

# SNHChAACN 2005-2006

Southern New  
Hampshire Chapter,  
AACN

Spring, 2006

## ARE YOU REGISTERED FOR HORIZONS 2006?

We are in the throes of Horizons 2006! Hopefully you are registered and attending the event of the year. Our chapter has the privilege of hosting the educational offering for critical care nurses across the country, but especially for those in the northeast region. Each chapter of Region 1 (AACN) contributes in some way to facilitate this valuable critical care nursing seminar.

The variety of offerings are diverse this year, covering many aspects of critical care, from professional development to the latest in technology. We have speakers coming from all over the country, and the networking opportunities will be extensive. Make sure you join us, even just for a day. Registration is still open, and walk-ins are always welcome. Come by the Radisson and join us for the fun!

### HOSTING DUTIES

Southern NH Chapter is the official hosting chapter for Horizons 2006.

There are many aspects of the conference to attend to and our members have been quite helpful in pulling together maps, menus, and other necessary items. We will be prepared to direct and guide any interested person!

We will be displaying a map of the country and of the northeast so that nurses can pinpoint their origins. We have membership information for those needing to renew or join. Our chapter banner will be proudly displayed, and we will have many volunteers to assist in any way. It will be a lot of fun for everyone!

Special thanks go to our Horizons liaisons: Sally Brown, Carmen Petrin, and Donna Proulx. Also thanks to Patti

O'Brien for her work in mapping out the dining opportunities—great job and many thanks!

### REGION ONE DINNER

Wednesday evening, March 29, is the Region 1 dinner meeting, during which the current AACN

president, Deb Brinker, will speak to share her vision of what AACN is all about. We are fortunate to hear first-hand about the national organization's activities and goals. We will meet and network with

leaders from the northeast chapters to find out what they are doing for their members to enhance their critical care practice. Our board will be there to soak it all in, for YOU!

# horizons 2006

## Results from our membership drive

The winner for the one-day registration for Horizons goes to a new member, drawn at random from this year's newest. Amy Holliday, staff nurse at the Elliot Hospital's intensive care unit, is the recipient this year, and is looking forward to experiencing the event.

We had a large response

from the concerted effort, and we have high hopes that the membership will continue to grow as our educational offerings and activities continue to showcase informative and worthwhile topics.

Keep up the good work in telling your fellow nurses about our organization and encourage

them to have a voice in the local profession by joining the SNHChAACN.

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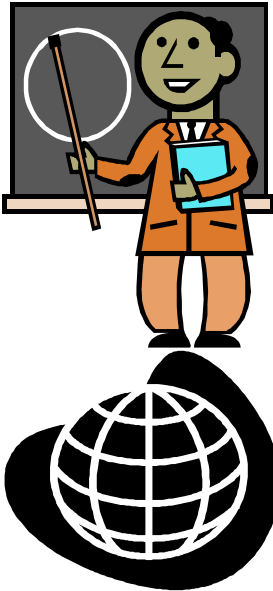
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### Special points of interest:

- Cathy Thomas reviews the information obtained at the latest pacemaker seminar
- Sally Brown provides an excellent perspective on EBN
- Mark your calendar for the April 19 dinner sponsored by KCI



## International Speaker on Kinetic Therapy, April 19

Dr. Suhail Raof, physician, teacher, and lecturer, is coming to the Wayfarer Conference Center on April 19 to update us on the latest in kinetic therapy, and to share valuable information to improve the care of our complex patient with pulmonary disease.

KCI is our sponsor, and will be showcasing the new proning bed available from their company.

Dinner will be served, and all SNHCh members will be able to attend at no charge. Flyers went home the first week of March, but if you did not receive yours,

please email Cathy Lucafo at [Clucafo@elliott-hs.org](mailto:Clucafo@elliott-hs.org) to request the information. If you know of someone who would like to attend but is not a member, offer them the opportunity to join for our reasonable annual fee of \$15, and voila, they are in! (Remember they must be national members first!)

This is a great opportunity for all chapter members, and we would love to see you there!

