Greetings,

As the first nurse in our radiology department, I was in uncharted territory. At that point, anything and everything was included in my job description, since the role had not yet been defined. My first experience with an unstable patient occurred in CT and I was called to treat the patient. Coming from a critical care background, I proceed to do a complete assessment of the patient, feeling that I was finally a valued member of the team. A few minutes later my elation was interrupted when I was told, "Beth, we need to get the patient off the table--table time is money." Today, this story might have a different ending. With reimbursement down, radiology departments are trying to figure out how to survive. In light of the presently unsettled healthcare environment, radiologic and imaging nurses must stay abreast of changes that are occurring in radiology environments. It is important that we understand the relationship between reimbursement and quality of patient care (value-based care). As RNs we need to concentrate on patient safety and quality within the radiology department. How many members are aware that radiology nurses are one of few groups of nurses that can be reimbursed for some of their care? We can charge for the administration of moderate sedation, recovery, and IV infusions, to name a few examples.

Our new relationship with American Nurses Association (ANA) as an Organizational Affiliate (OA) will enhance our ability to deal with the challenges we face. Through our association with ANA, we have the opportunity to remain abreast of federal legislative and regulatory issues, which will allow us to be engaged in political and patient safety issues. These issues are being forwarded to you through eBlasts. There is also an opportunity for ARIN members who are also members of ANA to become involved on a more personal level by volunteering for panel discussions as
put forth by ANA.

We need to increase membership so that we can stand as a united force and secure the position of the radiology nurse in the imaging world. There are estimated to be 19,000 radiology nurses in the United States; ARIN is a small representation of this number. Every ARIN member must encourage his or her radiology nursing colleagues to become involved in ARIN. The board has been working on innovative ways to meet this goal. Be proud of our collaborative organization! Spread the word! Together we can accomplish great things.

I would like to inform you that the ARIN Board of Directors recently made a decision to pursue a relationship with a new association management company, PMA. There are a lot of new and exciting changes coming after September 1st. Stay tuned and get involved.

Registration is currently open for ARIN’s 7th Annual Fall Symposium and Imaging Review Course, to be held in Cincinnati, OH, September 29-30, 2013 at the Hyatt Regency Cincinnati Hotel. The Program Planning Committee, led by co-chairs Chris Keough and Tiffany Hanson, has planned a great schedule of events and early registration discounts, available through September 4th, 2013.

Again, I would like to personally remind you that the ARIN leadership is interested in hearing what you, our valued members, have to say. Please send your thoughts and comments to us at MyThoughts@arinursing.org.

Thank you all for providing me with this opportunity to serve you as President.

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

ARIN Leadership Development Committee Announces Leadership Opportunities
New ACR Standards for MRI Safety Now Available
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News from the Grand Canyon State Chapter
NWARIN Honorary Charted Member Passes Away
New England Chapter Update
Online Learning, 24/7
RNCB Announces Newly Certified and Recertified Radiology Nurses
ARIN Welcomes New Members

Refer your patients to
RadiologyInfo.org
The radiology information resource for patients
Available in English & Spanish

ARIN Board of Directors
2013-2014
It’s Time to “Lean In”

Radiology and imaging nurses are amongst the 3.1 million nurses in the profession in the United States. But are we all professionals? Sheryl Sandberg, author of *Lean In: Woman, Work, and the Will to Lead*, discusses many facets of women in the professional world. To the gentlemen reading this message, in no way do I intend to detract from your roles as individuals or nurses. But, just as there is vanilla and chocolate, there are differences in how women and men present themselves.

In Gallup’s annual survey, the public has voted nurses as the most ethical and honest profession in America for 13 of the previous 14 years (note that in 2011, firefighters were voted first). Does this honor determine our level of professionalism? Consider the last shift you worked. Are you among a group of colleagues who truly work as a team? Maybe you received assistance with a critical patient without asking, or a colleague relieved you for a lunch break, or you needed a double-check on a medication calculation and it was offered without comment.

Or, do you witness colleagues ignoring your requests for help or, worse yet, leaving the area so you are forced to handle a difficult patient, colleague, or situation alone? My focus may sound like a preview of a lateral violence or bullying discussion, but it really is about all of us as professionals. Many are patient-focused but may also need to be colleague-focused.

When it comes to meeting a patient need, we are superior, performing under the Code of Ethics for Nurses that supports the best in care for patient and significant others, i.e., assessment and plan development, infection prevention, and education.

Do you remember the day you decided to become a nurse? What was your driving factor? Many will state “to help someone in need” or “to help others” or “my mother is a nurse and I want to be like her.” Do you have a career plan that covers the next 18 months? Ms. Sandberg encourages us to develop an 18-month plan, in which we focus on what we want to accomplish. This time frame promotes self-assessment and allows time to gather data to formulate the plan. If you are changing positions, one year may not be sufficient time to assess the benefits of your new role. Or, if you are seeking more responsibility or promotion, the 18-month time frame allows you to grow into the role, while remembering to not be afraid to try something new, and recognizing that the longer you are in the role, the more you will learn.

