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ARIN

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From the Executive Director The Value of ARIN



In 2013, the ARIN Board of Directors was introduced to the books, *Race for Relevance* and *Road to Relevance*, both written by Harrison Coerver and Mary Byers, CAE. The authors encouraged the organization to review how business is conducted. The areas reviewed include board size and structure (the board size fell within the suggested range) and identifying what ARIN does better than everyone else. Reviewing the board structure led us to identify specific focus areas for our at-large board members in education, leadership development, and membership.

The American Society of Association Executives (ASAE) states that Mission must come before Membership. To clarify the mission, ARIN

surveyed the membership (Quarter 3, 2012) to understand their needs and wants. Educationally related responses included feedback on the spring convention, webinars, online activities, etc. Using this information, the 2013-2014 Board of Directors developed the ARIN Mission Statement: *To provide radiology nurses with the knowledge and resources to deliver safe, quality patient care in the imaging environment.* Our strongest **value** is our commitment to education. To bring the mission to reality, ARIN fully developed the position of Director of Education, currently held by Brenda Boone PhD, RN, CRN.

Creating the position was the easy part; following through to meet the goal was critical. Here are the outcomes to date:

- The **Webinar Committee** is working diligently to present quality, timely, and relevant programs, all under the new ARIN Webinar Platform.
- The *Journal of Radiology Nursing (JRN)*, will be offering contact hours beginning in March 2015. Working collaboratively with our publisher, Elsevier, ARIN has gained critical knowledge in this arena.
- ARIN released the *Core Curriculum for Radiologic and Imaging Nurses, 3rd Edition*, in late May 2014. An e-book is planned for release by the end of this year.
- The ARIN Listserv has proved invaluable as members engage in active problem-solving to assist colleagues.

What I have just described to you is the **value** of ARIN membership. These tangible properties are utilized by all members in a variety of combinations.

I plan to follow up with you to discuss the Director of Membership position and our focus on ARIN Membership. Enjoy your summer and stay safe.

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

From the Director of Education

The International Stroke Conference

Happy summer from beautiful San Diego, California. Did you know that in addition to the ARIN National Conference in March, San Diego also hosted the International Stroke Conference? The 2014 International Stroke Conference was held Feb 12-14 at the San Diego Convention Center.

The nursing symposium was held on the first day of the conference. Presentations topics included the "social" aspects of stroke, e.g., anxiety, depression, and cognitive function. There was also discussion about nursing roles in Comprehensive Stroke Centers. As many of you are aware, the Joint Commission rolled out the Comprehensive Stroke Center designation in 2012 and has been fine-tuning what that designation entails.

Many research studies were presented on subsequent days of the conference, but below are some highlights:

- One pre-hospital study looked at whether magnesium would improve outcomes for stroke patients. One thousand, seven hundred patients were given 4 grams of magnesium with no change in outcome and no significant benefit. However, it was noted that tPA was given more often in these patients. The study opened the door for further research studies.
- Dr. Lyden presented data from hypothermia studies.
- Another topic was high caregiver depression. Researchers found that caregivers still experience depression despite their involvement in various programs. Caregiver wellbeing has not been well-studied.
- The CRYSTAL-AF study found that atrial fibrillation (AF) may play a bigger role than previously believed. This study highlighted the need to monitor AF with non-traditional techniques that may be more likely to detect intermittent AF, such as an implanted cardiac monitor, which, when worn for six months, was found to be seven times more likely to detect AF.
- The Transcranial Doppler (TCD) testing study found that TCD may be more sensitive than transesophageal echocardiography (TEE) in detecting patent foramen ovale (PFO), which might be the reason for some patients' strokes. The researchers thought that TCD could help differentiate the risk of future stroke or TIA depending on the severity of the PFO. TCD is also much less expensive than TEE.

This was just a portion of what was presented during the conference. There really is so much more to be done to impact the 4th leading cause of death and leading cause of disability.

