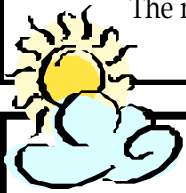


THE CUTTING EDGE

The newsletter for AORN (Association of periOperative Registered Nurses) of Alameda County, CA
April 2003



50th AORN Congress in Chicago

7021 attendees (RNs, etc.) + 6515 exhibitors = 13,536 in attendance!

Opening Session

By Sophie Taylor, Delegate and President

On Sunday, March 23, 2003, the 50th AORN Congress commenced. The theme this year was "50 Years of Excellence." Noteworthy in the opening procession were the four remarkable women who have been members for 50 years. In addition, fourteen chapters have been in existence for 50 years as well.

Every year, presidents of various health-care organizations closely related to OR areas (such as the American Society of Peri-anesthesia Nurses) are present to greet us. A breakthrough statement was made by Sandra Edwards, CST, president of the Association of Surgical Technologists. She stated that "we support and share your belief that every patient deserves a perioperative registered nurse, and a certified surgical technologist."

The award winners were honored at a dinner the night before. The award for excellence was given to Kay Ball who subsequently urged us to "strike a healthy balance" in our lives. The Jerry G. Peers award was given to Betty J. Thomas (past president). This award recognizes an individual's significant contributions to the growth, progress, and welfare of AORN.



Opening Session March 23, 2003. Confetti fell from the rafters to start our 50th Congress. All photos in this issue by Mary Ritchie.

Since we are celebrating our 50th Congress, President Donna Watson shared some of the Association's history on a journey through time. A milestone in AORN's history includes the publication of AORN's first official journal in 1960. Also, the AORN logo was approved in 1966, and despite many efforts to change it, remains unchanged to this day. †

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Into the New Millennium!

By Mary Ritchie, Editor

The newsletter has finally reached the new millennium. The February 2003 issue was submitted for copying in PDF (Portable Document Format) on a CD (compact disk). This enabled the newsletter to have clear photos and text. **What this means for the members is that you can now receive the newsletter by e-mail** (saving your chapter money!). You've been able to read the newsletter contents on our web site since 1997 but not in a newsletter format complete with advertising. If you'd like to receive the newsletter in PDF by e-mail, please let me know. It would be ideal for you to have DSL (Digital Subscriber Line) or cable because the February newsletter was 1296K. If you have 28.8 or less modem, the delivery may tie up your phone line for some time. I think a 56K modem would be able to handle it. Or I can e-mail you with a notification that the newsletter is on our web site and ready for viewing in PDF.

E-mail marymac@hotpop.com for fast, easy delivery of the newsletter to your computer's mailbox or notification of the PDF version on our web site. Visit www.geocities.com/alamedacounty to read the newsletter contents separated into topics or in PDF. †

"The Cutting Edge"

April 2003

Volume 19, Number 5

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Vital News!

AORN sells mailing lists to selected advertisers and AORN partners. We, as members, can notify AORN that we want our names deleted from lists distributed to others. This information and option is on renewal and new member forms.

I've had the opportunity to sell members' mailing labels (that contain names, addresses, initials of work places, and AORN membership expiration dates). AORN has told me I should give members the opportunity to opt out of any label distribution before selling labels. **This is the official notification that will be conducted yearly to let members opt out of mailing list distribution to advertisers.**

Before you think I'm standing on a street corner hawking your names and addresses, let me explain. An advertiser wanted to run a full page ad for a nurse manager but contacted me just after the newsletter was mailed. She then asked about buying mailing labels. I immediately said yes and then I was reminded by my husband that action was unethical. We sold and then traded mailing labels with other chapters for advertising continuing education classes, so it didn't dawn on me immediately that this was quite different. In ten years of being the editor, this was the first request I've had for mailing labels from a non-AORN person. I can't imagine this request to become a frequent occurrence. However, I would like to be able to provide this service if it happens again. Please contact me (see page two in the lower left) if you want your name and address deleted from these lists.

Congress Election Results

(with number of votes received in parentheses):

President Elect

(982) William J. Duffy, RN, BSN, MJ, CNOR - IL

Treasurer

(1281) Paula R Graling, RN, MSN, CNOR - VA

Board Of Directors

(880) Susan K. Banschbach, RN,BSN,CNOR - OK

(797) Pat Hickey, RN,BSN,MS,CNOR - SC

(962) Kathleen A. O Toole, RN,BS, BSN, CNOR - IL

(819) Mary Jo Steiert, RN,CNOR - CO

Nominating Committee

(884) Rhonda L. Anders, RN,BSN,CNOR - IN

(580) Deborah G. Spratt, RN, MPA, CNA, CNOR - NY

Workplace Safety Task Force

By Kathie Shea, Delegate

The Workplace Safety Task Force was appointed this past year to focus on safety in our workplace. Deborah Spratt (who was successful in her bid to win election to the Nominating Committee) chaired this task force of four individuals. This group developed a position statement on workplace safety that was approved at the second House of Delegates. Rather than give you the approved position statement, I have chosen, by the grace of our newsletter editor, to list some of the occupational hazards AORN has identified as creating a risk of personal injury to perioperative nurses in the workplace. They include:

