SPRING IS A TIME OF BEGINNINGS:
THE NEW ARIN

Whatever you do, or dream you can, begin it. Boldness has genius and power and magic in it.

– Johann Wolfgang von Goethe

The last two years have been a whirlwind of change for ARIN. As I transitioned my presidency in Atlanta, I shared with ARIN members at the conference the changes over the past year. The ARIN board has been very resolute about providing ARIN members with Value Added Services (VAS). ARIN possesses many “Benefits to Joining” and is the best professional membership available for the price. For those who could not be present, I would like to share highlights of the “New ARIN.”

Continuing Education (CE)

Starting in January of this year, webinars and Journal of Radiology Nursing articles with CE are free for members. This includes previously held webinars in the education archive that you can receive credit for viewing. The webinar committee has several new offerings in progress for the 2nd quarter in 2015.

Nursing Services Organization (NSO)

ARIN has entered a partnership with NSO. This partnership will provide members with timely cutting edge articles and webinars (with free CE) on the legal and risk management aspects of their practice. Starting in 2016, these webinars will result in saving on your bill if you chose to use their services.

Chamberlain College and Walden University

Realizing the value of education for our members, the Board was pleased to sign agreements these two academic centers. Members of ARIN will receive a tuition discount if they attend either one of these institutions.

Covidien

Education is a cornerstone of ARIN membership. Our partnership with Covidien is another avenue to receive education elements of patient care that you encounter each day as a busy clinician.

Medikidz

Radiology nurses care for patients over a wide spectrum of ages and disease states. ARIN is a proud partner with Medikidz, which supplies medical comic books to help open conversations and educate children on disease conditions. These resources are free to members for their individual practices.

New Vision format

The New ARIN has a new “Vision”. The new format will allow for ease of printing so you can share with colleagues that may benefit from timely articles.
Free online review resources
Are you thinking of taking the CRN exam? Are you new to radiology or feeling rusty in an area? We have included free review modules for your educational use given by ARIN members. These are excellent for review and discussion in your study group.

Educational software
When taking the review course, webinar or getting credits for the spring convention, did you notice the ease of obtaining it? ARIN has worked on the infrastructure to streamline obtaining credits. When you get your credits they are kept in your individual member account for future access when renewing your certification or nursing license.

Streamlined website
Does the website load faster on your computer? We enhanced the website for faster loading and streamlined elements for intuitive navigation. Our new management company Boulter Management Company (BMC) has been instrumental in helping us navigate our technological needs.

New orientation manual
In Atlanta, the updated and expanded Orientation manual was unveiled. Containing new chapters and updated guidelines, this is a must have for your resource library. It is currently available in print form but as with the Core Curriculum released last year, it will be in electronic format by summer and available to go anywhere you are.

Enhanced International Presence
ARIN has expanded its international presence. In February, we hosted our first virtual international Radiology Nurse Review course with our new members from In Saudi Arabia.

It is a good time to be an ARIN member. I am very excited about what is yet to come in 2016 for our organization. To borrow from a ZZ Top lyric, “The future is so bright, I got to wear shades.” I have my shades on. Do you? For more information on joining or renewing an ARIN membership, visit the ARIN website.

Dr. Gregory Laukhuf ND, RN, CRN, RN-BC, NE-BC
2015-2016 ARIN Past President

THE NEW ARIN: VISIBLE, VIRTUAL AND VITAL
THE FUTURE IS NOW.
Mary Sousa, BSN, RN
President, ARIN 2015-2016

Dearest Colleagues, Distinguished Board Members, friends, I would like to begin by extending a very warm welcome to all of you. Thank you for joining me here at this year’s ARIN Annual Spring Convention. Some of you have traveled quite a distance to be here—Fiona I know you’ve come from New Zealand, half-way around the world just to be here—so thank you to all of you for your commitment to our collective cause and welcome.

I am excited to stand here before you and introduce myself as this year’s President and I am honored to serve you in 2015. As we remain dedicated to ARIN’s core purpose—fostering the growth of nurses who advance the standard of care in the imaging environment, both here in the U.S. and abroad, I look forward to the opportunity to forge new relationships, promoting continued collaboration within our healthcare communities.

But before we pass the proverbial torch, I want to recognize the superb work of Dr. Greg Laukhuf, who has worked tirelessly as President over the past year, strengthening ARIN’s foundation, bringing order and purpose through his determined leadership. I’ve got big shoes to fill! So thank you, Greg, for your continued advice and guidance as I transition into my new role.

