



The Guiding Light

CANADIAN SOCIETY OF GASTROENTEROLOGY NURSES & ASSOCIATES

MARCH 2008 VOL. 17 #63

INTO AKLAVIK'S HEART THROUGH THE STOMACH

What do you get when you put together a team of gastroenterology doctors, endoscopy nurses, and service aides together with endoscopy units (provided by Olympus manufacturers) and send them up north to Aklavik, NWT.? ... You get an absolutely fantastic lifetime experience doing the job you love!

On February 3 -9, 2008, I was able to be a part of a 25 member team (mostly from Edmonton, AB.). We settled into the small community of Aklavik, NWT, to examine the stomachs of 200 residents. The community has a higher incidence of stomach cancer and the Helicobacter Pylori (H. Pylori) bacteria. H. Pylori is a leading cause of stomach ulcers and cancer. We did nasogastric scoping with simple nasal freezing instead of the more common oral gastroscopy with sedation. This allowed us to scope



the community members in a quick, yet smooth and efficient manner. We were able to quickly detect any stomach ulcers or cancers. Biopsies for the H. Pylori bacteria were taken. These specimens were flown daily back to Edmonton. They are presently being cultured to determine what type of antibiotic works best. From the initial Breath test, we learned that about 55% of the volunteers were positive for H. Pylori.

The community welcomed us with 'warm' open arms. They now wait, with anticipation, for the results of this study. *We went to see their stomachs, but instead they touched our hearts!*

Kathy Korner RN
Endoscopy, Royal Alexandra Hospital
Edmonton, Alberta

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President's Message

2008 is a year in which CSGNA is implementing many of the changes requested by members to meet their continuing educational needs. The first of an expanded program will be offered at our national conference in Vancouver. On September 11, a full-day basic ERCP course will be presented as well as a session on abdominal pressure during colonoscopy. The latter will be given by Dorie Werner, President of the Rocky Mountain Region of the Society of Gastroenterology Nurses and Associates (SGNA). Dorie has made this presentation in several centres in the US and it is a topic that has frequently been noted on evaluations as one of interest. There will be a lecture component plus hands-on practice in this presentation.

Another area in which CSGNA has addressed areas for improvement, was to hire an event planner for national conferences commencing in 2008. The hiring of a company taking on this task addresses numerous concerns raised by attendees from previous years. Members will be able to register online utilizing a credit card and will find that the entire meeting will flow more smoothly than in the past. This flow will result from a professional attending to the many duties, we, as volunteers, did to the best of our

abilities and talents. However, our strengths are in our GI nursing practice in its variety of settings. We look forward to your evaluations in Vancouver to review and continue to improve our annual meeting. As we envision the future, we plan to include practice issues and talks which will apply to the beginner as well as the experienced GI nurse. These will include presentations in the clinical practice setting with adults and children, research, and management content specific to our specialty. These changes will not occur overnight, but we are confident that you will see significant positive changes over the next few years.

As we look forward to challenges in infection control, patient safety, decreasing wait times for gastroenterology procedures, increasing access to colon cancer screening, and developing standards based on evidence based practice, we rely on our content expert members to keep us apprised of their ongoing learning needs. Only with this input and attainment will we grow as a Society and as professionals in providing the best care to those we serve.

Respectfully submitted,
Debra Taggart RN, BN, CGRN, CGN(C)
CSGNA President 2006-2008

Call for Research Participants

Study

The Incidence of Upper Extremity Injuries in Canadian Nurses Working in Endoscopy

We are looking for nurses who work in the practice of endoscopy in any setting in Canada. This project does not require any undue hardship for its participants. The process involves answering two research questionnaires and submitting them to the principal researcher. Research packages will be sent to each subject and they will include a description of the study, a consent form, explicit instructions on participation, a questionnaire about work habits and including minimal personal data, and the DASH questionnaire which was designed to measure upper extremity disability. Also included will be a self-addressed and stamped envelope. Participants will be informed of

the findings of the study. Strict confidentiality will be maintained.

If interested in becoming involved in the study, please contact:

Susan Drysdale RN, BA, CGRN, CGN(C)
President Manitoba Chapter CSGNA
(Canadian Society of Gastroenterology Nurses
and Associates)
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Phone: (204) 237-0891 (H)
(204) 955-1891 (Cell)

Call For ABSTRACTS

The process involved in entering a presentation or poster at the national CSGNA annual conference is to present an abstract to the CSGNA national office by May 31, 2008. You can submit your abstract, by email, to CSGNA Education Chair – Maryanne Dorais 1048 Wildwood Drive, Kamloops, BC., V2C 5E2, maryannedorais@shaw.ca by the listed deadline.

Please limit the abstract to one page, including:

Theme – background information on the area of focus

The following are some ideas of possible topics/themes:

- Development of orientation tools for GI departments
- Occupational Health issues in GI nursing
- Teaching strategies for patients and staff
- Barriers to staff development
- Successful change strategies in GI departments
- Staffing competencies – develop, implement, and evaluate
- Financial management
- Inventory management
- Evaluation process
- Developing a philosophy for a GI unit
- Special interest groups – Manometry, ERCP, Endoscopy, EUS, Capsule Endoscopy Hepatology, Research, Nurse Endoscopist, Pediatric, Pulmonary, Infection Control, Reprocessing
- Disease process
- New equipment or procedures

Objectives to include significance, purpose, and methodology

Cover Sheet to include the title of the abstract, names of all presenters/authors with credentials and place of employment/academic affiliation. Please indicate main contact's phone number, email address and fax number.

Description of content and presentation should include background information, planning, implementation and evaluation.

Conclusion, including the outcomes, results, implications, or professional development.

Other Information

- Selected abstract(s) will be developed into a poster presentation by the author(s).
- Posters will be displayed in a prominent location at the conference.
- A 30 minute time period will be designated for the authors to discuss the poster and answer questions that delegates may have.
- All abstracts will be acknowledged upon receipt.
- Selection will be completed and acknowledged by June 30, 2008

All authors are responsible for any expenses incurred in preparing and presenting their poster (including registration and travel expenses).

Selection Process

The Education Committee will complete a blind review of the educational poster and selection is based on the following criteria:

- Theme
- Relevance to the conference
- Clarity
- Impact on GI Nurses and Associates
- Impact on patient outcomes
- Originality

Education Events

Vancouver Island GI Education Day

April 26, 2008 • 0800 - 1600

The Colwood Golf Course

For further info about topics and registration,

Please contact: charlene.mccabe@viha.ca

Calgary Education Day

What's Up Doc? A brief introspection into some ailments of the upper GI tract

April 12, 2008 • 0730 - 1630

Coombs Theatre, The Foothills Hospital

For further information, contact a chapter executive



**MEMBERSHIP RUNS FROM
JUNE 1ST TO MAY 31ST
ANNUALLY**

National Board Vacancies for Sept. 2008

It's time again to consider becoming actively involved in CSGNA by sending in your nomination form for a National Executive position. National positions are a two-year commitment and open only to active members. With service at this level, comes the enriching experience and personal growth that can only be gained by promoting our speciality.

