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### Editor's Note:

Consult the web site for up-to-date information at [www.illinoisena.org](http://www.illinoisena.org). Canceled meeting notification is located there.

## 40,000 Members in ENA's 40<sup>th</sup> Year

By Rebecca Steinmann, RN, APN, CEN, CPEN, CCRN, CCNS

"Passion and power...magnificent color, excellent hardiness and outstanding brilliance... radiates warmth and a sense of vitality" - sounds to me like the description of an emergency nurse! Actually these phrases are associated with rubies, the traditional marker of 40 year anniversaries, and ENA is commemorating its ruby anniversary this year – 40 years and growing strong!

ENA has the goal of achieving 40,000 members during this 40th anniversary year. Each state is challenged with recruiting new members to reach this goal – Illinois's target is set at recruiting at least 150 new members. The best recruitment tool we have is our current members – that means YOU! Tell your colleagues about the benefits of ENA membership (networking opportunities, free subscription to JEN, discounted rates for educational programs and reduced fees for certification exams, to name a few).

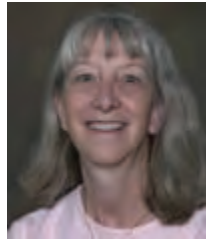
The IL ENA State Council is excited to be sponsoring a contest to support this new membership

goal: Recruit a new member and win a free registration to the 2010 Scientific Assembly, September 23-25, in San Antonio, Texas.

So how does this contest work? For every new member you recruit between March 1, 2010 and July 1, 2010 your name will be entered in a drawing (one entry for each new member recruited – recruit 3 new members, your name is entered in the drawing 3 times). Application forms can be downloaded from the ENA Web site ([www.ena.org](http://www.ena.org)) or the application can be done electronically.

You must be identified as the IL ENA member who sponsored this new member on their ENA application form to be eligible to be entered in the drawing. The winning entry will be picked on July 5th and the winner will be notified at that time.

Join in the celebration of ENA's 40th year!



Illinois Emergency Nurses Association

36<sup>TH</sup> ANNUAL

# SPRING SYMPOSIUM

2010

EARLY BIRD DISCOUNT  
 EXTENDED THROUGH APRIL 12<sup>TH</sup>

By Cheryl Vinikoor, RN, BSN, CEN

The 36th Annual Spring Symposium 2010 is scheduled for Friday, May 7th. Please note the new location, the DoubleTree Hotel & Conference Center Chicago-North Shore in Skokie, just off the Eden's Expressway. A range of topics to choose from are pediatric emergencies, trauma and evidence based practice in emergency care. We are expecting 50 exhibitors of products important to emergency nurses.

Our Networking Dinner and Silent Auction are the evening of Thursday May 6th, sponsored by the Illinois ENA Board of Directors. All monies collected from the silent auction are donated to the Emergency Nurses Association Foundation for emergency nurse scholarships.



NorthShore Center for Performing Arts, Skokie, Illinois is located next to the DoubleTree Hotel & Conference Center Chicago-North Shore.

We welcome all emergency nurses to join us Thursday evening. Consider staying the night in the hotel before the Symposium. Room rates are reasonable, and newly redecorated with wireless internet throughout.

Illinois ENA has gone "green" and will not be mailing brochures to your home. The Web site [www.illinoisena.org](http://www.illinoisena.org) has the link to the online registration. Please share this information with your colleagues who may not be on our email list.

Saturday May 8th is the quarterly Illinois State Council ENA meeting at Skokie Hospital, within walking distance from the DoubleTree. I hope to see you at all or part of these activities.

## Featured Hospitals

### Kewanee Hospital

By Sherril Paxton, RN

Kewanee Hospital has served Kewanee and the surrounding communities since 1919. Our small, rural hospital has a core mission of “Improving the Health Care of Those We Serve.” In 2008, Kewanee Hospital, a Critical Access Hospital, constructed a full replacement healthcare facility. Located in west central Illinois, Kewanee Hospital is fifty miles, in both directions, from level I trauma centers, making us the receiving facility for many surrounding communities.

Kewanee Hospital offers a 24 hour physician-staffed emergency department caring for approximately 9,600 patients a year. Observation patients (23 hours or less) are also seen in the Emergency Department. The Emergency Department staff includes 35 full-time, part-time, and PRN personnel. Many of our physicians are board certified in emergency medicine. The staff maintains certification in ACLS, TNCC, PALS or ENPC, and BLS. Several nurses are also SANE certified.

Kewanee Hospital partnered with surrounding level I trauma centers to provide care for MI or CVA patients. We provide critical stabilizing treatments such as thrombolytics and/or anticoagulants as needed. Emergency medical helicopter transportation keeps Kewanee Hospital within minutes of major trauma facilities.



### Mount Sinai Hospital

By Susan Bagdade, RN and Corinne Sadecki, RN

Mount Sinai Emergency Department (ED) offers to improve the Health & Vitality of an inner city community in Chicago’s Lawndale neighborhood by offering a skilled staff cohesively working together to strive for excellence. Celebrating the hospital’s 90th Year, the Emergency Department contributes to Mount Sinai’s vision to become the “National Model for the Delivery of Urban Health Care”. As one of the busiest level I trauma centers in the Chicago-land area, Mount Sinai ED maintains its excellence by superseding its goals and providing superior healthcare with experience and professionalism.

Mount Sinai Hospital is a level I adult and pediatric trauma center with a 35 bed ED. Approximately 60,000 patients are cared for annually. In 2009 alone, over 2,000 adult and 250 pediatric trauma patients came through the doors of the ED. Having limited resources, the ED has the same issues most hospitals encounter these days such as bed availability and boarding patients in the ED. However, we consistently maintain a left without treatment rate of less than two percent.

