

SGNA news

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SGNA 43rd Annual Course Highlights

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HOT TOPIC

First-timers Share a Fresh Take on Annual Course

Very little time has passed since the SGNA 43rd Annual Course took place at the Seattle Convention Center. While all attendees walk away with limitless valuable information to share with their colleagues back home, new participants get an especially fresh take on the world of GI nursing. Five first-time Annual Course goers shared what they loved most about this year's activities and what they will be sure to remember for years to come.

Our five new attendees who provided feedback are:

1. Mark Bruns, RN BA MHA [Mercy Hospital, MO]
2. Kim E. Wilson, MIT [VAMC Richmond, VA]
3. Shaleena K. Kumar, MSN RN [VA Martinez Outpatient Clinic, CA]
4. Denise Burns, BSN RN CGRN [Belleville Memorial Hospital, IL]
5. Julia L. Jelen, BSN RN CGRN [Fairview Ridges Hospital, MN]

The new attendees all had a different favorite session at the Annual Course, showing that there was something for everybody. The New Grad Training Program was Shaleena's favorite course, whereas the general session led by Donna Wright was Julia's favorite. Mark says that it was hard to choose just one favorite, and Shaleena says she walked away even more energetic about GI nursing after seeing everything that was offered. All five of the new attendees felt they benefited from connecting with other people in their field. Mark's involvement with the Train the Trainer course allowed him to connect with attendees from



Nigeria. Denise says that talking about guidelines in the field will benefit her hospital during inspection periods.

"Each of the courses I attended gave me a lot of information to keep pace with new changes, as well as reinforcing best practice standards that I can share with my team at home," Julia says. All of the new attendees said that the takeaway of knowledge is endlessly valuable as they can share their new education with their colleagues back home.

"I was amazed at the exhibit hall," Shaleena says. "I did not realize that there would be so many vendors. It was great to see so many different companies."

Opportunities abound at the Annual Course. When asked if the new attendees would become yearly course-goers (if schedules and finances allow), there was a resounding "YES" across the board. ●

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SGNA is an organization of 8,000+ registered nurses and other healthcare providers functioning in administrative, clinical, educational and/or research roles in the management of individuals with GI health problems.

SGNA News is published to provide association and industry information for the benefit of its members. Reference to any company or product within SGNA News should not be considered endorsement or approval.

Mission & Purpose

The Society of Gastroenterology Nurses and Associates, Inc. (SGNA) is a professional organization dedicated to the safe and effective practice of gastroenterology and endoscopy nursing. SGNA provides education, training and evidence-based GI/endoscopy practice documents to enable our community to provide the very best patient care. With more than 8,000 members, SGNA is an influential voice on issues impacting the specialty. SGNA continues to collaborate with other healthcare organizations that share our ultimate goal of empowering GI/endoscopy professionals to deliver the best possible care. Additional information is available at www.sgna.org.

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Invest in Yourself This Year

Kristine Barman, BSN RN CGRN, 2016–2017 SGNA President



I hope you all had a great time in Seattle! High-fives to the Annual Course Program Committee members and SGNA staff that made it all possible. Also, a huge thank you to our vendors for their financial and educational support of our organization. It was exciting to spend time with so many people dedicated to our specialty. What we do with our Seattle experience depends on each of us. I hope you learned something useful for your practice or work experience that will make it more satisfying and rewarding.

My theme this year is “Invest In Yourself, Inspire Others and Jazz Up Your Journey.” The 2016 Annual Course in Seattle was a terrific launch for this theme as we gathered together to honor another year. Congratulations to all our award winners in 2016, and I look forward to announcing our winners in 2017. Thank you to all our presenters in Seattle for a job well done. Next year in New Orleans is your opportunity to share something about your work and experience with us.

Certification

If you are not already certified, get ready for the certification exam, and if you are already certified, encourage your co-workers by helping them prepare for the exam.

Infection Prevention Champions Program

If your facility doesn't already participate, you can promote having an Infection Prevention

Champion in your unit, and even volunteer for that role. We are challenged to provide our patients with safely handled and disinfected endoscopes, and this program can present the latest methods and standards to ensure your unit is performing at the highest level.