1. Biological

- Exposure to bloodborne pathogens from percutaneous injuries, splashes, and other contact
- Exposure to infectious microorganisms
- Exposure to biological components of surgical smoke from use of lasers and electrosurgical units
- Exposure to the chemical and protein allergens in latex gloves

2. Ergonomic

- Static or awkward posture
- Standing for long periods of time in one position
- Back injuries
- Repetitive motion
- Moving patients or carrying heavy instruments and equipment

3. Chemicals

- Anesthesia gases
- Disinfecting/sterilizing agents
- Cleaning agents
- Specimen preservatives

4. Physical hazards

- Fire
- Electrical
- Radiation
- Lasers
- Smoke plume
- Compressed gases

5. Psychosocial

- Long hours
- Mandatory overtime
- Demographic diversity
- Nursing shortage
- Call
- Trauma
- Burnout
- Abuse-verbal and physical
- Violence from staff, patients, patients' families, or nurses' families

6. Cultural

- Tolerance of abuse from physicians
- Lack of commitment by management to adhere to an optimal workplace safety program

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- Absence of respect from peers and other health care professionals
- Absence of a code of conduct for all team members.

AORN has suggested the following strategies for developing and maintaining a safe workplace:

1. The facility has the responsibility to establish and promote a safe work environment and strive to use best practice models (e.g., magnet hospital status criteria, workplace of choice).
2. Each facility should develop a comprehensive workplace safety program that includes a written plan for each topic covered in the program, a written plan to provide education on safety initiatives, and monitoring of compliance for employees and other health care providers.
3. Every perioperative nurse is responsible for following safety policies and participating in the safety programs.
4. The perioperative nurse has a responsibility to identify safety hazards, take appropriate action, and report them through the appropriate channels.

Word has it that our chapter will be sponsoring a workplace safety workshop this Fall...stay tuned for details. †

Monthly Chapter Meeting Minutes

By Donna Rodgers, Secretary

February 5, 2003



A ORN of Alameda County
Monthly Chapter Meeting
Eden Medical Center, Conference Room
February 5, 2003

CALL TO ORDER: The meeting was called to order at 1808 by Vice President Donna Benotti.

ANNOUNCEMENTS: The ORNCC luncheon will be the first Monday of Congress at a cost of \$40. Mt. Diablo will host a seminar on Bariatric Surgery May 3. See Donna Benotti for details.

PROGRAM: "Surgical Site Verification and Marking" was presented by Kathie Shea, RN, BSN, CNOR and Donna Benotti, RN, CNOR.

MINUTES: Minutes of the January 8, 2003, monthly chapter meeting were read by committee and approved.

TREASURER'S REPORT: A closing balance of \$18,977.27 as of February 4, 2003 was reported by Treasurer Ann Ceasri.

NEW BUSINESS: Kathie Shea presented a draft from National regarding the AORN Position Statement on Correct Site Surgery. A motion was made to approve this proposal. Following discussion, the motion was seconded and approved by the membership.

The research question for this month is on surgical site verification. Please complete.

The Bylaws committee will meet at Donna Benotti's home on Monday, February 10 at 1830.

A member's question on first-time Congress attendance produced a discussion of accommodations, etc.

ADJOURNMENT: The meeting was adjourned at 1920 by Donna Benotti. †

ORNCC meets May 17 (1000-1500) at the Marriott Courtyard, 350 Hegenberger Road, Oakland. Their telephone number is 510-568-7600. Lunch is \$40 and advance reservations are required (seating is limited to 50). Call Vicky Contryman at 909-598-6460 or bcontryman@earthlink.net. See www.orncc.org for more information (agenda).

March 5, 2003



A ORN of Alameda County
Monthly Chapter Meeting
Eden Medical Center, Conference Room
March 5, 2003

CALL TO ORDER: The meeting was called to order at 1804 by Vice President Donna Benotti.

ANNOUNCEMENTS: Our next meeting will be on the second Wednesday of the month, April 9, 2003. It will also be held in a different room at Eden. Report to the usual location and look for directions to the new room. The topic will be "Breast Reconstruction" by Dr. Kilaru, plastic surgeon.

AORN SF/Marin is presenting a workshop entitled "An Update on Spinal Cord Injuries" on May 10, 2003, at the SF VA. Call Carrie Ewing at (650) 558-8327 for details.

CHAPTER ACTIVITY REPORTS:

EDUCATION: Kathie Shea and Donna Benotti held another Stryker workshop for 23 new reps on February 15, 2003. Among the issues addressed was how a rep should respond when asked by a circulator to do something out of his scope of practice, such as opening sterile supplies or sterilizing supplies.

PROJECT ALPHA: The MSN program is complete and the BSN training begins this week. A senior Cal State nursing student is in need of a preceptor. See Donna Benotti if you can help.

