



UP TO PAR

Newsletter of the New York State
PeriAnesthesia Nurses Association

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Comparing the Old and New Technology on Repairing an Abdominal Aortic Aneurysm

The mortality rate associated with a ruptured AAA is 100% in those who do not reach a hospital. The mortality rate in those who reach the hospital and are treated by with an open surgical repair (OR) of their AAA is 50% -90%. The current mortality rate of an elective (non- ruptured) AAA repair is 5%.

An aneurysm is a bulge or balloon that forms in the wall of a blood vessel. It is most commonly a result of an accumulation of fatty deposits on the vessel wall and may be related to heredity, trauma, or other diseases leading to a weakening of the blood vessel wall. Over time, the vessel wall loses its elasticity and the force of normal blood pressure in the aneurysm can lead to a rupture of the vessel. If an aneurysm forms in the aorta main it is called an abdominal aortic aneurysm (AAA).

AAA affects 4.5% - 7.7% of the population, and there is an even higher risk of incidence in people with chronic obstructive pulmonary disease (COPD), peripheral vascular disease (PVD), a family history of AAA, and those persons who smoked. The rising median age of the US population has added to an increased prevalence of AAA.

Most people who have an AAA do not experience any symptoms. Discovery of an AAA may be made during a routine physical examination when a doctor may notice or feel a throbbing tender mass in the middle or lower part of the abdomen. The patient is sent for further diagnostic imaging testing such as a CT scan to assess the size and location of the AAA. Others will present in the emergency department with severe back pain. At this point the AAA may be rupturing, and is considered a medical emergency requiring immediate surgical intervention.

The mortality rate associated with a ruptured AAA is 100% in those who do not reach a hospital. The mortality rate in those who reach the hospital and are treated by an open surgical repair (OR) of their AAA is 50% -90%. The current mortality

rate of an elective (non- ruptured) AAA repair is 5%.

The first prosthetic aortic graph used to repair a ruptured AAA was performed in the early 1950's. This was the beginning of a new era in which this fatal condition could be treated. Doctors Creech, DeBakey and colleagues are responsible for developing the standard OR procedure which is currently used for treating an AAA.

OR of an AAA is performed by a qualified vascular surgeon in the operating room under general anesthesia and can take about three to four hours to complete. The surgeon accesses the aneurysm through an incision in the abdomen. The aneurismal portion of the vessel is cross clamped while the synthetic graft is sewn into place.

In the early 1990's an alternate procedure to repair an AAA was described by Parodi, and is referred to as endovascular aneurysm repair (EVAR). The AAA is repaired with an endovascular stent graph. This graft is a tube composed of fabric supported by metal mesh called a stent. The stent is designed to fit tightly within the vessel wall above and below the aneurysm. The stent graft is stronger than the weakened artery and allows for blood to continue flowing through the artery without pushing on the bulge.

The endovascular stent graft is designed to prevent the aneurysm from bursting. An EVAR is performed by a vascular surgeon by making two small incisions (puncture sites), one in each groin in order to access an artery or vein. The surgeon is then able to insert long plastic tubes called catheters where the devices are carried to the

aneurysm site via the blood vessels. Once the surgeon has determined the endograph is in the correct position, the graft is deployed in the vessel wall. This procedure is either performed with sedation and regional anesthesia, or under general anesthesia. It requires the use of fluoroscopy.

One of the contributing factors leading to a high mortality rate with a ruptured AAA is that only a vascular surgeon is qualified to treat this surgical emergency. When a patient presents with a ruptured AAA the patient has a large amount of blood leaking into their abdominal cavity. The patient requires many blood transfusions to stabilize their blood pressure and replace the blood volume lost. The transfusions are started in the OR but continue during the patient's recovery in the PACU and then the intensive care unit. The patient

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COPY SUBMITTAL DEADLINE:

Deadline for submitting material for next issue of *UP TO PAR* will be **FEBRUARY 1, 2010**. Please forward all articles to NYSPANA or to:
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Mission Statement

The New York State PeriAnesthesia Nurses Association advances nursing practice through education, research and standards.

From The President



Thank you for the honor and privilege of serving as NYSPANA President. So that you might know me better, I will share some of my family and professional background. I am the middle child of three. My parents owned and operated a grocery store/meat market plus a small farm in Carthage, New York. The entire family worked together from the time we were very young. A strong work ethic, honesty, politeness, organization and integrity were core values instilled within us.

My mother tells me that from the time I was about four years old, I started talking about being a nurse when I grew up. That goal continued through high school when I became a "Candy Stripper". I knew positively then this was my passion and calling. I attended a two year Nursing Associate Degree program and later went on to complete my BSN.

My first nursing job was at Albany Medical Center (AMC). At that time, a unique program was offered for two year graduate nurses. I worked on a medical/surgery floor for two months and then every two months thereafter rotated to a different nursing specialty over a period of one year. There was always a nursing instructor available for support. Would you believe my wage at that time was \$1.15 an hour and I thought that was great. At the end of the year, I definitely knew I wanted to be a critical care nurse. I worked in ICU for a few years and then moved on to an immediate post-op open heart unit. What an incredible learning experience it was. I eventually became the nurse manager of the unit.

I have been a PACU nurse since the mid seventies and I attribute my success in the various roles I have assumed, to my family core values and the supported learning at AMC. As I enter my forty-second year of nursing (yes that is 42), I share with you the importance of integrity, honesty, compassion, communication, organization, problem solving, mentoring, and networking. Our organization continues to grow thanks to each of you. It is up to each perianesthesia nurse to become involved in the molding of our future. Challenge yourself to grow.

There is support from NYSPANA/ASPANA to assist you with research, becoming certified, being a leader, or other numerous opportunities. The next time you are attending a local or NYS meeting, please ask a co-worker to join you. The rewards of seeing that nurse blossom and grow will be immeasurable.