Your Region

On a more local level, you can invite a co-worker to the next regional meeting. You can organize or participate in a community walk/run to raise money and awareness of gastrointestinal diseases or colorectal cancer prevention. You can serve on your regional board as an officer or a committee member to provide education and opportunities for your fellow regional members.

A National Committee

Volunteer to serve on a national committee and work with others who share your enthusiasm for the practice of gastroenterology. There are opportunities to participate in our re-organized and updated special interest groups. If you are passionate about education or research, the SGNA Scholar or Fellowship programs may enable you to pursue your interests and advance your practice. Meeting members from across the country and sharing ideas will enrich your own membership experience.

These are just a few suggestions of the many opportunities that are available. All of us have interests, abilities and passions. Don't limit yourself and your membership by missing out on the benefits of full involvement in SGNA. It will enrich your experience and, by doing so, you will enrich the experience of those around you.

During this next year, what will you do to invest in yourself and inspire others? I invite you to join me in New Orleans, for our 44th Annual Course — taking place May 7–9, 2017 — where we will learn from and celebrate one another. If you invest in yourself, you will inspire others and it will certainly jazz up your journey. ●



On the Fast Track

Amanda Ward is quickly climbing the ladder in the ever-shifting field of GI

In 2006, Amanda Ward, MSN BS RN CGRN crossed the stage at Delaware State University's commencement ceremony earning a Bachelor of Science degree in both psychology and nursing. But Amanda didn't stop there. In just 10 years, she has worked in various patient care settings, earned a Master of Science degree in nursing, joined SGNA and even served as president of the Delaware SGNA region in 2014. Amanda's dedication to education and service has advanced her career quickly, and there's no slowing her down anytime soon.

Today, Amanda is the senior director of clinical services at AMSURG, a leader in the ambulatory surgical center (ASC) industry. Here, she partners with physicians and staff at various surgery centers to provide clinical resources and support in running the centers. To take on such a critical role so quickly after graduation, Amanda kicked her career into high gear from the start.

From 2001–2006, Amanda attended Delaware State University and completed a double major in nursing and psychology. Immediately after graduation, she spent some time working in a hospital setting and in-patient psychology. It wasn't until she was working as a staff nurse in the Blue Hen Surgery Center that she was inspired to continue her education.

"I felt like I had more to offer," Amanda says. "I was young and energetic and curious so I pursued [a master's degree] at Wilmington University."

She earned her Master of Science in nursing with a focus in leadership in 2010; a degree she says comes in handy when having to wrangle all of the responsibilities and duties she has now. However, gastroenterology wasn't something Amanda originally had her sights on when entering the field.

"I thought I would do something in psychology or human services," Amanda says. "While I started working in [the] ASC [setting] in 2008, I thought [it] was a really neat environment — definitely unique, having its own challenges. That's where I was first exposed to GI nursing."

Shortly thereafter, Amanda found SGNA, which showed her that there was even more to learn in the specialty. The different resources SGNA offers allowed Amanda to look into GI nursing career paths that encompassed nursing duties as well as leadership and management-related roles. This pushed her to take the CGRN exam, which she passed in 2014.

That same year, Amanda served as the president-elect for the Delaware region. Through her time in SGNA, she has also participated as the secretary for Delmarva SGNA and is currently on the Social Media Committee for the national organization. Despite having so much experience under her belt, Amanda still doesn't view herself as a mentor in the typical sense.

"I'm constantly seeking out new opportunities, so I haven't been at a job for 20 years where I would be the senior nurse or be a mentor to a new nurse coming on," Amanda says. "I would like to consider myself somewhat of a mentor just because of the nature of my [current] role. I can set an example of best practices and provide resources, ... information and coach [GI nurses] in positive directions."

Seeking new opportunities pushes Amanda along her GI career path. She says she loves that her job gives her something new to do each and every day. Even now in a role she enjoys, she still seeks new ventures; Amanda is a volunteer reviewer for articles in the Gastroenterology Nursing Journal. After stepping out into her garden for a brief moment of relaxation, Amanda quickly dives back into her work, loving every minute of it. ●

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SGNA 43rd Annual Course Breaks the Mold



Attendees got to take in all of Seattle's popular sights including the popular Market Theater Gum Wall.



