There were lots of congratulations and celebrations as over 1000 nurses, many from foreign countries, gathered in Ottawa for 4 days in June to attend the CNA Annual Meeting and Biennial Convention. This year’s convention celebrated the 100th anniversary of CNA.

Preceding the annual meeting, most of the 40 associate, affiliate and emerging nursing association (AAE) representatives met for a face to face meeting. It was great putting faces to all those who we had dialogued with for the past couple of years by teleconference. Leslie Anne Patry, of CNA’s certification program, joined us for dinner and shared the new certification promotional video with us. Two of our members are featured during the video – Michele Paquette and Monique Travers. Congratulations to both of them for participating in this excellent project!

The annual meeting was held on Sunday, where the business reports were given. Resolutions were passed and issues of concern were discussed. There was much discussion around the issues of internationally educated nurses and challenges to self-regulation; two topics closely linked to assist with our national nursing shortage.

The opening ceremonies included the unveiling of a new Canada Post stamp celebrating CNA’s 100th Anniversary. A video that time lined Canada’s nursing history and milestones with events of the world was the highlight of the ceremonies.

The convention opened with an inspiring speech from General Rick Hillier, whose warmth and wit inspired everyone present as he discussed the role of nurses in supporting our Canadian troops both overseas and at home. This set the tone for the entire enriching convention themed “Be the Change”. CNA introduced it’s newly revised “Code of Ethics for Registered Nurses”. It can be downloaded from the CNA website (www.cna-aiic.ca) or you can purchase a copy from the CNA bookstore.

I had the privilege of representing CSGNA at a booth in the vendor area and promoting our association. It was clear to many delegates that there are common interests across speciality nursing groups. We at CSGNA have much in common with the Canadian Association of Hepatology Nurses (CAHN), Canadian Respiratory Health Professionals (CRHP) and Canadian Association for Enterostomal Therapy (CAET). This is an area where we should focus to look for professional growth.

It was a truly rewarding experience to attend the CNA convention; one that afforded professional and personal growth through discussion and networking. It would be wonderful for every nurse in Canada to experience this celebration of nursing.
President’s Message

Your national representatives have been busy supporting your practice and acting on changes within our Society. Our face to face meeting was held in Toronto in April at which time we had the opportunity to meet our event planner, Heather Reid of Innovative Conferences and Communications. Heather has worked closely with Judy Deslipppe and her planning committee since her hiring earlier in the year. We are optimistic that our 2008 conference will run very smoothly with Heather’s professional expertise guiding us.

In May, Elaine Burgis, Helga Sisson, Mabel Chaytor and I had the privilege of representing CSGNA in Salt Lake City at the national SGNA conference. Although SGNA has over 8000 members, they face many of the same challenges as a national organization and as individual members. As our mandate for members is education, we are dedicated to publishing the most current information available, potentially with SGNA’s collaboration. SGNA does have the financial resources to have a full-time Executive Director, as well as a full-time Practice and Education Director plus numerous support staff who work from their Chicago office. Although CSGNA will not likely see this structure in the near future, we are critically looking at the roles of Education and Practice and by engaging SGNA with some of the updating of manuals, we hope to lessen the load of those serving in these positions. We are also actively seeking members who would like to participate as members-at-large on committees which affect our practice. If you are interested in contributing in such a role, feel free to contact anyone on the executive.

There will be many new faces around the board in the fall with the turnaround of national members being the highest in recent memory. I wish to thank Monique Travers, Branka Stefanac and Jean Macnab for their tireless commitment to CSGNA. I also wish to thank Elaine Burgis, Joanne Glen, Usha Chauhan, Cindy James, Mabel Chaytor, Helga Sisson and Maryanne Dorais who are remaining. It has been a privilege working with each of you. I welcome newcomers, Donna Bremaud, Betty Kennah, Pauline Porter and Sue Drysdale. Under Elaine’s and Joanne’s leadership, I am confident CSGNA will continue to thrive. I wish to commend Yvonne Verklan, Denise Chiasson and Joan McKechnie for allowing their names to stand for nominations. The Public Relations position remains open and there will be nominations from the floor in Vancouver.

I am so grateful for the opportunities provided to me through CSGNA and thank you for entrusting me as your president these past two years.

Warm regards,

Debbie Taggart RN,BN,CGRN,CGN(C) CSGNA President 2006-2008

Note from the Newsletter Editor

I would like to begin by thanking all those who have supported me in by new role as Newsletter Editor. It has been a very rewarding and interesting experience. I look forward to serving the membership for the next term.

This year, we have seen a change in CSGNA’s logo. Jaclyn Deslipppe, daughter to Judy Deslipppe, President of Vancouver Regional Chapter, designed the new logo. Her rationale for the new design is as follows:

‘Design problem: CSGNA’s current logo is not reflective of the industry or association of which the members represent. The logo only identifies the group as Canadian. Design solution: To come up with a logo that illustrates both the industry and the nationality. The new logo is subtle and suggestive in its graphic use of the centre ‘G’ as a symbol of the GI tract. The CSGNA is set in a classic, serif font suggesting prestige and professionalism. The ‘G’ resting above the baseline is the focal point, while the placement of the maple leaf at the end identifies the group as Canadian.’

The Guiding Light will also have a new look beginning with the July 2008 issue.

The Guiding Light continues to be published three times annually--in March, July and November. Our current sponsor for the years 2008 and 2009 is Olympus. I would like to thank Olympus for their continued support. Articles for The Guiding Light should be submitted on the fifteenth (15th) of each month prior to publication. Thank you to those that have contributed to our newsletter. I would like to encourage all members to get involved, by submitting articles for The Guiding Light. Any gastroenterology related paper/article could be used as hours towards recertification.

All articles, pictures, comments, suggestions and ideas are welcome and encouraged.

Respectfully submitted,
Helga Sisson, RN, CGN(C) Editor

The Guiding Light
In the Spotlight
James Paton Memorial Regional Health Centre, Gander, Newfoundland

On May 26th we celebrated our 2nd annual GI Awareness Day. It started with an open house of the unit from 2-4pm. During that time, we had guided tours of the unit, with demonstrations of gastroscopys, colonoscopes, snaring of polyps, hemorrhoid banding and clo-tests. We had an educational display with various handouts of different gastroenterology disorders. During the week we had quiz/contest handout sheets in the cafeteria. There were 3 winners of thermos coffee mugs generously donated by Olympus. A total of 88 people visited the unit that afternoon. They all enjoyed tea, coffee and sweets, all prepared by the endoscopy staff. The staff also donated 9 other door prizes. This was a big undertaking for such a small staff, however, everyone pulled together and it was a huge success. We plan on making this an annual event with even more surprises in store for next year. 
Our unit is small in numbers, but huge in enthusiasm and spirit!

Sincerely,
Jackie Patton, RN
Charge Nurse, Endoscopy/Minor Procedures

NOVA SCOTIA CHAPTER FALL EDUCATION DAY
Dickson Centre, VGH • Halifax, Nova Scotia • November 15, 2008

FOCUS ON STENTING

ERCP...an Overview...Why and where stents are used – Dr. Steve Gruchy, Gastroenterologist
Esophageal Stenting – Dr. Drew Bethune, Thoracic Surgeon
Colonic Stenting – Dr. Rob Berry, Interventional Radiologist
Someone Needs a Stent - A Case Study – Dr. Jim Ellsmere, Surgeon
Let’s review Our Scope Cleaning Protocol – Liz Hendsbee, Infection Control Representative

Several Companies will be there with samples of the stents they supply, making it a good hands-on experience. We will also conduct our annual business meeting and elect a new executive. Breakfast, lunch and nutrition break included. Finalized program and registration forms will be sent to chapter members in a few months.
Abstract Writing:

“Screw up Your Courage – Submit One”! – A Viewpoint

Maria Cirocco, RN. CSGNA member. • St. Michael’s Hospital, Toronto, ON

Why are YOU... yes you... not submitting abstracts to the annual meeting?

I was disappointed to hear that the response to the call for abstracts this year could be counted on one hand. It was particularly distressing, given that when the Canadian Society of Gastroenterology Nurses Association (CSGNA) hosted the annual meeting in conjunction with the Society of International Gastroenterological Nurses and Endoscopy Associates (SIGNIA) in 2005, there were a many abstracts submitted from nurses worldwide. This overwhelming show of commitment to the call for abstracts from colleagues debunked one of the arguments in the nursing literature for me. There are some that argue that nursing students struggle with the rigor of academic writing. Due to the lack of emphasis placed on facilitating the development of academic writing skills in the educational program, it may be problematic for them as students, and later as practitioners, to communicate experiences in writing. (Whitheld 2002)

So, with the argument of skill and ability debunked, I asked myself, why is it that CSGNA members don’t submit abstracts? Do we have no ideas? Can we not tell a story? Is there apathy in our group? Is it just that we don’t know what to do or value the experience?