Ms. Sandberg suggests that we think of our career as a jungle gym, not a ladder—that is the difference between creative exploration and limiting our options. To climb the ladder implies that those ahead of us are moving up and sometimes off, so there is room for you. Maneuvering on a jungle gym allows diverse opportunities, regardless of your skill set. Women often believe they need to possess every quality of the job description, but skills can be developed! Think about the career changes you have undergone in nursing or even prior to becoming a nurse.

Developing your career path via the 18-month plan also reminds us of the importance of collaboration and communication. Authentic communication is the basis for successful relationships and real effectiveness at work. Backing away from honesty to protect yourself and others leads to, and may complicate, problems: issues still remain and may never be

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addressed, and resentment increases. As difficult as it may be, we need to be brave enough to tell the truth (Sandberg, p.77-78). I agree, it is not as easy as it sounds. Fear accompanies this process. “Combining appropriateness with authenticity, finding that sweet spot where opinions are not brutally honest but delicately honest. Speaking truthfully without hurting feelings comes naturally to some and is an acquired skill for others” (Sandberg, p.78). We need to look within ourselves to determine where we stand. “I” statements work best; my opinion is the truth as I see it and the same is true for each person with whom I speak. This phrase is one I learned many years ago: I feel frustrated when you interrupt me when I am speaking, which leads me to believe you are not interested in what I have to bring to the table. Is that so? Hopefully a discussion follows in which the air can be cleared.

Health care is changing daily, sometimes hourly. We all need to seek diverse opportunities and embrace opportunities. The best way to gain something you want is to learn by doing. Don’t worry if you do not have the skill set; develop it! Nurses and nursing have so much to offer. I encourage each of you to look within and beyond yourselves and “lean in” to your profession. Perhaps your 18-month plan includes joining an ARIN committee or task force; presenting at the convention, fall symposium, or for a webinar; or placing yourself on the ballot to run for office.


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

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**ARIN Core Purpose**
To foster the growth of nurses who advance the standard of care in the Imaging environment.
A Message from ARIN’s Director of Leadership Development

Leadership is a multifaceted word or idea. It can mean many things to many people. If you look at the word, first and foremost is the word "lead," which means to guide, direct, or show the way. Many ARIN members have expressed the desire for more leadership opportunities in the organization. One way to be a leader is to be a chapter member and move into one of the leadership roles at the local level. Being involved in your hospital on committees, driving patient care and safety, is a great first step. Another opportunity is as a presenter at a conference at the local, state, or national level. Presenting will help you to become comfortable in speaking; preparing your presentation helps to build your knowledge base, thereby increasing your confidence—which is a characteristic of leadership. You must be confident in your knowledge base and in yourself to be comfortable enough to lead others.

Another characteristic that a leader has is enthusiasm. You must be enthusiastic in your beliefs, thoughts, and interactions with others. An enthusiastic leader is someone who can engage others, and get them involved and excited about their organization and their specialty. A leader uses eagerness to inspire people to make a difference.

Commitment is another characteristic a leader exhibits. To be a good leader, you must have the dedication and determination to see the big picture and complete any task, no matter how small or large. A leader assesses the organization’s agenda and incorporates other ideas in addition to his or her own to move things to the next level.

Passion for the profession or specialty as well as the organization is one of the most important characteristics of a leader. As nurses, we are passionate about the care we provide for our patients and their families. We strive for excellence in all interactions and provide safe and compassionate care. A leader should possess the same passion for the organization and its members. Through this, a leader is able to guide and influence change in the practice and care of patients.

In response to your request for more leadership opportunities within the organization, the ARIN Leadership Committee was formed. The Leadership Committee is a combination of the Nominating Committee and the Awards Committee. Both of these committees were responsible for the identification, development, and recognition of our leaders and future leaders. The committee is very excited to have the charge of developing the first Leadership Academy for ARIN. This academy will roll out in San Diego in 2014. A prequel of the program was presented in New Orleans this past March by Greg Laukhuf and Karen Green. We are very excited about the Academy and are looking forward to your feedback and future involvement.

If you possess or would like to develop the leadership characteristics discussed in this article, you should consider becoming involved in ARIN as a member of one of the committees that drive the organization and ultimately, the care of the radiology patient, or consider running for a position on the Board of Directors. There will be information available on the ARIN website on the upcoming call for nominations, which includes the qualifications for each position. There are various methods for getting involved in the organization through committees, the Board, or as a presenter. The only thing holding you back is yourself. Make a difference.
and get involved in ARIN. Your organization and your patients need your knowledge, expertise, and involvement to make things happen!

Kathy Baker, MBA, BSN, RN, CCRN, CNRN, NE-BC  
ARIN Board Member/Director of Leadership Development  
Unit Director, Interventional Radiology  
Department of Imaging Services, UPMC Presbyterian

The Fight to Maintain Critical Nurse Funding: What Can You Do?