Over the past few years, we at ARIN, have created the conditions essential for a bright future. Beth Hackett began building the bridge to the future emphasizing communication and collaboration. Last year, Greg urged us to cross that bridge—“to go forth and lead”. Now I stand before you in 2015, confident that we are the architects of the future, and THE FUTURE IS NOW.

Healthcare is an ever evolving industry and for the past decade our specialty has been a key ingredient in improving patient care and patient outcomes. As medicine trends towards noninvasive procedures, the role of the radiology nurse has evolved from ancillary to essential. Thus, as an organization of radiology nurses, ARIN has mirrored this progress, asserting itself as a vital, visible member of the healthcare community.
Over the next year, it is my goal to extend ARIN’s reach across the globe, engaging new members and partnering with new organizations and vendors. Modern technology affords us the tools necessary to knock down the barriers of space and time—we have embraced these advances and improved our capabilities by establishing a virtual platform.

We recognize the importance of full participation from our International members and are actively working to bring that to fruition. This year, the Board of Directors proposed a change to the bylaws, allowing International members in good standing to run for office. Using our new VIRTUAL capabilities we will continue to extend our presence across the world, engaging International participation.

Our virtual platform has opened the door to so many exciting, new endeavors. On February 3rd and 4th, after months of planning and development, we broadcasted our first international virtual classroom to Saudi Arabia. This was a huge step for ARIN. This virtual education program will be repeated again on May 1st & 2nd. A total of 35 radiology nurses from Saudi Arabia will have attended the education session, and we now welcome these 35 Saudi nurses to our ARIN family. Today Saudi, tomorrow Brazil, the Philippines, China, Great Britain—our reach is limitless.

Our virtual capabilities will also afford greater participation at our weekly Chapter meetings, which are open to all ARIN members. I encourage you to attend. My intent is to engage with membership by expanding participation and involvement at the local level, while providing support to your local Chapters, and offering resources to “grow leaders at a grassroots” level. We will be offering Webinars on Leadership, How to run a Chapter Meeting, Roberts Rules and other topics important to local chapter growth.

To continue the growth and recognition of ARIN and Radiology Nursing AS A SPECIALTY, we see the importance of a strong marketing campaign. My goal is to highlight the VITAL role Radiology Nurses play in patient-care and increase the VISIBILITY of ARIN, asserting our organization as the expert body of knowledge. Flyers, electronic e-mail blasts, face to face meetings and word of mouth will be the fuel driving our campaign. We will target important organizations such as SIR, ACR, ASPAN, and Colleges of Nursing. We will forge new relationships with groups like the American Organization of Nurse Executives (AONE) and other international nursing groups such as the Royal College of Nursing. We will engage private radiology practices and VA systems, including the National Student Nurses Association. But we will not stop there. Our message will extend beyond our immediate medical community. We will engage our liaisons and our industry vendors and take our message to Capitol Hill. ARIN will be VISIBLE and Radiology Nursing will be undoubtedly recognized as a SPECIALTY.

In two weeks I will be attending the Nurse in Washington Internship along with Public Policy Committee member Joanne Gaff. Together we will attend a 2 day training program on Advocacy. On the last day Joanne and I will visit the offices of our Congressman on Capitol Hill, bringing nursing specific issues to their attention, using these channels to shed light on our collective interests as radiology nurses.

So in representing each and every one of you, I ask myself: What is ARIN’s story? What are the concerns for the radiology nurses of today? What is important to you, the member? Is it funding for specialty specific research? Or is it streamlining standards for establishing safe working environments for radiology nurses? We want to hear your voice, we urge you to bring your concerns to your local chapter leaders. It is my goal, in the coming months, to sift through and carve out a clear initiative. Our goal will be progress—tackling issue by issue. ARIN will be VISIBLE.

You’ve heard my pledge as 2015 President, but now I challenge you—as a member—as a radiology nurse: what can you contribute to the progress of our specialty? We all know what nurses are capable of achieving—we do it every day—let’s put our talents together, our desire and our passion. If we work together imagine what we can accomplish together.

I see your commitment—joined here at our National Convention—but I empower you to go one step further. Go back and ask a fellow nurse to join ARIN. Join an ARIN committee or Task Force. Attend a Chapter Meeting. Use your voice to help to shape ARIN. Be VISIBLE to our industry vendors. Tell them what you need. Ask to be included in presentations of new equipment and new procedures.

ARIN is Visible – You are Visible
ARIN is Vital – You are Vital
ARIN is Virtual. Through our platform, you are present.