This is made possible by an amazing staff consisting of RNs, MDs, ED Residents, PAs, Trauma Techs, Medical Assistants, and recently added Nurse Practitioners to the team. Mount Sinai ED is often referred to as the “Heartbeat of the West Side”. The nurses who walk the floors of the ED strive for excellence and achieve this by making the most of the continuing education opportunities available at both Mount Sinai and in the Greater Chicago Area. The majority of our ED nurses have specialty certifications, including but not limited to TNS, CEN, TNCC, ENPC, ECRN and we also have a growing population of SANE nurses. It is said that once nurses had “done their time” at Mount Sinai ED, they can work virtually anywhere else due to the knowledge and experience they obtained. Furthermore, the statement rings true that states,

“Once a Sinai Nurse, always a Sinai Nurse”.

The ED always fosters a nurturing relationship with those eager to learn. Nursing students are mentored by the ED staff to enable them to hone their craft in a direct and “hands-on” method providing them with daily experiences. More recently, Paramedic and EMT-B students from one of the City of Chicago colleges began to gain experience by spending time in the ED learning valuable lessons. The Mount Sinai ED answered their “call to duty” by establishing a relationship with Illinois National Guard Medics allowing them to do a trauma rotation to gain experience before being deployed to serve our country. The ED staff is there with open arms, sharing their bevy of knowledge with all willing to learn. Mount Sinai ED established themselves with their hugely successful organ donor program through Gift of Hope. In 2008, Mount Sinai Hospital saw a 65 percent conversion rate of all their organ donations. The ED largely contributed to the hospital’s winning of the Organ and Tissue Donor Networks Gift of Hope Medal of Honor marking their success rate, as well as, their ability to carry on the gift of life through organ donation.

It takes a very special person to work at Mount Sinai’s Emergency Department. For a place that is anything but traditional, ED nurses maintain a positive work environment by helping each other and always treating everyone with respect. To work in a field that is thankless to begin with, self-satisfaction becomes the ultimate reward. However, there is nothing more rewarding than helping someone, with out stretched hands in his or her time of need. Mount Sinai Emergency Department believes their actions, offering a healing and caring presence for patients, their families, and the community is, bar none, the ultimate goal.



# 3 • COUNTERSHOCK

## Bylaw Revision

By Steve Stapleton, RN, PhD(c), MS, MSN, CEN

The officers and directors of the Illinois ENA state council set a goal to revise the bylaws in effect since 2002. As the president-elect, I volunteered to accomplish this task. The first thing I did was to ask myself “why are bylaws so important?”

Bylaws are important because they are the written documents outlining the conduct of an organization. More specifically, bylaws are “rules and regulations adopted by an organization, corporation, or similar entity for its internal administration and management.”(1) Bylaws set guidelines for meetings, elections of a board of directors and officers, filling vacancies, notices, and duties of officers, committees, and other routine organizational behaviors. Additionally, our bylaws outline our delegate selection process along with parliamentary and amendment procedures.

To begin, copies of the California, Pennsylvania, and Texas State Councils’ and national ENA bylaws were obtained and compared with our current bylaws. A first draft was written and circulated to the officers and directors. Comments reviewed and addressed. Then a second draft was circulated to several committee chairpersons for their comments before a final draft was prepared to present to the state members. A notice was distributed four weeks prior to the November State Council meeting via the Web site asking all members to review the document prior to voting.

At the November 7th State Council meeting, a motion to accept the revised bylaws was made. A lively discussion among those in attendance occurred. Two amendments were made requiring a verbiage change and the removal of “international members” throughout the document. A vote ensued and the bylaws as amended passed unanimously.

In December 2009, the updated bylaws were sent to ENA national headquarters for review. This process often takes six to nine months. If revisions are required after national’s review, an amendment will be drafted by the executive council and presented to the membership for a vote.

The current bylaws, as adopted at the November 7th State Council meeting are posted on the Web site. If you have not done so already, take a few minutes to read this document. If you have any questions or concerns, please feel free to contact any officer via e-mail or at a State Council meeting. We will be happy to discuss your questions and concerns.

(1) Bylaws. (2010). In Merriam-Webster Online Dictionary. Retrieved March 7, 2010, from <http://www.merriam-webster.com/dictionary/bylaws>.



## Upcoming Events

### State Council Meetings

Contact Rebecca Steinmann at [rsteinmann@ameritech.net](mailto:rsteinmann@ameritech.net).

**May 8, 2010 - NorthShore University HealthSystem Skokie Hospital, 9600 Gross Point Road, Skokie, IL 60076.**

**September 11, 2010 - Loyola University Medical Center, 2160 S. First Avenue, Maywood, IL 60153.**

**November, 2010 - Location and date to be determined.**

### Educational Opportunities

**May 6-7, 2010 - Illinois ENA 36th Annual Spring Symposium 2010, DoubleTree Hotel & Conference Center Chicago-North Shore, 6599 Skokie Blvd., Skokie, IL 60076. Includes Advanced Clinical Program (May 6; formerly Advanced Practice Program) that is open to both APNs and RNs, Managing Your Disaster Chaos pre-session (May 6), ENPC and TNCC Instructor Courses for New Instructors (May 5-6), General Sessions (May 7) and expansive Exhibit Hall (May 7). Contact Cheryl Vinikoor at [cvinikoor@gmail.com](mailto:cvinikoor@gmail.com) or visit [www.illinoisena.org](http://www.illinoisena.org).**

