

Candidates for 1993 officers

Fran Sikso, RN, Nominating Committee Chair

Election of officers for 1993 will be held at the State Council meeting, December 4-5, in Albany. The following slate of officers was presented at the August State Council meeting in Rochester:

<i>President-elect</i>	Mary Ann Wylie (<i>Elmira</i>)
<i>Treasurer</i>	Patsy Ballard (<i>Dundee</i>) Peggy Burke (<i>Rochester</i>) Cliff Green (<i>Fayetteville</i>)
<i>Secretary</i>	Michelle Silliker (<i>Allegheny</i>)

This marks the first time in our 20-year history that a full slate of officers has been presented. It shows the increasing growth of our state organization and the willingness of many to become involved.

You are invited to listen to the candidates present their platforms at the December 4-5 State Council meeting in Albany. Nominations will be accepted from the floor of the Council. Please discuss the candidates, their qualifications and positions with your chapter delegates.

Mary Ann Wylie, RN BS CEN

Mary Ann Wylie is a graduate of Arnot-Ogden School of Nursing in Elmira. She has been a member of ENA since 1980 and has served as a national delegate for the past nine years. She has been active in her Mark Twain chapter as well as co-chairing the State Trauma Committee.

Ms. Wylie is a certified TNCC instructor trainer, BLS and ACLS instructor, and Pediatric Life Support provider. She has coordinated and presented many educational programs in the Southern Tier area. She is a member of the Southern Tier Regional EMS Council.

Ms. Wylie is presently the day charge nurse at Arnot Ogden Hospital Emergency Department. She was honored by Arnot-Ogden with an Award for Excellence in Emergency Nursing in 1989. Ms. Wylie was the 1992 speaker for the hospital's School of Nursing graduation. She is currently



pursuing a master of science in adult education at Elmira College.

Patsy Ballard, RN CEN

Patsy Ballard has been an active member of the Mark Twain chapter since 1987, presently serving as its president. She has also been a national delegate for the last four years. She chaired the successful 1992 New York State Council "Setting the Pace" Conference. Ms. Ballard served as a NYSCENA Member-at-Large in 1991. Active in Yates County EMS Council for seven years, she is serving her third year as president of the Council.

Ms. Ballard holds certifications in BLS, ACLS and TNCC. She is presently the supervisor of emergency services at the Soldiers and Sailors Hospital in Penn Yan. She is enrolled in the BSN program at Elmira College.

Peggy Burke, RN CEN

Ms. Burke's biography is not available at this time.

Cliff Green, RN CEN CNP

Cliff Green is a 1971 graduate of Corning Community College. He pursued his education while working in emergency as well as critical care. After obtaining his BS, he completed the nurse practitioner program at SUNY Upstate in 1981. In addition, he holds certifications in ACLS, BLS and TNCC.

(Continued on page 7)



President's report

Gwen Williams, RN BSN CEN

The National ENA General and Scientific Assemblies were held September 30 - October 4, 1992, in Orlando Florida. New York State sent 35 General Assembly Delegates and two Alternate Delegates.

The General Assembly, composed of delegates from each state, is the policy determining component of the National Association. The general assembly meets at least once per year to amend the association's bylaws as necessary, to determine position statements on professional nursing issues and to review fiscal statements.

The number of members within the state determines the number of delegates per state. As of June 1, 1992, New York State Council ENA had 1,666 members. Each state is entitled to one voting delegate. In addition, each state receives one voting delegate for each 50 active association members. The State Council President is an additional member to the delegation.

All delegates attend the business sessions, represent their constituents at these business meetings and seek information on all issues under discussion. For this 1992 General Assembly, the proposed bylaw amendments were:

- 92-01 - Change name of Scientific Assembly Committee to Annual Meeting Committee (*passed*)
- 92-02 - Limiting the number of years of service by board members (*failed*)

The proposed resolutions were:

- 92-01 - Mandatory HIV testing of health care workers (*passed*)
- 92-02 - Emergency nurses and the legislative process (*failed*)
- 92-03 - Child maltreatment (*passed*)
- 92-04 - Care of the battered woman in the emergency department (*failed*)
- 92-05 - The management of the mentally/emotionally unstable patient in the emergency care area (*failed*)



The 35 New York State General Assembly delegates and alternates met in Rochester, New York, in August to discuss the bylaws amendments and resolutions in preparation for the General Assembly. As usual, New York State Council ENA members were very involved in the bylaws/resolution debate and vote.

