!



This will be my last "official" message in *Vision*. Previous Presidents have posted their final speeches from the annual ARIN Business Luncheon. I tried to write my "final speech" for a month prior to the convention, but to no avail.

Knowing what I wanted to say to the gathered membership and knowing myself with public presentations, I jotted a few words on a piece of paper, put together 6 slides, and spoke from my heart to my collective friends and colleagues in attendance. I hope I can convey what an honor and a privilege it has been to serve as ARIN President for the past year.

My theme word for my 2012-2013 Presidency was *Committed*. I took the dictionary definitions of committed to heart, especially these:

- To give in trust or charge
- To pledge oneself to a position on an issue or question
- To consign for preservation
- To bind or obligate, as by pledge or assurance
- To entrust, especially for safekeeping
- To do; perform; perpetrate

I also had to joke that my theme word really meant to consign to custody or place in an institution or hospital by or as if by legal authority! I am positive that my wonderful Board of Directors, Executive Director Karen Green, MS, BSN, RN, CRN, and Harriet McClung, ARIN Account Executive, sometimes questioned whether or not they had the authority to enforce that!

The responsibility of your trust and your charge that I lead ARIN became a reality from day one. This is a very humbling experience, knowing that as President, you are the final responsibility for the entire organization. That the membership had the confidence in my ability will be treasured for all times. I hope I have met your expectations.

My goals for ARIN during my Presidency were to see through to completion all the projects ARIN had outstanding, in order to move the organization in a more relevant and dynamic direction. I am pleased to count in the accomplishment of my Presidential goals:

***Joint Practice Guideline for Sterile Technique during Vascular and Interventional Radiology Procedures:*** *From the Society of Interventional Radiology, Association of periOperative Registered Nurses, and Association for Radiologic and Imaging Nursing, for the Society of*

*Interventional Radiology (Wael Saad, MD, Chair), Standards of Practice Committee, and Endorsed by the Cardiovascular Interventional Radiologic Society of Europe and the Canadian Interventional Radiology Association.* Danny Chan, MD, MBA; Denise Downing, MS, RN, CNOR; Christine E. Keough, BSN, RN, CRN; et al.

I informed membership that the title was the reason this project took so long to reach fruition! In fact, this project started as a collaborative idea in 2008 and was jointly published in *JVIR* and *JRN* in December, 2012. This landmark publication solidifies the partnership and collaborative efforts of those of us who practice in interventional imaging arenas. I must give special recognition and a thank you from the membership of ARIN to Chris Keough, BSN, RN, CRN, for her expertise, tenacity, and vigilance for making this project a reality.

***Radiologic & Imaging Nursing: Scope and Standards of Practice*** (2013), was introduced and available for purchase to membership on-site at the 2013 Annual Convention in New Orleans, LA.

Co-published by ARIN and the American Nurses Association (ANA), the new *Scope and Standards* builds upon the previously published *Radiology Nursing: Scope & Standards of Practice* (2007) by incorporating the broader practice environment that nurses working in this specialty are encountering in their nursing practices. The new *Scope and Standards of Practice* also incorporates standards for the advanced practice nurse in all of the areas covered throughout.

The advanced practice nurse in the imaging environment uses scientific processes and the new *Radiologic and Imaging Nursing: Scope and Standards of Practice* as the framework for managing patient care. The *Scope and Standards* guides and supports the imaging APN's practice from assessment and diagnosis through treatment and evaluation, with emphasis on maintaining a safe environment.

This resource is reviewed not only by radiologic and imaging nurses in every role, organization, and practice setting, but is **the** resource document for legislators, regulators, legal counselors, and the judiciary system, for reference of the practice of radiology and imaging nursing. A very special recognition and thank you to Immediate Past President Linda McDonald, MSN, RN, CRN, for her vision, leadership, and perseverance in the revision.

### **ARIN Webinar Services**

Our webinar services are fledgling no more. Under the direction, experience, and guidance of Webinar Committee co-chairs Karen Marshall, BSN, RN, and Michael Wilson, MBA, BSN, RN, ARIN has produced 6 webinar offerings for 2012-2013. The agenda for the 2013-2014 webinar offerings are well underway, with a focus on reaching out to local chapters to provide diverse and clinically relevant topics. Informational postcards were available on-site at the convention and can be sent to anyone interested in participating in the webinar offerings, whether as a speaker, committee member, or chapter or industrial sponsor.

### **ARIN Website Upgrades**

A special thank you to Tabatha Fairchild, RN; Ana Davis, BSN, RN, CRN; and Kathy Duncan, BA, RN, CRN, Board Liaison, for the wonderful job they have done improving the ARIN website with limited resources. Please stay tuned for the opportunities these ladies will have in the future!

### **Results of ARIN Bylaw Amendment Ballot Announcement**

It is with great pride that I was able to announce the approval of the ARIN Bylaws Revision ballot. In addition to some minor language changes to the Core Values, the Membership classifications were approved to include International Members in the ARIN voting process and the ability to serve on committees. Also, I was able to give background information regarding the revisions to the Director of Education and Director of Leadership positions in the Board of Directors composition.

As will be evident in Incoming President Beth Hackett's Presidential Address, results of the ARIN Membership Survey, conducted in late 2012, indicate that these positions are needed to address our members' needs for educational opportunities, relevant leadership, and relevant membership value.

#### **Inducted ARIN Account Executive, Harriet McClung, as ARIN Lifetime Member**

Any person who has been an Active Member who has rendered distinguished service and/or contributed significantly to the professional growth of nursing in the imaging environment and to this association shall be eligible for lifetime membership. By unanimous vote of the 2012-2013 ARIN Board of Directors, it was my great pleasure to bestow Lifetime Membership upon Harriet McClung for her significant contributions to ARIN.

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Among some of the best opportunities of my Presidency have been the chance to work with the amazing group of ladies and gentleman that comprise "my" Board of Directors. While Linda McDonald, MSN, RN, CRN, Immediate Past President, and Emily Timmreck, MSN, RN, ACNP-BC, are leaving the Board, I have made lifelong friends. My admiration and appreciation for both of these ladies is boundless.

I am excited for the directions that our new President, Beth Hackett, MSN, APRN-BC, CRN, and President-Elect, Greg Laukhuf, RN-BC, CRN, NE-BC, will take us. Our newest board members, Kathy Baker, MBA, BSN, RN, CCRN, CNRN, NE-BC, and Brenda Boone, PhD, RN, CRN, have been charged with developing the new roles as Directors of Leadership and Education respectively. Kathy Duncan, Chris Cavanaugh, BSN, CRNI, VA-BC, and Brenda Wickersham, MAV, RN, CRN, have been steadfast in their commitment to ARIN. Look forward to innovations and improvements relevant to membership needs in the coming months!