Members of the Program Committee put on their best superhero pose in their GI Squad t-shirts at the Seattle Convention Center.

The Seattle Convention Center kept attendees and exhibitors "sleepless in Seattle" for the SGNA 43rd Annual Course this May 20–24, 2016. Top industry leaders, a variety of educational sessions and panel discussions, hands-on training, networking opportunities and more were presented over the week-long course. The Annual Course, which had a theme of "Breaking the Mold," this year, did just that and surpassed last year's attendance! Almost 2,000 attendees and exhibitors took part in this fantastic opportunity — the best showing in the past six years.

The key goals of the Annual Course were to present information about current and emerging diagnostic and therapeutic techniques in gastroenterology and endoscopy; to establish a forum for networking and the exchange of ideas among participants for the purpose of improving the nursing practice and patient care; and to provide education on a range of clinical and professional topics at all levels. Based on attendees' feedback, the conference more than delivered! ●

Are you interested in joining next year's Annual Course festivities?

Registration will open in December for the 44th Annual Course, "Invest in Yourself and Inspire Others: Jazz Up Your Journey," in New Orleans from May 7–9, 2017.



Hands-on training and product/service highlights were just a small portion of the event-filled week.



Conference attendees strike a pose during the event.



Crowds flooded in to register and explore the exhibit hall, which boasted a record-breaking nearly 100 exhibitors this year.



SGNA Immediate Past President Lisa Fonkalsrud, BSN RN CGRN, had the honor of passing down the SGNA presidential gavel to newly appointed SGNA President Kristine Barman, BSN RN CGRN.



GI Squad Goals: Participants had fun channeling Ellie and the squad with an interactive picture wall.



The event begins with the annual ribbon cutting by Eileen Babb, BSN RN CGRN CFER, Program Committee chair.



International attendees gather around the association leadership.




Immediate Past President Lisa Fonkalsrud and President Kristine Barman mingle with exhibitors and attendees in the exhibit hall.



SGNA Endoscope Reprocessing Crosswalk

Key Guideline Overview: Endoscope Reprocessing

Proper reprocessing of endoscopes and accessories is critical to the safe and successful treatment of patients. There are several guidelines and standards which address the many facets of this topic. To help navigate the information across the spectrum, this comparison grid was developed to provide a synopsis of information specific to the key areas of visual inspection and interval of storage. A comprehensive review of the guidelines listed below is recommended to gain the full breadth of their respective content.

Organization	Brief description of statement	Visual Inspection synopsis	Interval of Storage synopsis
<div>Society of Gastroenterology Nurses and Associates</div> <div> Society of Gastroenterology Nurses and Associates, Inc.</div> <div>Standards of Infection Prevention in Reprocessing Flexible Gastrointestinal Endoscopes (2016)</div>	The focus of this standard is to highlight the expectations of reprocessing staff and management responsibilities, the reprocessing environment, the steps in reprocessing and rationale for their use, and quality assurance.	<p>"Visual inspection is recommended to make sure the endoscope is visibly clean. It is not a guarantee that decontamination from manual cleaning is complete, but it can be considered a safety stop or 'time out' to ensure the endoscope is visually clean before proceeding to the next step of HLD.</p> <p>a. Visually inspect for conditions that could affect the disinfection process (e.g., cracks, corrosion, discoloration, retained debris)</p> <p>b. Use magnification and adequate lighting to help assist in visual inspection.</p> <p>c. Repeat manual cleaning step(s) if not clean.</p> <p>Note: It is impossible to visualize internal channels. Literature suggests that, to confirm the adequacy of manual cleaning, a rapid cleaning monitor (or rapid audit tool) for residual organic soil can be used prior to high-level disinfection. If the tool results are positive, this allows for the re-cleaning of the endoscope prior to disinfection. The frequency of the testing should be determined by the individual institution" (p.18).</p>	Supports a 7-day storage interval for reprocessed endoscopes-but only if they were reprocessed and stored according to professional guidelines and manufacturer instructions. (p. 26)