Brenda Boone, PhD, RN, CRN ARIN Director of Education

ARIN Annual Elections

The Leadership Development Committee Announces Leadership Opportunities for 2015

The Association for Radiologic and Imaging Nursing (ARIN) Leadership Development Committee has issued a Call for Nominations for open positions on the ARIN Board of Directors. This is an exciting time to be leader in the organization whose Core Purpose is *To foster 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 forth 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. 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.

Secretary: The Secretary assists in recording and reviews the minutes for all Board and Membership business meetings. Knowledge of Robert's Rules of Order is helpful. Travel is required and expenses are reimbursed as set by ARIN policy. This position has a 2-year commitment

Director of Education Board Member: The Director of Education is a member of the ARIN Board of Directors and is responsible for creating and marketing opportunities for nursing education. This is 3-year commitment. Board and Committee conference calls are held monthly. Travel is required and reimbursed as set forth by ARIN policy.

Leadership Development Committee Member: Members of the Leadership Development Committee are involved in awards, scholarships, elections, and leadership education. The business of this committee is conducted via e-mail and conference call; 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, 2014.

34th Annual Spring Convention

The Association for Radiologic & Imaging Nursing

Omni Hotel at CNN Center, Atlanta, GA Convention: March 1-4, 2015 Imaging Nurse Review Course: February 27-28, 2015

The ARIN Annual Convention is held in conjunction with the Society of Interventional Radiology (SIR) and the Association of Vascular and Interventional Radiographers (AVIR), which makes this the premier event to attend each spring.

See the <u>ARIN website</u> for a list of registration fees. **Registration will open October 1st.** Check back for more updates and the full convention schedule. For more information on SIR or AVIR programs, please visit <u>www.sirmeeting.org</u>.

ARIN Awards & Scholarships

A Message From the ARIN Awards & Scholarships Committee Chair

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 **October 15**, **2014**. Read on for more information:

- 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.
- The **CRN Exam Scholarship Award** is awarded to a member who wishes to sit for the exam. The scholarship covers the registration fee.
- The **Radiology Nurse of the Year Award** is given to a candidate who demonstrates excellence in leadership, mentorship, and ongoing professional development.
- 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.
- 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.
- 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. <u>View the list of awards and their descriptions</u>. 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 2014 Call for Volunteers

Join Us in Shaping the Future of ARIN

The goals and objectives of the Association for Radiologic & Imaging Nursing (ARIN) are achieved largely through the work of committees. Members volunteer their expertise, time, and talent to these committees and are the driving force behind ARIN activities. Together, members of the board, along with committee members, identify the changing needs and priorities of ARIN and our professional community.

Committee members meet regularly via conference call to determine how these needs can be met through program development or service delivery. Periodic reports are made to the board and the membership detailing each respective committee's activities.

All ARIN committees depend on the creative talents and resources of member participants. We welcome and encourage your participation. To learn more about a committee of interest, <u>visit the Committee page on the ARIN website</u>.

Committees, Task Forces, and Other Volunteer Opportunities:

- Leadership Development Committee
- Program Planning Committee
- Education Small Task Forces (ex: writing CEU's)
- Chapters Committee
- Position Statements/Clinical Practice Guidelines Task Force
- Orientation/Competency Task Force
- Website Committee
- Webinar Committee
- Presenting a Webinar
- Public Policy Representation
- Writing for Vision Newsletter
- Tell us your expertise and what you would like to offer

To join a committee, send the National Office an e-mail so that we can pass your information along to the committee: info@arinursing.org.

ARIN Listserv

Peer-to-Peer Conversation

- How are you handling shortages of vacutainers?
- Do you have staffing ratio guidelines?
- How do you get to the Joint Sterile Technique Guidelines?
- What are the opportunities for educational webinars?
- Is anyone using Lexiscan and can you share procedures?
- What do you know about Pradexa and stopping it before procedures?
- Can you share what Joint Commission was asking on your last survey?
- Are your RTs allowed to give drugs?