Finally, thank you again from the bottom of my heart for allowing me to serve as your 2012-2013 President. I hope I have met your expectations. Also, I truly do hope you have had an amazing and enjoyable time in my "backyard" in New Orleans. I think we have fulfilled my personal goal for you – *Laissez les bons temps rouler, Cher...* We passed a good time, no?



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

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## **ARIN 2013 Reports Now Available**

The ARIN 2012-2013 Historical Reports are available [online](#).

The ARIN Annual Reports are also available [online](#).

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## Executive Director Report to ARIN Membership 2012-2013



The ARIN Membership Meeting was held on Tuesday, April 16, 2013 in New Orleans, LA. The purpose of this report is to update ARIN's established goals and their statuses.

### *Oh, The Places We Will Go!*

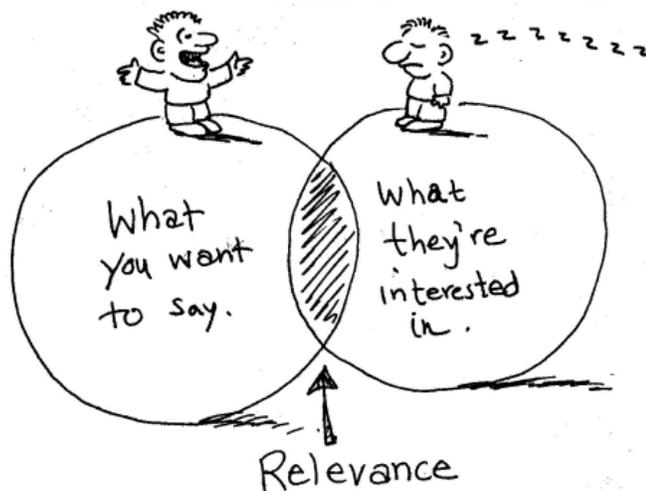
Many of the members present and those of you who were unable to attend may know me from my presentations at various ARIN educational events, but do you really know me? Just a few facts about me: I was born, raised, and completed my education in Philadelphia, PA. Like many of you, my undergraduate and graduate studies were completed part-time as I worked full-time and had a family. I began my nursing career as an Emergency Department staff nurse and moved to a position as a Nurse Manager after several years. I then moved into roles as a Clinical Educator, Consultant, and then to the Radiology setting. With two years of Radiology Nursing behind me, I became a member of the ARIN (which was known as ARNA at that time) Board of Directors, served as President (2009-2010), and, effective January 2, 2012, became the ARIN Executive Director. I am driven by my passion and dedication to this organization and vow to assist in moving ARIN to the next level. I hold memberships in several organizations, including ARIN, Emergency Nurses Association (ENA), Infusion Nurses Society (INS), The Center for Association Leadership (ASAE), and Sigma Theta Tau (STT), in addition to my alumni associations. A little known fact about me is that I was a member of my high school orchestra!

The Board of Directors, International AMC, and I established the ARIN goals. They include:

- Race for Relevance
- Membership Enhancements
- Member Development
- Improving Sponsorship
- Building Relationships

The Board of Directors takes their fiduciary responsibilities very seriously. This begins with **Race for Relevance**, a goal that was derived from a book authored by Harrison Coerver and Mary Byers, CAE, *Race for Relevance: 5 Radical Changes for Associations*. This publication encouraged ARIN Board members to think about the *Process* of how ARIN conducts business and to review the *Board Size* which, by *Race for Relevance* standards, is not far from the number the authors' believe should be five: The ARIN Board consists of 8 individuals. Defining who the *ARIN Member Market* is becomes the next consideration; I believe our member market is those of you working in radiologic and imaging departments. We complement, not compete with, the American Nurses Association (ANA), our professional organization that represents the interests of the nation's 3.1 million nurses. ARIN must also review its *Products and Services*, i.e. conferences, publications, committees, website, and liaison relationships, so that we are focusing on those products and services that are vital to ARIN members and will be strong enough to move us into the future.

The multi-generational workforce that exists in every organization and workplace poses the challenge to motivate and communicate with baby boomers and generations X and Y so that all have the feeling of belonging and connecting to each other and the organization. I believe that this sums it up perfectly:



Relevance is the outcome of talking to your children, your spouse, or co-workers. Somewhere in the middle of the conversation is the connectedness that we all must have for patient safety and being fulfilled as a coworker and ARIN organizational member.

**Enhancing Membership** is the second goal. Did you know that in 2008, there were 19,215 Imaging Nurses in the United States? The vast majority of them work in adult care. As of this writing, ARIN has 1,975 members. I challenge each of us to locate the remaining 18,240 imaging nurses and let them know about ARIN and the benefits that each of you see as a member. To increase our membership, ARIN is contacting the 397 Magnet Facilities throughout the USA, so that the Chief Nurse Executive (CNE) is aware of the ARIN benefits to his/her radiology and imaging nurses, namely our Certification Examination in Radiology Nursing, Webinar Series, Spring Convention and Fall Symposium, the *ARIN Core Curriculum*, and our newsletter, *Vision*. Additional marketing campaigns are also in the works!

ARIN is committed to **Membership Development**. The Board heard you loud and clear as we reviewed the results of the ARIN member survey during the latter part of 2012. Education was the resounding theme. To that end, we have some exciting opportunities coming your way. At the convention, sixteen (16) members attended our first Leadership Development workshop. This workshop had two main objectives: to assist members in developing and/or fine tuning their leadership abilities so that they may utilize their talents in the everyday work environment, local ARIN chapter, or perhaps at the national level. ARIN faces the challenge of succession planning for Board and committee members. To define the skills necessary and assist you in attaining and refining your skills serves everyone in the radiology and imaging communities. A mentoring program is being developed and will be offered to those who attended the workshop. Watch for more information on this project! I encourage you to mingle with the Board, stop any of us to ask a question, or bounce an idea our way! To meet the goal of enhancing educational opportunities, the Board now has a Director of Education. This role is a work in progress but I am confident we shall see great opportunities in the near future. The Board members are ordinary people doing extraordinary things as a team!

**Sponsorship** is critical for our financial success. This issue of *Vision*

includes the status of ARIN financials. We are committed to fiscal responsibility. ARIN has been building on its success at the last few Fall Symposia, targeting nurse-driven exhibitors who offer products and services crucial to the everyday patient care environment. We are also exploring grant opportunities--all with the goal of keeping ARIN financially sound.

**Relationship Building** is an everyday opportunity. Regardless of where you are working or socializing, positive relationships are vital to our well-being. The same is true of associations. We worked with SIR to review and revise our contact with them for this Annual Meeting, the goal of which was to improve the bottom line for both organizations. Walking through the exhibit hall and speaking with the exhibitors is also crucial, so that our industry partners are aware of nursing's critical presence in the imaging environment. ARIN has liaison relationships with many organizations, such as American Healthcare Radiology Administrators (AHRA), INS, and Association for Vascular Access (AVA), to name a few. Relationships with you, our colleagues, are also fundamental to our success.