<p>Society of Gastroenterology Nurses and Associates</p>  <p>Standard of Infection Prevention in the Gastroenterology Setting (2015)</p>	<p>The goal of this Standard is to provide information not currently/minimally covered in our current Standards (e.g., Standard Precautions, bloodborne pathogens, environmental cleaning, staff attire, culture of safety, responses to failure).</p>	<p>"Visibly clean" is a method routinely used to assess the adequacy of manual cleaning. This may involve the use of a magnifying glass to inspect for gross soil. Visual inspection is insufficient to determine cleaning adequacy in narrow and internal channels of a scope and cannot detect microorganisms or bioburden. Rapid cleaning monitors are available. These monitors can provide documentation on cleaning efficacy but do not reflect microbial activity. Realtime testing of endoscope lumens/elevator channel should be done immediately after manual cleaning so that any improperly cleaned devices are re-cleaned prior to HLD. Facilities should consider the use of monitors to verify ongoing cleaning adequacy." (p. 13).</p>	<p>Supports a seven day storage interval for reprocessed endoscopes but only if they were reprocessed and stored according to professional guidelines and manufacturer instructions. (p. 14)</p>
<p>American National Standards Institute/ Association for the Advancement of Medical Instrumentation</p>   <p>*ANSI/AAMI ST91:2015 Flexible and semi-rigid endoscope processing in health care facilities (2015)</p>	<p>"Provides guidelines for precleaning, leak-testing, cleaning, packaging (where indicated), storage, high-level disinfecting, and/or sterilizing of flexible gastrointestinal (GI) endoscopes, flexible bronchoscopes, surgical flexible endoscopes (e.g., flexible ureteroscopes), and semi-rigid operative endoscopes (e.g., choledochoscopes) in health care facilities. These guidelines are intended to provide comprehensive information and direction for health care personnel in the processing of these devices and accessories."</p>	<p>"Incorporate visual inspections and testing of the equipment to identify conditions that may affect the cleaning or disinfecting processes, such as testing for leaks, examination for cracks, and checking the integrity of fiber optic bundles." (p. 36)</p> <p>"Cleaning verification of flexible and semi-rigid endoscopes by users should include:</p> <ol style="list-style-type: none"> Visual inspection combined with other verification methods (see Section 12.4.3) that allow the assessment of both external surfaces and internal housing and channels. Testing of the cleaning efficacy of mechanical equipment. Monitoring of key cleaning parameters (e.g., temperature)." (p.39) 	<p>"Based on the results of the risk assessment, the health care facility should develop policies and procedures to address the maximum endoscope storage time."</p> <p>"Health care facilities should address cases where processing is to be done when the established maximum storage time has been exceeded (i.e., immediate processing or processing before the next patient use). Currently, there are limited data to give a definitive answer as to best practices for this question." (p. 34)</p>
<p>Association of periOperative Registered Nurses</p>  <p>Association of periOperative Registered Nurses</p> <p>*Guideline For Processing Flexible Endoscopes (2016)</p>	<p>"This document provides guidance to perioperative, endoscopy, and sterile processing personnel for processing all types of reusable flexible endoscopes and accessories." (p. 675)</p>	<p>"Endoscopes, accessories, and equipment should be visually inspected and evaluated for cleanliness, missing parts, clarity of lenses, integrity of seals and gaskets, moisture, physical or chemical damage, and function. Visual inspection and evaluation helps detect the presence of residual soil and identify items in need of repair."</p> <p>"Lighted magnification should be used to inspect endoscopes and accessories for cleanliness and damage. An endoscope that appears clean may harbor debris that cannot be seen without magnification. Lighted magnification may increase the ability to identify residual soil or damage."</p> <p>"Internal channels of flexible endoscopes may be inspected using an endoscopic camera or borescope. Endoscopic cameras and borescopes penetrate the lumen and allow for improved visual inspection." (p. 705).</p>	<p>"A multidisciplinary team that includes infection preventionists, endoscopy and perioperative RNs, endoscopy processing personnel, endoscopists, and other involved personnel should establish a policy to determine the maximum storage time that processed flexible endoscopes are considered safe to use without reprocessing. There is limited evidence to definitively establish the length of time that processed flexible endoscopes remain safe for use during storage." (p. 725).</p> <p>Unresolved issue.</p> <p>"Although reuse of endoscopes within 10 to 14 days of high-level disinfection appears to be safe, the data are insufficient to provide a maximal duration for use of appropriately cleaned, reprocessed, dried, and stored flexible endoscopes. This interval remains poorly defined and warrants further study. As noted in the previous discussion, several organizations advise shorter intervals." (p. 1080)</p>
<p>American Society of Gastrointestinal Endoscopy</p>  <p>Multisociety guideline on reprocessing flexible gastro-intestinal endoscopes: 2011 (in revision; update to be released in 2016)</p> <p>*Fee required to access document</p>	<p>ASGE and the Society for Healthcare Epidemiology of America collaborated with multiple physician and nursing organizations, infection prevention and control organizations, federal and state agencies, and industry leaders to develop evidence-based guidelines for reprocessing GI endoscopes. Since that time, high-level disinfectants, automated reprocessing machines, endoscopes and endoscopic accessories have all evolved.</p>	<p>"Visually inspect both endoscopes and reusable accessories frequently in the course of their use and reprocessing, including before, during and after use, as well after cleaning and before high-level disinfection. Damaged endoscopes and accessories should be removed from use for repair or disposal." (p. 1080)</p>	<p>Unresolved issue.</p> <p>"Although reuse of endoscopes within 10 to 14 days of high-level disinfection appears to be safe, the data are insufficient to provide a maximal duration for use of appropriately cleaned, reprocessed, dried, and stored flexible endoscopes. This interval remains poorly defined and warrants further study. As noted in the previous discussion, several organizations advise shorter intervals." (p. 1080)</p>