On June 27, 2013, the American Nurses Association (ANA) held its annual Lobby Day in Washington, D.C. ANA's annual Lobby Day provides nurses—from student nurses to advanced practice nurses (APNs)—the opportunity to speak with members of Congress on important issues affecting healthcare today. One of these issues: the current and predicted nursing shortage.

The United States Bureau of Labor Statistics predicts that the nursing shortage will reach more than one million RNs by the year 2020, unless aggressive intervention takes place. The current and future nursing shortage has been an ongoing cause of concern in today's healthcare community. Nursing shortages have resulted in an increase in medical errors, poor outcomes, and increased mortality rates. The reasons for nursing shortages range from not having enough experienced faculty in nursing programs to the aging nursing workforce.

The reason closest to my heart, and probably for most of you, is the aging nursing workforce in the U.S. According to a 2008 U.S. survey, more than one million of the nation's 2.6 million practicing RNs are over the age of 50; and approximately one fourth of these RNs are over age 60. Remember, RNs and APNs play crucial roles in the delivery of primary care; nurses are the backbone of healthcare. Also consider the “Baby Boomer” generation; between 1954 and 1964, more than 76 million babies were born in the U.S. Today, the “Baby Boomer” generation makes up for 40% of the nation's population, and this generation is turning 65 years of age at the rate of 10,000 a day. I don't know about you, but as a “Baby Boomer” and aging nurse, this worries me.

So what is being done about this? The ANA and Americans for Nursing Shortage Relief (ANSR) alliance have urged Congress to fund Nursing Workforce Development or Title VIII programs to help address the nursing shortage. The Nursing Workforce Development programs are the primary source of federal funding for nursing education. ANSR has also outlined and presented evidence-based and cost-effective best practices that can help decrease the current nursing and nursing faculty shortage.

So how can we, the current nurse workforce, ensure a sufficient future supply of skilled and qualified nurses to care for our growing and aging population? I encourage you to review the current articles regarding Title VIII. Monetary cuts to Title VIII funding would be detrimental to healthcare and the patients we care for. And then I urge you to write to your elected officials on these important issues affecting the nursing community. Ask your elected official to make funding for programs such as Nursing Workforce Development programs a priority. To read about the programs,
visit Capitol Update » Title VIII. Once you have read about the programs, click on Take Action, found under ANA Links on the right menu bar. Then, scroll down to Alerts and click on Nurse Workforce Development Funding. Here, you will find the letter to send to your state representative.

In addition to contacting your state representative, we are asking organizations and their members to fill out an online form like the one in the toolkit. This information is important, so be sure to let us know how it goes!

Other actions ARIN members can take are:

- Schedule meetings with your Congress members. Here's how.
- Send a letter to the editor of your local newspaper. Here's how.
- Find and attend a town hall meeting. Here's how to find one and what to ask.

As one of our public policy representatives wrote, “It all starts with just one person making a difference. I would recommend to every nurse to get involved and have the chance to say, I helped make a difference” (R. Wardrope, 2012).

Pauline Lentowski, MSN, RN, CRN
ARIN Legislative Liaison

Editorial: ARIN Members’ Accomplishments

Below is a summary of some recent accomplishments by your fellow ARIN members. Congratulations to these individuals for their achievements!

Kristina H. Hoerl, MSN, RN, CRN
Baltimore, Maryland

Kristina Hoerl was recently promoted to Nurse Educator for the Department of Radiology Nursing at The Johns Hopkins Hospital. She is also a chapter writer for the 3rd edition revision of the ARIN Core Curriculum for Radiologic and Imaging Nursing and was just selected to participate in the Role Delineation Survey Writing in Houston, Texas, August 2013. Congratulations to Kristina on her promotion and our appreciation for her volunteerism with ARIN.

Patti Baker, RN
Huntington Beach, CA

Patti Baker is graduating from Vanguard University with her BSN. She earned her ADN degree in 1987. After 26 years of nursing, she is amazed by the wonderful profession she has chosen to belong to, and she continues to learn more every day. Patti works in Interventional Radiology at Hoag Hospital in Newport Beach, CA with a talented group of nurses and physicians. The radiology certification exam is next on her bucket list.
Congratulations to Patti on completing her 4-year degree, as this is quite an accomplishment. ARIN is proud to have her as an active member.

Patricia A. Casarella, BSN, RN, CRN, ACLS, BLS Instructor
White Plains, NY

Patricia Casarella is a radiology nurse at White Plains Hospital in White Plains, New York. She has BSN and RN degrees, and is BLS- and ACLS-certified. She is currently a BLS instructor. After passing her exam in October 2012, she now adds the Certified Radiology Nurse credential to her title. Congratulations to Patricia on attaining her CRN certification. ARIN is proud to have Patricia as an active member in the organization and looks forward to seeing her take things to the next level.

Sharon Lehmann, MS, ACNS-BC

ARIN Member Feedback:
Review Course a Success!

