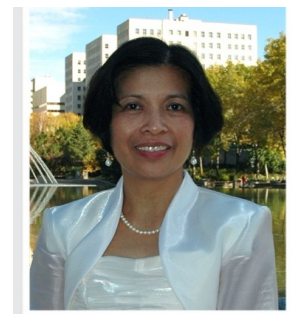


Winter 2012



West Texas- Pan Handle Region



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President's message Ellen Abaquin, RN,

Greetings to all periAnesthesia nurses. February 6th to the 12th is PeriAnesthesia Nurse Awareness week (PANAW). The theme for this year is "*PeriAnesthesia Nurses: A Vital Role in Patient Care*". This week is a special time for us to recognize our unique skills, and expertise in the care of our patients. It is also our chance to appreciate our colleagues in all areas involved in the care of pre and post surgical/procedural patients including, but not limited to preadmission (PAT), preoperative area (preop), and all levels of post anesthesia care units (PACU). Remember that everyone is a critical link to safe patient outcomes.

On February 11, 2012, TAPAN West Texas and Panhandle region will celebrate PANAW at Hendrick Medical Center Shelton Building Conference A from 0900 to 1030. Bring a friend/colleague and join us for a brunch and a chance to win gifts and 50% off ASPAN/TAPAN membership. Doubling the fun this week is TAPAN raffling off one free membership to ASPAN/TAPAN. The only requirement is to send an email to hrobles@sleh.com or herm.robles@gmail.com. Additional information can be found in the winter edition of Eyeopener, which can be retrieved at www.tapan.org or www.tapan-westtexas-panhandle.com

Take pride in what we do. Celebrate being a periAnesthesia nurse.





Life is not a race—but indeed a journey.
Be honest.
Be choosy.
Say “thank you”, “I love you”, and “great job” to someone each day.
Go to church, take time for prayer.
The Lord giveth, the Lord taketh.
Let your handshake mean more than pen and paper.
Love your life, and what you’ve been given, it is not accidental.
Search for your purpose and do it as best you can.
Dreaming does matter, it allows you to become that which you aspire to be.
Laugh often.
Appreciate the little things in life and enjoy them.
Some of the best things really are free.
Do not worry, less wrinkles are more becoming.
Forgive, it frees the soul.
Take time for yourself—plan for longevity.
Recognize the special people you’ve been blessed to know.
Live for today,
Enjoy the moment.



A HAPPY NEW YEAR

Make a Note & Save the Date!

- January 9, 2012 Registration window opens for spring CAPA/CPAN exam
- January 21, 2012 Foundations of PeriAnesthesia Practice, Houston, Linda Ziolkowski
- February 6 to 12, 2012 PANAW Week
- February 25, 2012 PeriAnesthesia certification review, Grapevine, Linda Ziolkowski
- March 10, 2012 Complexities & Challenges..., San Antonio, Wanda Rodriguez
- April 2 to May 12, 2012 Examination window opens CAPA/CPAN
- April 15 to April 19, 2012 ASPAN National Conference, Orlando, FL.



HEY!!!!!!

Editor's Note:

What's TAPANing is the official Newsletter of West Texas—Panhandle Region.

Contributions to *What's TAPANing* are encouraged. All articles and comments relevant to Perianesthesia care must be double spaced and typed. The author is responsible for providing appropriate references for accuracy and reliability of information.

Submission Deadlines:

Feb 15—Spring newsletter
 May 15—Summer newsletter
 August 15—Fall newsletter
 November 15—Winter newsletter

Send comments, suggestions and/or submissions to :

Charon Howell
 602 Cardinal Ln.
 Abilene, Texas 79602
 charsmare@clearwire.net

Just a friendly reminder...

If you change your email address please let Charon know. We E-blast to keep you informed of TAPAN happenings, so help us keep you in the loop!!



Crunchy Toffee Cheesecake

- 2 Pkg (8 oz.) Philadelphia cream cheese, softened
- 1/2 cup firmly packed brown sugar
- 1/2 tsp vanilla
- 2 eggs
- 4 chocolate-covered English toffee bars (1.4 oz ea.), chopped (about 1 cup), divided
- 1 Honey Maid Graham Pie Crust (6 oz)

Heat oven to 350

1. Beat cream cheese, sugar and vanilla in large bowl with electric mixer on medium speed until well blended. Add eggs; mix just until blended. Stir in 3/4 cup of the chopped toffee bars.
2. Pour into crust. Sprinkle with remaining chopped toffee bars
3. Bake 35 to 40 minutes or until center is almost set. Cool. Refrigerate 3 hours or overnight. Store leftover cheesecake in refrigerator



Know Your ACLS Changes

Charon Howell, RN, CAPA

How time flies! Every five years the American Heart Association examines the effectiveness of Advanced Cardiac Life Support, and makes changes accordingly. These changes went into effect January 2011. So in case time get's away from you, like it does for most of us, here are the new guidelines for your consideration.