In conjunction with National positions comes a commitment to CSGNA. Directors must attend all Annual Conferences and Face-to-Face meetings, participate in teleconferencing and e-mail meetings. They must submit reports to each issue of *The Guiding Light*, so that our membership stays up to date with the association and its activities.

Positions available for the 2008-2010 term and a short job description of each follows:

Newsletter Editor: sets guidelines and deadlines for submission to *The Guiding Light* three times a year, approves final version of edited newsletter prior to printing, ensures mail out of newsletter, and archives previous newsletters.

Practice Director: initiates new CSGNA practice guidelines, position statements and standards, updates existing guidelines and position statements and serves as a resource person for membership regarding practice.

President-elect: accedes to President when President's term ends, chairs the Bylaws Committee and serves as CSGNA liaison to the Canadian Nurses Association (CNA) and the Society of International Gastroenterological Nurses and Endoscopy Associates (SIGNEA).

Public Relations Director: maintains and updates the website, acts as chair of Vendor Relations Committee,

serves as resource person for the vendors, acts as Chair of GI Nurses Day by establishing a theme and liaises directly with the event planner for national conferences.

Regional Director – Canada Centre: encourages and assists chapters in the region, liaises with the Chapters, and reports on Chapter activities to the National Board. The nominee must be a member of Canada Centre to be eligible for this position.

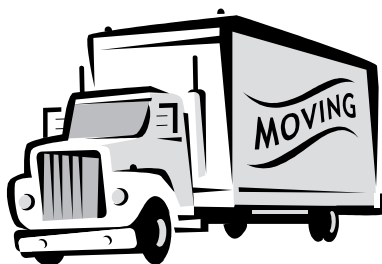
Regional Director – Canada West: this position is vacant for one year, 2008-2009, based on the current Director's acclamation as President-elect. Responsibilities are the same as those for Regional Director-Canada Centre. The nominee must be a member of Canada West to be eligible for this position.

Membership Director: this position will be renamed and revised to reflect our strategic plan to expand our role and visibility with other nursing and public organizations with whom we share interests. This could also include promoting CSGNA to the public.

Nominations for National executive positions are to be emailed or faxed to the President by April 15th. Nomination forms are available in each issue of *The Guiding Light*. Along with the nomination form, signed by two (2) active CSGNA members, one of whom can be the nominee, a current curriculum vita (CV) is required.

In June, the annual report is sent to all members. The annual report contains the CVs of the candidates for positions. A ballot form is included. Please take the time to read the CVs of all the candidates and forward your vote.

Members! It's time to get involved!



CHANGE OF NAME/ADDRESS

NAME: _____

NEW ADDRESS: _____

CITY: _____ PROVINCE: _____

PC: _____ PHONE: _____

FAX: _____ E-MAIL: _____

[Send change of name/address to the
CSGNA Executive Assistant]

Guidelines for Documentation in the Gastrointestinal (GI) Unit

Background

The information contained in this guideline pertains to both inpatient and outpatient settings. Each GI setting is unique, and to provide information that is easily adaptable to each patient care environment, these Guidelines include suggested documentation for three components: Assessment, Procedure and Post - Procedure. The intent is not to provide a specific documentation form, but to provide information and criteria that can be selected in formulating an individualized document that will meet the requirements of the institutional policy and the GI setting.

Purpose of Documentation

1. Facilitate communication of Client Health Information.

The health record facilitates communication by making information about the client available in a permanent form to all health care providers. In order for all providers to have access to the record, consideration also needs to be given to storage and retrieval of the health care record and its' component parts.

2. Provide continuity of care.

The health record facilitates continuity of care by enabling nursing staff and other health-care providers to use current and consistent data, problem statements, diagnosis, goals, and strategies. Documented information is useful to provide more systematic care and health teaching.

3. Demonstrate accountability.

Documentation in the health record demonstrates accountability. Nurses are accountable or responsible for the care they give. Since records are considered to demonstrate the nurses' accountability, the record may be used to settle concerns or questions about the care that was given. Nursing documentation is normally readily admissible in legal proceedings. Facts documented at the time an event occurred are generally regarded to be more credible than an oral account of events from memory.

4. Meet professional and legal standards.

Accurate record keeping is a nursing requirement for professional practice according to the generally accepted standards of nursing practice. Nurses must consult legislation related to their area of work and employment setting in order to identify and meet more specific requirements. Nurses, who work in an independent practice, have ad-

ditional need for storage and retrieval of documentation as is outlined in the CNO's Independent Practice.

5. Provide quality assurance.

Documentation is often an integral part of quality assurance mechanisms to evaluate the quality of care. Whenever records are reviewed as part of quality assurance, it is assumed that quality of care is reflected in the documentation. Records as a quality assurance tool, however, may reflect poor documentation rather than poor care. If so, either the system or the documentation requires improvement.

6. Facilitate research.

The health record can be a valuable source of data for health research. From a nursing perspective the health record can be used to assess nursing intervention and evaluate patient outcomes, as well as identify care and documentation issues. Accurately recorded information is essential to provide accurate research data.

Principles of Documentation

1. Documenting care is an integral part of giving care.

Nursing Documentation should include evidence of the following:

- Assessment of the patient's health status, including identification of problem/strength statements or nursing diagnosis.
- Development of a plan of care.
- Implementation of the plan.
- Evaluation of nursing strategies and patient outcomes.

It is important for nurses to document actions in carrying out both their independent and interdependent roles. For example, documentation of social interaction and health teaching is as important as documentation of medication administration.

The health record is a vital communication link between health-care providers. For this reason, it is important that relevant information exchanged between professionals is documented. For example, in a phone exchange between nurse and doctor, the nurse should record the information reported to the physician and the physician's response.

2. Documentation practices must be consistent.

Current and accessible policies are needed to facilitate

consistent documentation. Following the policies of the institution is a minimal expectation in documenting care given. Nurses must ensure that they understand existing policies and advocate for improvements as deemed necessary.

Governing Agencies such as the College of Nurses of Ontario suggest that nursing records contain at minimum:

- The name and address of the client, the location in which care was given, the date and time of the interaction, and the time of recording.
- The subjective and objective assessment data obtained and the nursing diagnosis or clinical judgment made.
- The care plan.
- Outcomes, results, and observations of the care provided.

