

VOL. 14, NO. 3 Fall 2009

IN THIS ISSUE

AHRA/ARIN Liaison
Report
Position Statement
on Patient Safety 3
Editorial
RNCB Acknowledges
New CRNs 4
Chapter Updates 5
2009 Fall Symposium 5
A Look Forward and a
Step Back
Save the Date 6
NIWI Program 8
Members in the News 8
Call for Nominations 10
NIWI Program 11
Nominating Committee 12
Update Your Profile 12
Call for Instructors 12
Looking for a Chapter? 14

ASSOCIATION FOR RADIOLOGIC AND IMAGING NURSING

7794 GROW DRIVE PENSACOLA, FL 32514

(866) 486-2762 (850) 474-7292 fax (850) 484-8762

arin@dancyamc.com www.arinursing.org

ARIN

Building Your Network

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

When my term as President of the Association for Radiologic & Imaging Nursing (ARIN) began this past March, I chose the phrase 'achieving success through knowledge and networking' as the theme for this upcoming year. I believe we have the knowledge portion under control with the publication of the Core Curriculum, 2nd Edition, and the Orientation Manual for Radiologic & Imaging Nursing, JRN, Vision, and various position statements. ARIN now has two planning committees: one for our Annual Conference & Convention as well as a separate committee, which is focusing on the Fall Symposium.



Our Evidence-Based Practice Task Force will be launched during the Fall Symposium. ARIN has partnered with Waynesburg University to sponsor a workshop on Friday, September 25th. Both groups have worked tirelessly to develop this four hour session; we trust that those of you who have expressed an interest in this program in the past will attend. We have an exciting hands-on program planned.

With the knowledge component under control, let me turn to *Networking*, defined as the "exchange of information or services among individuals, groups, or institutions" (Merriam Webster's Online Dictionary, accessed July 05, 2009).

Over the past few years, ARIN as an organization has had the privilege of networking with many other organizations to spread the word of ARIN: *Nursing Alliance Leadership Academy* (NALA), *Emergency Nurses Association* (ENA), *American Society of Peri-anesthesia Nurses* (ASPAN), *Society of Interventional Radiology* (SIR), *Association of Vascular and Interventional Radiographers* (AVIR), *Radiological Society of North America* (RSNA), *American Healthcare Radiology Administrators* (AHRA). Imaging nurses bring value to the table, and it is one of my goals to broaden ARIN's exposure to the healthcare community. This goal is definitely underway; for example, Sharon Lehman, MSN, RN, CRN, Immediate Past President is developing an article with the editors of Nursing Spectrum to spotlight one aspect of imaging nursing.

I was part of a discussion conducted by C1Consulting, Market Plus, which is surveying nursing associations to identify how we communicate and educate our members as well as relate what tools are available. They were impressed with the quality and quantity of our materials.

ARIN has responded to the request of the *American Society of Pain Management Nurses* (ASPMN) to discuss procedural pain; something we can all relate to as we administer moderate sedation and analgesia medications. Ron Waldrope, RN, CRN, ARIN Secretary and Chris Keough, BSN, RN, CRN, ARIN Board Member will be our representatives.

Kathy Scheffer, MSN, RN, CRN attended a session with ASPAN related to patient handoff com-



Building Your Network

(continued from page 1)

munication. The outcome of this is a recently completed "hand off communications" tool for use by IR/PACU nurses since PACU nurses receive and recover IR patients post procedure. While the anesthesiologist may provide a report of the anesthesia component of the procedure, the nurses were not fully aware of the nature of the patient procedure performed. This document should address that knowledge void.

While at *RSNS*, I will follow in the footsteps of our former president Kathy Scheffer by presenting in the Associated Sciences portion of their national meeting in Chicago beginning November 30, 2009. The topic for discussion is *Enhancing Patient Safety*. It never ceases to amaze me the number of colleagues eager to hear and /or learn what imaging nurses offer in regard to education as well as to our focus on patient care.

These networking opportunities have been one or two ARIN members dialoging with an outside group. My focus now is on YOU, each member and the networking opportunities available to you and by you. Some may think of networking as their "frienemy"-friend and enemy. Think of *friend* because of the new and exciting people you will meet and the opportunities that will open, and *enemy* because many people are afraid to take that initial step to risk that opening remark or comment that opens the door to many avenues. But once they initiate conversation, people realize how easy and beneficial it is! Many members have already networked by participating on the ARIN listserver to pose a question or provide helpful information. For those of you who have attended the *Hot Topics* session at convention, we have often begun this session using the situations posed as an icebreaker.

Each of us has a unique opportunity and obligation to network with our peers at a conference. Some members attend alone and would gain so much more by conversing with another member. So just take a deep breath, walk up to someone you do not know, say "HI!" and introduce yourself and tell them where you live and work. Inquire about their facility and before you know it, you have networked!

A Few Networking Tips:

Networking should benefit both parties involved. Each person should benefit from the experience. Plan your networking when possible. Contact the person attending for lunch or coffee.

Bring your business cards. They are an excellent way to remember colleagues and be remembered. If your organization does not provide business cards, make them yourself with a computer program. Always remember to jot the date, the setting, and something about the person on the back of the card. This makes it easy to remember the person and the conversation. You never know when this information will be of value to resolve an issue

or open the door to a fabulous opportunity.

Have lunch or break with a stranger. We feel comfortable with people we already know. Branching out through networking broadens our viewpoint as we "just talk." Ask a question to start the conversation. It is good to hear that we are not alone in our efforts to provide exceptional patient care. Some of the best solutions begin with these discussions.

Put your technology away. Turn off your computer, BlackBerry, and phone. Using them sends the message that you are not approachable and open for conversation.

Say hello to the person next to you. Strike up a conversation about the previous lecture topic or the current speaker. You could begin by saying this is your first visit to this city, or this is your first, second, fifth convention. Maybe this individual was one of our speakers, and you would like more in-depth information about their topic. Nothing is more flattering to a speaker than to have a member stop and comment on a presentation and ask a question.