I urge you: Do Not be Silent. Do Not Accept Complacency. ENGAGE. As Brenda Boone reminds us “Find your Voice”.

It’s never been a better time to be a Radiology Nurse and It’s never been a better time to be a ARIN member!
ARIN PAST PRESIDENTS SUPPORTING THE FUTURE


This group attends Convention yearly and lends our voice in a variety of ways. Consider our accomplishments since leaving office.

Joanna Po, an original ARNA Voice, is now retired from active nursing. In speaking with Joanna, one quickly learns that she has NOT retired her support of ARIN members nor from life. Active in her community, practicing Yoga, spending quality time with family and friends, traveling, and attending our yearly ARIN Convention remain on Joanna’s calendar. I have had the pleasure of listening to Joanna as she revitalizes the entire room of nurses, reinforcing what we can accomplish. Everything is possible with preparation and planning. Joanna was honored by ARIN in 2014 with the premier of the Joanna Po Lecture Series, intended to honor a nurse who continues to bring knowledge, guidance, passion, and love to our members and our profession.

Kathleen Gross continues as Journal of Radiology Editor-in-Chief, a position she has held since 2005. Kathleen’s passion is writing. She connects with medical and nurse writers from around the world and solicits manuscripts for publication. In her report to the ARIN BOD this year, Kathleen showed the wealth of her work by displaying the first issue of JRN published under her guidance… September 2005. It contained 16 pages with three (3) articles and one (1) Book Review. Compare this to the March 2015 Edition just released, which contains forty-eight (48) pages, eight (8) articles, and 3.5 continuing education contact hours. Many of you may not realize that Kathleen is a wiz at time management. She responded to ARIN’s need for an Editor to develop our new and updated Core Curriculum for Radiologic Nurses. This dynamic publication was released in May 2014 with expanded information and nine (9) new chapters.

Kathy Scheffer was unable to attend this year’s convention in Atlanta. But her activities deserve inclusion in this article. Many of you may have attended an Imaging Nurse Review Course taught by Kathy but did you know that she was part of the original group of ARIN members who developed this Course which was first presented in New Orleans in 2005? She continues updating and presenting the INRC and is part of the team who presented ARIN’s first international Imaging Nurse Review Course to our colleagues at King Abdulaziz Medical Center, National Guard Hospital in Saudi Arabia. The course is undergoing its third official update with added information necessary for every imaging nurse as we provide quality patient care on a daily basis.

Sharon Lehmann serves as the ARIN Vision Editor, a title she has held since 2010 when her term as Immediate Past President came to a close. Sharon has an extensive CV which details her writing and nursing publications on a variety of topics. For those of you who read Vision, you certainly have noticed changes over the past few years in the area of content and format, moving from a printed version to an on-line publication. Vision is now produced six (6) times per year in the odd-numbered months. This change allows Sharon to focus on a variety of topics throughout the year. For example, ARIN Convention is reviewed in the March issue with a review of Convention, Financial Data, Awards and Scholarships, and the detail describing The New ARIN! Sharon has also led the Poster Award Review Process since 2008 when the first award when given out.

Karen Green completed her role as Immediate Past President in March 2011. During this time, the ARIN BOD discussed the role and background of an Executive Director. The Board worked with our Management Company to redefine the ED Position Description to include a background in Radiologic and Imaging Nursing. The position was offered to, and accepted by, Karen who served as ED from January 2012 through March, 2015. Karen worked with the ARIN Board of Directors to re-define the Strategic Plan, enhance communications, establish the board agenda, transition to a new AMC, and work with our AMC to develop the ARIN Strategic Partnerships. She leaves this role promising to remain active in ARIN in another capacity.

Linda McDonald agreed to spearhead the Contact Hour process for the Journal of Radiology Nursing. Adding CE activity to JRN has been a focus of ARIN for many years. Many of you may remember ARIN’s quest to add CE to our Journal. Effective in the March 2015 issue, this goal was
REPORT TO ARIN MEMBERSHIP
MARCH 2015

The Radiologic & Nursing Certification Board (RNCB) accomplished a landmark milestone in 2013 when the Certified Radiology Nurse credential was nationally accredited by the Accreditation Board for Specialty Nursing Certification (ABSNc). This was a major accomplishment and now all nurses with the CRN® designation can be nationally recognized. All nurses who had CRN® certification prior to this timeframe are grandfathered in to the national recognition.

The RNCB would like to thank all ARIN members who volunteered to participate in the Item Writing. We will be issuing a call for Certified Radiology Nurses again to participate in the 2015 Item Writing/Test Development session.