3. Forms should facilitate the documentation.

Forms provide a framework to guide documentation. In Endoscopy, one of the most common forms used for documentation is the flow sheet. Flow sheets can be helpful to document routine and frequently needed information accurately and concisely. When documenting on the flow sheet, it is advised that nurses put their initial rather than a tick mark for accountability in giving that care. Space needs to be available so that each care provider can be identified. Flow sheets are part of the permanent record and are legally recognised; however, the use of flow sheets does not eliminate the need for other documentation. The patient's acuity is the leading factor in how much charting is done. Documentation is not to be a rambling narrative, but an accurate, concise account of events.

4. The person who saw the event or performed the action writes the records.

The HEALTH DISCIPLINES ACT refers only to the requirement for RNs to document. Agency policy will identify others who may or may not write on the client's record. The policy may require that RNs document observations and actions of other care providers, such as health care aides or techs. In this case, ensure that records are clear, so that those reading the record will know who saw the occurrence or performed the action and who did the documenting. In some settings, it is the practice that the documentation be done by anyone, not necessarily the person who gave the care. This practice is not recommended. Help colleagues, not by documenting for them, but by assisting earlier with the care. Each RN then documents the care that he or she gave.

5. The closer to the event the record is made, the greater the credibility.

Nursing standards state that "the nurse documents and updates all information as soon as possible without compromising client safety". The longer the interval between

the event and the documentation, the less credible the information may be.

6. Entries are in chronological order.

Entries written chronologically present a clear picture of events.

For example: If, on occasion, entries must be out of chronological order, document both the time of documentation and the time the event occurred. An example of this is charting after the clinic is done or after an unstable patient has been stabilized.

7. Abbreviations are in general use and uniform.

Abbreviations must be consistent so that they mean the same thing to all persons reading the record. For instance, while many of us may assume that a 'flex' may mean a flexible sigmoidoscopy, a law professional may see this as poor notes. "Poor notes discredit". Consistent abbreviations mean consistent care. Abbreviations should be kept to a minimum and a list of acceptable abbreviations be developed.

8. Date, time, signature, and designation are included for every entry.

9. Records are accurate, true, complete, clear, concise, legible, and in ink.

10. Documentation is confidential and can be retrieved.

RECOMMENDED PRACTICE

The following is specific to the Endoscopy Suite, but Guidelines can easily be extrapolated to other GI procedures.

Assessment Phase

An age-specific patient assessment is performed and documented by the registered nurse. The assessment factors should include physical, psychosocial, current medications, treatment, and previous medical/surgical, anaesthetic, and drug history. Review of the patient's symptoms and history will supply any pertinent information to be documented, e.g. pacemaker, COPD, hepatitis. Documentation must include time of performance and name of person performing assessment or intervention. The frequency of assessment is determined by institutional/departmental policy, the patient condition, the physician and/or the Registered Nurse. Minimal documentation requirements are as follows:

- patient's name, birth date, age, and hospital number
- time of arrival
- time of assessment
- patient stated reason for procedure, procedure, and name of physician to perform procedure
- patient/family teaching-including discharge criteria
- signed informed consent
- baseline vital signs (temperature, pulse, respiratory status, blood pressure, and oxygen saturation prior to procedure)
- warmth, dryness, and colour of skin

- NPO status
- bowel prep compliance (if applicable)
- current medications and time of last dose; including ASA, anticoagulants, nonsteroidals, sleeping pills, tranquilizers
- allergies to foods or medications
- presence of removable dental appliances, loose teeth, glasses, hearing aids
- potential for infection with the presence of prosthetic device or patient with a history of a pre-existing condition requiring prophylactic antibiotic use prior to performing endoscopic procedure (e.g. prosthetic valve, history of endocarditis, systemic pulmonary shunt, synthetic vascular graft, complex cyanotic congenital heart disease)
- physical disabilities
- intravenous line, type, site, inserted by, rate, presence of saline or heparin lock
- lab results (if applicable)
- pre-procedure pain
- patient concerns
- emotional status
- Admitting nurse's signature.

Procedure Phase

1. Minimal monitoring includes BP, heart rate and rhythm, respiratory rate and effort, level of consciousness, warmth and dryness of skin, and level of comfort.
2. Procedure performed.
3. Physician, nurse and support staff involved in the procedure.
4. Name, dosage of all drugs and agents used including oxygen (time, route of administration and by whom), and patient response.
5. Type and amount of all fluids administered.
6. Equipment.
 - Scope including serial number
 - Dilators: make, size, and colour
 - Ligation brand
 - Cautery: including serial number, settings for cut and coagulation, pad placement with documentation of skin condition pre and post procedure
7. Unusual events, interventions, and outcomes.
8. Patient status at end of procedure.
9. Specimens obtained and disposition.
10. Post procedure diagnosis.
11. Signature of procedure nurse.

Post-Procedure Phase

1. Time of arrival in post-procedure area
2. Vital signs (TPR, BP, Oxygenation), level of comfort, colour, warmth, and dryness of skin.
3. Name and dosage of all medications (time and route of administration, by whom and status), all agents used including oxygen (litres per minute, route) and patient response.
4. IV fluids administered or discontinued including blood and blood products.
5. Unusual events, intervention, and outcomes.
6. Abdominal assessment/pulmonary assessment.
7. Mode of transportation for discharge.
8. Name of person responsible for patient at discharge (e.g. wife, son, significant other).
9. Discharge instructions given to outpatient and/or patients' family and comprehension of instructions; signed by person responsible for patient.
10. Discharge criteria applied.
11. Time of discharge.
12. Signature of discharge nurse and designation.

Disclaimer

The Canadian Society of Gastroenterology Nurses and Associates assumes no responsibility for the practices or recommendations of any member or other practitioner or for the policies and practices of any GI unit.

References

- Canadian Nurses Association: Code of Ethics for Registered Nurses. 2002.
- College of Nurses of Ontario. (2004). Practice Standard: Documentation.
- Society of Gastroenterology Nurses and Associates Inc. (2003). Standards and Guidelines: Guidelines for Documentation in the Gastrointestinal Endoscopy Setting.
- The Standards of Practice Committee of the American Society for Gastrointestinal Endoscopy (ASGE). (2003). Guidelines for antibiotic prophylaxis for GI endoscopy. *Gastrointestinal Endoscopy* 2003; 58:475-480.

Acknowledgements

First edition 2002. Revised 2007.

Prepared by Branka Stefanac BScN,RN,CPC(C),CGN(C) Director of Practice, with editorial assistance from Elizabeth Fachnie BScN,RN, CGN(C)

Adopted by the CSGNA Board and Members

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

Please contact me about any comments you may have about this newsletter or any ideas for future issues.