Introduce others. Be the conduit that connects others. Once you meet an individual, introduce other colleagues. You may be able to connect this person to a sought after resource.

Get involved. Volunteer your services. ARIN's current membership is about 2000. We need our members to work with the Board of Directors (or become a board member) to continue the growth of ARIN. While this is a commitment, remember that so much of life is what you make of it. Add your name to ARIN's list of volunteers. This is a great way to experience growth and pride in your Association. However you chose to be involved, I can assure you that you will find friendship and fun, which makes the work load lighter.

So as you are planning to attend the ARIN Fall Symposium in Philadelphia, on September 26-27, 2009, or ARIN's Annual Convention in Tampa, Florida on March 14-17, 2010, plan also to network with your peers. Set a goal to meet 5, 10, or 20 new members. You will both give and receive so much more than what you realize, and it will be your best experience of the conference.

Resources:

Networking to Advance a Career. Deborah S. Hildebrand. http://careeradvice.suite101.com/article.cfm/networking_to_ advance_a_career. Accessed 070409.

How to Job Search. http://www.rileyguide.com/network.html. Accessed 070409.

Top 10 Conference Networking Tips. Scott Allen. http://entrepreneurs.about.com/b/2009/03/13top-10-conference-networkingtips.htm?p=1. Accessed 070409.



AHRA/ARIN Liaison Report

Kathy Scheffer, RN, MN, CRN

I had the pleasure of attending the AHRA: The Association for Medical Imaging Management's leadership institute held April 15-16, 2009, in New Orleans, LA. The theme for the 2009 spring conference was "Succeeding in Challenging Times." There were both beginning and advanced tracks designed to educate both the new Imaging manager and update the more seasoned leaders. I chose the advanced track to see what information I could receive that would be helpful as my position as IR manager. Topics ranged from government changes to coding and business operations for 2009, to professionalism in the workplace, change theory, and succession planning. There was even a session dedicated to creating your own radiology dashboard to track metrics associated with your Imaging modality.

In addition to the education presented, the networking was great. I met Imaging leaders: administrators, directors, managers and supervisors, from all over the country. I was the only nurse present so I could share some of the struggles that we Imaging nursing leaders deal with in daily work situations. While I was speaking with Penny Olivi, President of AHRA, she explained that her new nurse manager was struggling with understanding the radiology specific issues that were new for her. We discussed how many new nursing leaders face these same challenges. To help our leaders become better equipped to handle these issues, I suggested collaboration with AHRA to develop a nursing track at their leadership institute. This suggestion was positively received, and we've made plans to meet with AHRA's design team in August at their annual meeting to further explore this opportunity. Liaison positions are all about collaboration and cooperation for the benefit of both organizations. This partnership will lead to furthering both ARIN's mission as well as help AHRA's members develop their nursing leaders into stronger, better equipped partners.

I'd like to thank those AHRA liaisons that have gone before me, most recently Joanna Po, for paving the way for this partnership to take place. We are stronger when we can use our relationships with other associations to further our mission. Stay tuned for further information on this exciting collaboration for 2010!

ARIN Introduces Position Statement on Patient Safety in the Imaging Setting

Healthcare professionals in the medical imaging setting face unique challenges to ensure patient safety. Broad process and systems interventions are required to ensure that patient safety initiatives are carefully developed, implemented, and maintained ensuring a culture of safety (Emergency Nurses Association, 2005). The Association for Radiologic and Imaging Nursing (ARIN) is dedicated to the success of research, education, and implementation of evidence-based measures that ensure the well-being of patients receiving care and treatments in the imaging setting. In addition, the core purpose of ARIN is to foster the growth of nurses who advance the standard of care in the imaging environment. To read the entire position statement, visit www.arinrusing.org, go to the online documents section and click on position statements.

For an electronic copy of the document, contact Richelle Torres at the ARIN National Office: Richelle.torres@dancyamc.com or call 866-486-2762.

Association for Radiologic and Imaging Nursing (ARIN) Board of Directors 2009-2010

President Karen Green, MHA, BSN, RN, CRN Frankford Hospital Philadelphia, PA Klgreen725@aol.com

President-Elect Margaret Browne-McManus, BAHS, RN University of California-Davis Sacramento, CA margaret.brownemcmanus@ucdmc.ucdavis.edu

> Immediate Past President Sharon Lehmann, MS, ACNS-BC University of Minnesota Physicians Minneapolis, MN lehma006@umn.edu

Treasurer Linda McDonald, BSN, RN, CRN Allegheny General Hospital Pittsburgh, PA Imcdonal@wpahs.org

Secretary Ronald Wardrope, RN, CRN Johns Hopkins Hospital Baltimore, MD rwardro@jhmi.edu

Board Member Sara Hawkins, BSN, RN, CRN Eastern Idaho Regional Medical Center Idaho Falls, ID sara.hawkins@HCAhealthcare.com

Board Member Christine Keough, BSN, RN, CRN University of Rochester Strong Memorial Hospital Rochester, NY christine_keough@urmc.rochester.edu

> Board Member Brenda Wickersham, MAV, RN, CRN Providence St. Peter Hospital Olympia, WA wickershambrenda@comcast.net

> > National Office 7794 Grow Drive Pensacola, FL 32514-7072 (850) 474-7292 (866) 486-2762 FAX: (850) 484-8762 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.



Wabi Sabi

Kieley A. Brinks, MBA, BSN, BS, RN Editor

The Japanese concept of Wabi Sabi represents a global view centered on the acceptance of impermanence. The term has more recently been used to encompass the concepts of Continuous Quality Improvement and Evidence-Based decision-making. Specifically, Wabi Sabi can offer insight and direction for nurses embracing an Evidence-Based Nursing Practice model:

"Nothing is finished. Nothing is perfect. Nothing lasts."

