I just wanted to take this opportunity to wish each of you best regards for a peaceful and "empowering" 2001. With all the hype of the New Year in 2000, this year began rather quietly -- considering -- at least in our City by the Bay. There was no Y2K-mania going on although we had all just about had enough of the "Chad Theory"!

Professionally, we continuously meet the challenges which result from the mandates of administrative decisions dictating fewer professional staff in our work environments and ever-growing responsibilities. The need for us to be where we are and do what we do is heralded daily if we but look into the eyes of our patients and their families. It is imperative that we uphold a bold effort for our patients and consequently, for our own personal and professional growth. What better way to do this than active involvement in your professional organization? If you are not already, I encourage you to seriously consider becoming actively involved in ARNA. We need your ideas, experience and knowledge to spur ARNA -- your organization -- on to further growth and development. Please feel free to contact any of the Board of Directors, the Executive Council Members or call the ARNA office for information.

Looking forward to hearing from you.

CHAPTER NEWS The New Jersey Chapter of ARNA will hold its Spring Education Meeting on Saturday, May 5, 2001 at Mountainside Hospital, Mountainside, New Jersey from 9 am to 1 pm, followed by a short business meeting. Topics will include Stereotactic Radial Surgery, Aortic Stent Grafts, Mammography and 3D Ultrasound. A position has been vacated on the Board because of the relocation out-of-state by Patty Hawthorne. Please contact Helen O'Daly or any of the New Jersey Chapter Board Members if you are interested in filling this position which is a commitment to serve until October, 2001. Best Wishes to Patty and her family!

Our Treasurer Linda Strangio (editor of ARNA's journal Images) addressed the League for Educational Advancement for Registered Nurses (LEARN) on Monday, Jan. 22 at the All Saints Church Parish House in Scotch Plains, NJ. The program was entitled "Radiology Today: It's Not Just X-Rays". LEARN is a not-for-profit professional organization for Registered Nurses which offers educational programs on current nursing topics. For more information write to LEARN, P. O. Box 6, Scotch Plains, NJ 07076 or call the Program Coordinator at (908) 272-7239.

- editor's note: Linda Strangio is also an accomplished author of many books and articles on Nursing subjects and has been a speaker at several ARNA educational programs.
**committee news**

**Scholarship Committee:**

On behalf of the Scholarship committee, I’d like to thank all who donated and who bid on the wonderful items at the annual meeting in Chicago. I would also like to thank and congratulate Lois Curtwright on a job well done! Thanks to her work and effort we raised over $1000 in the year 2000. Congratulations to Patty Merrick on winning the Dorothy R. Budnek Memorial Scholarship for ongoing education and to Nancy Pope on winning the Charlotte Godwin award. Patty will receive $600 to help pay for her graduate education and Nancy will receive a complimentary registration at ARNA’s national meeting as well as $200 to help defray expenses.

These scholarships are available to you, too. To be eligible, you must be an active member of ARNA for at least three years and have proof of nursing licensure. For the Dorothy R. Budnek Memorial Scholarship, you must also be enrolled in an approved academic program. For the Charlotte Godwin award, selection criteria must be met within the last five years. See the ARNA website for further information at Awards/Grants/Research. OR contact the ARNA office at 630-571-9072.

- submitted by Wendy A. Bommer

**Putting on an educational program? Let us know!**

As most of you are aware, ARNA has been in the process of developing and implementing programs to allow us to apply to the American Nurses Credentialing Center (ANCC) to become a Provider and Approver of Continuing Educational Programs. For us to be able to apply for a portion of this program, we need to do mock reviews of Educational Program packets. This will allow us to pilot our evaluation tools and processes. If you have put on a program in the last 6 months or plan to put on an educational program in the next year, please contact the ARNA office and ask for a sample application packet to be sent to you. Complete the packet of information and provide a copy of the program, evaluations, CEU credits awarded and a copy of any certificate for the participants.

ARNA has heard your requests for this service and is attempting to meet the needs of its membership; however, we cannot do this without your help!

If you have any questions, you may contact the ARNA office or Melissa Holbrook, RN, MSN at (919) 998-2986.