The assembly delegation included representatives from 13 of the 14 New York State chapters. Delegates were:

Adirondack: Dayle Griffin, Mary Lou Killian, Rena Rovere, Fran Sikso

Brooklyn: Gloria Williams

Central: no representative

Chatt: Margaret Kent, Michelle Silliker

Genesee Valley: Peggy Burke, Jan Rogers, Anne Wall, Gwen Williams, Mel Wilson

Lower Hudson Valley: Rita Anderson, Maryanne Portoro

Manhattan Bronx: Vi Ayalon

Mark Twain: Ramona Sowers, Mary Ann Wylie

Mid-Hudson: Sue Prezzano, Susan Strauss

Nassau Queens: Virginia Daly, Mary Hayes, Catherine Lind, Maggie Weeks

North Country: Marcia Brown, Gail LaFountain

Southern Tier: Kathy Conboy, Ruth Laing, Faith Lynch, Beatrice Ripic

Suffolk: Jeanette Barth, Rose Cassidy, Mary Mallory, Ruth Perrone

Western New York: Sue Dubrinski, Joanne Fadale

Alternates: Jennifer Nessler, Mary Goyette (both from Adirondack)

Please contact your chapter representatives for information on the 1992 General Assembly activities. The 1993 ENA Assemblies will be held in Seattle, Washington, September 8-12, 1993. Plan ahead if you are considering becoming a General Assembly Delegate in 1993. ❖

New York State Council News is published quarterly. The opinions expressed in this newsletter are not necessarily those of the New York State Council of the Emergency Nurses Association.

President	Gwen Williams
President-elect	Mary Ellen Wilson
Secretary	Michelle Silliker
Treasurer	Jeanette Barth
At-Large Board Members	Barbara Kirby
	Susan Strauss
Past President	Fran Sikso

As usual, New York State Council ENA members were very involved in the bylaws/resolution debate and vote.

Humor as a self-care strategy for emergency nurses

Mary Ann Wylie, RN BS CEN

Humor and its byproduct, laughter, makes one feel good. Humor is defined by *Webster's Dictionary* as the "mental faculty of discovering, expressing, or appreciating ludicrous or absurdly incongruous elements in ideas, situations, happenings, or acts."



Humor has been documented throughout mankind's history from the *Bible* to present times. The Old Testament advised about humor and health. Proverbs 17:22 states: "A joyful heart is the health of the body but a depressed spirit dries up the bones." Dr. Joel Goodman of the HUMOR PROJECT advises, "You can use humor to add years to your life and life to your years."

Humor aids in dissipating feelings of anxiety, sadness, anger and frustration.² Emergency nurses are very familiar with these feelings, and the use of humor as a self-care strategy is perhaps essential for our maintenance and continued growth.

Humor can be a powerful antidote to stress and burnout. It can prevent "hardening of the attitudes."¹ Research has identified the use of humor as a healthy coping mechanism when confronting life's stressors.

The body's physiological response to a humorous experience is beneficial. All muscle groups are exercised, including the cardiovascular system. It results in increased oxygen exchange and saturation and decreased blood pressure. Both brain hemispheres are simultaneously stimulated. There is an increase in endorphin production and an increase in immune cell production.³ These responses result in the feeling of deep relaxation, enhanced alertness and cognition, euphoria and a decrease in pain.

Emergency nurse managers, educators and researchers need to capitalize on the opportunities to introduce humor, humor interventions and self-care strategies to emergency staff nurses. Use humor during in-service presentations, continuing educational programs, newsletters, research and journal presentations. Humor could be that essential ingredient in the cultivation of a healthy emergency nursing profession.

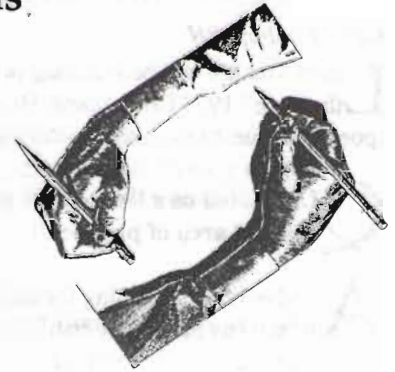
References:

1. Goodman, J. Laughing Matters: Taking Your Job Seriously and Yourself Lightly. *Orthopedic Nursing*, 1989, 8(3): 11-13.
2. Hutchinson, S. Self-Care and Job Stress. *Image: Journal of Nursing Scholarship*, 1987, 19(4): 192-196.
3. Robinson, V. *Humor and the Health Professional*, 2nd ed., 1991. Thorofare, New Jersey: Charles B. Slack, Inc. ❖

NYSCENA now in the process of bylaws revisions

Marylou Killian, RN

One of the goals of the New York State Council for 1992 includes reviewing and updating our bylaws to reflect organizational changes that have occurred nationally. The Bylaws Committee, chaired by Fran Sikso, began meeting in March. Committee members are Virginia Hens, Clifford Green and Marylou Killian.