**Helga Sisson, Newsletter Editor.
Email hsisson99@rogers.com**

Synopsis of 2007 CSGNA Teleconference meeting held November 13th 2007

1. REVIEW AND ADOPTION OF AGENDA:

A motion to adopt the meeting agenda was passed by Mabel and Cindy. The 2007 annual meeting minutes were accepted with some minor changes required.

2. REPORTS: A report from each board member was circulated and reviewed by each board member prior to the teleconference.

3. TREASURER: We are “incorporated”. This means that we a viable organization with an executive board. Our association has been assigned a number and through this number our association can be tracked by the government. All the conference expenses have been accounted for from the Halifax annual conference; we are still waiting for some of the income. We need to finish the conference expenditure in order to put together a budget for future conferences. This will depend on the city and the venue cost. This year was the first year that we have offered a reduced rate by offering an early bird registration before August 1st. We need an accurate number of registrants who registered before August 1st, as this will determine the amount of money we have absorbed this year. Approximately 80% of the 347 registrants registered before August 1st deadline. This number is important to know when we are trying to put together the budget for future conference.

4. NEW CSGNA BOOTH: We are still looking into the new booth; do not have the exact quote. We are looking at a portable screen set-up with a tripod. They are available in different widths with long panels. We are looking at three panels; one panel with all our chapters on it, one panel to advertise upcoming events, and one panel to advertise the current educational event or market place. There will be banners available, which can be used to advertise our association.

2. EDUCATION: New scholarships were announced in the November *Guiding Light*. The schedule for the Vancouver all day ERCP program is almost organized; we are trying to finalize the course content in order to allow us to complete the course within the time period allotted. We want the afternoon dedicated to hands-on experience. Dr. Stabler, from Kamloops, is very interesting and we would like him to be part of the ERCP program. We need to talk to Judy about having one room dedicated for breaks or subgroups. We have started working on the reprocessing and the certification manual. For the recertification manual, we have

conducted an informal survey on the current content of the certification manual. There is lot of repetition from the GI text book. We would like to change the format to include all the Canadian Nurses Association Competencies, a chapter on how to write the exam, and then move forward with individual competencies with sample cases and questions. We would like the recertification manual as a reference manual for writing an exam. Would like to go through previous issues of *The Guiding Light* and archive pertinent articles. This library of research based articles will eventually be put on the website for members-only to access.

1. PRACTICE: A question was raised to provide the CSGNA guidelines on a CD for the members. It was decided we are not quite ready to have the guidelines on a CD. This may be something we can discuss at the face to face meeting. Documentation, hand hygiene, and moderate sedation guidelines are ready to go on the website. The guidelines for conscious sedation will be updated and ready for the face to face meeting.

2. PUBLIC RELATIONS: Webray was contacted regarding updating the website and regarding the bilingual translation on the website. Webray does not want to get involved with medical translation at the present time. As for the members-only access options, Webray was able to show us the different options such as public, private, moderated, and non-moderated. Canadian Association of Gastroenterology (CAG) has a new website running. The options are to go in through the web manager and we can control each page. We would manage this. Anybody can get to the homepage, but only members can access certain parts of the website. This will be discussed further at the face to face meeting.

3. VENDOR SESSION IN VANCOUVER: The vendors suggest that the vendor hall be open on Thursday evening, all day Friday, and half day Saturday. Vendors need about six hours to set up, which means access to the vendor hall is required earlier on Thursday afternoon. Regarding additional vendor time, several suggestions were made about having the vendor hall open Thursday evening between 6pm to 8pm and then have the chapter dinner; or 6pm to 10pm and have the chapter dinner between 6pm to 8pm and wine and cheese in the vendor hall until 10pm. A decision will be made at the face to face meeting and will be communicated to the chapter executives when the chapter dinner invitations are sent out.

- 4. MARKET PLACE:** We are looking into the cost for warm up jackets. Mabel is waiting to hear back regarding the price. We need to know how many warm-up jackets will be required. We can get a special price if we order in a larger quantity. We also need to promote the warm-up jackets locally at the chapter level.
- 5. NEW CSGNA LOGO:** Jaclyn Deslippe is working on the logo and will have it available as soon as possible with bilingual translation.
- 6. VANCOUVER CONFERENCE:** Everything else is on track with the program, except that one speaker on Saturday would like to speak on leadership, instead of violence in the workplace. The preliminary schedule has just been sent out. We would like the core program available on the website by January for the members. We are working with Judy to finalize the program in order to achieve the deadline for January. Have not heard from Michelle Alfa, however, we have another speaker and

topic option for the half day session. There will be a city tour available for attendees. The booking information will be available on the website.

- 7. 2009 CSGNA CONFERENCE:** St. Michael's group would like to confirm the dates for 2009 annual conference and live endoscopy. Conference dates will be September 29 – October 3 for the 2009 annual conference. We will need to look at the venue in downtown Toronto. We are expecting approximately 500 attendees for this conference. We need a conference planner or a company who know us and can meet our needs. Heather Reid from Delaware, Ontario, has organized other nurse's conferences. She will be able to negotiate the hotel.

- 8. FACE TO FACE:** April 5th 2008

Submitted by Usha Chauhan

Acceptable Time for Clean GI Scopes to hang before Reprocessing: is there evidence to support 7 days?

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

Have you heard that GI endoscopes should be reprocessed before use if they have hung for 7 days or longer? Do you historically reprocess your endoscopes in your unit in a certain timeframe based on evidence or because you have always done it that way? Does use of an automated endoscope reprocessor come into consideration in this practice? Should random scope sampling be considered in your institution?

A recent Canadian study suggests that properly reprocessed endoscopes remain free of contamination for at least

7 days (Vergis et al, 2007). If you would like to participate in an evaluation of this process or simply submit your current practice, please email dctaggart@shaw.ca. A review of the literature will be published in the CSGNA *Guiding Light* July issue.

Reference

Vergis, AS., Thomson,D., Pierone, P., Dhalla, S. (2007). Reprocessing flexible gastrointestinal endoscopes after a period of disuse: is it necessary? *Endoscopy*,39,737-739.

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.

C.S.G.N.A. DISCLAIMER

The Canadian Society of Gastroenterology Nurses and Associates is proud to present *The Guiding Light* newsletter as an educational tool for use in developing/promoting your own policies and procedures and protocols.

The Canadian Society of Gastroenterology Nurses and Associates does not assume any responsibility for the practices or recommendations of any individual, or for the practices and policies of any Gastroenterology Unit or endoscopy unit.