### *KINETIC THERAPY*

SUHAIL RAOOF, MD

APRIL 19, 2006  
6PM

SHERATON WAYFARER  
BEDFORD

“help us honor you as a nurse intent on the pursuit of furthering your education”

## Scholarship prize, \$250

Are you working hard at a nursing degree? Are you frustrated at the lack of funds, or the cost of books? Look to SNHCh for assistance! It's easy to apply for the scholarship our chapter is offering this year. Look to the mail for the application, and get it in to us before May 30. We always have a small number of applications, and we would like to consider as many people as possible.

You can use the funds for books, tuition, or even travel expenses. Please take a minute to let us know how great you are, and to help us honor you as a nurse intent on the pursuit of furthering your education. Great work!

### **OUR OWN STUDENTS**

We have several people within our own board hitting the books hard this semester. Donna Proulx continues to teach and study, Cathy Lucafo is closing in on finishing her degree, Patti O'Brien and Kathy Perrin are guiding students through nursing curriculums, amongst many others! There are many more—let us know who you are! We have great resources within our chapter!

## Nurse of the Year Award

We all know great nurses, working every day, all around us. It's time to honor him or her, through the Nurse-of-the-Year Award. A \$250 prize will be awarded! Look for the forms in the mail, and get your nominations in early!

### **OPEN BOARD POSITIONS**

After reading through the newsletter, and thinking about all the wonderful things the chapter is doing, don't you want to get in-

involved? We need new nurses to become involved to give us ideas and to help coordinate education offerings, and to serve in a variety of ways to keep the chapter functioning smoothly.

We are looking for two new board members and a president-elect this year. The board members serve as learners for the most part, helping with arrangements for events, and assisting with mailings or other necessary tasks. The president-elect will be someone

who is learning the role of president for the coming year, and will be someone who is already involved in board activities this year. To keep things interesting, we need new blood! We have a great time, and we don't travel too far for monthly meetings. It's a lot of fun, just ask any one of us already involved! Look for your ballots in the mail, and we hope to see YOU!





## Southern NH Charitable Donations

The activism of our current board members was further demonstrated this year as it was decided to contribute to our favorite charities in some way, even in a small amount. After collecting ideas, a vote by the general membership was put out in the renewal letters to make the final decision.

The American Red Cross was the overwhelming vote-getter. \$250 was sent with the Hurricane Katrina devastation in mind. If we are unable to be there physically, at least we are there in spirit!

The second donation we

were able to send out was with another very special intention. As some of you know, we lost one of our very special members of the chapter this past year, Colette Moore. Colette fought an extremely long battle with breast cancer, finally succumbing to the disease after many years, during which time she continued to work and support her very active family in all ways. One never knew the mental or physical battle she fought, since she was always caring for others. Colette was courageous and strong, never looking for any exception to ease her workload. She was a member of our chap-

ter since its inception, and was the model of the critical care nurse, tireless in her efforts to care for her patients, and to further her knowledge. The Susan B. Kolman fund for the research of breast cancer was a natural choice for the second allocation of funds. \$250 was sent in Colette's name. Our thoughts continue to be with her family and dear friends as they continue to recover from their, and our, loss.



## Important Dates Remaining this Year (2006)

### March 29, 30, 31st:

Horizons 2006 at the Radisson Hotel

### April 19:

Kinetic Therapy Dinner at the Wayfarer in Bedford

### May 11:

Business Meeting to plan end-of-the-year activities

### June 8:

Year-End Banquet, location to be decided. Concert pianist to entertain

### July (final date tbd):

Transitional meeting for the new board

Mark your calendar for these important events, and try to attend so that you can have a voice in YOUR local chapter of AACN! We look forward to seeing you! Check out the web for more details about location.

**SPRING, 2006**

## PACEMAKER UPDATE

*continued from page 4*

and check every 16 hours to see if the intrinsic rate has returned or not.

The other new pacer that will be coming out is the Opti-Vol Fluid Status Monitoring with InSync CRT-D Heart Failure Management System. This pacer has a special function that through intrathoracic impedance is able to monitor the fluid status

in the patients' lungs. Every night while the patient sleeps the pacer will transmit information to the cardiologist, who is managing the CHF. This pacer will allow some physicians to access both the programming and the fluid status. But if the physician managing the CHF does not do programming of the pacer then it will not allow access except to the fluid information.

