

Nevada Nurses working for Nevada's Nurses

Complimentary from NNA

Volume 20 • Number 3

Nevada RNFormation

August 2011

THE OFFICIAL PUBLICATION OF THE NEVADA NURSES ASSOCIATION,
a Constituent Member Association of the American Nurses Association

Free to All Registered Nurses, Licensed Practical Nurses, & Nursing Students in Nevada: Quarterly Circulation 30,000



Final Legislative report on bills of interest to nursing

Page 3



NNA Forms Cuba Nursing Delegation

Page 18



NNA District One President's Message

Initiative on the Future of Nursing in Nevada

Top Stories

Boards Put Together Do Amazing Things

Betty Razor, RN, BSN, CWOCN
President, District 1



NNA has a State Board and District Boards working collaboratively while synchronizing efforts to provide professional leadership and opportunities to our members and support to non-members for the future of nursing.

An unbelievable challenge is the wide diversity within the state of Nevada with the open space between us only touched via an electronic email or Face Book, where we can include those nurses, though living in California and working in Nevada, who are NNA members as well as board members. The high tech world has taken me kicking and screaming into this abyss of technology that is only maintained by my patient geek friend.

The role of president of District One has been a challenge and a privilege with opportunities to team up with outstanding and dedicated nurses throughout the district and the state. A leadership journey has many facets; one of the best is the networking opportunities with blending of talents, profound compassion and matchless dedication of so many nurses throughout the district and state.

Many board members have reached way beyond their expectation and found the time and efforts invested worth their commitment. It has been a profound pleasure to include many as friends and colleagues. I did find an interesting concept that will stay with me as a "truth": in your term in office no one will care about the organization as you do and "Nor should they," for you are the leader.

District One has been my "baby" too long and it is time to step back and let new, young ideas thrive and strive with new unique and creative ways for the future in nursing in Nevada.

This fresh look will need YOUR time and effort to provide our members and non-members with

(Continued on page 15)

Wallace J. Henkelman, Ed.D, MSN, R.N.
Rosemary Witt, Ph.D, R.N., CNE

On May 13, a Professional Awards Dinner/Dance was held at the Sun Coast Hotel and Casino in Las Vegas to honor nurses who had advanced their careers within the last year through additional education or through attainment of national certification. Founding presidents and current presidents of Nevada nursing organizations were also recognized. The Nevada Nurses Association,



Philippine Nurses Association

in collaboration with the Nevada Association of Nurse Leaders, the Nevada Nursing Education and Practice Alliance, the Zeta Kappa Chapter of Sigma Theta Tau International, and the Nevada Student Nurses Association, offered the event.



Nevada State College



Desert View Hospital

(Continued on page 8)

Governor Thanks Nurses for their Service



Seated: Governor Brian Sandoval; Standing Luke Rachal, Amanda Hall, Nicola Aaker, Carla Brutico, Leanna Ogle, Pam Johnson, Betty Razor, Jean Lyons, Debi Ingrassia-Strong, Kelli McDonnell, Teralynn Hiatt

May was a month of festivities and events throughout the state in recognition of "National Nurses Week" honoring the birthday of Florence Nightingale and the contributions nursing provides for safe and high

(Continued on page 5)

District 3 announces new nursing scholarship criteria
See page 12

Does Nursing Have an Image Problem?
See page 10

Ethics in Action: What Would You Do?
See page 9

Federal Legislation on RN Staffing
See page 3

Is acid suppression beneficial?
See page 16

Joint Commission requirements for language access to patients
See page 10

Legislative Update
See page 3

Meet Nevada's Senior Nurses
See page 6

MRC Needs Volunteers
See page 7

National Health Service Corps
See page 7

Nevada Health Care Sector Council to deliver 10-year strategic plan to develop Nevada's health care workforce
See page 16

Quest for Knowledge
See page 13

Primary Screening for Cervical Cancer
See page 17

Second Annual Student Nurse Competition
See page 12

The Profession of Nursing
See page 15

Why does Nevada need legislative change to meet the growing healthcare needs of our citizens?
See page 11

Presort Standard
US Postage
PAID
Permit #14
Princeton, MN
55371

current resident or

In This Issue

Check It Out!	Page 13
Legislative News	Page 3
Letters to the Editor	Page 8
Membership Application	Page 19
Thank you to NNA	Page 6

Are you interested in submitting an article for publication in *RNformation*? Please send it in a Word document to us at nvnursesasn@mvqn.net. Our Editorial Board will review the article and notify you whether it has been accepted for publication. Articles for our next edition are due by September 1, 2011.

If you wish to contact the author of an article published in *RNformation*, please email us and we will be happy to forward your comments.



www.nvnurses.org



Published by:
**Arthur L. Davis
Publishing Agency, Inc.**

NNA Mission Statement

MISSION

The Nevada Nurses Association promotes professional nursing practice through continuing education, community service, nursing leadership, and legislative activities to advocate for improved health and high quality health care for citizens of Nevada.

NNA Board of Directors

- Janice Muhammad RN, CNM, MS urnstep4bms@gmail.comPresident
- Denise Ogletree-McGuinn, RN, MS, MEd, APN, PNP GregDenyse@aol.com Vice-President
- Lara Carver, PhD, RN icarver@nu.eduSecretary
- Pam Johnson, RN, BSN nnapam@gmail.comTreasurer
- Nicola Aaker, MSN, MPH, RN, CNOR, PHCNS-BC naaker@aol.com Director at Large
- Kathy Ryan, MSN, RN ryank006@hotmail.com Director at Large
- Mary Brann, DNP, MSN, RN mary.brann@tun.touro.edu Director at Large
- Beatrice Razor, RN, BSN, CWOCN etbetty@sbcglobal.netPresident, District 1
- Elizabeth Fildes, EdD, RN, CNE, CARN-AP Elizabeth.Fildes@tun.touro.edu .President, District 3
- Tomas Walker, RN, MSN, APN, CDE tomasw@cox.net APN Co-Chair, Southern Nevada
- Matthew Khan, MSN, FNP-BC mattkhanfnp@aol.com APN Co-Chair, Northern Nevada
- Teresa Serratt, RN, PhD tserratt@unr.edu Legislative Co-Chair

RNFORMATION is the official publication of the Nevada Nurses Association, a constituent member of the American Nurses Association. Published by the Nevada Nurses Association, P.O. Box 34660, Reno, NV 89533, 775-747-2333, Email: NNA@NVNurses.org, Web site: www.nvnurses.org. Indexed in the Cumulative Index to Nursing and Allied Health Literature and International Nursing Index and published quarterly every February, May, August and November.

Editorial Staff

Editor: Margaret Curley, RN, BSN nvnursesasn@mvqn.net

- | | |
|-------------------------------------|------------------------------|
| Mary Bondmass, PhD, RN | John Malek, PhD, MSN, FNP-C |
| John Buehler-Garcia, AAS, BSN, RN | Janice Muhammad, RN, CNM, MS |
| Eliza J. Fountain, RN, BSN | Betty Razor, RN, BSN, CWOCN |
| Traci Hart, MSN, RNC | Denise Rowe, MSN, RN, FNP-C |
| Wallace J. Henkelman, Ed.D, MSN, RN | Kathy Ryan, MSN, RN |
| Mary Baker Mackenzie, MSN, RN | Debra Toney, PhD, RN |

For advertising rates and information, please contact Arthur L. Davis Publishing Agency, Inc., 517 Washington Street, PO Box 216, Cedar Falls, Iowa 50613, (800) 626-4081, sales@aldpub.com. NNA and the Arthur L. Davis Publishing Agency, Inc. reserve the right to reject any advertisement. Responsibility for errors in advertising is limited to corrections in the next issue or refund of price of advertisement.

Acceptance of advertising does not imply endorsement or approval by the Nevada Nurses Association of products advertised, the advertisers, or the claims made. Rejection of an advertisement does not imply a product offered for advertising is without merit, or that the manufacturer lacks integrity, or that this association disapproves of the product or its use. NNA and the Arthur L. Davis Publishing Agency, Inc. shall not be held liable for any consequences resulting from purchase or use of an advertiser's product. Articles appearing in this publication express the opinions of the authors; they do not necessarily reflect views of the staff, board, or membership of NNA or those of the national or local associations.







Visit our website for current nursing opportunities

www.carsontahoe.com

Recruiter: 775.445.8678

Job hot line: 888.547.9357

Carson City, Nevada

(Located in Northern Nevada, near Lake Tahoe and Reno)

Featuring:

- JCAHO accredited
- 138 private rooms
- Comprehensive healthcare system
- Growth opportunities
- Competitive salaries
- Medical benefits
- Generous 401k
- Vacation / Sick leave
- Paid holidays
- Education assistance





NEW! Rainbow Finish



Distinctive Finishes

for a Distinctive You

3M™ Littmann® Special Edition Stethoscopes

For those who have earned the right to wear the best.

You didn't choose the easiest career—you chose one of the most important. And by working hard every step of the way, you've made a difference.

It's time to mark your achievement—with a 3M™ Littmann® Special Edition Stethoscope.

10% OFF ALL STETHOSCOPES PLUS FREE I.D. TAG

(USE PROMO CODE "NNA" FOR DISCOUNT)

EVERYTHING MEDICAL

1811 W. Charleston Blvd.
Las Vegas, NV 89102

6960 W. Warm Springs Rd.
Las Vegas, NV 89113

(702) 366-1111

Achieve Excellence

in Graduate Education

Doctor of Philosophy (PhD)
BS-PhD & MS-PhD Distance Programs

Doctor of Nursing Practice (BS-DNP)
Acute Care Nurse Practitioner
Adult/Gerontology Nurse Practitioner
Community/Public Health Nursing MPH (joint degree)
Family Nurse Practitioner
Neonatal Nurse Practitioner
Nurse Midwifery
Pediatric Nurse Practitioner
Women's Health Nurse Practitioner

MS-DNP
Advanced Practice Nursing Focus
Aggregate/Systems/Organizational Focus

Master's of Science
Clinical Nurse Leader
Gerontology Interdisciplinary
Nursing Informatics
Psychiatric/Mental Health Nurse Practitioner
Teaching Nursing



Leadership



Innovation



Integrity



**UNIVERSITY OF UTAH
COLLEGE OF NURSING**

www.nursing.utah.edu

Financial Aid & Scholarships Available

Legislative Update

Teresa Serratt, RN, PhD
NNA Legislative Co-Chair

By the time you read this, the Nevada legislative session will have ended and the interim sessions will have begun. The Nevada 76th legislative session began February 7 and officially ended June 7 at 1 am. During those four months important issues were discussed, deals made, and bills were either killed or passed. This session was particularly unpredictable since some of the most emotionally charged issues, the state budget and reapportionments, were debated in a senate and assembly heavy with new legislators. Often issues were scheduled for hearings with only a few days notice, if that, so responses to proposed bills were brief and intense. The Nevada Nurses Association's major initiative during this session was to advocate for the requirement of national certification for advanced practice nurses in our state in order for APNs to obtain a certificate of recognition as an advanced practitioner of nursing from the Nevada State Board of Nursing. That certification would begin in January of 2014. This was achieved during this session through the hard work of committed nurses across the state, collaborative efforts made by Cheryl Blomstrom, our lobbyist, and the sponsorship of Senator Sheila Leslie.

(Continued on page 15)

Nevada Nurses Association 2011 Legislative Session Legislative Report as of June 10, 2011

Prepared by Cheryl Blomstrom



Overview

The 2011 Legislative session presented many challenges, some which were solved and some not. Opening on February 7, the session completed its work in the allotted time and concluded at 1:00am on June 7. Over that time, there were 1,318 bill drafts requested. Of

those, 1,159 bills were considered by this legislature.

As expected, term limits created major challenges and opportunities with 31 Legislators new to the house in which they served this session. The recession and resulting budget deficit also created a large issue to be resolved. As these things generally do, both sides compromised, and a balanced budget was passed and funded.

Redistricting, however, did not see such compromise. The Democrats produced two different plans, both of which were vetoed by the Governor. The Republicans also produced a plan but it did not receive a vote up or down.

All of these will be discussed and, somehow, settled by the District Court, perhaps with help from the Nevada Supreme Court. This is a first for Nevada's redistricting process and we look forward to seeing how it may be resolved.

Key Priorities for Nursing

Licensure and Nursing Practice

Advanced Practice Nursing received another

boost with the passage of **SB205** which provides a requirement for national certification for advanced practice nurses in Nevada. This bill becomes effective July 1, 2014 allowing time for nursing students pursuing an APN to become nationally certified. It also includes a provision to grandfather those APNs who are licensed before the act's effective date. However, should an APN allow a license to lapse, reactivation would require national certification so APNs without certification are encouraged to keep their licenses active.

Patient Safety and Hospitals

Each licensed healthcare provider must attest that he/she has knowledge of safe injection practices under the new rules created by **SB419**. Section 26 contains the language pertaining to nursing. The bill is effective October 1, 2011.

Hospitals will develop patient safety checklists, somewhat like a preflight checklist used by pilots. These lists will be developed according to the instructions contained within **AB280** and include all of the staff within a hospital whose actions may impact a patient's health. The lists will be developed by the various treatment protocols and must be reviewed by a patient safety committee at least annually. The bill is effective July 1, 2011.

SB209 provides public notification, by website, of sentinel events at hospitals. The bill allows the public to compare sentinel event rates between hospitals and make an informed choice about which hospital to use. The bill is effective July 1, 2011.

(Continued on page 18)

Federal Legislation on RN Staffing

Wallace J. Henkelman, EdD, MSN, RN
Assistant Professor, Touro University Nevada

The *RN Safe Staffing Act*, endorsed by the ANA, has been introduced into the 2011-2012 Legislature as S. 58 and H.R. 876. It would hold Medicare-participating hospitals accountable for implementation of valid, reliable nurse staffing plans for each nursing unit. The staffing levels would be developed by committees consisting of at least **55% direct care nurses**, and would be based on each unit's characteristics and needs.

It would also require hospitals to publically report staffing information on a daily basis, would hold hospitals accountable for investigation of complaints, provide for civil monetary penalties for known violations of the staffing guidelines, and provide whistle-blower protections for RNs and others who file complaints.

RNs are encouraged to contact their Senators and Congresspersons to express their opinions on these bills. If you do not know who your representatives are, an easy way to determine it is to go to the Nevada Legislature Home Page, select *Who's My Legislator* from the menu on the right side of the page, and put in your address and zip code. This will provide information on both your state and federal representatives including phone numbers, mailing addresses, and email addresses.

Reference

Safe Staffing Save Lives. (2011). *Federal legislation: Registered nurse safe staffing*. Retrieved from <http://safestaffingsaveslives.org/WhatisANADoing/FederalLegislation.aspx?css=print>

Feeling Frazzled?
Are you on your last nerve?
Find a satisfying job on nursingALD.com
Registration is free, fast, confidential and easy! You will receive an e-mail when a new job posting matches your job search.

LAW OFFICES OF TRACY L. SINGH, LLC

Stress Reduction is our Business

Licensure Defense for all Nevada Healthcare Providers

• Disciplinary Actions	• Unprofessional Conduct
• Self Reports/Complaints	• DUI/Criminal Convictions
• Applications/Renewals	• Chemical Dependency/Diversion
• Settlement Negotiations	• Fraud/Falsification of Records
• Hearings/Appeals	• Abuse/Neglect of a Patient
• Databank Disputes	• Standards of Practice
• Probation Support	• & More

Now offering online scheduling! Visit <http://bit.ly/hsZOca> for direct access to our calendar.
Phone: (702) 444-5520 • Fax: (702) 444-5521
Mailing Address: 8635 W. Sahara Ave # 437 • Las Vegas, Nevada 89117
Email: tsingh@tlsinghlaw.com • Website: www.tlsinghlaw.com

Forget Code Blue. CODE YOU!

EARN
\$125/hr.

The life you save may be your own.

Boost your income working part time or full time as a Certified Legal Nurse Consultant™.