As President, I will support each of you with your needs and growth. I will continue to be available to the Districts that are working hard in pursuit of establishing a firm foundation upon which to go forward. The Buffalo District is doing well with a new beginning, thanks to the efforts of many. New York City (NYC) now has a new District President and plans are being laid for the next NYSPANA State Conference in 2010 in NYC. The Syracuse District is becoming stronger with more meetings and educational offerings. So please jump on board and watch the rewards you reap be so much more than what you give.

As Margaret Thatcher said: "What is Success? I think it is a mixture of having a flair for the thing that you are doing; knowing that it is not enough, that you have got to have hard work and a certain sense of purpose."

Judy Sargalis Sears, RN, BSN, CPAN

From The Past President



What a fast year! As an organization we had growth in numbers (810 members at one point), but faced many District and financial challenges. This is not surprising, given the national economic situation.

The Buffalo area is up and running with Dianne Lysarz doing a fine job. Mary Ellen Nowak and Susan Novak are on her board. Her area favors all day seminars and has had successful turnouts in the fall and spring. Syracuse is restructuring and had a spring workshop at St. Joseph's Hospital Health Center and has a fall seminar planned. Tim Clark and Maureen Iacono are the Syracuse District contact people. Our biggest "find" was Anne Federico (President of NYC) and Evelyn Codd, both working in NYC. They will help host the 2010 State Conference. The local members have been requesting this for a long time. Check the web site for a final October 2010 date.

We did not win the Gold Leaf Award, but I am confident we were close. Pennsylvania won for the first time and we were very happy for them.

We have had to tighten our budget and will be considering "going green" after our spring issue of *Up to Par*. Savings would be over \$5000.00/year. This has been an agenda item for a year with long debates and no resolution. We, for the most part, enjoy getting it in the mail and feel we read it because it is delivered. Katrina Bickerstaff, our Regional Director, states that Maine, New Hampshire / Vermont, Massachusetts and Connecticut have all gone paperless and saved a lot of money. Pennsylvania sends out a bi-annual newsletter. However, Joni Brady, our *Breathline* editor, stated ASPAN had issues with "going green". Readership is only 10 % (web hit tracking numbers) even with two e-mail reminders. *Breathline* is developing a survey to go out in *JoPAN* since it still mailed to ASPAN members. I am confident we will reach a mutual decision under the direction of Judy Sargalis Sears!

As immediate past president, I would like to get the research committee up and running. Your District Presidents will be e-mailing you regarding our activities.

Thank you for the opportunity to serve as your President.

Cindy Veltri Lucieer, BSN, RN, CAPA

NYSPANA District #9 Presents MD Sandra Haynes Hyperbaric Oxygen Therapy

When: December 1, 2009 -- at 6pm

**Where: 26 S. Washington St. - Binghamton
(Lourdes Hyperbaric Building)**

Light Supper will be provided

**Please RSVP to Jenny @ 607-584-0187
by November 25th**

From The Editor



Patient Satisfaction In The Ambulatory Surgery Center

Having worked in ambulatory surgery centers for the past 11 years it is apparent patients have a more relaxed, satisfied outcome. There are relatively few complaints and those complaints are opportunities in which to make the next patient's visit a positive one. This makes the satisfaction survey so important. We are able to take the opportunity to fix a problem when we are notified. Most patients may not report a problem or mishap (1 in 4) but they will tell scores of family, friends, and/or acquaintances and that is just not ideal for repeat business. Our patients are now our customers and customer satisfaction is paramount.

Satisfaction not only impacts the center itself, but patients may also choose their surgeon according to where he operates. If they haven't had an optimal experience at one center, they will look elsewhere to have their next surgery. Patients seem more ready to rate their people-related experience rather than their health related one upon discharge. It is imperative all staff consider the needs of their customers, not just physical, but emotional and psychological. All staff includes all those the customer comes in contact with and it starts with the anesthesia interview. Staff doesn't mean just the nursing staff either. Customers even report on their admission/registration process and their anesthesia provider, as well as pre/post-operative experience.

Patients today are more knowledgeable and they take the time to research not only the type of surgery they will have, but the facilities and surgeons who perform them. They also depend on the past experience of family and friends to guide them in their quest for the right center.

Remember, first impressions are most important. Customers will report on the willingness and helpfulness of the staff member during their stay. Patients are anxious, nervous, scared, and they depend on the person who they first come into contact with to help alleviate those feelings. Sometimes it is only a smile, a hello, or a touch that helps guide the patient through a positive experience. I try to think of my customers/patients as my parent/child/sibling etc. I want to treat them the way I would like my own family cared for.

My employer, Specialty Surgery Center of Central New York, has a "user friendly" satisfaction survey that has been a work in progress. We are always thinking of new ways to make our customer's experience a positive one. It always begins with a massage and ends with a potted violet, our gift, on the way out the door. Our survey has changed twice since my employment in 2004 to make it easier for the customer to fill out. A staff nurse compiles the results, assesses the data and we incorporate a plan of action for making our surgery center a more harmonious environment. We regard every opportunity as a way to make the next patient/customer experience as ideal as possible.

*Michele R. Rossignol, RN, CAPA
Fay Friedman, CMT*

REFERENCES

SurgiStrategies Solutions for Outpatient Care, *Patient Satisfaction in an Ambulatory: The Importance of a Patient Survey*, Surgery Center, by Laura Grigor, MSM, 8-22-08. LJISLANDS@aol.com



NYSPANA Network

District 1 News

On September 15th we had a well attended meeting at Brookhaven Memorial Hospital. Dr. James A. Sapala spoke on the topic of : *Sapala-Wood Micropouch /Gastric bypass*. On November 14th, we will be hosting an ASPAN Seminar: *The Complexities and Challenges of Perianesthesia Nursing: Across the Ambulatory and Perianesthesia Continuum*. Wanda Rodriguez, MA, RN, CCRN is our speaker. The seminar will be held at the Islandia Marriott/Long Island. In addition, in recognition of PANAW we are planning our winter conference for February 6, 2010 please save the date!