I am committed, along with the Board of Directors, to moving ARIN to the next level. Through a fresh approach to our processes, ARIN will be *the* organization where Radiologic & Imaging Nurses (physicians, administrators, technologists, and industry) must go for the education and information necessary for career development and exceptional patient care. *Oh, the Places We Will Go!*

Stay tuned!

## Karen

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

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## From the Vision Editor

At the 2013 convention, we had several excellent lectures on infection control. Brenda Wickersham and I kept whispering to ourselves, "But what about the keyboard covers. How do you clean them?" Brenda finally was brave enough to go to the mic and ask the question. Then a new member stepped up and very politely said, "This is my first meeting and I am learning so much. I can't wait to get connected with everyone and I have the answer to your question."

From Suzanne Rogers, Norton Health, Georgetown, IN.

[Suzanne.rogers@nortonhealthcare.org](mailto:Suzanne.rogers@nortonhealthcare.org)

The Norton Healthcare Infection Control Matrix does not recommend the use of keyboard covers. Studies indicate that keyboards can be easily disinfected using a hospital-approved disinfectant, applying friction when cleaning and allowing to air dry.

One study tested the effectiveness of sterile water-containing wipes in comparison to the following 6 disinfectants:

- Phenolic cleaner
- 70% isopropyl alcohol
- Chlorine
- Quaternary ammonium: Sani-Cloth Plus wipes
- CaviWipes
- Clorox Disinfecting Wipes

The study included the following microbial contamination on keyboards: MRSA, MSSA, VSE, VRE, SoNs, Diptheroids, *Microoccus* species, *Baccillus* species, NF-GNR, *Propionibacteria*, Alpha *streptococci*, *Viridansstreptococci*, *Aspergillus niger*, *Aspergillus flavus*.

All disinfectants were highly effective at removing or inactivating pathogens. None of the disinfectants had any visible effect on the appearance of the letters or the keyboard, and computers worked without any functional problems.

Appropriate hand hygiene is crucial in preventing the spread of infection. The risk of transmission from contaminated keyboards is eliminated when staff performs hand hygiene after contact with inanimate objects in the patient care environment.

The Association for Professionals in Infection Control and Epidemiology (APIC) provides these guidelines for computers in patient care areas:

- Use waterless alcohol hand rub for non-soiled hands or soap and water for soiled hands prior to computer use, and prior to touching patients.
- No gloves should be worn during computer use.
- Hands must be decontaminated after accessing the computer, before touching patients in multi-bed rooms.
- Roving computers must be cleaned before moving to another patient room.
- Clean/disinfect computer surfaces, including keyboards, using a germicidal wipe containing a hospital disinfectant by wiping surface with friction for 5 seconds once a day and when soiled.
- Keyboards in patient rooms should be cleaned and disinfected with the same process as the other horizontal surfaces and equipment in the patient room, i.e., at least daily and when soiled.
- Touch-screen computer monitors should be cleaned and disinfected with same process as the other horizontal surfaces and equipment in the patient's room, i.e., at least daily and when soiled.
- Non-touch-screen monitors should be cleaned per manufacturer's instructions and/or when visibly soiled.
- When possible, install computer at least 3 feet from sink.
- Splashguard can be used between computer and sink and should be made of clear plastic that can be cleaned using disinfectant products compatible with the plastic.
- Splashguard should be cleaned with same frequency and process as all other horizontal surfaces in the patient care environment, i.e., daily and when soiled.

References: Sue Barnes, RN, BSN, CIC, National Leader, Infection Prevention and Control, Kaiser Permanente Program Offices; and Tom Weaver, DMD, APIC Director of Professional Practice | March 07, 2011; William A. Rutala, PhD, MPH; Matthew S. White; Maria F. Gergen, MT(ASCP); David J. Weber, MD

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## ARIN Annual Meeting Treasurer's Report 2013

On behalf of association leadership and management services, I am pleased to report that we are maintaining financial health in times that are challenging to healthcare institutions and associations. The unknown

outcome of the Affordable Care Act and the ripple it will set in motion, shifting dollars, changing reimbursements, decreases in services, and uncertainty are painted everywhere as financial officers of organizations re-tool operations to keep pace. At our annual business meeting, I queried the membership, “who likes budgets and budgeting?” There was no resounding “yes” to the question. Like it or not, our household budget is a reality that we work with everyday. Personally, we manage our resources to maintain a positive cash flow and grow reserves. As an organization, we do the same. We do this line by line every month, working to predict and plan for the future of ARIN’s members’ needs.

Like the budgets of other nursing organizations, the ARIN budget is membership driven. As an association of 1,989 members, we experienced approximately a 10% drop in membership in 2012. Membership revenue was \$186,026 (See Fig. 1). Reasons for dropping membership included leaving the field of imaging, reductions in force, retirement, and tightening of home budgets. In contrast, it is estimated that approximately 19,000 nurses provide support to Imaging and Radiologic departments in the US. We need to engage every nurse in imaging. There are nurses who don’t know we are here. We all need to change that, together.

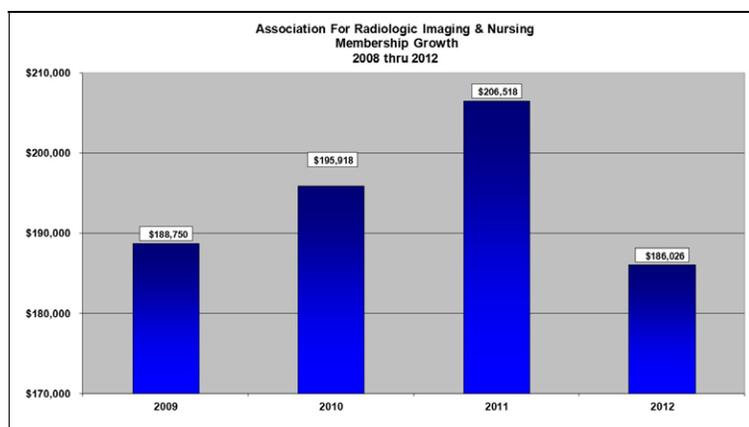


Fig. 1: Membership Growth 2008-2012

Measures to contain costs at the annual spring convention while preserving value for membership are reflected in the Four-Year Comparison Trends (See Fig. 2). This was achieved by continuing our lean and green strategy, avoiding unnecessary printing and shipping, and lightening up on some items that add significant cost. Over the past two years, we have seen the price of convention coffee rise from \$90/gallon to \$125/gallon. FYI, 1 gallon = 16 cups! Talk about mark-up...that’s over \$7.00 a cup.