The notion of no ideas is also easily disputed. Every time I meet with colleagues, they are always enthused about something new going on in their work environment. Whether it is changing the patient scheduling system, the documentation system, patient instructions, the nursing schedule, performing a new or improved procedure to benefit the patient, reaffirming what they are doing well, sharing same old but going well, etc., they are always ready to tell me a story. These changes in processes or reaffirmation of practice are really the idea behind writing an abstract.

So I’m left with the notion that we, as CSGNA members, either don’t know what to do or don’t understand/appreciate why submitting an abstract for a meeting is important.

What an abstract really?

All disciplines have particular preferences when it comes to communication. They will have shared assumptions, jargon (discipline specific vocabulary and shorthand) methods of formatting which will in turn make it easier for the reader to get information more efficiently. (Casson, 2006). When communicating about our work, then we must also adhere to the instructions and requirements of standard abstract format. “The abstract is often the only permanent and public record of your [presentation] and must therefore be able to stand alone. It is likely to include the following elements: background, materials and methods, results and conclusions. Increasingly, journals and conferences specify that a ‘structured abstract’ should include headings such as these. Other abstracts may be more informal but should still be informative, complete, clear, precise and well structured.” (Brazier 1997, pg 34)

An abstract is a summary of a body of information in a paragraph—100-350 words and provides the reader with the gist of the overall project. It will answer the big questions of your project (What did you do? Why did you do it? How did you do it? What happened when you did it? Why are the results interesting to the rest of us?) (Casson 2006).

An abstract can also be a useful tool for the writer to check that she has a clear grasp of her argument/presentation. If the writer can state the argument clearly in a few sentences—and in such a way that someone who doesn’t know the subject will still be able to understand the main idea—then the writer knows she has a good grasp of the ideas she is trying to express. (www.olemiss.edu). There are many uses for abstracts, but in the context of this paper the main use is for presentation at a meeting. Consider it an advertisement of your work that will persuade colleagues to come and chat with you about your work/idea at the poster session.

Essential elements of the abstract are: (www.olemiss.edu)

• Background: A simple opening sentence or two placing the work in context.
• Aims: One or two sentences giving the purpose of the work.
• Method(s): One or two sentences explaining what was done. (Described at length only if it is unusual)
• Results: One or two sentences indicating the main findings. (Absolutely essential)
• Conclusions: One sentence giving the most important consequence

Guidelines for Submissions to “The Guiding Light”

• Submit all materials by email to the newsletter editor in word format.
• Submissions must be received by the 15th of the month preceding each issue i.e.: Feb15th for March issues, June 15th for July issues and Oct 15th for November issues.
• Include all references.
of the work. (Telling what the results mean).

Where to find examples of abstracts: (www.olemiss.edu)
- The best source of example abstracts is journal articles. Go to the library and look at [nursing] journals, [other professional journals], or look at electronic journals on the web.
- Read the abstract; read the article. Pick the best ones, the examples where the abstract makes the article easier to read, and figure out how they do it.

Not everyone writes good abstracts, even in refereed journals. The more abstracts you read, the easier it is to spot the good ones.

Why value this process?
In nursing we have made great strides in developing our professional practice. To this end, CSGNA has demonstrated its’ commitment through educational meetings, by collaborating with The Canadian Nurses Association (CNA) in establishing a certification exam, by publishing standards and guidelines for practice in the gastroenterology setting which are congruent with national and provincial standards and so on. What is all this? This is called communication. Remember that communication of ideas is fundamental to the development of all professions. Where would we be today if Florence Nightingale hadn’t written her “Notes on Nursing” She challenged all of us to teach ourselves about all aspects of health and nursing. I would say that writing is one of those aspects.

Writing about our ideas as they impact on our practice, our patients, our environment, is a method of advancing our practice in GI nursing.

REFERENCES

Is There an Acceptable Time for Clean Endoscopes to Hang Before Reprocessing?

D. Taggart RN,BN,CGRN,CGN(C)

Thank you to those who responded to this question printed in the March 2008 Guiding Light and were interested in learning more. The responses ranged from reprocessing duodenoscopes every 48-72 hours, reprocessing all scopes every 48-168 hours, reprocessing only colonoscopes which have hung for 7 days or longer, or following no particular timeline or tracking. No site reported their practice being related to evidence-based literature support but simply something they have always done or felt had been a good practice to implement. Few sites reported practising random scope sampling.

CSGNA is actively seeking concrete support for a timeframe deemed acceptable for reprocessed gastrointestinal endoscopes to hang before reprocessing. To date, there is little to support an exact acceptable hanging time. Most literature does say that the key is that the scope is thoroughly reprocessed according to manufacturer’s guidelines, followed by an alcohol flush and hung in a clean vented cupboard.

Microbiologist, Dr. Michelle Alfa says, “There is general agreement that endoscopes remain relatively free from contamination for up to 7 days. Most studies have suggested that this is the relatively safe “shelf-life” for flexible endoscopes. As such, if the scope is held longer than this - it would be reasonable to reprocess it prior to use.” (M. Alfa, email communication Feb. 2008).

REFERENCES

REMINDER
Just a reminder that we need donations for door prizes and the silent auction for the National Conference in Vancouver September 2008!
The Guiding Light

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The Guiding Light
1. REVIEW/ADDITIONS/ADOPT THE AGENDA: Cindy James and Helga Sisson passed a motion to adopt the agenda.

2. APPROVAL FOR THE NOVEMBER TELECONFERENCE MEETING: Elaine Burgis and Joanne Glen passed a motion to accept minutes of the meeting.

3. Reports from all executive members were circulated and reviewed prior to meeting.

4. WELCOME BY THE PRESIDENT: Deb welcomed and thanked everyone for attending the meeting. A summary of activities since the teleconference meeting November 13, 2007 includes representing CSGNA at the Canadian Association of Gastroenterology (CAG) Regional Meeting in Toronto, November 16, 2007. Deb met with Paul Sinclair, Executive Director, CAG. CSGNA proposed that CAG increase funding for each of the two nursing awards for CDDW to be increased from $500 to $750. A proposal was presented to the CAG Board, was approved and was implemented December 2007. Congratulations were sent to Michele Paquette and her employer, for being chosen as one of a hundred in 2008 by the Canadian Nurses Association. A nomination was submitted and accepted by Monique Travers and Jean MacNab.

CDDW Meeting Montreal
February 29-March 3, 2008: Elaine Burgis, Cindy James, Maryanne Dorais and Deb Taggart met with Paul Sinclair and Dr. David Morgan, incoming President-elect of CAG. A discussion of our evolving business relationship and increasing needs of both of our organisations took place. CSGNA requested that CAG include the membership fee to CAG for each of the nursing award recipients in that year and will put this into a formal request for CAG’s consideration. It was discussed that CSGNA Position Statements and Guidelines might be reviewed by CAG for their input and critique. This review has been done in the past, and it was suggested to reinstate this review process.

Quality Assurance: Information on the Global Rating Scale (GRS) was published in The Guiding Light November 2007. CSGNA’s involvement with the CAG Quality Assurance initiative to decrease wait times and improving care using the Global Rating Scale was discussed. CAG is considering funding nurse endoscopist, Debbie Johnston, from the UK, to stop in a few Canadian centres involved/interested in ‘embracing’ the GRS following DDW in May 2008.

4. REPORTS – Canada West, Centre and East: Joanne requested a moment of silence for all those writing the CNA certification exam. Joanne was also happy to report that all of Maryanne’s staff has written the certification exam. All the chapters have met their chapter education requirements.

5. NEWSLETTER: Deb has been communicating with Paul Sinclair regarding a new printer for CSGNA. Information will be communicated once a decision has been reached. Suggestions were made to have one article in The Guiding Light translated into French. At the present time, we are accepting articles in either language. The GI Nurses day usually falls on Friday during the Nursing week. For this year, there is insufficient time for a GI theme or GI activity to be established. Elaine has arranged with Print-It to send a postcard from CSGNA to membership. In the future, it was suggested that a contest be held to select a theme for 2009.