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Gabriele Schindler Award

Kimberly Q. Foley, BSN RN CGRN

Outstanding Regional Society

Region 21, Indiana

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Katherine A. Vinci, DIPL RNC CGRN

Board of Directors Award

Philip R. Fileri

Research Award

Marilee Schmelzer, PhD RN

Glenda Daniels, PhD RN CGRN CWOCN

Flame Award

Chesapeake Regional Medical Center

Annual Course Scholarships

Conrad Worrell, RN CGRN CSN

Cathy Ford, BSN RN CGRN

Comfort Utin, BSN PRON(dip) RN RM

Karin Cierzan, RN CGRN

Carolyn Checovetes, RN CGRN

Terrie Stevens, RN CGRN

Christiana Hinmikaiye, BSN RN DIPL

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Susan Tripp, BSN RN CGRN

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Angela Kranich, BSN RN

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Christin McKellar, RN CGRN

First-Time Attendee Annual Course Scholarships

Maria Theresa Jalandoni-Magat, RN BSN

Shaleena Kumar, MSN RN

Denise Burns, BSN RN CGRN

Kim Wilson, MIT

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Novice Writer's Award

Electrosurgery in the Gastrointestinal Suite: Knowledge Is Power

Geri Nelson, RN



Excellence in Clinical Practice Writer's Award

Insufflation Using Carbon Dioxide Versus Room Air During Colonoscopy: Comparison of Patient Comfort, Recovery Time, and Nursing Resources
Isabelle Lynch, MBA BSN RN

Outstanding Research Article

Jordanian Critical Care Nurses' Practices Regarding Enteral Nutrition
Sawsan Mohammad Hammad, MSc RN
Mahmoud Al-Hussami, DHSc PhD
Muhammad Waleed Darawad, PhD RN

Education Poster Winners

First Place

Appreciating Endoscopic and Surgical Team Collaborations in the Removal of Complicated Polyps
Valerie Hodges, RN CGRN
Doris Keyser, RN CNOR
Jan Provenzano, MSN RN CGRN

Second Place

Changes in Nursing Interventions: Transitioning to Monitored Anesthesia Care for Endoscopy Procedures Performed in an ASC
Miriam Remucal BS, RN CGRN
Catherine Fiebiger, RN BS CGRN CFER
Yankee Lee, BSN RN