Carole Capps RN , BSN, CPAN, President

District 9 News

District 9 held an ASPAN Seminar on September 19, 2009. Kim Noble presented *Perianesthesia Nursing: A Systems Review of Pathophysiology*. Kim managed to make pathophysiology quite interesting! This was a great review for all nurses, especially those preparing for the certification exams. Thank You to Kim and all involved with making this a successful day!!

If anyone is interested in running for District or State office please contact me at 607-584-0187 (work) or via email JSeliga@lourdes.com.

Jenny Seliga, BSN, RN, President

District 6 News

On October 10, 2009, District 6 presented an ASPAN Seminar, *Foundations of Perianesthesia Practice*. This was the first seminar hosted in NYC for several years. Held at New York University Langone Medical Center on Manhattan's East Side, 81 individuals attended. Not only were the attendees from the five boroughs, but there were registered nurses from California, Indiana, Virginia, Massachusetts and Vermont. Many people in attendance were happy at the prospect of seminars in NYC in the future. Hopefully, we will be able to keep them coming! NYC will present for Perianesthesia Nurse Awareness Week, a CPAN/CAPA Certification Review on February 6, 2010. Also, in October, District 6 members were sent a needs assessment via "survey monkey". Approximately 120 surveys were sent out by e-mail to evaluate the educational needs of District 6 members. Results are still being tabulated. So if you have not done your survey, please submit ASAP.

Anne Federico, President

District 8 News

ASPAN Seminar: District 8 presented an ASPAN Seminar September 12, 2009 at the Holiday Inn in Fishkill, NY. NYSPANA's own Wanda Rodriguez, MA, RN, CCRN presented the *Perianesthesia Certification Review*. Over 45 perianesthesia nurses attended the seminar and received information regarding ASPAN, NYSPANA and CAPA/CPAN certification. Our appreciation to Diane Alexander, RN, CPAN, Doreen Dozier, RN, MSN and Pamela Werner, RNC, CAPA for volunteering their time to bring this educational opportunity to District 8. To those sitting for the exam, Good Luck ! Your colleagues are proud of you for accepting the certification challenge.

Seminar Hosts: Seminar hosts and co-hosts are always needed. As a host or co-host you receive free registration to the seminar. Please volunteer your time to help District 8 present future seminars. Contact Maryanne Carollo, RN District 8 President at 914-242-8176 or MCarollo@nwhc.net leaving your name and contact information.

Maryanne Carollo, BS, RN, CAPA, President

District 14 News

Fall has arrived! Our kick-off meeting was held on October 13th at the new URMC Surgical Center at Sawgrass. The topic "Women's Urological Health Issues" was presented by Pam Wigent, RN, NP, and Sean Muldering. The new center is beautiful and a special thank you to Jean Gumina, Nurse Manager and her staff for their hospitality and tours!

Nineteen members of District 14 traveled to Albany for the NYSPANA State Conference held October 16-18. The fall foliage made it a pleasant, colorful drive down and the interesting topics and speakers made it a rewarding, educational weekend.

On November 3rd, our District meeting was held at Rochester General Hospital. The topic "Be The Match; Marrow Donations and Transplants" was presented by staff from the SMH Blood and Marrow Transplant program. Many thanks to Sharon Swift, Anne McKenna, and Lucy Medow for their excellent and informative presentation.

Planning continues for our Annual One Day Workshop being held February 6, 2010 during Perianesthesia Nurse Awareness Week. Anyone interested in helping with the preparation or planning may contact Susan Alati at 585-750-7930 or salati@rochester.rr.com. **Please remember to check your email in December for an "electronic" brochure.**

NYSPANA District 14 Educational Scholarships are available to all District 14 members. Applications must be submitted at least 30 days before the educational event. Copy of the application can be requested from our secretary, Sally Sackett at salswim@rochester.rr.com. The scholarship amount will be pre-approved but reimbursement will be mailed to the recipient after attendance to the educational event.

District 14 would like to congratulate and recognize our 2009-2010 NYSPANA State President. Judy Sargarlis-Sears, RN, CPAN is currently a PACU nurse at Strong Memorial Hospital. We are proud of her and know she will be a great asset to our organization!

Susan Alati, BSN, RN, CAPA, President



NYSPANA Network

District 10 News

Thanks to all for attending the NYSPANA State Conference. I thank my officers for their hard work and dedication in making the conference come together. We are grateful for the vendor support that helped keep costs down.

We started our year with St Jude’s Medical presentation on Spinal Stimulators at St. Peter’s Hospital. Our next meeting will be at Saratoga Hospital. We still need hosts for two spring meetings. Please contact me for information.

Sandy Lowery continues as Certification Coach. She can be contacted at SLL325@aol.com.

Barb Ochampaugh, RN, President

District 13 News

District 13 had an ASPAN Seminar on Saturday, Nov. 7th. *Complexities and Challenges of Perianesthesia Nursing; Across the Ambulatory and Perianesthesia Continuum.* Wanda Rodriguez, MA, RN, CCRN was the guest speaker. It was held at the Syracuse Hotel, Syracuse NY. I would also like to say thank you to Linda Phillips, Ginger Giarrusso, and Maureen Iacono for reaching out to help with this seminar .

We have started a study group of 7 nurses from St. Joesph’s Hospital Health Center for our CPAN certification. We have been meeting once a month at various locations and 4 people will be taking their certification test in November.