Evidence-Based Nursing Practice rests on a continuum involving the collection of rigorous scientific evidence which is used to support or refute the effectiveness of specific clinical interventions. Monitoring is conducted to insure that clinical interventions are applied accurately, and outcomes are evaluated to validate the effectiveness of nursing interventions. Clinical decisions are evaluated for the source of their evolution: opinion vs. measurable data. Practice guidelines are based on systematic reviews of research evidence and are constantly changing. Clinical practice is supported by research and clinical reasoning rather than by fixed protocols. Recognizing the individuality of patients and the diversity of client populations, individual needs are considered and professional judgment is applied to known clinical data; producing practice guidelines in the forms of algorithms, clinical pathways, and protocols.

There are five processes involved in Evidence-Based Practice: Original Research, Evidence Summary, Translation, Implementation, Evaluation. These processes are on-going and continually circle back to review and adapt the current state of practice. Scientific research studies, patient outcomes, and a systematic review of literature and available information are integrated to form clinical practice, policy and treatment guidelines. After the implementation of clinical changes, an assessment of the impact on patient health, patient outcomes (including patient satisfaction), efficiency and the utilization of resources and economic impact are evaluated. As part of an organic, evolving practice, remodeling is performed and the process continues.

Radiology Nursing is a clinical specialty requiring nurses to constantly adapt to new technology, new equipment and new capabilities. We must also adapt to new research, new ideas, and innovation in patient care. Our nursing practice must be open to constant examination, scrutiny and scientific evaluation validating its effectiveness and appropriateness. The practice of Radiology Nursing is organic and dynamic.

Practicing Evidence-Based Nursing personally can include an informal style of research and evidence summary in the form of reading articles in scientific and professional journals, networking with colleagues to discuss practice solutions, or participation in web-based e-mail forums discussing clinical practices. It includes participation in regional and national professional organizations (such as ARIN and RSNA) and continuing education programs addressing your clinical practice specialty. Involvement in innovation, in the form of policy development and implementation, or as a professional resource to colleagues assists in the translation of evidence into practice. Ongoing surveillance of clinical outcomes evaluates the effectiveness of change.

Wabi Sabi is a concept Radiology Nursing should naturally be able to integrate and model. The evolution and improvement of our practice is never finished; there is always something new (and exciting) in Radiology Nursing. Our practice is never perfect; we always have areas for improvement or refinement. Our practice is always dynamic and organic; it is constantly changing, and we are the innovators.

Wabi Sabi, everyone!

RNCB Acknowledges **New CRNs**

The Radiologic Nursing Certification Board, Inc. acknowledges the following individuals who passed the Certification Examination for Radiologic Nursing in Imaging, Interventional, and Therapeutic Environments on March 12, 2009:

Marjorie M. Morley Juan Amaya Converse, TX Seal Beach, CA **Deborah I. Brown** Angela Y. Nicholson Colo, IA Napa, CA **Eleanor K. Donnelly** Riverview, FL Bloomington, CA Liji George Snellville, GA San Jose, CA

Deborah A.Johnston Prince George, BC Canada

Kathy H. Lloyd Lithonia, GA

Lisa T. Moore Taylors, SC

Delia C. Ruiz-Velasquez

Randy M. Shelafoe

Rose M. Smith St. Helena, SC

Camila M. Villacarlos Rancho Cordova, CA

Ashley C. Ward Tallahassee, FL

Chapter Updates

Grand Canyon State Chapter

Deborah Thomas, RN, BS, CRN Secretary

Our April conference "The Radiant World of Interventional Nursing - Celebrating the Radiology Nurse" was very successful and had over eighty attendees. It took place on April 11, 2009 at Banner Good Samaritan Hospital in Phoenix. We again received our state proclamation from the Governor. Steven Pierce, RN from Casa Grande Regional Medical Center in Casa Grande, AZ, was the recipient of the Carolyn R. Bennett CRN scholarship. Patty Doughty, RN from St. Mary's Hospital in Tucson, AZ, was nominated as the Arizona Radiology Nurse of the Year.

April also marked the fifth anniversary of our chapter, and we created a special anniversary keepsake booklet with the history, photos and milestones of our chapter. Many of our members have been active in the chapter since the beginning.

We continue to plan for additional membership, and have begun planning our statewide educational opportunities for next year. Our website www.azradiologyrn.net has been updated. We encourage you to visit us, both on the web and at our educational offerings. You may contact us on our website for additional information.

Great Lakes Chapter

Mike Wilson GLARIN President

The Great Lakes Chapter has some exciting events planned for the upcoming term and would like to share this information with other local chapters.

Over the last two years the Great Lakes Chapter leadership team has found it increasingly difficult to provide educational opportunities and other real time information to our members. The economic downturn and other factors have led to decreased turnout at planned events. In December 2008, our leadership felt we needed to address this issue. We discussed the problems that we were facing and brainstormed about ways we could break down this roadblock.

At that meeting we found several members of our leadership team had been involved with online webinars. As a group we felt that this could be one way that we could continue to provide a comprehensive level of service to our members as well as to the officers presiding over our chapter. Our chapter president investigated several different webinar platforms including Microsoft Go Live, Omniture, and an Adobe product. We contacted IT professionals from a variety of centers to discuss the workability of the platforms and ended up choosing Cisco Webex.

The daunting task of developing this service began. We set up meetings with training center representatives from the company and were provided with tutorials and other resources that helped us begin to implement and develop this process. We sent out emails and surveys to our members in an attempt to gauge interest in this process and find out topics in which they were interested. The responses were overwhelmingly positive.

We launched our 2009 webinar series in February with the first topic *How to Establish a Clinical Practice in Radiology*. Our presenter Jill Massucci, RN, BSN, MBA, clinical manager for inpatient radiology at Northwestern Memorial Hospital in Chicago, did an excellent job and was able to provide this information to a "sold out" room. We had over forty members as well as some technologists, physician assistants, and physicians. Our next presentation was in April of 2009. Rupal Patel Shah, RN, BSN, MBA, senior manager for corporate and regulatory compliance at University North Shore Medical center in Chicago, presented *Joint Commission and Imaging Departments-What we all need to know*. Again the presentation was a hit, and the training room was full. We have several other events in the works and hope to continue to make this an important tool for our chapter members to receive advanced education and continuing education units(CEU's).