5. EDUCATION: One of the regular duties of the Education Director is to answer emails from the membership. Deb, Elaine and Branka have been helpful in providing Maryanne with prompt suggestions and/or resources to access. Scholarships: An increase in the number of scholarships is available: Professional Development Scholarship Award and Chapter Executive Award. Directors were reminded to tell their members that these scholarships are available and to submit applications for the SciCan, Olympus and the GI Professional Award, etc. along with our Certification/Recertification Michelle Paquette Award. All applications for the scholarships and awards should be directed to the Education Director at her address, until such...
time as a Membership Director may resume these responsibilities and/or until a new CSGNA executive assistant is appointed.

Guidelines and Standards of Practice: These guidelines need to be dated when revised and posted on the CSGNA website. It was suggested that guidelines be revised every two years, or when deemed necessary, and reviewed by the Practice Director, CSGNA and CAG. A suggestion was made to have the Guidelines and Standards translated into French. CNA would have a “link” directly to the standards from the certification section of the CNA website once this occurs.

Teaching Manuals: All teaching manuals need to be revised. A suggestion was made to form a committee that would include Lori McGeough, Marlene Scrivens, Evelyn Mathews and 2 of their staff members to revise the ERCP manual. Objectives and ideas of how to set up the ERCP manual will be provided. The Certification manual should reflect competencies set by CNA. Judy Robinson from St. Paul’s is helping with this. In the reprocessing manual, all pre-cleaning procedures and reprocessing needs to be done according to manufacturers’ directions. We will ask all clinicians from each vendor to help with this manual, along with recommendations from Dr. Alfa. References are extremely important. Revisions will take at least 2 years.

CSGNA Website: A library of all educational material would be a wonderful asset to the membership of CSGNA. Links to other resources, for members only, would also be valuable.

ERCP Course for the National Conference: Brochures will be completed for the national conference. Cost is $175.00. Details will be finalized soon.

Education Program Selection for the National conference: Suggestions were made to have the education committee become more directly involved with the hosting city before the content of the program has been determined. A longer review of the evaluations may be required. The education committee needs to review content, program and future themes and/or changes, to ensure a successful conference. Having an event planner will help tremendously as the education committee can concentrate more on the program and content. We need a diversified program to better meet the needs of the membership. Selection of programs would be more individualized. Gastroenterology has grown and developed more specific procedures. A mix of basics as well of individualized chosen topics would be well received by the membership. The education committee could use more members. The education committee needs to be proactive in requiring members to become more involved. Perhaps members from some chapter executive, if approached, might become involved or give some suggestions. Meeting with the host conference committee earlier with the preparation to their program may help set the tone for a positive outcome. A suggestion that CSGNA and CAG conferences might be held together at some point in the future was made.

6. PRACTICE DIRECTOR: Current guidelines that appear on our website at the present time are PEG – comparing the CSGNA and SGNA statements. Guidelines for documentation, moderate sedation, personal protective equipment and hand hygiene are complete.

7. TREASURER’S REPORT: The accountant’s report is available for the annual report. No fraud was noted. We are still looking for a “business number”. Cindy will check through the previous document. Suggestions were made that in 3-4 years, a larger venue will be needed for our annual conference. CAG would like CSGNA to have the annual meeting together with the physicians. This will be of benefit to CSGNA by allowing a collegial professional/social interaction, take pressure off the local chapter and give access to speakers at a reduced cost. In addition, it may be easier for nurses to take time off work as physician will be conferencing at the same time. CAG has assured that a committee would be formed to establish equity. This issue will be tabled for September’s face to face meeting. CAG has made Canadian Digestive Health Foundation (CDHF) their foundation to support. It was suggested that CSGNA also begin supporting this foundation. Dr. Richard Fedorak will come to Vancouver, if necessary, to promote affiliation with CDHF, at his own cost, to gain our support.

8. PUBLIC RELATIONS: Updating our website is necessary. A suggestion that a French translation is required for statements and guidelines to post on website was made. Initially we need to translate the scholarship forms. Suggestions were made to find a translator in Ottawa. It was suggested that a policy be developed for advertising on CSGNA web site.

9. MARKETPLACE: New items are being considered. There is a new logo to show off. Bigger ticket items are being investigated (i.e. lab jackets, polo shirts, etc.). Samples may be available at the next meeting. The new booth should be our main focus to promote certification and CSGNA image. Any ideas or suggestions would be welcome. It was suggested that ordering
10. PRESIDENT ELECT: CNA
Centennial Celebration 100th Anniversary: A picture of Deb and 3 pictures of GI nurses working were sent in for promotion. The booth will be available for CSGNA for a 4-hour period. There will be promotional items and giveaways (magnet with new logo) available. Helga and Cindy will work on a new “booth display” which will be ready for the June convention.

By-laws: Timelines need to be met in order to honour the bylaws. National Positions:
i) Nominations are due April 15th.
ii) By-law 9.1: A slate of candidates for offices open in that fiscal year shall be mailed to the voting membership by May 15 of the current year.
iii) Nominees CVs and ballots in Annual Report.
iv) Annual Report will be mailed in June.
v) Ballots need to be returned by June 15th.
(1) Annual Report needs to be out in early May or nomination candidates CVs and ballots need to be a separate mail out.

Nametags: New nametags for all executives, with new logos, will be purchased for Vancouver.

11. VANCOUVER CONFERENCE UPDATE: Everything is on track with the conference. Brochures will be available at the end of May. Website: It was suggested that website support might be available through vendor sponsorship. Start-up costs can be approximately $50,000. Some companies have been able to set up websites to track the number of hits. The cost for maintenance of the website can be minimal. Webray will be considered initially after our needs are assessed, before pursuing alternate sponsorship. Suggested a “members only” link or site.

Director’s roles: The roles and responsibilities of the Education Director is very time consuming. A suggestion that a new role for the membership executive would be to review scholarships and/or follow up with the directors to see if the education is met. With the addition of an executive assistant, the Membership Executive role needs to be redefined.

12. Timelines for submissions:
• CSGNA scholarships due May 31.
• Chapter of the year due May 31.
• Financial report due Dec 31.
• Education report due June 30.
• GI Nurse professional of the year award due May 31.

13. EVENT PLANNER: Heather Reid was introduced to the board members. Her responsibilities include liaison with the hotel to finalize the space required for the vendors, plenary session and breakout rooms. She will also be responsible for negotiating the hotel contracts and finalizing the brochures for the annual conference. Heather has negotiated space at Metro Toronto Convention Centre (MTCC) and Intercontinental Hotel for the 2009 CSGNA annual conference. The contracts have not yet been signed.

14. 2008 VANCOUVER CONFERENCE: Vancouver is planning for the 2008 conference. The logo has been created and the board approved the colors of green and black. There have been numerous phone calls and emails with Judy Deslippe and the local chair. Dr. Pat Raymond was emailed regarding her two presentations on Friday, Sept. 12, 2008. After Dr. M. Alfa responded that she was unable to present in Vancouver, Dorie Werner, RN, from Colorado, was contacted. She will present sessions on abdominal pressure during colonoscopy on Thursday, September 11, 2008.

15. DATE FOR THE NEXT MEETING: The pre-conference meeting will be on Wednesday September 18th all day and Thursday September 19th in the morning only. On Thursday morning, the committees will also meet. The post conference meeting will be Sunday September 22nd.

Submitted by Usha Chauhan, CSGNA Secretary

Future CSGNA* Conferences
VANCOUVER September 11th – 14th, 2008
TORONTO September 30th – October 3rd, 2009
SALT LAKE CITY, UT

As a first-time attendee, this was truly an amazing experience. There were over 1800 professionals in one area networking and learning. There was so much to do and see. There was something to learn at every corner. There were over 125 sessions covering every scope of GI practice from A to Z.

The dynamic courses put ‘fun’ back into learning. The GI Quiz Bowl was just that, fun and educational. Learning with laughter is certainly the best medicine so easily digested. The Educational Tract listing and the ‘Schedule At A Glance’ kept even me on track.

Not once did I get lost. Erik Wahl’s powerful presentation, The Art and Vision in Healthcare, flowed well with the course content and theme. There were tears of empathy with Dr. Terry Box’s presentation, ‘The Power to make a Difference’. Many tears of sadness where shed during the tribute to Marsha Dreyer, given by Norah Connelly at the Gala Dinner.

The presentation by the dynamic duo of Lisa Hearn and Kate Donovan, ‘The Power of Humor - It Begins with You’, was surely an example of teamwork. Carol Stevens’ Leadership session was inspiring. Her wonderful attitude of embracing change and moving forward showed the limitless boundaries of the GI profession. The Vendor Hall was a showcase for ‘What’s New in GI’, with the most current information and the newest technology on display.