Tim Clark, President

Treasurer’s Report

As of October, 2009

Checking	\$3,471.41
Savings	\$19,637.00
Secured Bond	\$10,000.00
	Total: \$33,108.41

Kathy Balog, Treasurer, NYSPANA

District 15 News

District 15 would like to express thanks and gratitude to the Foundation of Sisters of Charity Hospital, Buffalo, New York, for funding the co-hosted seminar on September 26, 2009. The Topic was *Surrounding Your Practice with Excellence: Legalities, Standards and Advocacy*, with Chris Price as our speaker. Attendees were awarded 7.25 contact hours from the ANCC (American Nurses Credentialing Center). The seminar was successful and full of valuable information. Again, Thank You to the Sisters of Charity Hospital Foundation, to ASPAN and to Chris Price.

District 15 is proud to announce the presentation of another ASPAN Seminar, *Pediatrics: Little Bodies, Big Differences* (7.25 contact hours are offered) with Dolly Ireland as our speaker on Saturday, January 30, 2010. The goal is to provide nurses practicing in the perianesthesia setting with the most current evidence based information on the care of pediatric patients during anesthesia. The location is to be announced. Please contact Dianne Lysarz at: dlysarz@roadrunner.com or call her at 716-698-9000 for more information.

District 15 Board of Directors is in need of a secretary. If you are a perianesthesia nurse who is interested in learning more about the organization and your specialty, please contact Dianne Lysarz, President of District 15 at dlysarz@roadrunner.com.

Dianne M. Lysarz RN, CPAN, CAPA, President

Website

The website is in the process of being updated. I apologize for the long delay. We are working on resolving the issues to avoid this in the future. I hope by the time this issue of UTP is published, you can visit and find items of interest. I’ll be adding some links given to us at the NYSPANA State Conference in Albany. I’m also adding some new education sites for contact hours; some free of charge. Be sure to prepare and take advantage of the free contact hours offered during PANAW week. There is usually a limit but an exceptional value for turning in you JOPAN education items. Send along any education items you would suggest to your colleagues and I will add them to the site. Thank you for your support and patience.

Sue Russell, RN, BSN





Governmental Affairs Committee Report

The honeymoon phase with the President is over. The public displays of animosity over health care reform are frightening. Is it racial in nature or just people expressing their displeasure? Commentators are divided in what to call the demonstrations. The President did come to Albany and speak at our local community college. Demonstrators were present. President Obama did acknowledge the governor, but still directed most of his comments towards Attorney General Cuomo.

Who made the announcement that President Obama is discouraging Paterson from running? Paterson does not have the majority of NY voters behind him. His rating has slipped since the senate debacle in the spring. As the fall session begins, can the Senators work together for the good of the State? Will we remember the stalemate and vote them out of office next November? Can turncoat leaders be trusted?

Espada got caught with nepotism and still hasn't paid the money he owes the state. Monserrate is on trial now and the story has changed.

Which side of the mandated flu shot do you fall on? Healthcare workers demonstrated at the Capitol protesting the law. Will the rush to manufacture the H1N1 vaccine mean it is safe? Will complications be seen after it's distribution? The manufacturers are protected from law suits. Who will pay if we are injured from the vaccine?

Over 2000 health care workers attended the April lobby day.

The status of NYS bills that affect healthcare are as follows:

Nursing Care Quality Protection Act (A17521/S3527): Passed Assembly, in Senate Codes Committee.

Education Advancement for RN's (A2264/S4951): in Assembly and Senate Higher Education Committee.

Prevention of Workplace Violence (A2047-A/S4051): Assembly Ways and Means Committee and Senate Rules Committee.

Safe Staffing (A2264/S3843): Assembly Ways and Means and Senate Health Committee.

Stay tuned; be wise to all government issues. Are your representatives voting according to your wishes? Please remember to vote.

Barb Ochampaugh RN, BSN, CPAN

“CAPITALIZING on PeriAnesthesia Nursing”

A big thank you to all that came to the “CAPITALIZING on PeriAnesthesia Nursing” conference in Albany the weekend of October 16-18. One hundred and ten nurses spent their week-end off, networking and receiving 11.25 contact hours. Our hope is that you will be able to bring back new energy and ideas to your perianesthesia practice.

I thank the NYSPANNA Board for their encouragement and support. Your thanks and appreciation is most welcome. To my District officers, members, and helpers, we couldn't have done it without you. We put on a great conference that went well.

We made over \$700 for the Regional Food Bank and \$300 for Breast Cancer. It was above and beyond our expectations.

Our Nurse of Excellence winner was very surprised. I can think of no one more dedicated or deserving from District 10. Congratulations Sophia Haines!

A special thanks goes out to all the vendor support that helped keep the conference costs down.

Barb Ochampaugh, President District 10

Dr. Kim Noble Visits the Southern Tier

On a beautiful, sunny, September Saturday in Binghamton, NY, Kim Noble, PhD, RN, CPAN, graced the local members of District 9 with her presence and offered an inspiring ASPAN Seminar entitled: *Perianesthesia Nursing: A Systems Review of Pathophysiology*.

The program began with a review of homeostasis and cellular functioning. Memories of the first anatomy and physiology classes filled the room following a discussion of the sodium potassium connection and mitochondria, active and passive transport, cytoplasm and the Krebs cycle, aerobic and anaerobic metabolism, and, of course, adenosine triphosphate!

Ms. Noble continued with a thorough discussion of the potential problems that pre-anesthesia and post-anesthesia patients may encounter as well as the inflammatory/immune responses to those problems, especially the stress response and its physiological effects. She discussed gastrointestinal and renal pathophysiology, beginning with the GI tract, the vomiting mechanism and emetic/antiemetic pharmacology together with issues concerning surgical patients and renal disease.

Next, on the agenda, was neurologic and endocrine pathophysiology. She discussed how all those systems are affected by surgical and anesthetic interference including paralytic agents, pain and temperature regulation, and how the endocrine system works to maintain homeostasis. Saving the best for last, the pulmonary/cardiovascular pathophysiology was presented which encompassed the purpose of surfactant, the importance of cardiac output and the seriousness of shock. Several examples of case studies were presented for the participants to use their critical thinking skills.