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**THE 2000 ARNA EDUCATIONAL MEETING**

*Chicago, Nov. 26-27, 2000*

I had to stop and think; yes, I think it was number six. I have attended six ARNA Annual Educational meetings and I just have to tell you, they keep getting better and better. The meeting in November of 2000 was by comparison shorter in length of days but the program was packed full of interesting topics ranging from “Taking Care of the Caregiver” to “PET”. Congratulations to Barbara Sargent, nurse planner, for a very interesting meeting. I also salute the speakers who put a lot of time and hard work into the preparation of their lectures. A special word of thanks to Anne Oteham who did a wonderful presentation on spinal vertebroplasty in addition to all the time she is putting into organizing the ARNA 2001 Spring Meeting in San Antonio. I wondered, “How do these people do it?” This brings me to my main point - that going to a national meeting is energizing! It is hard to explain this, but those who have attended an educational meeting understand what I am talking about. You leave wanting to go back and do the best possible job ever. You enjoy the networking among colleagues from across the United States and abroad. You look forward to attending another meeting to see colleagues and meet new people.

If you haven’t decided about going to the ARNA Spring Meeting I urge you to consider going. If this isn’t the right time for you, encourage a colleague to attend and share what he or she learns from the meeting with you. Is there a new Radiology Nurse in your department? Just think what a wonderful opportunity it would be for that person to attend a meeting. Don’t forget that ARNA offers a scholarship to help with the expenses for an ARNA educational meeting.

I hope to see you in San Antonio! (Reminder: the Spring Educational Meeting will be the only ARNA educational meeting held in the year 2001).

- submitted by Kathleen Gross

president-elect, ARNA
WHERE HAVE ALL THE RN’S GONE?
Sometime I feel like I’m working in a vacuum - do you? Recently I told this to one of our administrators. It feels like no one is listening to us. The demands of our job increase constantly; we are expected to spend longer hours at work, weekends, too. Here are some of the reasons why, if it seems to you that there are not enough RN’s out there, you are right!

* the average age of working RN’s increased from 37.7 to 41.9 years between 1983 and 1998
* compared to the workforce at large, the number of working RN’s under age 30 declined 41%

The primary reason for this is the decline in Nursing being chosen as a career. Baby boomers became RN’s in large numbers after graduating high school in the 60’s and 70’s resulting in an increased workforce at a time when there were limited career choices for women. The women’s movement has negatively influenced women in the choice of Nursing as a career so there arc no replacements for aging, soon to retire RN’s.

The average age of RN’s is increasing and large numbers of RN’s will begin to retire in the next ten years. As a result the number of RN’s required will fall below requirements in 2020. With the retirement of the first of 78 million baby boomers and increasing demands for health care in this aging population, we can expect to be faced with a “social problem”, the dilemma of how to care for many people with few RN’s.

With this in mind ways must be found to motivate the choice of Nursing as a career, perhaps by looking abroad as has been done in past years, to supplement the supply of RN’s with nurses from other countries. Having an older workforce brings unique problems into hospitals, such as higher wages as an incentive to retention, as well as learning how to work smarter to avoid injuries, thereby protecting the RN’s who remain in the workforce so that they can continue to function at the highest level possible. We will need every single one of us!


submitted by Helen O’Daly RN, BSN, CRN editor, RN News
CRN....Gotta Have It!

submitted by Joann Stevens, RN, CRN

Larrimore’s* Top Ten List of Reasons to Become a CRN

Reason Number 10: Great resume material.
Reason Number 9: Get to make a fashion statement by wearing a stylish blue and white CRN pin.
Reason Number 8: For the professionalism of it.
Reason Number 7: Recognition, man, recognition.... You earned it!
Reason Number 6: A mere glance at you shows you know CPR.
Reason Number 5: It’s a good thing!
Reason Number 4: Show those Techs (CV) (N) (M)... you have a certification too.
Reason Number 3: The more letters after your name, the better.
Reason Number 2: It’ll make your mama proud.

And the number one reason to become a Certified Radiologic Nurse: You can be just like Patty Merrick, Helen O’Daly, Linda Strangio, Dixon Johnson and Kathleen Gross, famous and Certified Radiology Nurses.

*NOTE: Craig Larrimore RT, RN, CRN works at Mcleod Medical Center in Florence, North Carolina and is Chairperson of the Radiologic Nursing Certification Board

CRN exams are offered twice a year; the next will be on February 24 and August 18, 2001

Applications may be obtained from:

RNCB Examination
Professional Testing Corporation
1350 Broadway – 17th Floor
New York, New York 10018

Or online:
www.pteny.com
RADIOLOGY NURSE Helpline

PLEASE CONSIDER SHARING YOUR KNOWLEDGE AND EXPERIENCES WITH YOUR COLLEAGUES

Does anyone have information or suggestions regarding artificial fingernails and their place in the specials room? My hospital is having a huge debate about this and we are in need of information as soon as possible. If you have any suggestions as to where I could get additional information, please let me know. We have a couple of techs that assist and one who runs fluoro for our specials area who currently wear artificial nails. Our hospital is looking into the possibility of making a policy to restrict their use in the specials room. Thanks for any assistance or direction you can provide on this matter.