Revisions are needed to:

- be in line with our national bylaws regarding format and operating procedures.
- give people who are not delegates to the State Council an opportunity to participate at the state level.
- set an example for chapters to develop and revise their bylaws.

The first draft of the bylaws revisions was presented at the State Council meeting on August 21 in Rochester. Highlights of the proposed revisions include:

- restructuring of the standing committees
- restructuring of the board of directors
- implementation of a point system for selection of general assembly delegates.

Chapter delegates to the State Council have been given a draft of the proposed revisions to discuss locally. The revised bylaws will be fully discussed and voted on at the December State Council meeting. Once the bylaws are approved, each chapter will be required to draft its own bylaws. State bylaws are to be used as a guide in the development of chapter bylaws.

If you have any questions or concerns regarding the bylaws, contact your State Council delegate or a member of the Bylaws Committee. ❖

The newsletter of the New York State Council of ENA currently has a circulation of 1800, is published quarterly, and reaches all ENA members within New York State. NYSCENA accepts paid advertisements for products or services that relate to emergency nursing within New York State. Ads are subject to committee approval prior to publication. Advertisements must be camera-ready and reducible.

Advertising space and price (per issue):

1/8 page (3" x 2") \$40

whole page \$300

Make checks payable to NYSCENA and send to Susan Strauss, RN, Editor, 167 Hooker Avenue, Poughkeepsie, NY 12603-3305.

The New York State Council of ENA disclaims any responsibility or liability for advertising material and does not guarantee, or endorse, any product or service advertised.

Pediatrics and "Setting the Pace"

Kathy Conboy, RN

Linda Manley will be lecturing at the upcoming "Setting the Pace" 1993 Conference. Here are a few of her responses to questions asked by the Council.

Q Linda, tell us a little about your background and current area of practice.

A I have been in nursing for almost 20 years, most of which has been in pediatric emergency care and helicopter transport. Currently, I have two part-time jobs. I am the EMS Coordinator at Children's Hospital in Columbus, Ohio, and a part-time flight nurse for Ohio State University Hospital's SKYMED program.

Q How did you get interested in pediatrics? ENA?

A It's often difficult for us to assess and care for the little ones, especially when they are truly ill. At the same time, I've always been fascinated with how well children respond to simple measures. As far as my interest in ENA, I've been a member since the mid 1970s. As a professional organization, I've been impressed with the leadership, support and educational programs that ENA offers the emergency nurse.



1993 "Setting the Pace" state conference

Mary Anne Balfe, RN, and Fran Sikso, RN
Co-Chairs, Conference Committee

The 1993 "Setting the Pace" conference will be held at the Holiday Inn South in Rochester, New York, April 30 - May 1, 1993. The conference is offering two tracks. The first track covers pediatrics and will include topics of pediatric triage, pharmacology and case reviews to name a few. The second track reviews management issues including computerized staffing, budget, conflict resolution and transfer problems.

There will be a large area for exhibits and vendors. Nursing recruitment exhibitors will be coordinated by the Conference Committee.

Brochures and registration forms will be mailed soon, so plan now to attend the 1993 New York State ENA "Setting the Pace" Conference. We look forward to seeing you for this great opportunity for professional growth, networking and relaxation. ❖

Q Some of us have heard you lecture at National Scientific Assembly. Your lecture style is very practical as well as knowledgeable. Do you have a special philosophy or goal when you teach?

A When I think of my favorite instructors, what comes to mind is their ability to give information in a fun, non-threatening way. I try to keep this in mind as I develop individual lectures and programs. I feel it is very important to keep up my clinical skills, even though I am often in an educational role.

Q The Pediatric Case Review lecture you have planned includes a slightly different approach than we have used in the past. Will you elaborate a little?

