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# **President's Address**



Dear Colleagues,

Winter is rapidly approaching and it is time to send out the last quarterly Monitor for this year. Our Executive Board all attended the NAPANc conference held in Dartmouth, Nova Scotia and it was absolutely phenomenal in so many ways! The venue was awesome, the food was great and above all, the speakers were very interesting and knowledgeable. The next national conference will be held in Regina, Saskatchewan in 2014. Speaking of conferences, OPANA conference committee has confirmed that the 2013 Inspirations conference will be held at the Nottawasaga Inn Resort in Alliston.

As you now know, we have changed our membership year to start in November and we have had an overwhelming number of PeriAnesthesia nurses who have renewed their OPANA membership, as well as nurses who are new members to our association. To coincide with this change we decided to hold a free workshop and a delicious lunch provided by the Pickle Barrel. The speakers were very interesting and we learned about decreasing anxiety in children undergoing dental procedures and Sunnybrook Health Sciences Centre's new PeriAnesthesia Care Pathway. The abstract is included in this newsletter.

More exciting news is that the first cohort of PeriAnesthesia nurses interested in writing the CNA exams will be able to register in 2013! Currently there are cross-Canada PeriAnesthesia nurses on an exam writing committee diligently working to put together the examination.

As always, OPANA is looking for volunteers, so please let us know if you would like to be involved in your professional organization!

Lastly, on behalf of OPANA I would like to wish our members and their loved ones a wonderful holiday season. May the New Year bring you all much joy, health and safety! Happy 2013!





Sincerely,

Deborah

Deborah Bottrell, President OPANA

#### **OPANA'S MISSION STATEMENT**

- To promote standards of perianesthesia nursing practice which will improve care and promote safety for practitioners and patients
- To establish and promote educational programs which will contribute to the above.
- To provide a forum for the presentation and discussion of all matters relating to the practice of perianesthesia nursing.
- To establish cooperation and liaison with all groups, associations, institutions, or bodies in matters
  affecting the objective of the association; and
- To further the public's awareness of the role of the perianesthesia practitioner as a vital member of the Health Care Community.

## FEATURED ABSTRACT

## The Peri Anesthesia Care Pathway

Lynn Haslam, RN(EC) MN, Carol Deriet, RN, BScN, Ramona Hackett RN, BA



Obstructive sleep apnea (OSA) is a syndrome characterized by periodic, partial, or complete obstruction of the upper airway during sleep (A Report by the American Society of Anesthesiologists Task Force on Perioperative Management of Patients with Obstructive Sleep Apnea, 2006). As more acute patients present for surgery, the nursing role is imperative in: 1) identifying patients at risk for unintended advancing sedation and respiratory depression; 2) implementing plans of care to assess and monitor patients; and 3) intervening to prevent the worsening of adverse events (Jarzyna *et al*, 2011). The combination of OSA with anesthesia and post operative opioid therapy may place patients at increased risk of adverse events. A lack of evidence based post operative monitoring guidelines makes it difficult to standardize post operative care. As patients often present with multiple complex co-morbidities, standardization of post operative monitoring becomes an even larger challenge.

Secondary to post-operative adverse events, Sunnybrook Health Sciences Centre recently developed a Post Operative Monitoring Committee to review current post operative monitoring guidelines, as well as to examine current nursing documentation and use of communication tools to ensure that the most recent guidelines and validated assessment tools were being utilized. The committee also set aims to articulate policies and procedures surrounding higher acuity patients, such as those with obstructive sleep apnea. Documentation was analyzed by a number of PeriAnesthesia nurses from the Late Career Nurse initiative, as well as Best Practice Champions sponsored by the RNAO. This group of nurses worked to combine current documentation into a PeriAnesthesia Care Pathway.

The resulting PeriAnesthesia care pathway commences with the patient in the PreAdmission Clinic where an initial nursing assessment is completed including an OSA tool which helps to provide post operative monitoring guidelines individualized to the patient's condition. Transfer of Accountability is also highlighted in this pathway providing clear information along the continuum of PeriAnesthesia care. The pathway is used by the nurses in the Same Day Admission department, Phase 1 PACU, and Phase 2 in the post operative ambulatory unit, the Surgical Short Stay Unit or inpatient units. It incorporates a number of validated recovery tools (White's Criteria, PADSS Criteria) as well as providing a recommendations referencing when monitoring frequency should be elevated and/or other members of the health care team should be notified. Focus groups of unit nurses have provided valuable feedback for the flow and intuitiveness of the pathway. The care pathway is being implemented across the Sunnybrook campus in early 2013.