Denniel Headley RN dani_nurse@yahoo.com
Diagnostic Imaging Nurse
Kishwaukee Community Hospital (815) 756-1521 ext. 3533

I am a nurse in Omaha, Nebraska, and a member of ARNA, who is currently reviewing our conscious sedation policies in Radiology. I am interested in knowing what medications are being used at other facilities. Is a physician assessment necessary when administering p.o. Xanax? How are other nurses dealing with this issue? We are fortunate that the hospital administration and Pharmacy are backing the nurses 100% in dealing with these issues. We are also involved in discussing which physician is responsible for ordering the meds (we work both with an academic and a private practice group). Thanks for any input.

Cathy Taff CTaff1992@aol.com

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I RECEIVED THE FOLLOWING "LETTER TO THE EDITOR": please respond to the writer, to me, or to ARNA via mail or e-mail with your opinions on this subject before March 1, 2001 — editor

Many other nursing specialties, such as Endoscopy, OR and PACU nurses, celebrate separate weeks of recognition other than the official Nurse's Week in May. Based on the ideas brought up at the spring meeting in San Diego concerning our need to educate the communities, both medical and civilian, about our role as Radiology nurses (a recognized specialty), I would like to see a joint week of our own declared by ARNA and its membership. My colleagues and I celebrated our own unofficial "Radiology Nurse's Week" in conjunction with SCVIR's "Legs For Life" program in September and it was a great success. We would feel better about continuing our new tradition if it were officially promoted by ARNA. Could you please pose this question to the members through the RN Newsletter? Thank you for helping to get out the word.

Sincerely,
Leslie Woodward
woodwaw@erols.com
Following are excerpts of a News Release distributed by MCS Inc., Account Representative Noelle L. Piscitelli, on behalf of the University of Nebraska Medical Center’s involvement in a study of the effectiveness of t-PA in opening blocked catheters. The material is reprinted with permission.

NEWS Release
University of Nebraska Medical Center

Contact: Vicky Cerino, (402) 559-5190/vcerino@unmc.edu

"JANUARY 25, 2001

UNMC RESEARCHER FINDS THROMBOLYTIC DRUG DISSOLVES CLOTS IN BLOCKED CATHETERS
- Results of COOL Efficacy Trial of Recombinant t-PA Presented at ISET Meeting -

OMAHA, NE -- A researcher from the University of Nebraska Medical Center (UNMC) has determined that a widely used drug for heart attacks is effective in restoring function to long-term, in-dwelling catheters blocked by blood clots. Catheter occlusion is a common medical problem that occurs in millions of patients every year.

William Haire, M.D., and colleagues from 25 other centers nationwide, found that recombinant tissue plasminogen activator (t-PA), also known under the trade name Activase® (Alteplase, recombinant), successfully dissolves blood clots occluding central venous access devices (CVADs) – called catheters. A catheter is a thin, silicone rubber tube that is surgically inserted into large veins such as the jugular (in the neck), femoral (in the leg) or subclavian (in the chest).

Dr. Haire presented efficacy results from the pivotal COOL (Cardiovascular thrombolytic to O pen Occluded Lines) trial today at the International Symposium on Endovascular Therapy in Miami, Florida. Genentech, Inc., maker of Activase, funded the study.

The findings about the drug’s effectiveness are important because surgery currently is one of the few options for restoring flow to a clot-blocked catheter. Urokinase, the only other drug that has been used for this purpose, was withdrawn from the market in 1999, creating a major problem for patients and practitioners.

The six-month COOL efficacy study was completed in May 2000. A total of 150 patients with blocked catheters were enrolled in the randomized, double-blind study to determine whether Alteplase was effective in restoring function to catheters blocked by clots."

"A 2-milligram dose of Alteplase was administered into blocked catheters, followed by another dose if the catheter remained blocked. Researchers found that "after just one dose of Alteplase, 73.9 percent of the patients’ catheters were fully functional. Those who still had blockages were given a second dose of Alteplase, restoring function to 90 percent of the catheters."

* the website of the University of Nebraska Medical Center is: http://www.unmc.edu

IMPORTANT NURSING WEBSITES:
Includes links to most state boards of nursing

Nurse Week http://www.nurseweek.com
Weekly publication containing variety of topics including legislative updates

Nursing Management http://www.nursingmanagement.com
Information for nurse managers, nurse executives, and others