We received the following feedback from an ARIN member who attended the certification review course at the 2013 National Conference, held in New Orleans, Louisiana this April. Congratulations to Terry VanWagoner for passing her certification exam! Here’s what Terry said about the course:

I just wanted to thank you for putting on such a great review course in New Orleans. Your course was so informative and prepared me for the exam in May. I am happy to report that I passed! Hope to see you at the next conference in San Diego.

Terry VanWagoner, BS, RN, CRN
ARIN Member

Did you attend the ARIN 2013 conference? If so, what did you find most useful? We’d love to hear your feedback. Please send your thoughts, praise, and suggestions to MyThoughts@arinursing.org.
Radiology Nursing Across the Globe

It is my pleasure to introduce a new *Vision* column that highlights some of the work radiology nurses are doing in the global arena. This month I interviewed **Ruth Quiambo-Concepcion, RN**. Ruth Quiambo-Concepcion currently practices at the prestigious St. Luke’s Medical Center Global City in Taguig, Philippines. Working at St. Luke’s Medical Center has been Ruth’s dream since she entered nursing school. She began her career at St. Luke’s in 2009 in Radiology, and just celebrated her 4th year as a Radiology Nurse.

Ruth keeps her nursing skills sharp as she rotates through various radiology departments. She is responsible for taking the medical history of the Diagnostic Radiology patients as well as IV insertion for contrast-enhanced studies. She assists with moderate sedation for procedures in Interventional Radiology and various diagnostic imaging studies. Working with the radiologist and attending physician, Ruth communicates any concerns to her team to ensure a safe and successful patient experience.

At the heart of a premier medical center, the Institute of Radiology caters to more than 500 patients a day. The busy medical center receives patients from Asia, Micronesia, the Middle East, Europe, and the United States.

Despite the challenges of a busy environment, Ruth is grateful for the feeling of being appreciated by her patients. As she stated to me, “A thank you and a big smile can seem like simple things, but they have a big impact on me, because they inspire me more to give my very best in everything that I do.”

However, Ruth also recognizes the challenges that come with her career choice. She reflects that nurse compensation in the Philippines is low compared with her global colleagues. She also notes that there is often not enough opportunity for career advancement and professional growth, given their current resources.

In the future, Ruth is interested in forming a chapter or organization based in the Philippines that advocates the practice of radiology nursing. Eager to promote radiology nursing on a global level, Ruth has also joined RAD-
AID in its mission to increase radiology services in developing countries.

We are honored to have Ruth as a member of ARIN!

Emily J. Timmreck, MSN, RN, ACNP  
Director of Nursing Programs  
RAD-AID International, LLC

ARIN Awards and Scholarships

ARIN has six awards and scholarships available for members. They range from cash awards to recognition for the most outstanding chapter. Have you thought about applying? The process is easy. To access the application, visit the ARIN website and select the Resources link in the left navigational menu, then choose the appropriate link under Awards & Resources. The deadline for all awards and scholarships is September 15, 2013. Read on for more information on each award/scholarship:

1. The **Chapter Award** is awarded to the chapter that demonstrates best practices to promote the vision and goals of ARIN. It highlights professional member relationships with ARIN, the individual chapter group, and the community.

2. The **CRN Exam Scholarship** is awarded to a member who wishes to sit for the exam. The scholarship covers the registration fee.

3. The **Radiology Nurse of the Year Award** is given to a candidate who demonstrates excellence in leadership, mentorship, and ongoing professional development.

4. The **Dorothy Budnek Memorial Scholarship** provides a current member with a cash award to further professional nursing development through education. This award is in memory of Dot Budnek, who started her career as a radiology technologist. She recognized the importance of the nurse’s presence and expertise in the imaging environment. This award honors the continuing education student who wishes to further his or her nursing career.

5. The **Helen Malenock Award** provides a 1-year ARIN membership to a nurse who wishes to become a member to enhance his or her career in radiology and imaging nursing.

6. The **Charlotte Godwin Scholarship**, named for ARIN’s first President, awards a complimentary registration to the annual meeting. The recipient also receives a cash scholarship of $200 to defray the expense of attending the meeting.

Please consider applying for an award or nominating a colleague. View the list of awards and their descriptions. As always, I am available to help with any questions you may have.

Sincerely,  
Cheryl Jaglowski-Ho RN, CRN, CEN  
Awards and Scholarship Chair
ARIN Fall Symposium & Imaging Nurse Review Course

When: September 28-29, 2013  
Where: Cincinnati, OH  
Hotel Information: Hyatt Regency Cincinnati, 151 W Fifth Street, Cincinnati, OH 45202, Phone: (513) 579-1234  
Reservations: The Hyatt Regency Cincinnati is holding rooms for ARIN attendees at a special rate of $149 single and $174 double. For call-in reservations, be sure to inform reservations personnel that you are with the ARIN Fall Symposium in order to receive the special rate. Rooms are available at the special rate until September 4, 2013, or until the room block is filled.