A The Pediatric Case Review presentation will give the emergency nurse a glimpse of the diversity of pediatric cases seen in the emergency department and encourage problem solving. I will be presenting each case with a description of the problem, initial physical findings and then let the audience decide on the most reasonable course of action and probable diagnosis. The more everyone participates, the more valuable it will be.

Q The death of a child is one of the most difficult experiences we encounter in the emergency department. What does this course offer?

A I fully agree the death of a child is one of, if not the most, difficult situations for all of us. I hope to explore several issues in this talk. First, the crisis itself, dealing with the family and finding available resources for family members. Next, how the death affects each of us, our coping mechanisms and available resources.

Another aspect of death that is usually not discussed is the phenomena of near death experiences (NDE). Children who have survived an arrest frequently have a NDE, although when they try to describe it, they are not always considered credible. I will present an overview of this phenomena and its impact on families. ❖



What's new in nursing research

Mary Ann Wylie, RN BS CEN

Clinical Practice

Use of Capnography in Critically Ill Adults.

Szaflarski N. & Cohen N. *Heart & Lung* 1991; 20(4): 363-371.

This article presents the technology, advantages and limitations of capnography. The authors emphasize the importance of this modality by stating, "Emergency nurses who have not cared for ventilator patients or end tidal carbon dioxide monitors soon will." Emergency nurses are encouraged to review this article.

Reports of Nitropatch Explosions Complicating Defibrillation.

Panacek E., Munger M., et al. *American Journal of Emergency Medicine*, 1992; 10(2): 128-129.

This article describes complications of defibrillation over the flesh-colored nitropatches. There were several reports of explosions and electrical arcing causing partial thickness burns. This is an important patient safety issue for emergency nurses.

Update: Are Milking and Stripping Chest Tubes Necessary?

Teplitz L. *Focus on Critical Care*, 1991; 18(6): 506-511.

This useful article reviews, updates and questions clinical practice issues for nurses who care for patients with chest tubes.

Pediatric Clinical Practice

Children, Violence and Intentional Injuries.

Smec P. *Critical Care Nursing Clinics of North America*, 1991; 3(3): 471-478.

This article focuses on issues of prevention with an emphasis on the role of emergency nursing. "Emergency nurses can exert significant political and educational influence to decrease violence against children." The growing awareness of this pervasive problem makes this an essential topic for us.

Professional Development and Education

Forensic Nursing in the Emergency Department: A New Role for the 1990s.

Lynch V. *Critical Care Quarterly*, 1991; 14(3): 69-83.

This article provides a fascinating description of a new practice role for the emergency nurse as a clinical forensic nurse specialist. This position is seen as an adjunct to trauma nursing.

Death Investigations: How Can You Help?

Descheneaux K. *Nursing '92*, 1992; 2(9): 52-55.

This article gives a review and outline of nursing roles and responsibilities in death investigations. It provides an opportunity to look at your practice.

The Sagging Safety Net: Emergency Departments on the Brink of Crisis.

Friedman E. *Hospitals*, 1992; 66(4): 26-30.

This article validates the crises seen in emergency departments across America today. The author reviews issues common to all of us.

Ethics

Unsuccessful Resuscitation—Are Continued Efforts in the ED Justified?

Gray W., Capone R., & Most A. *New England Journal of Medicine*, 1991; 325(20): 1393-1398.

Are we doing enough? Are we doing too much? Is there data to support our efforts? This article provides thought provoking data addressing patient outcome, pre-hospital resuscitation and cost containment issues.

Leadership & Management

Issues Related to the Use of Nurse Extenders.

Gardner D. *JONA*, 1991; 21(10): 40-45.

This informative article provides information for nurse managers on the utilization and incorporation of nurse extenders in the emergency department. ❖

Current research in New York State

Emergency nurses are actively involved in all areas of research. If you are interested in sharing your involvement or any information pertaining to current research, please contact Mary Ann Wylie, 217 Kingsbury Ave., Elmira, NY 14901.