RESEARCH: This month's clinical question is on conscious sedation. Please complete and return to Kathie Shea. Results will be published in an upcoming newsletter.

NOMINATING COMMITTEE: Candidates are needed to run for the offices of President, Treasurer, Nominating Committee, and Board.

PROGRAM: "Moderate Sedation" was presented by Evelyn Steen, RN.

NEW BUSINESS: A handout of the AORN Position Statement on Workplace Safety was presented to the membership for feedback. Delegates will discuss this document at Congress. It was agreed that the statement details practices already in place.

The next Bylaws meeting will be Monday, March 10, 2003, at 1830 at Donna Benotti's home.

TREASURER'S REPORT: A closing balance of \$19,310.32 as of March 4, 2003 was documented by Treasurer Ann Ceasri.

ADJOURNMENT: The meeting was adjourned at 1932 by Donna Benotti. †



February 2003 Clinical Questions

By Kathie Shea, Research Committee Chairman

Facilities Represented: Eden, Kaiser Fremont, Kaiser Hayward, San Leandro Surgery Center, San Ramon, Summit, The Surgery Center, ValleyCare Health System, Washington Outpatient Surgery Center.

1. Are you familiar with JCAHO's 2003 Patient Safety Goals?

Yes - 8 No - 2

Comments: Patient Care Focus Group (multidisciplinary post JCAHO group that stayed together) reviewed goals and revised or created policies accordingly where needed.

2. Does your facility have an Operating Room Policy and Procedure on surgical site verification/markings? (If No, skip to question #4)

Yes - 8 No - 1 Don't know - 1

3. If you answered "Yes" to #2, does your policy and procedure include language related to:

A. Encouraging the patient to mark the site?

Yes - 4 No - 2 Don't Know - 1

B. Minors or patients not capable of signing their own consent?

Yes - 3 No - 2 Don't Know - 1

C. Situations where no parent or legal guardian is present?

Yes - 2 No - 3 Don't Know - 1

D. A surgical site checklist?

Yes - 5 No - 2 Don't Know - 1

E. Documenting in the intraoperative record?

Yes - 8 No - 0 Don't Know - 0

F. Procedure for marking?

Yes - 6 No - 1 Don't Know - 0

G. Performance Improvement monitoring?

Yes - 6 No - 1 Don't Know - 1

Comments

A. - Patients verify, do not mark.

C.- Emergency situations covered plus resource is Risk Management during working hours.

G. - PI is addressed in department's PI Plan.

4. Do you require a formal pause prior to the incision for the anesthesiologist, surgeon, and RN circulator to verbally confirm each site?

Yes - 8 No - 2

Comments: Time out documented on anesthesia record. We must confirm in the room before starting procedure. Initiated by circulating RN. (Yes, but) seldom done officially. Time out documented on intraoperative record. †



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WWII Cadet Nurses Needed!

The "U.S. Cadet Nurse Corps Equity Act of 2003" (HR476), which grants veteran status to all cadet nurses, was introduced into the House of Representatives on January 29, 2003.

We Need Your Help to Promote This Bill!

For more information and form letters, please send a business sized, self addressed, stamped envelope to:

Ruth Sartori, RN, EdM
 Coordinator
 196 Leonia Avenue
 Leonia, NJ 07605-1639.

Or call her at 201-944-8923.

The February newsletter (on our web site in PDF) contained information about the U.S. Cadet Nurse Corps and its creation during WWII to answer the nursing shortage.



Correct Site Surgery Position Statement

By Kathie Shea, Delegate

For the first time in the history of AORN, the delegates from our chapter were asked to vote, by proxy, between Congresses. Proxy ballots were mailed to all 1392 Delegates for 2002. We brought the proposed statement to you at our February chapter meeting for discussion and your collective decision on how we should vote. There were 857 proxies returned (a return rate of 61.5%). There were 829 "Yes" proxies received (96.7%), six "No" (0.9%), and 20 proxies (2.3%) were deemed invalid (either incomplete, not signed, or returned after the deadline). Overall, the process was proclaimed a success in expediting the business of the Association. There were questions raised and the process will be analyzed to allow for future on-line discussion, the amendment process, and voting. †

Tidbits

- There were 1323 delegates with 1295 ballots cast with two blank ballots.
- AORN's new web site at www.aorn.org premiered on April 15.

Congress Election Results of Losing Candidates (with number of votes received in parentheses):

President-Elect

(311) Anita Jo Shoup

Board Of Directors

(711) Sherron C. Kurtz

(488) Linda L. Savage

(384) Patrice Spera

Nominating Committee

(430) Thomas J. Macheski

(319) Marion S. McCall

(327) Marilyn L. Sanderson

Winning candidates are listed on page two.