Vickie

Vickie L. Milazzo, RN, MSN, JD
Pioneer of Legal Nurse Consulting since 1982
Wall Street Journal bestselling author

CALL TODAY

800.880.0944

FOR FREE INFO PACKET

LegalNurse.com

ATTENTION: NURSE LEADERS & CHARGE NURSES

Nevada Organization of Nurse Leaders
NONL's 2011 CONFERENCE
"NURSE LEADERS: SHAPING HEALTHCARE"
OCTOBER 2-4, 2011 (Sunday thru Tuesday)
HARRAH's RENO, Reno, Nevada

Sunday IOM Future of Nursing; ACHE courses (Cat 1); AONE update;
Monday KEYNOTE: Steven Harden, "Miracle on Hudson: What Every Nurse can Learn About Leadership from Captain Sully"; NV Legislative update; RNs becoming CEOs; plus
CHARGE NURSE Ed. track all day (keynote, courses, lunch & reception)
Tuesday ENDNOTE Greg Nelson, "Nurse Leadership: The Core of Stellar, Stupendous Care"
 +++ more speakers; education panel; and lots of new exhibitors +++
 more info/complete conf program at: www.nonl.org
 Email: webmaster@nonl.org ~ VoiceMail/Fax: 702-995-0239
 NONL-Nevada Organization of Nurse Leaders, Inc. (non-profit)

Carson City's Sierra Surgery Hospital Recognized

AURORA, Ohio, March 15, 2011 | The American Board of Nursing Specialties (ABNS) Awards and Recognition Committee announced at its Spring Assembly meeting that it has selected three institutions to receive honorable mentions for the 2011 Award for Nursing Certification Advocacy. ABNS recognized Main Line Health in Bryn Mawr, PA; Sierra Surgery Hospital Nursing Department in Carson City, NV; and the Virginia Commonwealth University Health System in Richmond, VA as strong advocates of specialty nursing certification.



Sierra Surgery Hospital is a 15 bed acute care, surgery and imaging specialty hospital located in Carson City, Nevada.

"We received the highest number of applications on record for the Advocacy Award this year and all of the applicants strongly demonstrated their commitment to specialty nursing certification," Judy Lentz, Chair of the ABNS Awards and Recognition Committee, said. "These honorable mention recipients have developed programs and strategies that help to create an organizational culture supportive of specialty nursing certification."

Among the criteria necessary to receive ABNS's Advocacy Award, the organization must document the total number of direct patient care RNs and nursing managers and the number and percentage who are certified in specialty nursing. The honorable mention recipients report the following percentages:

- Main Line Health—30 percent of direct care nurses and nearly 95 percent of nurse managers are certified in their specialty.
- Sierra Surgery Hospital Nursing Department—46 percent of direct care nurses and 100 percent of nurse managers hold a specialty certification.

- Virginia Commonwealth University Health System—nearly 23 percent of direct care nurses and 64 percent of nurse managers have specialty certification.

Other award criteria include how the organization supports those nurses interested in seeking certification. While each of the institutions supports certification in a variety of ways, the common element is their focus on encouraging the nursing staff to earn certification and continue their education throughout their careers.

The Sierra Surgery Hospital Nursing Department provides a five percent increase in the nurse's base pay for earning a specialty certification. The increase remains in place as long as the nurse remains certified. Additionally, if the nurse earns a second certification that is job related, they receive an additional five percent increase on their base pay. In addition to financial support, the hospital also took out a quarter page ad in the local newspaper titled, "Sierra Surgery Hospital Salutes our Board Certified Nurses" to recognize the achievement of certified nurses in a consumer-driven publication.

Through efforts such as those demonstrated at Main Line Health, the Sierra Surgery Hospital Nursing Department and the Virginia Commonwealth University Health System, the ABNS Vision—Specialty nursing care is **THE** standard by which the public recognizes quality nursing care—will be achieved. For more information on the requirements of the award, visit www.nursingcertification.org.

###

The American Board of Nursing Specialties (ABNS) is a membership organization whose mission is to promote the value of specialty nursing certification to all stakeholders. Currently, 32 ABNS Regular Members represent nearly half a million specialty certified registered nurses. Its 12 Affiliate Members include providers of key certification-related testing products and services. One Public Member represents the consumer's perspectives on issues about specialty nursing certification. For further information about ABNS, visit www.nursingcertification.org or email Bonnie Niebuhr, MS, RN, CAE, Chief Executive Officer, at bniebuhr@nursingcertification.org.

Elizabeth Fildes Honored

Elizabeth Fildes, EdD, RN, CNE, CARN-AP, has been selected as a Healthcare Hero in the category of Innovation by Nevada Business Magazine. "Those that wear the badge of 'Healthcare Hero' are remarkable individuals whose accomplishments and commitment to improving the lives of Nevadans continues to resound throughout our state." (*Nevada Business*, <http://www.nevadabusiness.com/issue/0810/1/2277>, extracted June 13, 2011)



Recognizing that tobacco use remained the number one single most preventable cause of death and disability in Nevada when she first moved to Las Vegas in 1997, Dr. Fildes acted on an inspired vision of a world where access to care is available and readily accessible for everyone regardless of ability to pay and distance and founded the Nevada Tobacco Users' Helpline (Helpline) in 1997 with a single volunteer and a goal of providing Nevadans access to free, holistic and evidence-based nicotine dependence treatment.

As of September 30, 2010, the Nevada Tobacco Users' Helpline has served over 34,000 clients and trained over 1,000 health care professionals on Brief Intervention for Tobacco Use.

Dr. Elizabeth Fildes received The Public Health Hero Award in 1999 for her outstanding dedication to reducing tobacco use in Southern Nevada Health District. She most recently received the Extra Mile Award (EMA) given by the Nevada Cancer Coalition for going the extra mile in making sure Nevadans have access to nicotine dependence treatment. She was appointed and commissioned by the Governor of the State of Nevada to serve as a member of the Healthy Nevada Task Force for eight years from 1998-2006.

Dr. Fildes' research activities focus on the use of distance counseling technology to increase treatment access for individuals with nicotine addiction and co-occurring disorders in frontier, rural and underserved communities. With her leadership, the Helpline is currently piloting internet based counseling for the underserved, disparate population, the lesbian, gay, bisexual and transgender (LGBT) and the 18-24 age groups. Since 1998, she has presented on the effectiveness of distance counseling technology in local, regional, national and international conferences.

In June, 2011, the program launched the Nevada Tobacco Users' Helpline Adolescent Line.

Fildes is an Associate Professor at Touro University School of Nursing and President of the Nevada Nurses Association District 3 and an Assistant Professor at the University of Nevada School of Medicine, Department of Psychiatry.

THE STRENGTH TO HEAL
and the experience of a lifetime.

If you're focused on getting your master's degree in Anesthesia Nursing, we've got a program that you should consider. The Army covers tuition, in addition to full pay and allowances commensurate with your rank. You'll graduate with a Master of Science in Nursing. Your nation and our Soldiers will salute you.

To learn more, call 1-877-406-7523 or visit www.healthcare.goarmy.com/p062.

© 2010. Paid for by the United States Army. All rights reserved.

ARMY STRONG®

Search for Balance

flexible
fulfilling
impatient
balanced
peace
live
comfort

Find your perfect nursing career on nursingALD.com

Registration is free, fast, confidential and easy!
You will receive an e-mail when a new job posting matches your job search.

Seniors Helping Seniors®
...a way to give and to receive®

Are you looking for a Positive Change?
Do Good *and* Make Money®

Seniors Helping Seniors®
Services offers valuable in-home, non-medical services, for seniors by seniors. Seniors love being helped by other seniors who really understand them.

Our **Franchise Partners** gain **easy entry** into one of the most **rapid growth** service industries in today's **boomer market**. Our experience, management and marketing expertise can help you hit the ground running.

Join our **Seniors Helping Seniors** franchise system if you are looking for substantial rewards for your bottom line and for your heart.

To **find out more** about this unique ground-floor opportunity, visit: www.SeniorsHelpingSeniors.com

ANA NursingWorld
AMERICAN NURSES ASSOCIATION
Caring for Those Who Care

Have you joined the Nurses' Health Study?

The Nurses' Health Studies are among the largest and longest-running investigations of factors that influence women's health. Started in 1976, the information provided by the thousands of dedicated nurse participants has led to many new insights on health and disease. Nurses' unique knowledge, training and interest in health issues allow us to provide very accurate and complete information. The studies have produced landmark data on cancer prevention, cardiovascular disease, diabetes, and the effects of such lifestyle factors as diet and physical activity.

ANA encourages our members and other nurses to consider participating in this long-term study. Visit the Nurses' Health Study 3 website <http://www.nhs3.org/nhs3site/> for more information.

Extraordinary Nurses Recognized at Sierra Surgery Hospital

May 12, 2011 (Carson City, Nevada)—Nurses at Sierra Surgery Hospital are being honored with **The DAISY Award For Extraordinary Nurses**. The award is part of the DAISY Foundation's program to recognize the super-human efforts nurses perform everyday.

The first award recipients are Kyle Wegner, RN and Chris Lytle, RN. They are being recognized for the following:

- Personalizing the healthcare experience for each patient,
- Being a patient advocate,
- Going "Beyond Expectations" by improving the work experience,
- Always treating patients, families and co-workers with kindness, concern and dignity, and
- Doing exemplary community service.



commending them for being an "Extraordinary Nurse." The certificate reads: "In deep appreciation of all you do, who you are, and the incredibly meaningful difference you make in the lives of so many people." The honorees also are given a beautiful and meaningful sculpture called A Healer's Touch, hand-carved by artists of the Shona Tribe in Zimbabwe, Africa.

One day while Pat was in the hospital, he asked his family to bring him a Cinnabon® cinnamon roll plus enough for all the nurses in his unit. With the help of Cinnabon's parent company, FOCUS Brands, The DAISY Foundation carries on this tradition by serving Cinnabons to all the nurses within the facility in thanks for everything they do for their patients and families.

Said Bonnie Barnes, President and Co-Founder of The DAISY Foundation, "When Patrick was critically ill, our family experienced first-hand the remarkable skill and care nurses provide patients every day and night. Yet these unsung heroes are seldom recognized for the super-human work they do. The kind of work the nurses at Sierra Surgery Hospital are called on to do every day epitomizes the purpose of The DAISY Award."

Said Chief Nursing Officer Jean Lyon, Ph.D., RN, "We are proud to be among the hospitals participating in the DAISY Award Program. Nurses are heroes everyday. It's important that our nurses know their work is highly valued, and The DAISY Foundation provides a way for us to do that."

The not-for-profit DAISY Foundation is based in Glen Ellen, CA, and was established by family members in memory of J. Patrick Barnes. Patrick died at the age of 33 in late 1999 from complications of Idiopathic Thrombocytopenic Purpura (ITP), a little known but not uncommon auto-immune disease. The care Patrick and his family received from nurses while he was ill inspired this unique means of thanking nurses for making a profound difference in the lives of their patients and patient families.

Twice a year, two nurses are selected by Sierra Surgery Hospital's Nursing Leadership Council to receive The DAISY Award. At a presentation given in front of the nurses' colleagues, physicians, patients, and visitors, the honorees receive a certificate

Black Article Published

Congratulations to Lisa Black, PhD, RN, CNE. Her article, "Turning Tragedy into Policy—A Quantitative Study," was published in the June, 2011, issue of the American Journal of Nursing. The study that supported the research was funded by the Nevada Nurses Association in 2008 and supported whistleblower legislation that was passed by the Nevada Legislature in 2009. A podcast with the editor and Dr. Black is posted online. You can listen to the podcast at <http://journals.lww.com/ajnonline/pages/currenttoc.aspx>. Click on the Table of Contents, then follow the link to Podcasts.



Dr. Black is an Assistant Professor at Orvis School of Nursing, University of Nevada, Reno.

Governor Thanks Nurses

(Continued from page 1)

quality health care services. Southern Nevada had the IFNN Professional Progression award celebration and the northern segment of Nevada had the Nurse of Achievement award gala dinner. While charting a new course for a healthy Nevada was the main focus for nursing statewide there was an innovative first time ever video conference for nurses with the speakers from around the country presenting on Women's Health Issues. The video conference provided an outstanding program to 14 sites around the state with a special focus on the rural health care providers. The highlight of the month was the Governor's signing of the "National Nurses Week" proclamation while representatives from Nevada Nurses Association and student nurses observed.

NNA had been informed that we would have a limited time for the short meeting with the Governor for a photo op while he signed a "Nurse Week" proclamation. What we received was a 35 minute visit with Governor Sandoval, who was gracious and welcoming and provided nurses an opportunity to hear his passion for our state's history, and his admiration of those who preceded him in his office. We felt that he enjoyed this opportunity to share his enthusiasm with us. He thanked nurses all over Nevada for "The critical work they do on the front lines of healthcare." Working together, we will bring better care and better health to all Nevadans.



2011 Nurses of Achievement Winners



Pictured left to right—Teena Thomas – Nursing Education (Renown Regional Medical Center); Megan Pratt - Patient Advocacy (Renown Regional Medical Center); Bobbi Gillis - Office/Outpatient (Renown Regional Medical Center); Dawn Dollarhide - Critical Care (Renown Regional Medical Center); Bridget Tuma - Medical/Surgical/Maternal Child (Renown Regional Medical Center); Elizabeth Cogan – Nursing Innovation (Renown Regional Medical Center); Doreen Begley - Community Health (UNR – Early Head Start); Gayle Wickman - Lifetime Achievement (UNR – Orvis School of Nursing); Jean Lyon - Leadership (Sierra Surgery Hospital); Sandra Ryan - Licensed Practical Nurse (GI Consultants); Lisa Dunkelberg - Rural Health (Carson Valley Medical Center); Erika Clizer - Long Term/Rehabilitation (VA Sierra Nevada Health Care System); Teri Kozik - Advanced Practice (Saint Mary's Regional Medical Center)



**They'll have questions...
Will you have the
answers?**

FREE Training for Healthcare Professionals

**CEUs available
In Nevada call
1-866-573-2542 or
visit <http://www.iaatp.org>**



Mount Grant General Hospital

Patient Care Coordinator in LTC

MGGH is located in the small friendly, **affordable** community of Hawthorne and we are a well-staffed rural Nevada Hospital and LTC Facility, emphasizing quality care!

Great Benefits Call Today!
Current RN NV license or ability to obtain one preferred.

Fax Resumes to 775-945-0732
ATTN: Mt. Grant General Hospital HR Dept
or Email Resumes to mghjobs@yahoo.com
or call collect 775-945-2461 for more info.



**SEEKING FULL-TIME INSTRUCTOR
PEDIATRIC NURSING**

Western Nevada College is seeking to fill a full-time pediatric nursing faculty position for spring 2012. A full position description will be posted on the Western Nevada College website starting September 1st, 2011.

Required Qualifications:

- Master's degree in nursing from a regionally accredited college or university.
- Competency in current pediatric nursing practice.
- Minimum of 3 years pediatric clinical practice within the past 6 years.
- Current licensure as a RN in Nevada or eligibility for such licensure.

Contact Dr. Judith Cordia at 775 445-3295 or apply online after September 1st at www.wnc.edu/jobs.

Western Nevada College is guided by principles of affirmative action and is an equal opportunity employer.

Thank you to NNA

Christine Crawford
 Truckee Meadows Community College
 NNA Scholarship Winner



Every child has their dreams of what they want to be when they grow up; I can honestly say that being a nurse wasn't always my number one choice. My dreams varied from owning my own day care center to a whale trainer at Sea World. It wasn't until I was involved in a life-threatening accident that I realized nursing

was where my heart was. At the age of 17, I decided that medical school was the direction I was going. I began taking college classes my junior year of high school in order to start working towards that goal. The summer before my senior year I was spending the day with friends riding dirt bikes and quads when I flipped the quad I was riding. I was quickly transported to a California hospital where I spent multiple days as a patient with a broken pelvis, a broken collarbone, multiple broken ribs, a concussion, and the fear of internal bleeding. During my hospitalization my nurses reassured me, they helped me learn how to cope, and helped me take my first steps as I learned to walk again. I quickly discovered they were the ones who made the difference in my life, not the doctors.

After recovering from my accident I received my CNA license and began working on my pre-requisite classes for the nursing program. I entered the program in the Fall of 2009 and was the youngest in my class. I was blessed to receive a job internship at Saint Mary's Hospital, which provided extra clinical hours and experience before graduating. Now a year and a half later, I am a TMCC Nursing School graduate! I have been offered and accepted a job at Saint Mary's Hospital and can't wait to start my career as a nurse.