We would be happy to discuss this process as well as how we were able to develop and implement this process in our local chapter. Please contact us by visiting www.glarin.com

ARIN 2009 Fall Symposium

Make your plans now to attend the ARIN 2009 Fall Symposium at the Sheraton Society Hill Hotel, One Dock Street, Philadelphia, PA 19106, September 25-27, 2009. The Sheraton Society Hill Hotel is holding rooms for a nominal rate of \$149.00 for single/double occupancy until August 24, 2009, or until the room block is filled.

Make your reservations today to avoid the possibility of a filled room block! Call the Sheraton Society Hill Hotel to make your reservation at toll free (800) 325-3535 or (215) 238-6000. Be sure to tell the reservations personnel that you are with the ARIN Fall Symposium in order to receive this special rate. Rooms at this special rate are available until August 24, 2009, or until the room block is filled. Once this date is passed or the room block filled, the special ARNA rates <u>cannot</u> be guaranteed.

This year ARIN will offer a preconference **Evidence Based Practice Workshop** on September 25, 2009. The cost for this workshop is \$50.00, and registration is limited to fifty so register now!

For more information or to register online visit www.arinursing.org

Contact the ARIN National Office

ARIN National Office 7794 Grow Drive • Pensacola, FL 32514 Toll free: (866) 486-2762 Direct: (850) 474-7292 E-mail: arinconv@dancyamc.com

A Look Forward and a Step Back

Brenda Wickersham, MAV, RN, CRN

This past week, I had the opportunity to represent the Imaging nursing discipline at a Health Career Camp for high school seniors, the "Class of 2010." Our interdisciplinary health team members were given the task of sharing our roles, our educational background, and the career pathway taken to arrive at our present work as well as what we like about our work. We each had five minutes.

The coordinator of the camp is a fellow nurse/former nursing manager who is totally excited about inspiring young men and women to enter the field of nursing or other healthcare fields. As she began opening introductions, she stated, "I'd like to introduce you to an intelligent, motivated, and highly gifted group of people, who are here to share with you." Just as I was about to sit a bit taller in my seat and enjoy her glowing introduction of us, the health team, she continued, "These very bright students want to join us on the healthcare team and are here for part of a three day camp. They want to hear about you and are looking forward to shadowing you in your departments."

I quickly reflected that the camp coordinator had just done a marvelous thing. She had built an introductory platform for the whole group in which she leveled out the playing field. Rather than building up an introduction for the health professionals, she raised up the students. I felt a little embarrassed about assuming that her glowing intro would be focused on us. After all, we were seasoned professionals and we don't need any building up. The bright, young students before us represent our future healthcare professionals, should they choose to proceed.

Each student shared their interests: nursing, pediatric nurse, obstetric nurse, ER nurse, chemical dependency nurse, anesthesiologist or emergency medicine, X-ray tech, OR nurse. In their brief introductions, it seemed that what was communicated most was the desire to care for, help people become healthy, deal with traumas, and do work that matters. No one said, "I want to have a job that pays a lot of money." No one said, "I want to be important." The common theme was about caring.

Prior to entering the classroom, I wondered how many students had received their impression of nursing from the big black screen, TV. I toyed with the idea that the students might be inspired by the drama of *House, ER* or some other program that presents nursing and medicine in a compromising light, featuring ambitious, self-centered, seductive and difficult personalities. These thoughts were immediately dispelled.

As I began my presentation, I wanted to particularly let them know that I had chosen nursing when I was a high school senior. I wanted them to understand that nursing is an awesome profession involving life-long learning. Nursing careers involve and enhance a love of science, attention to detail, interest in health and disease, the ability to work as a team, physical vigor, helping persons learn to cope with difficult experiences, listening to the concerns of others, assessing, teaching, monitoring, and the ability to multi-task and coordinate many activities. Nursing offers the opportunity to grow professionally and change career paths. Nursing offers the ability to be involved in developing systems that improve healthcare.

I shared that life is also about creating balance, allowing time for recreation and rest, exercise, having fun and staying healthy. Nursing is a field fraught with self injuries to the neck and spine; nurses need to develop and keep healthy lifestyles early in life. Having shared this insight, I knew that these young people may not completely appreciate what was being said. They are the Class of 2010, looking forward, and we are the professionals, graduates from the seventies through the nineties with years of experience. We will someday step back and hand the baton to them.

Some five hours later, we bid good luck to these students who had been able to shadow us in our work. They had seen us doing our work, giving our best, and all of the "cool" stuff that goes with technology. In the midst of the toys: stents, vertebroplasty needles, balloon catheters, GJ tubes, embolization materials, the students' interest peaked as they learned how interventional radiology can positively affect health, treat disease, and help alleviate suffering. They enjoyed hearing nurses speak enthusiastically about work that matters as well as work that is enjoyed, even hard work with long hours. When we parted ways, the students seemed invigorated at the end of their three day camp.

As I returned to the Imaging department, I reflected about the Healthcare Career Camp, about my own preconceptions and the time spent. It felt like a "good news" day. I was happy that I had shared that students needed to prepare to work hard, create balance, and stay healthy. Perhaps those nurses who follow in our footsteps will be able to avoid some of the job-related injuries that we have sustained along the way. Perhaps they will be the healthy role models that we strive to become: they may more easily achieve a balance of body-mind-spirit than we. Yes, these bright young people are looking forward; one day, we will take that step back and give them our work. Good work. Exciting work. Worthwhile work.

Save the Date!

NWARIN Fall Conference - November 7, 2009

Come join us in Seattle for a day of learning, professional growth and fun! We encourage Imaging and Radiological Nurses, technologists, and other interested professionals from the Northwest region and beyond to attend. CEU's will be awarded.

Location: Virginia Mason Medical Center • Seattle, WA

For more information, contact: Pamela Zenger, Program Chair zengersathome@aol.com • (206) 714-9068



Radiological Society of North America 95th Scientific Assembly and Annual Meeting November 29–December 4, 2009 McCormick Place, Chicago

Registration Information

Registration is required to attend the Associated Sciences programs at RSNA 2009 (*RSNA2009.RSNA.org*).