Californians at Congress (AKA the California Luncheon)

By Kathie Shea, Delegate

As usual the ORNCC luncheon was "squeezed" into an already tight Monday schedule. This year it was well worth attending. Linda Groah was our speaker; her presentation was titled "Working Relationships in the OR." Linda provided valuable information on the status of nursing in our state including the following facts: 1) The California Employment Development Department predicts that by 2010, there will be a shortage of 109,000 RNs and 2) The RN vacancy rate increased 2.2% from 2000 to 2002 with the current rate at 15%. The good news is that schools of nursing are over subscribed at present. There were 40% more applicants for programs than could be accommodated. The other good news is that the number of RNs increased by 4% in 2002 with 1664 more RNs coming into the state than left.

Linda also briefly described the current generations that are in our workplace today – Veterans, Baby Boomers, Generation Xers, and, for the first time, Nexters. Each generation brings with it asset and liability characteristics. Most of us are familiar with the first three generations so I will focus on the Nexters. This group is generally optimistic, tenacious, and technologically savvy. They possess a heroic spirit and are capable of multitasking. They sound like a great group! However, they are inexperienced, more in need of structure and supervision, and have difficulty handling people issues.

I'm up for the challenge of mentoring them, how about you? †



Lake Michigan with a view of downtown Chicago from the back of the convention center. Please note the sunshine! We had glorious spring-like weather all week (until March 28 when it rained - but Congress was over!)

IFPN

By Donna Rodgers, Delegate

Kate Woodhead, RGN, DMS, and current president discussed the International Federation of Perioperative Nurses. The IFPN was launched in Helsinki in 1999 and includes 12 member countries representing 80,000 nurses globally.

The objectives of the IFPN are to represent nurses internationally, promote and participate in research, maintain networking systems for key emerging issues, promote perioperative nurses at every opportunity, and act as a liaison group to those seeking humanitarian or educational aid.

Currently, the IFPN is planning seminars in Australia in 2004, in the U.S. in 2005 and in the U.K. in 2006. An affiliate of the ICN, the federation is working on refining communication on perioperative issues with that group. The IFPN also seeks to increase its membership by 25% in the future. †

**Welcome!
and
Welcome Back!**

**Charlene Bennett
UCSF Medical Center**

**Theoneta Clark
Highland**

**June Fish
Easy Bay Surgery Center**

**Dianna Jess
Eden**

**Gayle Nebre
Eden**

**Sherry Smith
San Ramon**

Disaster Preparedness Task Force

By Kathie Shea, Delegate

President Donna Watson appointed the Disaster Preparedness Task Force last year. The task force consisted of four members chaired by Darlena Stevens. They developed AORN's Perioperative Disaster Preparedness Resource Manual and were instrumental in issuing the AORN smallpox vaccination advisory. I looked at the manual (for sale in the Congress bookstore) and found it to be extremely basic in content. It would not be particularly useful for those of us who live in "earthquake country." At the second Forum, one of the Congress attendees spoke to the fact that the smallpox advisory was not in accordance with current Center for Disease Control guidelines. It is apparent, just like the beginning of the HIV epidemic, that information and recommendations are in a constant state of flux and almost everything in print is "yesterday's news." †

Thank you to AORN of Alameda County for allowing me to represent you at Congress this year! Kathie Shea

Sophie Taylor,
President,
at the far
right at
the Art
Institute



The delegates: sitting in front are (L to R) Mary Ritchie, Donna Rodgers, Sophie Taylor. Crouching in back are (L to R) Donna Benotti, Kathie Shea, Evelyn Steen

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JEST for Success

By Donna Rodgers, Delegate

This year the Jerry G. Peers Lectureship was entitled "JEST for Success! Humor at Work" and was presented by Karyn Buxman, RN, CSP, CPAE. Karyn is a former perioperative nurse turned humorist and motivational speaker.

Winning the crowd over with an enthusiastic "Nurses rock!" Karyn shared some words of wisdom. She noted that humor comes from pain and we need to be able to laugh at ourselves. Humor also forces us to see things from a different perspective and helps us to nurture one another. She shared a borrowed quote that "humor is a childlike perspective in an otherwise adult reality."

Humor can take on a warped character in medicine, because the closer one

is to tragedy and death, the "sicker" the humor becomes. It is a coping mechanism. Therefore, one needs to be aware of who is around to hear, how well one knows the recipient of the barb, and the timing of the exchange.

Karyn identified three types of people. Everyone is familiar with Type As - they usually wield instruments. Type Bs have no stress due to the lack of structure in their lives. And Type Es try to be everything to everybody, i.e., nurses!

Since the number one reason people leave jobs is unhappiness (not money issues), we need to make work fun. TMJ, cold hands, poor immune systems, and shallow breathing - these are common symptoms of stress. Laughter is good medicine because it

relieves muscle tension.

Karyn shared her acronym for creating humor in the workplace - JEST.

J - Tell **jokes** and stories.

E - **Explanations** can be amusing.

S - Creative **signs** and memos can elicit a chuckle.

T - **Toys and tools** can lighten a mood.

