Canada is the host country for the 26th Pan American Congress of Gastroenterology August 29 - September 2, 1999 to be held at the Pan Pacific Congress Center in Vancouver, B.C. It is a great honor for the Canadian Association of Gastroenterology (CAG), the Canadian Society of Gastroenterology Nurses and Associates (CSGNA), the Canadian Association for the Study of the Liver (CASL), and the Wellesley Group to host this very large conference. All of these organizations have joined together in support of this Congress and will be holding their annual education event as part of the total conference. This will be the only national Gastroenterology meeting for 1999 with one very large exhibit hall for our vendors. The Pacific North West Regional of the Society of Gastroenterology Nurses and Associates (PNWSGNA) are supporting and participating in the Nurses Program. The American Society of Gastrointestinal Endoscopy (ASGE) are also supporting this conference by hosting their fall course as part of the Congress. Also the Association Intra-America's Endoscopia Digestivia (SIED) post graduate course will also be held in conjunction with Gastro '99. There are also many educational symposia sponsored by vendors. This very large Congress will provide an excellent opportunity that will also be held in conjunction with the Congress. This Congress will provide an excellent opportunity for participants and vendors to be part of the largest Gastroenterology conference in Canada at Gastro '99.

The Pan American Congress of Gastroenterology has not been held in North America for 15 years and this is the first time that nurses have been invited to participate in a formal fashion. We are expecting to draw approximately 4,000 participants from North, South, Central, Latin Americas as well as the Caribbean countries. Now is the time to plan to attend and take advantage of the early bird registration fee of $200. For your investment you will get an opportunity to participate in all congress educational events, with the exception of the AIGE and SIED post graduate courses who have an additional $50 fee. This educational activity has been submitted to the Society of Gastroenterology Nurses and Associates, Inc., is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Centers Commission on Accreditation. The Nurses Program will be offering over 20 hours of Continuing Education Units through this process.

This is a conference not to be missed! Register now and get five full days of education valued over $1000 for only $200 US (pre-registered CSGNA members pay in Canadian dollars). An extra fee will be charged for all guests (spouse, family) for attendance at some events and Discover Canada Night is an additional fee of $25 for all who wish to attend. Due to the need to keep the registration fee at a very reasonable cost of $200, only a few nutritional breaks are included in this registration fee.

The Exhibit Hall will be located at the Pan Pacific Congress Center in one very large area for all physicians and nurses to attend. The exhibit hall will be open Monday, August 29 to Thursday September 2 from 0700 to 1600. The nutrition stations, the posters, and the learning center will all be in the exhibit hall. Plan on spending a good day (we recommend Monday) to do your business for your unit and to visit all of the vendors to learn about their new products and services.

The Coast Plaza Hotel at Stanley Park has been selected as the Nurses Hotel and will be the site for the CSGNA conference and meeting on Sunday, August 28 from 0800-1600. Many of the rooms are suites with kitchenettes, living rooms, and pull-out couches which will provide an opportunity for room sharing and containment of costs. Hotels in Vancouver are in prime demand during the summer peak season, consequently the
best room rate we were able to negotiate was $209 for a single up to $229 for a double suite, taxes are extra. The hotel is very safe with a fitness center, a shopping mall, and restaurants within a close proximity. Transportation will be provided to and from the Congress Center on a regular basis or it is a 30 minute walk for those who wish some exercise. Stanley Park is only a few blocks away.

Our nurse colleagues in South, Central, and Latin America and Caribbean countries have several needs we need to address:

1. The official languages of the congress are English and Spanish. Simultaneous translation will be arranged for the lectures and symposia. It would be beneficial if nurses have the ability to communicate with our colleagues in Spanish.

2. Financial support to attend the conference is of vital concern. Nurses may only be paid $125 US per month and some physicians may be paid even less. A fund raising initiative to raise moneys to create a scholarship/bursary for this nurses and physicians is underway. Your support will help to fund airfare, hotel, registration, medical insurance, and expenses for our nurse colleagues. If you would like to contribute to the scholarship/bursary fund please complete the donation form and forward it to Marlene Scrivens. I would like to initiate a challenge to each CSGNA Chapter to fund raise to support one nurse through this scholarship fund.

3. Preceptorship experience at host sites will provide an additional learning experience for both the host and our guests. If you are interested in participating as a preceptorship host site, please contact Marlene Scrivens.

4. Safety is a very important concern as many nurses may not have travelled outside of their country or attended a conference before. We are looking for volunteers to buddy with attendees to ensure that they get to the right places at the right time and that they are not taken advantage of by others.