**September 22-23, 2010 - ENA General Assembly, San Antonio Convention Center, San Antonio, TX.**

**September 23-25, 2010 - ENA Scientific Assembly, San Antonio Convention Center, San Antonio, TX.**

### Other Events

**May 6, 2010- Networking Dinner, DoubleTree Hotel & Conference Center Chicago-North Shore, Skokie, IL. Contact Cheryl Vinikoor at [cvinikoor@gmail.com](mailto:cvinikoor@gmail.com) or visit [www.illinoisena.org](http://www.illinoisena.org).**

## Upcoming ENPC Courses

Oak Lawn	04/15/10	Jan Dorey	<a href="mailto:janice.dorey@advocatehealth.com">janice.dorey@advocatehealth.com</a>	708/684-5979
West Peoria	05/11/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
West Peoria(Reverification Course)	06/08/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights	06/23/10	Sue Golbeck	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a>	847/618-7403
West Peoria	08/03/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights (Reverif. Course)	08/10/10	Vicky A Goeddeke	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a> (Sue Golbeck)	847/618-7403
West Peoria	10/12/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights	10/12/10	Vicky A Goeddeke	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a> (Sue Golbeck)	847/618-7403
Oak Lawn	10/21/10	Jan Dorey	<a href="mailto:janice.dorey@advocatehealth.com">janice.dorey@advocatehealth.com</a>	708/684-5979

## Upcoming TNCC Courses

West Peoria (Reverif. Course)	04/06/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights (Reverif. Course)	04/06/10	Laura S Aagesen	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a> (Sue Golbeck)	847/618-7403
West Peoria	06/01/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights	09/07/10	Laura S Aagesen	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a> (Sue Golbeck)	847/618-7403
West Peoria	09/14/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492
Arlington Heights (Reverif. Course)	11/02/10	Laura S Aagesen	<a href="mailto:sglobeck@nch.org">sglobeck@nch.org</a> (Sue Golbeck)	847/618-7403
Oak Lawn	11/18/10	Jan Dorey	<a href="mailto:janice.dorey@advocatehealth.com">janice.dorey@advocatehealth.com</a>	708/684-5979
West Peoria	12/07/10	Barbara A Ekstrum	<a href="mailto:barbara.a.ekstrum@osfhealthcare.org">barbara.a.ekstrum@osfhealthcare.org</a>	309/624-9492



## ENA Scholarship to Scientific Assembly

By Julie Bracken, RN, MS, CEN

Again Illinois State Council ENA wants to support the membership by offering a scholarship to attend National Scientific Assembly in San Antonio, Texas, **September 23 – 25, 2010**.

To apply for the scholarship you must be an Illinois State Council ENA member and submit written response to the following criteria:

- Have you attended an Annual Meeting in the past?
- Describe your contributions/activities in your community or institution for each of the following areas: clinical practice, education, research/quality improvement and leadership/management.
- Describe your involvement in ENA.
- Explain how your attendance at this meeting will enhance your professional growth.
- Explain your plans for sharing the information acquired from the Assembly (who, where, how).

Points are awarded for the above criteria. All applications must be post-marked by **July 1, 2010** and are evaluated by an objective team prior to the Annual Meeting (see [illinoisena.org](http://illinoisena.org) for the policy).

Mail applications to: Sharon Iben, 640 Johnson St., Carlinville, IL 62626. If questions, call 217-854-7664 or email [iben.sharon@mhsil.com](mailto:iben.sharon@mhsil.com).



## Delegates

### ENA General Assembly

By Julie D'Agostino, RN, MS, APRN-CS, CEN

The National meeting for ENA will be held in San Antonio, Texas. The General Assembly is September 22-23, 2010 and the Scientific Assembly is September 23-25, 2010. Delegates from Illinois are needed to help frame the future of the national organization. A pre-determined reimbursement to help offset the additional expense for delegates is available.

Delegates are selected by a point system. Please complete and submit the application found at [www.illinoisena.org](http://www.illinoisena.org) by **July 1, 2010** to: Julie D'Agostino, 1540 North Hickory, Arlington Heights, IL 60004 or [jdagostino@ameritech.net](mailto:jdagostino@ameritech.net).

## General Assembly

### Report of a First-Time Delegate in 2009

By Joy Davis, RN

Would you be interested in being a Delegate to the General Assembly? The idea began last spring, at our Illinois ENA Spring Symposium, during the luncheon. Nurses from different northern Illinois hospitals were chatting about the upcoming national ENA General Assembly (GA) and Annual Conference taking place in Baltimore in October 2009. Wanting to become more involved in our professional organization and not knowing what "General Assembly" was or what a delegate did, here's what I've learned.

The General Assembly is an annual meeting of our professional organization, Emergency Nurse Association. The GA takes place before the conference and lasts one and a half days. This is a meeting of the ENA Board and the membership. A number of representatives are sent by each state. The purpose of the GA is to consider and vote on policy statements to guide the future direction of our professional organization. There are proposals, supporting arguments, discussion, and voting. If accepted, the action moves forward. Without the GA our governance would not be democratic.

As a delegate, we are expected to read the agenda items and resolutions, attend all the sessions, ask questions if needed, and finally vote on whether or not ENA should move forward on the issue. There is a stipend for travel expenses.

Why did I want to be a delegate? I was interested in how things get

done in our professional organization and wanted to participate. It was fascinating to see a room almost as big as a football field filled with emergency nurses, all focusing on the same thing. The dynamics of the process was puzzling for this newbie, I admit.