The day was a success, knowledge was imparted, participating members had a chance to interface with one another and contact hours were granted. Many thanks to Dr. Kim Noble for enhancing the learning of all perianesthesia nurses, especially those of District 9.

Jennifer S. Johnson, RN, BC, MA, MSN

Comparing the Old and New. . .

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undergoing abdominal surgery over three to four hours experiences a large fluid shift from the intravascular system into the interstitial space. The patient is hypothermic, hypovolemic, and critically unstable. They are at high risk for a post operative myocardial infarction and these patients usually have added co-morbidities, such as hypertension, COPD, PVD, as well as other disease factors putting them at higher risk for mortality and morbidity.

Since the advent of the EVAR approach to repair an AAA, there has been a large decrease in the number of patients requiring the OR of their AAA. This is a contributing factor in the reduction of patients requiring the repair of a ruptured AAA. But as a long time member of the PACU staff this writer has also seen a reduction in the number of elective OR procedures of AAA and an increase in the number of elective repairs of an AAA using the EVAR approach. This may be due to a better screening process with elective surgery for the AAA.

Patients undergoing EVAR of their AAA are more stable surgical candidates. They are admitted to the hospital the day of surgery for an elective procedure. The patient has seen their medical doctor, usually a cardiologist for cardiac clearance to see if the heart is stable enough. If the patient has a history of pulmonary disease they will see their pulmonologist. Patients will have a complete medical work-up to help prevent complications from undiagnosed medical conditions. Elective surgery under the most optimal conditions will lead to a better patient outcome with either procedure but there is still a potential risk for complications.

Patients undergoing OR of their AAA are at a 5% risk for mortality. The risk is less than 2% in elective EVAR of an AAA. The increased mortality in the OR is most likely due to cross clamping of the aorta. This is not required during the EVAR approach. So why do we not perform the EVAR approach on all patients? All patients are not candidates for the EVAR approach. Patients are required to have a CT scan specific for the assessment of the patient's anatomy to determine whether they are a candidate for the EVAR approach. The CT scan is able to show the surgeon the size of the aneurysm, location, and whether there is ample space to place the stent correctly. The aneurysm

must be above or below the renal arteries to prevent them from being blocked by the stent. The surgeon must be able to access the aneurysm via the vascular system, so there should be no significant vascular blockage. Since the EVAR approach is not repairing the aneurysm itself, there is still a risk for rupture, and patients choosing this approach must agree to a lifetime of monitoring their AAA. This requires a yearly CT scan of the abdomen and assesses growth of the aneurysm or leakage of the stent graph (endoleaks). There are four different types of endoleaks. If any type of leak is noted, the patient may be required to have additional surgery to repair it.

Required yearly CT scans may lead to complications. Patients requiring repair of an AAA are usually advanced in age. As one ages, the body organs don't function at optimal level (kidneys). The dye used during the CT scan is excreted by the kidneys and can lead to kidney dysfunction, renal insufficiency, and renal failure. There is a new device that can be inserted to the outside of the endograft to help monitor the aneurysm sac pressure and can be added to any brand of endograft. The manufacturer is Cardiometrics (EndoSure) and may help those patients at higher risk for kidney insufficiency.

The EVAR approach has been available for less than twenty years and the long term efficacy has not been determined. As the stents have been modified and improved by different manufactures, there have been very few complications. The patients undergoing EVAR are usually able to go home the next day with minimal pain.

Consideration of OR for an AAA depends on the patient and their surgeon. The normal size an aorta is approximate 2cm and grows approximately ½ cm per year. Patients presenting with an aneurysm of >5 may be considered surgical candidates. Patients younger in age and those who cannot commit to a lifetime of surveillance of their AAA should consider the OR approach.

EVAR of an AAA may not be for everyone. Only the patient and their surgeon can determine which procedure is best. As advances are made in the manufacturing of the endograft, treating an AAA with EVAR will someday become the industry standard.

Jadene Butow-Bonardi

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A Call To Network

We welcome input from the membership:

- Have you attended an informative lecture?
- Have you had to look up information on a new drug?
- Have you taken care of an interesting patient and can share the experience and outcome?

Networking and sharing is what we are all about, please E-mail or Fax us (the numbers are in the inside cover). There is great satisfaction seeing your article and name in print.

Thanks in advance!

Michele Rossignol, RN, CAPA
E-mail: michele_rr2003@yhoo.com



UP TO PAR

Newsletter of the New York State
PeriAnesthesia Nurses Association



ASPAN Specialty Practice, National Conference



Now Forming!

ASPAN

Informatics

Specialty Practice Group (SPG)

We have been trying to organize the Informatics SPG for a year now and we are very close to meeting the charter requirements.

If you are a **current** ASPAN member and are .

- Working in the informatics field
- Involved in medical information system program development
- Responsible for teaching the go-live process
- Interested in the growing field of nursing informatics

. . . then, the **Informatics SPG** is for you!

If you have not already contacted Dolly Ireland (idolly949@msn.com) and added your name to the charter list of interested members . . . please do so . . . today!

Component Presidents:

We hope you'll spread the word to your component members.

Component Newsletter Editors:

Please include this information in your next newsletter.

The purpose of Informatics SPG is to promote collaboration among perianesthesia nurses working in or interested in the informatics field.

Members will share knowledge about ASPAN Perianesthesia Data Elements and the incorporation of this and other relevant electronic applications/resources designed to support evidence based perianesthesia practice.

We plan to hold our first organizational Informatics SPG meeting during the ASPAN National Conference in New Orleans in April, 2010. Hope to see you there!



New Orleans: A Musical Experience

New Orleans is a city with perfect pitch. Our affair with music and dance began in 18th century ballrooms, at the old French Opera House, with tribal rhythms and rituals of slaves in Congo Square (now the site of Louis Armstrong Park).