1. ABC's (airway, breathing, circulation) has long been the cornerstone of effective CPR, but no longer. CAB's (circulation, airway, breathing) are the new replacement with emphasis being placed on quickly initiating chest compressions in an effort to minimize life-threatening loss of heart function. This primarily effects one rescuer CPR, since the clinical setting makes the availability of help a non-issue in most respects.
2. Chest compressions in the adult patient has now changed to a solid 2 inches, as opposed the 1 1/2" to 2" judgment call. Full recoil of the chest is required, and a pace of 100 beats per minute is mandated, replacing "about 100 bpm".
3. Quantitative waveform capnography is now advised for confirmation and monitoring on intubated patients. This continuous measurement provides the partial pressure of exhaled CO₂ in hemoglobin. A dampened waveform can indicate changes in the placement of the ET tube, and also provides a monitor of the effectiveness of ongoing chest compressions.
4. Four new recommendations are regarding medications:
 - A.) Atropine is no longer used in the management of pulseless electrical activity (PEA). This change was made due to no real evidence of effectiveness on the therapeutic level.
 - B.) Adenosine is recommended for the treatment of stable, undifferentiated wide-complex tachycardia in a regular rhythm with a monomorphic QRS waveform.
 - C.) IV chronotropic's are recommended as an effective alternative to external pacing for patients with symptomatic unstable bradycardia.
 - D.) Oxygenation is no longer recommended for uncomplicated acute coronary syndrome. New guidelines state it is not necessary to initiate O₂ unless oxyhemoglobin saturation drops below 94%.
5. Priorities in an emergency situation have changed. In order to prevent interruption in CPR, establishing IV lines, chest x-rays, or delays in the use of defibrillators no longer take precedence over high quality, effective CPR.

In addition, there are new recommendations for the care of stroke patients. The window of time for use of thrombolytics is still 3 hours from the onset of stroke symptoms, but in selected patients this window can be extended to within 4 1/2 hours after symptomatic onset.

You are not required to practice under the new guidelines until it is time to renew. The new recommendations do not suggest that the earlier guidelines are no longer effective, and if you are trained under those guidelines you should continue to use them in your practice until it is time to renew your ACLS. Course completion cards are still valid for two years regardless of the new changes.

Now go save a life!

Onlineacls.com. (2011). Retrieved January 31, 2012, from Health Education Solutions: www.onlincls-study.html#acls.com/article-



STATE OF TEXAS
OFFICE OF THE GOVERNOR

Anesthetics are a blessing to the sick. Without them, many lifesaving procedures would be impossible to perform.

However, as with many medical tools, the use of anesthetics carries risks and requires the knowledge and supervision of medical professionals. Perianesthesia nurses are an integral part of the health care team, working to minimize risks during the critical time around a surgery.

Perianesthesia nurses perform many important duties, both before and after anesthetics are administered. Before surgery, they screen patients for conditions that may affect their care, explain the upcoming procedures and prepare them for surgery. Post-anesthesia care begins from the time surgery is completed and continues until the patient is stable and ready to leave the Perianesthesia Care Unit.

Each February, the Texas Association of PeriAnesthesia Nurses and others designate a week for an awareness campaign to inform the public about the important work of perianesthesia nurses.

At this time, I encourage all Texans to join me in recognizing the contributions that perianesthesia nurses make to the safety and well-being of Texans.

Therefore, I, Rick Perry, Governor of Texas, do hereby proclaim February 6–12, 2012, to be

Perianesthesia Nurses Week



in Texas, and urge the appropriate recognition whereof.

In official recognition whereof, I hereby affix my signature this the 12th day of January, 2012.

Rick Perry
Governor of Texas

Well Wishes for PANAW 2012

To: Texas Association of Perianesthesia Nurses
West Texas and Panhandle Region

From: Jo Rake, RN, MSN, CNE-BC
VP Nursing
Hendrick Health System

Date: February 6, 2012

It is my pleasure to recognize you during this week of special emphasis on nurses working in the perianesthesia areas. Giving care to patients during the perianesthesia time of their surgery is a critical service which requires excellent skills, knowledge, and compassion.