Check the ARIN website for the Fall Symposium program schedule of events and registration information.

The ARIN Imaging Nurse Review Course is a 2-day course designed to provide an overview of the skills required for the nurse working in the imaging, interventional, and therapeutic environments. This course can also be used to prepare for the radiologic nursing certification exam. It is not designed as a single study tool to prepare for this exam; however, it is a useful resource when used in conjunction with other study materials.

ARIN Leadership Development Committee Announces Leadership Opportunities

The Association for Radiologic and Imaging Nursing (ARIN) Leadership Development Committee has issued a Call for Nominations for open positions on the ARIN Nursing Board of Directors. This is an exciting time to be leader in the organization with a Core Purpose of fostering the growth of nurses who advance the standard of care in the imaging environment. Are you ready to consider the opportunity to step into a leadership role that will be rewarding, both personally and professionally? Click here to nominate a colleague for office or to submit a self-nomination. Candidates are being sought for the following positions:

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. This position has a 3-year commitment: the first year as President-Elect, a second year as President, and a 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. This position has a 2-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. This position has a 3-year commitment.

**Leadership Development Committee Member**: The Leadership Development Committee oversees the elections process, solicits and screens applicants, and presents a slate of candidates to the membership for voting. The business of the Leadership Development Committee is conducted via e-mail and conference calls; travel is not required. This position has a 2-year commitment. **Members of the Leadership Development Committee may not run for office during their term on the Committee.**

A candidate must have been an active member of ARIN for a minimum of 1 year preceding nomination. In addition, the President-Elect should have served at least 1 year as a member of the Board of Directors or as a chairperson of an ARIN national committee for a minimum of 1 year prior to nomination. Nomination does not guarantee that a person’s name will appear on the final slate.

The deadline to submit the Call for Nominations is **September 15, 2013**.

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**New ACR Standards for MRI Safety Now Available**

The American College of Radiology (ACR) has released the ACR **Guidance Document for Safe MR Practices: 2013**, which addresses numerous MR safety-related topics:

- Static magnetic field-related issues, such as translational and rotational forces on ferromagnetic materials
- Time-varying magnetic field-related issues, such as induced voltage, auditory considerations, and thermal issues
- Personnel qualifications and training
- Site access restrictions
- Pregnancy-related issues
- Guidelines on claustrophobia, anxiety, sedation, analgesia, and anesthesia
- Contrast agent safety
- An entirely rewritten section on the safety of MR scanning of device patients, such as patients with cardiac pacemakers, implanted auto-defibrillators, etc.
- Emergency preparedness planning

Visit the ACR website. View the updated guidelines here.
Radiology in the News

GE, NFL Join Forces to Tackle Traumatic Brain Injury
Source: AuntMinnie.com
March 12, 2013

With increasing concern and interest in concussions in athletes and traumatic brain injury in soldiers, the National Football League, General Electric, and UnderArmour are investing $20 million to develop new approaches to diagnosis and improve outcomes for patients. Radiology is at the forefront of this investigation, with efforts to use current imaging and develop new technologies to help find the damage caused to the brain.

Scans That Gauge Heart Scarring May Spot High-Risk Patients
Source: http://www.nlm.nih.gov/medlineplus/
March 5, 2013

Referencing the article by Shah, et al, “Prevalence of Regional Myocardial Thinning and Relationship With Myocardial Scarring in Patients With Coronary Artery Disease,” in the March 6 issue of the Journal of the Medical Association, the news discusses the use of MRI scans of patients with dilated cardiomyopathy to evaluate scarring in the heart tissue. Using delayed-enhancement cardiovascular magnetic resonance (CMR) imaging with 1.5 T magnets using contrast and a 10-15 minute delay in acquisition, results suggest further research is needed. Read more on the Jama Network online.

Unusual Breast Implant Sensations While Flying: Mystery Solved
Source: AuntMinnie.com
April 3, 2013

A recent letter to the journal, Plastic Reconstructive Surgery, described a woman who experienced "strange sensations" and shortness of breath on a flight from New York City to Denver. Breast imaging initially did not reveal anything but a CT scan showed a small amount of trapped gas surrounding the implant. The gas did not result from the implant expanding, but from dissolved gas in the blood coming out to fill the space between the implant and the capsule. This normally would resolve on landing, but as this patient remained at high altitude (Denver), she continued to experience pain similar to "the bends." Read more here.

Do Imaging Agents Cause Acute Kidney Injury?
Source: itnonline.com
May 2013

New research from the Mayo Clinic questions the link between contrast and acute kidney injury. A retrospective study of more 100,000 CT scans performed over a 10-year period at the Mayo Clinic revealed that patients who received contrast were evaluated for the potential link to acute renal injury. A creatinine blood test was used to assess renal function prior to scans and interventions like angiography due to the longstanding belief...
that contrast is hard on the kidneys. The article reports that “the Mayo Clinic found that patients who received contrast and patients that did not receive contrast had the same risk of developing acute kidney injury. Additionally, both the contrasted and non-contrasted patients had the same incidence of AKI, dialysis, and death from renal injury.” Further analysis and research is needed, but the retrospective study results suggest the possibility that the incidence of contrast-induced nephropathy may be exaggerated.