CSGNA Annual Chapter Education Day

Hosted by St. Joseph's Healthcare in Hamilton for Gastroenterology Nurses in the Golden Horseshoe.

Date: Saturday, April 26, 2008

Time: 8:00 – 15:00

Location: Miller Amphitheatre, 2nd floor Tower, St. Joseph's Healthcare, Charlton Site, Hamilton, Ont.

Cost: Members – \$40.00

Non-Members – \$50.00

Breakfast and Lunch is provided

Topics: 'Diet, Exercise, and Prevention of GI Malignancy'

'Electrosurgical Risk Management'

'We Scoped, We Found, Now What?'

'Nurse Performed Flexible Sigmoidoscopy Program Updates'

AGENDA

TIME	ACTIVITY	SPEAKER
0800 - 0845	Registration, Continental Breakfast	
0845 - 0900	Opening remarks	Committee Chair
0900 - 1000	Session: "Diet, Exercise and Prevention of GI Malignancy"	Dr. S. Ganguli
1000 - 1015	Break, door prizes	Committee member
1015 - 1100	Session: Electrosurgical Risk Management – Pacemakers and ICDs, jewelry, obesity, bowel explosions and more.....	Colleen Heurigan, from Boston Scientific
1100 - 1130	Questions, door prizes	
1130 - 1230	LUNCH	
1230 - 1315	Session: Nurse Performed Flex Sigmoidoscopy Pilot Program – Evaluation from different perspectives	Dr. Marianne Cooper, Representative for Cancer Care Ontario
1315 - 1330	Break	
1330 - 1430	Session: "We Scoped, We Found, Now What?"	Dr. Barbara Heller
1430 - 1500	Panel discussion	Dr. Cooper, Nurse Endoscopist, Committee Chair
1500 - 1530	Optional tour of endoscopy unit	Committee Chair and staff

CSGNA CHAPTER EXECUTIVE LIST 2007/2008

BRITISH COLUMBIA

Vancouver Island Chapter

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Treasurer: Jill Lazarian

Okanagan Chapter

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Secretary: Jean Tingstad
Treasurer: Deborah Levine

Kamloops and Region Chapter

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ALBERTA

Calgary Chapter

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Treasurer: Audrey Pennycook

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MANITOBA

Manitoba Chapter

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Secretary: Laurie Heide/Cathy Sveinson
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Treasurer: Shannon Lindsay

Central Ontario Chapter

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Treasurer: Heidi Furman

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Treasurer: Norma Baysa

NEW BRUNSWICK & PEI

New Brunswick & PEI

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NOVA SCOTIA

Nova Scotia Chapter

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NEWFOUNDLAND

Newfoundland Chapter

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Secretary: Tracey Walsh
Treasurer: June Peckham



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EDUCATION DIRECTOR REPORT

The certification exam date, April 5th, is quickly approaching. I hope the studying is going well. If anyone needs any help, we are there to support you. Please visit the CNA website at www.cna-aiic.ca. They have a wonderful resource manual, free of charge, to help you prepare for this exam. Through CNA, you can join NURSE ONE at www.nurseone.ca. Once registered, you can access their library. This is also a great resource for information. The www.endoatlas.com website has a library of endoscopic images. Remember, sometimes a picture is worth a thousand words. Achieving certification may be one of the best career choices you can make. Good luck to all of you taking the challenge!

CNA is celebrating its centennial year this year in leadership! They are gearing up for National Nurses Week May 12-18. Stay tuned to their website for all of the exciting events to be announced.

We want to congratulate Usha Chauhan on receiving the CSGNA Professional Development Scholarship Award. We also wish her the greatest success in her course and future success in this profession.

This year we have 2 nurses who are recipients of the CAG Scholarship attending the CDDW held in Montreal February 29 – March 3rd-- a research nurse, Cindy James and an endoscopy nurse, Lisa McGee. Congratulations to both of you. We acknowledge your commitment to our patients and practice.

I would like to remind you to send nominations for the GI Professional Nursing Award. This award promotes and enhances the image of a GI Nurse in his/her hospital or community. Look within your peers and make sure to nominate this worthy person. Nominations will be accepted until May 31. You may obtain the nomination form in the *The Guiding Light*. The GI nurse must be nominated by at least two nominators.

Please note all of the application forms for scholarships and awards are also in the *The Guiding Light*. These awards and scholarships are for our members to achieve knowledge, growth and development in this specialty. They are also used to attend our national CSGNA conference.

The annual conference this year will be held in beautiful Vancouver from September 11-13. We have expanded our program to include a day long ERCP course and a 2 hour presentation on abdominal pressure. There will be a separate course fee to cover the cost of the room and presenters. We are excited about this addition to the conference! The ERCP course will include A&P, Why ERCP, Radiological Imagery, ERCP Complications, and Nursing Care of the ERCP Patient, and a workshop with experienced ERCP Nurses. Space is limited for these courses, so register early.

We would like to encourage you to present abstracts. This is an opportunity for you and/or your chapter to share with colleagues a presentation on what you do well and/or what provides challenges in your practice. Share with us some your knowledge and expertise. We look forward to your submissions.

Maryanne Dorais RN CGN(C)
CSGNA Education Director

DIRECTOR OF CANADA CENTRE REPORT

2008 has arrived with a vengeance giving us more snow than most people have seen in decades. It is now the middle of February and we all hope that spring is just around the corner. I would like to wish good luck to all of those who are writing their Gastroenterology Certification examination.

The Montreal Chapter is in the process of organizing an educational day for the end of April.

The Ottawa Chapter is planning a day conference called "Current Trends

in G.I." on Saturday April 26, 2008. The day will be filled with six interesting speakers and approximately twelve companies will demonstrate their products.

The London and Area Chapter is organizing a day conference for April 12, 2008 at the Sheraton in London.

The Greater Toronto Chapter had an evening educational session on February 12, 2008. Due to the bad weather attendance was low – only 35 of 66 registered could make it to the event. Dr Shapero made an excellent presentation on "Fatty Liver". The session was sponsored by Olympus. They are also planning a half day conference for the end of April and an election for the Chapter Executive.

The Golden Horseshoe Chapter is organizing a day conference for April 26, 2008 at St. Joseph Hospital. A few of the nurses will be writing their Certification exam this year. A study group was formed to help each other out.

The South Western Ontario Chapter will have an educational session sponsored by Olympus at the end of April with Dr. Raymond Baccus as speaker.

The Central Ontario Chapter is in the process of organizing an educational event for this spring.

I would like to remind everyone that the CSGNA web site contains lots of useful information on Chapter events.

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

DIRECTOR PRACTICE REPORT

Currently, we have some updated guidelines waiting for final approval and others are a work in progress. They can be accessed on our website.