The RNCB® Role Delineation Study to measure the current areas of practice for nurses working in the radiologic and imaging nursing arena was conducted in early 2014. The study has been analyzed and the results are being presented to the RNCB® Board of Directors in February. The RNCB® will share the outcome with ARIN members in the near future. We would like to thank everyone who participated in the study. The information will be used to ensure the CRN® Exam continues to cover all the arenas that radiologic and imaging nurses are working in.

The RNCB established a website, www.certifiedradiologynurses.org in 2013. The guidelines handbook, application, and Exam dates can all be found here as well as information on certification.

There are currently 1081 individuals with the CRN® designation. We are confident that the number will continue to increase and we invite you to consider sitting for the exam if you are not already certified.

Linda will be working with Kathleen Gross and specific authors to obtain Contact Hours for each subsequent Journal issue.

Christy Lee continues her involvement with ARIN Convention by serving as the Nurse Planner and completing and submitting the contact hour application to the Georgia Nurses Association (GNA) for approval. This is a tedious process. Christy took on an expanded role by agreeing to complete the GNA application process for ARIN Webinars. Just a quick FYI: all webinars are now FREE to members, another member value under The New ARIN!

Beth Hackett completed her Board term as Immediate Past President as of this Convention. During this year, Beth has been collecting data for a new project. Beth confirmed her intentions with President Mary Sousa. And knowing Beth as I do, this project will be completed in the very near future and added to ARIN’s depth of information. We look forward to seeing the project’s outcome.

Greg Laukhuf began his term as Immediate Past President on March 4, 2015. Yes, Greg will serve 12 months in this role; however, I have no doubt that he has set the bar high for his last year. My hope is that Greg will remain actively involved in ARIN in a capacity to be determined.

As you can see, ARIN Past Presidents play a critical role in ARIN’s future. Each President works to benefit ARIN members during their presidential term. But, for some, it does not stop there. Much has been accomplished! More work is ahead as ARIN moves into 2015 and beyond. Working with Boulter Management Company (BMC) allows the ARIN President and Board of Directors to continue focusing at the 30,000 foot level of Strategic Planning, so vital for ARIN to move this organization to the next level and provide additional VALUE to our members.

Karen Green
ARIN Executive Director
ARIN Past President 2009 - 2010

JOURNAL OF RADIOLOGY NURSING
CALL FOR MANUSCRIPTS
WOMEN’S HEALTH: IMAGING AND INTERVENTIONS

JRN is the official peer-reviewed journal of the Association for Radiologic and Imaging Nursing (ARIN) and is published quarterly by Elsevier. (See http://www.ees.elsevier.com/jrn). The audience of the journal is primarily radiology nurses but radiologic technologists and radiologists also see the journal. JRN has a growing international circulation. JRN is included in Mosby’s Nursing Consult and CINAHL (Cumulative Index to Nursing and Allied Health Literature). JRN holds a membership in the Committee on Publication Ethics (COPE) and follows COPE’s guidelines for ethical publishing. The articles in JRN cover a wide variety of topics related to imaging and imaging interventions. Original research, review articles, case studies, essays, letters to the editor, book reviews and humanities features are published. Published articles are eligible for the Linda Strangio Editor’s Award which is presented at the annual ARIN business meeting.

The deadline to submit a manuscript for the June 2016 issue is November 30, 2015. Prospective author query letters should be sent to the editor, Kathleen A. Gross, MSN, BS, RN-BC, CRN at rgross@comcast.net. Manuscript word counts should be 1500-2000 words (case studies and short communications) to 8000 words for review articles. Example topics include:

- Breast imaging case studies, e.g. after breast implants, other Hysterosalpingogram
- Uterine artery embolization for post-partum hemorrhage
- Fallopian tube cannulization for infertility
- Obstructing ureteral stone in pregnancy & nephrostomy tube placement
- Pregnancy screening and consents
- Vertebroplasty for vertebral compression fracture
- DEXA scan for osteoporesis
- Lung cancer in women
- The female bariatric patient and porta-cath placement
- Lymphedema case study
- The pregnant radiation worker
- US imaging in pregnancy-interesting case studies (e.g. multiple births)
- Fetal imaging in MRI

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Respectfully submitted,
Mary Myrthil, MS, RN, CRN®, NE-BC
RNCB President
**BARE NEWS FOR RADIOLOGY: WHAT YOU REALLY NEED TO KNOW!**

**Geography linked to bloodstream infection**

Your geographical location impacts the type of bacteria causing your bloodstream infections, according to Rhode Island Hospital researchers. The closer you are to the equator, the higher the probability your infection is caused by Gram-negative bacteria, which thrive in warm and moist areas.