Advance registration for the RSNA annual meeting ends November 6, 2009. Registration at McCormick Place begins at 12:00 PM on Saturday, November 28. RSNA shuttle bus service to McCormick Place will be available beginning at 11:00 AM on Saturday.

Registration fees at McCormick Place are \$100.00 higher than advance registration fees, so register now.

If you would like a copy of the published Associated Sciences Proceedings, please call 1-877-776-2227.

Sponsoring Organizations

- American Association of Medical Dosimetrists (AAMD)
- AHRA: The Association for Medical Imaging Management
- American Institute of Architects Academy on Architecture for Health (AIA-AAH)
- Association for Radiologic & Imaging Nursing (ARIN)
- American Society of Radiologic Technologists (ASRT)
- Association of Educators in Imaging and Radiologic Sciences, Inc. (AEIRS)
- Association of Vascular and Interventional Radiographers (AVIR)
- Canadian Association of Medical Radiation Technologists (CAMRT)
- International Society of Radiographers and Radiological Technologists (ISRRT)
- Radiology Business Management Association (RBMA)
- Section for Magnetic Resonance Technologists (SMRT-ISMRM)
- Society of Nuclear Medicine Technologists Section (SNM-TS)

Associated Sciences Program at RSNA 2009

REFRESHER COURSES

Sponsored by the Associated Sciences Consortium

(Each refresher course is approved for 1.5 AMA PRA Category 1 Credits[™] and Category A+ credit for technologists)

Monday, November 30, 2009

AS21 8:30 AM – 10:00 AM Where Is the Radiologist? Radiology's Changing Dynamics: Operations in Today's Economy —Balancing Viability and the Regulatory Minefield Valerie R. Cronin, CNMT, Moderator William A. Sarraille, JD Paramjit S. Chopra, MD

AS22 10:30 AM – 12:00 PM Where Is the Radiologist? Radiology's Changing Dynamics: The Present and Future Medical/ Legal Issues That We Face Claudia A. Murray, Moderator James P. Borgstede, MD Patricia Kroken, FACMPE, CRA Hilary Cohen

AS23 1:30 PM – 3:00 PM Compliance with the Supervision Rules and Accreditation Requirement: The Impact on Reimbursement

Judy LeRose, RT(R), CRA, Moderator

A) Physician Supervision Requirements Melody W. Mulaik

B) Accreditation Guidelines Set Forth in MIPPA

Thomas W. Greeson, JD Barbara Rubel, MBA

AS24 3:30 PM - 5:00 PM Architecture That Makes a Difference: Design Guidelines for Tomorrow's Imaging Environment Bill Rostenberg, FALA, FACHA, Moderator Morris A. Stein, FAIA, FACHA

Bill Rostenberg, FAIA, FACHA Steven C. Horii, MD

RSNA

Tuesday, December 1, 2009

AS31 8:30 AM – 10:00 AM – **Molecular Imaging: Here to Stay** *Charles Stanley, RT(R)(CT)(MR), Moderator*

A) New PET/CT Applications Valerie R. Cronin, CNMT

B) Updates in PET/MR Imaging David Gilmore, MS, CNMT, NCT, RT(R)(N)

AS32 10:30 AM – 12:00 PM **Managing Risk for Optimal Patient Safety** Ellen Lipman, MS, RT(R)(MR), Moderator

A) Enhancing Patient Safety: A Team Approach Karen L. Green, RN, BSN, MHA, CRN

B) Risk Management in Radiology: An Essential Part of Quality Robert P. George

AS33 1:30 PM – 3:00 PM Imaging through a Cross-cultural Lens: A Global Perspective on Values, Norms, Mystiques, and Fears

Arlene M. Adler, MEd, RT(R), FAERS, Moderator Cynthia Cowling, ACR, BSc, MEd Lori Boyd, MRT(R), BA, MA, MEd

AS34 3:30 PM – 5:00 PM **Radiation Dose: Are We at Crisis?** Karen J. Finnegan, MS, RT(R)(CV), FAVIR, Moderator

A) Radiation Risk in Interventional Radiology John F. Angle, MD

B) Low-Dose CT: Practical Applications Narinder S. Paul, MD

C) Pediatric Dose Donald P. Frush, MD

| Radiological Society of North America | Founded in 1915 Wednesday, December 2, 2009

AS41 8:30 AM – 10:30 AM Why and How Far Health Care IT is Behind Our Non–Health Care IT Brethren: Continued from RSNA 2008 Judy LeRose, RT(R), CRA, Moderator Stuart Gardner

AS42 10:30 лм – 12:00 рм **Imaging in the Operating Room** Charles Stanley, RT(R)(CT)(MR), Moderator

A) Multimodality Imaging in the Operating Room Ferenc A. Jolesz, MD

B) Multidisciplinary Imaging in the Operating Room Michael D. Dake, MD

AAPM/RSNA BASIC PHYSICS LECTURE FOR THE RADIOLOGIC TECHNOLOGIST

(Approved for 1.25 AMA PRA Category 1 Credits[™] and Category A+ credit for technologists)

Monday, 1:30 рм – 2:45 рм

MRI — Advanced Technology

Douglas E. Pfeiffer, MS, Moderator Moriel Shalom NessAiver, PhD

RSNA is an ARRT[®]-approved Recognized Continuing Education Evaluation Mechanism Plus (RCEEM+) and will provide Category A+ continuing education credits for technologists and radiologist assistants.

RSNA2009.RSNA.org

Nurse in Washington Internship (NIWI)

March 29-31, 2009

As I pondered my position as ARIN's Public Policy Representative and the NIWI program I was about to enter, I came to realize the impact of my position as a nurse as well as the role I'm about to play in the world of legislative policy making. It was an honor and a privilege to engage in this process. Certainly an intimidating concept, if you ask me!