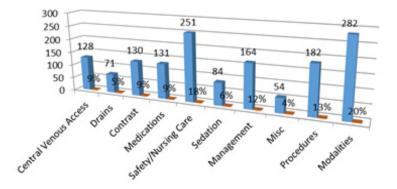
Have any of these questions concerned you? ARIN's Listserv conversation is where many members have asked and answered questions such as these. From 2011-2013, Listserv questions were analyzed and offer the following breakdown.

From August 2011 to September 2013, more than 1,400 listserv e-mails were analyzed. The results are as follows:

Categories

Central Venous Access	128	9%
Drains	71	5%
Contrast	130	9%
Medications	131	9%
Safety/Nursing Care	251	18%
Sedation	84	6%
Management	164	12%
Misc.	54	4%
Procedures	182	13%
Modalities	282	20%
	1,477	

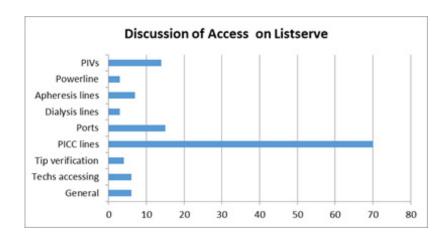
Categories of Topics Listserve 2011-2013



Types of Venous Access

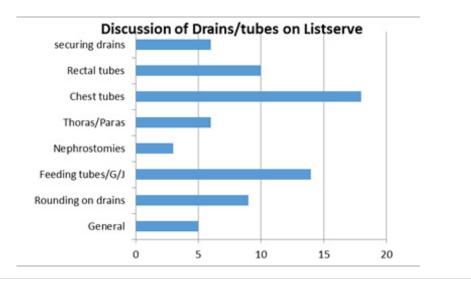
General	6
Techs accessing	6
Tip verification	4
PICC lines	70
Ports	15
Dialysis lines	3
Apheresis lines	7

Powerline	3
PIVs	14
	128



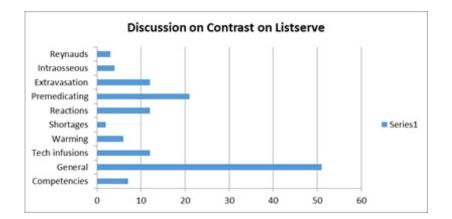
Drains

General	5
Rounding on drains	9
Feeding tubes/G/J	14
Nephrostomies	3
Thoras/Paras	6
Chest tubes	18
Rectal tubes	10
Securing drains	6
	71