“This study reflects the fascinating interaction of the environment, human health, and economic factors that together help shape the sorts of diseases that become manifest in different parts of the world,” said Leonard Mermel, DO, medical director of the department of epidemiology and infection control at Rhode Island Hospital. “Such information may aid physicians who need to administer antibiotics to patients with possible bloodstream infections in different areas of the world.”

The study was published in the journal PLOS One.

**Skipping Medication to Save Money**

It should not surprise nurses that patients skipped doses, took less medicine, and delayed filling prescriptions, according to a study by the U.S. Department of Health and Human Services. Adults 18 to 64 were twice as likely to exhibit this behavior as compared to those over 65, stated Robin Cohen, PhD, and Maria Villarroel, PhD, of the Centers for Disease Control and Prevention’s National Center for Health Statistics. Another strategy cited in the data brief was medication sharing in retirement communities. When someone has a short-term problem, like an infection or needing pain relief, neighbors will tell them, Here, I haven’t used all my medicines for this. You can try this. The reason for these actions mentioned in the study was to save money.

**Common over-the-counter meds linked to dementia in new study**

Common over-the-counter drugs such as Benadryl may be linked to dementia, according to JAMA Internal Medicine. “The link has been studied before,” said Dr. James Leverenz, a neurologist at the Cleveland Center for Brain Health at the Cleveland Clinic, “but this is an especially good study.” The study pointed to an association and not a causal link between dementia and the drugs.

**Hospira Recalls Injectable Saline**

Hospira announced the recall of one lot of sodium chloride injection after receiving reports of particulate matter in the product. According to the company, 250-ML containers of 0.9% Sodium Chloride Injection, USP, lot 44-002-JT, were recalled after a confirmed report of a human hair in the solution.

Product returns for this recall is managed by Stericycle. Customers should call the company at 877-877-0164, Monday through Friday from 8:00 a.m. to 5:00 p.m. Eastern Time, or visit their website for return labels.

**Study Explores Chlorhexidine Bathing in ICUs**

Researchers at Vanderbilt University Medical Center have found CHG bathing of critically ill patients did not decrease the incidence of healthcare-associated infections as compared to non-antimicrobial cloths, according to an online JAMA study.

“Infections overall are the No. 1 complication in hospitals, supersed- ing everything else. Bathing patients with 2 percent chlorhexidine, a broad-spectrum topical antimicrobial agent, is incorporated into some expert guidelines, but previous studies suggesting it was better at pre- venting infections were not well supported, says Arthur Wheeler, MD, professor of medicine.

During the study, nurses bathed 9,340 patients in Vanderbilt’s five adult intensive care units for a 10-week period followed by a two-week period during which patients were bathed with non-antimicrobial disposable cloths. There was no significant difference between groups in the rate of health care-associated infections, even after adjusting for various factors according to the researchers.

**FDA takes steps to improve reliability of automated external defibrillators**

The U.S. Food and Drug Administration announced that it will strengthen its review of automated external defibrillators (AEDs) to improve the quality and reliability of these devices. The agency’s review will focus on critical requirements needed to ensure the safety and reliability of AEDs. From January 2005 through September 2014, the FDA received approximately 72,000 medical device reports associated with AED failures.

“Automated external defibrillators save lives,” said William Maisel, M.D., M.P.H, deputy director for science, in the FDA’s Center for Devices and Radiological Health. “These changes will go a long way towards correcting long-standing problems and ultimately improving the reliability of these devices.”

**First Proton Therapy System to receive a Canadian Medical Device License**

The Canadian government has approved Canadian cancer patients to benefit from treatment with proton therapy. The MEVION S250 proton therapy system has received a medical device license from Health Canada, the federal department responsible for public health. This is the same system slated to be installed at cancer facilities at the University of Oklahoma; Robert Wood Johnson University Hospital in New Brunswick, N.J.; Ackerman Cancer Center in Jacksonville, Fla.; University Hospitals Seidman Cancer Center in Cleveland; MedStar Georgetown University Hospital in Washington, D.C.; and the University of Florida Health Cancer Center at Orlando Health.

**ANA Seek to Reduce Long Hours and Fatigue Among Nurses**

(Unger, L.)