I arrived with an open mind ready to take on anything to fulfill my role for my national organization. I was like a sponge absorbing everything. There was a lot of preparation in the two days before for the actual meetings that we will have with the senators and congressman. The Congressional Staff Panel gave us the confidence and inside scoop of what really happens in the Capitol during legislative sessions. The Panel of Expert Nursing Advocates gave me the affirmation as to why we are all so proud to be nurses. We have really contributed in the evolution of Health Care Reform.

A total of 103 nurses from different states and from various fields of nursing anxiously awaited the most important third day of NIWI. We were actually meeting with our home state's senators and congressmen. There were three of us from the state of Texas. May there be no doubt that we were united in our efforts to take action to support the nation's nurses.

A statement and propositions presented are as follows:

An adequate supply of nurses is essential to ensuring that all people receive quality care and that our nation's public health infrastructure remains strong. The Department of Health and Human Services projects that today's 10 percent vacancy rate for registered nurses will grow to 41 percent by 2020, representing more than one million unfilled jobs.

Members of Congress can take three steps to help increase the nation's workforce:

1. Support \$215 million for the Nursing workforce and Development programs at the Health Resources and Services Administration (HRSA) in Fiscal Year 2010 funding. These programs support the recruitment, education, and retention of nurses providing essential nursing education loan repayment and scholarships.

2. Provide additional FY 2010 resources to the National institute of Nursing Research (NINR). NINR supports basic and clinical research with a mission of finding effective approaches to achieve and sustain good health, and improving the clinical settings in which care is provided. Whether health care is delivered in physicians' offices, hospital inpatient or outpatient departments, or freestanding clinics, nurses must utilize best clinical practices that work. The evidence-based practice research conducted by NINR is even in greater demand as it supports the advancement of nursing interventions and helps improve quality of care for patients.

3. Show support for nurses by placing statements in the Congressional Record about the importance of nursing to the health care system. Nurses serve as the backbone of the nation's health care system-engaging in myriad activities to support patients and help advance our nation's knowledge base by conducting research and educating the public.

Departing the offices of our representatives, I was already thinking of how we in nursing could really make this happen for the sake of the country that we so love. What we do now is very crucial to the future of our children and the generations to come.

Flora T. Enaje, BSN, RN Public Policy Representative (Pediatrics)

Clinical Nurse Manager Diagnostic Imaging Texas Children's Hospital Tel: 832-822-5314 Fax: 832-825-5369 Pager: 6008 E-mail: ftenaje@texaschildrenshospital.org



MEMBERS IN THE NEWS

Congratulations to ARIN members **Ron Wardrope** and **Kristina Hoerl** for their role in the team that was selected the recipient of the 2009 Nursing Excellence Award from the The Johns Hopkins Hospital Department of Nursing. The award is presented to a nurse or team that submits a unitbased project that makes use of the Magnet Recognition Program[®] concepts to continually assess and improve their processes for achieving quality in nursing and patient outcomes. The Department of Radiology received this award for "Implementation of a Pediatric IV Response Team in Radiology." The award was presented to Ronald Langlotz, BSN, RN, Ron Wardrope, RN, CRN, Kristina Hoerl, BSN, RN, Joan Ulatowski, BSN, RN, Melody Corbin, Clin. T. The award was presented this year during the Department of Nursing Annual Awards Ceremony on May 6, 2009.



Association for Radiologic & Imaging Nursing (ARIN)



3rd Annual Fall Symposium

September 26 - 27, 2009

Sheraton Society Hill Hotel • One Dock St. • Philadelphia, PA

The 2009 Call for Presentations is available online at www.arinursing.org

The Sheraton Society Hill Hotel is holding rooms for a nominal rate of \$149 for single/double occupancy. Call to make your reservation - toll free (800) 325-3535 or (215) 238-6000. Be sure to tell the reservations personnel that you are with the ARIN Fall Symposium in order to receive this special rate.

The registration fee for the 2-day symposium is \$225 for ARIN members and \$275 for non-members. Single day is \$125 for members and \$150 for non-members.

The cost of the 2-day certification preparation course is \$225 for ARIN members and \$275 for non-members.

For exhibit information contact Tina Battle at tina.battle@dancyamc.com or 850-475-3500.

For more information contact the ARIN National Office 7794 Grow Drive • Pensacola, FL 32514 www.arinursing.org • ARINconv@dancyamc.com 850-474-7292 or Toll free 866-486-2762 • 850-484-8762 Fax



ARIN Call for Nominations

President-Elect: The functions of the President-Elect are to fulfill duties in the absence of the President, monitor committee activities, and perform other duties as prescribed by the Board of Directors or as delegated by the President. Travel is required and expenses are reimbursed as set by ARIN policy. Three-year commitment: first year as President-Elect, second year as President, and third year as Immediate Past President.

Treasurer: The Treasurer works with staff to develop the budget and present it to the Board for approval and monitors the financial activities of the Society. Travel is required and expenses are reimbursed as set by ARIN policy. Two-year commitment.

Board Member: Board members direct the business and financial affairs of the Association, establish policy, foster the growth and development of the Association, and engage in strategic planning. Board members serve as liaisons to ARIN committees. Travel is required and expenses are reimbursed as set by ARIN policy. Three-year commitment.

Nominating Committee Member: The Nominating Committee oversees the elections process, solicits and screens applicants, and presents a slate of candidates to the membership for voting. The business of the Nominating Committee is conducted via conference calls; travel is not required. Two-year commitment.

NOMINATION AND CONSENT STATEMENT

A candidate must have been an active member of ARIN for a minimum of one year preceding nomination. In addition, the President-Elect should have served at least one year as a member of the Board of Directors or served as a chairperson of an ARIN national committee for a minimum of one year prior to nomination. Nomination does not guarantee that a person's name will appear on the final slate.

