

# PULSE POINT

May/June 2003

OKLAHOMA NURSING STUDENT ASSOCIATION

EDITOR: RACHEL PATTON

**CONGRATULATIONS MAY GRADUATES!!**



## News from Mayo Clinic

### **Mayo Clinic Researchers Discover Significant Link Between Head Injury and Parkinson's Disease**

Mayo Clinic researchers have found that those who have experienced a head injury are four times more likely to develop Parkinson's disease than those who have never suffered a head injury. The risk of developing Parkinson's increases eightfold for patients who have had head trauma requiring hospitalization, and it increases 11-fold for patients who have experienced severe head injury.

### **Mayo Clinic Researchers Discover Protective Gene Mutation in Some HIV-Infected Patients; May Explain How HIV Progresses to AIDS**

Mayo Clinic researchers have identified a naturally occurring "good guy" for patients infected with HIV. It is a helpful gene mutation that impairs the HIV virus' cell-killing machinery, thus preserving immune system function. Moreover, Mayo's experiments in mice suggest that the presence or absence of this mutation in the gene known as Vpr may play a central role in determining which HIV-infected patients develop full-blown, fatal AIDS.

## CELEBRATE!

May 6 - 12, 2003

**"Nurses: Lifting Spirits, Touching Lives"**

### President Bush Sends Greetings



THE WHITE HOUSE  
WASHINGTON

March 18, 2003

I send Greetings to those celebrating National Nurses Week. Our Nation's health care system is a world-class model of skill and innovation, with a pace of discovery that is helping Americans to live better and longer lives. With these advances, the role of nurses continues to expand and remains critical to ensuring quality care in hospitals, nursing homes, patients' homes, and communities across our country.

I commend America's 2.7 million registered nurses for your continued commitment to excellence. Your hard work, dedication, and compassion help strengthen our Nation's health care and bring comfort and healing to countless individuals.

Laura joins me in sending our best wishes.

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## Patient Safety Reporting Bill Passes

5/09/03

Tempe, AZ -- SB 1178, known as the Patient Safety Reporting bill, was signed into law this week with strong support from the Arizona Nurses Association (AzNA). The bill establishes reporting procedures and policies prohibiting retaliation against health professionals working at health care institutions when they in good faith report any practices or violations of law that put patients' health or safety at risk.

The new law protects a health professional from retaliation by a healthcare facility when the health care professional reports an activity which puts a patient at substantial risk to a governmental or regulatory agency, provided that the professional reports first to the institution and allows a reasonable time for the institution to respond.

"In addition to improving patient safety, this bill may yield another benefit in helping to reduce the critical nursing shortage here in Arizona," remarked Marla Weston, Executive Director of AzNA



## ANA Applauds Federal Legislation to Mandate Safe Nurse-To-Patient Ratios

### SEN. INOUE INTRODUCES BILL TO PROTECT PATIENTS, HOLD HOSPITALS ACCOUNTABLE FOR RN STAFFING

Washington, DC --The American Nurses Association (ANA) today applauded the introduction of the Registered Nurse Safe Staffing Act of 2003, federal legislation that aims to ensure that patients receive safe, quality nursing care in hospitals and other health care institutions. The legislation mandates the development of staffing systems that require the input of direct-care registered nurses (RNs) and provides whistle-blower protections for RNs who speak out about patient care issues. The bill, S.991, was introduced by Sen.

Daniel Inouye (D-HI) yesterday. Today marks the start of National Nurses Week, which is celebrated May 6-12 each year.

ANA, which worked closely with Sen. Inouye's office on the bill, lobbied for this legislation to protect patients and registered nurses, given the absence of enforceable standards for nurse staffing in hospitals and the widespread practice of health care facilities stretching their nursing staff with unsafe patient loads, mandatory overtime, "floating" to specialty units without training and orientation and other practices that undermine the delivery of safe, quality care.