One resolution in particular got me fired up: "Pediatric Procedural Pain & Anxiety Management in ED Settings." What is so great is ENA can serve as a catalyst for improving our nursing practice. Basing our practice on evidence, when we start an IV on a child, we can use techniques that inflict the least discomfort and anxiety for the child. ENA resolved to investigate the research, issue a nursing practice resource and position statement, and provide tools and education for ED nurses in managing pediatric procedural pain and anxiety.

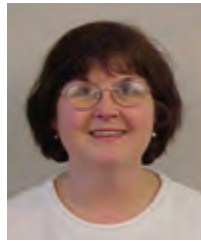
How do you get to be a delegate? Go to the [illinoisena.org](http://illinoisena.org) Web site. Click on "IL ENA Forms/Policies", and then click on "Delegate Selection Policy". Print it and complete the form. You get points for a variety of activities, such as being an ENA member, length of time you've been a member, attendance at the Spring Symposium, participation on the Illinois State Council, participation on a committee, such as Pediatrics or Education, certification (e.g., CEN), etc. I got a lot out of being a delegate in Baltimore and hope to be a delegate again in the future. I encourage you to check it out! You will learn a lot! And it's fun to participate in this democratic process to help keep our professional organization relevant to our practice.



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## Call for Silent Auction Donations

By Kathleen Richmond, RN, MS



The Emergency Nurses Association Foundation Silent Auction will be held again this year in conjunction with the Spring Symposium on May 6 & 7, 2010.

The funds raised directly benefit emergency nurses, emergency patients, and the public through the support of: emergency nursing research, the promotion of public education regarding prevention of illness and injury, and the awarding of undergraduate, advanced practice and doctoral scholarships.

The auction will take place during the Symposium's Networking Dinner, during the evening of May 6th, and is guaranteed to be a lot of fun! ENAF needs your support! Please contact me directly by e-mail (RichmondK8@aol.com) or phone

(708-687-6044) if you know of an individual, a company, or an organization willing to donate a special item, such as sports memorabilia, theater tickets, or gift certificates.

Your help is essential in making the auction fundraiser a success. Thank you!

## Evidence Based Practice (Research) Committee

### 2010 Evidence-Based Practice Contest Winners

By Vicki Bacidore, RN, MSN, ACNP-BC, CEN



#### 2010 Evidence-Based Practice Contest Winners:

- Family Presence During Resuscitation and Invasive Procedures: An Assessment of an Urban Emergency Department's Readiness for Written Protocols, by Sarah Cain, RN, BSN
- The Effect of Point-of-Care Testing on Patient Outcomes in Emergency Department Chest Pain Patients, by Sarah Calvert, RN, BSN
- What are barriers to obtaining POC glucose in triage?, by Meghan Halstead, RN, BSN

## Communications Committee

By Evelyn Lyons, RN, MPH

Anyone interested in joining the Illinois ENA Communications/Web site Committee is always welcome. The committee is involved in enhancing communication among ENA members through a variety of mechanisms, including the Illinois ENA Web site, the Illinois ENA CounterShock newsletter, our event/communication management system and other communication methods.

The Communications Committee meets quarterly via conference call. Some current activities include:

- The Illinois ENA Web site is updated on a regular basis in order to maintain up-to-date information and resources. A proposed addition to the Home Page is to add a scrolling text bar on the Home Page to highlight key information or resources. One can then click on an item of interest for further information. Look for this feature coming soon!
- We are currently looking into social networking sites, such as Facebook, Linked-In and Twitter. These can provide potential opportunities for Illinois ENA, such as assisting to brand our organization, increasing membership, providing contacts with other professional organizations and transmitting information/updates. National ENA is in the process of developing a toolkit and resources to assist states in their social networking efforts, which we are looking forward to taking advantage of.
- CVENT is the event management system used by Illinois ENA to assist with event marketing, registration and evaluation; two new forms have been developed to assist those who are coordinating Illinois ENA educational programs or other Illinois ENA events. The CVENT Request

Form and CVENT Event Form assist with the collection of information necessary to customize online marketing and registration materials. For further information regarding these forms, contact Bonnie Mobley at [bmobley@childrensmemorial.org](mailto:bmobley@childrensmemorial.org) or Nicholas Nelson at [nicholas.nelson81@gmail.com](mailto:nicholas.nelson81@gmail.com).



- A listing of all past Board of Directors is located on our Web site at <http://www.illinoisena.org/oldboards.aspx>. Although the list begins with our first president (June Brown) in 1973, there are several years in which only partial information is available. In addition, board information is missing for the following years: 1978; 1980-1984. Please take a look at this list. We continue to gather information for the past Board of Directors list, however anyone with information, please forward.
- Photos and historical material are needed for the Archives section of the Web site. Please forward any photos of Illinois ENA past events or historical material you might have.
- Julie Bracken is always looking for articles or news items of interest for the CounterShock Newsletter. Please send items to Julie at [juliebracken@msn.com](mailto:juliebracken@msn.com).

Upcoming Communications Committee meetings are: Tuesday, April 6, 2010; Tuesday, July 6, 2010; and Tuesday, October 5, 2010. All meetings are via conference call from 6:00 PM – 7:30 PM. Anyone interested in joining the committee or for any questions, please contact Evelyn Lyons at [Evelyn.Lyons@illinois.gov](mailto:Evelyn.Lyons@illinois.gov).

## Finance Committee

By Nicholas Nelson, MS, RN, EMT-P



Like virtually every other individual, company and professional organization in the United States, financial stability is a top priority in the Emergency Nurses Association and especially here at the Illinois State Council. Though Illinois ENA has remained on solid financial ground, continued sound fiscal planning is of the utmost importance to continue this trend amidst uncertain financial times.