Full Name	Credentials
	Work Phone
Affiliation	Home Phone
Address	Fax
City	State Zip
I am willing to serve in the office of	if selected for nomination and elected by the membership.
Signed,	Member, ARIN Date
A complete candidate packet includes this completed	form along with the following:
1. A one-paragraph biographical statement that include	
Your professional educational background Your gurrent ich title and a brief description of your	
• Your current job title and a brief description of your	

- Past ARIN positions, committees, or projects in which you were involved
- 2. A 250 word statement for inclusion with the ballot describing what you hope to achieve through the office you seek and what you hope ARIN would achieve through your service
- 3. A passport type photo for inclusion with the ballot (digital format is preferred)
- 4. Your curriculum vitae or resume
- 5. Verification of RN state licensure

Return your COMPLETE CANDIDATE PACKET to the ARIN National Office by September 30, 2009 via one of the following:

Mail: ARIN National Office 7794 Grow Drive Pensacola, FL 32514 E-mail: arin@dancyamc.com Fax: (850) 484-8762

Nurse in Washington Internship Program (NIWI)

March 29-31, 2009

This past March, I was honored and excited to attend the Nurse in Washington Internship Program as a Public Policy Representative of the Association for Radiology and Imaging Nurses (ARIN) along with Flora Enaje, RN, who represented the pediatric interests of ARIN.

Having researched current "hot topics" in Washington, I thought that I was well prepared prior to leaving for Washington D.C. Within about thirty minutes, I realized there was so much more to learn and understand. Luckily, The Nursing Organizations Alliance had put together a very informative, concise program which prepared us well.

The Nursing Alliance had provided several position statements on healthcare issues, most notably the nursing shortage. ARIN is a member of the Alliance and was asked to support these particular issues and statements while in D.C. These statements provided excellent insight to not only the problems but to well thought out and workable solutions.

Keynote Speaker, Paul Seltman, JD, Director of Public Policy for Becton Dickinson and Company gave us a quick primer on Healthcare Reform in the Obama administration. Clearly, this is a primary movement in Washington and for this administration. Mr. Seltman explained the plan clearly, and I was surprised that my thoughts about this plan represented a new version of socialized medicine were not entirely correct. This plan proposes mandated health insurance, a risk pool managed through an "insurance exchange" of sorts and sliding scaled subsidies. Mr. Seltman gave a clear comparison of the Democratic vs. Republican plans, and it quickly became apparent that there is a wide chasm of differences to overcome to get any type of healthcare reform in place. Surprisingly, Mr. Seltman told us that the administration wanted to have this reform "wrapped up" by the July 4th recess of Congress.

As nurses, we are advocates every day of our nursing lives. We advocate for our patients' care, for reasonable patient ratios, and for our own benefits and pay. It only makes sense that nurses advocate for a nursing and healthcare policy that is well received and effective. However, sitting in the early portion of our meetings, I couldn't help but ask myself, "How in the world can I make this happen?" and "Do these elected representatives really care what one nurse from Nevada has to say?" These questions and other similar ones were answered with a resounding "yes." Nurses are widely respected and considered experts in patient care and healthcare by those representing us in our nation's capitol.

A panel of congressional staffers says that constituent communications have made lawmakers responsive to their voters; the offices tally and take notes of the vast majority of messages they receive and one letter or call from a known, respected constituent "trumps hundreds of generic grass roots messages. Hmm, we can make a difference in the way our lawmakers vote, and therefore positively impact nursing.

Our training time was in preparation for us to meet with the representatives or their staffers from our respective states. These meetings had been pre-arranged for us and were all scheduled to happen on our third day in Washington, D.C. The Alliance had presented us with three "asks" to present during our meeting time.

The first "ask" was to provide \$215 million for the Nursing Workforce Development Programs. This is the largest source of federal funding for nursing education. This funding would support nursing education, nursing diversity, and funding to address the nursing faculty shortage.

The second "ask" was to increase funding for the National Institute of Nursing Research.(NINR) The NINR supports essential research on nursing interventions and quality of care funding. With an increased focus on evidence-based health care, the role of the NINR is more important to how we practice in our daily lives than ever before.

The third "ask" was that our representatives submit a statement in the Congressional Record about the importance of the nursing profession to our country.

We were also encouraged to carry our own or our nursing organization's requests as well. Each state has unique health care challenges, and we were encouraged to bring those forth. As the only representative from Nevada, I took a short time to speak about the desperate shortage of primary care providers in our state, and how advanced practice nurses could efficiently and effectively fill that gap.

Arriving in Washington, D.C. shortly after the approval of the American Recovery and Reinvestment Act, you can imagine that asking for money was slightly more challenging than at any other time.

I visited with the staff of Senate Majority Leader Harry Reid (D-NV), Senator John Ensign (R-NV), and Representative Dean Heller (R-Northern Nevada). They were all well informed on healthcare issues and held very positive attitudes toward nurses; however, they were reluctant to commit to their "boss" voting for these apportionment requests. The three offices were all very willing to make a positive statement supporting nursing for the Congressional Record.

Nurses have a large voting voice in our nation, and we should all use that voice to the best of our ability. While traveling to Washington, D.C. is not a feasible option to all nurses, we can certainly be heard at the local and state level. My advice to nurses is to not be intimidated by the *(continued on page 12)*



Around the Corner, the Nominating Committee

Sharon Lehmann, MS, ACNS-BC Immediate Past President, ARIN Nominating Committee Chair

It seems we have barely returned from San Diego and the installation of the 2009 Board of Directors, and already we are thinking about candidates for the 2010 Board of Directors. As the immediate past president, it is my pleasure to serve as the chair of the Nominating Committee. It is the role of the committee to seek volunteers for officers, verify their eligibility and present a ballot to the Board of Directors for approval. We are in the beginning stages of this process and are posting this article to have you start thinking about your fellow nurses and who would offer the best new leadership for ARIN for 2010.

This coming year, we will be soliciting nominations for president-elect, treasurer, board member and Nominating Committee member. Think about your local chapter leadership – or perhaps you've served on a committee or task force and enjoyed the experience and want to get more involved. This is a great opportunity to make a difference in your profession and also to have the ability to network with nurses from all over the country. We are enclosing the "willingness to serve/nomination" form with this newsletter to make it easier for you to volunteer.