Certification is just around the corner. I hope that everyone writing is getting close to being ready. If you have questions, please email me and I will get some help for you. In the Golden Horseshoe Chapter we have a few people busily preparing.

The CSGNA executive meets soon, so if you have questions, please

do not hesitate to email one of us. If you are interested in joining our team, my term as Practice Director is complete in September 2008.

stefanac@rogers.com

**Branka Stefanac BScN,
RN CGN (C), CPN (C)
Practice Director**

CANADA WEST DIRECTOR REPORT

The days are getting longer and CSGNA Chapters in the west are gearing up for spring education days. Snow and cold did not dampen the enthusiasm of this region. Read on to see what activities they planned, using innovative ideas such as using the Internet and teleconferencing, to share learning experiences.

Joanne Glen, Canada West Director

The local presidents send these reports:

VANCOUVER

“Expanding our Scope”, the CSGNA National Conference will be held September 11 – 14, 2008, at the Sheraton Wall Center in Vancouver. All the committee members have been working very hard to make this a memorable conference for everyone. The educational program is very informative and varied as we have a great selection of topics and knowledgeable speakers. A harbour cruise and an evening at the Vancouver Aquarium promise to be two exciting venues for the members to relax and network with each other. We are all looking forward to hosting the National Conference.

Dr. Greg Monkewich presented an informative lecture on “Expandable Stents for GI Obstruction” on January 16, 2008. There were many enthusiastic nurses practicing clipping and deploying stents in the three interactive colon models. Thank you to Matt Stemerink from Boston Scientific for sponsoring this great event. Several chapter members are studying for the

GI certification exam in April. Good luck to all of these nurses.

Judy Deslippe, President

EDMONTON

The Edmonton Chapter is so proud of Susan Drysdale and the Manitoba Chapter for their efforts and success in bringing awareness and positive changes in the practice regarding single use items in their area! Congratulations. Quite a few of us were fortunate to attend the Red Deer Conference last November. Congratulations to the Central Alberta Chapter for hosting an excellent event. November was our Journal Review month. After reviewing two articles from the previous month, a display, presentation and open discussion on Ostomy Wound Management ensued. Thank you to member Martha Patry for this very informative event! We are currently planning for two physician presentation/dinner events. Dr. D. Berg, Colo-Rectal Surgeon, will be presenting on Peri-Anal Disease on Feb.19. In March, Dr. Linda Casey, Pediatrician, will be presenting on Short Gut Syndrome. Thank you to Craig Merko, AMT Electrosurgery and Ted Eschuk, Neocate for taking an interest in our education and sponsoring these events. In addition to the upcoming educational events, member Linda Broenik gave us a presentation on the G.I. Motility Clinic, which is at the University Hospital. This was an excellent review for those of us studying for the certification exam! The Alberta annual one-day conferences will rotate between Calgary, Red Deer and Edmonton. They will be held in October of each year with Edmonton hosting 2008.

Yvonne Verklan, President

KAMLOOPS

A chapter educational meeting was held following a workday. Penny Hennan presented Eosinophilic Esophagitis. It was a very informative presentation and was enjoyed by all. There was a good discussion on future conferences and each member will

decide which conference to attend. We have 2 members who will be writing the CNA Gastroenterology Certification exam in April. These individuals are studying hard. There are ongoing study group sessions. We will be having another chapter meeting within 2 months. One of our physicians has offered to come and speak to us on Hemachromatosis. We will be looking forward to learning more on this condition. The date will be set to accommodate the attendance of most members. A very busy and exciting year ahead for all of us in this Chapter.

Maryanne Dorais, President

CALGARY

The chapter had good representation at the GI Health and Humour Day in Red Deer in November and went home with great door prizes. Our education day on April 12, 2008 will be called “What’s UP Doc?”-- A brief introspective into some ailments of the upper GI tract. The new executive are learning the ropes and getting assistance from Evelyn Matthews, past president, in planning this event.

Connie Wescott, President

OKANAGAN

Two of our nurses (including me) are going to the GI conference in Denver, Colorado, the second week of February. We are looking forward to seeing firsthand some of the new techniques and being able to attend the hands on Nurses Program. Should be great information to bring back and share with our colleagues. We also wanted to take a moment to thank Susan Drysdale and the Manitoba Chapter for their hard work in the re-use issues. It is great to have members of the CSGNA so dedicated to our standards and it makes our group stronger as a whole. Our workplace is currently undergoing some major changes and the Okanagan Chapter will be working with the Interior Health Authority to make a new specific cleaning protocol for all of the scopes and attachments. Of course, this will be based on the

CSGNA protocol and an amalgamation with the manufacturer's guidelines. We are also still working on a meeting and talk regarding Propofol use, which is something that we have recently started having an anesthetist give during some procedures. Hoping for an end of February or March date on this. Other than that we are looking forward to spring.

Bethany Rode, President

MANITOBA

We have been very active as a chapter since the fall 2007. Our concern regarding a plan to re-use single-use items, prompted us to write to the region, our Health Minister, and the opposition. After a fair amount of communication back and forth, exposure in the paper, on TV, and on the radio, we have closure regarding this issue. The Minister of Health for Manitoba has directed the region to cease collection of all single-use items for the purpose of re-furbishing and re-cleaning them by a third party for re-use. However, Health Canada is reviewing this issue and I believe we have not heard the last of it due to the potential amount of money involved. I received a letter in January from the Minister of Health about her direction on this issue. Another activity that has taken some work is the start of the journal club for our membership. We have had two meetings and a third article has been sent out for review before our next meeting. We will start with a review of topics related to the upper GI tract and plan to progress down the GI tract until we have completed the entire anatomy. Our topics are generated from the Up-To-Date program. I have a subscription to the program and I share the articles with the other members. We discuss our topics on MSN. At a recent unrelated meeting, I had the opportunity to discuss the journal club with someone from our licensing body and there may be a possibility of holding future discussions in their chat room. I still have to organize that. The members have given feedback that is

encouraging. I have decided to send out an article about every month or so, giving members extra education hours. The next journal club meeting will be held in early March and our topic will be "Clinical Pathological Cases in Gastroenterology: Esophagus". We are again embarking on a research project involving upper extremity injuries in endoscopy nurses. This project will hopefully involve a sample of the entire population of endoscopy nurses working in Canada. We are in the preliminary stages of the study and we have sent out a call for members and their colleagues to participate. We have held 2 meetings since our last report. Our December meeting was held at the Seven-Oaks Hospital, hosted by Cathy Sveinson and Laurie Heide. Steris supported lunch. Our educational session was offered by Marg Valcour on reprocessing of endoscopes. Marg gave an interesting and informative presentation. Her experience and candor were recognized and appreciated by the membership and their colleagues. 25 people attended the meeting.

