

# KENA News



Kansas Emergency Nurses Association

## Save The Date

- \* ENA Leadership Conference  
New Orleans Feb 22-26
- \* Trauma Summit
- \* ENA General Assembly  
San Diego Sept 11-13
- \* ENA Scientific Assembly  
San Diego Sept 13-15
- \* CEN Review  
Hutchinson Oct 15-16
- \* CEN Review  
Lawrence Oct 18-19

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## From your State President -- Mike Hastings

Welcome to the new Kansas ENA Newsletter!



As I start this year as your president of Kansas Emergency Nurses Association I am very excited about the year ahead. We have some amazing leaders in our organization that are very passionate about being an emergency nurse. However, there is one thing missing and that is you!

I know not everyone has a passion to be involved at the state level,

and I know our state meetings are not the most exciting thing to attend sometimes, however we have great opportunities for you to be involved with your professional organization in your local area by attending a local chapter meetings.

What does the year look like for us? The Government affairs committee will be actively pursuing legislation on violence in the workplace. This is a big challenge and in order to help get it passed we will need support from all of you. We will be hosting another CEN review course this next year and will pursue offering a CPEN review course in 2013. These review courses are

great preparation to sit for the exam and even great refreshers for those who already have their certifications.

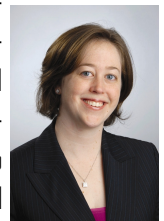
I look forward to the next year as your president and I hope you will consider getting involved with your local chapter and with us on the state level. You will receive this newsletter typically on the months we do not have state meetings as a tool to keep you informed. If you have any questions at any time please feel free to contact myself or any of the board members through the Kansas ENA website at [www.kansasena.org](http://www.kansasena.org) and make sure you are our friend on Facebook.

## From the National Office – Deena Brecher

As 2011 comes to an end, I wanted to take a minute to reflect on the past twelve months as the board liaison to Kansas ENA. I had the privilege of visiting Kansas in April and attending your state council meeting. As the members broke up

into their committees and workgroups, the energy around the room was palpable. Listening to the great ideas that were presented by each group and discussed among the council members was exciting. What a fantastic group of enthusi-

astic and passionate emergency nurses! I had the opportunity to catch up with several Kansas ENA



## From the National Office...continued

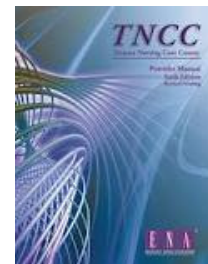
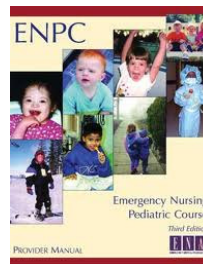
ENA members at Annual Conference and was thrilled to hear about the progress your council had made towards your 2011 goals. As I transition from your board liaison, I know you are going to have an incredible 2012. With Mike as your state council president and Ellie Encapera available as

your board liaison, there is no limit to what your council can achieve!

## Trauma-TNCC/ENPC – Darlene Whitlock

The TNCC/ENPC Committee has monitored course evaluations sent by course directors. We have been apprised of upcoming courses via national and personal communication and assisted folks inquiring about course locations. The committee has communicated by email several times regarding TNCC grants to each of the 6 Regional Trauma Councils. The committee also supported giving ENPC

grants to each of the 6 Regional Trauma Councils and this is being implemented.



There is a sacredness in tears. They are not the mark of weakness, but of power. They speak more eloquently than ten thousand tongues. They are messengers of overwhelming grief...and unspeakable love. — Washington Irving

## From the BCEN

Every four years, the BCEN Credentialed nurse is required to renew or recertify to keep his or her certification active. BCEN believes that your continued growth in your field of nursing is critical to providing high-quality health care to your patients.

Effective January 1, 2013 BCEN is changing the CE requirements for CEN, CFRN and CTRN for all renewals by CEs.

1. What does this mean for you? BCEN credential holders that are certified prior to January 1, 2013 will continue to follow the current CE requirements for one renewal term. Upon renewal

completion the credential holder must follow the new CE guidelines that require 50 of the 100 contact hours come from accredited sources for all future renewal terms.