Returning from hiatus, the Finance Committee is beginning anew, chaired by Illinois ENA Past Treasurer Elisabeth Weber, RN, MA, CEN, and Co-Chaired by Treasurer-Elect Nicholas Nelson, MS, RN, EMT-P. The Finance Committee, in conjunction with the Board of Directors, will be charged with developing fiscal policies to support the mission, vision, and goals of Illinois ENA. Working closely with the Treasurer and other Board members, this committee will develop guidelines and recommendations to ensure fiduciary responsibility to our members while planning for the future of this organization and emergency nurses throughout the State.

The first meeting of the Finance Committee was held on March 9th. Additional meeting dates will be announced and posted as they become available online at [illinoisena.org](http://illinoisena.org). Illinois ENA members interested in joining the Finance Committee or individuals with specific financial questions or concerns should contact Elisabeth Weber at [weber\\_elisabeth@cdph.org](mailto:weber_elisabeth@cdph.org).

## State Liason to ENA Leadership Conference Committee

By Cheryl Vinikoor, RN, BSN, CEN



Illinois was fortunate to have the National Leadership Conference in Chicago in February. Many of you attended. It was a very successful program, even the Chicago weather cooperated. I was lucky enough to be the on the Planning Committee as the State Liaison.

It takes a year to plan a conference of that proportion. It was rewarding to be part of the conference committee and participate in the decision-making involved in developing and presenting this event. Networking with ENA members from different parts of the country, both at local meetings and conference calls was probably the best experience. I was able to get to know the ENA staff from Des Plaines, and spend time with our current president, Diane Gurney.

As you continue on your journey with ENA and your career in emergency nursing, I encourage you to consider applying for a national committee. It is very enriching to share ideas and experiences with other emergency nurses, to reinforce the knowledge we share a common understanding, we speak the same language.

I applaud the efforts of the Illinois ENA Ambassadors National Leadership Committee under the leadership of Christine Chaput and Thelma Kuska. Our Illinois representatives received much praise for the assistance and collegiality shared with the attendees from all over the country.

## Haiti's Earthquake - An Illinois ENA Member's Account

By Mary "MO" Otting, RN, CEN

One hears "Haiti" and many thoughts and feelings are conjured up. Earthquake, devastation, helplessness and death are just a few words that come to mind. Many rescuers, healthcare workers and military personnel worldwide heeded the call to assist. This is the story of an Illinois ENA member.

I am with the MO1DMAT (Missouri 1 Disaster Medical Assistance Team) based out of St. Louis, Missouri, and have been an active member for over nine years now. My team was called for action and sent to Atlanta for pre-deployment orders, immunizations, prescriptions, OSHA testing, etc. Briefings occurred and we were given updates as to what the team currently on the ground in Haiti was experiencing. It was day 11 post quake.

Our team commander along with other NDMS officials went ahead of our plane (never a good sign). Our assignment once arriving in Haiti was to provide medical support at the Gheskio Field Hospital. We were to be embedded with International Medical Surgical Team (IMSURT) East and were awaiting our ride. "Waiting", that became a common theme in Haiti. Our Haitian ride arrived three hours later and we were taken by caravan to Gheskio.

Gheskio was actually a school at some point, but sustained major damage with the quake. Our field hospital was set up within the inner courtyard prior by Massachusetts DMAT and another IMSURT team who arrived shortly after the earthquake. There was a major and a minor medical tent, procedure tent, pediatric, intensive care unit and an operating room tent. They did a phenomenal job with setup and made our transition so smooth. Well, as smooth as it can be for an ER-trauma nurse who, two hours into arriving, had three gun shot wounds dropped at the gate. Such is life.

For the next 14 days we cared for anything and everything dropped in by Blackhawk, walked, crawled, or transferred by many means. I do not consider myself an OB nurse, but babies became a specialty. Thank God for the wonderful OB nurses and physicians I worked with, as we developed a

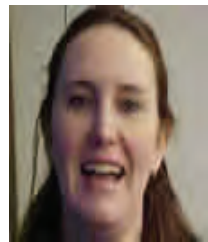
system where they did the front end and I was simply handed a baby. Speaking of babies, with the lack of ventilators that would work on small infants, we ended up bagging an approximate 29-weeker for almost 24 hours until we were able to transfer the baby to the USS Comfort.

Gheskio Field Hospital was getting a lot of transfers from outside facilities unable to provide advanced care for many patients. University Hospital, the main hospital for the island, lost 80 percent of their staff and 100 percent of their nursing students in the quake. We had a wonderful group of local physicians and nurses from the clinic near us who arrived everyday to assist with patients in need of long-term issues. Vanessa and Joe were wonderful to work with and true guides through the system or lack thereof.

After just a few days of transferring critical patients for prolonged care, we were instructed that no ventilator patients could be accepted at Haitian hospitals, as they had become overwhelmed. This left us in a lurch as the ICU was jumping and the inability to move patients would cripple us. Doctor Briggs, Commander (Mass General), and Mark Thorp, Deputy Commander (MO1DMAT), were able to work well with the USS Comfort to ease our burden. Of course, this was dependent on the military being able to provide transport when they were not doing other duties and the landing zone on the Comfort was able to accept choppers. I can't tell you the number of times Colleen, Phil and myself had "the two minute warning" that someone was landing to pick up our ICU transfers. We would scramble and get them packaged up and out of the tent on their litter only to have them return in an hour or so, as "it just isn't going to happen today."