#### References:

A Report by the American Society of Anesthesiologists Task Force on Perioperative Management of Patients with Obstructive Sleep Apnea. 2006. American Society of Anesthesiologists, Inc. Practice Guidelines for the Perioperative Management of Patients with Obstructive Sleep Apnea. *Anesthesiology* 104:1081–93

Jarzyna, D., Jungquist, C., Pasero, C., Willens, J., Nisbet, A., Oakes, L., Dempsey, S., Santangelo, D., Polomano, R. 2011. American Society for Pain Management Nursing Guidelines on Monitoring for Opioid-Induced Sedation and Respiratory Depression. *Pain Management Nursing*, Vol 12, No 3 (September): pp 118-145



## Spotlight: The OPANA Workshop







On November 24, 2012
OPANA held a workshop at the Hospital for Sick Kids.
Thanks to all who helped to make the OPANA
Workshop a success!



# **ASK OPANA**

Question: I am interested in becoming a Regional Director for a vacant area. What areas do the regions actually cover, and what are the responsibilities of the director?



Answer: As you can see from this map of Ontario, the regions are quite large and it is difficult to capture all cities and towns. OPANA has a goal to attract members from all over Ontario and therefore we need Regional Directors to represent their region and spread the good work of OPANA. Quarterly updates to the OPANA board include what is going on at your hospital and those in your region. This is a great way of networking and keeping in touch with the world of PeriAnesthesia nursing. Travel expenses for board meetings and conferences are available, as well as support for educational opportunities. Even if you are not able to become a Regional Board of Director, if you have any information or updates from your hospital or PeriAnesthesia Department, please share your news by emailing <a href="mailto:info@opana.org">info@opana.org</a> and it can be included in the Monitor! The following are general outlines of the various areas of Ontario.



#### **Northwestern Ontario**

Major communities in the region include Thunder Bay, Kenora, Dryden, fort Frances, Sioux Lookout, Greenstone, Red lake, Marathon and Atikokan. There are also several dozen First Nations in Northwestern Ontario.

#### **Northeastern Ontario**

The six major cities are Sudbury, Sault Ste. Marie, North Bay, Timmins, Elliot Lake and Temiskaming Shores



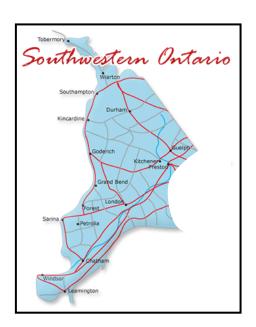


#### **Southwestern Ontario**

Significant towns and cities in the Western Ontario region are Guelph, Kitchener, Cambridge, Chatham, Goderich, Ingersoll, Kitchener, Owen Sound, Sarnia, St. Thomas, Stratford, Tillsonburg, Waterloo, and Windsor.

#### **Central Ontario**

Significant towns and cities include Barrie, Orillia, Sutton, Bracebridge, Gravenhurst, Huntsville, Fenelon Falls, Peterborough, Belleville, and many smaller towns.





#### **The Greater Toronto Area**

Larger cities include Toronto, Pickering, Ajax, Oshawa, Markham, Stouffville, Brampton, and Mississauga,



#### **Ottawa and Eastern Canada**

Larger cities include Ottawa, Cornwall, Petawawa, Pembroke, Kingston and Belleville

## Hamilton-Niagara Region



### Hamilton-Niagara Region

Larger cities include Milton, Oakville, Burlington, Brantford, Hamilton, St. Catharines, Niagara Falls, and Welland



# **Ontario Regional Reports**



#### Regional Report for the Greater Toronto Area: Carol Deriet & Ramona Hackett

We were delighted to present the Sunnybrook Health Sciences Centre's PeriAnesthesia Care Pathway at the OPANA workshop last month. We plan to roll out this pathway corporately in February 2013 and are fortunate to have a Late Career Nurse who will be able to assist with the rollout. For more information on the Care Pathway, please refer to this month's abstract.

Patient flow issues continue to increase in our PACU, with more patients requiring an overnight stay in the PACU due to bed shortages and high patient census. One way we have tried to deal with this is by increasing our PACU human resources through cross training nurses from other PeriAnesthesia Units. We would be really interested to know what other GTA hospitals are doing regarding this issue, as we recognize that bed flow issues are not unique to Sunnybrook.

We are continuing with our OPANA recruitment strategies and are keen to build OPANA membership with other hospitals throughout the GTA. For all current members, please drop us a line to let us know what is new in PeriAnesthesia departments at your hospital: we would be happy to include the update in the Monitor!

However you celebrate this time of year, may it be filled with the warmth and happiness of time spent with family, friends and neighbours.