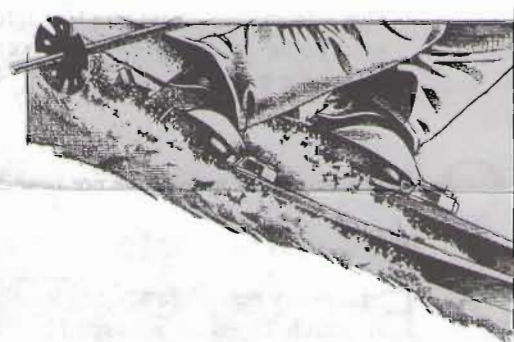
Topic	Area	Contact Person
Toradol	Albany	Dayle Griffin
Heliox		or
Pediatric Albuterol		Nancy Roback
Buffered Lidocaine		
GUSTO	Binghamton	Kathy Conboy
	Buffalo	Sally Broad
		Joanne Fadale
	Elmira	Mary Anne Wylie
	Rochester	Gwen Williams
Flumazenil	Buffalo	Sally Broad
		Joanne Fadale
Rabies	Poughkeepsie	Sue Prezzano
Prophalaxis		
Nitoglycerine		
Tubing	Rochester	Gwen Williams ❖

The knee bone's connected to the . . . ski boot

Michelle Silliker, RN CEN EMT

Downhill skiing has proven to be risky recreation. There were 125,000 injuries among 10 million skiers last season. In the 1970s, fractures of the lower leg were the most common skiing injuries. Most recently, leg fractures have decreased by 90 percent due to improved boot and binding designs. The number one injury in the 1990s is knee injuries. In fact, damage to skiers' knees has increased by 172 percent in recent years.

Primary responsibility for the increase in skier's knee has been ascribed to stiffer and higher backed ski boots. Such boots were designed to give the leg more support. The boot raises the heel and holds the skier forward. Unfortunately, this effective ski boot improvement has saved the lower leg at the expense of the knee.



The number one injury in the 1990s is knee injuries.

In fact, damage to skiers' knees has increased by 172 percent in recent years.

Twisting and bending motions make the knee vulnerable to injury.

Skiers, like football players, are at risk for knee injuries because they are involved in a sport with a high friction surface. The ski, like the cleat, can get jammed against the playing surface. This injury occurs most often when a skier stoops to a sitting position while trying to keep upright. The knee is flexed 90 degrees or more. The skier loses control of the ski and the tail of the ski applies a twisting force to the knee as the ski continues to carve an uncontrolled turn during the fall. The skier may feel a popping sensation when injured and may have sharp knee pain with or without swelling.

Some knee injuries are more serious. The incidence of anterior cruciate ligament injuries (ACL) has risen to 20,000 this year. The ACL is weakest in flexion. These injuries can lead to long



recoveries as well as potential for chronic instability of the involved knee with life-long disability.

Some experts say skiers must learn how to fall properly. The concept is to keep the legs together and moderately flexed during the fall, allowing the body to fall with the skis. This can be done by maintaining the body alignment over the skis as long as possible, keeping the upper body in the direction of the turn. Ski and fall naturally downhill at the end of a stop or turn. Many believe this skier education should be handled in ski schools. Skiers need to be taught how to fall, land and stop after a fall.

Research is now being conducted to determine whether front releasing bindings will help prevent knee injuries. Front releasing bindings allow the toe portion of the binding to release upward. This type of escape may lessen the stress on the knee. More pressure should be placed on the ski/boot manufacturers to use their technology to address knee injuries. Careful selection of equipment, regular maintenance of binding and skis, and proper body conditioning, though they may not prevent knee injuries, are certainly your best protection. ❖





Pediatric Emergency Nursing Course

ENA's Pediatric Emergency Nursing Course (PENC) is being developed for dissemination in 1993. The course will first be offered as a pilot course in late January of 1993, and then it will be promoted regionally.

The provider course is 16 hours in length and is targeted for emergency nurses who provide care for pediatric patients. Similar to the TNCC course, PENC will integrate both lecture and psychomotor skills. CECHs and verification will be awarded to nurses who successfully complete the course.

The New York State Council ENA has appointed a PENC Task Force that will implement the national guidelines for New York State. The task force will be responsible for reviewing applicant curriculum vitae to determine an applicant's eligibility to attend the regional course.

The pilot course will be a combined four-day provider/instructor course for 32 participants. The pilot course will be held January 28-31, 1993, in Dallas, Texas. If you wish to attend the pilot course, send a curriculum vitae and a letter of support from your State Council President to the Department of Pediatric Services, 230 E. Ohio Street, Suite 600, Chicago, IL 60611-3297. To be considered for the pilot program, these materials must be mailed or faxed so that they are received by *October 31, 1992*. Registrant selection will be based on ENA membership and on pediatric emergency nursing experience and clinical teaching experience.