I will always remember the nurses who helped me during the hardest time in my life; and I am anxious to be able to pay it forward. Thank you to the Nevada Nurses Association for providing me with a scholarship to help me achieve my goal of nursing.

Senior Nurses of NNA

Betty Razor, RN, BSN, CWOCN

Why I Became a Nurse

By Marge Adams, RN



The year was 1948 and I was told that the career I had planned for myself for many years was not going to be possible financially, so as a graduating senior it seemed that my future would be a bit of a question mark. I would need to keep working as a nurse's aide at our local hospital until I could rethink my options. Three of my friends were driving to a nearby city to take entrance exams for nurses training and they asked me to come with them. I said, "Not on your life, I'm not going to become a nurse and take orders from these doctors." My friends kept asking me to go and since I had no other plans (and the university where they were going had some real hunks on their football team, so I thought I could at least enjoy the scenery), I finally agreed to go.

All my high school courses had prepared me for a career as a secretary and I had taken no courses in anatomy, biology, or any of the sciences. My plans were to go, observe the "hunks," take the test and fail it, then come home and plan my future.

Wow, miracles do happen! I passed the test, the hunks weren't nearly so great up close, and the director of nursing where I worked had a scholarship for me, so two weeks after graduation I moved into the nurse's dorm and began training to become a nurse.

I had an instructor who told me repeatedly, "Miss Corley, Miss Corley, you will never be a nurse." Now I am Scotch/Irish, Welch, and German/Dutch so that was like waving a red flag at a bull. I set my jaw, dug in my feet, and said, "I'll show you!" The remainder of my instructors were committed to giving us a firm

(Continued on page 14)

Gloria Castillo



Gloria was born in Spring Valley, Nevada, outside of Ely in 1921. Ely is a very small rural community and at that time was the hub of mining and the railroad. Gloria was born to parents of Basque origin who had been brought to the area to tend the flocks of sheep. When she entered school at age 5, she could not speak English. She could not continue in school until she learned English. "I learned quick so I could stay."

She graduated from the one room rancher school (average 2-10 students annually) and graduated from high school in Ely, Nevada, in 1940. She worked in a motor supply house and was encouraged by the family physician, Dr. Smerrnoof to go to nursing school.

No nursing schools existed in Nevada at that time, so the options were to go to either Salt Lake City, San Francisco or Los Angeles. The family physician was a Los Angeles County graduate and he encouraged her to attend there, and graduates in Ely from LA also encouraged her to go to LAC and helped her apply (unbeknownst to her mother who was adamant she should not be a nurse). With the other nurses' assistance she applied and left for LACNS in one week.

Her 1942 class at LACNS was the first enrolled in the US Nurses Corp and they were issued Winter and Summer Army uniforms and a nursing uniform, and paid for their services. Nursing school was a year round education, clinical process with one week off



for Christmas and Easter—no summer vacations. She graduated in 1946 and stayed on at LAC for 2 years then on to Good Sam, Centennial, and Methodist Hospital.

Both Centennial and Methodist hospitals were next to racetracks with many patients from that facility. When Methodist was moved from Los Angeles to Arcadia, Gloria was part of the organizing team for the massive transfer of supplies, equipment and patients.

She moved back to Nevada to Sparks in 1958 where the family had moved and needed her assistance due to poor health of her mother and need for care of her mentally challenged brother. Shortly thereafter, upon her mother's death, Gloria accepted the lifetime role of having the full-time responsibility for her brother.

She needed to work to pay for all the additional care for her brother, special schools, speech therapy, and many other services. He has been the strong arms of nursing whenever NNA needed assistance; they have both always been there.

She worked for two years at Washoe County Hospital (now Renown); then accepted a position with Dr Lenz for 9½ years. She then worked at the VA for 25+ years till her retirement in 1995. She soon found herself helping ostomy patients within the community and was asked by Washoe Hospital to work (9+ years) as an ostomy consultant to manage ostomy patients and educate staff in ostomy care within the facility until a full time WOCN was hired. She also taught ostomy care at the nursing school at Orvis UNR.

She joined ANA on graduation and has always been an active—very active—member. She organized the United Ostomy Association conference in Los Angeles, a week event. When she returned to Nevada she quickly became active in the local district and held every position except President. She remembers doing the newsletter in the old way of typing, and cut and pasting photos and copy onto large board and having the Sparks Tribune print the newsletter for NNA. They had

(Continued on page 14)



CHILDBIRTH EDUCATOR CERTIFICATION
 September 21 & 22 in Las Vegas, NV;
 October 26 & 27 in Chicago, IL;
 November 2 & 3 in Nashville, TN

LACTATION COUNSELOR CERTIFICATION
 September 15 & 16 in Lincoln, NE;

INDEPENDENT STUDY CERTIFICATIONS
 *Childbirth Educator *Labor Doula
 *Lactation Counselor * Infant Massage Instructor
 *Pre/postnatal Fitness Instructor

All certifications are on the ANCC magnet recognition list.
 Courses designed for RN offering 16 contact hrs.
 Call Prepared Childbirth Educators, Inc. at 888-344-9972
 or visit www.childbirtheducation.org

South Texas Gulf Coast
\$6,000 Relocation Allowance

Friendly non-profit hospitals need experienced ICU, OR & ED RNs for permanent, full-time positions

- Base Salary \$24 to \$34/hour, plus 25% Night and 15% Evening diff
- No State Income Tax=Addit'l \$\$
- Comprehensive benefits/401k
- Locations just minutes from warm beaches. Plenty to do outdoors year round & friendly Texas hospitality.
- Enjoy affordable housing, low cost of living. Avg daily temp 71 degrees

Opportunities in North Dakota

Expanding hospital has permanent full-time jobs for experienced RNs

- \$5000 sign-on for 1st yr, with option for additional \$5000 for 2nd year
- Receive up to \$5,000 Relo allowance
- Base Salary \$21-\$32/hr plus shift diff
- Comprehensive Benefits Package

Call the Director of RN Staffing
 Sal Lagudi at 1-800-304-3095, x105
 Email: slagudi@beck-field.com

Colorectal Cancer
 Screening Saves Lives



"Now THAT I understand."

**If you're over 50,
 get tested for
 colorectal cancer.**





Time Brings Change

Deloris Middlebrooks, RN, BSN, MSN, EdD

Recently several "senior" nurses were asked "what has changed since you began your nursing career umpteen years ago?" The immediate response was "Technology." Later on reflecting on this question I thought about all of the other things that have changed as I too have also changed over the years.

Last year in a speech I presented at Truckee Meadows Community College Student's pinning ceremony I stated they should know their learning process was not over and they would experience many changes. Some changes we have chosen while others are thrust upon us either by local or world events, such as how one goes through extensive security at the airport as a result of the events on September 11, 2001.

My life and my nursing career were influenced by being born during the great depression, World War II and nursing's struggle to be a true profession.

I entered nursing school in September, 1949 after working in a hospital diet kitchen during my high school years. My nursing instructor, even while we were still "Probies" (on probation), impressed upon us that it was important to be members of the Nurses Association on graduation. Consequently I have been an ANA member every year since I graduated. My membership in ANA included membership in Iowa and the Nevada Nurses Associations. Membership in the nursing associations has allowed me the benefit of meeting and making friends of nurses all over the states.

(Continued on page 9)

Collaborating to Promote Women's Health: Tools & Strategies that Work

Elizabeth Fildes, EdD, RN, CNE, CARN-AP
Touro University Nevada

The conference, "Collaborating to Promote Women's Health: Tools & Strategies that Work," a free conference for nurses and other health care professionals presented by the Nevada Nurses Association in recognition of National Nurses Week and National Women's Health Week, took place on May 10, 2011 at various locations in the state. A multidisciplinary group, with not just nurses but substance abuse counselors, social workers, and health educators, all of whom have an important role to play in



Douglas County participants (back row left to right) Mary MacKenzie, Dawn Scheetz, Janice Ellis, and Janet Bryant and (front row) Marilyn Fornant.

build partnerships within their groups and their communities and commit to helping to promote the health of women in their communities. Frances Ashe-Groins described the most problematic issues affecting women in our country and evidence-based strategies that health care professionals can use to address them. Dr. John Packham described the status of the health of Nevada women. Citing statistics from the Federal Office on *Women's Health and Mortality Chartbook*, he stated that, "Nevada's female population numbers almost 1.3 million. Non-Hispanic White women comprise 59 percent and Hispanic women 25 percent of that total. Rates of death from lung cancer, colorectal cancer, chronic lower respiratory diseases, and suicide continue to be almost the worst in the nation; however, the state has one of the best records in its relatively low death rates for diabetes. Additionally, females of all represented races have achieved the Healthy People 2010 target for coronary heart disease. Non-Hispanic Black women and American Indian/Alaskan Native (AI/AN) women die from diabetes

at much higher rates than do non-Hispanic White women. In health risk factors, Nevada's women fare the best in not smoking during pregnancy and obesity but the worse in leisure-time physical activity and smoking. In six measures of preventive care, Nevada ranks near the bottom: it ranks #47 in Pap smears and #49 in routine check-ups. Only 76 percent have health insurance, which merits a rank of #49. Less than 50 percent of Hispanic women are insured, the lowest of all groups." (http://www.healthstatus2010.com/owh/chartbook/ChartBookData_list.asp).

Dr. Mary Bondmass showed participants where to go for evidence-based interventions and how to use that information to guide practice. She talked about evidence-based strategies that can make the best use of the limited healthcare resources. Martha Drohobyczer discussed the management of the most common mental health problems that affect women. Dr. Fildes talked about brief intervention for tobacco use and the Nevada Tobacco User's Helpline. Ali Hall focused on the use of motivational interviewing and coaching strategies to help Nevada women make healthy lifestyle choices that go to the root of some of the troubling health problems they face.

Despite some technical difficulties, the majority of the participants were grateful for the conference. Dr. Fildes concluded with what the Centers of Excellence found when it comes to promoting the Health of Nevada women; it comes down to individuals and their personal excellence and commitment. Each health care professional can make a difference in the health of Nevada women.



Las Vegas Cooperative Extension participants

promoting the health of Nevada women, attended the conference.

In her keynote address, First Lady Kathleen Sandoval challenged all the participants to

National Health Service Corps

Barbara Heywood
Nevada Primary Care Office

The National Health Service Corps (NHSC) provides clinicians with financial support in the form of loan repayment and scholarships. If you are looking for a job opportunity in primary care or would like to further your career, please visit the NHSC website (<http://nhsc.hrsa.gov>) for a listing of the 79 NHSC approved sites in Nevada for job opportunities available for the following professions:

- Nurse Practitioners (adult, family, geriatrics, pediatrics, psychiatric, women's health, and certified nurse midwives)
- Physician Assistants (primary care)
- Dental professionals (general, pediatric and geriatric dentists and dental hygienists)
- Mental health professionals (Psychologists, Licensed Clinical Social Workers, Marriage and Family Therapists, Professional Counselor and Psychiatric Nurse Specialists)
- Physicians (MDs or DOs specializing in pediatrics, geriatrics, psychiatry, family or internal medicine, and obstetrics and gynecology)

If you provide primary health care to underserved Nevadans and meet the following criteria, your practice might be eligible to be a NHSC approved site:

- Located in a Health Professional Shortage Area (HPSA)
- Provide services on a discount fee schedule
- Accept patients covered by Medicare, Medicaid, and the Children's Health Insurance Program
- Can document sound fiscal management
- Have capacity to maintain a competitive salary, benefits, and malpractice coverage package for clinicians

For further information, visit the National Health Service Corp website at <http://nhsc.hrsa.gov> or contact Barbara Heywood at the Nevada Primary Care Office at (775) 684-4047 or bheywood@health.nv.gov.



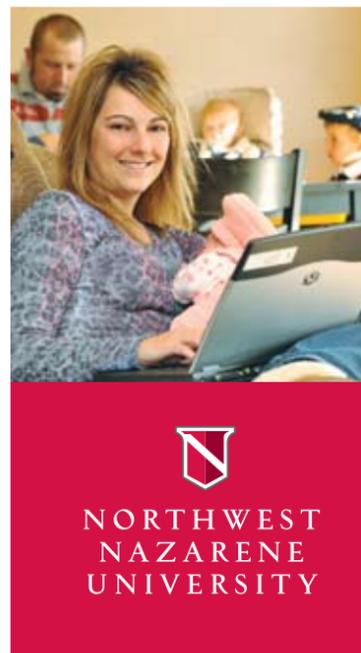
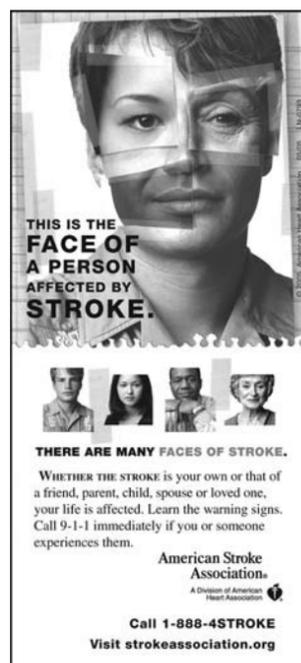
Medical and Non-Medical Volunteers Needed for MRC

On May 22nd, 2011, a massive tornado blasted its way across southwestern Missouri, flattening several blocks of homes and businesses in Joplin and leaving residents frantically scrambling through the wreckage. Windows were blown out of St. John's Regional Medical Center and only a few moments notice gave staff time to hustle patients into hallways before the tornado struck the multi-story building. All were quickly evacuated into the parking lot to be moved to other hospitals in the region. Hundreds of volunteers arrived in an effort to assist during this disaster. **Is our community prepared? Could we handle this?**

You can help prepare for disasters such as the devastating tornados in Joplin, Missouri and many more by becoming a member of the Medical Reserve Corps. The Medical Reserve Corps (MRC) is a national network of volunteers committed to improving the health, safety and resiliency of their communities. MRC volunteers include medical and public health professionals, as well as non-medical personnel. We would like to give an opportunity to make a difference in the community. Sign up or find more information at www.mrcnevada.com

Southern Nevada, Washoe County and Western Nevada MRC Units

A huge thank you to the 75 volunteers that participated in May 12th Mass Antibiotic Dispensing Exercise at the senior center in Carson City. We recognize all of your efforts and especially appreciate the feedback that we received at the debriefing. There are plans underway for the school based Influenza vaccination campaign for the 2011-2012 season. If you are interested in assisting, please SAVE THE DATE: September 19 through the 23rd we will be going to the Carson City Schools and giving immunizations. We will need a lot of nurses (with current license) and also non-medical administrative support as well. The hours we will be there are from 7:30 a.m. until 1:30 p.m. all week. If you are interested in helping, e-mail or call Kathi Haynie at 775-283-7906, khaynie@carson.org. It should be lots of fun! Thanks.



Continue your love for learning online

Northwest Nazarene University's Master of Science in Nursing program will prepare nurses to work as educators in academic, hospital and community-based organizations.

NNU's Master of Science in Nursing is designed for the working nurse and delivered with a Christian perspective:

- ADN to MSN
- BSN to MSN

To learn more visit www.nnu.edu/MSN, call 877-NNU-GRAD or email msn@nnu.edu.

Letters to the Editor

Letter to the Editor,

The Nevada State Association of School Nurses, the American Nurses Association and many other professional organizations are in support of California Nurses Association in arguing the delegation of insulin to unlicensed personnel. The American Nurses Association and the California School Nurses Association (CSNO), is challenging the California Department of Education's effort to change the state's Nurse Practice Act to allow unlicensed assistants to administer medication to children in school. This situation could have far reaching consequences.

Respectfully submitted,

Jeanine Clancy RN, BSN, MEd, NCSN
 President of the Nevada State Association of School Nurses

For more information on this issue, visit the website at <http://www.theamericannurse.org/?p=1231>.

Hi, there. Just a note to tell you how much I enjoy reading your newspaper. I am a LPN but really get a lot out of the articles that you publish. I especially liked the article written by Michael Cribbin in your last issue. The article was in the Student Nurses Corner about the philosophy of nursing. It was great and thank you to Michael for all the good facts about nursing. I work in a long term facility here in Nevada and it is so hard for the older nurses to meet the new challenges of nursing. I find it very hard to spend the quality of time with the patient and continue to get all the paper work done by the end of my shift. Thank you again for a great written paper by wonderful nurses.