Ms. Buxman summed it all up in a motto: Laugh 'till you cry, cry 'till you laugh, laugh 'till you leak! †

War in Iraq Editorial

Touch a thistle timidly and it pricks you; grasp it boldly, and its spines crumble.

-William S. Halsey

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Electronic Voting!

By Mary Ritchie, Delegate

The new keypad voting system (which has finally brought our election process into the 21st century) cost \$45,000. This cost didn't come from capital but from realized savings from insurance rebates.

The new keypads replace the old system of voting (we voted by a show of hands) and hand counting delegates (which was cumbersome for California with about 125 delegates). We pressed "1" to vote "yes" and "2" to vote "no" and "3" to abstain.

There were 1313 delegates registered on March 24 for the first House of Delegates. We were asked to press "1" for "yes" to establish a quorum. "Yes" was pressed by 1029 people (some people had trouble being on time!). A quorum was 263 so a quorum was established. The roll call of 50

states and Puerto Rico was completed in 15 minutes due to the electronic quorum count and "short" state introductions. The previous procedure entailed lengthy introductions of each state (e.g. "The great State of Orwashingcal, home of the world's largest beehive and ball of string, the biggest fog bank, the best teams in all sports, and ad infinitum, is proud to seat 223 delegates." Some of the past introductions have been very entertaining. However, this year, they seemed superfluous. There's no longer a need for state introductions with the new keypads to establish a quorum.



We were introduced to the new keypads at the first forum on March 24 at 0800. We were given instruc-

tions and then had time to practice. It went quite smoothly after the required questions (we are periop nurses!) and "what-ifs" and many repetitions of the instructions.

The keypads were used to establish a quorum in the House of Delegates, for roll call, and for voting on position statements and association business. The response totals showed on a large view screen. We could only vote once (and it was Chicago - where they vote early and often!) because the keypad only registered the last vote entered - so mistakes could be corrected simply by voting again. We had a short time to vote and a timing clock showed on the screen so we knew when time was short.

The keypads are a vast improvement over counting raised arms for votes and the seemingly endless counting of heads by state reporters for House quorums. Congratulations to AORN for coming into the age of technology!



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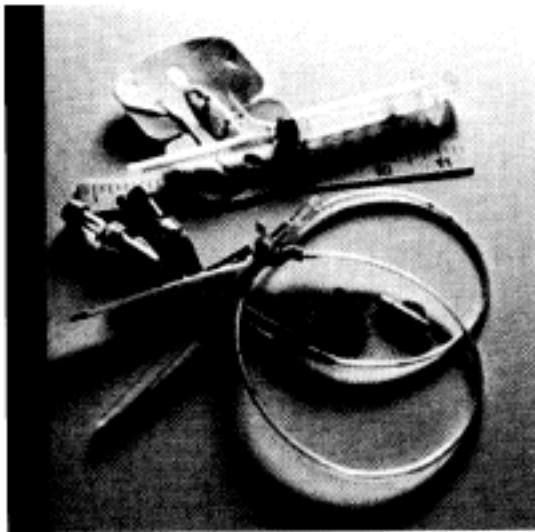
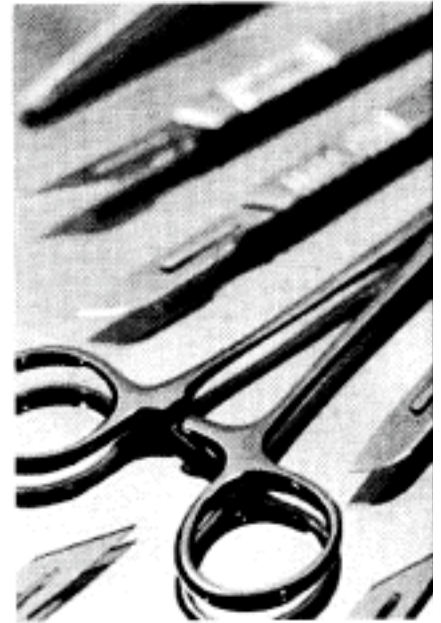
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March 2003

Clinical Questions

By Kathie Shea, Research Committee Chairman

Facilities Responding:
East Bay Surgery Center, Eden, Fremont Surgery Center, Kaiser Pleasanton, San Ramon, ValleyCare, Washington, Washington Outpatient Surgery Center

1. Moderate sedation is administered in my OR suite:

Frequently - 5 Occasionally - 4 Seldom - 2

2. On moderate sedation cases, do you have a RN as a dedicated "monitor nurse" without circulating responsibilities?

Yes - 10 No - 1 Don't Know - 0

Comments: Usually x 1. On surgery cases, there is a dedicated "monitor nurse." On GI and pain cases, the nurse administers the sedation and gives supplies, etc. On GI cases, we use a GI tech and on pain cases, there is an x-ray tech.

3. Is the "monitor nurse" ACLS prepared?

Yes - 8 No - 2 Don't Know - 0
Don't have a "monitor nurse" - 0

Comments: No, but some of our nurses are ACLS prepared. Not always x 1.