Ramona & Carol

#### Regional Report for Southern Ontario- Hamilton/Niagara Region: Marianne Kampf & Nancy Poole

Warmest greetings to the members of our regions! As I write this update, it is just 12 days until Christmas Eve. We have been busy at OPANA! Nancy and I attended the PeriAnesthesia workshop on November 24<sup>th</sup> naturally hosted by OPANA and heard two excellent presentations. I also attended the NAPANc conference in October hosted in Dartmouth, Nova Scotia. Love that city but better yet was the dynamic topics and calibre of speakers. I encourage all PeriAnesthesia nurses to attend a national conference once in your career.

OPANA BOD is reviewing terms for financial support (amount undetermined) whereby a process to support members who are interested in attending a PeriAnesthesia workshop or aiding in the cost of PeriAnesthesia certification exam writing would be permitted. More details to follow from your president.

CNA certification is the most exciting news as we close the 2012 year. The building blocks are being laid down. Competency writing has just been completed in Ottawa by a group of nurses from across the country involved in PeriAnesthesia nursing. The exam item writing of questions will commence in March 2013. An invitation was extended to me to be a participant in that process and I am very excited! The first cohort for exam registration will commence in the Fall of 2013 with the actual exam writing occurring in April 2014.

We are also planning our 2013 Inspirations conference to be held Nov. 2<sup>nd</sup> and 3rd at the Nottawasaga Inn in Alliston. As your regional directors, Nancy and I we look forward to meeting many of you and we pose the question to you .....What can OPANA do for you?

We look forward to hearing from you soon!

Respectfully submitted,

Marianne Kampf & Nancy Poole



#### Regional Report for Dentistry & Free Standing Clinics: Cher Jackson & Susie Oxenham

#### SEASONS GREETINGS TO ALL AND ALSO TO YOUR FAMILIES!

There was a informative, successful OPANA "workshop" on November the 24th, which included a Paediatric Dental Specialist, speaking on the topic, "Taking the Anxiety out of Treating Paediatric and Special Needs Patients." Thank you to all that attended from many areas of PeriAnesthesia nursing and from the Dentistry Clinics.

OPANA welcomes new members from the Dentistry and Free-Standing Clinics.

The University of Toronto; Department of Anaesthesia, is holding their 5th annual Out-of-Hospital Premises QA Rounds Tues, 29 January 2013, Marriott Eaton Centre, Toronto, Ontario. Susie and I will be in attendance and will report back to you.

As members on the Standard Committee, we continue to update the "standards" for Dentistry and Free-Standing Clinics and look forward to completion.

There is some terribly, tragic news regarding a four year old, who has suffered permanent brain damage after receiving a general anaesthetic at a dental office in Manitoba, reported by CTV News... "There was nothing to indicate the correct procedures were not followed. The Canadian Dental Association says dental surgery for cavities under general anaesthesia is the most common day procedure at most paediatric hospitals in Canada. The Association says more 2,000 preschool-ages children undergo dental surgery each year in Manitoba hospitals and many more in private clinics and that the risk is guite low for healthy children."

#### Regional Report for Paediatrics: Nancy Rudyk

I really enjoyed meeting everyone at the OPANA meeting in November which was held at Sickkids. This meeting was a great opportunity to network and share practice ideas with other perianesthesia nurses. The presentation on the treatment of pediatric dental patients in the office highlighted the management of pediatric anxiety. I would like to start a pediatric interest group within OPANA, to discuss practice and issues that affect children and their families prior to general anesthesia, such as preop anxiety and OSA symptoms. At Sickkids we have developed a clinical algorithm for the assessment and management of children with OSA. How do you manage your pediatric patients with OSA symptoms?

If you would like to be a part of this group please forward your e mail address to me at: <a href="mailto:nancy.rudyk@sickkids.ca">nancy.rudyk@sickkids.ca</a> I look forward to hearing from you.

Nancy

Regional Report for Eastern Ontario - Ottawa/Kingston Region: Keitha Kirkham- no report

Regional Report for North Western Ontario- Thunderbay/ Sault Ste. Marie Region
This position is currently vacant and OPANA is searching for an interested nurse(s) to represent Northwest Ontario.

#### Regional Report for North Eastern Ontario- Sudbury/North Bay Region:

This position is currently vacant and OPANA is searching for an interested nurse(s) to represent Northeast Ontario.

#### Regional Report for Central Ontario - Barrie/Orillia/Newmarket Region

This position is currently vacant and OPANA is searching for an interested nurse(s) to represent Central Ontario.