Joelene Smith LPN

(Continued from page 1)

Award presentations included the following doctoral degree recipients: Dr. Alona Alegre, Dr. Judith Carrion, Dr. Laura Fillmore, Dr. Wallace Henkelman, Dr. Jene Hurlbut, Dr. Jodie Lane, Dr. Nerie Jamison, Dr. Ludy Llasus, Dr. Carrie O'Reilly, Dr. Lisa Sprue, Dr. Rhigel Tan, and Dr. Annie Matthews. Dr. Mable Smith was recognized for completing the Robert Woods Johnson Executive Nurse Fellowship, as were Sue Witt, PhD and Kevin Gulliver, MSN, who completed national certification. Honorees celebrated with friends and coworkers.

We are grateful to the following sponsors and supporters, who helped to make this event possible: Arthur L. Davis Publishing Agency, Inc, Nevada State College, St. Rose Pediatrics, University of Southern Nevada, UNLV, Touro Nevada University, Mi Peru South American Grill, Alternatives for Women, Cedax, Heart Center of Nevada, Nevada Career Institute, Health Care Education & Training, Las Isla Uniforms, Nevada Tobacco User's Helpline, Desert View Hospital, Sigma Theta Tau, American Association of Critical Care Nurses, NNA APN SPG, NONL, NSBN, Philippine Nurses Association.

The event was very well attended by nurse administrators, nurse educators, staff nurses, retired nurses, and recent nursing school graduates. It consisted of a silent auction of donated items, a dinner, and dance.

The event was successful in the goal of raising funds. Plans are to offer five \$500 scholarships to students enrolled in their next academic degree program, book scholarships in amounts yet to be determined for nurses returning to school, and certification expenses up to \$150. The criteria and process for the awards are in the development stage.

The date for next year's event has been set for May 12th, so save the date.

IFNN Dinner/Dance



vms
A BioMarketing Company

**Now Recruiting
Contract Clinical Educator**

• Registered nurse or equivalent	• Infusion experience, IgG Infusion preferred
• Provide healthcare professional training	• Bachelor's or Associate's degree
• Must have flexible schedule and be willing to travel	
• Inquiries, please call 877.294.0311	

If interested, please submit your information via the VMS website www.vmsbiomarketing.com/careers

**Nevada Nurses Association
Initiative on the Future of Nursing in Nevada**

Second Annual Awards Dinner/Dance

Las Vegas, May 12, 2012

SAVE THE DATE!






PERSONAL BEST.
 ANCC Board-Certified.



I'm proud and in charge of my nursing career. And I trust ANCC certification to help me maintain and validate the professional skills I need to remain a confident and accomplished nurse for years to come.

**Find out how to be the best at
www.nursecredentialing.org/Certification**

© 2011 American Nurses Credentialing Center. All Rights Reserved. The American Nurses Credentialing Center (ANCC) is a subsidiary of the American Nurses Association (ANA).

Ethics in Action: What Would You Do?

John Malek, PhD, MSN, APN, FNP-C

Regardless of their work environment, nurses are faced with situations that involve using our ethical knowledge to make decisions. The critical questions involved with ethical knowing include “Is this right?” and “Is this responsible?” Keep in mind that our primary purpose is to do no harm while remaining committed to the patient whether an individual, family group, or community. The following case presentation illustrates an ethical dilemma and is cause for reflection on what you would do.



Mr. J. presents for the purpose of getting a physical exam. The primary purpose of this exam is to obtain documentation that signifies that Mr. J. is physically able to care for his elderly parents. His medical history does not indicate any acute or chronic illnesses. His vital signs are normal. The review of systems is uneventful. His social history is reviewed and reveals the following information: His mother is alive, suffers from COPD, uses a walker for ambulation, and is oxygen dependent. His father is alive, has diabetes, has COPD, recently suffered a stroke, ambulates with a walker, and has had a heart attack in the past. Mr. J. lives with his parents and is currently unemployed and unmarried. He has petitioned to receive compensation from the government for being a caregiver for his parents. He has no formal training as a caregiver and there are no other siblings in the home. His duties would also include transporting his parents to their medical appointments as needed.

During a review of Mr. J.'s social history, he reveals that he smokes 2-3 packs of cigarettes a day with no desire to quit. To deal with the “stress” he consumes at least a pint of vodka daily, sometimes more. He has no primary care provider and has not had a routine physical exam within the past 3 years. He does state that although he consumes daily alcohol, he does not “get drunk” from drinking. He appears slightly disheveled and shaky during the interview. At this point, you begin to focus on the dangers of smoking with the use of oxygen and the possible impairment of his thought processes secondary to the chronic use of alcohol. He tells you, “but you don’t understand, I need to have this completed today.” Without speaking, you begin to think about the possible dangers that could occur with his parents because of his smoking and drinking habits. He refuses any evaluations for alcohol abuse and does not feel he needs to refrain from drinking. He continues to be adamant about the fact he is just being seen for a physical and to have the papers signed so he can start being paid for taking care of his parents since they are disabled. He does not wish to discuss his social history any further and insists on having a physical exam.

What would you do? Who are you responsible for? Knowing Mr. J.'s social history and lack of interest in addressing tobacco and alcohol abuse, how would you proceed? Are his parents any of your concern or simply the physical exam? Would you complete the physical exam and make appropriate referrals for Mr. J? Would you refuse to conduct the physical and refer him to another provider?

Would you be concerned enough to contact adult protective services and do you feel obligated to do so? According to the *ANA Guide to the Code of Ethics for Nurses*, in our professional relationships we should practice with compassion and respect, which involves the inherent dignity, worth, and uniqueness of every individual. Our practice should be unrestricted by social or economic status, personal attributes, or the nature of health problems. Given the dialogue, care must be balanced with a concern for justice and rules must be used in the context of doing the least harm or benefiting people in some way. Nursing as a profession requires ethical knowledge to guide practice. Nurses, regardless of setting, bring to practice the heritage of their own moral development and understandings as well as knowledge of ethical and moral practice obtained through formal education. With this background, as we practice and reflect on our practice, we should be asking questions such as, “Is this right?” and “Is this responsible?” These questions assist to clarify our values. Without such questioning, we would be unable to make day-to-day moral/ethical decisions. As we work within the everyday world, our values are challenged every day whether we realize it or not.

What would you do?

References

Chinn, P. L., & Kramer, M. K. (2011). *Integrated theory and knowledge development in nursing*. (8th edition). St. Louis, MO: Mosby.

Fowler, M. (Ed.). (2008). *Guide to the code of ethics for nurses: Interpretation and application*. Silver Springs, MD: American Nurses Association.

Time Brings Change

(Continued from page 6)

My progress in nursing school had been in bits and pieces, out for awhile and then back in and finally graduating in 1956. At that time I began employment in a large State Mental Hospital with 3000 patients and 6 RNs; most of the staff were psychiatric aides. These were the days before Thorazine; since those days psychiatric nursing has seen tremendous changes. I have stayed in this field as my principal field of nursing though I have also had positions in Med-Surg, OB and Peds.

World War II introduced early ambulation, antibiotics—notably penicillin and sulfa. I took care of polio and TB patients in 1949. I had never heard of AIDS. Didn’t see diphtheria as older nurses had. Increased technology changed nursing responsibilities. There was increased use of lab tests that aided in diagnosis. MRI and CAT scan were developed in addition to x-rays. Now even PET scans are used in mental health. Nurses no longer roll huge O₂ tanks around as O₂ and suction are now piped in above the patients’ beds. Patients don’t stay for weeks at a time; OB ladies go home in 24 hours rather than 5-6 days (1960s) or 10 days (1930). Nursing notes are now on a computer. But now we have other challenges like MRSA.

Part of the change in nursing has been the push for true professional status exemplified by pursuit of academic degrees for nurses. This has led to many changes in nursing schools. Formally nursing schools were part of a hospital program and students were often considered members of the hospital staff; the nurses that graduated from these programs received a diploma. This was true for me. My Director of Nursing at the mental hospital believed that we should attain a baccalaureate degree and she pushed us toward that end. As a group we enrolled in a class at the University of Iowa (no online courses then). We got out of bed at 4 am, drove 75 miles to the university, had class from 7-10 am, drove back to the hospital and worked from noon to 8 pm. The next semester she brought a faculty member to the hospital to teach a class.

I thought that pursuing a BSN was do-able and took a year’s leave of absence from the hospital. I worked part-time at the University of Iowa Hospital while attending classes.

After obtaining my BSN I returned to the mental hospital and was promptly informed that I was now to teach the nursing students that came for their clinical experience. This was an unplanned change. Because I aimed to be a better teacher, this led me to pursue a master’s degree.

In 1966 at the national ANA convention in San Francisco, ANA leaders presented their position paper requiring BSN as the entry level for nursing. It is still my personal opinion that had that meeting been handled differently, we might have reached that goal sooner with less uproar and friction. That change and goal has come a lot closer today. Few, if any, hospital based nursing schools still exist. When the ADN program came into existence Mildred Montag’s original thought was that the ADN program would be a terminal degree. It was geared toward mature women, who had reared their children and would be now entering the work force in their later years.

In my 21 years at Truckee Meadows Community College in the ADN program the average age of the students was 30. They had worked at other jobs, might

or might not be currently rearing children, some divorced, but most did not see themselves attending the university stating the usual constraints of money or inadequate high school grades. In the past, progression to the BSN program was difficult. There have been some improvements in the process of moving from an ADN to a BSN with a few programs actually transitioning to a MSN.

Nursing has moved to seeking higher academic degrees for nurses, such as PhD, while others select a DNP, which focuses on patient centered care. Many of the skills and experiences in bedside nursing translate into that of a faculty position, for they need to be an educator, a leader, a scholar, an advisor, a mentor and establish a trusting relationship with those who will follow in their footsteps.

Older nurses like myself, have experienced extensive changes so will the nurses of today in their future. Nursing association membership provided the information and guidance through change with meetings, education and networking. Colleagues have often become friends.



Leading innovation through expertise.

We are Renown.

Renown Health has grown to become the definitive provider of advanced emergency care and leading-edge medical services in northern Nevada. Defined by our role as the only Level II Trauma Center between Sacramento and Salt Lake City, as well as the region’s only Children’s ER, Stroke Center and D-SPEC heart camera, ours is a commitment to ensure successful outcomes for our patients by ensuring the success of each Renown employee.

- Clinical Nurse Supervisor: Admin, ER, ICN, ICU, NICU, Nephrology, Neuroscience, Ortho, Oncology & Telemetry
- Clinical Review Specialist
- Clinical Chart Auditor
- Certified Nurse Midwife
- Infection Control Coordinator

- Nurse Practitioner: Cardiology, Pediatric & Infusion Therapy
- Nurse Manager: CIC/CSU, ER & ICU
- RNs: CIC/CSU, ER, ICU, PICU, Rehab & Telemetry
- Nursing Coordinator

Learn more about us and the Reno-Tahoe area at www.renown.org/careers.

Skill. Expertise. Technology.

EOE

Renown
HEALTH™

Does Nursing Have an Image Problem?

Wallace J. Henkelman, Ed.D, MSN, RN
Assistant Professor, Touro University Nevada

Article Review

Erickson, J. I., Holm, L. J., Chelminiak, L., & Ditomassi, M. (2005). *Issues in nursing: Why not nursing. Nursing 2005, 35(7), 46-49.*

The authors of this telephone survey study asked high-school students and adults who were considering a career change what they thought about nursing as a career option. They found that only 5% of the students and 3% of the adults surveyed would chose nursing as a career.

In both groups, happiness at work was rated as the primary motivator in a career choice, but only 35% of students and 33% of adults thought that nursing provided that. For the subset of adults who were interested in nursing, a good salary and work schedule flexibility were rated highly as motivators, but less than a third of respondents saw nursing as providing those benefits.

The top five motivators for students were being happy in the job, the sense of making a difference, having a secure, stable job, and a good salary. The top five for adults were being happy in the job, making a difference, a good salary, interacting with people, and a sense of doing something important.

Deterrents to choosing nursing as a career identified in the study included the logical answer of "interested

in another career," but also included "Unappealing responsibilities/performing menial/cleanup tasks" and, especially for adults, that additional education and educational time is needed. Only 39% of students described nurses as critical thinkers and problem-solvers. Only 29% of adults thought that nurses are becoming more respected and appreciated. Very few in either group believed that nurses had salaries of more than \$45,000 (the national average is \$71,874 and the Nevada average about \$67,000).

An interesting finding was that among those interested in nursing, only 10% of students and 8% of adults had spoken to someone about the profession. The study strongly implies that we, as nurses, need to do more to educate potential nurses about who we are and what we do. Speaking engagements at elementary and high schools could only help our image and help to attract more applicants to nursing programs. That, of course, does not address the problems of providing qualified nursing instructors or increasing nursing school enrollments.

August, September, October 2011
**2011 Joint Commission
Article for RN Magazines**

Tracy Young

Nevada Interpreters and Translators Association

Nevada Interpreters and Translators Association-NITA understands the new 2011 Joint Commission Requirements related to communications.

The federal law has been clear for years regarding language access to patients; however, most hospitals are slow to follow. Joint Commission is helping our hospitals hurry along!

The use of qualified interpreters and translators is supported by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and the Title VI of the Civil Rights Act of 1964. And now the Joint Commission is adding to the definition of "qualified"—"qualification for language interpreters and translators may be met through language proficiency assessment, education, training, and experience." Basically, if your organization wants to be accredited by the Joint Commission (TJC), then they must use "qualified" interpreters and translators. But don't worry—TJC gives you this year to get yourselves organized.

There are many different ways to access an interpreter in these modern times:

1) The most personable, accurate, and effective option is an IN PERSON, FACE TO FACE INTERPRETER. Nevada's diverse ethnic and linguistic population is growing every year, according to the Nevada Census. Approximately 25% of the population is Hispanic, 6% is Asian in the larger urban areas, and 17% is American Indian in some rural counties.

"As the minority population grows so does the number of registered nurses who are bilingual in the workforce," states Tracy Young, RN, interpreter trainer, and co-founder of the Nevada Interpreters and Translators Association (NITA). "These nurses are an invaluable asset for the non-English or limited English-speaking patient's health and wellbeing. This course to become a trained interpreter is ideal for the bilingual RN who interprets for their patients and for the others on the floor."

2) New technology has made video remote interpreting a cost effective reality, also (similar to Skyping with an interpreter). You just need a COW (Cart on Wheels) and a laptop with a camera, and away you can communicate.

3) And last, but not least, the good old fashioned telephone interpreter is always available 24/7, 365.

"Does being bilingual qualify me to be an interpreter?"—Unfortunately "no, that's just the starting point," medical interpreter trainer Tracy Young answers. An introductory course of 40 hours will give the bilingual employee the basics on interpreting skills. NITA offers two 40 hour trainings for medical interpreters yearly. The next class is held at University Medical Center, Las Vegas, November 14th-18th. Visit www.nitaonline.org for more information, or call Tracy Young, at (775) 772 9319 for more information.

NITA is here to answer any questions and assist you with meeting the Joint Commission requirements. Good luck and happy accreditation!



Recovery doesn't always happen overnight.

CONTINUE THE CARE

Kindred Healthcare understands that when people are discharged from a traditional hospital, they often need continued care in order to recover completely. That's where we come in.

Kindred offers services including aggressive, medically complex care, intensive care and short-term rehabilitation.

Doctors, case managers, social workers and family members don't stop caring simply because their loved one or patient has changed location.

Neither do we.

To see how we care or to learn about a career with Kindred, please visit us at www.continuethecare.com.

Dedicated to Hope, Healing and Recovery



LONG-TERM ACUTE CARE HOSPITALS • NURSING AND REHABILITATION CENTERS • ASSISTED LIVING CENTERS

OR Nurse Manager

Las Vegas location, immediate opening

Busy ambulatory center needs experienced nurse manager

Multi specialty ASC, Top compensation

Fax resume to Administrator
702-851-0473



Why Does Nevada Need Legislative Changes to Meet the Growing Healthcare Needs of Our Citizens?