BCEN credential holders that become certified on January 1, 2013 or later must follow the new CE guidelines that require 50 of the 100 contact hours come from accredited sources.

2. When should I start following the new requirements? In order to ensure that you have enough acceptable CEs at time of renewal start following the new requirements as soon as possible.

3. What's required? Credential holders can continue to document professional development activities with a clear and direct application to the practice of emergency care nursing earned over a period of four years.

Current Requirements:

100 contact hours

- 75 of the 100 contact hours must be in the CLINICAL category,

- and up to 25 may be in the OTHER category.



**New Requirements:**

100 contact hours

- 50 of the 100 contact hours must be from accredited sources,

- 75 of the 100 contact hours must be in the CLINICAL category,

- and up to 25 may be in the OTHER category.

Note: It is acceptable to have more than 75 of the contact hours in the CLINICAL category. One contact hour is equivalent to 60 minutes of instruction.

4. About accredited contact hours. A minimum of 50 contact hours must be from accredited sources. The remainder may be from non-accredited activities. All national accrediting

agencies are accepted for your recertification. These include but are not limited to American Association of Critical Care Nurses (AACN), American Nurses Credentialing Center (ANCC), Emergency Nurses Association (ENA) and State Nurses Associations/State Boards of Nursing (SNA/SBN). Contact [www.bccertifications.org](http://www.bccertifications.org) for more information.

Find us on  
Facebook!



## ANA Recognizes Emergency Nursing as Specialty Practice

The American Nurses Association (ANA) has formally recognized emergency nursing as a specialty practice.

SILVER SPRING, MD – The American Nurses Association (ANA) has formally recognized emergency nursing as a specialty practice.

Emergency nursing is the care of individuals across the lifespan with perceived or actual physical or emotional alterations of health that are undiagnosed or require further interventions. Emergency nursing care is episodic, primary, typically short-term, and occurs in a variety of settings.

ANA also approved the Emergency Nursing Association's (ENA) scope of practice statement and acknowledged the standards of practice for emergency nursing. These documents, written by the ENA, form the foundation of emergency nursing and outline the expectations of the professional role within which emergency nurses must practice.

"The criteria for attaining specialty status are rigorous, so the recognition of emergency nursing as a specialty is a significant achievement," said ANA President Karen Daley, PhD, MPH, RN, FAAN. "ANA's role in this process is to protect patients by ensuring high quality in nursing prac-

tice and performance. This recognition tells the public that emergency nurses are dedicated to meeting high standards of care and patient safety."

ENA President AnnMarie Papa, DNP, RN, CEN, NE-BC, FAEN, said the recognition acknowledges the unique aspects of emergency nursing, and gives emergency nurses a stronger voice in health care policy debates.

"It allows other health professionals and health care consumers to have a clear understanding of the range of emergency nursing practice and gives a better understanding of the roles emergency nurses fill," Papa said.

Papa added that the designation establishes a common language and understanding within the emergency care field, strengthens the case for ongoing research to apply best practices at stretcher-side, and reinforces "the need of the emergency nurse to embrace career advancement in leadership, education and advanced practice nursing."

By consensus of specialty nursing groups, ANA became the neutral reviewing body of scope of practice statements and standards of practice for nursing specialties in the late 1990s. Specialty nursing practices must meet certain criteria to gain recognition, a review process intend-

ed to ensure consistency in nursing practice.

The American Nurses Association (ANA) is the only full-service professional organization representing the interests of the nation's 3.1 million registered nurses through its constituent and state nurses associations and its organizational affiliates. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.

About the Emergency Nurses Association: ENA is the only professional nurses association dedicated to defining the future of emergency nursing and emergency care through advocacy, expertise, innovation and leadership. Founded in 1970, ENA serves as the voice of more than 39,000 members and their patients through research, publications, professional development, injury prevention and patient education. Additional information is available at ENA's Web site [www.ena.org](http://www.ena.org).