Third Place

Understanding Obstructive Sleep Apnea (OSA) and Potential Risks for Endoscopy Patients: Breaking the Mold in Patient Safety by Implementation of OSA Screening
Julie Forsber, BSN RN CGRN

Research Poster Winners

First Place

Bowel Management Strategies Used by Veterans with Long-standing Spinal Cord Injuries (SCI)
Glenda Daniels, PhD RN CGRN CWOCN
Marilee Schmelzer, PhD RN
Becky Baird, MS RN-BC CNE

Second Place

A Balancing Act: Managing Workload while Improving Nurse Satisfaction
Manyang Christina, RN BSN
Kathryn McAlpine, RN
Julie Stene, MSN MHA RN
Cynthia Niesen, DNP RN NEA-BC

Third Place

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Christine Trainor, RN; Navdip Chawla, RN; Steven Nguyen, RN

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Introducing SGNA's New Special Interest Groups

SGNA's Special Interest Groups provide a venue for SGNA members to explore their interests with nurses and associates who share their passion. SGNA membership is comprised of nurses and associates with diverse specialties; the new Special Interest Groups allow members to share resources, exchange ideas and provide education to the SGNA community about specialized topics. Special Interest Group topics include:

- Hepatology
- Pulmonary Procedures
- Associates/Technicians
- Management

Group participants will inject new life and activity into the Online Discussion Forums and share resources such as articles and upcoming educational opportunities. Born from this shared talent and interest, the SGNA community can look forward to educational opportunities such as webinars, *SGNA News* articles, blog posts and more coming from the Special Interest Groups.

These groups will be incubators for content experts and new leaders. The questions raised and ideas generated will impact the long-term goals of SGNA and amplify SGNA's impact in these fields. Members of all experience levels are encouraged to participate.

SGNA members can join Special Interest Groups by visiting www.sgna.org/SIG.

Meet Our SIG Leaders

Hepatology

Chair: Linda M. Romeo, BSN RN CGRN

Co-Chair: Colleen M. Boatright, MSN RN-BC

Management

Chair: Rosemary J. Sexton, RN

Co-Chair: Maria Alma Estrera-Yorke, MSN RN MHA CGRN CFER

Associates/Technicians

Chair: Lisa A. Brown, ACNA AGTS CFER

Co-Chair: Michelle E. Oilar, CST

Pulmonary Procedures

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Year-Round Perks of Attending the SGNA Annual Course

Rhonda Maze-Buckley, RN, SGNA News Editor

“No man is an island, entire of itself; every man is a piece of the continent, a part of the main.” — John Donne

I hope everyone had a great time in Seattle and had safe travels home. The SGNA Annual Course is a great time to renew old friendships, network, and to learn new and exciting developments in the field of gastroenterology.

Building these relationships is the basis of the great work everyone does every day. The conference allows us to realize we are

part of a huge professional gastroenterology community and our profession impacts lives across the globe.

With our busy work and personal lives, the Annual Course gives us time to rejuvenate and allows for creative ideas to flow. Take time to make a list for future work projects while they are fresh on your mind. Once home, it can

become overwhelming, and often times our great ideas get lost in our busy work lives.

Sharing what you have learned at the conference will also benefit those who were unable to attend this year.

I hope this year will inspire many of you to volunteer to serve on SGNA committees, write an article for the *Gastroenterology Nursing* journal or consider getting involved in next year's Annual Course by submitting a poster abstract or volunteering as a session moderator. This is another great way to stay connected with colleagues and it will help you grow professionally. It will also help others learn from your expertise and, sometimes, even your mistakes.

I hope to see you at next year's Annual Course in New Orleans!

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Save the Date for the SGNA 44th Annual Course

Join your GI/endoscopy colleagues in
New Orleans, LA, to jazz up your GI journey!

It's not too early to start getting excited about the 2017 Annual Course, taking place in the Big Easy. The SGNA 44th Annual Course will be hosted at the New Orleans Morial Convention Center May 7–9, 2017, with pre-meeting events slated for May 5–6.