The third new device avail-

able is the Reveal Plus Insertable Loop Recorder, this device is about 1/8th of an inch thick and the size of a bandage. It is implanted usually near the sternum to prevent pick-up of artifact caused by arm movement. The incision is about 2 cm long, and is performed as an outpatient procedure. This device is to help decrease the cost to diagnose syncopal events. The patient merely pushes a button on

A remote that is worn around the neck once they are feeling faint. The loop recorder also has an auto activation mode that senses an event and automatically records the event. The loop recorder then uses pacer technology to look for arrhythmias or asystolic events and records them. There are over 1 million people suffering from syncope. Syncope is ranked 37th among DRG discharges. More than \$2 billion is spent annually in primary and secondary diagnostics of syncope.

## Evidenced Based Practice: Doing the Right Thing

How many of us recall back to our nursing school days and remember how to provide nursing care and do certain procedures? It seemed that the most important thing was learning how to do things “the right way”. We were told that was how to help our patients get better. But did we ever stop to question why it was ‘the right way’? For many of us, it was all we could do to learn the actual “tasks” of nursing, and was beyond our comprehension to question the whys. Current trends direct us towards using evidence based nursing as a mechanism of for providing the answers to the whys of doing what we do.

Evidenced based nursing (EBN) is becoming more prevalent in nursing literature. It is the process by which nurses make clinical decisions using the best available research evidence, their clinical expertise, and patient preferences. It solves problems encountered by nurses in their daily practice of performing patient care. It involves four steps:

1. Clearly identifying an issue or problem based on accurate analysis of current nursing knowledge and practice
2. Searching the literature for relevant research
3. Evaluating the research evidence using established criteria regarding scientific merit
4. Choosing interventions and justifying the selection with the most valid evidence

Probably a common example that most of us can relate to is the use of saline lavage with the suctioning of our intubated patients. How many of us learned that we needed to routinely use saline to loosen secretions? Research has since proven to us that we may have been causing our patients more harm than good. It probably took some of use a while to break the habit from the way we had originally learned. There is comfort in doing things the way we have always done. But relating science to the way gives validity and reliability to our practice. As a result, it reinforces our stand as a profession

As our patient population becomes more knowledgeable and questioning of how we practice, they are coming to expect nursing care based on best practice evidence. It will be up to our profession, and us as individual practitioners, to rise to the occasion. We need to question the treatments that we provide to our patient population and expand our nursing knowledge. This can include keeping up to date with research provided to us by reading through the journals sent to us through AACN (American Journal of Critical Care). We also need to be supporting our peers who want to challenge and change the “routine” way of doing procedures and treatments towards a more efficient and effective method of providing quality care based on research. We need to be congratulating and celebrating their efforts to break away from the way things have always been done. As a nursing professional, isn't it time you explored what role EBN can have in your practice?

### References:

Schultz, A. (2006). A new catalyst for retention? *Nursing Management*.

Settler, CB., Brunell, M., Giuliano, KK., Morsi, D., Prince, L., Newll-Stokes, V. (1998) Evidenced based practice and the role of nursing leadership. *Journal of Nursing Administrators*. 28(7-8), 45-53.

*(by Sally Brown, RN, Southern NH Medical Center)*

## NEWS FROM AROUND THE REGION

- Southern NH Medical Center has a new nursing position to help support evidence-based practice. Susan Fetzer is the new resource person, and is there to help nurses construct and perform any and all sort of research! Sounds like a wonderful opportunity for nursing, and for furthering patient care.
- Elliot Hospital's Intensive Care Unit recently welcomed Mei-Chun Chen, a head nurse in the medical ICU at the National Cheng Kung University Hospital in Tainan, Taiwan, to visit and observe. Mei assisted one of our own nurses, Laura Dolloff, when she was in Taiwan last May, attending the International Council of Nurses' Quadrennial Conference. Mei also helped arrange observations in her government hospital for Laura to visit!
- A new AACN chapter has been born! Welcome to the Northern NH Chapter of AACN, based out of the Littleton area. Peggy Piette, a critical care nurse at the Littleton Regional Hospital, will be its first president, and she is motivated to become a force for the local nurses in that neck of the woods. Good luck Peggy!
- The University of NH is making some changes for the RN to BSN program, soon to be announced. It is hoped that an online version of the degree will allow nurses to more easily complete the baccalaureate requirements, allowing for greater ease in pursuing their education. Great idea!