For 300 years, music has reverberated throughout the city, constant as the river, diverse as the gumbo of people who settled here. The 2009 Grammy Awards were an indication of just how strong, how totally entertaining are the sounds of the city of New Orleans. Nearly a dozen 'Grammies' were presented to native Orleanians . . . awards for jazz, Cajun, Zydeco, rhythm and blues, for rock, rap and pop. Finding great music and dance here is as easy as getting a Hurricane on Bourbon Street.

Visitor Information

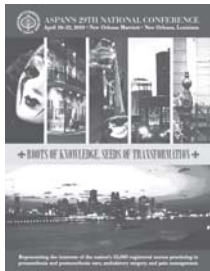
Before you set out, check on the festivals of the city, where live music will always be the highlight. There's an event schedule at the New Orleans Metropolitan Convention and Visitors Bureau, 2020 St. Charles Avenue, or the French Quarter location at 529 St. Ann Street. (Phone: 504-1-800-503 NOLA.) Pick up a copy of Off Beat, a monthly music magazine, and GAMBIT, a very popular weekly alternative paper heavy on entertainment news. And get into the groove before you arrive: log on the internet to listener-supported local radio station WWOZ, 90.7FM, a mix of just about every conceivable sound and dedicated to the city's musical heritage.

Start the first day of your musical journey with an old New Orleans traditional breakfast . . . alfresco on hot, crusty beignets and a cup of delicious café au lait. The CAFÉ DU MONDE at the French Market, opposite Jackson Square, is open 24/7. No matter how early or late you arrive, you'll have lots of company on the terrace. You may catch some early street performers or just enjoy watching the rhythms of the passing crowds, carriages and market vendors.

City Tour

Get acquainted with a few of the city's 17 different historic neighborhoods with a city tour. The French Quarter, the Faubourg Marigny and the Faubourg Tremé (home to Storyville, and one of the oldest black neighborhoods in the U.S.) in particular have nurtured New Orleans music notables. STORYVILLE is the area known for the old benevolent society sites, and the homes and haunts of early masters like Buddy Bolden, Kid Ory, Louis Armstrong, Jellyroll Morton and King Oliver. For lunch, try more New Orleans originals: a muffuletta and an ABITA BEER or BARQ's root beer at the Central Grocery or at the Progress Grocery, both in the 900 block of Decatur. Take your food and beverage over to the Jackson Square, or a spot along the river levee, the MOON WALK, or WOLDENBERG PARK. Watch the boats coming up and down the busy Mississippi, or enjoy the street performers. Or, pick one of the chic eateries of Riverwalk's three shopping levels, all of which open onto the river . . . or check out the fountain at scenic Spanish Plaza.

Visitors Bureau, 2020 St. Charles Avenue.
New Orleans Metropolitan Convention and Visitors
Bureau. 2020 St. Charles Avenue, New Orleans, LA
70130 504-566-5019. www.neworleanscvb.com.



Mark Your Calendars Now For ASPAN's 29th National Conference
"Roots of Knowledge, Seeds of Transformation"
 April 18-April 22, 2010 • New Orleans, Louisiana

Topics to include:

Post Anesthesia Complications • Neuro Assessment • Ambulatory Surgery • Pediatrics • Safety
 Anesthesia Agents • Cardiac Issues • Research Informatics • Staffing • Evidence Based Practice
 Anesthetics • Pregnancy Issues • Pain Management • Diabetes Preop Update

MANY MORE HOT TOPICS WILL BE INCLUDED!

Full 5 Day Conference Registration Fees:

If you register before 3/1/10:	Postmarked after 3/1/10:
\$373.00 Member	\$416.00 Member
\$534.00 Non-Member	\$562.00 Non-Member

Note: Pre and post conference offerings are additional costs; above prices are for the full five day National Conference held April 14-April 18, 2010.

Attendee could earn 25-35 Contact Hours at
VERY, VERY low cost per Contact Hour!

New Orleans Marriott
 555 Canal St. New Orleans, LA 70130

Hotel Room Rate:

\$189.00 per night plus tax Single
 \$199.00 per night plus tax Double

Registration brochures will be available from the National Office in December 2010

Attending ASPAN's Component Leadership Institute



**Copy Deadline for
 the Next Edition of
 UP TO PAR
 February 1, 2010**
*Please be punctual
 with your articles . . .*

Forward all articles to
 NYSPANA or to:
 Michele Rossignol
 Editor
 9241 Wilson Cove Road
 Canastota, New York 13032
 Home: (315) 697-2820
 or Email Articles to:
 michele_rr2003@yahoo.com

Because of the support and generosity of NYSPANA, I recently had the opportunity to attend The Component Institute in Portland, Maine. This conference is designed to strengthen the management skills of the Component/District Leaders, thereby strengthening ASPAN.

Located at the Holiday Inn By the Bay, the Institute covered a variety of topics using different teaching methods. When we started on Friday afternoon, we separated into groups to discuss topics such as education, membership, communication, resource development and strategic planning. ASPAN members from around the United States shared their successes and strategies in the above areas. We all left with great ideas to bring back to our Districts/Components. Later that evening, everyone was treated to a seafood bounty and the opportunity to network with other attendees.

On Saturday, we got down to business bright and early. There were seven sessions. Each was given by an ASPAN officer. President-Elect Kim Kraft did an interactive presentation regarding leadership styles. I am sure many people were surprised by the results of this self-assessment. What do you think you are, dominant, influencing, steady or conscientious?

Next was a session on bylaws, policy, and procedure. I know this cleared up a lot of confusion for a lot of people. Finding "techno-balance" followed. This introduced us to many different uses for the computer to enhance communication. Conference calls, webinars, and websites! Oh, my! For those of us who are only semi-computer literate, this session provided us with many options to ease communication difficulties. Rounding out the day were sessions about fiscal responsibility, educational and clinical resources. A lecture by ASPAN's Director of Research, Jacqueline Ross regarding evidence-based practice and research finished the day.