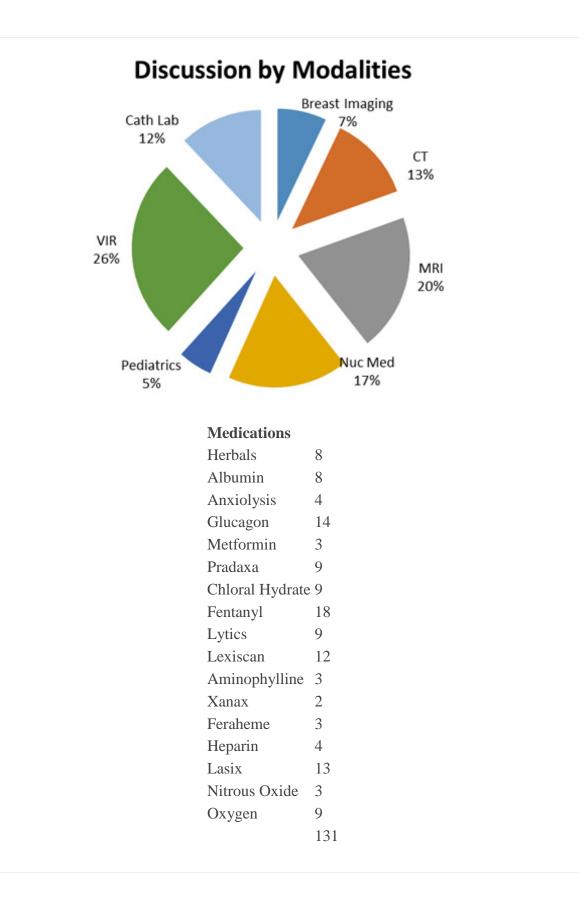
Contrast

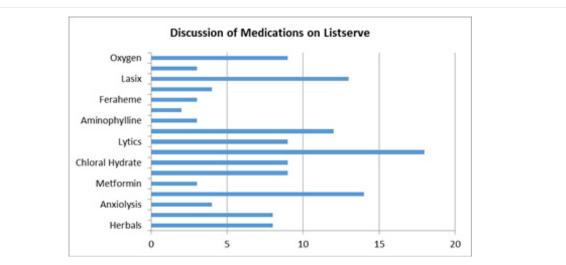
Competencies	7
General	51
Tech infusions	12
Warming	6
Shortages	2
Reactions	12
Premedicating	21
Extravasation	12
Intraosseous	4
Reynauds	3
	130



Modalities

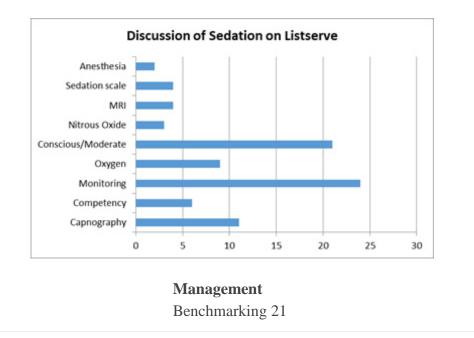
Breast Imaging	20
СТ	35
MRI	56
Nuclear Medicine	49
Pediatrics	14
VIR	74
Cath Lab	34
	282





Sedation

Capnography	11
Competency	6
Monitoring	24
Oxygen	9
Conscious/Moderate	21
Nitrous Oxide	3
MRI	4
Sedation scale	4
Anesthesia	2
	84



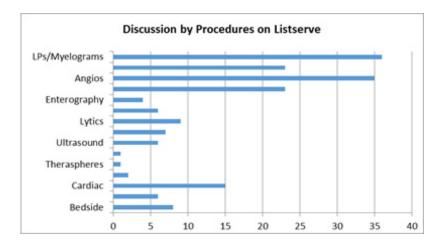
Guidelines	9
Pay	24
Staffing	36
CNS/NP	12
EPIC	6
Scrubs	17
Evaluations	8
General	20
Orientation	3
Workflow	6
Room time	2
	164



Procedures

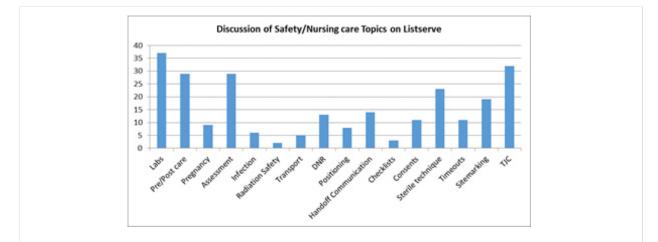
Bedside	8
Biopsies	6
Cardiac	15
Cisternogram	2
Theraspheres	1
RFA	1
Ultrasound	6
UFE	7
Lytics	9
Cyroablations	6
Enterography	4
Stress tests	23
Angios	35





Safety/Nursing Care

Labs	37
Pre/Post care	29
Pregnancy	9
Assessment	29
Infection	6
Radiation Safety	2
Transport	5
DNR	13
Positioning	8
Handoff Communication	14
Checklists	3
Consents	11
Sterile technique	23
Timeouts	11
Site-marking	19
TJC	32



Katherine Duncan, BA, RN, CRN ARIN Secretary

ARIN Announces New Career Center

Is your organization looking to fill an open position? Are you seeking a new job opportunity? ARIN is proud to announce the Career Center for Radiologic & Imaging Nursing!

Employers: Please send all job announcements to <u>info@arinursing.org</u>, along with a brief description and a link to apply. They will be posted within one week and made available for ARIN members to view. There is no charge for posting a job announcement.

ARIN Members: Post your resume and view current openings. You can find the Career Center in the <u>ARIN Action Site</u> on ARIN's website.