## OFFICERS AND BOARD MEMBERS—2006

PRESIDENT	LAURA DOLLOFF, ELLIOT HOSPITAL dolloff29@charter.net
PRESIDENT-ELECT	CATHY LUCAFO, ELLIOT HOSPITAL clucafo@elliott-hs.org
PAST PRESIDENT	DONNA PROULX, CATHOLIC MEDICAL CENTER
TREASURER	KAREN DUCHARME, CATHOLIC MEDICAL CENTER
SECRETARY	CATHY THOMAS, CATHOLIC MEDICAL CENTER
MEMBERSHIP	NANCY FRIEDBERG, ELLIOT HOSPITAL nancy611@comcast.net
CO-MEMBERSHIP	KATHERINE KING, ELLIOT HOSPITAL
BOARD MEMBERS	DANAE COLBATH, LAKES REGION SUE CORLISS, CONCORD HOSPITAL YVONNE CARROCCINO, ELLIOT HOSPITAL KATHLEEN CULLEN, ELLIOT HOSPITAL
HORIZONS	DONNA PROULX CARMEN PETRIN SALLY BROWN (CHAPTER HISTORIAN AS WELL)

## Southern New Hampshire Chapter, AACN

SNHChAACN  
P.O. Box 4244  
Manchester, NH 03108

New web address to be announced soon!  
Look forward to a more comprehensive resource for your information!



Southern New Hampshire Chapter of AACN represents the mission and vision of the national American Association of Critical Care Nurses, and helps local critical care nurses be the best they can be to care for our critically ill patients in the Southern New Hampshire region. Our members come from all over the state, from Nashua to Laconia, and from Monadnock in the west to Exeter in the east. We are delighted to hear from our members, to find out what interests them, and how we can be of assistance.

Please don't hesitate to contact us anytime!

**LOOK FOR THE NEW WEBSITE  
TO BE ANNOUNCED VERY SOON!**

## Cathy Thomas shares her thoughts on the Pacemaker Seminar recently offered by SNHCh

About 35 attendees enjoyed the information and the day at the Highlander Conference Center on February, 2006. Our speakers were from Medtronic, and they brought the latest and greatest information on pacemaker products and guidance on monitoring the pacemaker patient.

Our own Cathy Thomas (Board Secretary) brought the information back to her unit at the Catholic Medical Center, and here is an excerpt from her update for her colleagues:

### PACEMAKERS LATEST UPDATE FROM MEDTRONICS

The SNHch of AACN recently hosted a pacer conference from Medtronic. They had a few new things that we will be seeing in the future and some

that are currently being employed here at CMC. First, the Latest research has shown that pacemakers that only pace the right ventricle will eventually cause the heart to remodel. This will then lead to pacemaker induced heart failure. Therefore, Medtronic has devised a new paced algorithm mode called MVP or managed ventricular pacing. With this mode they have found that patients who were 75% paced can be reduced to 5% paced and preserve as much of the natural heart rhythm as is possible. The pacer watches for a P wave in which the QRS is dropped, it will not pace this first missed QRS complex, but on the next beat it will not pace the first missed beat, but will pace the next beat. If you are not aware of this new

mode it appears to be a failure to sense and capture. After the second time the pacer has to come in for a missed beat the pacer will pace for 1 minute. After 1 minute the pacer will stop and "look" for another dropped beat then it will continue to pace for a 2 minute interval when it will again stop and wait to see if the intrinsic rate has resumed or if there will be another missed beat. The pacer will continue to double the time interval that it will pace, in other words it will pace for a minute then wait for a missed beat, then pace for 2 minutes and wait, 4 minutes and wait, 8 minutes and wait. It will continue to double the time frame until it hits 16 hours, then it will stop pacing *continued on page 2*