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When you're a  
nurse you know  
that every day  
you will touch a  
life or a life will  
touch yours

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## Education Committee— Denise Spaeth

The major accomplishment for the Education committee in 2011 was the sponsorship of two 2-day CEN Reviews featuring nationally known emergency speaker, Jeff Solheim. The week of May 2, Jeff presented the 2 day course in both Lawrence and Hutchinson to rave reviews. Key features were affordability, easy access and recruitment of new members. Approximately 125 participants attended the courses. Many KENA members took advantage of the economical price, and in addition, we also had 60+ non-members attend and join

ENA as part of the course pricing incentive. Mark your calendars and spread the word!--we will be repeating this educational offering the week of October 15, 2012. More information to come.




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**They may forget  
your name but  
they will never  
forget how you  
made them feel.**

**— Maya Angelou**

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## Easter Kansas ENA — Julie Unruh, President

211 registered members. The Eastern Kansas Nurses Association is proud to launch the legislative initiative for the KENA. Vicki Schmidt, legislative Representative has agreed to sponsor Felony Violence legislation. Appointments have been made to discuss the process and engagement of ENA on a local, state and national level. Julie Unruh and Janet Smith will be attending the Governmental Affairs Training in January, 2012. Julie and Janet are excited and engaged 100% to help ENA

gain strength and hear our health care provider voices be heard at the state and national level. The Emergency Resources Showcase event is scheduled for May, 2012. This is a State wide showcase of Emergency, Disaster, Hazmat, Fire and Medical organizations. The event will be held at Garfield Park, Topeka. EKENA and local emergency RNs will be providing 911 phone dialing education. Poison Control educational brochures and magnets will be given to all partici-

pants. Through a Safe Kids grant 24 pediatric helmets will be given away through a drawing. Bylaws and Chapter documentation will be going through revision per national ENA guidelines. These revisions will reflect the alignment of chapter and national guidelines. Bimonthly 2012 EKENA chapter meeting calendar has been submitted to the KENA president and webmaster for publication, pending approval of the KENA council.

## Student Nurse Relations — Sara Evans-Simpson

In 2011 the Student Nurse Relations committee members, Joan Horton and Sarah Evans-Simpson attended the Kansas Association of Nursing Students. This was a great event. We had the opportunity to speak with hundreds of nursing students about emergency nursing and the scholarship provided by KENA. There was a lot of interest in emergency nursing and

the scholarship. We are interested to see what response we get from the scholarship committee. We also were able to network with multiple faculty members from the schools. Our plan is to speak at various nursing schools around the state about emergency nursing. We are scheduled to talk at a "career day" at KU school of Nursing in February. We are also working on a

generic PowerPoint that will be available to use if we speak at nursing schools. This PowerPoint will be available to anyone in KENA that would like to use it.

## Injury Prevention — Jennie Vargas

Injury Prevention at the Bedside —As we all know nursing is a complex medical profession that empowers us with many different patient care skills. One such skill involves patient education regarding preventable injuries, otherwise known as the field of injury prevention. A 1995 study by the University of Nottingham Medical School in the UK assessed the knowledge, attitudes toward injury prevention and current practices in injury prevention among nurses. What they concluded was, "Most practice nurses hold positive attitudes towards injury prevention activities, but fewer undertake

these activities regularly." What they failed to discover were the barriers to nurses participating in these activities.

Nurses have a unique opportunity to participate in the preventable injuries seen in the emergency room, clinic or elsewhere in organizations. We are regarded as role models and educators by our patients, family, friends, neighbors, etc. While we do have the opportunity to educate on these preventable injuries at the bedside, we have an even greater opportunity to educate in our daily life and way of living. Simple acts like buckling your

seat belt and ensuring your child rides in an appropriate car seat are ways to participate in this safety message. Making conscious decisions to not drive distracted (i.e. texting and driving, reading emails, etc.) or simply talking that older relative out of placing throw rugs on the floor to avoid trips and falls.

Over the next year, we will be making a concerted effort to increase our awareness as nurses to the field of injury prevention. We aim to provide you with knowledge and structured opportunities to participate in injury prevention.