"Inappropriate nurse staffing is the number one concern of nurses today," said ANA President Barbara Blakeney, MS, APRN, BC, ANP. "More than a decade of research has shown that RNs make the quality difference in patient care and that when RN care is insufficient, patient safety is compromised and the risk of death is increased.

"We applaud Sen. Inouye for his leadership on this issue and for his commitment to protecting patients and nurses from practices that are dangerous," said Blakeney. "Furthermore, this legislation is needed to improve the work environment for nurses, to enhance retention of practicing nurses and recruitment into the profession."

In July 2002, the Department of Health and Human Services released data confirming that a nursing shortage already exists in the United States and that it is expected to grow. According to the HHS study, in 2000, there was a shortage of 110,000 nurses (6 percent). Without changes in the system, the HHS study predicts that shortage will grow to 12 percent by the year 2010, 20 percent by 2015, and 29 percent by 2020.

The RN Safe Staffing Act amends the conditions of participation in the Medicare program and establishes a requirement for minimum staffing ratios. Rather than establishing a specific numeric ratio, the act requires the establishment of a staffing system that "ensures a number of registered nurses on each shift and in each unit of the hospital to ensure appropriate staffing levels for patient care." Specifically, the staffing system must:

- Be created with input from direct-care RNs;
- Be based on the number of patients and level and intensity of care to be provided, with consideration given to admissions, discharges and transfers that nurses must handle each shift;
- Account for architecture and geography of the environment and available technology;
- Reflect the level of preparation and experience of those providing care;
- Reflect staffing levels recommended by specialty nursing organizations;
- Provide that a RN not be assigned to work in a particular unit without first having established the ability to provide professional care in such a unit.

In addition, the act requires public reporting of staffing information. Hospitals must post daily for each shift the number of licensed and unlicensed staff providing direct patient care, specifically noting the number of RNs. In addition, the act provides whistle-blower

protections for RNs and others who may file a complaint regarding staffing.

The RN Safe Staffing Act incorporates ANA's Principles of Nurse Staffing. Rather than recommending specific numeric ratios, ANA developed the principles in 1999 as a tool for nurses to better gauge appropriate staffing. The principles not only take into account the number of patients, but also look at other important staffing considerations, such as the experience level of nurses on the unit, the severity of patients' conditions and the availability of support services and resources.

"ANA has long been supportive of establishing nurse-to-patient ratios," said Blakeney. "However, ANA has not supported the approach of legislating specific numeric ratios, because that approach fails to take into consideration the multiple variables that affect nurse staffing at the unit level. Staffing systems can only be effective if the direct care nurses who work on a specific unit have input into the system. This legislation provides a comprehensive solution to the complex and urgent problem of insufficient nurse staffing."

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*ANA is the only full-service professional organization representing the nation's 2.7 million Registered Nurses through its 54 constituent associations. ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare 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.*



## Nurses to aid ailing airline passengers

*From Eric Philips  
CNN Correspondent*

**(CNN) -- Nurses' rounds are about to be extended from the hospital to the sky.**

When American Airlines launches Skycaare next month, ailing fliers will be able to bring a nurse along with them for a discounted fare.

"We're looking for people who are very stable for air travel that really just need a medical helping hand," said Dr. David McKenas, medical director for American Airlines.

Skycaare will provide a registered nurse for passengers who want or need one. Before the flight, the nurse will consult with the passenger's physician to learn about medical needs and make sure the patient can handle flying.

During the flight, the two sit together, with the nurse keeping tabs on the passenger's condition

### One-on-One Care

Physician Larry Tune, who works with Alzheimer's patients, said this program could be just what the doctor ordered.

"The needs of someone who is demented really require one-on-one attention, especially in travel, because that is a unique experience for them," Tune said.

It can also be a challenging one for someone with a mental or physical illness.

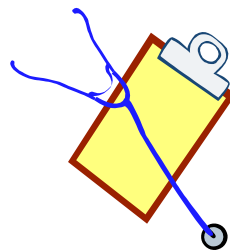
Janet Cellars recently had to fly her father home soon after he underwent heart surgery.