The Planning Committee, along with the many volunteers, did a spectacular job keeping everything running efficiently and on time. All of the events ran smoothly. The programs were informative and inspirational. All nurses, whether new or experienced, learned from these diverse education sessions. It was truly a pleasurable experience. I am looking forward to upcoming learning opportunities.

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Olympic Flame, Salt Lake City

Maybel Chaytor & Helga Sisson at SGNA Conference

Sandra Cialfi, Outgoing CSGNA President, Debra Taggart, CSGNA President, Lisa Heard, Incoming SGNA President

International Attendees

Elaine Burgis and Debra Taggart
The percutaneous endoscopic gastrostomy (PEG) tube was developed in 1980 and has become a routine intervention for providing long-term nutrition to patients with chronic dysphagia. Different techniques have been used but the push and pull techniques have been the most efficient and safest methods in controlled trials. More than 100,000 procedures are performed annually in the U.S. At the Ottawa Hospital we perform over 600 of these procedures yearly. The Regional Cancer Centre of Ottawa has amalgamated with our institution and since then the clientele for PEG tubes insertion has increased enormously.

A trained Gastroenterologist or surgeon usually performs the PEG tube insertion. During the procedure, a nurse monitors the patient, administers medication, maintains a patent airway and documents the patient’s tolerance to the procedure. The physician, with the assistance of the resident, handles the technical part of the PEG insertion, one doing the surgical part and the other manipulating the endoscope.

At the Ottawa Hospital General Campus Endoscopy Unit the residents and physicians are not always available to assist with the procedure so our Gastroenterologist, Dr. S. Grégoire, approached management to offer her help as a trainer to train nurses in this advanced role.

The manager sought guidance from the College of Nurses of Ontario and obtained a written permission from the Practice Liaison of the College of Nurses of Ontario and the statement said: “the nurse if she has the necessary knowledge, skill, judgment and ability to perform the procedure competently may decide to participate in the procedure”.

The manager approached the employer via her Director of Endoscopy program and was given permission to develop this new role for the nurses.

The nurses were consulted and it was decided that only a limited number of nurses would be trained at the beginning so that they would have enough cases to do to maintain their competence. Three full-time nurses agreed to participate in the training program. The training program was developed co-jointly with the manager, physician and the nurses. The program covered the anatomy, physiology, procedural technique, practice sessions making the incision, expected client outcomes, management of complications, supervised clinical practice and demonstrated competency. Once the physician felt the nurse was competent in this new role a written record was provided to the nurse and the employer to be put in the employee personal file.

A study was done at the Ottawa Hospital General Campus by a fellow resident for a comparison between the physician assisting with the PEG insertion (PAPEG) and the nurse assisting with the PEG insertion (NAPEG) in terms of safety and effectiveness. This data of 97 PEG insertions was collected between 2004 and 2006. Nurses assisted with 52 cases (54%) and the physicians performed 45 PEG insertions (46%).

Patient demographics, indication for the procedure, success, duration, and major and minor complication rates were recorded and compared from both study groups. The average age of the patient was 71 years old (and ranged from 18-96 years), 62 men and 35 women.

The indications for this procedure involved patients with central nervous system disorders (ALS, dementia, cerebral palsy, multiple sclerosis, muscular dystrophy, metastasis) 42 (42%), post-operative ENT surgery 22 (23%), post cerebral vascular accident 19 (20%), external esophageal compression and venting 14 (14%). The average follow-up was 88 days (1 to 640 days).

All of the procedures were successfully completed in both groups. The mean operative time was 21 minutes for NAPEG compared to 20 minutes for PAPEG.

The complication rates, within the first month after insertion or up to the time of discharge from the hospital, was 5.7% (3) versus 6.7% (3) for major complications (peritonitis, cellulitis, retro peritoneal hematoma and death) and 13.5% (7) versus 8.9% (4) for minor complications (leaking of tube, minor infection, minor bleeding, tube blockage) for NAPEG and PAPEG. The NAPEG group tended to have more minor complications but overall the difference between the two groups was not statistically significant. In the first month after insertion of the PEG approximately 8% (NAPEG) and 11% (PAPEG) were replaced or removed.

REMINDER

As per Bylaw 22.12 all CSGNA Chapters shall submit to their Regional Director by December the 31st the Chapter’s financial report.
These findings showed that NAPEG is as effective as PAPEG. The complications between the two groups showed no significant difference. The duration of the procedure with 2 physicians, compared to one physician and one nurse was similar. Nurses assisting with PEG may be an efficient consideration in centres where there is no other physician available for the PEG insertion. These nurses require adequate training and must demonstrate cognitive and technical competence to perform the procedure. They should also continue to improve their knowledge, skill and judgment in relation to the procedure. You must check with the college of nurses of your province as the guidelines could be different.

**BIBLIOGRAPHY**


College of Nurses of Ontario, The Standard of Care, Decisions about procedures and authority.

I was very pleased to hear that 40 nurses wrote the certification exam this year. The important thing to remember whether or not you succeeded is that you are now more knowledgeable than before. Congratulations to the ones who registered and committed to writing the exam! We are very proud of all who wrote. I encourage CSGNA members to take the challenge and do the certification program. Certification validates the GI Nurse with acquired knowledge and skills in many practice settings. We are here to support you.

On April 26th I had the pleasure of attending the Vancouver Island Chapter Annual Workshop. This was very well attended with 60 attendees who had traveled from every area of the island. It was a very informative day including the following topics: pathology, the G.I. tract, G.I. bleeds and coagulation. It was an event thoroughly enjoyed by all that attended. A great workshop done by Charlene McCabe and the Vancouver Island Chapter.

I have received several applications for the CSGNA Annual Scholarship Award. We encourage members that do not win to reapply next year. The applicant cannot have received this award in the previous two years.

Olympus has generously allocated scholarships for $1000.00 for 15 nurses. To apply you must be an active member of CSGNA for at least 1year. Applications need to be submitted, with a copy of your CSGNA membership card, to Lara M. Shub, Director of Marketing, Olympus Canada, 151 Telson Rd, Markham, Ontario, L3R 1E7. The deadline to submit your name is August 1st, 2008. If you have any further questions, please let me know.

I am extremely pleased with the number of New Member Scholarship Award applications received to attend our National Conference. Our Society is growing and expanding. I look forward to meeting many new members in Vancouver.

The National Conference in Vancouver is fast approaching. Early registrations must be faxed or postmarked by midnight July 25, 2008. The Vancouver Chapter and the Planning Committee have a wonderful conference planned for you. We have added pre-conference workshops on Sept 11th: abdominal pressure assistance during colonoscopy, which will be offered at 0900 and 1300 and ERCP for endoscopy nurses.

This course includes anatomy of the biliary and pancreatic systems, why ERCP, radiological imagery, radiation protection, complications, patient teaching and a ‘hands on’ component with ERCP equipment. This workshop will be dependant on a minimum number of registrants and will be cancelled if not met by July25, 2008. Please get your applications in early if you are planning to attend.

I would like to congratulate all the nurses who successfully achieved their Canadian Gastroenterology Certification. I would also like to thank the Chapters’ Executive for promoting CSGNA, organizing educational events and offering the members an opportunity to share their practice, questions and concerns with colleagues from other institutions and company representatives. It is because of their effort that these learning sessions are so successful and enjoyed by all who attend.

The Montreal Chapter organized an evening educational session on Eosinophilic Esophagus by

Respectfully submitted by,

Maryanne Dorais RN CGN(C)
CSGNA Education Director

**DIRECTOR OF CANADA CENTRE REPORT**

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The Montreal Chapter organized an evening educational session on Eosinophilic Esophagus by
Dr. Peter Ghalli. The cocktail and buffet was sponsored by Nycomed. The event was attended by 30 participants. The Chapter Executive is in the process of organizing a day conference for September 2008.

The Ottawa Chapter hosted a day conference on April 26, 2008, which was very successful. The various topics made the conference quite interesting: Leadership: The Art of possibility, Colorectal Assessment Centre, Pancreatic Cyst, Eosinophilic Esophagitis, African Experience from a Surgeon and Endomucosal Resection. Twelve companies demonstrated their products and were available to answer questions. The event was attended by 45 participants.