4. What form(s) do you use to document on moderate sedation cases? (Check all that apply)

OR nurses' notes - 2
Anesthesia record - 6
Moderate sedation/special procedures record - 6
Other (list/describe) - 0

5. Do physicians cosign for verbal moderate sedation drug orders given in your OR suite?

Yes - 10 No - 1 Don't Know - 1

Comments: They sign the anesthesia record. The surgeon tells us what medications/dosages to give during the case but he/she does not cosign on the anesthesia record. On SESI/CESI/pain blocks/GI cases, they do sign on the moderate sedation record. †



Sandy Kim next to the first x-ray machine at the International Museum of Surgical Science (www.imss.org)



The Wrigley Building - typical of the beautiful Chicago architecture. Look at that gorgeous sky! We saw that beautiful weather 99% of the time!

Oprah!

By Sandy Kim, Member

Go to Chicago to see Oprah. This is the first time I have been to Chicago. My roommate said we should go see Oprah. That was all fine and good, but she made this statement on the first day we arrived to Chicago. I did not remember that Oprah taped her shows in Chicago nor did I realize that her shows were that popular. Well, what to do. On Saturday, March 22, I spoke to the concierge (Tony) about getting tickets to see Oprah sometime during the week we were in town (March 22-29). Tony informed me that Oprah only taped on Tuesday, Wednesday and Thursday. He would let me know the day before if he got tickets. That was fine with me, as I did not have anything to lose. On Monday, Tony informed me that he was not able to get tickets for the Oprah show. But on Tuesday, Tony took me into the back room and told me he was able to get four tickets, two of which he'd give me for Wednesday. There was going to be a preview on Tuesday night for the show on Wednesday. I thought this meant a practice of the show to be done on Wednesday morning. I told Tony that I would not be attending the practice run (my error) and got instructions for the show. No white or beige tops, no gum chewing, bring photo ID. Arrive at the Harpo Studios at 7 a.m. The taxi ride would be about \$13 and takes about 15 minutes to get to the studio from the Hyatt McCormick. I was so excited. I was going to see Oprah. Can you believe that?

Maria Cam and I got up at 5:30 a.m. We left the Hyatt at 6:30 a.m. and were in line at 6:45 a.m. at Harpo Studios. Oprah's staff came out about 7:15 a.m. and started to examine the people in line - looking for a certain image I'm sure. Then, the people started to go into the studio. First you had to give up your coat. If you wanted to keep your coat, then you

would have to leave it on for the entire show. Next, your ID card was shown and you received a blue information sheet to be completed. This also stated that you would not take pictures, use any of the program for promotion purposes, etc. The Oprah staff examined my purse and removed my camera and cellular phone which were put into a plastic bag. Some purses were too large, so they were confiscated. I was given a tag to pick up my belongings after the show. I had to walk through a metal detector. Thank goodness I passed! We were instructed to go up the stairs. As we went up the stairs, there was a sign stating "You will not be returning to this room. If you want something from the gift shop, please purchase it now." Gift shop! Just point me in the direction! Off I went to stand in line. I am not very tall, but I did notice the line was not moving. I asked the person in front of me, "Is there anyone behind the counter?" Well, the answer was no. But there must have been about 12 people standing in line. What fools we were! After about 20 minutes, a gentleman went behind the counter to take our orders for T-shirts, sweatshirts, or hats. These three items were the only things in the gift shop. We placed our orders and received yet another tag. The room became very crowded and we began to look for fire exits and sprinkler systems. Only found one sprinkler head! Kept real close to the fire exit. It was now 8:15 and the audience was trying to figure out how we were going to be seated in the studio. Everything up to this point had been very organized. A couple of names were called out, "Smith party please come down," etc. We were instructed to look at the



numbers on the right hand corners of our blue papers. The first 50 people, please come down. Then numbers 51-100 went down. My number was 114, so I was the next group down. Were do we sit? What is the best place to see and be seen? I sat in the top row center stage. The producer went over some of the rules. The first question was, "Who wants to be on TV?" Just about everyone's hand went up. Well, if you are chewing gum you will not be shown on TV. There are three tele-

prompters in the room for Oprah to read so if you are lip reading along with Oprah then you will be cut from the show. The film is shot with commercials. If you need to go to the bathroom, then you need to go between commercials. If you do not get back to your seat during the commercial, then you will have to wait until the filming is completed. They try to make as few cuts as possible. The guest that day was Michael Douglas, Kirk Douglas, Michael's son, and his mother. They are in a film ("It Runs in the Family") together coming out April 25. This is when I found out that I could have seen the movie on Tuesday night. But I wanted to go the the Navy Pier dance. Oh well. Well, the show was aired April 7 and we weren't shown.