In January 2008, Sue Drysdale represented the CSGNA at the annual meeting of the Student Nurses Associations for Canada. The experience was discussed with membership during the January meeting. It would be an asset to attract some of the students to our meetings. This will be explored in the future. Our most recent meeting was held on January 31, 2008 at the Manitoba Clinic. The educational session was offered by Dr. George Mathew on GERD. Janet Shymanski and Pat Jamieson from the Manitoba Clinic hosted the evening and their work is recognized and appreciated. Ways to attract new members were explored and it was suggested that we make a more elaborate program to advertise our meetings in order to attract more attention. This suggestion is being explored and a program is in the design phase. Our next meeting will take place at the Health Sciences Centre in Winnipeg on March 6, 2008, with speaker and topic TBA.

The executive of the Manitoba Chapter has worked hard in a spirit of cooperation in order to lead the membership toward the accomplishment of our stated goals for the year. The member's support and dedication to that end is recognized and appreciated.

Susan Drysdale, President

VANCOUVER ISLAND

Our Chapter is presently planning our annual GI Day April 26th. It is a full day of educational speakers, great food and door prizes. We are looking forward to some interesting topics. Stay tuned!! It is also a good opportunity to visit the vendor tables and we appreciate their continued support. This event ends the 2-year term for our current executive. It has been an exciting and fulfilling term which seems to have generated some renewed enthusiasm amongst the Chapter Members. We look forward to welcoming new faces to the executive.

Charlene McCabe, President

CENTRAL ALBERTA

On November 3, 2007, over one hundred people gathered in the Red Deer Regional Hospital Auditorium for the GI Health and Humor Day. Local experts spoke on pancreatitis and alcohol withdrawal. A nurse practitioner from Calgary shared her extensive knowledge of IBD. The chapter members were overwhelmed with the positive feedback and the generosity of local businesses that donated wonderful door prizes. The support from our vendors was more than expected, so our biggest problem turned out to be cramped quarters for their displays. Everyone cooperated to make it a successful day and the chapter has discussed how to improve the planning for the next conference.

On April 2, 2008, a dinner presentation will be held featuring Dr. Sid Bass from Calgary speaking on esophageal stents. Kevin Sherwin of Boston Scientific is sponsoring the event. A nurse from our facility spent a day observing procedures in our en-

doscopy department, as she prepares to write her certification exam in April. We wish her well.

Joanne Glen, President

CANADA EAST REPORT

The East Coast Director position is a very challenging position. I would like to encourage you to take up this challenge. I am looking forward to the upcoming year. The Atlantic region is certainly keeping busy. There will be many upcoming activities. Will keep you informed. If you have any suggestions or interests, please don't hesitate to let me know.

The Vancouver Conference in September 2008 is shaping up to be a conference you won't want to miss. Please start applying early for scholarships to attend this awesome upcoming conference.

NEWFOUNDLAND CHAPTER

On Feb 11th, an education session sponsored by Olympus was well attended. The presentation included

GI bleed accessories with hands on demonstrations. The single balloon enteroscope and the endo capsule were also introduced. There was much positive feedback from the session.

The next chapter meeting will be on Monday, February 18th. The agenda will include discussions on upcoming conferences, CSGNA updates and suggestions for education sessions.

Linda Feltham, President

NEW BRUNSWICK/PEI CHAPTER

We have had quite a winter so far! Lots of the white stuff, which is great for skiing and winter activities. Plans for our next education day are in the works. We have set the date for Saturday, April 12th, at the DECH, Fredericton. We are looking forward to seeing everyone again. Good luck to those members writing the Gastroenterology Nursing Certification exam.

Tracey Pyne, President

NOVA SCOTIA CHAPTER

Now that the New Year is well underway, and all business has been settled following the 2007 Conference, we'd like to thank all the delegates who attended. It was a pleasure having you here in our City, and sharing our time with you. We appreciate all the feedback we received, both complimentary and constructive. We're looking forward to seeing you again in Vancouver this year.

As in the past few years, we will be holding an Education Day in the fall. We'll keep our members posted as we get closer to the date.

Evelyn Mc Mullen, President

MARKET PLACE

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

**Mabel Chaytor RN, CGN(C)
Canada East Director**

NEW! Flexible Endoscope Reprocessor Certification

The Certification Board for Sterile Processing and Distribution is an independent Certification Board formed to plan, develop, administer and evaluate a program to certify those individuals who practice sterile processing and distribution activities, regardless of the setting, on an **international** level. They have just added a new designation for endoscope reprocessing.

Eligibility Requirements:

1. One year experience processing flexible endoscopes **OR**
2. Successful completion of an Endoscopy Technician course with a minimum of 60 hours and a grade of 70% or better plus three (3) months

experience in processing flexible endoscopes **OR**

3. Six (6) months experience in processing flexible endoscopes and a certificate of completion of an Endoscopy Training program of at least eight (8) hours in length.

Our senior surgical processor, Audrey Boyce, who has already applied to take the exam, gave this information to me.

To find out more:

<http://www.sterileprocessing.org:80/cbspd.htm>

All information is contained in a package on the download page.

Joanne Glen, Red Deer

Annual Membership Fee Increase

Effective with membership renewal in 2008, the CSGNA annual membership will be **\$75**. With this you will continue to receive the *Guiding Light* three times per year, be able to apply for the increased number of scholarships and awards offered, and attend your chapter and national events at a reduced, member-rate.

Report on the Annual Meeting of The Canadian Nursing Students Associations

On Thursday January 24, 2008 I had the honour and the privilege to represent the CSGNA at the Canadian Nursing Students Association's annual meeting, held at the Fairmont Hotel in Winnipeg. The theme of this year's meeting was "Spirited Nursing". The topics covered in Thursday's sessions included a wide range of issues that are relevant to all nurses at any stage in their careers.

As senior nurses, many of us have the benefit of hindsight. As I look back on my past years of practice, I remember attending meetings as president of the student body at St. Boniface School of Nursing in 1972-73. Attending this conference in 2008 brought back many memories of youth and idealism, but it also made me reflect on the climate of the health care industry in the 1970's compared to the greatly changed world of health care in 2008. The ongoing challenges presented by advancements in medicine and technology on the one hand and the limitations presented by health care costs and the "bottom line" on the other hand, will require that future nurses practice with strength, energy, health, hope and commitment.

This conference dealt with bio-psychosocial and spiritual issues involved in practicing as a nurse. It also addressed the importance of self-care and maintenance.