On Sunday, after an extra half-hour of sleep, Terry Clifford, President of ASPAN, started our day with a lecture on "Robert's Rules of Order". As a result, our own meetings will be more orderly and more organized. The final session of the day was given by Dolly Ireland, Director of Development, regarding legal issues facing individuals and organizations.

I was fortunate to have the opportunity to attend the Component Development Institute. The speakers were all experts in PACU issues. They were all engaging and articulate. I look forward to using all I learned in my role as a NYSPANA District President.

Anne Federico, District 6 President





FREE (or nearly) In New Orleans

The real magic of New Orleans isn't for sale. It's absolutely free, in many instances. If you're counting your vacation dollars closely, you've come to the right spot. They don't call Mardi Gras "the Greatest Free Show on Earth" or New Orleans "the Big Easy" for nothing. Nothing (or nearly) is what you pay for some great times here.

Visitor Information

Stop by the New Orleans Convention and Visitors Bureau Visitors Center at 2020 St. Charles Avenue, or the French Quarter location at 529 St. Ann Street. Find out what's going on in the city and how to get around with brochures, such as our Official Visitors Guide, or simply call us at 1-800-503-NOLA. Another place to gain full information is in the 500 block of Basin Street. Log onto our website for upcoming events and to download helpful info at: www.neworleanscvb.com.

Bargain Transportation

The Big Easy is a way of life that includes getting around without blowing your budget. The colorful public transportation is cheap, simple to access and efficient.

Airport Service

Think the \$15 Airport Shuttle (already a deal) is the best you can do from the airport? Try the public airport bus. It will get you from the terminal to downtown for around \$1.50. The shuttle is operated by Jefferson Transit, and the public bus is a service of the Regional Transit Authority.

City Transport

For a measly \$1.25 you can ride the historic trolleys in New Orleans. The St. Charles line will take you from downtown to uptown, along the glamorous avenue and to the Audubon Park, Tulane and Loyola Universities. Continue on, if you choose, and ride the streetcar into Carrollton. Take the Canal Streetcar all the way to the historic cemeteries, or choose the one that turns up Carrollton Avenue and drops you off at beautiful City Park and the grand Museum of Art. And all for just \$1.25!

Fest Fever

Every month in the Crescent City you'll find events where the fun (and often the music and art viewing) is free, such as the French Quarter Festival in April and the Satchmo Summer Fest, usually in August. In December, the holiday celebrations include mega freebies: concerts, cooking demonstrations by master chefs, holiday home tours, neighborhood light displays, a caroling concert in Jackson Square, and more.

French Quarter

Aside from the Mardi Gras, the French Quarter itself is a wonderful free show.

Free French Quarter Guided Tour:

A National Historic Landmark, the French Quarter falls under the aegis of The National Park Service. Really nice Park Rangers will lead a daily tour for exactly 25 people at 9:30 a.m. Get there at 9 a.m. to get a place. One ticket per person, no absentee pick-ups. The address is 419 Decatur. Prowl the French Market's seven buildings, from the Bazaar and the Red stores to the Flea Market for souvenir bargains in local productions, tee-shirts, jewelry, masks and assorted oddities. Window shop along Royal, Chartres, Bourbon and the narrow French Quarter streets for lots to look at including exceptional antiques and a wide variety of art galleries in addition to eccentric wares, strange cards, posters, clothes, Voodoo potions, jewelry and costumes. Stroll around Jackson Square and look over the artists' shoulders as they sketch and paint. Enjoy the street musicians and dancers, and mock the mimes. At the Café Du

Monde, less than \$5 will buy you a cup of great coffee and an order of beignets, along with a window onto the heart of the French Quarter. See the Spanish-inspired architecture of historic St. Louis Cathedral. Many concerts in this great Basilica are also free. The former William Faulkner House at 624 Pirate's Alley offers a stunning selection of books. The Pharmacy Museum at 514 Chartres is worth a visit and the admission is very low. Learn how the French and Spanish got here and how the Creoles lived. The Louisiana State Museum at 751 Chartres (alongside the Cathedral) maintains five French Quarter sites – The Presbytere, The Cabildo, Madame John's Legacy, The 1850's House, and the U.S. Mint. Each is well worth a very reasonable admission price. The changing exhibits at the Historic New Orleans Collection, 533 Royal, are free and it's an unbelievable bargain. Other historic sites and museums, like Hermann Grima House, Beauregard-Keyes, Gallier House and the Old Ursuline Convent only charge in the \$4.00 to \$6.00 per person range.

River Walking Stroll

Walk the magnolia landscaped Woldenberg Park. See the vista in and from Spanish Plaza with its most refreshing fountain, pretty mosaics and a cinematic view of the great River. Window-shop upscale emporia at Riverwalk, the Jax Brewery and Canal Place. Board the free ferry to Algiers' and the Vantage Point at Riverwalk landing. At twilight, this 45-minute round trip cruise is spectacular. The panoramic view of the Vieux Carre from across the river is worth the expedition any time of day.

Eat a "Lucky Dog"

"A piece of bread, a hunk of meat, and all the mustard you can eat." That's what you get and it's about what you might pay for half a muffuletta at Central Grocery. The 'dogs' are sold at several corners in the Quarter in weenie-shaped mobile carts.

Music, Music, Music

There's something beyond the street musicians, frequent festivals and free concerts you can always count on: an admit price of \$5.00 gets you into a performance by a jazz legend at Preservation Hall, 726 St. Peter Margaritaville, at 1104 Decatur, offers live music all day and into the night - no cover.

The Graveyard Shift

See the statuary in the famed "Cities of the Dead" for free. Marie Laveau spends her afterlife at St. Louis Cemetery #1, at St. Louis and Basin, just outside the Quarter. Anne Rice once staged her own funeral at the Lafayette Cemetery, where her vampire Lestat broods through his unlife in the Garden District at Prytanian and Washington. Be sure you check the cemetery hours before you go...they open late and close early. The Metairie Cemetery, just west of the City, provides free audiocassette tours of the grounds that hold the remains of Confederate soldiers and the jazz great Louis Prima. Metairie Cemetery's grounds and statuary are magnificent testimonials to the deceased.