Highlighted Job Announcements:

<u>1. Registered Nurse - Interventional Radiology (RN) - Virginia Hospital Center</u> <u>2. RN - University Medical Center of Princeton at Plainsboro, NJ</u> <u>3. Clinical Nurses, Radiology - VCU Health System - Virginia</u> <u>View More</u>

Hiring a New Radiology Nurse

How did you begin your career as a Radiology Nurse? Was it a position you fell into or did you specifically apply for the position? In our department, we currently have three full-time RNs who cover IR, US, and CT procedures, as well as whatever comes up that needs to be done. One nurse has been in the department for 22 years. The other two floated into the department in recent years to help out and never left.

We now face the challenge of expanding our ranks in the traditional job posting, résumé, and interview selection process. Faced with this daunting task, we reached out to our peers on the ARIN Listserv, a great resource and support system, for help with interview questions. Unexpectedly, this simple request generated a large amount of discussion on not only what to

discuss with candidates during an interview, but what qualifications make a good radiology nurse.

The interview suggestions accounted for just a few responses. The first such response suggested structuring a question around a common event to evaluate critical decision-making skills. This method tests the nurse interviewee's understanding of "the right steps" and also provides information on how the nurse thinks and tests whether they know when to call for help. The next response followed in the same vein: the candidate was presented with an EKG strip and asked for an interpretation and treatment. The focus should be on treating the patient, not the strip.

All comments on qualifications stressed the need for a strong critical care background and skill set, especially for procedural sedation. Most respondents agreed that ED experience was best. The combination of critical thinking skills, clinical skills, and an ability to think on one's feet are essential qualities in a radiology nurse. Other desirable qualities are the ability to work independently, especially on call, but also as part of a team.

When I mentioned at my facility that we were planning to hire a nurse for PRN vacation coverage, there was discussion about finding qualified staff for those positions. How do you maintain competency, especially for sedation? One suggestion was that the PRN nurse could do CT, MRI, IV starts, and documentation, but should not do sedation cases. One nurse shared that she could not get experienced nurses and sometimes had to hire new graduates; this evoked responses of concern. Another said that when she had an opportunity, she would hire two part-time nurses for a full-time position for more flexibility. Her hospital also developed a flex pool to assure competent staff for selected areas, including IR.

The respondents' experiences are valuable. However, ours is a very small group compared with other departments, so I went looking for other sources. The ARIN *Orientation Manual for Radiologic & Imaging Nursing* (2008) states, "Nurses in imaging should have at least 2 years of nursing experience in the acute care setting." It goes on to say that nurses should come from telemetry, critical care, or trauma backgrounds. This supports the experience of the respondents.

In 2008, ARIN, then known as the American Radiological Nurses Association (ARNA), along with the Radiologic Nursing Certification Board (RNCB), appointed a Role Delineation Task Force consisting of five experienced radiology nurses to delineate the practice of radiology nursing. The results of the survey they conducted are discussed in an article jointly prepared by the Center for Nursing Education and Testing, Inc. (CNET) and the Radiologic Nursing Certification Board, Inc. (RNCB) and were published in the *Journal of Radiology Nursing* in December 2010. The survey measured a number of items, among them a directive to rate the importance of 71 Knowledge/Skills/Abilities statements from irrelevant to essential for successful performance as a radiology nurse.

Below are the 10 statements with the highest rankings, or those most essential to our practice:

- 1. Patient safety
- 2. Emergency measures to treat life-threatening complications
- 3. Communication skills
- 4. Principles of sedation, anxiolysis, and pain management
- 5. Airway management/respiratory care
- 6. Prevention and control of infection
- 7. Physical assessment skills
- 8. Principles of radiation safety
- 9. Alterations in laboratory values

10. Venipuncture skills

In looking over the list, it is clear that nurses with critical care and/or emergency trauma backgrounds will come with a working knowledge of most of these areas and, as already identified, would be the best choices for filling positions as radiology nurses. Radiation safety, number 8 on the list, is the one area that stands out. Those of us who are responsible for orientation of new staff need to make sure we really focus on this area, as few nurses will come with in-depth knowledge. When I started my nursing career, I did not know much about radiation safety and was not taught much-it was just assumed that everyone knew this. As I reminded the technologists, radiation safety may be day 1/class 1 for them, but it is not for most nurses.