## Bylaws Committee — Cindy Reazin

2011 was a busy year for the Bylaws Committee. The committee updated the Bylaws and Strategic Plan

In addition, the committee wrote and submitted a Records Retention Policy that was subsequently approved.

The following policies were also created and approved this year: 1) Antitrust Policy, 2) Conflict of Inter-

est Policy, 3) Investment Policy, 4) Reserves Policy, and 5) Whistleblower Protection Policy

This next year we will be revising the strategic plan, we will be looking at any additional policies that need to be created, and we will be updating our procedure manual.



## Communications — Stella Riney

An ad was placed in the April, May, June 2011 "Nursing Newsletter, the Official Publication for the Kansas State Board of Nursing" The ad published in March shared the dates and times for the state meetings as well as the dates for the GEN Review and the Trauma Summit. The GEN review was also advertised in the Kansas City Nursing News.

The website is updated at least every other month after our meetings, but check back frequently as important announcements will be added as needed.

Members receive a postcard reminder for the state meeting approximately 2 weeks prior to each meeting. Notices for upcoming events such as the GEN

review, Trauma Summit, and the August elections were also added. The web address is always included on the postcards.




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**We often think of nursing as giving meds on time, checking an X-ray to see if the doctor needs to be called, or taking an admission at 2:00 a.m. with a smile on our faces. Too often, we forget all the other things that make our job what it truly is: caring and having a desire to make a difference. —**

**Erin Pettengill**

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## Practice Alert

### Liquid Acetaminophen marketed for infants: Drug Safety Communication - Potential for Dosing Errors

(Posted 12/22/2011)

**AUDIENCE:** Pediatrics, Consumers, Pharmacy

**ISSUE:** The FDA is informing the public that an additional concentration of liquid acetaminophen marketed for "infants" (160 mg/5 mL) is now available. This change in the concentration will affect the amount of liquid given to an infant, and should be especially noted if someone is accustomed to using the 80 mg /0.8 mL or 80 mg/mL concentrations of liquid acetaminophen.

**BACKGROUND:** Over-the-Counter (OTC) Liquid acetaminophen is used to temporarily reduce fever and relieve

minor aches and pains due to the common cold, flu, headache, minor sore throat, and toothache. Acetaminophen is marketed under brand names such as Tylenol, Little Fevers, Triaminic, Infant/Pain Reliever, Pedia Care, Triaminic Infants' Syrup Fever Reducer Pain Reliever and other store brands (e.g., Rite Aid, CVS, Walgreens brand, etc.).

This change in the concentration will affect the amount of liquid given to an infant, and should be especially noted if someone is accustomed to using the 80 mg /0.8 mL or 80 mg/mL concentrations of liquid acetaminophen. In addition to this change in concentration, this product may also be packaged with an oral syringe instead of a dropper.

**RECOMMENDATION:** Read the Drug Facts label on the package to identify the concentration of the liquid acetaminophen (in mg/mL), dosage, and directions for use.

Use the dosing device provided with the product in order to correctly measure the amount of liquid acetaminophen to be given. Healthcare professionals should provide directions to patients that specify the concentration and dose of liquid acetaminophen that should be given to a child.

Healthcare professionals and patients are encouraged to report adverse events or side effects related to the use of these products to the FDA's MedWatch Safety Information and Adverse Event Reporting Program:

- Complete and submit the report Online: [www.fda.gov/MedWatch/report.htm](http://www.fda.gov/MedWatch/report.htm)

[Download form](#) or call 1-800-332-1088 to request a reporting form, then complete and return to the address on the pre-addressed form, or submit by fax to 1-800-FDA-0178

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Our job as nurses is to cushion the sorrow and celebrate the joy, everyday, while we are "just doing our jobs." —

Christine Belle

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## Eastern Kansas ENA — Julie Unruh

### *Meetings for 2012...*

*Second Wednesday of odd months.*

*Usually 6:30 pm to 8:00 pm - longer for meeting with one hour CNE*

## ENA Central Kansas — Stella Riney

### *Meetings for 2012...*

are planned for the 4th Monday of the odd months of the year at 7:00 pm.