# Why Join OPANA?

#### ...because being a member promotes

- ✓ Opportunity to network with peers
- ✓ Pride in having a professional organization
- ✓ Affiliation with NAPAN©, our national association
- ✓ Nursing excellence
- ✓ Advocacy with other qualified perianesthesia nurses

For more information on OPANA membership

Visit www.opana.org

#### Membership Benefits include:

- ✓ Quarterly newsletters
- ✓ Reduced registration fee at OPANA-sponsored educational events including our annual conference and Annual General Meeting (AGM)
- Opportunities for members to apply for financial support for continuing educational activities (conference bursaries)
- ✓ Discounts on OPANA Standards of Practice
- ✓ Membership in the National Association of PeriAnesthesia Nurses Canada (NAPANc)
- ✓ Networking opportunities

#### Ways to register to become an OPANA member:

- ✓ Use the form with this newsletter: fax or mail in. Cost \$50
- ✓ Use our website: <u>www.opana.org</u> and join online
- ✓ Member of RNAO? Add OPANA to your membership.
- ✓ Even better, if you are already a member of RNAO and paying your fees with an employer payee deduction, consider adding OPANA to your membership. It would calculate out to less than \$13.00/pay for RNAO & OPANA. No hassle, renewal or fuss!

IMPORTANT REMINDER!
Membership renewal year has been changed to coincide with the RNAO membership year.
Renewal this year is from November 1, 2012 until October 31, 2013



# **2013 MEMBERSHIP FORM**VALID UNTIL OCTOBER 31, 2013 **HST#861942753**

Membership fees provide our members with: newsletters, educational meetings, reduced conference fees, networking & support the work required to make us a recognized specialty group, both at the provincial level and national level. HST is included in Membership Fees.

□ New Member □ Renewing Member  Please print. No abbreviations or initials.		
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□ Active \$50.00 Registered Nurse who is currently registered with the College of Nurses and who is working in an employment where PeriAnesthesia nursing is practiced or has a vested interest.  Membership with NAPANc (National Association of PeriAnesthesia Nurses of Canada) included, Active membership status includes entitlement to vote in OPANA issues plus all membership benefits. ***  CNO #		
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#### OPANA STANDARDS OF PRACTICE, 6TH EDITION, 2009 CONTENTS:

• OPANA Mission Statement, Vision and Goals, Scope of Practice for PeriAnesthesia Nursing

#### **ADMINISTRATIVE STANDARDS**

- Environment and Equipment
- Staffing
- Orientation and Education
- Documentation
- Continuous Quality Improvement

#### **CLINICAL PRACTICE STANDARDS**

- Care of Patients Receiving General Anesthetics, Regional Anesthetics, Analgesics, Muscle Relaxants and Sedative Agents
- Airway Management
- Patient Comfort Related to Pain or Postoperative Nausea and Vomiting
- Management of Thermoregulation
- Assessment, Monitoring and Interventions of the PeriAnesthesia Patient in All Areas of PeriAnesthesia Patient Care
- Transfer of Care and Accountability in all Phases of the PeriAnesthesia Environment

#### **RESOURCES**

- PreOperative Screening in the PreOperative Phase or PreAdmission Unit
- Telepractice in the PreOperative Phase or PreAdmission Unit
- Recommended Staffing Guidelines and Patient Classification
- Care and Screening of the Patient with Obstructive Sleep Apnea
- Care of the Patient with Malignant Hyperthermia
- Management of Patients with Latex Allergies
- Guidelines for Visitors in All Phases of the PeriAnesthesia Environment
- Patient Safety Measures in All Phases of the PeriAnesthesia Environment
- Emergence Delirium
- Pain Management in PeriAnesthesia Nursing
- Infection Prevention and Control
- Discharge Criteria from All Phases of PostAnesthesia Recovery
- Managing Patient Process Flow through the PACU (Avoiding Delays in the OR)

#### **POSITION STATEMENTS**

- Minimum Staffing in All PostAnesthetic Phases of Recovery
- Role of the Nurse Practitioner in Anesthesia in All Phases of PeriAnesthesia Environments
- Roles of the RN and RPN in the PeriAnesthesia Setting
- Phase I Recovery as a Critical Care Unit
- Unregulated (Health) Care Providers in PeriAnesthesia Settings
- Do Not Resuscitate in the PeriAnesthesia Environment
- Fast Tracking of the PostAnesthetic Patient to Bypass Phase I Recovery
- Role of the Anesthesia Assistant in the PeriAnesthesia Environment

The OPANA Standards Committee is continuing to work on the 7<sup>th</sup> Edition! If you are interested in learning about the process of researching and writing standards, please contact:

info@opana.org



## **Order Form**

## **Standards of Practice, Sixth Edition, 2009**

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