The U.S. has been divided into five regions for dissemination of the Pediatric Emergency Nursing Provider/Instructor course. New York State is in the New England region. A combined four-day program will be presented in each region with spots reserved for 48 participants. The regional course will be offered April 15-18, 1993, in Boston. New York State was given 10 spots for participants. As with the pilot course, expenses to attend will come from the State Council or the individual. Funding will be determined by the state treasurer.

Applicants who are requesting to attend the regional PENC course must submit their curriculum vitae by November 15, 1992, to Gwen Williams, New York State Council President, 83 North Park Drive, Rochester, NY 14612. ❖

(Candidates—continued from page 1)

Mr. Green is active in the Central New York Chapter of ENA, serving as its secretary for three years and as a member of the Education and Government Affairs Committees. He has coordinated local teaching days for nurses and actively teaches EMTs.

He works in the emergency department at Crouse Irving Memorial Hospital.

Michelle Silliker, RN CEN EMT

Michelle Silliker is a graduate of Fall River School of Nursing. Ms. Silliker has been an active member of the Chatt chapter since 1987. She holds certifications in BLS, ACLS and PALS and she is a TNCC instructor. She is also a national ski patrol instructor.

Ms. Silliker is presently employed at Olean General Hospital. She is pursuing her BSN at SUNY. She presently serves as secretary for NYSCENA and is running for reelection unopposed. ❖

ENA honors Emergency Nurse of the Year

Elinor Greenfield, RN CEN was named Emergency Nurse of the Year by the Regional EMS Council at their annual awards presentation June 27, 1992.

In presenting the award, REMO acknowledged Elinor's dedicated efforts to improve pre-hospital patient care by her active involvement with the QA Committee and Nurses Committee. Elinor is an emergency nurse at Albany Memorial Hospital working as the Pre-Hospital QA Coordinator and Clinical Instructor for EMTs and paramedics. Elinor has been a member of the Adirondack Chapter for 10 years and is a past officer. ❖

Nursing plays a vital role in research

Dayle Griffin, RN CEN

Nursing plays a vital role in research at Albany Medical Center's emergency department. Presently, we have four studies in which nursing participates. Our involvement is key to the success of several projects. In one study, either a nurse or a physician collects the specimen. Nurses are often key in ascertaining pertinent complaints of the patient and determining their eligibility. We frequently obtain consent of the patient when entering a study. Emergency nursing is essential to the primary assessment and reassessment of patients throughout their stay in the emergency department, and emergency nurses are always involved in any discharge teaching.

The role of the emergency nurse is vital to research projects conducted in the emergency department. Participation in research is another exciting aspect of the practice of emergency nursing. ❖

In the news . . .

Attention ENA members in Genesee, Livingston and Wyoming Counties

A group of ENA members in the Western New York State Area are proposing a new chapter. The planned 1992 meetings for this proposed chapter are October 13 and December 15. Meetings are tentatively set for the second Tuesday of "even" months. Are you an active ENA member residing in the counties of Genesee, Livingston or Wyoming and interested in assisting the proposed Letchworth Chapter work towards chapter incorporation? If so, please contact:

Mary Michels
Wyoming County Community Hospital
Emergency Department
400 N. Main Street
Warsaw, NY 14569

Hot issues of the '90s

The Adirondack Chapter is sponsoring a teaching day November 2, 1992. Topics include: Pediatric Neurologic Emergencies, License at Risk, Sudden Bereavement and IV Sedation. The teaching day will be held at the Butcher Block Steak and Seafood Restaurant, 1632A Central Ave., Albany, NY. Registration fee is \$40 for ENA members and \$50 for non-ENA members. For further information about this exciting event, contact May Goyette at (518) 899-9847.

Congratulations Lower Hudson Valley Chapter

The newest New York State ENA Chapter, the Lower Hudson Valley Chapter #387, was approved by the National ENA office effective February 21, 1992. The new chapter will encompass the counties of Rockland, Westchester and parts of Putnum. Officers of the new chapter are:

President — Mark Pohar, St. John's Riverside
President-elect — Karen Spadaccia-Keeler,
Northern Westchester Hospital
Treasurer — Daragh Murphy, Mt. Vernon Hospital
Secretary — Denise Speed, St. Agnes Hospital

State Council Meeting

The next meeting of the New York State Council of the Emergency Nurses Association (NYSCENA) will take place at the Century Inn in Albany, New York, December 4-5, 1992. Please make plans to attend. For more information, contact your local chapter delegate, or contact Gwen Williams, New York State Council President, 83 North Park Drive, Rochester, NY 14612. ❖



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