*Exceptions will be the May meeting due to Labor Day (will probably be moved to May 21), the July Swim Party and possibly the Christmas Party.*

## From Brian Selig—KENA President 2011



I want to take a minute to thank everyone for what I would consider a very successful year here at the Kansas ENA. My year as President has been a tremendous learning opportunity for me personally, and I have grown a significant amount as I took on this new challenge. It has also been a great year for us as an organization.

For me personally, I learned a lot. We spent a long time trying to reorganize our meetings this year, which presented its share of challenges. However, I think we were able to finally come up with a great solution that seems to be working well for everyone and allows us to have very solid, productive meetings. We brought a lot of issues to the forefront such as violence in the workplace, and are actively working with legislators to stiffen penalties for assaults against nurses. These were both very big personal victories for me and I was glad that we chose to pursue them.

Organizationally, we had an awesome year! First, we were very privileged to see our membership numbers increase dramatically this year. I believe that at one point this year, we had less than 300 members, but as of today we had 361. I would say that a 20% increase in membership in a single year would be considered a success by anyone's standards – especially in this 40th anniversary year when we were actively doing a membership drive.

This increase though, would not have been possible if not due to the overwhelming success of the CEN review courses that our Education team put together. Everyone I talk to tells me how valuable they were to attend, and I know that at our hospital, we have been able to add several new CEN certified nurses because of this effort!

One of the most fun accomplishments of the year has to be the creation of the Kansas ENA Facebook page. In this day and age of technology, I think it is

fitting and appropriate that our organization is represented in the social media world, and I know that it has been great to share photos, stories, and get people involved through this new outlet. So thanks to Mike and Joan for working so hard to set it up.

Next, the success of the Trauma Summit is something that always deserves praise, and through Darlene's leadership and organization, the ENA always manages to pull off a very top notch event. We have continued to support nursing education through the TNCC grants and those have again been met with very humble gratitude by the receiving  
 —(cont. on back)

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**"To do what nobody else will do, a way that nobody else can do, in spite of all we go through; is to be a nurse."  
 - Rawsy Williams**

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## 2012 Meeting Schedule

February 10, 2012	Lawrence Memorial Hospital Lawrence	August 10, 2012	Children's Mercy South Overland Park
April 13, 2012	Galichia Heart Hospital Wichita	October 12, 2012	Stormont Vail HealthCare Topeka
June 8, 2012	Promise Medical Center	December 14, 2012	University of Kansas Hospital



Kansas Emergency Nurses Association

## VISION AND MISSION STATEMENTS

**VISION:** That every patient needing emergency nursing care receives care from a nurse who is competent. Emergency nurses also provide education for injury prevention and wellness.

**MISSION:** To promote, develop, and support emergency nurses in providing nursing care in the State of Kansas, recognizing this occurs across geographic and institutional variances from urban trauma centers to the most rural critical access hospital.

We're on the web

[www.KansasENA.org](http://www.KansasENA.org)

### From Brian Selig—continued

organizations. The Kansas State Council also stepped up and contributed significant monies to be donated in support of ENPC training and education across the state, which continues to demonstrate our commitment to education and improving the quality of care that our patients receive every day.

Finally, I thought that the Kansas contingent represented the state very well at the General Assembly and that we all had a great time learning about parliamentary procedure and voting on the hotly contested issues that were discussed this year. I'm certain that each of us learned something new, and have lots to bring back to the

council and to our own organizations. Oh, and I would certainly be remised if I didn't acknowledge that despite what everyone might have thought about Darlene and my spending habits, we were still able to maintain our very strong financial performance, and we didn't spend all of the money! Thanks for keeping us in line Carol. LOL.

Thank you to all of you for helping me along in this journey. It was a pleasure taking it with you. With so many great leaders in our organization, I look forward to what the future holds, not only for the Kansas ENA, but for Emergency Nursing in general. I hope that you all have a great Holiday Season. Keep yourselves and your families

safe, and I hope to see you all very soon. And remember, if you ever head out to Las Vegas, please be sure to give me a call and look me up!

Brian W. Selig, MHA, BSN, RN, CEN, NE-BC

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