The Greater Toronto Chapter had an educational day conference on May 3, 2008. The subjects were very informative: Gastric Varices and their Treatment, Nurse performed Flexible Sigmoidoscopy Pilot Program and Antibiotics Resistant Organisms: MRSA, VRE, ESBL. A new Chapter Executive was also elected. Members of the CSGNA National Conference 2009 planning committee updated the members with their plans.

The Golden Horseshoe Chapter hosted an educational day conference on April 26, 2008. A variety of topics informed the 67 attendees on: Diet, Exercise and Prevention of GI Malignancy, Pacemakers and ICDs during Electrosurgery, Nurse performed Flexible Sigmoidoscopy Pilot Program, We scoped, We performed Flexible Sigmoidoscopy ICDs during Electosurgery, Nurse of GI Malignancy, Pacemakers and Hemachromatosis. Eleven companies sponsored and demonstrated their products.

The South Western Chapter organized an educational session on May 22, 2008 with Dr. Bacchus presenting on ERCP. Twenty participants attended the event which was sponsored by Fusion.

I would like to wish everyone a nice and safe summer.

Respectfully submitted by,
Monique Travers RN, CGN(C)
Director of Canada Centre

DIRECTOR PRACTICE REPORT

Please continue to send your questions. Guidelines and statements are an ongoing work in progress with some new directions from CSA. I will keep you posted. Please let me know if you come across any interesting articles or have any questions.

Please email: stefanac@rogers.com

Respectfully submitted by,
Branka Stefanac BScN,
RN CGN (C), CPN (C)
Practice Director

CANADA WEST DIRECTOR REPORT

REGINA

On Friday May 16 the staff at the Regina General Hospital held a ‘Come and Go Coffee Party’ for GI Nurses Day. They offered some free draws and the manager, Shannon Cote, toured people through the unit. It was an excellent opportunity for other areas to see the unit and was well attended. The Pasqua Hospital held a coffee party, which was also a success. The chapter plans to have a meeting in June, before everyone is away on vacation, to do some further planning for the annual GI day in October. Have a great summer and we look forward to seeing everyone at the fall conference in Vancouver.

EDMONTON

The Edmonton Chapter sends congratulations to their sister chapter in Calgary for hosting an excellent spring conference! They are now in the process of planning the fall Alberta bi-annual conference which will be held on Saturday, October 25th. Look for “GI Nurse’s Update” on the website soon.

A good mix of new and re-new members, along with the curious attended the second annual Membership Blitz! This Wine and Cheese Event allowed for some casual mingling. Displays and a presentation told the story of CSGNA and of the chapter’s activities, goals and achievements. Once again, they are looking forward to many new faces joining! They would like to thank the event sponsor, Kevin Sherwin, from Boston Scientific.

They have had an interesting and full year of educational opportunities. They didn’t have to look far for experts to present topics as they are fellow chapter members. Since the start of 2008, inservices have been held at meetings on photodynamic therapy, ostomy complications, GI motility (high-resolution manometry), Aklavik (H. Pylori study), weight management in pediatrics and the spring conference in Calgary. With the summer break fast approaching, the final e-newsletter and hopefully a presentation on Humira, will end the year.

The final journal review for this year will be at the June meeting. This will also be the final journal review chaired by founder Anna Stephenson, as she is leaving GI Pediatric Nursing to pursue her new career with Pediatric Weight Management. Anna was instrumental in rebuilding the chapter in 2005. She has provided many impromptu and planned presentations and has been the driving force behind the committee submitting a poster.
presentation for the Vancouver Conference on behalf of the chapter. The chapter members wish Anna much happiness in new endeavors and will miss her very much!

CALGARY
The Calgary Chapter is winding down for summer holidays. They are planning Dine & Learn sessions, the first in the middle of June and then into October. Two of the topics will be “The Ins & Outs of Bowel Prep.” and “Assessment before Sedation: A Review.”

The Calgary Executive would like to wish everyone a safe & sunny summer. See y’all in Vancouver.

OKANAGAN
On May 16th, GI Nurses Day, a fabulous luncheon was held to celebrate such a wonderful day. They have been a busy bunch. There have been quite a few educational events. One of the most interesting was a doctor from Calgary who has been involved in setting-up the outpatient screening facility at the University. He came and spoke regarding pros and cons of out-of-hospital facilities and what is required. What a HUGE undertaking, but it is somewhat relevant as they are in the process of planning and designing a brand new Ambulatory Care Unit at the Hospital (very exciting). It will be wonderful to integrate CSGNA standards from the beginning in this new facility.

RN members at Kelowna General Hospital have started doing chart audits (something not done before) on GI outpatients. It has been a great way of increasing awareness of strengths and weaknesses and a good way of growing and bettering patient care. It’s been a really busy time and they are attempting to limit growing pains as they move towards a bigger unit and larger staff.

KAMLOOPS
Kamloops Chapter has two members that have received their GI Certification. The unit is now 100% certified with the nurses in permanent positions. A celebration is planned to honor these two members for their hard work, determination and motivation! An educational session will be held at the same time.

Even though it was a very busy day on GI Nurses Day, it was celebrated with enthusiasm and a cake.

Many members from the chapter will be attending the National Conference in Vancouver and are looking forward to September.

CENTRAL ALBERTA
In April, the Central Alberta Chapter held a successful dinner meeting featuring Dr. Syd Bass speaking on stents. Thanks to Kevin Sherwin of Boston Scientific for sponsoring this event.

Plans have started for a spring conference in 2009. The three Alberta chapters hope to rotate conferences so that there will be one held in the province each spring and fall.

Chapter business meetings, held every 2 months, continue to have a core group of enthusiastic workers with ideas to keep us busy for a long time to come. There is also much interest in the upcoming National Conference in Vancouver. This will be the first year that the chapter will financially support chapter members to attend.

MANITOBA
Manitoba Chapter is looking forward to the final meeting of the year, which will be held on June 19 at the Victoria General Hospital in Winnipeg. The guest speaker will be Dr. Cliff Yaffe who is a well-known surgeon in Manitoba and dedicated associate member of the chapter. He will be presenting on Linitis Plastica.

The research project is progressing well and they continue to receive responses as well as requests to participate. The deadline for participation has been extended to the end of June so that those who still want to be included can respond.

The journal club is continuing to attract interest and appreciation from the members.

The SGNA course in Salt Lake City was awesome and Susan Drysdale states that she personally appreciated being able to network with other CSGNA members who attended.

The chapter members have started to show interest in attending the National CSGNA meeting in Vancouver in September and have requested funding assistance toward attendance. The chapter is still actively recruiting and advertising for new members to join CSGNA. The year to date has been busy and totally rewarding.

VANCOUVER ISLAND
The Vancouver Island Chapter held their annual Education Day April 26/08 at the Royal Colwood Golf Course with huge success. Fifty five guests registered - 27 CSGNA members and 28 nonmembers. Many of the nonmembers took application forms and two signed up that day. Fourteen vendors supported the event. Speakers were: Dr. Reg Smith on “Clot Busters”, Dr. Al Buckley on “G! I am Bleeding”, Dr. Al Hayashi on “Hi, I’m Joe’s GI Tract”, and Dr. Shamus Kelly on “Pathology of the Gut”. Guests were from Campbell River, Comox, Nanaimo, Cowichan, Salt Spring Island and Victoria. The chapter was very pleased to welcome Maryanne Dorais, President of the Kamloops & Region Chapter who donated a Core Curriculum book.

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Information regarding the CSGNA National Conference in Vancouver, September 2008 and the ERCP seminar was announced. Elections were held with the following results: Secretary, Vicky Oberg, Treasurer, Marilyn Doehnel and President, Corrie Osborne.

**VANCOUVER**

The Vancouver chapter would like to recognize three of the nurses who have recently passed the Gastroenterology Nursing Certification exam. Congratulations go to Lorraine Lafleche, Dee Nap and Patina Sibbault.

The brochures have been sent to all the members for the conference “Expanding our Scope”. We are excited to be a part of this conference and are looking forward to seeing many nurses attend. The educational program and networking opportunities at the social events promise to be a lot of fun.

Respectfully submitted,
Joanne Glen, RN, CGN(C)
Director Canada West

**NOVA SCOTIA CHAPTER**

The Nova Scotia Chapter has been keeping a low profile and will continue to do so during the summer months. However, we plan to host an exciting Education Day in November. Our focus will be on STENTING. You will see the topics in this edition of *The Guiding Light*, and on the website. Our members will be receiving the registration forms and program later in the summer.