"To have somebody who is available, who is knowledgeable about the medical status of the person and they know just what is involved in travel, I think would be very helpful to families," Cellars said.

### \$90 an hour

Most major airlines already have medical equipment on board, including first aid kits and portable defibrillators. But American Airlines is the first to take this additional step, starting in February for flights to or from Dallas and Chicago.

Passengers requesting a nurse would have to pay for the nurse's ticket at a 30 percent discount, plus a \$90 hourly fee. But that added expense could buy more freedom for people who are sick, and more peace of mind for family members.



### **ON THE LIGHTER SIDE.....**

#### **Actual notes found in patient charts!**

- Discharge status: alive but without permission.
- The patient has been depressed ever since she began seeing me in 1983.
- The patient refused an autopsy.
- The patient has no past history of suicides.
- Patient has left his white blood cells at another hospital.
- Between you and me, we ought to be able to get this lady pregnant. Since she can't get pregnant with her husband, I thought you would like to work her up.
- She is numb from her toes down. Occasional, constant, infrequent headaches.
- Exam of genitalia reveals that he is circus sized.
- The patient was prepped and raped in the usual manner.

# New Pin and Logo Contest

The ONSA Board of Directors voted to consider redesigning the ONSA pin and logo. To encourage maximum participation from members statewide, a New Pin and Logo Contest is being held. The top three designs will be selected by the Board of Directors and consultants at the August 9, 2003 meeting.

The creators of the top three designs will receive a prize of \$100.00 each for their designs.

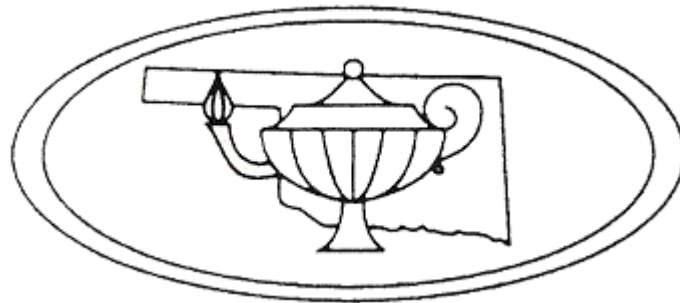
The contest is open to all nursing students in Oklahoma. Submissions must be made no later than June 7, 2003. Original designs should incorporate elements of current nursing practice and Oklahoma. Submissions must be on 8 ½ X 11 inch paper or larger, and may be in color or black and white.

The top three designs will be posted at the Annual ONA/ONSA Convention in OKC in October 2003 along with the design currently being used by ONSA. Attendees at the Convention will vote on which design they consider best. The results of the vote will be announced in the Pulse Point in December 2003.

## Send submissions to:

**Joseph T. Catalano, Ph.D, RN**  
**Chair, Department of Nursing**  
1100 E 14th St.  
Ada, OK 74820

## Current ONSA Logo Design:



### Delightful Chicken Salad

- |  |                               |
|--|-------------------------------|
| ♥ 3 cups diced, cooked chicken breast            | ♥ ½ tsp ground coriander      |
| ♥ 8 oz. unsweetened pineapple chunks             | ♥ 1 cup diced celery          |
| ♥ 1/4 cup minced onion                           | ♥ 2 Tbsp. lemon juice         |
| ♥ 1/3 cup reduced-calorie or fat-free mayonnaise | ♥ 1/4 tsp fresh ground pepper |
| ♥ 1 cup seedless green grapes                    |                               |

Mix ingredients and serve on Lettuce Leaves

Yields 5 Servings

*Nutrient Analysis Per Serving*

*Calories: 230, Protein : 34g Carbohydrates: 10g Total Fat: 7g*

*Saturated Fat: 3 g, Polyunsaturated Fat: 1 g,*

*Monounsaturated Fat: 2 g Cholesterol: 72 mg, Sodium: 275 mg*