All told, we cared for thousands, preformed hundreds of surgeries and delivered over 30 babies. We saw everything from preeclampsia and crash c-sections, to premies, meningitis, tons of orthopedic injuries, crush inju-

(Continued on page 8)



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## Government Affairs Committee

By Thelma Kuska, RN, BSN, CEN, FAEN



Each year during the last week in January, the ENA Government Affairs Office of ENA brings in all the Government Affairs Chair for a weekend of educational workshop to aid each State Council to become more active in legislative issues affecting health care and emergency nursing.

The following is a summary of the three issues important to ENA and emergency nursing. These are the three issues the Government Affairs Chair discussed with the legislators on Monday, February 1, 2010, at the annual day at the Hill.

### HRSA's Emergency Medical Services for Children Program Request

- Support funding of the HRSA's Emergency Medical Services for Children Program – in the appropriations for the Department of Health and Human Services – at \$26.25 million for FY 2011.

Our nation's emergency care system initially was developed to address the needs of the most numerous critically ill patients, who largely were adults, leaving pediatric care concerns in emergency care system often disregarded. Emergency departments were too often ill-prepared to deal with pediatric emergencies. We know children provide unique challenges for emergency departments requiring special equipment and expertise to treat effectively.

EMSC awards grants to states to support a program of demonstration projects for the expansion and improvement of emergency medical services for children who need trauma or critical care. States receive funding to pursue critical issues related to pediatric emergency care, such as training paramedics and development of transfer protocols for critically ill children to the facilities best equipped to treat them. With the establish of the EMSC Program at HRSA, more pediatric emergency care systems and providers were equipped and properly trained for routine day-to-day emergencies as well as in the event of a disaster.

The EMSC Program was funded at \$21.5 million for FY 2010, which was \$1.5 million above FY 2009 (a 7.5% increase) advancing the EMSC program in the correct direction from the \$20 million level, which had not changed significantly in the previous nine cycles. At a time when unemployment is high, increasing the number of children not covered by insurance, more people will turn to the ED for care. Failure to provide even the minimal impedes the ability of EDs to provide the high standard of care children and their parents expect and deserve.

NOTE: The EMSC Program's Authorization expired in September 2005. The House and Senate introduced HR 479 and S 408, the Emergency Medical Services for Children reauthorization bills (AKA Wakefield Act), which seek to authorize the program at \$25 million the first year and a 5% increase in each of the following four years. While the House has passed HR 479, the Senate bill still lingers.

While Senator Dick Durbin voted yes to the Wakefield Act, Senator Burriss voted no this bill. We must press him to cosponsor the bill. We must lobby the Senate Health, Education, Labor and Pensions Committee to place the bill on the markup calendar as soon as possible to ensure this

program may continue its vital work on behalf of our nation's children.

### Title VIII – Nurse Workforce Development Program FY 2011 Funding Request

- The Emergency Nurses Association appreciates the increases to the Nursing Workforce Development Programs, Title VIII of the Public Health Service Act. These investments are a step in the right direction where the federal strategy must be to continue to expand Title VIII initiatives to be consistent with national health demands.

Title VIII – Nursing Workforce Development Programs are currently funded at \$243.8 million for FY 2010. The Emergency Nurses Association requests continued enduring, aggressive intervention in FY 2011 to fund

the Nursing Development Workforce Programs – Title VIII of the Public Health Service Act – under the Health Resources and Services Administration. Flat-funding or cuts in this budget only will diminish education and development, a shortsighted action potentially further jeopardizing the delivery of affordable, quality, health care for the people in the United States.

ENA is concerned advancements made by Congress to help alleviate the nursing shortage – via funding from the American Recovery and Reinvestment Act and the FY 2010 Consolidated Appropriations Act for the Nursing Workforce Development Programs – will be lost without enduring, aggressive intervention.

Today's shortage is systemic and more threatening than any nursing shortage experienced in the past. While in some locales the recession enabled a temporary stabilization of the workforce, the long-term needs of health care entities across the nation still anticipate experiencing a crisis in nurse staffing that will disrupt hospital operations and is detrimental to patient care and safety. This situation is of

significant concern in EDs where the loss of a seasoned nurse's unique insight and expansive clinical knowledge for a multitude of situations constitutes a loss of expertise in the system. Even though there are multiple, complex reasons for the nurse shortage, a decisive factor limiting the capacity to increase the workforce is the declining number of qualified nurses available to teach future generations of registered nurses.

Studies indicate nursing school applications surged over the previous decade. Although the 2006-07 academic year also showed an increase in applications at all degree levels, an estimated 99,000 qualified applications were rejected. The main reason cited for turning away the applicants was the lack of faculty necessary to teach additional students.

### Health Care Reform Request

Build and support a health care system providing equitable access to comprehensive health care services addressing all medical conditions, including mental disorders, alcohol and substance abuse and addictions by:

- Providing affordable health insurance for the uninsured and under-

(Continued on page 10)





## Historical Nursing Heroines: Clara Maass

By Kathleen Richmond, RN, MS

The Spanish-American War began in 1898 and lasted only a little over a year, but its impact on nursing was historically significant. This war led to the formation of the Army Nurse Corps and produced a true nurse heroine, Clara Maass.

In military hospitals yellow fever and typhoid cases were more of a problem than wounded soldiers. The causes of these diseases, now in epidemic proportions, were unknown.



Clara Maass of New Jersey was a graduate nurse who served in Cuba and the Philippines as a contract army nurse. Having cared for so many infected soldiers, she volunteered as a human research subject in the order to prove the cause of yellow fever. Allowing herself to be bitten by mosquitoes that had bitten patients with yellow fever, Clara contracted the disease, but survived. Hoping to prove that a cured case gave immunity, she allowed herself to be bitten again. Sadly, she became ill and died of this second bout of yellow fever on August 24, 1901, at age 25.