Once the taping was completed, we (about 350!) filed out, first getting our coats, then personal belongings (cellular phones, cameras), and then our purchases from the gift shop. Outside, there was another staff member, getting taxis (four cab companies were called) for the people in line. We were out of the studio at 10:30. What an experience! Maria and I had a great time! Outside the studio was another line for the second taping. I heard rumors it was supposed to be the Elizabeth Smart family. †

Photo credit: Curtiss Kim

Legislative Update

By Evelyn Steen, Delegate

There really wasn't any new legislation coming out of Congress this year. The AORN legislative priorities for 2003 are still Patient Safety and Scope of Practice, in which AORN ensures the supervisory presence of the professional registered nurse in the perioperative arena with laws and regulations requiring RNs in the circulator role. AORN promotes basic educational standards for assistive personnel, such as surgical technologists and surgical assistants. AORN opposes licensure of surgical technologists and surgical assistants. AORN supports the Federal Nurse Reinvestment Act. This measure provides nursing scholarships and grants to health care facilities for nurse retention programs.

This is not information that came from AORN Congress but if you're interested in what is happening in California, the Board of Registered Nursing has a web site (www.rn.ca.gov) where you can find out what legislation is affecting nursing.

The following bills related to the practice of nursing were chaptered into law during the 2002 legislative session. Although these bills address many subjects, each affects registered nursing in some way. These bills became effective January 2003.

AB 1140 (Thomson) Nursing Workforce Planning - this bill requires the Board of Registered Nursing to obtain workforce data from its licensees for the purpose of future workforce planning and produce reports on the issue at least biennially.

AB 2314 (Thomson) Nursing Education - this bill requires the Chancellor of the California Community Colleges to encourage community college districts, and the Chancellor of the California State University to require campuses of the California State University to standardize all

nursing program prerequisites on a statewide basis and implement articulation agreements between the two systems by September 1, 2005.

SB 993 (Figueroa) Certified Nurse-Midwives and Certified Nurse Practitioners - this bill deletes the practice restriction on the furnishing of drugs and devices applicable to a certified nurse-midwife or nurse practitioner in solo practice and requires a state department to consult with the Board of Registered Nursing in promulgating regulations that affect the scope of practice of a certified nurse-midwife or nurse practitioner.

SB 1301 (Kuehl) Reproductive Privacy Act - this bill deletes the provisions in the Therapeutic Abortion Act, including the name of the Act. It enacts the Reproductive Act, which provides that every individual possesses a fundamental right of privacy with respect to reproductive decisions, including (A) the fundamental right to choose or refuse birth control and (B) the fundamental right to choose to bear a child or obtain an abortion. It provides for registered nurses, certified nurse practitioners, and certified nurse-midwives with valid, unrevoked, and unsuspended licenses or certificates to assist in the performance of a surgical abortion and to assist in the performance of non-surgical abortion.

SB 1558 (Figueroa) Dangerous Drug or Dangerous Device - this bill authorizes a certified nurse-midwife, a nurse practitioner, and a physician assistant to sign for the request and receipt of complimentary samples that have been identified in the standardized procedure, protocol, or practice agreement that has been approved by the physician.

SB 1642 (Soto) Nutrition - this bill provides for a registered dietitian to order medical laboratory tests related to nutritional therapeutic treatments when authorized to do so by a written protocol prepared or approved by the referring physician. When in a clinic setting where there is a registered

nurse on duty, and the referring physician is absent at a patient visit, the nurse should be notified that a laboratory test is being ordered and is then afforded an opportunity to assess the patient.

SB 2019 (Speier) Student Loans - this bill authorizes a licensing board or agency having jurisdiction over a license to cite and fine a licensed health care practitioner who is in default on a United States Department of Health and Human Services education loan, including a Health Education Assistance Loan. †

Bears on Patients!

By Evelyn Steen, Delegate

What would I have not learned if I had not attended Congress? Lots of things! There were many classes on patient safety and most presented material we were already familiar with but helped reinforce the concepts. The exhibits were great with lots of new technology. One that really impressed me was one called Bair Paws. It's a warming gown you put on the patient in the holding area. It is a self-controlled warming unit that attaches to the special gown to warm the patients before going to surgery. It is made by the same people who make the Bair Hugger. I see great possibilities for it and I really liked it.



Ed. note: Augustine Medical (maker of the Bair Hugger) has a new parent company name - Arizant Inc. View the new Bair Paws gown and warming unit - and see the fashion show - www.bairpaws.com/arizanthealthcare/bp.shtml. †

Closing Session

By Sophie Taylor, Delegate

The closing session speaker was Lynn St. James, a successful race car driver. She talked about how her dream of driving a race car was transformed into reality. It was interesting to learn car racing is both a team sport and an individual sport. The team is needed for maintenance of the car during the race but it is the individual who has to do the driving. The speech was motivational for women. We can be successful in a male dominated world.

She stated that “women can do whatever they want as long as they have a game plan, motivation, and a vision.”

After the speech, President Donna Watson reported that during this week of Congress, **there were 7021 attendees, 6515 exhibitors (total 13,536) present. Furthermore, 303 students attended.** □

The new board and nominating committee were introduced. Bill Duffy is our new President-Elect.