Evelyn McMullen, President
Nova Scotia Chapter

**NEW BRUNSWICK / PEI CHAPTER**

Finally the warm weather has arrived! We had our GI education day in April, with a great attendance! Sponsorship from AMT Electrosurgery, Axcan Pharma, Boston Scientific, Conmed, Cook Canada, Johnson & Johnson and Olympus made this day possible. Thank you. Congratulations to Pamela Wood from Fredericton, New Brunswick, who passed her GI certification exam! Hoping that everyone has a great summer and enjoys their vacation.

Tracey Pyne, President
NB / PEI Chapter

Respectfully submitted by
Mabel Chaytor RN, CGN(C)
Canada East Director ♦

**MARKET PLACE**

The shopping has started for new market place items. We have our new logo to show off! One suggestion was for warm up jackets. Any ideas would be much appreciated. All monies go towards scholarships and education.

Canada East chapters report the following:

**CHANGE OF NAME/ADDRESS**

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(Send change of name/address to the CSGNA Executive Assistant)
The Role of the Registered Nurse in Percutaneous Endoscopic Gastrostomy Tube Placement

Position Statement

The CSGNA supports the position that a registered nurse experienced and educated in gastroenterology nursing and endoscopy may perform the advanced role of the nurse. This role is subject to the approval of the provincial licensing body, the physician and the employer. The nurse performing the advanced role must have the necessary training as outlined by the provincial licensing body.

The CSGNA supports the inclusion of the following:

- Anatomy;
- Physiology;
- Pathophysiology;
- Procedural techniques;
- Expected client outcomes;
- Management of complications;
- A supervised clinical practice; and
- Demonstrated competency.

The advanced role can only be carried out under the direct supervision of a qualified physician. The nurse is accountable for the responsibilities she/he accepts. When a nurse is functioning in the advanced role, a second registered nurse must be present to monitor the patient, administer medication as ordered, maintain a patent airway and monitor the tolerance of the procedure and documentation.

Definition

Percutaneous endoscopic gastrostomy tube (PEG) placement is an endoscopic technique for placing a gastrostomy tube or jejunostomy tube for enteral feeding.

Background

The primary role of the nurse is maintenance of patient safety through continuous assessment of the patient’s condition and intervention as necessary.

The advanced nursing practice role of the nurse/delegated medical act may include assisting the physician with manipulation of the endoscope, snaring the wire, insufflation of viscera, local infiltration, incision, trocar placement, threading the wire and positioning of the gastrostomy tube.

Disclaimer

Canadian Society of Gastroenterology Nurses and Associates (CSGNA) assumes no responsibility for the practices and recommendations of any member or other practitioner or for the policies and procedures of any gastroenterology unit.

Bibliography

The registered nurses scope of practice. Saskatchewan registered nurses association 1993.
NOMINATION FORM

Please complete this form and submit to the Chair of the Nominations Committee (currently the President of the CSGNA) 150 days (April 15, 2008), before the Annual Meeting for National Office. Ballots will be sent to active members 120 days before the Annual Meeting and must be returned within 90 days.

Candidates must be active CSGNA members in good standing.

Please include a curriculum vita with the nomination form.

Name of nominee: ______________________________________________________________
Address: _______________________________________________________________________
Phone: (home) _____________________________ (work) ______________________________
Employer: ______________________________________________________________________
Title: ___________________________________________________________________________
Education: _____________________________________________________________________
CSGNA member since: ___________________________________________________________
Offices held: __________________________________________________________________
Committees: ____________________________________________________________________
Other related activities: __________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
Explain what has led you to chose to run for national office? ________________________
________________________________________________________________________________
________________________________________________________________________________
I hereby accept this nomination for the position of _________________________________
Dated this _______ day of _______________, 20___. Signed __________________________
Nominated by ________________________________ & _______________________________
SEPTEMBER 11-13
Sheraton Vancouver Wall Centre Hotel
British Columbia

Canadian Society of Gastroenterology Nurses & Associates
Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés
CSGNA 2008   Sheraton Vancouver Wall Centre Hotel  . Vancouver, British Columbia

conference objectives

- To encourage camaraderie and networking on a global basis
- To provide current information in the specialty of gastroenterology
- To encourage the exchange of clinical and research information
- To provide nurses with the opportunity to experience what is new and upcoming in both medical devices and pharmacology
- To promote membership in the CSGNA
- To participate in the planning and future direction of the CSGNA

complete program & registration available on line at
www.csgna.com

keynote speakers

Patricia Raymond  MD FACP FACG
Gastroenterologist & Author
Rx for Sanity: Triage, Love & Laughter

Charmaine Crooks
Olympian
Winning, Working Women: Setting Our Priorities and Balancing Our Acts

venue

Vancouver is a dynamic, multicultural city set in a spectacular natural environment. Majestic mountains, sparkling ocean, rainforests and beautiful foliage — you can enjoy world class shopping, gourmet meals, outstanding live entertainment, sporting events, theatre, outdoor adventure, spectacular sights and attractions . . . it’s all waiting for you in Vancouver. Come to CSGNA 2008 and explore VANCOUVER while you’re here! Visit www.tourismvancouver.com

pre-conference workshops

ABDOMINAL PRESSURE ASSISTANCE DURING COLONOSCOPY
Dorie Werner  RN BSN CGRN
This workshop will give an overview of the whys and hows of loop formation of the large bowel during colonoscopy, as well as describing different abdominal pressure techniques that will facilitate successful and efficient colonoscopy.

This workshop is a separate cost of $50.00

ERCP FOR ENDOSCOPY NURSES
Christopher Stabler  MD FRCP
This workshop will promote CSGNA standards and practice guidelines to GI nurses who perform and provide care to the ERCP patient and will empower nurses in the field of gastroenterology nursing.

This workshop is a separate cost of $175.00

social highlights

HARBOUR CRUISE – Join us aboard the refurbished MV-BRITANNIA for a unique Vancouver experience – an inner harbour cruise offering unparalleled panoramic views of the city skyline, the surrounding Coastal Mountain range and many of the area’s most famous landmarks! The MV-BRITANNIA is Vancouver’s largest privately-owned cruising vessel . . . and boasts a delicious “SEA TO SKY TAPAS” Reception! Check out this event at: www.boatcruises.com

A NIGHT AT THE VANCOUVER AQUARIUM – Join the CSGNA 2008 Planning Committee for a remarkable evening amidst the beautiful marine life and scenery. Guests will be able to meander around the exhibits at their leisure, while sampling hors d’oeuvres and local cuisine. A memorable combination! Check out this event at: www.vanaqua.com

accommodation

SHERATON VANCOUVER WALL CENTRE HOTEL
1088 Burrard Street, Vancouver, BC  V6Z 2R9
604-893-7120 (direct telephone)
800-663-9255 (toll free telephone)
800-325-3535 (central reservations)
reservations@wallcentre.com (email)

CSGNA 2008 requests your support of the conference by staying at the Sheraton Vancouver Wall Centre Hotel for the duration of the conference. Your support will assist CSGNA in meeting its contract expectations — we sincerely appreciate your cooperation.

Regular Room: $225.00 & taxes
Deluxe Corner Room: $255.00 & taxes

Quote “CSGNA 2008” for special group rate, the special rates are available until AUGUST 10, 2008. After this date, the group rates may no longer be available.

Don’t be disappointed . . . book now to reserve your room.
All hotel reservations and arrangements are the responsibility of the delegate.

Should you have any difficulty in making your reservation, please inform Heather Reid 519-652-0364 or hreid@innovcc.ca

register on-line using secured credit card payment at: www.csgna.com

The Guiding Light  19
OLYMPUS CANADA
Your Total Healthcare Partner

At Olympus Canada, we constantly seek creative and customer-centric solutions to help you improve efficiency, minimize costs, and optimize service delivery while enhancing patient care, safety and satisfaction. As your leading healthcare solutions provider, Olympus Canada works with you to:

Deliver the most advanced, specialized endoscopy solutions designed for diagnostic and therapeutic applications.

Develop a wide selection of endoscopy programs within Olympus University, taught by seasoned nursing professionals, for managers, nurses and technicians who want to increase their clinical skills while maintaining quality patient care.

Provide financial and operational expertise through Olympus EndoSite Consulting Solutions that meet the unique needs of Canadian hospital facilities. Our EndoSite advisors, comprised of a highly skilled team of professionals, have hands-on experience working with GI facilities across the country. We examine your GI clinic and measure its performance against other similar facilities using our unique GI Benchmarking Service. We analyze and transform this data into practical, useful information so you can make informed decisions about your operational efficiencies.