Clara Maass was buried with military honors in Havana, Cuba, but later reburied home in New Jersey. The United States Postal Service issued a stamp in 1976 commemorating the 100th anniversary of her birth, and the Clara Maass Medical Center in New Jersey honors the memory of her sacrifice.

This nursing heroine is in the American Nurses Association Nursing Hall of Fame as a lasting tribute by her profession.

## EMS Updates

By Annie Moy, RN, MS



### BLS SMOs

- BLS SMOs are being developed for IDPH by BLS SMOs committee of which I am the chair and Chief Mike Hansen is the co-chair. First Draft of 30-plus protocols was presented to EMS MDs at ICEP meeting first week of December last year. Mid-January of this year comments were reviewed and draft protocols revised. Currently we are on-track to present again to the EMS MDs at ICEP in early March, 2010 with the intent to introduce at the March EMS Advisory Committee Meeting in Springfield for review.

### Stroke Rules and Regulations

- Stroke rules and regulations are being drafted by IHA and being circulated for comments.

### AHA Initiatives

- Mission Lifeline – STEMI System Development Task Forces underway. State divided into two regions.
- Mission Lifeline Greater Illinois Task Force  
Heather Gavras: (312) 476-6686 heather.gavras@heart.org  
Covering EMS Regions 1-6. First meeting of the Greater Illinois Task Force was via phone conference on January 14, 2010. Chair is Dr. Darrel Gumm (Cardiology).
- Mission Lifeline Metro Chicago Task Force  
Anne Gavic-Ott: (312) 476-6670 anne.gavic-ott@heart.org  
Covering EMS Regions 7-11. First meeting of the Metro Chicago STEMI Task Force met January 26th in Oak Brook, IL. Representation from Cardiology and EMS. Co-chairs are Dr. Gary Schaefer (Rush University, Chicago) and Dr. Valerie Phillips (Good Samaritan Hospital, Downer's Grove).

### DUI Bill HB 4774

- EMS Advisory Council opposes this bill as it would entail changes to the Motor Vehicle Code. The Council opposes paramedics obtaining blood samples for evidence in DUI cases and feel this blood draw is for obtaining evidence, not for any medical reasons. Drawing of blood samples would bring EMS personnel into chain of custody issues and potential courtroom time constraints. This bill if passed would supersede IDPH authority for paramedics to perform this task.

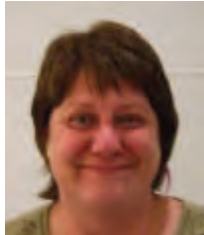
## Haiti (Continued from page 6)

ries, and of course, tetanus, malaria, dengue fever, tuberculosis (lots) and HIV.

I would personally like to thank my Children's Memorial Hospital ED staff for their support and covering in my absence. I would also like to say it was an honor and a privilege to have served with IMSURT East and MO1DMAT colleagues. To the people of Haiti and the relief work who continue please keep them in your thoughts and prayers.

## Trauma/TNCC Committee

By Karin Buchanan, RN, MSN, APN-CNS, CCRN, CEN



The Trauma Committee is ramping up for a busy year. We are sponsoring two instructor courses this year as promised. One is upstate in conjunction with the Spring Symposium (May 6, 2010) and the second in conjunction with the Fall Symposium (no date available yet) in Springfield. Applications are on the Illinois ENA Web site. Class size is limited to 12 participants.

Thank you to the course directors who provided Karin with the names of potential instructor candidates. It helped tremendously with planning purposes for both budget and course projections. Course Directors can email the names of potential instructor candidates to Karin.Buchanan@stalexius.net. Please make sure you have provided these candidates with potential instructor letters since those are needed when the candidates submit their instructor course applications.

Course in Advanced Trauma Nursing (CATN) II: this year we are planning three courses. This didactic and case study review course is well received by those who have attended. Our first class this year was held February 3rd and 4th at Central DuPage Hospital. Barb Ekstrum from OSF in Peoria confirmed they are still hosting the August 12th and 13th class. We are looking for a third location for the year.

All our meetings are conducted by telephone conference. While it doesn't replace the valuable face to face meetings, it is a reality in today's budget tight, no free time life that we lead. Meeting dates and times are the second Tuesday at 6:00 PM in March, June, September, and December. Meetings generally last about an hour depending on agenda items. Please contact myself, Karin Buchanan at Karin.Buchanan@stalexius.net or the co-chair of the Trauma Committee, Karen Bosnyak, at Karen\_Bosnyak@cdh.org.



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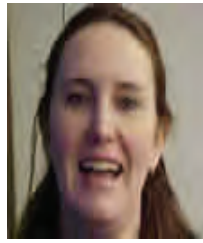
## Pediatric/ENPC Committee

By Mary "MO" Otting, RN, CEN

We are holding the annual ENPC Instructor course on May 6th with pretesting on May 5th (evening). Applications are due by March 12th. Please check [www.illinoisena.org](http://www.illinoisena.org) for the paperwork to complete and forward to MO at [motting@childrensmemorial.org](mailto:motting@childrensmemorial.org).

The Pediatric Committee is looking for some volunteers interested in

planning the Fall CPEN review course. Please contact Claudia Claus at [cclaus@childrensmemorial.org](mailto:cclaus@childrensmemorial.org) if you are interested. Meeting dates and the course date has not been determined as of the printing of this newsletter.