Diane McGinnis, DNP, APN-FNP, NP-C

The Institute of Medicine, in its recent report on the "Future of Nursing" (2010), encourages all healthcare providers: to be utilized to the full extent of their education and training; to achieve higher levels of education and training through a seamless academic progression; to be full partners with physicians and other health professionals; and to create effective workforce planning and policy making by using data collection and improved information infrastructure.

Since the United States of America values individual State's rights, many states have very different regulations pertaining to nursing care, and the regulations pertaining to advanced practice nursing are very incongruent. This incongruence seems to be a key roadblock to fully utilizing advanced practice nurses to the extent of their education and training.

In the case of the Advanced Practice Nurse, it is important to standardize certain language across our nation to create a better understanding by consumers, nurses, and other healthcare providers regarding the title APRN. It is essential to identify the differences between an advanced practice nurse (APRN) and a nurse who does not have advanced practice training but may have a graduate degree.

In 2008, a group of close to 50 nursing and other health profession leaders published the APRN Consensus document. This was a landmark event since there are many different types of nursing practice. The "consensus" of the group was that standardized language and regulation across state lines would provide for a better understanding of the "licensure, accreditation, certification and education (LACE)" of advanced practice nurses.

The Nevada State Board of Nursing's (NSBN) agenda is to protect the public by ensuring safe practice of all nurses by interpreting and enforcing current statute and regulations. These statutes and regulations are unique to Nevada, and need revising to meet the APRN Consensus Model regulation suggestions.

A step in this mission was the passage of Senate Bill 205, during the 2011 Nevada legislative session. The bill will make it a requirement for all new APRN licensees in the State of Nevada to hold a national certification in one of the areas of education for an APRN. Nevada was one of only four states in the nation missing this key component of the APRN Consensus model regulation. This legislative change is not scheduled to be enacted until 2014 to allow for students currently in programs, and the APRN programs themselves to prepare for the requirement. In addition, a "grandfather clause" will allow for current APRN's in Nevada who do not have national certification to choose to remain uncertified and still practice.

A definition of an APRN from the National Council of State Boards of Nursing (NCSBN) website states the APRN is an "individual who has:

- Completed an accredited graduate-level educational program
- Passed a national certification examination that matches the educational preparation
- Acquired advanced clinical skills and knowledge
- Practice built upon the competencies of a RN
- Clinical experience of sufficient depth and breadth to reflect the intended license
- Obtained a license to practice as an APRN in one of the four roles" (https://www.ncsbn.org/APRN_Consensus_Model_presentation.ppt)

The consensus document recognizes these "four roles" of the APRN as nurses with advanced graduate nursing preparation in one of four specific areas: Certified Nurse Practitioner-CNP, Certified Nurse Midwife-CNM, Certified Nurse Anesthetist-CRNA, and Certified Nurse Specialist-CNS. This "title protection" is an important component of decreasing confusion about APRN's roles.

According to the Consensus document, many nurses have graduate and post-graduate degrees and are practicing in roles and specialties that do not provide direct care to individuals. Therefore, this type of practice does not require regulatory recognition beyond the Registered Nurse license granted by state boards of nursing and may not use any term or title which

may confuse the public, including advanced practice nurse or advanced practice registered nurse. The term advanced public health nursing however, may be used to identify nurses practicing in this advanced specialty area of nursing (p. 5).

The APRN, can utilize advanced practice techniques such as prescribing medications, treatments, or radiological/laboratory interventions, and thus practices at a level beyond what a Registered Nurse can do. These expanded scopes of practice are what prepare the APRN to be part of the team of primary care providers that will be needed as health care reform is enacted. It has been anticipated, by many, that there is a population of people whom have been postponing medical care, possibly due to the high cost for the uninsured, who will enter the healthcare system with healthcare reform.

How can you as a nurse make a difference in the goal of a National Consensus?

Nevada Nurses can play a significant role in providing evidence and information that legislators need:

- To guide and make decisions
- To impact policies, legislation and regulations
- To build consensus on important issues

Political nursing advocacy is key to achieve intended goals through various activities:

- Mobilizing members and building legislative coalitions
- Writing press releases, making phone calls or providing testimony

- Contacting and/or seeking elected officials endorsements
- Monitoring public opinion

Please choose to become involved in your state's legislative process to ensure that nursing is a safe and strong profession and is available to meet the growing healthcare needs of Nevada citizens.

A copy of the APRN Consensus document can be found at the following link: <http://www.aacn.nche.edu/Education/pdf/APRNReport.pdf> (41 pages).

The author is the Nevada State Representative for the American Academy of Nurse Practitioners (AANP). The opinions in this article are of the individual, and not necessarily of the AANP. Please feel free to contact the author at: mcginnisFNP@gmail.com

References

- American Association of Colleges of Nursing. (2010, August 23). The essentials of master's education in nursing [Draft]. Retrieved from <http://www.aacn.nche.edu/Education/pdf/DraftMastEssentials.pdf>
- APRN Consensus Document. (2008). <http://www.aacn.nche.edu/Education/pdf/APRNReport.pdf>
- IOM. (2010). Future of nursing: Leading change, advancing health. Washington, DC: National Academies Press.
- Stanley, J. (2010, March 12). The APRN consensus model: Implications for educators & practitioners [AACN Faculty Link, PowerPoint]. Washington, DC: AACN.
- Stanley, J. M., Werner, K. E., Apple, K. (2009, November-December). Positioning advanced practice registered nurses for health care reform: Consensus on APRN regulation. *Journal of Professional Nursing*, 25(6), 340-348.

School of Nursing Part-Time Faculty Positions Available Fall 2011

OVERVIEW

Nevada State College was established in 2002 as Nevada's first and only mid-tier institution in the Nevada System of Higher Education. As the first four-year comprehensive college in the state, NSC is dedicated to providing quality education, social, cultural, economic and civic advancement to the citizens of Nevada.

NSC also addresses Nevada's need for increased access to higher education. The College places special emphasis on meeting the state's need for effective, highly educated, skilled teachers and nurses and offers a wide range of baccalaureate degree programs grounded in the liberal arts and sciences.

NSC CAMPUS

NSC's main campus sits on a 509-acre site in Henderson, Nevada, a city consistently ranked as one of the best places to live and located just 15 miles from the world-famous Las Vegas Strip. NSC has a satellite campus in the heart of Henderson's Downtown District and off-site locations throughout the state.




ABOUT NSC

Nevada State College is a young, rapidly growing four-year college, with an enrollment of nearly 3000 students. Our students learn from the best teachers, using the latest technology, in a small personal environment.

The School of Nursing is seeking dedicated faculty to work in a highly collegial, interdisciplinary environment. Our faculty and staff enjoy the rare opportunity to shape the college as it continues growing into a cornerstone of higher education in Southern Nevada.

At NSC, we are committed to achieving and maintaining a diverse workforce. This commitment is rooted in the belief that a diverse educational experience begins with the people who are providing and supporting that education. To us, diversity means valuing the spectrum of social, cultural, and intellectual identities among people and helping all achieve success.

NSC SCHOOL OF NURSING

The NSC School of Nursing is accredited by the Commission on Collegiate Nursing Education and approved by the Nevada State Board of Nursing.

Students are admitted to the School of Nursing in four tracks:

1. Regular
2. Accelerated
3. Part Time
4. RN to BSN

The School of Nursing prepares BSN graduates, utilizing a caring-based philosophy. NSC is seeking part-time faculty with a background in medical-surgical nursing to teach clinical and skills labs during the Fall 2011 semester. Clinicals are held throughout the Las Vegas valley; skills labs are held at the Clinical Simulation Center of Las Vegas.

QUALIFICATIONS

Required:

- Active RN license
- BSN with five years full-time experience
- Effective oral and written communication skills

Preferred:

- MSN
- Teaching experience (e.g., preceptor)
- Supervisory experience

Apply now at nscjobs.com.

Simplify your nursing research...



with access to
over 10 years
of nursing
publications
at your
fingertips.

nursingALD.com

Simply click on the Newsletter tab on the far right and enter your search term.

District 3 Announces Nursing Scholarship Criteria

Sue Witt PhD, RN-BC, CCRN, CNE
Rosemary Witt PhD, CNE

Due to the responsiveness of organizations and individuals, the IFFN dinner raised sufficient funds to offer scholarships for the 2011-2012 academic year. The scholarships will be offered in three formats, all of which support the idea of supporting educational progression among nurses. The scholarships are competitive and an application must be submitted to the Scholarship Committee of District 3. Since the emphasis is on progression, the funds will be awarded to nurses pursuing a second degree or professional advancement. For example the ADN graduate continuing for a bachelor's degree, or the baccalaureate degree pursuing graduate education in nursing. The educational scholarship requires that the

student achieve a minimum 3.25 GPA average and that the student be in the second semester of the program. This decision was reached after discussion that a student may sample a program, and then during or at the end of the first semester decides not to continue. The scholarship committee believed that enrollment in the follow-up semester indicated a commitment to continue. The educational scholarship may be up to \$500. The second type of scholarship is the "book scholarship." Recognizing that textbooks have become very expensive, following the completion of a semester an applicant can present an invoice indicating payment of text books and be reimbursed up to \$300, which will then be available for the upcoming semester. Again the application will be competitive in nature, and the evaluation will be based on number of credits completed and grades. And lastly, nurses who choose to pursue certification in their specialty, can, when successful, apply for a "certification" scholarship. The award will be up to \$300. The final specifics have not yet been developed, but interested individuals should contact Sue Witt sue.witt@unlv.edu, Treasurer and member of the scholarship committee.

DON'T PUT YOUR **LIFE ON HOLD**



Continue Working While
You Advance Your
Career!

Convenient **ONLINE**
Programs

for Professional Nurses

- Doctor of Nursing Practice
- Master of Science in Nursing
- RN to Bachelor of Science in Nursing

www.tun.touro.edu

(702) 777-1750

T Touro University Nevada
School of Nursing
874 American Pacific Drive / Henderson NV 89014

Accredited by the Western Association of Schools and Colleges. The School of Nursing is licensed by the Nevada State Board of Nursing and professionally accredited by the Commission on Collegiate Nursing Education (CCNE). Licensed in Nevada by the Commission on Post-Secondary Education. Touro University Nevada is an Equal Opportunity Employer.

**NNA Continuing Education
Committee Announces Second
Annual Nevada Student
Nurses Competition**

Tracy Singh, RN

The Nevada Nurses Association, Continuing Education Committee is very excited to present the Second Annual NNA Student Nurse Competition, a unique opportunity for all Nevada RN Students. We look forward to seeing your school's team at the finals. The purpose of this competition is to encourage Nevada's Nursing Students to become engaged in the Nursing Legislative process and to learn how they can be part of the solution to the challenges they will face as Nursing Professionals.

This competition is open to all ADN & BSN RN Students. (LPN, Masters and bridge programs for licensed RNs are not eligible to enter the competition.) Participating schools will select one team of 3 to 5 students to compete in the finals. Each team will present an issue currently faced by Nevada Nurses with their proposed solution in 10 minutes or less.

The deadline to submit your school's INTENT TO ENTER without a fee is **July 1, 2011**. School entering **after July 1, 2011 through August 29, 2011** will be assessed a fee of \$10.00 per person or \$30.00 minimum per team. No school or team may enter the competition after August 29, 2011. To submit your intent to enter, simply reply to this email or send a message to tsingh@tsinghlaw.com with your name, the name and location of your school and a brief note indicating that your school intends to participate and we will reserve a spot for your school's team in the competition. Upon receipt of your school's notice of intent, you will receive additional documents to submit with your team's video.

The competing teams will be judged on their professionalism, the quality of the issue selected and the feasibility of the solution presented. All submissions must be presented by video on a DVD disc. The presentations will be judged anonymously by a panel of Nursing Professionals. Team members & school identity will remain anonymous until all judging is complete and the winning team is selected.

The winning team will have their presentation shown to the Nevada State Board of Nursing and will be featured in the *RNformation* quarterly publication, News You Can Use E-Newsletter and the Nevada Nurses Association's website.

We look forward to seeing your students at the finals and we wish your school the best of luck in the Second Annual NNA Student Nurse Competition!

Check it Out!

RNFormation is pleased to congratulate our new nursing school graduates—well done! Here's to continued success in your professional practice.

If you're studying for the NCLEX, **Test Prep Review** offers study guides, flashcards, and practice questions. Self-assessment modules include behavioral science, physical science (anatomy and physiology, biochemistry, microbiology), pathology, pharmacology, and body systems—these quiz questions are fun and stimulating. Follow the self improvement directory link for loads of additional information and study resources. The link to test anxiety presents a variety of topics from diagnosis to symptoms to management, with tips on eating and exercising to reduce anxiety. And while you're here, try the brain training games focusing on attention, memory, problem solving, and so much more.

Please visit **Test Prep Review** at www.testprepreview.com/nclex_practice.htm

NCLEX Test Review suggests testing strategies under the headings Test Information, and Recommendations. They also advocate a knowledge of basic nursing principles and their applications to assure patient safety—practice questions emphasize this kind of thinking. Selected reviews include cell structure, lesions, tumors, and medical terminology. And in anticipation of your success, follow the link to the nursing jobs website for information on applications, interviews, communication, and nursing organizations.

Please visit **NCLEX Test Review** at www.nclexinfo.com

Career Builder offers a variety of education and salary comparison tools for those looking for new opportunities. The education center provides a search engine for online schools offering programs from certificate through doctoral programs, and the salary advice and calculator assist in decision making.

Please visit **Career Builder's** salary calculator website at www.cbsalary.com

If you're ready for a break, you'll find lots of laughs at **Nurston**. This site is devoted to the humor of nursing—an absolutely essential survival strategy no matter your field or setting of practice. Comic strips range from nursing students to the interview to the first day to the ins and outs of daily practice. Have a look just for fun! This site also provides links to comedy, education, job search sites, uniforms and medical equipment, and more.

Please visit **Nurston** at <http://nurston.com>

In addition, please google “nursing quotes” for comedy, inspiration, and motivation.

A Quest for Knowledge—The New Beginning After Graduation

Barbara St. Pierre Schneider, DNSc, RN
Associate Dean for Research and Associate Professor
University of Nevada, Las Vegas
School of Nursing and School of Allied Health Sciences

One age-old theme of graduation commencements is “Today begins anew.” The end, as many keynote speakers have voiced, is merely the beginning. However, the beginning that should be noted is not the one traditionally spoken of focusing on “career” goals, but one aspiration that should decide every future life decision—a quest for knowledge. Knowledge is the center-piece to aiding those around you, as I have seen more than once in my own nursing student experience.

During my first clinical rotation as a nursing student, I met Debbie, who at the time was a registered nurse employed by oncologists to administer chemotherapy, teach patients about their chemotherapy, and provide emotional support to patients. During that same time, I was assigned to an elderly woman diagnosed with late-stage cervical cancer—my first patient.

Immediately, I was impressed with Debbie's ability to explain the immunological side-effects of chemotherapy to both the patient and me. I could tell that Debbie's clinical expertise and knowledge had earned her the respect of the staff nurses and oncologists. It was apparent how Debbie's knowledge made a difference to the patient, allowing the patient to be less stressed about her condition. Debbie's knowledge also made a difference in showing me the value of a bedside nurse.

Two years later, while completing an externship as a nursing student, I had the privilege to work alongside hospital oncology clinical nurse specialist, Cathy. Much like Debbie, Cathy was a wealth of information for her patients, staff nurses, physicians, and me. While shadowing Cathy, I observed her influence on patient care, her technical knowledge, and her desire to know and inform others about the latest research findings.

From Cathy, I also learned the value of knowledge derived from research. Not only was it evident that her knowledge aided physicians to identify the best course of action for patients' symptoms, this knowledge also helped educate staff nurses about the potential side-effects their patients might experience. But most importantly, it was Cathy's ability to comfort patients using knowledge that revealed her most significant contributions as a nurse.

Yet my quest for knowledge would have never started if not for one more mentor in my career, Babs. Babs was a professor I encountered during my last year of nursing school, an instructor whose contribution to

my future was verbalized in one line during her summary of what we would learn in her class. She stated, “Some of you will go on and obtain your PhD.” When Babs said this, I was oblivious of the influence those few words would have on my life. Because being a nurse scientist who discovers knowledge was not on my radar.