From innovative technologies to after sales support,
Olympus Canada is your total healthcare partner.

www.olympuscanada.com

OLYMPUS®
Your Vision, Our Future

KnowledgeVisionSolutions
Dear CSGNA members,

At Olympus Canada, our goal is to continue creating new and better ways to help Canadian GI nurses to preserve and enhance the quality of care they provide to their patients and to assist them in further developing their skills, knowledge and expertise.

We are delighted to announce that Olympus is once again partnering with CSGNA to provide $15,000 worth of educational sponsorship funds for the national conference in Vancouver, September 11 - 13, 2008. This means that 15 nurses are eligible to win $1,000 scholarships to attend this educational meeting.

How to enter:
You are eligible to win the scholarship if you have been an active member of the CSGNA for at least one (1) year. If you are interested in participating, please submit your application with a copy of your CSGNA membership card to Lara M. Shub, Director of Marketing, Olympus Canada, 151 Telson, Rd., Markham, Ontario, L3R 1E7. See application attached.

The deadline to submit your name is August 1st, 2008. The names will be submitted to CSGNA for a random draw. There will be 5 winners from Central Canada, 5 from Western Canada and 5 from Eastern Canada. The names of winners will be announced by August 15, 2008. The names of all winners and photographs will be published in the fall issue of The Guiding Light.

Olympus is committed to providing continued support to Canada’s GI nursing organization. We look forward to seeing you in Vancouver!

Best regards,

Lara M. Shub
Director of Marketing
Medical Systems Group
Olympus Canada Inc.

Application for the Olympus CSGNA Scholarship – Vancouver, 2008

First Name: ____________________________ Last Name: ____________________________

Hospital Name: ______________________________________________________________

Address: _____________________________________________________________________

Telephone: ____________________________

Please attach a copy of your CSGNA membership card.

Please submit your application to: Lara M. Shub, Director of Marketing, Olympus Canada Inc.
151 Telson Rd., Markham, Ontario, L3R 1E7.
APPLICATION FORM
FOR CAG NURSE SCHOLARSHIP PRIZES

The Canadian Association of Gastroenterologists (CAG) scholarship prizes are available to one research nurse and one endoscopy nurse in the amount of $750 each, to be used for travel to the Annual CDDW meeting.

ELIGIBILITY:

1. Current active member of CSGNA for at least two years.
2. Active supporter of CSGNA and objectives.

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:

1. A two page summary of how this scholarship and attendance at the proposed meeting would benefit you in your research/endo-clinical role in gastroenterology, and what self initiated research projects you are involved in.
2. A current Curriculum Vitae.
3. A letter of reference from your Unit Director.
4. Two letters of reference from CAG members.
5. Copy of CSGNA Membership Card.

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR AT THE ABOVE ADDRESS BY DEC 1 OF THE CURRENT YEAR.

NAME: _______________________________________________________________________

CIRCLE ALL THAT APPLY: RN BScN BAN MSN CGN(C) OTHER ______________________

HOME ADDRESS: ______________________________________________________________

CITY: ____________________________________________ PROV: ___________________

POSTAL CODE: ____________________ HOME TELEPHONE: _______________________

FAX: _____________________________ E-MAIL: __________________________________

HOSPITAL/EMPLOYER: _________________________________________________________

WORK ADDRESS: ______________________________________________________________

CITY: ____________________________________________ PROV: ___________________

POSTAL CODE: ____________________ JOINED THE CSGNA IN ___________ (year).

SIGNATURE ________________________________ DATE ____________________
The GI Professional Nursing Award Criteria

Criteria:
- Promotes and enhances the image of GI nurse in her hospital or the community.
- Participates in professional organizations and National activities for CSGNA.
- Demonstrates creative and innovative methods in patient care.
- Acts as a role model and mentor.
- Contributes to improving quality of care of patients and their family.
- Does volunteer work.
- Encourages certification among peers.
- Is committed to continuing education.

Recognition Criteria:
- Member of CSGNA.
- Completion of speciality certification.
- Completion of Bachelor’s degree.
- Completion of Master’s degree.
- Completion of a post-graduate Nursing certificate.
- Award Recipient: Recognized with Provincial, National or International Award.
- Publication: Article, Abstract or Editorial in a Journal.
- Author or co-author of a book.
- Presentation: Presented or co-presented at a conference (either oral or poster).
- Presented at a hospital in service.
- Unit contribution: Has written policies and procedures.
- CSGNA Chapter member, who actively supports and attends CSGNA functions.

The GI nurse must be nominated by at least two nominators who must submit a written statement to support the nomination.

Nominations must be submitted to the CSGNA Education Director by March 30 annually.
The GI Professional Nursing Award

Nomination Form

I __________________________ Name and I __________________________ Name

would like to nominate __________________________________________ Name

Hospital __________________________ for the following reasons:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please include degree of education (RN, Bachelor, Master Etc...) specialty
certification, any publication, presentation, unit contributions.

Nominations must be submitted to CSGNA Education Director by May 31st
Annually.
The Michele Paquette CERTIFICATION/RECERTIFICATION Award

Criteria Overview
An award of $500 will be provided to the selected applicant who is a certified, motivated CSGNA member committed to improving practice and demonstrating excellence in the nursing care of the gastroenterology patient.

Eligibility and Application
The applicant must:
1. Provide a copy of current CSGNA membership with continuous CSGNA membership of at least 2 years for the certification award and at least 5 years for the recertification award.
2. Submit a current Curriculum Vitae.
3. Provide receipt of CNA Gastroenterology Nursing Certification/Recertification in the current year.
4. Provide a personal letter of 250 words or less identifying contributions to one’s own workplace, CSGNA, and/or gastroenterology nursing practice.

COMPLETED APPLICATION WITH SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR BY JULY 31ST OF THE CURRENT YEAR

Name: ________________________________________________________________

Address: ______________________________________________________________________

City: ____________________ Prov: ____________________

Postal Code: ________________ Home Telephone: ____________________

Circle all that apply: RN BSN MSN Other ______________________________________

Hospital/ Employer: ______________________________________________________

Work Address: __________________________________________________________

City: ____________________ Prov: ____________________

Postal Code: ________________ CSGNA member since ________________

Signature: ________________________________________________________________

C/O CSGNA, #201-2902 South Sheridan Way, Oakville, Ont., L6J 7L6.
The CSGNA Chapter Executive Professional Development Award

Criteria Overview:
This award of up to $250 will be awarded to one CSGNA chapter executive to attend a local educational professional development course/program, other than a CSGNA event. Up to $2000 will be devoted for this professional development activity.

Eligibility and Application:
The applicant must provide the following to be considered for this award:
1. Provide copy of current CSGNA membership with continuous CSGNA membership for at least 2 years.
2. Submit a current Curriculum Vitae.
3. Provide a copy of the educational registration form and educational event fee.
4. Provide a personal written letter of 250 words or less how this award would enable the CSGNA executive member to gain new knowledge and skills that would contribute to one’s own CSGNA Chapter, workplace, and/or gastroenterology nursing practice.
5. Submit a copy of attendance and educational event fee receipt.

APPLICATION FORM AND SUBMISSION MUST BE RECEIVED BY THE EDUCATION CHAIR BY 30 DAYS PRIOR TO THE EDUCATIONAL EVENT

Name: ____________________________________________________________
Address: ______________________________________________________________________________________
City: ________________________________________ Prov: ________________________________
Postal Code: __________________ Home Telephone: _______________________
Circle all that apply: RN BSN MSN Other _____________________________________
Hospital/ Employer: _________________________________________________________________
Work Address: _________________________________________________________________
City: _____________________________ Prov: ______________________________
Postal Code: ______________________ CSGNA member since- _____________
Signature: ________________________________________________________________
The CSGNA Professional Development Scholarship Award

Criteria Overview:
The CSGNA Professional Development Scholarship Award of up to $2000 is to be used for travel, accommodation, and registration fees for a CSGNA member to attend any educational course/program other than a CSGNA event. Up to $10,000 will be devoted for professional development activity.

Eligibility and Application:
The applicant must:
1. Provide a copy of current CSGNA membership with continuous CSGNA membership of at least 2 years.
2. Submit a current Curriculum Vitae.
3. Provide a copy of the educational registration form along with a proposed budget for course fee, travel, and accommodation.
4. Provide a personal written letter of 250 words or less identifying how this scholarship would enable the CSGNA member to attain professional development and contribute to one’s own workplace, CSGNA, and/or gastroenterology nursing practice.
5. Submit a copy of attendance and receipts for course fee, travel, and accommodation following the educational event.
6. The applicant may only apply once every three years.