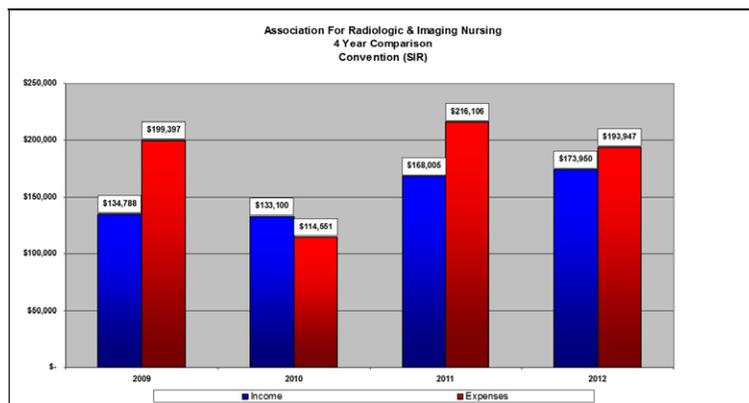


Fig. 2: 4-Year Comparison: Convention

ARIN revenues grow from membership fees, the journal and other publications, the Imaging Nurse Review Course, certification products, webinar technology, the spring convention, and the fall symposium. These revenues would not be possible without the concerted efforts of our dedicated ARIN nurse volunteers, chapter officers, faculty members, authors, editors, and engaged membership. Thank you, contributors, for creating successful programs and products that improve imaging nursing practice. Our products exist because of your efforts.

Foundation CDs are an additional source of revenue and are re-invested as they mature at the highest possible rates, and provide the highest possible return. Funds are diverted to various institutions, thus securing monies within federally insured guidelines. Another exciting initiative is the ongoing development of corporate sponsorship, similar to sponsorship enjoyed by SIR and AVIR. Corporate sponsorship helps defray expenses of the Spring Convention and Fall Symposium.

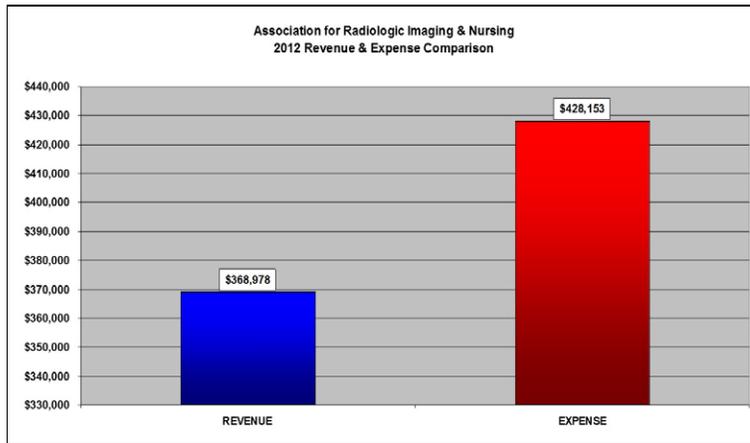


Fig. 3: 2012 Revenue and Expense Comparison

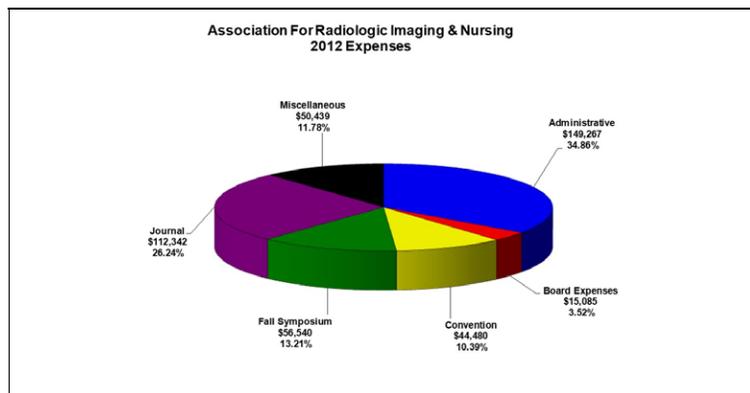


Fig. 4: 2012 Expenses

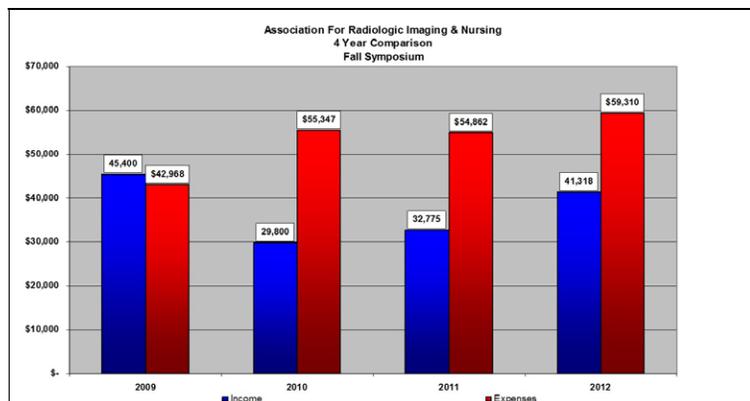


Fig. 5: 4-Year Comparison: Fall Symposium

The most important initiative for financial health is ARIN's commitment to serve you, the member. We continue our commitment to serve members by providing services and products that are *relevant* to members' needs. Your voice is important to us. Look for ways that we can make progress in meeting members' needs--whether by creating a poster; presenting a lecture on a new technology or patient care needs; or by authoring a journal article or identifying a potential corporate sponsor for the local, regional, or national level. Join us at the Fall Symposium in Cincinnati this September. Bring a colleague to San Diego next March. Invite your coworkers to join you in ARIN membership. Consider hosting a webinar!

The Board of Directors strongly encourages your participation and *collaboration* in making the Association for Radiologic and Imaging Nursing the organization that leads the way in safe and quality care, and professional practice. Our organization really depends upon you--and all of the imaging nurses who make a decision to support the organization of their specialty practice! We can achieve much, together.

Respectfully submitted,

Brenda Wickersham, MAV, RN, CRN  
ARIN Treasurer 2012-2014

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## 2013 ARIN Awards

It is the great pleasure of the Awards and Scholarship Committee to announce this year's award winners. Recipients of this year's scholarships and awards are as follows:

The **Helen Malenock Award** was presented to an anonymous recipient. This provides a complimentary 1-year membership to ARIN.

The **Charlotte Godwin Scholarship** was established to provide assistance for a member to attend the ARIN annual education meeting. It was awarded to Yu-Fan Ma, RN.

The **Dorothy Budneck Scholarship** was established to provide financial assistance for members returning to school to advance their nursing education. This year it was awarded to Sara Hawkins, MSN, RN, CRN.

The **CRN Exam Scholarship** was awarded to Mary Ann Rogers, RN. This is awarded to provide assistance in obtaining the CRN certification.