The American Nurse Association (ANA) has issued recommendations on reducing nurse fatigue. The ANA recommends limiting shifts to 12 hours or fewer, work weeks to 40 hours or fewer, eliminating mandatory overtime, minimalizing consecutive night shifts for nurses working both days and nights; and providing sleep rooms or transportation when nurses are too tired to drive. The ANA also recommends giving nurses the option of rejecting work assignments to prevent fatigue. “If a nurse is fatigued, it is possible that a mistake could be made or someone could forget to pass along an important fact, or the person could be more on edge,” says ANA President Pam Cipriano. The new recommen-dation were based on studies including a 2014 American Journal of Critical Care study which found nurses who were fatigued, lost sleep, or could not recover between shifts were more likely to regret a medi-cal decision they had made. Fatigue is also linked to health problems, such as diabetes, cardiovascular disease, and injuries.

Greg Laukhuf ND, RN, CRN, RN-BC, NE-BC
It is an exciting time in the evolution of the “New ARIN”. ARIN is going through many changes and has a renewed “Vision” for Imaging Nurses. The Board of Directors is committed to focusing on increasing membership and the “Value of membership” highlighting what membership can do for the Imaging nurse. To reach the goal of enhancing member benefits, a decision was made to make educational opportunities available. There will be increased educational opportunities accompanied with CEU’s through Webinars and directed readings in the Journal of Radiology Nursing. The March 2015 issue of JRN is the first to have an educational article with CEU credits. As unveiled in January of this year, these CE are a free member benefit.

As reported in the Business meeting in Atlanta, ARIN has new management company; Boulter Management Company (BMC). Directed by Spencer Boulter CEO, BMC has provided expertise and opportunities to utilize technological advances for ARIN. For most of 2014, ARIN’s finances were in the black with a slight dip at the end of the year into the deficit. This was due in part as the Board of Directors began plans to invest & improve ARIN’s infrastructure. Monies were spent on the investment and development of a membership educational resource database which will allow for the ability to create a member profile on line through ARIN’s website. The member profile will record & track educational CEU’s up to 5 years. An additional expense in 2014 was the production & printing of the 3rd edition Core Curriculum, which is the foundation and “go to resource” for Imaging nurses. The ARIN Board has worked on increasing the number of Imaging Nurse Review Courses and an ARIN first, the ability to provide a virtual Imaging Nurse Review Course to fellow Imaging nurses in Saudi Arabia.

The Board of Directors continues to evaluate, streamline & reduce expenses. Working with BMC the focus is to maintain fiscal responsibility and accountability. BMC employs a virtual office structure, which allows for reduced overhead costs, which is a cost savings. Another focus is to reduce operating expenses by utilizing an online publishing company for “ordering on demand” ARIN’s educational resources; Core Curriculum, Scopes and Standards, Orientation Manual and merchandise ship with a one day turn around. This model reduces storage and shipping costs allowing ARIN to pass the value onto the membership.

ARIN’s financial health remains positive and the Board will be working with a Financial Planner on a conservative investment portfolio for ARIN’s reserve funds in the goal of increasing financial gains.

ARIN will continue to provide value for its members, fostering knowledge and resources for nurses in the Imaging specialty. If you have any questions on the finances, please contact Chris Keough Treasurer at Chris.Keough @arinursing.org.

Chris Keough BSN, RN, CRN
Treasurer 2014-2016, ARIN Board of Directors

ARIN ANNOUNCES UPCOMING IMAGING NURSE REVIEW COURSES:

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.

PURPOSE AND GOALS for the Course:

This educational program will provide a review of selected topics which can help prepare experienced Imaging nurses for the Certified Radiology Nurse examination. 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.

Upcoming locations are:

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<th>Location</th>
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<tr>
<td>Longmont United Hospital</td>
<td>1950 W. Mountain View Ave. Longmont, Co. 80501</td>
<td>April 3 &amp; 4, 2015</td>
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<tr>
<td>Southwest Healthcare</td>
<td>25500 Medical Center Dr. Murrieta, CA 92562</td>
<td>June 20-21, 2015</td>
</tr>
<tr>
<td>Northwest Chapter ARIN</td>
<td>315 Martin Luther King Jr. Way Tacoma, WA 98405</td>
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SPRING 2015
TREASURER’S REPORT
Thirty four years ago, the first ARIN convention took place in Chicago, Illinois. Anecdotes from members that attended indicate that the first meeting was attended by thirty six radiology nurses. This was the beginnings of the organization that would grow to become ARIN. Since then, ARIN has progressed to be the acknowledged global authority on radiology nursing. We continue to fulfill our mission and validate that we are the voice of radiology nursing through our published Standards of Practice, Radiology Nursing Core Curriculum, Orientation manual, webinars, and other educational materials. We continue to “Go Forth and LEAD”.