Read more about the Mayo Clinic study here.

News from the Grand Canyon State Chapter

Arizona’s Grand Canyon State Chapter (GCSC) has been very busy, despite the 120-degree temperature. The chapter recently hosted a live ARIN webinar in June, presented by Dr. Peter Sunenshine on the topic, “What’s New with Neuro-Interventional.”

We are honored to have one of our board members and past chapter president, Pauline Lentowski, named ARIN’s Radiology Nurse of the Year. Pauline has also been appointed as ARIN’s Public Policy Representative.

GCSC’s first 2-day CRN review will be held September 14th and 15th at Banner Good Samaritan Medical Center in Phoenix, AZ.

Presently GCSC has 50 members, and with the unwavering dedication of our board members, we hope to double that number over the next year!

Last but not least, the GCSC annual education conferences are held every October, January, and April. This October, the conference will be held in Tucson, Arizona.

The heat is on with another eventful year in sunny Arizona for the Grand Canyon State Chapter!

Theresa Murray, BSN, RN, CRN
President, Grand Canyon State Chapter
NWARIN Honorary Member Passes Away

Betty Heyano, co-founder and member (1987-2013) of the Northwest Chapter of ARIN (NWARIN), recently passed away. Betty was 84 years old. She was born in Bellingham, Washington, and is survived by her son Scott, who lives in Seattle.

Betty graduated from St. Luke’s in Bellingham in 1949, and went on to work in New Orleans, Kentucky, Hawaii, and Alaska. Her last 25 years of nursing was spent at Swedish Hospital in Seattle. Prior to coming into radiology in 1985, Betty worked in the emergency room. As a radiology nurse, Betty determined the need for more educational and networking opportunities in the Pacific Northwest, and was responsible for developing NWARIN in 1987 along with Kathy Scheffer, a nurse from Tacoma. Betty made quite a positive impact in the radiology department prior to retiring in 1994.

Betty volunteered at several charities. One of them was the Children’s Hospital Thrift Store. NWARIN has made a donation in her memory to her charity of choice: the Children’s Hospital Uncompensated Fund. Also in Betty’s memory, in honor of her passion for education, NWARIN is developing a Betty Heyano Memorial Scholarship Fund. Betty would be proud to know how we are honoring her memory and contribution to radiology nursing. NWARIN colleagues describe Betty as a “gracious and caring nurse, sharp up until the end,” a “lifelong learner and teacher,” as someone who was “pro-imaging nursing education,” and “respected by all for her traditional and professional standards.” NWARIN says, “Thank you, Betty, for all you did to develop and foster the foundation of imaging nursing and collegiality in the Pacific Northwest.”
New England Chapter Update

The New England Chapter sends warm greetings to all. Our continuing goals inform all that we do. Those goals are to increase membership and participation in our chapter, and to present educational programs that meet the informational needs of our members.

We remain at work streamlining our documents and workflow to continue building an efficient and growing chapter. Next up is the review and revision of our Bylaws, including changes to make the role of “Champion” clear and official. We have developed other roles that also need definition and formalization: that of the Web and Graphics Specialist, and the Marketing Specialist. The chapter’s spring program, presented in April, went very well. It was graciously hosted by U Mass Memorial Medical Center in Worcester, MA. Our “Spring Mix” covered information about liver transplantation, especially the live donor program offered at UMMC; new technologies for neuro-endovascular procedures; neuro case presentations; and ECG-guided PICC placement. We were also treated to tips on how to measure and improve team performance. Speakers were wonderful and the program was very well-received. We are grateful to Ann Morrissey and her team for all the careful planning and diligence that went into making the program a success.

November 2, 2013, is the date for our fall program, currently under development. It will be hosted by UCONN Medical Center in Farmington, CT. Our chief nurse planner is Pat Ardolino, assisted by Georg’ann Bona. The proposed topics are varied and exciting; those include current practices of CCTA and breast imaging, methods of vascular access and infection prevention (particularly in regards to the Sickle Cell patient), and the concept of a “traveling IR.” We will soon have all the details in place and ready for advertising on the ARIN website. These will be sure to whet your appetite for review and learning.

Our conference planners do not work alone. However, they are at the heart of every successful program our chapter presents. We don’t know what we would do without them and their commitment to New England radiology nurses, and to the promotion of our expertise. We are very “lucky ducks” to have such a wonderful group of members and Champions.

Elizabeth Duck, BA, RN
President-Elect, New England Chapter of ARIN
Online Learning, 24/7

Did you know? ARIN has webinars available online.