The **2013 Radiology Nurse of the Year** was awarded to Pauline Lentowski, MSN, RN, CRN. Pauline was nominated by her Banner Health College colleagues. Bonita Jones, RN and Kathryn Altergott, RN wrote in the nominating statement: "She does what is best for the patient based on evidence and research... She revamped orientation and demanded that nurses improve their practice. She does what she does with grace and style." The Radiology Nurse of the Year Award was established in 2006 by the ARIN Board of Directors and is presented to an ARIN member in recognition of outstanding radiology nursing practice as demonstrated through leadership, mentorship, and ongoing professional development.

The **Linda Strangio Editor's Award** nominee is selected by the *JRN* Editorial Board. Each manuscript is rated during the review process. This year the award was presented to Sandra Schwaner, MSN, RN, ACNP-BC,

and William L. McGee III, RN, ADN, for the manuscript entitled, "Care of the Renal Patient in Radiology," which appeared in the December 2012 issue of *JRN* (Vol. 31 #4, pp. 120-129). The recipients are awarded a plaque and a check provided by ARIN.

The ARIN Scholarship Committee would like to offer congratulations to each applicant who applied for this year's awards. Your contributions are the strength of our organization.

The committee is also proud to announce this year's Chapter Award winner. The **ARIN Chapter of the Year Award** winner goes to the Great Lakes Chapter (GLARIN). This chapter, nestled in the Great Lakes area of the U.S., has worked exceptionally hard as a team.

GLARIN has made many contributions to their community, and to ARIN. These contributions include a successful education program, community service projects, and membership recruitment, which have propelled their membership to 150 members; that number continues to climb in 2013.

The chapter of the year is known for their educational acumen. Their educational program has a successful monthly webinar component, which includes CE's for RNs and RTs. They have an educational scholarship and an annual symposium.

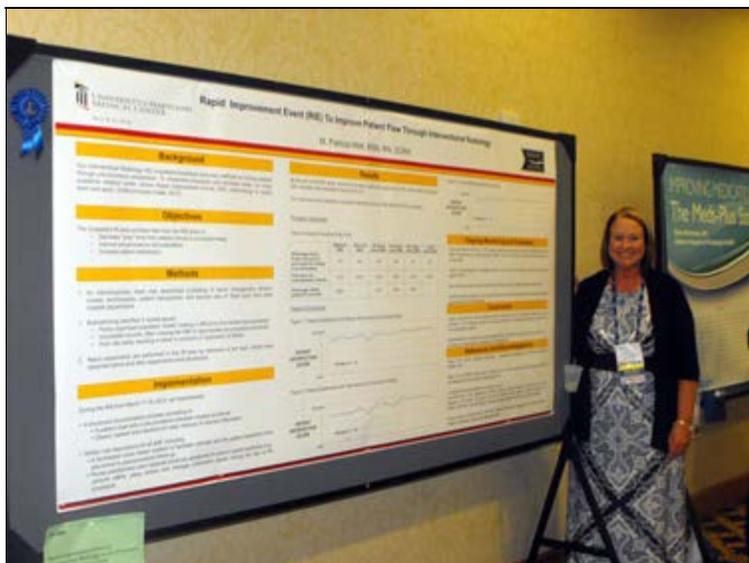
GLARIN is a model chapter as a leader in technological innovations for their members. Their cutting-edge approach includes a website, which will eventually have a "live chat" function; archived webinars; and a discussion/forum board. Their quarterly newsletter is in an electronic "environmentally friendly" format, and GLARIN members can pay their dues electronically.

The contributions from GLARIN on a national level are numerous. GLARIN members serve as co-chairs of the ARIN webinar program and serve on the Nominating Committee. Many of their leaders have presented at past ARIN conferences.

Please join us in congratulating this outstanding chapter and the members who have made them shine.

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## ARIN 2013 Poster Award Recipients



1st Place:

PS-006

*Rapid Improvement Event in Interventional Radiology at the University of Maryland Medical Center*

Mary Wall, BSN, RN, CCRN University of Maryland Medical Center, Finksburg, MD



2nd Place:

PS-010

*UNC Concussion Research and the Radiology Implications*

Katherine Duncan, BA, RN, CRN

Clinical Nurse III, AHA Instructor, UNC Hospitals, Chapel Hill, NC



3rd Place:

PS-008

*Radiation Safety, Knowledge is Power*

Katherine Yedinak, BS, RN, CCRN, CRN University of Illinois Hospital, Chicago, IL

## ARIN 2013 Convention Overview

### *Committed to Advancing Radiologic & Imaging Nursing*

The consensus at the conclusion of the ARIN 2013 Convention on Wednesday, April 17, 2013, was that this was another great meeting, full of excellent educational sessions and networking opportunities with peers working in radiologic & imaging nursing. Sessions touched on Sedation/Analgesia, Leadership, Challenging Cases, Patient Positioning, Quality, Care of Specific Patient Types: Multiple Sclerosis, Suicide, and Interventional Neuroradiology, to name a few.

Registration totaled 331 participants.

19 registered for the "Palliative Care and the Radiology Patient: Caring throughout the Continuum" workshop, which addressed understanding the radiology nurse's role in caring for the chronically ill patient undergoing palliative care procedures.

16 registered for the "Do You Have the Right Stuff? Building Tomorrow's Leadership" workshop. The best take-aways were:

"Your 2mm Change"

"The Best WHY"

"Oh, the Places You Will Go"

"Balloons Are Now Full"

45 registered for the 2-day Imaging Nurse Review Course, many of whom will use the course to prepare for an upcoming Certified Radiology Nurse Exam.

### ANNUAL MEMBERSHIP MEETING & PRESIDENTIAL ADDRESS: APRIL 16, 2013

President Christy Lee provided an overview of the work of the Board of Directors over the past year.

Executive Director Karen Green reported on the goals of the association.

Secretary Kathy Duncan presented the [Annual Historical Report](#).

Treasurer Brenda Wickersham reported on ARIN's financial standing.

ARIN Award and Scholarship recipients were announced. All Scholarships & Awards were presented this year.

Volunteers at all levels in the organization were recognized for their service. See [Annual Reports](#) and [ARIN STARS](#).

Linda McDonald and Emily Timmreck were recognized for their service on the ARIN Board of Directors as Immediate Past President and Board Member, respectively.

Beth Hackett was inducted as President, Greg Laukhuf as President-Elect, and Kathy Baker and Brenda Boone as new Board Members on the 2013-2014 Board of Directors.

Beth Hackett presented her "theme word" for the coming year as *Collaboration*, and presented her goals for the coming year during her Presidency.

### ANNUAL CALL FOR VOLUNTEERS

ARIN issued its annual Call for Volunteers ([download form](#)) at the convention and we are excited to begin putting our volunteers to work. If you are interested in volunteering for a committee or a task force (if you only have limited time to commit, a task force is the place for you) in the coming year, please download and submit the form.