One speaker used the example of the air travel instructions about putting on our own O2 masks first in order to be able to help others. Another speaker dealt with the role of hope and the need to nourish and maintain hope in order to face and rise above the challenges of daily life in order to carry on in a healthy manner. The issues of interpersonal interdisciplinary relationships in health care were addressed. Communication techniques and conflict resolution were explored with better patient care and more efficient professional practice as the resultant outcome.

The role of unionism in nursing was discussed in two separate sessions. Linda Silas, the President of the Canadian Federation of Nurses Unions, offered the attendees an inspirational chant. The student nurses raised their voices in unison and loudly chanted, "There ain't

no power like the power of nurses. The power of nurses won't stop." Hearing this young group of future leaders chanting together gave me a renewed hope for the future of nursing as a profession.

A most inspiring talk was given on the role of nurses in the 21st century as the shapers and leaders of the health and social agenda for the nation.

My over-all impression of this annual meeting was that nursing has come a long way since 1972-73. The issues that are openly discussed and challenged are controversial. Besides being encouraged to approach problems directly, these young leaders have been educated to identify issues and methods of conflict resolution needed in order to solve problems in a timely manner. I found the annual meeting educational and informative. The inherent energy and spirit of this group encouraged me. I appreciate the opportunity to witness the energetic spirit of this new generation of nurses in action. I wish to thank the CSGNA executive for giving me that opportunity.

Respectfully submitted by Susan Drysdale RN, BA,
CGRN, CGN(C)
President Manitoba Chapter CSGNA

REMINDER

As per Bylaw 22.12 all CSGNA Chapters shall submit to their Regional Director by December the 31st the Chapter's financial report.



**Canadian Society
of Gastroenterology Nurses
Association
Annual National Conference
Vancouver, B.C.
September 14-18, 2008**

THE GI PROFESSIONAL NURSING AWARD

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 specialty 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 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 inservice.
- 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 CSGNA Education Director by May 31 annually.

FUTURE CSGNA CONFERENCES

VANCOUVER

September 11th – 13th, 2008

TORONTO

September 30th – October 3rd, 2009



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

The SciCan Educational Scholarship

SciCan, in conjunction with the CSGNA, is pleased to again offer the annual educational scholarship in the amount of \$1500, to be awarded to a member of the CSGNA for use in attending the National CSGNA conference **for the current year** (conference registration, hotel, flights, meals, etc.). The award will go to a person who has made a significant contribution to GI advancement and education in her/his hospital or community.

In order to encourage applicants from all parts of Canada, each CSGNA Chapter will be asked to submit one qualified candidate for the SciCan Educational Scholarship. The choice of a candidate to submit rests with each Chapter. The application should consist of a one-page description of the candidate's contributions to endoscopy in the region. All other selection criteria that pertain to CSGNA educational awards apply. **Applications should be sent to the Education Director of the CSGNA by May 31st of each year.** Her address can be found on the back page of *The Guiding Light*.

Choosing a winner from among the seventeen candidates will not be an easy task! We expect that the caliber of applicants will be very high, and neither SciCan nor the CSGNA executive believes that they we should stand in judgment of the applicants and deem that one are more deserving than the others. Therefore, assuming that the seventeen candidates all meet the criteria, a draw will be made for the winner. That person will be announced in the June/ July issue of *The Guiding Light* and will be presented a commemorative plaque at the CSGNA annual meeting. The winner's name and photograph will also be published on SciCan's website. Applications for this scholarship are due May 31st annually.

SciCan is a Canadian manufacturer and distributor of medical and dental products. Our medical products in Canada include the Innova endoscope washer-disinfector, Statim sterilizer, Fujinon endoscopy systems, US Endoscopy endoscopic accessories, Mediscart endoscope transport systems, SciCan endoscope storage cabinets and Medisafe instrument cleaners. SciCan is pleased to support the CSGNA and its goal of keeping its members abreast of developments in the field of Gastroenterology. We are privileged to work with such a dedicated, professional and fun-loving group of people.



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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.





Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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 B Y 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: _____



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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: _____



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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: _____



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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** _____

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 <i>The Guiding Light</i> not reports (cumulative points)	2 Points
Can demonstrate actively recruited members	1 Point
Each time has acted as speaker at a CSGNA conference or seminar (cumulative points)	2 Points
Each time served on an ad hoc committee of the CSGNA (e.g.) Bylaws (cumulative points)	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 (cumulative points)	1 Point
CGN(C)	3 Points
CBGNA certification	1 Point
Typed format	1 Point

REVISED September 2002



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

C/O EDUCATION CHAIR: MARYANNE DORAIS, CSGNA, 1048 Wildwood Drive, Kamloops, B.C. V2C 5E2

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 _____



Canadian Society of Gastroenterology Nurses & Associates

Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

CSGNA Membership ends May 31st each year

CSGNA, #201 - 2902 South Sheridan Way, Oakville, ON L6J 7L6

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 and FIRST NAME / PRÉNOM

MAILING ADDRESS / ADDRESS DE RETOUR

CITY / VILLE, PROV. / PROV., POSTAL CODE / CODE POSTAL, HOME PHONE / TELEPHONE

E-MAIL:

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

BUSINESS PHONE / TELEPHONE TRAVAIL and EXT. / LOCAL

TITLE/POSITION

CHAPTER NAME / NOM DU CHAPITRE

EDUCATION (CHECK ONE) / ÉDUCATION (COCHEZ UN) with options: RN IA, RPN/LPN I AUX, TECH TECH, OTHER ((EXPLAIN) / AUTRE (SPÉCIFIEZ))

CNA MEMBER YES/NO / MEMBRE AIC OUI/NON and CNA CERTIFICATION IN GASTROENTEROLOGY / CERTIFICATION EN GASTROENTÉROLOGIE DE L'AIC

MEMBERSHIP (CHECK ONE) / ABONNEMENT (COCHEZ UN) with options: RENEWAL / RÉNOUVELLEMENT, NEW / NOUVEAU

Please make cheque payable to CSGNA (Mail with this completed application to the above address)

Prrière de libeller le chèque à CSGNA (Envoyez avec cette formule d'application dûment remplie à l'adresse ci-haut mentionnée.)

CSGNA 2007-2008 Executive

PRESIDENT

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1403 29th Street NW
Calgary, AB T2N 2T9
Email: dctaggart@shaw.ca

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CANADA EAST DIRECTOR

MABEL CHAYTOR
78 Petten Road
CBS NL A1X 4C8
Email: mabelchaytor@hotmail.com

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.

TREASURER

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McMaster HSC RM 4W1
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CSGNA EXECUTIVE ASSISTANT

CSGNA
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Oakville, ON L6J 7L6
[905] 829-8794
Toll: 1-866-544-8794