I appreciate the help and valuable information I received from those who responded to my questions. When I started in radiology, I looked for a listserv for radiology nurses, but found that there is not much literature available in this area. The community I found in the ARIN listserv provides the instant information and support I have had in past jobs. It also offers varied publications, which I enjoy and share with my co-workers.

Debra Bell, MS, RN, CRN, NE-BC Wheeling Hospital, Wheeling, WV

References

Center for Nursing Education and Testing, Inc. & Radiologic Nursing Certification Board, Inc. (2010). Practice Analysis of Radiology Nursing. *Journal of Radiology Nursing*, *29*(4), 109-128.

Green, K., Dwyer, J., Lash, E., Glickman, P., & McSorley, T. (2008). *Orientation Manual for Radiologic & Imaging Nursing*. Pensacola, FL: Association for Radiologic & Imaging Nursing.

ARIN Webinars

ARIN-Hosted Webinars

ARIN hosted webinars target topics for the radiologic and imaging professional. ARIN offers live and on-demand webinars that you will not find elsewhere.

Upcoming Live Webinars

July 31, 1PM EDT: Infection Control in the IR Environment: Preventing Central Line Infections

See recorded webinars available here for purchase and download .

Imaging Nurse Review Course - Coming Soon!

The ARIN Imaging Nurse Review Course is converted to a 9 hour, on-demand webinar. This course can 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.

Outside Webinar Resources

Free, on-demand webinars from outside providers.

UMCC Hosts ARIN Imaging Nurse Review Course

Registration Now Open

When: September 27-28, 2014 Where: University of Maryland Medical Center, Baltimore, MD Registration Fees: ARIN Members: \$250 UMMC Nursing Staff: \$200 ARIN Non-Members: \$300

To register for the course, please call Patricia McCoy at (410) 328-7324 or e-mail pmccoy@umm.edu More details and hotel information may be found at: http://www.arinursing.org/imaging-nurse-review-course-2/

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.

This educational program will provide a review of selected topics which can help prepare experienced imaging nurses for the Radiology Nurse Certification Exam. This course is intended for the imaging nurse who already has a strong knowledge base of radiology nursing. This course does not guarantee that participants will pass the certification exam. Individual participants are highly encouraged to take the time to study and gain mastery of the topics.

RNCB Announces Newly Certified 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 May 17, 2014 and met the requirements to obtain the Certified Radiology Nurse (CRN) credential.

Joan Berg, Waukesha, WI Leslie Bergstrom, Mesquite, TX Kelly Bybee, Middleton, WI Cynthia Cacciola, Mantua, NJ Jennifer Carpenter, Germantown, MD Benito Corpuz, Riverside, IL Tina Crawley, Lynwood, IL Tracey Crescenzo, Naperville, IL John Cunningham, Oakland, CA Catherine Damon, Milford, CT Vima Deleon, Sugar Land, TX Susana Delos Santos, Richmond, TX Denise Dessino, Middlesex, NJ

Beth Dowty, Belton, MO Katherine Duncan, Chapel Hill, NC Jeanne Faubion, Bonita Springs, FL Ashley Ferguson, Clinton, IL Kandice Garcia, San Francisco, CA Diane Gardinal, St. Petersburg, FL Karen George, O'Brien, FL Cameron Gittens, Medford, NY Holly Goulette, Berlin, CT Maria Greer, Chicago, IL Sheila Gregory, East Palo Alto, CA Beth Hogan, Hudson Falls, NY Ashley Jacks, Springfield, MO Priscilla Kilpatrick, Laguna Niguel, CA Janelle King, Gilbert, AZ Linda Krenkel, Philadelphia, PA Serge Kulakoff, Chicago, IL Nancy Lang, Glen Allen, VA Carol Marlow, Wharton, TX Neli Martinez, San Antonio, TX Mindy O'Brien, St. Joseph, MI JoAnn Panus, Mt. Laurel, NJ Kathy Paul, Plant City, FL Kathleen Radecki, Milford, CT Julia Royce, Middlebury, IN Julia Sherman, Highland Park, IL April Slater, Benton Harbour, MI Jan Sprague, Caldwell, ID Patricia Van Marche, Gilbert, AZ Kimberly Versaw, St. Joseph, MI Mary Wells, Durham, NC Richard Williams, Chesterfield, VA Kelly Wolff, Chicago, IL