Gastro '99 is an educational opportunity not to be missed. Start planning now and join us in beautiful Vancouver, B.C. from August 28 to September 2, 1999!

Respectfully submitted by Deb Erickson, RN, CGRN, Chair Gastro ‘99 Nurses Program

Dear Nurse Colleagues,

The Canadian Society of Gastroenterology Nurses and Associates is supporting a scholarship/preceptorship program for Latin American and Caribbean nurses to attend Gastro ‘99. Financial support to attend the conference is of vital concern. Nurses from the Caribbean, South, Central, and Latin America may only be paid $125 US per month and some physicians receive even less. A fund raising initiative to raise $250,000 to create a scholarship/bursary for nurses is underway. Your support will help to fund airfare, hotel, registration, medical insurance, and expenses for our nurse colleagues. If you, your unit, your Chapter, your region, or any other individual or company would like to contribute to this very worthwhile project, please complete the form below and forward your donation to:

Marlene Scrivens
Gastro ‘99 Nurse Scholarship/Bursary
GI Unit, Pasqua Hospital
Regina, Saskatchewan, Canada S4T 1A5

If you have any questions contact Marlene at (306) 766-2441 or Fax (306) 766-2513.

GASTRO ‘99 NURSE SCHOLARSHIP/BURSARY DONATION

Name: __________________________________________________________
Address: _______________________________________________________
City/Town: ___________________________________ Province/State: __________
Country ____________________________ Postal Code/Zip Code: _____________
CSGNA Chapter: ________________________ SGNA Region: ______________

I would like to make a donation to the Gastro ‘99 Nurse Scholarship/Bursary in the amount of $___________.

A tax deductible receipt will be issued. Please make your donation payable to Gastro ‘99 Nurse Scholarship/Bursary.

Thank you for your contribution.
The Value of Our Vendors

by Deb Erickson, RN, CGRN

Our GI/Endoscopy Units are becoming busier and busier leaving very little free time to meet with our vendors. Exhibit halls at conferences certainly do provide a much more comfortable atmosphere for us to learn about new equipment or get questions answered without being interrupted by physicians, patients, and other staff. However, not everyone gets an opportunity to attend a conference. I have even heard that some hospitals don’t allow the sales reps to meet with the staff and that purchasing does all of their buying!

Time is valuable for both the unit and the vendor. Dropping in just doesn’t work any more. Making an appointment at a convenient time or arranging an inservice, perhaps over coffee or lunch, and inviting the physicians and all staff to attend, will allow for the best discussion and education. GI/Endoscopy is so specialized that if you do not make time to meet with your vendor, see what is new, find out how they can help, what solutions they may offer, how can you improve your practice, and now if what you are doing is on par with what care other colleagues are providing.

Vendors, sales reps, and manufacturers are very valuable partners in the care of GI/Endoscopy patients. Not less than 10 years ago we worked with fiberoptic scopes and had few instruments that allowed us to perform procedures. GI/Endoscopy served mainly as a diagnostic tool. However there were some very good sales reps who listened to what the physicians and nurses were saying about the need for different better equipment, tested them, trialed them, and once all of the regulatory hoops of government were passed, we had equipment to use in our practice settings that allowed us to actually do something besides look at the inside of a patient. Therapeutic Endoscopy would not exist today if it were not for these individuals.

Vendors, physicians, nurses, and technicians need to work closely in the practice setting to understand what the needs are. Vendors need to know if something is not working properly, perhaps, we have made a mistake in assembling the equipment, or in checking the efficacy of the equipment, or perhaps it is being attempted to be used for something for which it is not intended. Vendors are trained in the equipment that they sell and are our resources for information, training, and purchasing. Providing an opportunity for a sales rep to do an inservice for staff on new equipment is essential to good outcomes. Plus the vendor also learns by seeing their product in action. Product development often comes from finding an answer to a question in the practice setting.

Our vendors listen to our questions and if they do not have a piece of equipment to help solve our problem perhaps their competitor may. Competition is good for all of us, keeping new thoughts, ideas, and solutions in development and contributing to advancing patient care. Without competition the desire to improve may dull and certainly pricing would not be as enticing for comparison shopping.

Our vendors may visit many GI/Endoscopy units within a certain area. This allows them to network with physicians and nurses and technicians and makes them an excellent resource for information.

Our vendors support education. Contributions to local education events and to the national CSGNA scholarship fund in the form of financial support or they may help find and provide a speaker. Many vendors are very good speakers and some companies have educators that are very happy to be of service for an educational event. Also some companies have programs that have already been developed and provide Continuing Education Units (CEU’s) for participants.