Recently I read a 2013 article in The American Nurse Today by Kathleen Pagena PHD RN entitled “Ride to the Top with a Good Elevator Speech”. Pagena wrote “make sure to have a speech prepared for that chance to capture someone's attention”. She further explains that “nurses are able to summarize unique experiences that excite others”. From my travels over the last year on ARIN business, this is sound advice. Radiology nursing is a dynamic practice that daily impacts patients. In today's healthcare climate of reform and uncertainty, nursing shortages and staffing cutbacks, we all need a Pagena elevator speech prepared to use when the occasion arises. ARIN Board, committee members and its membership are committed to making a difference and sharing the uniqueness of our nursing specialty worldwide. We know how much our unique skills are appreciated by our patients, therefore let's continue to inform the health care community just how valuable our specialty is and what we represent. Our message is succinct. “Go Forth and LEAD.” We need to continue to mentor and influence nurses and healthcare workers throughout the world while we have the opportunity.

I received Strengths Based Leadership, a New York Times best seller written by Tom Rath and Barry Conchie, at a Nurses Association Leadership Academy program. The book states that we should know our individual internal strengths. In addition, our strengths are what we should invest time in to build a strong team. According to the authors, strong teams have the following elements in common:

- Strong teams focus on results.
- Strong teams prioritize what’s best for organizations and how to move forward.
- Strong teams are committed to growth.
- Strong teams embrace diversity.

Karen Daley, a Past ANA president stated that she believed that nurses must be empowered to participate as leaders in care delivery and redesign to assure changes will be meaningful for patients (Daley, 2013). This correlates with the message of Rath and Conchie. ARIN continues to maintain its preeminent position within the radiology community, the health care community and the health care environment through the synergy of its membership. Together we compose a whole team and impact patient care. We focus on the strengths of our organization to provide the needed resources so that the patients we care for everyday receive the best treatment based on evidenced based practice in the radiological setting.

At the start of my term, I challenged those present to “Go Forth and LEAD”. Presidential messages over the past year have accomplished this task with columns on Leadership, Education, Accountability, and Development for ARIN members. As president, I observed the strengths and empowerment in our organization both of which are directly related to our members, our dedicated past and present leaders. I believe that radiology nurses go above and beyond in our focus on patient advocacy each day. We must continue to push forward, learning and growing so we can continue to be a positive difference in the lives that we touch along the way. In the process, we must be prepared to deliver that elevator speech when given an opportunity, as we never know who may be listening. The future is now, so let's all LEAD (Leadership, Education, Accountability, and Development). We are a team; we are ARIN.

References


Greg Laukhuf RN, ND, CRN, RN-BC, NE-BC
2014-2015 ARIN President
In 1996 a unanimous decision was made by a handful of dedicated nurses to submit a petition to ARIN to form the Long Island Chapter of ARNA. In 1997 the chapter was officially approved as THE LONG ISLAND CHAPTER OF ARNA and welcomed as the 24th official chapter. The first President was Arlene Rossitto RN BSN from Good Samaritan Hospital in West Islip, New York. Today although the name of the Organization has changed to ARIN, the level of our commitment to those original goals and vision of our founding President and Chapter has not. As current President of the Chapter, it is an honor and a privilege to serve our members and promote the vision and goals of ARIN. Local Chapters do not thrive without commitment and that commitment is strong. The current Long Island ARIN Chapter Officers and Board Members are: President – Jamie E. Simon RN BA BSN OCN CRN, Vice-President- Lory M. Tortelli RN BSN, Secretary – Pat Fochesto RN BSN, Treasurer – Alicia Galgano RN and Board Members: Daniel Buckner RN-BC BA BSN MHA, Nancy Gong RN BSN OCN and Denise Saunders RN.

When I first took on the role of President of this Chapter I gave a presentation to our members entitled “What’s In It For Me? The Benefits of Joining the Long Island Chapter”. I emphasized that local dues are an investment. Our Chapter is the local connection to the now global ARIN community, and once you join we are all in it to share the wealth. As we all know the benefits of joining any Chapter include ways to enhance education, broaden your network, career opportunities and offer leadership positions that contribute to professional development.