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## ARIN Bylaws Revisions Approved

The ARIN Board of Directors would like to thank all ARIN members who voted to approve the proposed revisions to the ARIN Bylaws. Seventy-two members logged on to the ARIN website to cast their votes. [View approved bylaws.](#)

The approved changes are summarized below.

### Article II: CORE VALUES

- Context of values remained the same, verb tenses were changed to have similar pattern throughout.

### Article III: MEMBERSHIP

- Section 1.1: Removed grandfather clause for LVN/LPN members as Active members, as there are no current members that meet the criteria (joined prior to June 30, 1986).
- Section 1.3: Past Presidents become lifetime members at the conclusion of the term.
- Section 1.4: International members may now vote and serve on Committees.

### ARTICLE IV: NOMINATIONS & ELECTIONS

- Section 1: The Nominating Committee has been renamed the Leadership Development Committee to reflect the move to identify and mentor future leaders.
- Section 3: Changed the name to Leadership Development Committee and removed the provision for mailed ballot, as elections are now done electronically.

### ARTICLE X: AMENDMENTS

- Removed the reference to mailed ballot, as changes are approved through electronic voting.

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## From the ARIN Website Work Group

Hello and welcome back to all of you who attended the New Orleans Spring conference.

The Website Work Group has been hard at work revising and updating the website in 2013.

Navigational revisions have been made to reduce clutter and allow for additional information to be added. If you feel like something has been lost, you may always click on the handy site map, my personal favorite!

Soon to come, a work in progress: our new webinar button. Webinars are an easy way to earn CEUs and are also available archived, if you miss the live broadcast.

Thank you again to all of you who participated in the membership survey. The survey results have allowed the committee the opportunity to consider radiological nursing needs around the U.S., to help make our site the go-to source for educational resources, certification resources, chapter information, and networking. Sign up for the list server for networking with other radiological nurses around the U.S. But the changes don't stop there! We are currently working on adding more relevant links and appealing templates.

Once again, we hope you will navigate the site and find it to be relevant and up-to-date. It is ever a work in progress to maintain relevance while fostering the growth of imaging nurses.

The Website Work Group Committee  
Tabatha Fairchild, RN  
Website Editor

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## Radiology in the News

### **Nightmare Bacteria**

In March 2013, several articles appeared in the news warning of a new group of "superbugs" in hospitals across the United States.

**CRE, or carbapenem-resistant Enterobacteriaceae**, have been identified by the CDC as a threat now taking root in our hospitals. These bacteria are resistant to almost all antibiotics and, according to the CDC, have quadrupled in the last ten years. Whereas these were reported at 1% of infections, it has risen to 4% in hospitals in 2012 and 18% in long-term care facilities. This is often where our most compromised and vulnerable patients can be found and succumb to the bacteria, which are known to have as much as a 50% fatality.

For radiology, we often see long-term patients come in for feeding tubes or drains and they may very well be bringing with them the superbugs that can be easily transmitted without the highest level of surveillance. The CDC is recommending complete isolation of these infected patients and sterilization of all tools and equipment used in patient rooms. This will require a new approach and dedication by radiology departments if we are not to be the cause of cross-contamination.

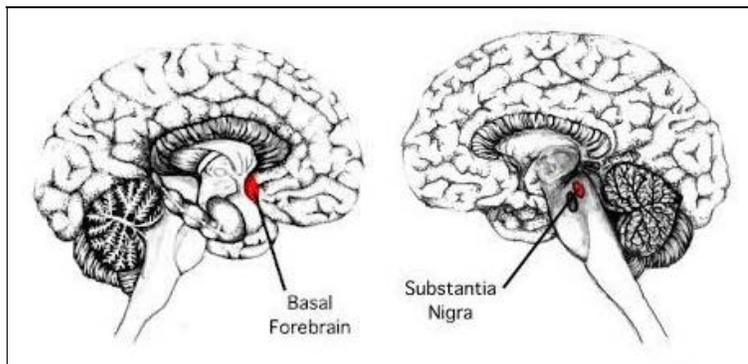
Source: Stein, R. (2013) "Infections with 'Nightmare Bacteria' Are on the Rise in U.S. Hospitals," NPR, accessed March 6, 2013 at [www.npr.org](http://www.npr.org).

### **Imaging of Parkinson's Takes on New Dimension**

In late 2012, *The New York Times* reported that MIT and Massachusetts General Hospital researchers report advances using sophisticated MRI techniques. The area of concern in the brain of Parkinson's patients is deep and hard to visualize with standard MRI protocols. They are looking for the substantia nigra which shows a loss in size first, and the basal forebrain, which is affected in later stages of the disease.

The studies were done using multispectral structural MR to measure volumes of the substantia nigra and basal forebrain. The substantia nigra region is involved in the production of the neurotransmitter dopamine and

the basal forebrain in the production of acetylcholine.



Earlier work has been done on Parkinson's disease using PET scans and has documented similar results. The article describing the techniques is quoted: *"We used new multispectral structural MR imaging sequences (T2-weighted, T2-weighted fluid-attenuated inversion recovery [FLAIR], multiecho T1-weighted, and multiecho proton density) to visualize and measure disease-related changes in these structures in a single sample of patients with PD and control subjects. These images provide a valuable window on the subcortical structures that have been implicated in PD but are not readily visible on conventional MR imaging."*

Sources:

Gorman, J. (2012). "Imaging Shows Progressive Damage by Parkinson's." *The New York Times*, November 26, 2012.

Ziegler, D. et al. (2013). "Substantia Nigra Volume Loss before Basal Forebrain Degeneration in Early Parkinson Disease." *JAMA Neurology*. 2013; 70 (2): 241-247. Accessed 3/7/2012 online at <http://archneur.jamanetwork.com/article.aspx?articleid=1397628&link=xref>.

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## ARIN Webinar Update

The next ARIN Webinar is scheduled for June 18th. Dr. Peter Sunenshine, Chief of Neurointerventional Surgery from Banner Good Samaritan Medical Center in Phoenix, AZ will be presenting, "What's New in Neurointerventional Radiology."

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## ARIN Nurse Cathy Brown Brings International Diversity to the Profession

In February 2013, Canadian-Nurse.com featured radiology nursing and our own Cathy Brown in an article titled, "The Changing Image of Radiology Nursing."

The article does justice to our field, discussing the evolution of surgical procedures to the less-invasive and high-tech interventional radiology suite. The role of the radiology nurse is discussed as no longer a job before retirement, but an exhausting and challenging job.



Cathy Brown's role as nurse navigator is described as the key to consulting and educating the IR patient on what they are facing. Cathy typically has 100-150 consultations per year, as well as working in the IR suite on procedures. The unique knowledge of the radiology nurse can make a life-saving difference for the patient bleeding post-procedure and needing quick action.

Cathy, the only certified radiology nurse in her province and only one of three in Canada, attributes ARIN with her learning opportunities. Cathy states of ARIN annual conventions, "I've learned tons. In one procedure, they give vastly different medications (in the United States) than what we give in Canada, and I was able to talk to our radiologist about that. The information coming out of these (ARIN) events has really opened my eyes to best practices."