## Illinois State Council Meeting Highlights

By Vicki Bacidore, RN, MSN, ACNP-BC, CEN, TNS

### Meeting Summary – November 7, 2009

#### *Celebrating Successes:*

- Teresa Gomez and Rebecca Steinmann both published articles in JEN
- Sue Pritscher and Vicky Goeddeke presented a poster
- Marites Gonzaga had her poster accepted at ENA Leadership Conference
- Julie Bracken celebrated 10 years as editor of Countershock

#### *Updates:*

- H1N1 influenza outbreaks regarding handling peak census at Illinois hospital EDs
- The 2009 Illinois State Council bylaws were accepted
- The EMSC School Nurse Emergency Care Course will be turned over to the school nurses committee
- The 2010 ENA Leadership Challenge Conference will be hosted in Chicago. Cheryl Vinikoor is looking for volunteer state ambassadors to assist with various functions, as well as co-chairs of the planning committee
- Thelma Kuska discussed the new state "text messaging while driving" law going into effect January 1, 2010
- Cheryl Vinikoor discussed planning updates for the 2010 Spring Symposium at the DoubleTree Hotel in Skokie
- Written committee and SIG reports were reviewed

#### *Educational Presentation*

- "Post Traumatic Stress Disorder" by Mikki Grit

### Meeting Summary – February 6, 2010

#### *Celebrating Successes*

- Vicki Keough appointed Dean of Niehoff School of Nursing at Loyola University Chicago
- Illinois State Council selected to receive the 2010 State Council Achievement Award
- Barb Weintraub appointed to national committee recognizing outstanding EDs
- Sue Pritscher and Vicky Goeddeke presented poster on "Animal Assisted Therapy" at National Magnet Council; submitting to ENA conference
- Steve Stapleton submitted JEN article for ENA research committee; is chairing RN competencies group for ED nurses; invited to ECRC (CEN exam review); and submitted his doctoral dissertation
- Cheryl Vinikoor is liaison for ENA Leadership Conference
- Darcy Egging on ENA National ED Resource Committee
- Rebecca Steinmann serving on committee for ENPC/TNCC course administration in underdeveloped countries

- Thelma Kuska sits on NHTSA work group for safe pediatric ambulance transport
- Lake Forest Hospital is now associated with Northwestern Memorial

#### *Updates*

- Spring Symposium Committee is finalizing plans for the upcoming conference at DoubleTree Hotel in Skokie. Contact Kathleen Richmond if interested in donating silent auction item with proceeds going to ENAF.
- ENA National/State Membership drive kicked off with goal of 40,000 members this year (40th anniversary of ENA). Illinois goal to increase by 150 new members. Motion carried to offer a raffle prize of free registration to Scientific Assembly for any ENA member who recruits a new member from March 1 to July 1, 2010.
- Legislative updates included new bills for helmet use, financial support of the Wakefield (EMSC) act, supporting Title 8 Nursing Workforce programs and healthcare reform
- Call for candidates for Illinois State Council ENA two year positions of President-Elect, Director and Secretary. Interested members should submit a bio form and resume/CV to Cheryl Vinikoor by March 15, 2010
- The Injury Prevention Institute is now the Institute for Quality, Safety, and Injury Prevention
- New ED Nursing Resource Committee developing evidence-based research statements and education now posted on the national ENA Web site
- Anyone with old ENA photos or Board information for the years of 1978 and 1980-1984 should contact Evelyn Lyons, Communications Committee and Kathleen Richmond, Archives Committee
- The Education Committee is welcoming new members. Contact Vicky Goeddeke
- The Evidence-Based Practice Committee selected winners: Sara Cain (Rush), Meghan Halstead (Rush) and Sarah Calvert (Loyola) who will present their projects at Spring Symposium. There will also be four to six poster presenters
- Call for ENA General Assembly delegates deadline is July 1, 2010
- Contact Teri Campbell at Vidacare if interested in doing EZ-IO research
- Written committee and SIG reports were reviewed



#### *Educational Presentation*

- "Have I Mentioned that I Hate OB? Delivery Complications" by Teri Campbell

## Government Affairs Committee *(Continued from page 7)*

insured

- Promoting national access to primary care through the enhancement of services by local community health centers and neighborhood clinics
- Emphasizing prevention and wellness, including increased funding to provide a continuum of preventive health care education
- Supporting funding of incentives to develop a primary care workforce sufficient to meet the nation's health care education
- Supports regionalized, coordinated and accountable emergency and trauma care

Access to health care is a multifaceted problem with direct and immediate impact on emergency services and emergency nursing. Among the trends affecting access to health care are the aging population, increasing racial and ethnic diversity, growing income disparity and increasing chronic and acute health problems.

The ED is the primary entry point of care for many uninsured and publicly-insured patients. For many patients, a visit to the ED may be their only source of health care and, thus, their only opportunity to receive pre-

ventive care. The likelihood of ED use is increased among those whose regular source of care is disrupted, who have unmet medical needs, who was less health, and whose chronic illness require more care. In 2003, the highest rate of ED use was among those 75 years and older, followed by the 15-to-24 year old population. Other frequent users of the ED are individuals who have a mental illness or poor mental health and individuals who are homeless. Emergency services and trauma care reached a crisis in the United States, chiefly due to crowding and boarding, lack of health care providers and the burden of uncompensated care.

ENA believes all individuals should have equitable access to comprehensive health services, including medical conditions of mental disorders, alcohol and substance abuse and addictions. ENA requests development of health care reform proposals where everyone in the nation has access to a health home for health promotion, quality care and coordinated care of non-urgent medical needs. To achieve this requires the removal of these factors impeding individuals from attaining the necessary quality care to which all persons are entitled.

## Illinois State Council Emergency Nurses Association

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