You can go to the ARIN website under the on-line documents section, then click on *Call for Nominations* and find the application along with a sample bio sketch and candidate statement.

My own experience started as a member of the planning committee and eventually I served as planning committee chair. Then I was asked to run for the Board of Directors, and here I am now walking the final path after presidency.

The main qualifications are to be an active member of ARIN for one year, have an active role or knowledge of radiology nursing, and have the time and resources to fulfill the responsibilities of the office. It is the committee's mission to have a full slate of candidates representing all the geographic regions of the country. We are so much richer when we receive input on practice and clinical issues affecting all of us from across the nation.

So, talk to your colleagues, and nominate or volunteer to run for office for your professional association. I guarantee you that it will be both a rewarding and professionally enriching experience.

Remember, we will again be voting electronically this year. Look for your postcard in the mail as a reminder in mid-November.

Call for Instructors

Association for Radiologic & Imaging Nursing Certification Preparation Course

ARIN invites members to apply to be an instructor for the ARIN Certification Preparation Course. To qualify, you must be an ARIN member, be certified in radiology nursing, and have presented a podium presentation at an ARIN convention.

Applicants will be evaluated on education accomplishments, speaking expertise and experience on a national level, promptness and completeness in meeting deadlines for course material, evaluation results from previous presentations, and ability to present the Certification Preparation Course content. Selected candidates will be asked to observe a certification preparation course taught by an existing instructor.

To apply, complete the Certification Preparation Course Instructor Application Form on the next page. Send your completed application and requested materials to the following address by August 31, 2009.

ARIN Cert Prep Faculty Application Attention Harriet McClung 7794 Grow Drive Pensacola, FL 32514

If you have any questions, contact Harriet McClung at harriet. mcclung@dancyamc.com or call 866-486-2762.

Nurse in Washington Internship Program (NIWI)

(continued from page 11)

legislative process. A good first step is to attend a few local meetings on healthcare issues and stay informed at all times. Always remember that your nursing voice matters and is heard by those who serve as our legislators.

Valerie Linke, RN,BS Clinical coordinator

> The ARIN National Office sends out frequent e-mail communications with information relevant to your practice needs. Do we have your current e-mail address on file? If we do, you will have received this newsletter by e-mail from the National Office. If you didn't receive the newsletter through e-mail, please log onto the ARIN website and update your profile.

Association for Radiologic & Imaging Nursing (ARIN) Certification Preparation Course Instructor Application Form

Name		Credentials		
Employer		Title		
Employer's Address				
City		State	Zip	
Home Address				
City		State	Zip	
Daytime Phone	E-mail			

Please attach a current curriculum vitae (CV) or resume that includes educational credentials, work experience as an educator, and speaking expertise on a national level (ARIN or others). Please provide references for your work experience and presentation expertise.

Reference # 1	
Name	
Daytime Phone Number	E-mail Address
Reference # 2	
Name	
	E-mail Address
 ARIN Certification Preparation Course Instructo Must be certified in radiology nursing by the RN 	0

- Must have presented at least one podium presentation at the ARIN convention
- Must be a current member of ARIN

My signature below affirms that I meet the above minimum criteria and authorizes ARIN to contact the above references for information about my presenting experience.

Signature:



Looking for a Chapter Near You?

Northeast Region

DELAWARE Delaware Chapter Roger Meece, President rmeece@nemours.org

MAINE Maine Chapter (2/08) Lori A. Strout RN lastrout@emh.org

MASSACHUSETTS New England Chapter Joe Cancellieri j.cancellieri@comcast.net

NEW YORK Empire State Chapter Chris Keough, President christine_Keough@urmc.rochester.edu

Long Island Chapter Judy Zona, President, RN, CRN judy.zona@chsli.org

Mid Hudson Chapter Karen Bohnenberger, President kbohnenberger@benedictine.org

PENNSYLVANIA Greater Pittsburgh RNA Chapter Diane Cancilla, President Linda McDonald, Contact Imcdonal@wpahs.org dcancill@wpahs.org

Philadelphia Chapter Cindy Gould, President cabgould@verizon.net **Southeast Region**

FLORIDA Greater Tampa Bay Chapter Carol Shakoori, President cshakoori@tgh.org

NORTH CAROLINA Carolinas Chapter Dawn Lawrence flamingoflo@gmail.com

Triangle Area Radiology Nurses Association (1/07) Ron Schoenfeld Ronald.schoenfeld@duke.edu

TENNESSEE/KENTUCKY Mid-South Chapter of ARNA (6/06) Jan Neiser, RNBC, BS jeneiser@yahoo.com

TEXAS Texas Gulf Coast Chapter Mark Tansiongco, President mtansion@di.mdacc.tmc.edu

VIRGINIA

Blue Ridge Chapter of the American Radiological Nurses Association (1/07) Vickie Taylor, RN, President Vgt2j@virginia.edu

Midwest Region

ILLINOIS Windy City Regional Chapter Janelle Ramsborg, RN, BSN, MBA jramsborg@lumc.edu MICHIGAN Great Lakes Chapter Mike Wilson RN, BSN, MBA Mjw3270@gmail.com

MINNESOTA Minnesota Chapter Bill Stromme Stromme.william@mayo.edu

OHIO

Central Ohio Buckeye Chapter (2/08) Sheila Westrick, Secretary Sheila.westrick@osumc.edu

Ohio Radiological Chapter Annette Murphy murphya@summa-health.org

West Region

ARIZONA Grand Canyon State Chapter Paula Lentowski, RN, CRN www.azradiologyrn.net

CALIFORNIA Golden Gate Chapter Sarah Bradford, RN, CRN Bradfordsjw1@yahoo.com

WASHINGTON Northwest Chapter Rebecca Turner frombecky@comcast.net

If you would like information on starting a local ARIN chapter, please contact Richelle Torres, Chapter Services Specialist at

> <u>ARIN National Office</u> 7794 Grow Drive • Pensacola, FL 32514 850-474-7292 • Toll Free 866-486-2762 • Fax 850-484-8762 E-mail: richelle.torres@dancyamc.com