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## ARIN Nurses Celebrate Radiology Nurse's Day

National Radiology and Imaging Nurses Day is celebrated on April 12 every year. Read on to see how other nurses celebrated the day at their institutions:

Ronald R. Wardrope, RN, CRN, who was honored as our Radiology Nurse of the Year in 2012, was the first to wish everyone a happy Radiology and Imaging Nurses Day. Why should we not be surprised? Ron still works at The Johns Hopkins Hospital in Pediatric Radiology, located in Baltimore, Maryland. He included in his e-mail the following note:

"The note below is what was placed on our insidehopkinsmedicine intranet this a.m.:"

National Radiology Nurses Day is held every April 12 to recognize the nurses who have chosen the field of

Radiology Nursing. Radiology Nursing at The Johns Hopkins Hospital has grown from only 2 nurses in the 1950s to over 57 RNs at the present time.

Radiology Nurses assure continuity of care from their inpatient units. Radiology Nurses monitor unstable patients, are strong patient advocates as well as assisting in Conscious Sedation procedures. Radiology nurses are in over 12 different areas of the hospital ranging from diagnostic procedures to interventional procedures.

ARIN (Association for Radiologic & Imaging Nurses) is the national organization for Radiology nurses and there are now over 1986 members worldwide. The founding president [of] ARIN was a Johns Hopkins nurse, Charlotte Louise Godwin. ARIN core values are Commitment to Professionalism, Responsive to Technological Advances, Being Leaders in a Constantly Evolving Environment and Advocate for Safe Patient Care.

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From Barbara Wodehouse, RN, CRN, Kadlec Medical Center, Richland, WA

"We sent out a house-wide e-mail to let people know we were celebrating. Had cake and punch from our manager, and received 'nurse survival kits' (chocolate and a Starbucks gift card) from the Radiologists we work with."

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From Amy Jo Reiner, RN, CRN, Mankato Clinic, LTD, North Mankato, MN

"We have 3 Diagnostic Imaging RNs. The Mankato Clinic, LTD treated us to lunch at Barbara Wodehouse's bonfire. My supervisor sent me a card with a handwritten note stating, 'Your dedication is simply "grand."' With this were two 100-Grand candy bars. The Radiologist all sent us e-mails thanking us for our dedication and outstanding work."

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From Judi Flanagan-Burdine, RN, CRN, ONC, St. Rose Dominican Hospital, Henderson, NV

"With the economic restraints we are all facing, we elected to go with a little more of a grass roots style celebration this year, which included a house-wide e-mail exclaiming the wonderful celebration, and placards on the break room table.

"Below is a photo of the homemade, personalized totes we gave to each of our awesome imaging nurses. They were filled with goodies, homemade cookies, nail files, magnetized note pads, ARIN pens, ARIN T-shirts, personalized 'Happy Radiological Imaging' notes, etc."



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From Cyndi Anderson RN, CRN, Radiology Care Manager, Huguley Hospital, Ft Worth, TX

"We are a small department, but Radiology Nurses Day was celebrated in a big way! Each radiology modality showered the nurses with goodies, cards, and appreciation each day this week! It was amazing to see how much our department appreciates us! What a great group of techs we work with! Hope everyone else's was as nice as ours has been."

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From Faith Washington, BSN, RN, Nurse Manager / Inland Imaging LLC, Spokane, Washington

"I am the Nurse Manager for 13 nurses at a predominately outpatient imaging company. I sent out an e-mail to all the staff and physicians, and purchased some ARIN lunch bags. I filled the lunch bags with candy, a pen, a key ring, a travel-sized lotion (all with our company logo), and a card inside that stated, 'Happy Radiology Nurses Day 2013.' Each bag had a nurse's name on it.

"Below is a photo of the bags. The Radiologist purchased lunch for the nurses, and the CT techs created little flower pots with live flowers and plants, nestled in an emesis basin with tourniquets used as bows."



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From Sharon Lehmann MS, ACNS-BC, University of Minnesota, Minneapolis, MN

"We had cake celebrating radiology and Radiology and Imaging Nurses Day. I made cards for all of the nurses and gave them the lunch boxes from ARIN as well as an ARIN pen. We also had the ARIN posters on display for a couple weeks beforehand to educate the radiologists and techs.

"I want to thank everyone for their submissions and I look forward to hearing about Radiology and Imaging Nursing Day in 2014. If your department did not celebrate this year, perhaps you can be the one to take the lead next year."

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## RNCB Announces Recertified Radiology Nurses

RECERTIFICATION

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 26 nurses who met the stringent standards to maintain their certification by the end of March 2013.

Mary Rolston, Missoula, MI

Lai Ha Au Yang, Diamond Hill, Koiloon, Hong Kong

Connie Flores, Kirkland, WA

Jean Willis, Wilmington, DE

Brenda Hicks Wickersham, Tumwater, WA

K. Jannine Stowell, Lockport, NY

Virginia Grace, Houston, TX

Krista Purner, Wilmington, DE

Mark Sydlo, Iselin, NJ

Christine Denney, Metamora, IL

Karn Carballido, Peoria, IL

Amy Oakley, Sumter, SC

Kathy Ryan, Auburndale, FL

Dani Carlson, Boise, ID

Judith Emory, Corona, CA

Deborah Brown, Colo, IA

Camila Villacarlos, Rancho Cordova, CA

Rose Smith, St. Helena, SC

Eleanor Donnelly, Riverview, FL

Sharon Shupe, Beaufort, SC

Kathy Lloyd, Lithonia, GA

Deborah Johnston, Prince George, BC

Liji George, Snellville, CA

Ashley Childs, Tallahassee, FL

Angela Burr, Napa, CA

Juan Amaya, Converse, TX

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## ARIN Welcomes New Members

ARIN welcomes new members who joined in 2013. Below are their names, credentials, and locations.