The Long Island Chapter also offers an opportunity for our members to be recognized among our peers. Hard work deserves recognition and in 2014 we were proud to have instituted our first Annual Radiology Nurse of the Year Award. This award celebrates exceptional individuals who have advanced the profession of Radiology Nursing and offers distinction, credibility and prestige. The recipients of that award were Lory M. Tortelli RN BSN and Denise Saunders RN. Lory has also been named as a 2015 Regional Finalist for the GEM (Giving Excellence Meaning) Award from Nurse.com – the largest recognition program in the country for nurses.

Our Chapter helps fund education through contests. We have instituted a yearly essay contest on What Certification Means To You. The winner receives a check for $300.00 which can be used for the CRN exam, recertification or towards the purchase of the Core Curriculum. In addition our local Chapter adds value to the National ARIN membership. Our Chapter provides an opportunity to network locally with our peers and through Chapter meetings and events and provides an opportunity to talk about workplace challenges and gain knowledge specific to local interests.

Through our newly created Facebook Page we are able to connect and cater to issues happening locally as well as nationally and internationally.

Our Chapter today has over 40 members. Our hope is to continue to support our members and give them the tools necessary to make their mark on the profession of Radiology Nursing. It is my personal goal as President to convey the message that Chapter involvement is a source of pride, accomplishment and honor. It is my continued goal to make an impact on our valued members so we can all make a significant impact on the Profession of Radiology Nursing. I know I have all of ARIN’s support.

Regards,
Jamie E. Simon RN BA BSN OCN CRN
President – Long Island Chapter ARIN
JASimo27@aol.com
FIRST PLACE WINNER OF THE POSTER PRESENTATION AT ARIN SPRING CONFERENCE 2015
KRISTINA HOERL MSN, RN, CRN

1st - Improving the Response to Urgent/Emergent Events in Radiology
Kristina Hoerl MSN, RN, CRN

2nd - Your Language/My Language Collaborating with Patients to Develop Our Language!
Margaret Wirenmiller RN, CCRN

3rd - Implementing a Pre-Procedure Phone Call Initiative
Alexandra Penzias, M.Ed, MS, ACNS- BC, RN, CEN
Alan Gold , RN; Joseph Hastings, RN
Elizabeth Jankowski, BSN, RN
JoAnne Martino, RN
Colleen Sainato, BSN, RN

ARIN ANNOUNCES THE 2015 WINNERS OF AWARDS AND SCHOLARSHIPS

The ARIN Board of Directors and Leadership Development Committee are pleased to announce the recipients of this year's awards and scholarships. The committee reviewed the applications from an impressive pool of candidates who represent the quality of radiologic and imaging nurses today. Our winners each represent the ARIN core values of professionalism, advocacy, leadership, and responsiveness to technological advances.

The ARIN Radiology Nurse of the Year is awarded to Karen Marshall, BSN, RN, CRN from Chicago, IL. Karen is an ARIN nurse who exhibits outstanding radiology nursing practice through leadership, mentorship and ongoing professional development. ARIN congratulates Karen on this outstanding achievement.

The Charlotte Godwin Award recipient is Shelli Cramer, BSN, RN-BC, CRN from Franklin, OH. This award commemorates ARIN's first president and a lifetime member, Charlotte Godwin. This scholarship defrays the cost of attending an annual ARIN conference. Through attendance at the conference, Shelli will have the opportunity to continue to expand her knowledge in radiological and imaging nursing.

Mendi Humpherys, BSN, RN-C from Twin Falls, ID receives the Helen Malenock Award for 2015. This award provides Mendi with a one-year membership to ARIN.

The Dorothy Budneck Memorial Scholarship is awarded to Kathy Duncan, BA, RN, CRN from Chapel Hill, NC. This academic scholarship provides financial assistance for continued nurse education and recognizes Dot Budneck, a visionary radiology nurse.

The CRN Exam Scholarship recipient is Diane Shannon, BSN,RN from Hanover, PA. Shannon will receive complimentary registration for the exam. This award speaks to ARIN's commitment to radiology nurse certification.

Finally, the Northwest ARIN (NWARIN) chapter is awarded the 2015 Chapter's Award. This award honors the chapter that best promotes the goals of ARIN though their member relationships, community activities, and promotion of community health issues.

We look forward to soliciting candidates for the 2016 Awards and Scholarships. Applications are distributed late summer/early fall. Please consider applying!

Information is available on http://www.arinursing.org/awards-scholarships/

Respectfully submitted by
Piera M. Cote Robson, MSN, CNS, NP , AOCNS, ANP-BC, OCN
WELCOME TO THE ARIN BOARD OF DIRECTORS 2015-2016

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(Sustainable Healthcare for Underdeveloped Regions)
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