Current topics include:

- Safety in the Imaging Environment
- Capnography as an Adjunct Safety Measure
- The Impact of GFR (Glomerular Filtration Rate) in Radiology
- Patient Protection and the Affordable Care Act: A General Overview and Its Effects on Radiology
- Anaphylaxis: What is Going On?
- Challenging Cases in IR: An RN and RT Perspective

RNCB Announces Newly Certified and Recertified Radiology Nurses

CERTIFICATION

Certification is one of the most important decisions a nurse can make. Certified nurses are recognized by their peers and employers for having achieved a standard of competency in the nursing specialty. The Radiologic Nursing Certification Board, Inc. (RNCB) would like to congratulate the following nurses who passed the Radiology Nurse Certification exam on April 17, 2013 and on May 4, 2013 and met the requirements to obtain the Certified Radiology Nurse (CRN) credential.

April
Sandra Anderson, Marina Del Rey, CA
Marilyn Mills, Buena Park, CA
Glenn Panayioto, West Hollywood, CA
Jean Zagorski, Huntington Station, NY

May
Bonnie Abrams, South Plainfield, NJ
Judith Ambler, West Newbury, MA
Elizabeth Anastasio, Morganville, NJ
Debra Bell, Wheeling, WV
Sarah Caley, Princeton, NJ
Janet Casper, Jonesboro, IL
Mariamma Chacko, Burr Ridge, IL
Sunimol Chacko, Houston, TX
Denise Christensen, Omaha, NE
Donald Collignon, San Antonio, TX
Michael de Jesus, Pearland, TX
John Dunn, Philadelphia, PA
Melissa Goad, Claremont, NC
Joanne Graf, Las Vegas, NV
Penny Greenwood, Downers Grove, IL
Carla Grisham, Toney, AL
Jessica Haley, Centennial, CO
Heather Hampton, Carrollton, TX
Jeannette Hoenig, Severn, MD
In addition, the RNCB would like to inform you of the Certified Radiology Nurse exam results for the April 17, 2013 examination. Five nurses took the exam at the conclusion of the ARIN Convention with a total of four passing. This is a pass rate of 80%. On May 4, 2013, 51 nurses took the certification exam, with a total of 38 passing. This is a pass rate of 74.5%.

**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 23 nurses who met the stringent standards to maintain their certification by the end of May 2013.

Linda Alliprandini, Fairless Hills, PA
Louahnee Cangelosi, Baton Rouge, LA
Debra Clark, Long Branch, NJ
Christine Drown, Clyde, OH
Theresa Dullea, W. Edmonds, WA
Eileen Jones, Mays Landing, NJ
Mina Ferguson, Virginia Beach, VA
Lisa Freiler, Los Angeles, CA
Alan Fujihara, San Jose, CA
Kristen Gerouli, Lombard, IL
Elaine Gill, Berlin Heights, OH
Claudia Harrison, Menlo Park, CA
Lauren Keegan, Fairfax, GA
Jen-Shi Liu, San Jose, CA
Jeanne Lohr, Colfax, NC
Mary Jane Martin, Chicago, IL
Sarah Lynn Maciolek, Sullivan, WI
Dawn McGrogan, Union Beach, NJ
Virginia McKee, Upland, CA
Karen Neun, Petaluma, CA
Gregorio Rue, West Hollywood, CA
Mary Salario, Baton Rouge, LA
Laura Williamson, Salisbury, NC
ARIN Welcomes New Members