But Babs' words foretold the path that I would take. Although I loved being a bedside nurse on medical-surgical and oncology units, witnessing patients experiencing illness in various ways, I tired of the more experienced nurses telling me that that's the way we have always done things—things being nursing interventions. I began a path of discovering knowledge so that I could give the next generation of nurses a scientific basis for their interventions.

Each spring at commencement time, the next generation of nurses is trying to decide what their path will be. Some will become a bedside nurse, while others will find their calling to be a nurse scientist. But all should focus on one goal—following the insatiable, sleep-depriving, yet also euphoric and exhilarating, quest for knowledge to improve the health of the world's people.

Once this path is taken, all other “career” goals will fall into place.

Acknowledgment

The author would like to thank Jeff Kurrus for his insights and editing assistance.

JOIN OUR TEAM!

New Grads
Please Apply!

Home Health Services of Nevada

has PT and FT openings throughout Nevada, giving you the opportunity to use your critical thinking and assessment skills. We utilize computer charting and in home telemonitoring.

Excellent Pay Rates & Benefits!

Contact Leah Doke at ldoke@citlink.net for openings in your area.

EOE

UNIVERSITY OF NEVADA, RENO

Orvis School of Nursing

- B.S. in Nursing
- RN to BSN
- M.S. in Nursing
 - FNP
 - Nurse Educator
 - Clinical Nurse Leader
- DNP (Doctor of Nursing Practice)
 - University of Nevada Doctorate of Nursing Practice (UNDNP)
Collaboration with University of Nevada Las Vegas
For more information about the DNP Program at UNR contact:
Dr. Sarah Keating at sarahk@unr.edu

■ 775.784.6841



University of Nevada, Reno
Statewide • Worldwide

www.unr.edu/nursing



Marge Adams, RN

(Cont'd from page 6)

foundation for growth that we could build upon for the rest of our lives. I am so grateful for their commitment to excellence in learning.

I graduated three years later, in June of 1951, with my RN. Two weeks after graduation I married my high school sweetheart and we moved to Tennessee. I went to work in an old converted Southern mansion, which was the only hospital in this small town. We carried our own syringes, needles, thermometers, scissors, and hemostats. We scrubbed and sterilized them at the start of every shift, then cleaned and sharpened all our needles at the end of our shift. We worked for 75 cents an hour for eight-hour shifts. Later I did private duty in homes and hospitals and then worked in a pediatrician's office. We finally worked up to one dollar an hour.

My husband was employed by the Atomic Energy Commission so we moved frequently. I worked private duty to Las Vegas. Following the births began work in the old Las Vegas delivery, nursery, med/surg., and room duties. I worked for an was a great diagnostician so I him.



When we were transferred to American Nurses Association, as Association. I worked med/surg.

hospitals. I applied for a position in public health and had my uniforms ordered and job and class assignments, then we were transferred to Reno.

In 1969, Washoe Medical Center became what would be my home for the next 16 and a half years. I did a little of everything, except psychiatry, cardiac, OR and ER. I joined the Nevada Nurses Association upon my arrival in Reno. When we began our first Oncology Unit at WMC, I was privileged to help open that, and stayed there almost seven years. Utilization Review filled my final years there and I retired for yet another move. This relocation was to a very small mining community where my husband would pastor the only church. The nearest hospital was 96 miles away, so I gave away my uniforms and thought, "No more nursing for me!" WRONG!

As the only licensed medical person for many, many miles, I soon found myself as a volunteer Community Health Nurse. I rode the ambulance (from a town 30 miles away) and answered dispatch calls which originated 120 miles from our village for car accidents, domestic violence, murder, hostage situations, mine accidents, BB's in ears and faces, and most anything else of an emergency nature.

While in our wee mountain hideaway, I was appointed, and later elected, to serve on the hospital board of the hospital 120 miles away. I was then appointed as a liaison member to the Central Nevada Rural Health Consortium Board.

in Virginia, and then moved of our two daughters, I Hospital and did labor and occasionally emergency internist for a time and he learned a great deal from

Illinois in 1967, I joined the well as the Illinois Nurses in one of the two local

hospitals. I applied for a position in public health and had my uniforms ordered and job and class assignments, then we were transferred to Reno.

I also worked for a Home Health Agency in a neighboring county and drove 79 miles to work each day and then 79 miles home at night. This is retirement? I called it "re-tread-ment."

My husband's declining health status brought us back to suburban life here in Elko. I had read an article about Parish Nursing in one of my nursing publications and thought, "Wow, I'd love to do that some time." At the age of 65, I graduated from a course in Parish Nursing and began a new phase of my life. What a great experience this has been. While not hands-on nursing, it provided the opportunity to draw on my many years of nursing experience to provide leadership, direction, education, and support to the congregants of the church where I served as a volunteer Parish Nurse for over 10 years. Parish Nursing is a ministry of health education, personal health counseling, training of laypersons to serve as visitors, and as liaison to community health organizations, finally clarifying the close relationship between faith and health.

I feel that all my prior years in nursing were truly a preparation for this final blending of my nursing career and my deep faith in God into a ministry of health and wholeness for the members of my faith community.

Why did I become a nurse? I thought it was just an accident occurring when an adolescent, boy-crazy girl took a test she was in no way prepared for and passed it. I am now convinced that God allowed my boy-crazy streak to draw me to the career He had planned for me since my creation. It has been a challenging, fulfilling, service centered, educationally stretching, extremely satisfying career spanning 64 years... so far! "Miss Corley, Miss Corley, you will always be a nurse!"

Gloria Castillo, RN

(Cont'd from page 6)

a contest on naming the new newsletter and Gloria combined the suggestions into what is now known as the RNformation.

She started a state wide committee in collaboration with Dr O'Brien to ensure all children in Nevada received the polio vaccine and collaborated with Dr Miles to travel to the Las Vegas area; she completed the state vaccination program in Pahrump. She continued this relationship for many years with nurses doing vaccinations around the state on a routine basis.

She has always been available to serve and gives a helping hand to any NNA program or activity. She has over the years chaired many; "...too many to remember them all, many were great programs and well attended."

She attended every legislative session she could and took extensive vacation time to represent NNA at the legislature as an active lobbyist on issues like



Gloria and Julie Wagner at 2010 NNA Legislative Meet & Greet

certification of school nurses, amendment to the nurse practice act requiring that the Governor solicit names for the board from NNA. In 1964 she worked on passage of the nurses training act to fund nursing education and nursing schools. During this time Ethelda Thelan was President. Other legislative issues were funding of community colleges and criteria for continuing education requirements for nursing. "There was always something new and some that we stopped because they would not have provided good nursing care."

In 2002 she receive the Life time achievement award at a beautiful sit down dinner with 1500 nurses at the Nurses of Achievement ceremony in Reno. In 2009, she received the NNA District One Lifetime Achievement President Award along with Deloris Middlebrooks.

She and her brother John started to do numerous traveling adventures. Their trips started locally with an annual trip to Winnemucca for the photographer of the west program and to Ely for the cowboy poetry. Then they decided: "we need to see the world." They have traveled within the United States to see as many national parks and fun areas as possible. Then they were on to Spain and Portugal to visit Basque relatives, Australia and New Island, Hong Kong and Tokyo. They enjoyed riding in an English surrey in London, riding the boat barges down the Rhine River to the Danube in Austria, followed by going north and south in an Alaska cruise and then Antarctica seeing the penguins.

Her biggest sadness is that she has to restrict her driving at age 90, but "there is always a tour plane or a tour bus that can take us somewhere else!"

For the difference you make.



Coordinate with co-workers while on the move and keep up with family near and far. Get instant savings on monthly plans from where you work. Discount for nursing professionals!

Save 15%

Select regularly priced monthly service plans

Requires a new two-year Agreement.



Exclusive Offer for Nursing Professionals!

1-866-639-8354 (IL Telesales Number)

Visit a local Sprint Store www.sprint.com/storelocator

Bring your Nursing ID, this ad and mention this code:

Corporate ID: **HCLOC_SNV_ZZZ**

Make your nursing research easy...

NURSING NEWSLETTERS ONLINE

READ YOUR STATE NEWSLETTER ONLINE!



Enter Search Term

Search all Newsletters

Search

nursingALD.com

Access to over 10 years of nursing publications at your fingertips.

May require up to a \$36 activation fee/line, credit approval and deposit. Up to \$200 early termination fee/line applies. Individual-Liable Discount: Available only to eligible employees of the company or organization participating in the discount program or Government agencies participating in employee discount pricing with Sprint. May be subject to change according to organization's agreement with Sprint. Available upon request on select plans and only for eligible lines. Discount applies to monthly service charges only. No discounts apply to add-ons \$29.99 or below. Other Terms: Coverage not available everywhere. Nationwide Sprint and Nextel National Networks reach over 277 and 278 million people, respectively. Offers not available in all markets/retail locations or for all phones/networks. Pricing, offer terms, fees and features may vary for existing customers not eligible for upgrade. Other restrictions apply. See store or sprint.com for details. ©2011 Sprint. Sprint and the logo are trademarks of Sprint. Other marks are the property of their respective owners.

P065134
M11234567

The Profession Of Nursing

Traci Hart MSN, RNC

The definition of a profession is that it requires specialized knowledge, training and education. Well, I have all three as a nurse so by definition that qualifies nursing as a profession. A vocation on the other hand is defined as steady employment. Nursing may have started out as a vocation but we have moved so far beyond that. I think of myself as a professional but it goes beyond my credentials. It is not just the skills I perform but the change, no matter how small, I make in a patient's day or their life. So nursing is my profession, vocation, avocation and passion. There is nothing as rewarding or sometimes exasperating but I wouldn't do anything else.

The profession of nursing has given me more books than I will ever need and some I refuse to part with. Nursing has given me friends, colleagues and knowledge I could never have obtained anywhere else. I learn every day and that is a wonderful thing. My profession has also given me the privilege to teach students and usher them into this wonderful field. No price can be put on my career. I am a professional. Those who have been told in your career that you are "just a nurse," don't take it as a negative. Tell yourself that yes, I am and I am proud of myself, my achievements and my profession. Florence would be proud of what we have become and what we will be in the future.

Health care is uncertain right now but the one constant is nursing. We have a strong voice and are a formidable presence in the health care facilities and in the

lives of our patients and their families. We need to realize that we are a profession and shoulder that responsibility with pride. We are not handmaidens but caregivers, not pillow fluffers but life savers. By understanding and embracing our profession and the power that we have, we can change the face of health care. It needs to come from the nurse who is there in the trenches day in and day out. The nurse who can see what the problem is. Then see the practical, cost efficient and patient centered solution and make that solution a reality. This is the heart of nursing. This is our legacy.

Part of our legacy is to pass on our collective experience and information to those who come behind us. The nursing students of today are the nurses of tomorrow who will be caring for us and our families. We owe these students and their future patients the best education they can receive. It is our obligation as nurses to usher in the new graduates to the profession and make them feel welcome. Gone are the days of "nurses eat their young." We are nurturing by nature and need to extend that to each other. This begins with our new nurses. We need to keep them in our profession so they may reap the same benefits and blessings that we have been privileged to. They learn by example and as professionals we need to set the bar at its highest point.

No matter the initials behind your name you are a nurse. Remember the decision that originally set you on this path. It may have been a family member, a nurse who cared for you or in my case a television show that showed an independent woman who helped people. Don't let the feeling stop after Nurse's Week. Keep it with you always. It is a part of you. Show your pride. Wear your scrubs to the grocery store with your name tag on, remember that your bad back was worth it. Know that your family understands that you had to work nights and holidays and most of all that your dedication meant something to another and that, in itself, is priceless.

District One President's Message

(Continued from page 1)

information and educational opportunities in this high tech world with to the ability to "touch someone."

With creative ways you will need to reach high and beyond the evolving and ever changing electronic communication. Whoever thought that email would be passé?

As I step down from this role and Lisa Jonkey steps up to the plate I beg for each and every one of you to look deep inside of yourself and BE the most important role in nursing: "A Volunteer to Help Other Nurses."

Nursing is a passion and a job; to succeed and grow in that role one needs to share that passion and network with others. What better way than through ANA/NNA, for you will find that you will grow and reach even higher success in your own career!

You are the best, and I appreciate all of you who have been Board Members: Susanne Byrne, Kathy Ryan, Linda Lesperance, Deb Ingrassia-Strong, Kari Jo Passman, Julie Wagner, Linda Saunders, Marla Johnson, Beth Bomberger, Jean Lyon, TC Black, Cathy Dinauer, Carol Vickrey, Tricia Brown, Nancy Magnusson, Lorraine Bonaldi-Moore, Jeannette McHugh, Janet Bryant, Virginia Hayes, Pam Johnson, Brenda Harding, Jackie Alexander, Terry Ditton, Virginia Ennis, Marena Works.

Also I want to thank many of my mentors in the state for their dedication to NNA (pray I haven't forgotten too many); Margaret Curley, Lisa Black, Teresa Serratt, Tracy Singh, Martha Drohobyzcer, Patricia vanBetten, Deloris Middlebrooks, Gloria Castillo, Dorothy Button, Cynthia Bunch, Nikki Aaker, Doreen Begley, Debra Scott, Karen Fontaine, Patsy Ruchala, and in the legislative process, Neena Laxalt, Cheryl Blomstrom, Bonnie Parnell, Shelia Leslie, Bill Welch.

Adios
Betty Razor

PS: Don't forget the Legislative Meet and Greet in late August at Willow Springs.

Legislative Update

(Continued from page 3)

This was an important step in fulfilling NNA's mission of promoting and upholding excellence and integrity in the profession of nursing since professional certification is a nationally and professionally recognized means to validate advanced practice nurses' specialized knowledge, skills, and abilities against national standards and to continue to ensure safe care for Nevadans. It also brings Nevada into compliance with the recommendations of the National Council of State Boards of Nursing regarding the regulation of Advanced Practice Nurses. While the majority of Nevada's APNs already maintain national certification, Nevada was one of only four states in the nation that did not require national certification for obtaining a certificate of recognition as an advanced practitioner of nursing. Passage of this bill allows Nevada to be consistent with national standards and improves Nevada's ability to recruit APNs for practice and faculty roles, an important issue since Nevadans are increasingly faced with difficulties accessing primary care.

As we move forward toward the next legislative session in 2013, new initiatives will be identified and task forces formed. We need the support and effort of nurses across our state to accomplish our mission of advocating for the profession of nursing, representing the collective voices of registered nurses, and promoting and upholding excellence and integrity in the profession of nursing. The work begins anew at the end of this legislative session and will continue through the next legislative session and we need your help. Please consider supporting the Nevada Nurses Association through membership and volunteerism. Together we CAN make a difference for patients and nurses in our state!

Wishing
upon a
star?



Find a nursing
career where
you can become
a star!

nursingALD.com

Registration is free, fast,
confidential and easy!
You will receive an
e-mail when a new job
posting matches your
job search.

NATIONAL UNIVERSITY

ENRICH YOUR MIND, ENHANCE YOUR POSSIBILITIES





GROW WITH A DEGREE. Are you ready for an exciting change in your life that could significantly improve your future opportunities?

.....

An associate's, bachelor's, or master's degree from National University may distinguish you in the workforce and serve as the catalyst you need to launch your career forward.

As a nonprofit institution, we invest in our student's success, which means we offer:

- A high-caliber curriculum
- Dedicated faculty
- Intimate classroom sizes
- The latest technology tools
- An accelerated, one-course-per-month format

HENDERSON CAMPUS
2850 West Horizon Ridge Parkway,
Suite 300
702.531.7800

ONLINE INFORMATION CENTER
Canyon Pointe in Summerlin
702.531.7850

**LEARN MORE ABOUT
NATIONAL UNIVERSITY TODAY.**

www.national2011.info | 800.NAT.UNIV
(628.8648)



An Affiliate of National University System
A Nonprofit University Accredited by WASC





Mobilized
Business to Business

Fingerprinting for Healthcare
and NV State Board of Nursing,
education, real estate, licensing,
gaming and more...
Child ID Kits Available

702-485-5256
Call for Appointment
Office and Mobile
800 Rainbow Blvd Ste 175
Las Vegas, NV 89107

www.bdfingerprinting.com

Nevada Health Care Sector Council to Deliver 10-year Strategic Plan to Develop Nevada's Health Care Workforce

Plan to expand Nevada's primary care workforce by 10-25 percent
Submitted by Southern Nevada Medical Industry Coalition

During the 2009 Legislature, Senate Bill 239 was passed, establishing Nevada's Health Care Sector Council (NHCSC). The council's mission was to identify job training and education programs to best meet regional economic development goals. Due to a lack of focus and funding, the council was idle.