Betty Shultz presented the President's Goals. They include:

- Increasing the opportunities for members to grow in AORN.
- Increase the number of states that require a registered nurse in the role of the circulator.
- Improve the communication with members of AORN.
- Establish a coalition of student nurses to assess their needs, so those nurses will seek and maintain membership in AORN.
- Develop a periop curriculum that will serve as an elective in schools of nursing.
- The use of retired nurses on task forces and committees to utilize their expertise and experience.
- Start a Specialty Assembly of retired members whose focus would be mentoring of new nurses.
- Start a Specialty Assembly of military personnel.

At the end of the Closing Session, we viewed a video of “all the fun we had

viewed a video of “all the fun we had this week.” Unfortunately, the quality of it made people look green, all the teal carpets were yellow, and it didn't look like anyone was having any fun. In closing, I would like to say that I had a lot of fun (I wasn't in the video though) and I learned a lot. Thank you for letting me serve you as a delegate! †



Navy Pier is in the center of the photo. This was the site of the Tuesday night exhibitors' party. Note the small beach in the lower right!



Exhibitors' party March 25 at the Navy Pier with a huge band, dancing, food, photos, etc. Pictured L - R: Donna Benotti, Sandy Kim, Kathie Shea, Arleen Sakamoto, Maria Cam

May 7 Chapter Meeting

TIMES: 5:30 p.m. Dinner (optional)
6:00 p.m. Business
6:15 p.m. Program

LOCATION: Eden Medical Center, Conference Room,
20103 Lake Chabot Road, Castro Valley

"Minimally Invasive Total Hip Replacement"

Carol Hutchinson, MD

One Free Contact Hour!

In late March 2002, San Ramon Regional Medical Center became the site for California's first minimally invasive (MI) total hip replacement. The case was circulated by our chapter's own Joy Chau, RN, CNOR.

Two small (two inch) incisions were made for the procedure instead of the typical 10-12 inch one. Besides the obvious cosmetic benefit, the pain and recovery time are significantly decreased as muscles are spread instead of cut. San Ramon's 74-year-old patient was out of bed the day after surgery and ambulating on his second post-op day!

Dr. Hutchinson performed the surgery as part of a national trial involving physicians in Chicago, Portland, OR, Baltimore, Ft. Meyers, FL, and Pittsburgh. About 90 MI hip replacements were performed at these centers from February 2001 through March 2002.

DINNER - \$10 (Catered by Garden of Eden).

Price includes: Chef's Salad, dessert, and beverage.

Dinner reservations must be made by May 3, 2003. No late reservations please!

Make checks payable to: AORN of Alameda County (Include your RN license number on your check).

Mail checks to: Donna Benotti, 815 Estudillo Avenue, San Leandro, CA 94577

AORN of Alameda County provider #00911 approved by the California BRN for one (1) contact hour.

Participants attending the program only must pre-register to receive a certificate at the program's end, or bring a self-addressed, stamped envelope. **Please call Donna Benotti at 510-352-5064 (home) or e-mail her at BenottD@sutterhealth.org or dbenotti@juno.com with questions or CE certificate issues.**

*Celebrate Nurses' Week!
Raffle!*

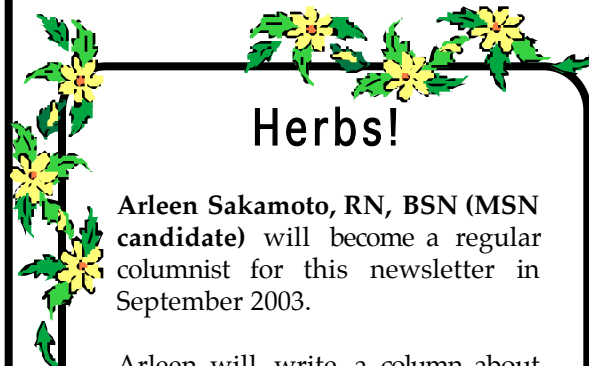
June 4 Chapter Meeting

**Installation Dinner
(No contact hour)**

Location to be announced

www.geocities.com/alamedacounty/meetings.html - updated meeting information and directions.

Call Donna Benotti at 510-352-5064 (home) or e-mail her at BenottD@sutterhealth.org or dbenotti@juno.com for information.



Herbs!

Arleen Sakamoto, RN, BSN (MSN candidate) will become a regular columnist for this newsletter in September 2003.

Arleen will write a column about herbs. More people are using herbs and their use affects us as consumers and as perioperative nurses. Arleen will accept questions from the readership as well as write informative articles to help us become better (or new!) consumers and nurses in relation to herbs.

You can contact Arleen at sakamo2@yahoo.com or 510-845-7986.

**Look for more Congress reports
in the June newsletter.**

**You can read all the reports and
see photos in color on our web
site at
www.geocities.com/alamedacounty/congress2003.html**

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See www.geocities.com/alamedacounty for all the latest information!