Joining your colleagues in a professional organization such as Texas Association of Perianesthesia Nurses (TAPAN) demonstrates your commitment to excellence and your desire to achieve only the best for your patients. I urge you also to explore the opportunity to be a part of the Texas Nurses Association which serves as a voice for all of nursing regardless of their specialty area. Together, we can achieve much for our profession as well as for our patients.

Enjoy this week's activities and on behalf of fellow nurses and patients, thank you for being there! We appreciate you !

"I wanted to extend a heartfelt thank you to all of the perianesthesia nurses that I have the privilege and honor of working with. Being a Pediatric Dentist I know that the patients that I bring to you aren't always wearing their little halos, however, your patience, professionalism and true passion for taking care of the patient always shines through."

- Seth Ardoin, DDS
Board Certified Pediatric Dentist



ASPAN

American Society of PeriAnesthesia Nurses

Happy PeriAnesthesia Nurse Awareness Week!

February 6, 2012

Dear Colleagues,

PeriAnesthesia Nurse Awareness Week (PANAW), February 6-12, marks a milestone celebration of 25 years recognizing and celebrating our specialty nurses! The theme, "PeriAnesthesia Nurses: A Vital Role in Patient Care" demonstrates the importance of perianesthesia nursing and our practice. Nationally, you collectively care for millions of patients, spanning all ages and populations, from the critically ill geriatric inpatient, to the pediatric outpatient. You are committed to comprehensive knowledge and competencies, grounded in perianesthesia-specific scientific theory. You have a profound impact on pre- and post-surgical and procedural experiences, for our patients, their families, our peers, colleagues, students, and each other. You advocate for quality, patient safety and outcomes. Your assessments and interventions assure patients' best possible future. You are a vital lifeline in compassionate caring and clinical competence.

On behalf of the ASPAN Board of Directors and the ASPAN National Office staff, I applaud your dedication and commitment. Thank you for being BEACONS OF CHANGE and for FOCUSING ON THE FUTURE of our patients and your practice. I know I speak for us all in celebrating YOU and your VITAL ROLE IN PATIENT CARE! Happy PeriAnesthesia Nurse Awareness Week!

Warm Regards,



Chris Price, MSN, RN, CPAN, CAPA
President 2011-2012





West Texas - Panhandle Region

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Lubbock	Deborah Donald-Key	806-791-3210
Brownwood	Suzanne Reyes	325-646-8491
Pampa	Bridget Wheeler	806-664-5008

From the Editor's Desk

Sitting in the lobby of my doctor's office the other day I was watching the other patient's who were also waiting to be seen. Most of them were engrossed in their cell phone and appeared oblivious to anything going on around them. There was no interaction, even with family members, and I realized this was a very familiar scene. Having a fairly low tolerance for boredom, my mind began to wander back to the time when there were no such things as cell phones.

Summer breaks were spent among packs of my friends as we trailed around the neighborhood on banana bikes. Forts were made out of blankets, and old houses were always haunted. We went from one adventure to another, and never touched a TV remote.

Sundays were reserved for church and roast beef. Christmas didn't start until after Thanksgiving, and you got spending money by earning an allowance. Brushing your teeth was not optional, and tattoos were something you only saw on "old guys" that had been in the navy.

Medicine was different too.

We were taught in nursing school that each patient should receive a back rub after their morning care. Our uniforms were white and starched, and our shoes were polished. The stripe on our nursing caps were earned.

We developed an instinct about our patients and how they were doing. Monitors were used on only the sickest patients, and an admission diagnosis of "exhaustion" was not uncommon.

It is said that as we age, we begin to look at our youth as the "good-ol-days", regardless of the era we grew up in. But I wonder in this techno age what kind of memories will be made for new nurses. Will they remember that critical moment

when their gut correctly diagnosed "Mr. Jones", and their actions made a direct impact on his recovery. Will they ever know what it is like to put the patient first, and not the paperwork; or understand the critical need for nursing judgment.

Perhaps I'm getting old and cynical. Maybe I have seen too many political ads. Maybe my hormones just need an adjustment, but I find myself wondering more and more if regulations have effectively managed to suck the heart and soul out of medicine.

My name is called, and I am snapped back to reality. A warm smile greets me as I am escorted into an exam room. Kind hands take my vital signs, and reassuring words explain the ensuing procedure.

Ten minutes before I was wondering if the finest hour of medicine had come and gone in our country. Perhaps the best is yet to come?

Charon