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

JoAnn Barbour, RN, Littleton, CO
Mia Bausell, MSN, RN, CCRN, Canton, OH
Catherine Beal, BSN, RN, CRN, Honeoye, NY
Erica Bohn, BSN, RN, Louisville, KY
Pamela Bray-Bilal, RN, Bronx, NY
Christina Brescia, BSN, RN, Levittown, PA
Annette Brown, RN, Oviedo, FL
Celine Butler, Salem, VA
Margaret Carroll, RN, Rockville Centre, NY
Ann Rachel Clark, BSN, Auburn, CA
Julie Corbett, Pittsburgh, PA
Kathleen Crittenden, BSN, Atlanta, GA
Denise Davis, RN, Clovis, CA
Eileen Derks-Wilson, MSN, RN, CEN, Kansas City, MO
Sarah DeRycke, RN, Cary, NC
Linda Dietz, RN, Glencoe, MN
Kathleen Dimitrov, RN, Pittsboro, NC
Denise DiRaimo, Suffolk, VA
Stephanie Dock, BSN, RN, Mobile, AL
Helena Downer, RN, Spring, TX
Constance Duffey, BSN, RN, PHRN, Hershey, PA
Jean Duffy, BSN, Severna Park, MD
Christian Dumangas, BSN, RN, Chicago, IL
Ann Evans, BSN, CCRN, Lafayette, IN
Shawn Fanning, BSN, CCRN, Sheridan, WY
Fe Mati Fe, BSN, RN, CCRN, Las Vegas, NV
Fe Ferrer, MSN, RN, ACNP, Bronxville, NY
Elizabeth Fowler, RN, Cleveland, OH
Lucina Francis, RN, New York, NY
Warren Gaden, Mount Prospect, IL
Louis Gardner, RN, Kingwood, TX
Sheila Gregory, East Palo Alto, CA
Holly Grobels, RN, Hamilton, NJ
Jori Hake, RN, Olympia, WA
Thomas Hall, RN, Brandon, MS
Marlene Hanson, MBA/HCM, MSN, RN, Grand Rapids, MI
Yvonne Harris-Morris, BSN, RN, Chester, VA
Christine Helbert, BSN, RN, Noblesville, IN
Brenda Hinton, Chesapeake, VA
Adriana Indries, RN, Skokie, IL
Roberta Isles, BSN, RN, Richmond, VA
Christine Jezeski, RN, Mentor, OH
Nina Johnson, RN, Parker, CO
Susan Jordan, RN, Charlottesville, VA
Ruth Keigley, BSN, Hampton, VA
Patricia Kettle, BSN, BS, RN, CRTT, Baltimore, MD
Yolande Kimber, RN, Dammam, Saudi Arabia
Mary King, RN, Frankfort, IN
Carol Lamarche, BSN, RN, Muskego, WI
Ira Lanik, RN, Haverhill, MA
Noela Laplanche-Dixon, RN, Browns Summit, NC
Fiona Law, MSN, RN, Camperdown, Australia
Cheryl Leatherman, BSN, RN, CCRN, CVRN, North Aurora, IL
Katherine Lentz, BSN, RN, CCRN, West Bend, WI
Tom Leuck, RN, Gaffney, SC
William Lurwick, RN, Reading, PA
Francis Manganti, RN, Willowbrook, IL
Debra Marr, Tulsa, OK
Jamie Marshall, RN, Front Royal, VA
Miriam Mathulla, RN, ASN, Gainesville, FL
Kate McClure, RN, Langhorne, PA
Deborah Meyer, BSN, Tucson, AZ
Melissa Miller, BSN, RN, Chicago, IL
Kathryn Monpas, BSN, RN, Woodbury, MN
Elaine Mosqueda, RN, New York, NY
Laura Nelson, RN, Seattle, WA
Gemma Noronha, BSN, RN, Morton Grove, IL
Nancy Obrycki, RN, Allen Park, MI
Maribeth, O’Connell, RN, Chicago, IL
Judy Oetter, RN, Gainesville, FL
Kristen O’Hanahan, BSN, Littleton, CO
Kena O’Neal, Mesa, AZ
Jewel Owen, RN, ADN, Angier, NC
Alison Owens, BSN, RN, Baltimore, MD
Marifreda Pamatian, RN, Chicago, IL
Amber Parker, BSN, RN, CEN, Fairless Hills, PA
Mario Paulino, MSN, RN, Oak Lawn, IL
Rachel Payment, RN, Bremerton, WA
Tina Penn, BSN, RN, New Orleans, LA
Polly Peryer, RN, Boise, ID
Tiffany Phillips, BSN, RN, Raleigh, NC
Jacob Poarch, RN, Sandston, VA
Jennifer Puff, RN, Cary, NC
Karen Purnell, MBA, BSN, RN, Orlando, FL
Donna Quin, MSN, RN, Humble, TX
Dona Raines, RN, Satsuma, AL
Lavanya Reddy, RN, Monmouth Junction, NJ
Brittany Richard, BSN, Arnaudville, LA
Raquel Rodriguez, RN, Lake in the Hills, IL
Erliza Rodriguez, RN, Richmond, TX
Kimberly Rowland, BSN, CCRN, Belmont, NC
Nieves Sandoval, RN, Tinley Park, IL
Kristen Schiro, BSN, Jefferson, LA
Brenda Schmitz, MS, RN, Chicago, IL
Elizabeth Sebek, BSN, RN, CRN, Gibsonia, PA
Mary Sheetz, RN, Poplar Grove, IL
Barbara Short, RN, Middletown, OH
Henry Smeltzer, Jr., BS, RN, CCRN, York, PA
Laura Smith, BSN, RN, Saratoga Springs, NY
Reagan Soudelier, BSN, RN, CEN, Baton Rouge, LA
Michelle Steinert, BSN, RN, Casper, WY
Tami Steinlage, RN, Wilton Manors, FL
Patricia Stone, RN, Newberry, FL
Bridget Switzer, BSN, RN, St. Charles, MO
Dwayne Swope, RN, Meadows Place, TX
Sue Taylor, RN, Chicago, IL
Kristiana Thompson, RN, Jacksonville Beach, FL
Elizabeth Thompson, BSN, RN, Seattle, WA
Brenda Turcotte, RN, Baton Rouge, LA
Rhoda Vanderhart, BSN, RN, CPAN, Mobile, AL
Jennifer Werthman, MS, MBA, Nashville, TN
Anne Williamson, BSN, Evergreen Park, IL
Kelly Winters, RN, Ankeny, IA
Christine Wright, RN, Peterborough, Ontario, Canada
Maggie Young, BSN, RN, Maumelle, AR
David Zima, RN, Plano, TX