APPLICATION FORM AND SUBMISSION MUST BE RECEIVED BY THE EDUCATION CHAIR 45 DAYS PRIOR TO THE EDUCATIONAL EVENT

Name: __________________________________________________________________
Address: __________________________________________________________________
City: _____________________________ Prov: _____________________________
Postal Code: _____________________ Home Telephone: _____________________
Circle all that apply: RN BSN MSN Other ____________________________________
Hospital/ Employer: ______________________________________________________
Work Address: __________________________________________________________________
City: _____________________________ Prov: _____________________________
Postal Code: _____________________ CSGNA member since- ______________
Signature: __________________________________________________________________
APPLICATION FORM
FOR CSGNA ANNUAL NEW MEMBER SCHOLARSHIP AWARD

The Annual New Member National Conference award of $1,500.00 is to be used for travel and accommodation to the Annual National Conference in Canada. Open to members new to CSGNA in the year prior to the conference.

EXCEPTIONS:

1. New member is defined as never previously holding membership with CSGNA.
2. Current members of the Executive and Conference Planning Committee are not eligible for this award.
3. Scholarship is available only to active members.

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:

1. A written summary of how this scholarship and attendance at the proposed meeting would benefit you in your work.
2. A current Curriculum Vitae.
3. Outline projected financial needs to attend this meeting.
4. Geographical location and related travel expenses will be taken into consideration by the Education Committee when scoring applications.
5. Copy of CSGNA Membership Card.

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR AT THE ABOVE ADDRESS BY JUNE 1 OF THE CURRENT YEAR.

NAME: ______________________________________________________________

CIRCLE ALL THAT APPLY: RN BSN BAN MSN OTHER __________________________

HOME ADDRESS: ________________________________________________________

CITY: ____________________________ PROV: _______________

POSTAL CODE: ____________ HOME TELEPHONE: ________________

FAX: ___________________________ E-MAIL: _______________________

HOSPITAL/EMPLOYER: _________________________________________________

WORK ADDRESS: ________________________________________________________

CITY: ____________________________ PROV: _______________

POSTAL CODE: ____________ JOINED THE CSGNA IN _________ (year).

SIGNATURE _______________________________ DATE _______________
MEMBERSHIP APPLICATION

(CHECK ONE)

☐ ACTIVE $75.00
Open to nurses or other health care professionals engaged in full- or part-time gastroenterology and endoscopy procedure in supervisory, teaching, research, clinical or administrative capacities.

☐ AFFILIATE $75.00
Open to physicians active in gastroenterology/endoscopy, or persons engaged in any activities relevant to gastroenterology/endoscopy (includes commercial representatives on an individual basis).

☐ RETIRED $37.50
Open to members not actively engaged in gastroenterology nursing practice.

☐ LIFETIME MEMBERSHIP
Appointed by CSGNA Executive.

FORMULE D’APPLICATION

(COchez UN)

☐ ACTIVE 75,00$ 
Ouvert aux infirmières et autres membres de la santé engagés à plein ou demi-temps en gastroentérologie ou procédure endoscopique en temps que superviseurs, enseignants, recherches application clinique ou administrative.

☐ AFFILIÉE 75,00$ 
Ouvert aux médecins, actifs en gastroentérologie endoscopique ou personnes engagés en activités en gastroentérologie/endoscopiques incluant représentants de compagnies sur une base individuelle.

☐ RETRAITÉ 37,50$ 
Ouvert aux membres non engagés activement dans la pratique infirmière en gastroentérologie.

☐ MEMBRE À VIE
Nomme par l’exécutif.

APPLICANT INFORMATION / INFORMATION DU MEMBRE

Please print or type the following information / S.V.P. imprimer ou dactylographier l’information

SURNAME 
NOM DE FAMILLE __________________________________________________

FIRST NAME 
PRÉNOM __________________________________________

MAILING ADDRESS 
ADDRESS DE RETOUR _________________________________________________________________________________________________

CITY 
VILLE _________________________ 
PROV. ___________ 
POSTAL CODE _______________

HOME PHONE 
TELEPHONE ( ) ____________________ 
LOCAL ______________________

E-MAIL: ______________________________________________________________________________________________________________

HOSPITAL/OFFICE/COMPANY NAME 
NOM DE HÔPITAL/BUREAU/COMPAGNIE _________________________________________________________________________________

BUSINESS PHONE 
TELEPHONE TRAVAIL ( ) ____________________ 
EXT. ____________________ 
LOCAL ______________________

TITLE/POSITION ______________________________________________________________

CHAPTER NAME 
NOM DU CHAPITRE __________________________________________________________

EDUCATION (CHECK ONE)  
ÉDUCATION (COchez UN)  
☐ RN IA  ☐ RPN/LPN I AUX 
☐ TECH ☐ OTHER (EXPLAIN) AUTRE (SPÉCIFIEZ) ______________________

CNA MEMBER YES/NO  
MEMBRE AIC OUI/NON ☐ CNA CERTIFICATION IN GASTROENTEROLOGY 
CERTIFICATION EN GASTROENTÉROLOGIE DE L’AIIC

MEMBERSHIP (CHECK ONE)  
ABONNEMENT (COchez UN) ☐ RENEWAL RÉNOUVELLEMENT ☐ NEW NOUVEAU

Please make cheque payable to CSGNA 
(Mail with this completed application to the above address) Prière de libeller le chèque à CSGNA  
(Envoyez avec cette formule d’application dûment remplie à l’adresse ci-haut mentionnée.)
APPLICATION FORM
FOR CSGNA ANNUAL SCHOLARSHIP AWARD

The Annual National Conference award of $1,500.00 is to be used for travel and accommodation to the Annual National Conference in Canada.

EXCEPTIONS:

1. Applicant cannot have received THIS award in the previous two years.
2. Current members of the Executive and Conference Planning Committee are not eligible for this award.
3. Scholarships are available only to active members.

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:

1. A written summary of how this scholarship and attendance at the proposed meeting would benefit you in your work.
2. A current Curriculum Vitae.
3. Please specify your past involvement in the CSGNA: e.g., acted as speaker at a meeting, actively recruited new members for CSGNA, aided in the formation of a local Chapter, served on an Ad Hoc Committee, and any Newsletter articles submitted. Describe your current involvement with your Chapter: e.g., fundraising or planning Chapter conferences.
4. Outline projected financial needs to attend this meeting.
5. Geographical location and related travel expenses will be taken into consideration by the Education Committee when scoring applications.
6. Copy of CSGNA Membership Card.

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR AT THE ABOVE ADDRESS BY JUNE 1 OF THE CURRENT YEAR.

NAME: _______________________________________________________________________

CIRCLE ALL THAT APPLY: RN BSN BAN MSN OTHER ____________________________

HOME ADDRESS:__________________________________________________________________________

CITY:__________________________________________ PROV:_____________________

POSTAL CODE:________________ __ HOME TELEPHONE: _____________________

FAX: _____________________________ E-MAIL: ______________________________________

HOSPITAL/EMPLOYER: ___________________________________________________________

WORK ADDRESS: ________________________________________________________________

CITY:__________________________________________ PROV:_____________________

POSTAL CODE:________________ __ JOINED THE CSGNA IN ________ (year).

SIGNATURE ____________________________ DATE ___________________
CSGNA EDUCATION COMMITTEE
POINT SCORING SYSTEM
FOR AWARDING SCHOLARSHIPS

Each year as a member (cumulative points) 1 Point
Each year served on National Executive (cumulative points) 3 Points
Each year served on Annual Conference Planning Committee (cumulative points) 3 Points
Each year served on Chapter Executive (cumulative points) 2 Points
Each time submitted an article for publication in The Guiding Light 2 Points
Outlines geographical location and travel expenses 1 Point
Can demonstrate actively recruited members 1 Point
Each time has acted as speaker at a CSGNA conference or seminar 2 Points
Outlines geographical location and travel expenses 1 Point
Actively participates in Chapter events (E.G.) fundraising 1 Point
Each year as a member on the planning committee for a regional conference 1 Point

CGN(C) 3 Points
CBGNA certification 1 Point
Typed format 1 Point

REVISED September 2002
CSGNA 2007-2008 Executive

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MEMBERSHIP DIRECTOR
Send any inquiries regarding membership to the CSGNA executive assistant. The address and other information are listed at the bottom of this page.

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Oakville, ON L6J 7L6
[905] 829-8794
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