Colleen Abbott, RN, Santa Rosa, CA  
Allison Abisch, RN, Palmetto Bay, FL  
Bonnie Abrams, RN, South Plainfield, NJ  
Linda Adrian, BSN, Savannah, MO  
Joni Allender-Davis, BSN, CCRN, San Bernardino, CA  
Cathleen Almeida, BSN, Somerset, MA  
Dana Anaya, RN, Albuquerque, NM  
Lisa Andrews, Sunnyvale, CA  
Edgar Arriola, Jr., RN, Richmond, TX  
Anthony Ayscue, RN, Greenville, NC  
James Azevedo, Auburn, CA  
Julie Bachman, RN, Portland, OR  
Kim Badeau, RN, Apopka, FL  
Ruby Bailey, RN, Gary, IN  
Gayle Banks-Jackson, RN, Suffolk, VA  
Elvira Barcoma, BSN, RN, CCRN, Virginia Beach, VA  
Micah Barnes, RN, Portland, OR  
Michael Barsanti, RN, Madison, WI  
Susana Beaman, BS, RN, Glendora, CA  
Kim Beard, BSN, RN, Manitou Springs, CO  
Amy Bell, BSN, RN, Rapid City, SD  
Joy Bennett, BSN, RN, Madison, WI  
Faridat Biobaku, BSN, RN, Stockbridge, GA  
Karen Black, RN, CCRN, Baltimore, MD  
Richard Blevins, RN, CRN, Piney Flats, TN  
Linda Boatner, ARRT, RT(R), CRA, Dallas, TX  
Amy Bokowiec, BSN, RN, Seattle, WA  
Janet Boris, Brookline, MA  
Kenya Bowen, Duluth, GA  
Concetta Brand, RN, Pasadena, MD  
Kristi Brubaker, RN, Navato, CA  
Judith Bruesch, MA, BSN, BA, RN, Portland, OR  
Karen Bryant, RN, ASN, Plano, TX  
Linda Buch, BSN, RN, TNS, ECRN, McHenry, IL  
Dianne Bulluck, RN, Littleton, NC

Chelsey Burkland, RN, Clearwater, MN  
Janine Burnett, RN, Littleton, MA  
Vikki Burns, RN, Denair, CA  
Cari Burton, RN, Littleton, CO  
Helen Busby, ARRT(R)(CT)(CV), CRA, Virginia Beach, VA  
Jean Cain, RN, Latrobe, PA  
Gina Camerato, RN, Vermilion, OH  
Anna Carlson, RN Algonquin, IL  
Vickie Carlton, RN, Benton, AR  
Cindi Carrell, RN, Seattle, WA  
Joanna Castaneda, RN, Benicia, CA  
Cheryl Chambers, BSN, RN, Norfolk, VA  
Mitzi Chenault, RN, Ypsilanti, MI  
Hazel Chin, RN, Houston, TX  
Emily Choi, BSN, RN, CCRN, Richland, WA  
Brenda Chutter, BSN, Vancouver, Canada  
Michele Clark, RN, Syracuse, IN  
Donald Collignon, BN, San Antonio, TX  
Ruth Concepcion, RN, Marikina, Philippines  
Judy Creque, BSN, RN-BC, Lake Milton, OH  
Cinthya Daniel, BSN, CEN, Fairfax, VA  
Michelle Davis, MSN, RN, Missouri City, TX  
Leslie Davison, RN, RT(R), CRN, Midland, TX  
Susana Delos Santos, BSN, RN, Richmond, TX  
Raymond DePhillips, BSN, Morristown, NJ  
Constance DeRosa, BSN, RN, Frederick, MD  
Maria Diaz, MS, RN, CNOR, Kingwood, TX  
Memia Digamon, RN, Pearland, TX  
Raymund Doctor, BSN, RN, New York, NY  
Glenna Doughty, RN, Winchester, KY  
Debbie Driscoll, RN, Airdrie, Scotland  
John Dunn, BSN, RN, Philadelphia, PA  
Heidi Durda, BSN, RN, Oviedo, FL  
Salima Enloe, BSN, RN, Overland Park, KS

Chuck Eskola, RN, Hillsboro, OR  
Janaina Espineli, RN, Statford, CT  
Rechette Excell, RN, Durham, NC  
Shelly Fairleigh, RN, Forney, TX  
Dominique Feldman, BSN, RN, CCRN, Baltimore, MD  
Anna Fiechter, RN, Saugerties, NY  
Tonya Flores, BSN, Harrisburg, NC  
Ellyn Flores-Cabrales, BSN, RN, CCRN, Valley Stream, NY  
Patricia Foley, RN, Portland, OR  
Christina Fong, BSN, RN, Houston, TX  
Dawn Freeman, Rhinebeck, NY  
Patricia George, RN, San Rafael, CA  
Elaine Gillis, RN, Stedman, NC  
Araminta Goudreault, RN, West Palm Beach, FL  
Kristine Graczyk, RN, Ravenna, NE  
Diane Gray, BS, RN, Cumberland, ME  
Claudia Grieve, BSN, RN, University Heights, OH  
Gwen Griswold, BSN, Parkville, MD  
Gary Griswold, Niantic, CT  
Denise Gruss, RN, Greensburg, PA  
Jessica Haley, BSN, RN, Centennial, CO  
Shelli Hancock, RN, Chattanooga, TN  
Cathleen Harkins, RN, Abington, MA  
Teresa Harrington, RN, Alexander, AR  
Deborah Harrold, RN, AND, Durham, NC  
Kimberly Hawkins, RN, Cutler Bay, FL  
Mary Hehn, BSN, RN, CRN, Erie, CO  
Karen Helminger, RN, Seattle, WA  
Debra Hirschfeld, RN, Portland, OR  
Jessica Hodge, BSN, RN, Mission Viejo, CA  
Yee-Chen Hoekema, RN, Richland, WA  
Patti Hoeltschi, RN, Newburgh, NY  
Nicholas Hopkins, RN, CCRN, Casper, WY  
Rincy Joby, BSN, RN, Missouri City, TX  
Steven Jones, RN, Louisburg, NC

Marissa Jones, BSN, RN, Fairfield, CA  
George Kanamu, RN, Provo, UT  
Christopher Keith, RN, Aurora, IL  
Ruth King, RN, Hendersonville, TN  
Rosemary King, RN, Vancouver, WA  
Mary Knatcher-Morgan, RN, Boerne, TX  
Elisha Kroncke, RN, Elgin, IL  
Amelia Kuan, RN, Richmond, TX  
Cynthia LaRoy, BSN, RN, Orland Park, IL  
Julie Lawson, MSN, RN, CCRN, Marion, OH  
Lauren Lee, MA, Orangeburg, NY  
Robert Lee, BSN, Atlanta, GA  
Shona Lenss, MS, FNP, Appleton, WI  
Catherine Lester, RN, Gainesville, FL  
Denna Liggett, RN, Richland, MI  
Janet Lisle, BSN, RN, Uniontown, OH  
Dana Lobato, BSN, CMSRN, Windsor, CO  
Kristi Lontok, AND, Milwaukee, WI  
Dusica Lukic, RN, Wheeling, IL  
Seebele Mamo, RN, Alexandria, VA  
Sharon Manahan, RN, Olympia, WA  
Christian Mariano, BSN, Arlington, VA  
Carol Marlow, RN, Wharton, TX  
Robert Martinez, Baldwin, NY  
Tim Matheny, RN, San Francisco, CA  
Shona Matthews, MSc, RN, Auckland, New Zealand  
Ginger McGrath, RN, Chepachet, RI  
Christine McGrath, Vashon, WA  
Dennis Meese, BSN, RN, Lakewood Ranch, FL  
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