Last summer, the council found non-traditional funding and purpose thru the Affordable Care Act State Health Care Workforce Development Planning grant from the Health Resources and Services Administration (HRSA). The \$150,000 grant activated the council, which has since been working on formulating a plan to expand Nevada's primary care Full Time Equivalent (FTE) health care workforce between 10 and 25 percent over the next 10 years. This increase would meet—not exceed—the demand for health care services in the Silver State.

The plan, set for completion early this summer, will identify changes in the health care industry that will make the most impact. NHCSC is charged with informing the Governor's Workforce Investment Board of health care organizations that will have the greatest likelihood of meeting the regional workforce development and economic goals. The Southern Nevada Medical Industry Coalition, an incumbent training provider for Workforce Connections, is expected to be a leader in the roll-out of these training and development programs.

"Having the program directly identify the specific issues is going to help tremendously," said Dr. Maurizio Trevisan, executive vice chancellor and chief operating officer of the University of Nevada Health Sciences System, NHCSC member and SNMIC board member. "We want to make sure that we do have an impact and keep health care graduates employed in Nevada."

The council is made up of more than 20 health care professionals as well as additional subcommittee members. NHCSC members represent the Nevada Hospital Association, Culinary Workers Health Fund, Nevada Health Care Association, nursing licensing, Black Nurses Association, AARP, College of Southern

Nevada, St. Rose Dominican and Spring Valley hospitals, University of Nevada School of Medicine, Nevada State Medical Association, the State of Nevada, Lou Ruvo Brain Institute, Nevada System of Higher Education, SNDH, Nevada Department of Education, University of Nevada, Reno Division of Health Sciences and Center for Research Design and Analysis, Keep Our Doctors in Nevada and Nevada Rural Hospital Partners.

Bringing together representatives from every facet of the health care industry was vital to serving the council's general purpose, Trevisan said.

"The health care industry is the ultimate source of employment. They need to be engaged in this process," Trevisan added. "It's important the strategies are agreed upon and everyone is on the same page."

The plan is a first for the state, and what comes from it will be focused on overall health care improvement and training to ensure a healthier future.

"The goal is to increase the volume of professionals and decrease the ratios," said Doug Geinzer, CEO of the Southern Nevada Medical Industry Coalition (SNMIC), and member of the NHCSC. "For the first time, Nevada is working on a plan to identify the future of Nevada's health care industry, and the energy and impact the plan generates will affect Nevadans for decades."

Nevada ranks 51st in the United States in the percentage of the population employed in health care occupations; 49th in the number of registered nurses per capita; 46th in regards to the number of active primary and patient care physicians per capita; 47th in the number of hospital beds per 100,000 people; 45th in the list of healthiest states; and, 49th for having positive determinants that can lead to healthier outcomes for Nevada's citizens.

"This is crucial. The State of Nevada has poor health indicators," Trevisan said. "(But) it's not only important for the health of the people but for the economic engine."

Is Acid-Suppression Beneficial?

Wallace J. Henkelman, EdD, MSN, RN
Assistant Professor, Touro University Nevada

Patients admitted to hospitals for medical conditions are very frequently placed on acid-suppression medications such as proton pump inhibitors (Prilosec, Zegerid, Nexium, Protonix) or histamine-2 receptor blockers (Tagemet, Zantac). Estimates are that 40% to 70% of medical inpatients are so medicated. For most patients these prescriptions are not related to any medical diagnosis, but are intended to be prophylactic for gastrointestinal (GI) bleeding. This use of the medications seems to be based on extrapolation from results obtained in critically ill, intensive care unit patients, in which such benefits have been documented, but research on non-ICU patients has been limited (Herzog et al., 2011).

In a study by Herzog et al. (2011) involving 78,394 admissions, the incidence of gastrointestinal bleeding was analyzed in patients exposed to acid-suppression drugs and those not exposed. Although acid-suppression did lower the odds ratio for development of GI bleeds by 37%, a primary finding of the study was that the incidence of gastrointestinal bleeding was overall very low (0.29% of admissions). They calculated that, as a result, 770 patients would need to be treated with acid-suppressants to prevent one nosocomial GI bleed and that 834 patients would need to be treated to prevent one clinically significant GI bleed (Herzog et al., 2011).

In addition to the unnecessary costs associated with these treatments, there are studies showing that acid-suppressant drug therapy is associated with increases in the incidence of *Clostridium difficile* infections (Aseeri, Schroeder, Kramer, & Zackula, 2008; Dial, Alrasadi, Manoukian, Huang, & Menzies, 2004; Howell, Novack, & Gruurich, 2010) and hospital-acquired pneumonias (Herzog, Howell, Ngo, & Marcantonio, 2009).

Routine use of these medications may well be harmful rather than beneficial to our patients and their routine use needs to be questioned. Non-ICU nurses should question physicians about the need for such prescriptions and APN's should look at their prescribing practices for inpatients.

References

- Aseeri, M., Schroeder, T., Kramer, J., & Zackula, R. (2008). Gastric acid suppression by proton pump inhibitors as a risk factor for clostridium difficile-associated diarrhea in hospitalized patients *American Journal of Gastroenterology*, 103(9), 2308-2313.
- Dial, S., Alrasadi, K., Manoukian, C., Huang, A., & Menzies, D. (2004). Risk of Clostridium difficile diarrhea among hospital inpatients prescribed proton pump inhibitors: Cohort and case-controlled studies. *Canadian Medical Association Journal*, 171(1), 33-38.
- Herzig, S. J., Howell, M. D., Ngo, L. H., & Marcantonio, E. R. (2009). Acid-suppressive medication use and the risk for hospital-acquired pneumonia, *Journal of the American Medical Association*, 301(200), 120-128.
- Herzig, S. J., Vaughn, B. P., Howell, M. D., Ngo, L. H., & Marcantonio, E. R. (2011, February 14). Acid suppressive medication use and the risk of nosocomial gastrointestinal track bleeding. *Archives of Internal Medicine Online*. Retrieved from www.archintermed.com

University of Nevada
School of Medicine
Office of Continuing Medical Education and Professional Development

www.medicine.nevada.edu/cme
Your source for Continuing Education and Professional Development.
Visit us online today for upcoming events and conferences!



Looking for
experienced
Home Health
and Hospice
Nurses



Please fax resume to 702-696-1003 or email to emievaldez@creeksidehomehealth.net

Join NNA Today!



Humboldt General Hospital

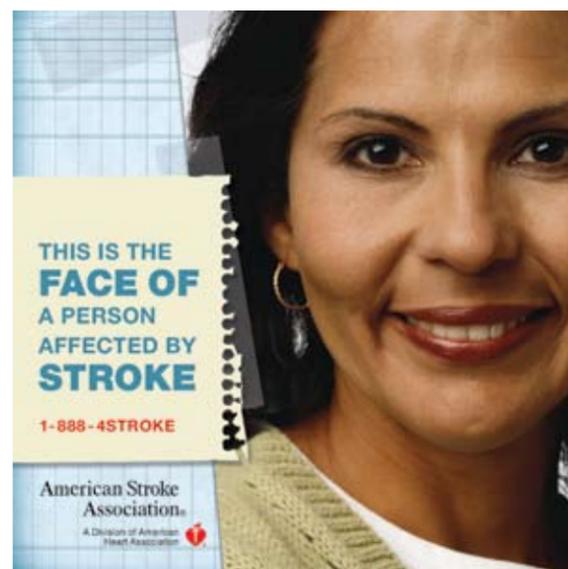
REGISTERED NURSES

Full-time positions available for: Emergency Room, Labor and Delivery, Med/Surg, ICU, and Surgical. Nevada license required. We offer competitive salary DOE; excellent benefits including Public Employees Retirement, group insurance benefits, accrued PTO & Sick Leave.

Contact HR Director
Humboldt General Hospital

118 E. Haskell Street
Winnemucca, NV 89445
rose@hghospital.ws
Fax (775) 623-5904
EOE Employer

Non-smoking facility, non-smoker preferred.



Primary Screening for Cervical Cancer Screening: Incorporating New Guidelines and Technologies into Clinical Practice

Mary Lauren Lemieux

Journal for Nurse Practitioners 2010; 6(6):425-426
Reviewed by Denise Rowe, MSN, APRN, FNP, BC

This article reviews the latest guidelines for cervical cancer screening published in 2009 by the American College of Obstetricians and Gynecologists (ACOG).

Between 1955 and 1992, deaths from cervical cancer decreased by 74% due to the successful introduction of the papanicolaou (pap) test used to screen for cervical cancer¹. The age-adjusted incidence rate for cervical cancer in 2008 was 8.4 cases per 100,000 women with a lifetime risk of 0.69% of developing cervical cancer. The median age for diagnosis of cervical cancer is 57². Cervical cancer has a five year survival of near 100% for pre-invasive lesions and near 92% for lesions at the early stage³. Squamous cell cervical cancer follows a predictable course from initial exposure to the Human papillomavirus (HPV), its primary cause, to premalignant cellular changes, and then to cancer. The process takes an average of 9 to 15 years⁴. Therefore, the goal of cervical cancer screening is to identify pre-invasive and early invasive lesions which could stop disease progression^{3, 5}.

For over 50 years, the annual Pap test had been the norm for most women. However, over the years new evidence has emerged to support starting cervical cancer screenings later, and screening low-risk women less frequently. National practice guidelines support lengthening the intervals between pap screening, including testing for human papillomavirus, and completely stopping testing for some women if appropriate^{3,5}. Consequently, the American Cancer Society (ACS) and the US Preventative Services Task Force (USPSTF) revised their clinical practice guidelines for cervical cancer

screening in 2002 and 2003 respectively. Despite, the ACS and USPSTF guidelines, there were wide variations in how cervical cancer screenings were performed by healthcare practitioners.

Studies showed that clinicians found the guidelines confusing and continued to significantly over screen for cervical cancer with only about 22% of internists, family practice physicians and obstetricians and midwives following the screening protocols⁶⁻⁷.

The ACOG evidence-based guidelines for cervical cancer screenings are as follows:

- 1) Initial screening should begin at age 21
- 2) Screening intervals:
 - a) Between age 21 to 29, screen every 2 years
 - b) At age 30 and older, screen every 3 years if 3 consecutive pap tests are negative
- 3) Testing for HPV plus pap test
 - a) Is recommended for women age 30 and older;
 - b) It is not recommended in women age 21 to 29 or as a test for sexually transmitted infection (STI) due to high rates of HPV and false positive results in this age group. HPV DNA testing can however be used to triage a pap result of Atypical Squamous Cells of Undetermined Significance (ASC-US)
- 4) In cases of hysterectomy with removal of the cervix, and no past history of high grade cervical intraepithelial neoplasia (CIN), routine screenings should be discontinued
- 5) Stop routine screening between age 65 and 70, if 3 consecutive screenings are negative

and there have been no abnormal pap tests in the last 10 years

I agree with the author, that the latest guidelines from ACOG clear up the confusion on when to start or stop cervical cancer screenings. It specifies how often to screen, and when it is appropriate to test for HPV, based on age and risk factors.

References:

1. American Cancer Society. *Cancer facts and figures*. 2008. Atlanta: American Cancer Society;2008
2. National Cancer Institute. National Cancer Institute surveillance epidemiology and end results. SEER stat fact sheet: cancer of the cervix uteri. Available at: <http://seer.cancer.gov> 2008; Accessed April 8, 2009.
3. Saslow D, Runowicz CD, Solomon D, et al. American cancer society guideline for the detection of cervical neoplasia and cancer. *CA Cancer J Clin*. 2002;52:342-362.
4. Merck. *Monographs in medicine: human papillomavirus*. West Point, PA: Merck; 2008.
5. American College of Obstetricians and Gynecologists. Cervical cytology screening. *Obstet Gynecol*. 2003;102(2):417-427.
6. Yabroff KR, Saraiya M, Meissner HI, et al. Specialty differences in primary care physician reports of Papanicolaou test screening practices: a national survey, 2006 to 2007. *Ann Intern Med*. 2009;151(9):602-611.
7. Murphy PA, Schwarz EB, Dyer JM. Cervical cancer screening practices of certified nurse-midwives in the United States. *J Midwifery Womens Health*. 2008;53(1):11-18.

Register Today!
NMCongress.com

Nursing Management Congress 2011

October 24-28, 2011
Paris Hotel
Las Vegas
Nevada

Wolters Kluwer | Lippincott Williams & Wilkins
Publisher of Nursing Management journal

Why nurses need their own malpractice plans:

Because an employer's plan generally won't cover you if you've moved on to a new job

Switching jobs isn't unusual in today's working world. But as a nurse, moving to a new job and a new employer can have a significant impact on you if you're later named in a malpractice lawsuit.

Why?

Because if you no longer work for a health care facility, their malpractice coverage usually won't cover you for claims filed at a later date.

That's why ANA recommends **personal** malpractice coverage for **every** practicing nurse.

Your personal malpractice plan gives you **seamless** protection that travels with you as your career takes you to new jobs ... giving you reliable protection if a claim suddenly arises from something that happened years ago when you were working for a different health care facility.

Special Discounts Negotiated For ANA Members

Setting up your own malpractice plan doesn't have to be expensive.

As an ANA member, you may qualify for one of these four ways to save 10%:

1. Attend an approved risk management seminar
2. Hold an approved certification
3. Work at a Magnet Hospital
4. Work in a unit that has received the AACN Beacon Award for Excellence

Set up your own malpractice safety net with the ANA-endorsed proliability Program:
Call 1-800-503-9230 or visit www.proliability.com/50743 today

ANA AMERICAN NURSES ASSOCIATION

50743, 50759, 51926, 51928, 50764, 50786, 50762, 51927, 50783, 50798 (7/11)
©Seabury & Smith, Inc. 2011 CA Ins. Lic. #0633005 AR Ins. Lic. #245544
d/b/a in CA Seabury & Smith Insurance Program Management

Administered by Marsh U.S. Consumer, a service of Seabury & Smith, Inc.
Underwritten by Liberty Insurance Underwriters Inc., a member company of Liberty Mutual Group, 55 Water Street, New York, New York 10041.
Pending underwriting approval. May not be available in all states.

(Continued from page 3)



Dear Colleague:

The Nevada Nurses Association is organizing a delegation to visit Cuba for the purpose of researching the education and role of nurses in Cuba. As Vice President of NNA, I am honored to have been selected to lead this delegation and invite you to join me in this unique opportunity.

This delegation will support NNA's organizational goal of advocating for and monitoring the evolving role of the professional nurse. The Cuban Nurses Association recently held their annual Convention, electing new officers and moving toward promotion of the role of professional nursing in Cuba. NNA believes that building relationships and cooperation with our colleagues in Cuba will benefit nursing. Our anticipated outcomes for this delegation include 1) increased mutual understanding of the role of nursing in the delivery of quality patient care, 2) mutual understanding of the challenges and opportunities faced by nurses and nursing associations in both countries, 3) exploration of issues facing nursing education and practice in both countries, 4) Identification of future opportunities for collaboration.

As you may know, travel to Cuba is restricted by the Office of Foreign Assets Control (OFAC) of the United States Treasury Department. This delegation will be travelling under OFAC regulation 31 CFR §515.564 General license for professional research. This license supports our access to the highest level professionals in Cuba. Each member of the delegation must be in compliance with the General License issued by the Office of Foreign Assets Control authorizing full-time professionals to conduct a full-time schedule of research activities in Cuba with the likelihood that this research will be publicly disseminated. To ensure compliance, each participant in the program will be required to provide a resume and sign an affidavit attesting to their status as a full-time professional, paid or unpaid, in the field. During travel, each delegation member will be given a copy of the regulation that will serve as the license to travel authorized by the Office of Foreign Assets Control.