A total of 56 nurses took the May 17, 2014 Certified Radiology Nurses (CRN®) Exam, with a total of 46 passing. This is a pass rate of about 82.1%.

In addition, RNCB would like to inform you of the following pass rates for individuals identified in Vision Volume 19.3. Six nurses sat for the Certified Radiology Nurse (CRN®) Exam on March 26, 2014. The pass rate for the exam was 83.3%.

ARIN Welcomes New Members

ARIN welcomes new members who joined May 18 - July 24, 2014. Below are their names, credentials (if provided), and locations:

Kelly Alderfer, Pennsburg, PA Elisha Antonio, RN, Jeddah, Saudi Arabia Dwayne Babb, RN, New Haven, CT Faith Barnett, RN, Eagle River, AK

Jean Bassett, BSN, RN, CCRN, Hickory, NC Margo Bode, Ballwin, MO Christina Brescia, RN, Levittown, PA Amy Caster-Winegeart, RN, Scotts Mills, OR Kharla Cavina, RN, Redondo Beach, CA Tiffany Chatmon, Cleveland, OH Heather Coleman, RN, Grimsby, Ontario, Canada Keisha Conwright, BSN, RN, Winnetka, CA Lynne Cook, RN, Myrtle Beach, SC Jeanna Creech, RN, Snow Lamp, NC Carol Cvijanovic, BSN, RN, Willoughby, OH Doris Dantes, RN, Larkspur, CA Jacalyn Dashnaw, RN, Gansevoort, NY Marguerite Davoren, Boston, MA Laura Dickman, Erlanger, KY Jennifer Dougherty, CRNP, Philadelphia, PA Sandra Douglas, Chattanooga, TN Carmel Doyle, RN, Pearland, TX Josephine Dyer, RN, RVT, Warren, OH Vanessa Elsasser, Chevy Chase, MD Marietta Escalona, RN, CEN, CRN, Daly City, CA Julie Evans, Richland, WA Darlene Fink, RN, Carlsbad, CA Brandy Flanagan, RN, Arlington, VA Adrian Fredman, Winchester, VA Jennifer Ganz, RN, Rochester, NY Lisa Gebhart, St. Louis, MO Jacqueline Glenn-Mcintire, Reno, NV Christine Goss, RN, CWCA, Hickory, NC Cynthia Gould, BSN, RN, CRN, Langhorne, PA Yanwei Guo, Valley Stream, NE Patricia Gwaltney, Bolingbrook, IL Rita Herges, Denver, CO Heather Hogue, RN, Ruther Glen, VA Jan Horner, Proctor, VT Ya-Ni Hsueh, RN, Cleveland, OH Bonnie Hyatt, Austin, TX Jeffrey Jacobsen, Shorewood, IL Andrea Jensen, RN, Littlerock, WA Alyse Johnson, RN, Richmond, VA Natalie Johnson, BSN, RN, CCRN, Hickory, NC Mary Kamai, BSN, RN, Arlington, TX Anne Kugler, RN, Naples, NY Nadia Lawseth, RN, Yuma, AZ Carol Lee, RN, Mililani, HI Teresa Lindamood, Pearland, TX Janet Lundberg, Honolulu, HI Holly Ma, Fishers, IN Nancy Malta, RN, Shelby Twp, MI Theodora Maxwell, RN, Harrisburg, PA Stacey Mazzone, RN, Weymouth, MA Roseanne McDonough, Westbury, NY Ljupka Mihajloska, RN, Skopje, Macedonia Angela Miller, RN, Newburgh, IN

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