Central Business & Arts District

The SoHo of the South, the area on the uptown side of Canal Street, from St. Charles Avenue to the river, is a trove of free and low-cost entertainment and the heart of the arts in New Orleans. Get the lay of the land with a visit to the Preservation Resource Center at 923

Tchoupitoulas in the Central Business District. Concise, informative vignettes cover the highlights of each historic neighborhood. Great free map with lots of pictures. Bonus: hands-on course in New Orleans architecture using scale models of Creole and raised cottages and a shotgun house. The stunning and cavernous Contemporary Arts Center at 900 Camp Street houses changing art exhibits. Free on Thursdays. Just a few bucks otherwise. Just a block away is the exciting World War II Museum. This museum of our victory over the Nazis and the Japanese is a must-see, especially for the historians in your group. The main arts thoroughfare is Julia Street, dotted with galleries like Simonne Stern and Arthur Rogers. While you're gallery hopping, check out the Thirteen Sisters, a collection of 19th century row houses in the 600 block of Julia.

Street Savvy

Hop the Magazine Street public transit bus to explore an area so cool, only Greenwich Village could give it a run in a hipper-than-thou contest. The street name comes from French Magasin, for "shop" and you'll see just about every trendy item around its six miles of art galleries, funky clothes, vintage accessories, wild costumes, wigs, masks and beaucoup antiques. There are over 80 shops of collectibles, used and original jewelry, bookstores and interesting restaurants.

Audubon Park

Known for its moss-hung oaks, ponds and laid-back ambiance, Audubon Park lies just before Magazine Street meets the river. Stroll, run, or bike along the avenue of Oaks, or hang out like the moss and picnic. Bring stale bread to feed the ducks and turtles. If you've got a bike, a great path runs for miles atop the levee, starting just to the right of the Zoo entrance. All free!

St. Charles Avenue & Garden District.

Walk through Audubon Park from Magazine to St. Charles Avenue. At the park entrance take the streetcar back to Canal Street and Downtown...the 13-mile roundtrip passes a stunning array of Creole, Greek Revival and Victorian fantasies. In the Garden District, is a free National Historic Landmark. Check out the many magnificent mansions along the charming streets lined with oaks. The prices are low and include viewing the world's largest live oak stand.

Mid-City

Experience heart-pounding excitement at the historic Fair Grounds Race Course at 1751 Gentilly Boulevard. Not far away is City Park, beginning at picturesque Bayou St. John and Esplanade Avenue, with hundreds of acres of lush oaks, a grand Museum of Art, golf, tennis and picnicking.

Swamp Tour

Take a walk on the wild side at the Barataria Preserve in the Jean Lafitte National Park. No charge except the one you get out of 8 miles of boardwalk and 20 miles of waterway set amid 20,000 acres of swamp, marsh, and old-growth cypress. The nice people at the park service conduct a free daily tour at 1:30 p.m. You'll see alligators, ibises, herons and lots of swamp flora and fauna. Also, check out the periodic moonlight strolls, morning and moonlight canoe treks, and bird watching. All gratis. Check www.nps.gov/jela, or call 504-689-3690, for schedule and directions.

New Orleans Metropolitan Convention and Visitors Bureau.

2020 St. Charles Ave, New Orleans, LA 70130
504-566-5019. www.neworleanscvb.com.

NYSPANA Fall Conference

The NYSPANA annual fall conference "CAPITALIZING on Perianesthesia Nursing" was held in Albany, New York, October 16-18. The planning committee (Cheryl Barnes, Loretta Dorn, Judy Levesque, Sandra Lowery, and Lyn Yates) led by Barbara Ochampaugh, organized an outstanding educational experience for over 100 nurses.

Topics ranged from "Heart Disease in Women", "Aneurysm Repair", "Hip Surgery," "Cochlear Implants", "Regional Nerve Blocks" and "Rare PACU Complications".

Information was presented on "Legal Issues for Nurses", "Glycemic Control in the Perioperative Period", "Pediatric Airway Management", and "Particular Needs of Surgical Patients Who Have Sleep Apnea".

The professional development of perianesthesia nurses in attendance was enhanced exponentially. Each speaker was well prepared and well able to answer numerous questions. The audience was engaged and interested in every lecture. NYSPANA Districts donated beautiful baskets and raised \$775.00 for the Regional Food Bank in Albany. Ten NYSPANA members received mini-scholarships for this educational offering.

Judy Sargalis Sears, NYSPANA 2009-2010 President, delivered an inspiring speech and also spearheaded a "pink basket raffle" raising \$300.00 for the Susan G. Komen Breast Cancer Research Foundation.

The annual NYSPANA award for Excellence in Clinical Practice was presented to Theofista Haines, of St. Peter's Hospital PACU in Albany. She was nominated by her peers who highlighted her compassion, caring, and collegiality. "Sophie" as she is known to her co-workers, "extends" herself to new employees to welcome them warmly and help them feel like they belong. She introduces them to other nurses and invites them to participate and connect with others.

Thank you to all who attended for your generous donation of weekend time and money for charity. You make our component the BEST!!!

*Maureen Iacono and
Cindy Veltri Lucieer*



*Judy Sargalis Sears (current President of NYSPANA)
presents the Nurse of Excellence Award to Sophia Haines
from St. Peter's Hospital PACU in Albany*

NYSPANA

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New Orleans, LA
**“Roots of Knowledge,
Seeds of Transformation”**

Consider attending our
ASPAN National Conference . . .

ASPAN's National Conferences

Future Conference Dates

April 3-7, 2011
Seattle, WA

April 15-19, 2012
Orlando , FL

April 14-18, 2013
Chicago , IL