Travel services will be provided by Professionals Abroad, a division of Academic Travel Abroad. The 60-year-old organization handles the logistical arrangements for prestigious organizations, such as National Geographic, The Smithsonian, The American Museum of Natural History and many top professional associations and universities. Academic Travel Abroad is licensed by the OFAC as a Travel Services Provider for US travel to Cuba.

This delegation will convene in Miami, Florida on November 27, 2011 at which time we will depart for Cuba. We will return to the United States on December 2, 2011. Those who wish to may opt to extend their stay in the Matanzas province for an additional 3 days, returning to Miami on December 5. Delegates will participate in professional meetings and site visits each day; the specific meetings and topics for discussion will be determined by the research interests and composition of the team.

The estimated cost per delegation member is \$3,995 U.S.D. This cost includes roundtrip international air arrangements between Miami and Havana; group transportation, meetings, accommodations in double-occupancy rooms, most meals, and essentially all other costs associated with participation, as outlined in the final schedule of activities.

For U.S. citizens, expenses associated with this program may be tax deductible as an ordinary and necessary business expense. We suggest that you consult with a tax advisor to determine if tax deductibility is applicable to you.

Due to the extensive planning and communication involved in coordinating a program of this nature, I ask that you respond with your intentions regarding this invitation as soon as possible. Please RSVP to Professionals Abroad at 1-877-298-9677 or via the web at www.professionalsabroad.org. A \$500 deposit is required to reserve your space. In the event that you are unable to accept this invitation, an alternate delegate candidate will be invited. You may also recommend a colleague as your alternate for the program. I look forward to hearing from you regarding your participation.

If you have questions regarding the delegation, I encourage you to contact our Program Representative at Professionals Abroad, at 1-877-298-9677. For additional program details, or to recommend a colleague to be invited please visit www.professionalsabroad.org.

I am pleased to be involved in this exciting opportunity and hope that you will strongly consider participating in the delegation to Cuba.

Sincerely,
Denise Ogletree-McGuinn, APN
Vice-President, Nevada Nurses Association

SB264 requires hospitals to report by category using the 50 most frequent diagnoses those patients readmitted for an event that was presumably preventable. At this writing, the Governor has not yet signed this bill. Should it become law, it will be effective July 1, 2011.

Infection control received a great deal of scrutiny this session, including that in **SB339** which specifically focused on hospital acquired infections. It requires notification of the patient and his/her family not later than 5 days of the diagnosis of the HAI. It also requires hospitals to have an infection control officer. This is another bill which waits the Governor's signature. Should he sign it, it will become effective immediately to create regulations, on October 1, 2011 for patient notifications and on January 1, 2012 for the remainder of the provisions.

Nursing homes and other long term care facilities received a new type of licensed employee with the passage of **SB411**, which allows the licensure by the Nevada State Board of Nursing of Medication Aides-Certified (MACs). Testimony noted that including these personnel improves nursing care by allowing nurses to focus on patient care rather than passing medications. There is evidence of better medication delivery with fewer interruptions. The NSBN supported this bill and actually helped in the drafting of the language. We believe this new type of practice will be closely monitored by the NSBN.

Secondary Priority Bills

Prescribing

Pharmacy and its resulting prescribers received much scrutiny this session too. **SB329** provides that patients must be notified that a prescriber will place the diagnosis for each prescription and notify the pharmacist in doing so that the diagnosis or use of each medication must be included on the prescription label. This is entirely a patient's choice; however, healthcare providers must notify their patients that it is an option. The bill is effective October 1, 2011 if the Governor signs it.

AB537 makes a disciplinary event to write a prescription for a use other than one that is FDA approved *unless* the prescription is filled at a retail pharmacy. Section 3.1(l) contains the language that addresses the bill's requirements with respect to off label prescribing by nurses.

SB278 provides additional time to object to an insurer's modification of fee schedules or

(Continued on page 19)

opportunity for a lifetime

***** Registered Nurses *****
Full-time and Part-time Staff positions,
Per Diem Shifts, Local and Travel Contract
Opportunities are Available Now!

All About Staffing is uniquely positioned to provide talented
Registered Nurses exceptional Career Opportunities
with the largest Hospital Corporation in America!

Exclusive Per-Diem Shifts &
Facility Contracts Available
in the Las Vegas Market!

**EARN UP TO
\$48⁰⁰
PER HOUR**

**ALL ABOUT
STAFFING**
We're ALL ABOUT WHAT WORKS FOR YOU
Call Us Today!
1-866-WORKS-4-U
(866-967-5748)

View Career Opportunities online at:
www.allaboutstaffingcareers.com
Email: AAS.Careers@HCAHealthcare.com
Current NV license and at least 1 year recent
acute care experience required.

All About Staffing is an affiliate of HCA, the nation's largest hospital company. We're an industry leader, a company that can give you the security and comfort of knowing your needs will always be taken care of... every step of the way.

**HIRING
RN'S**

NURSE OWNED
EXCELLENT BENEFITS
LOCAL
CALL FOR DETAILS
702.734.5800

WSS 501 S. Rancho Dr., Ste. F-40, Las Vegas, NV 89106
www.westwaysstaffing.com

**Join our
Team**

Kootenai Medical Center
A Joint Commission-accredited, Magnet designated, 246-bed
hospital offering complete clinical services.

Coeur d'Alene & Northern Idaho
As your lakeside playground, Coeur d'Alene offers abundant
hiking and biking trails, hunting, golfing and ski resorts, all
located just 30 minutes from Spokane, WA.

Employee Benefits

- Tuition Reimbursement
- Fully Paid Medical, Dental,
& Vision Insurance
- Longevity Checks
- Onsite Day Care

Human Resources 2003 Kootenai Health Way, Coeur d'Alene, ID 83814
208.666.2050 tel 208.666.2032 fax kootenaihealth.org web

A Heart for Excellence

(Continued from page 18)

reimbursement rates. The current time period, 30 days, will be extended to 45 days. IF it is signed by the Governor, it will be effective July 1, 2011.

SB440 creates the Silver State Health Insurance Exchange, the state based exchange required under the Affordable Healthcare Act of 2010. Even though the state is contesting provisions of the Act, this is an important component, should the Act be found Constitutional and this bill provides for its creation.

Another result of federal legislation, **SB43** provides for creation of a statewide health insurance information exchange, essentially, electronic records for Nevada's patients. Funded entirely by federal dollars through the American Recovery and Reinvestment Act, the bill will become effective on passage and approval should the Governor sign it.

SB471 requires counties to either pay an assessment to contract with the State Board of Health to provide several types of inspections including Infectious Diseases, Recycling Programs, Food Establishments and Meat, Fish, Poultry and Egg Inspections or to create a plan to regulate these at the county level. This could be important as counties are stretched tighter by budgetary constraints.

AB199 provides for collaborative practice between a physician and a pharmacist for either facility or home based care for a specific patient and allows the pharmacist, under a specific protocol, to change the prescription. This bill, if it is signed, will become effective October 1, 2011.

Bills that Did Not Pass

Although the bill itself passed, an amendment offered by NNA to **SB294** failed when the section of the bill was amended out during the last few days. We attempted to remedy an existing piece of statute that included supervisory language for nurses during the administration of chemotherapeutics.

SB294 addresses Medical Assistants and places their authorizing language in both the Physician and Osteopaths statutes.

SB367 would have required posting of credentials by all healthcare providers in each patient treatment room. Having passed the Senate, the bill failed to advance in the Assembly.

Various so called Freedom of Healthcare Choice bills failed to advance from their houses of origin. **SB310**, **AB369** and **AB411** contained nearly identical language that reacted to passage of the Affordable Healthcare Act and required the state to allow choices for its citizenry with respect to healthcare rather than following the dictates of AHA as far as individual mandates go. Only one of these even received a hearing (SB310) and it failed in its originating committee on a do pass motion.

Summary

Nevada's citizens benefit significantly from transparency improvements in our healthcare system. They will be able to make informed choices as to providers as well as hospitals. We hope that these choices also bring improved healthcare delivery for Nevada. Overall, the Nevada Nurses Association enjoyed success in this session. We have formulated a plan for the interim and will be bringing you additional information as it develops.

Future

Term limits have had an amazing impact on the Nevada Legislature. They will again impact the houses but not nearly so much as this session. The impacts of a court-directed redistricting will also have an impact that remains to be seen. Healthcare is changing nationally and in Nevada. Nurses remain the most trusted healthcare provider in every public poll. To ensure nursing's voice is heard, it is important that you get and stay involved politically. Contact your regional Legislative Chair (Martha Drohobyczer in southern Nevada and Teresa Serratt in the north) to share your opinions and guide our work. Telephone meetings are monthly on the third Wednesday at 6:00pm. Please join us.

NEVADA NURSES ASSOCIATION MEMBERSHIP APPLICATION

P.O. BOX 34660, RENO, NEVADA 89533 • 775 747-2333 • FAX 775 201-9002
NNA@NVNURSES.ORG

Please mail your completed application with payment to: NNA, P.O. Box 34660, Reno, NV 89533

Please Print Clearly:

Date _____

Last Name/First Name/Middle Initial _____
 Home Phone Number _____ cell phone number _____

Credentials _____
 Home Fax Number _____ Basic School of Nursing _____

Home Address _____
 Work Phone Number _____ Graduation (Month/Year) _____

City/State/Zip Code + 4 _____
 Work Fax Number _____ RN License Number/State _____

County _____
 Position _____

Email Address _____
 Employer _____

Would you like to receive NNA email updates with information relative to nursing & healthcare? YES NO

Membership Options (Check One) Payment Plan (Check One)

Full ANA/NNA Membership

Includes full membership to both NNA and the American Nurses Association (ANA) for 12 months.

F-Full Membership

 Employed

R-Reduced Membership

 Not employed

 Full-time student (must be a RN)

 New graduate from basic nursing education program, within six months of graduation (first membership year only)

 New Member—Never been a member of a state nurses association of the American Nurses Association (first year of membership only)

 62 years of age or older and not earning more than Social Security allows

S-Special Membership

 62 years of age or over and unemployed

 Totally disabled

***State nurses' association dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense.**

State Only NNA Membership

Includes state only membership to NNA only for 12 months. Does not establish membership in the American Nurses Association

 Any RN with an active or inactive Nevada license.

***State Only dues must be paid in full at the time of application.**

Full Annual Payment

 Check (payable to NNA/ANA)

 Visa

 MasterCard

Annual Credit Card Payment

This is to authorize annual credit card payments to NNA/ANA. By signing on the line, I authorize NNA/ANA to charge the credit card listed for the annual dues on the 1st day of the month when the annual renewal is due.

Annual Credit Card Authorization Signature* _____

EDPP (Monthly Electronic Payment)

This is to authorize monthly electronic payments to ANA. By signing on the line, I authorize NNA/ANA to withdraw 1/12 of my annual dues and any additional service fees from my account.

Checking: Please enclose a check for the first month's payment; the account designated by the enclosed check will be drafted on or after the 15th of each month.

Credit card: Please complete the credit card information and this credit card will be debited on or after the 1st day of each month.

EDPP Authorization Signature* _____

***By signing the EDPP or Annual Credit Card authorizations, you are authorizing NNA/ANA to charge the amount by giving the above-signed thirty (30) days advance written notice. Above signer may cancel this authorization upon receipt by NNA/ANA of written notification of termination twenty (20) days prior to the deduction date designated above. Membership will continue unless this notification is received. NNA/ANA will charge a \$5 fee for any returned drafts of charges backs.**

Credit Card Information

Bank Card Number and Expiration Date _____

Authorization Signature _____

Printed Name _____

Amount \$ _____

Membership Dues

Full NNA/ANA
 Annual \$250.00 / Monthly \$21.33

Reduced NNA/ANA
 Annual \$125.50 / Monthly \$10.92

Special NNA/ANA
 Annual \$62.50 / Monthly \$5.71

NNA State Only
 Annual \$105.00 / Monthly — not applicable

To be completed by NNA/ANA

State _____ District _____

Approved by _____ Date _____

Expires _____ Amt. Paid _____

Check # _____



Nevada Substance Abuse Prevention and Treatment Agency (SAPTA)

The mission of SAPTA is to reduce the impact of substance abuse in Nevada.

SAPTA funds services with private non-profit treatment organizations, community level prevention organizations in all 17 Nevada counties, and governmental agencies statewide.

Treatment Services Offered

- Detoxification
- Residential treatment services
- Outpatient counseling
- Opioid maintenance therapy
- Comprehensive treatment priority admission or interim services to pregnant women:
 - Pregnant injection drug users
 - Pregnant substance abusers
- Non-pregnant injection drug users

Prevention Services Provided

- Provide Federal and State funding to local and regional coalitions who fund community level direct service providers to provide evidence-based programs, practices, and policies, on identified substance abuse and related factors in communities
- Provide Federal and State funding to local and regional coalitions to provide environmental strategies to change community norms
- Provide training and technical assistance

For questions or resources contact SAPTA at:

Carson City: 775-684-4190 Las Vegas: 702-486-8250

Website: <http://mhds.nv.gov>

(Scroll to the end to find the link to SAPTA)



We are dedicated to developing and supporting your career with more opportunities for advancement. Our Clinical Ladder program provides staff clinicians with the opportunity to advance their careers.

Registered Nurses

- Benefit from our unique Clinical Ladder
- Enjoy specialized training and career advancement opportunities
- Utilize a functional, patient-focused approach

Call us today at **1.866.GENTIVA**

Visit us at gentiva.com/careers

Email bill.barker@gentiva.com



School of Nursing

University of Nevada, Las Vegas



Interested in Returning to School for a **Graduate Degree In Nursing?**

The School of Nursing at UNLV offers advanced degrees you can complete

Any Time, Any Place Online in:

Master of Science in Nursing and Post Master's Certificate

- Nursing Education
- Family Nurse Practitioner
- *NP Students Come to Campus three times per Semester

PhD in Nursing

- Nurse Educator Scholar Option
- Urban Sustainability: Health Option

DNP: Doctorate in Nursing Practice



University of Nevada Doctorate of Nursing Practice (UNDNP)
Collaboration with University of Nevada Reno

For more information about the DNP Program at UNLV contact: Dr. Tish Smyer at Tish.Smyer@unlv.edu

What Are You Waiting For?

Visit our website at - <http://nursing/unlv.edu> or call our Graduate Program Office at (702) 895-3360

UNLV



HRN Services Inc. has many assignments in Nevada!

"Absolutely the best company. HRN staff are incredible and treat you like a real person, not a number."

HRN OFFERS:

- More Guaranteed Shifts
- Long and Short Term assignments
- Contracted at major hospitals
- Excellent Pay & 401K Program
- Housing & Travel Stipends
- Work Bonuses
- Free Health / Dental / Vision
- Daily / Weekly Pay
- Gateway To Travel®

HRN provides Coast To Coast travel and local assignments to nursing professionals. We have a variety of exciting assignments across Nevada. Let our travel coordinators help you find the perfect job. We built our reputation on what we do best . . . **"FIND YOU SUCCESSFUL ASSIGNMENTS"**

Call today!
888.476.9333
or visit
www.hrnservices.com



HRN Services Inc. has earned The Joint Commission's Gold Seal of Approval™



AWESOME KIDS DESERVE AWESOME PARENTS



Kaylie 5/04 Brandon 9/97 Breylin 4/10 Jared 5/02

These children are described as "Awesome kids." They say the most important house rule in their foster home is to "Be Respectful."

Brandon likes to eat pizza, ice cream, and steak. He says he likes all sports, and describes himself as having a "big heart."

Jared says he is "smart." He also enjoys steak as well as fruit and chocolate chip ice cream. Football is his favorite sport.

Kaylie likes school and playing with dolls. Her favorite food is rice with soy sauce. Coloring and jumping on the trampoline occupies her spare time. She also likes to sing to the American Idol video game with her older brothers.

Breylin just loves hugs, cuddling, and being with family.

If you would like to know more about Jared, Kaylie, Brandon, and Breylin, or any of our "Awesome Kids," please contact us for more information:
Washoe County Department of Social Services
775-337-4510, or by email
Adoption_Recruitment@washoecounty.us

WASHOE COUNTY DEPARTMENT OF SOCIAL SERVICES
www.haveaheartnv.org