Without our vendors we would not have the opportunity to see new equipment, understand the working of the mechanism, the safe usage, the cleaning and reprocessing of the instrument and equipment and the knowledge that we need for safe usage. Placing value on the future of GI/Endoscopy, our education, our instrumentation, and our equipment means valuing our relations with our sales reps, vendors, and manufacturers. The more knowledge that we all have the better we are prepared to provide excellent patient care for all Gastroenterology patients.
WHAT IS ALS
IT’S LIKE BEING SLOWLY BURIED ALIVE

Amyotrophic Lateral Sclerosis, also known as Lou Gehrig’s Disease, after the celebrated New York Yankee’s baseball player, is a progressive fatal neuromuscular disease that attacks nerve cells and pathways from the brain to the spinal cord. A motor neuron is an afferent special nerve cell in the lower brain and spinal cord that stimulates muscle contractions. When these motor neurons die, as a result of ALS, the ability of the brain to control muscle movement is lost. ALS is a chronic and progressive disease. It is incurable and a means of prevention is not known (as yet).

Upper, lower or a combination of both motor neurons can be affected in ALS. Upper motor neurons are located in the cortico-spinal area of the central nervous system and connect the cortex of the brain to the spinal cord. Involvement in this area leads to muscle spasticity. Lower motor neurons are located in the spinal area. When these neurons are affected muscle atrophy and flaccidity result. The group of muscles affected and the order in which they are affected varies from one person to the next. In some people, it is swallowing and the tongue, in others, it is the hands, wrists, shoulders and ankles that are first affected.

People with ALS remain mentally sharp and in full possession of their sense of sight, hearing, taste, smell and touch. Because eyelid movement is unaffected, this plays an important role in communication when the person becomes totally paralysed.

The cause of ALS is unknown. Research is being conducted in areas relating to genetic makeup, slow acting or latent viruses and environmental causes. ALS is not contagious, evidenced by the lack of increased incidence among health care personnel who care for ALS patients, compared to the rest of the population.

There is no single clinical test to diagnose ALS. The diagnosis is made based primarily on the patient’s history and neurological exam. Tests such as E.M.G. and muscle biopsy are done to rule out other diseases.

There are three classifications of ALS:
1) Sporadic – 95% of cases fall in this category … anyone, anywhere can be affected.
2) Familial – 5% of cases show a hereditary pattern/family history.
3) Guamanian – natives of Guam which is located in the Trust Territories of the Pacific, north of Australia show a predisposition to ALS.

Men suffer from ALS at a ratio of 3:2
6-7/100,000 people suffer from ALS with a median age of 66 when diagnosed. ALS is more often seen in whites than in blacks.

Improved medical care is resulting in longer and more productive lives for people with ALS. In general, newly diag-nosed ALS patients live 2-3 years, however, 20% live 5 years or more and 10% may survive up to and surpass 10 years.

Some people who demonstrate early signs of ALS assume that they are normal changes of aging:
- clumsiness in hands, dropping things
- inability to perform fine motor tasks
- weakness in legs, tripping over stairs and carpeting
- slurred or thick speech

As the disease progresses, the muscles of the trunk and body become affected. Weakness of the breathing muscles will follow. Death from ALS almost always results from severe muscle weakness of the respiratory muscles (resulting in a subtle loss of consciousness).

Listed are some of the more common affects of ALS
- Eating & swallowing
  - problems with chewing & swallowing are common
  - coughing spells
  - pooling of saliva in the mouth
  - drooling (silorrhea)
- Breathing
  - decreased endurance
  - shortness of breath with activity
  - difficulty speaking
  - weak cough
- Communication
  - weak vocal cords produce hoarse & breathy voice
  - if soft palate is affected, air may pass out nose when speaking
  - slurred & indistinct speech if lips & tongue are weak
- Mobility
  - active ROM exercise done by self
  - passive ROM done by helper

(To control/improve the weakness & spasticity)

Physical needs of the ALS patient and family
- Pain management
- Mobility
- Problems with swallowing & nutrition
- Respiratory problems
- Self care
VANCOUVER, CANADA
August 30 - September 2, 1999

Consisting of:
– 26th Pan American Congress of Digestive Diseases
– 13th American Congress of Digestive Endoscopy
– 4th Canadian Digestive Disease Week
– 15th Canadian Society of Gastroenterology Nurses & Associates Annual Conference
– 12th International Course on Therapeutic Endoscopy
– ASGE Postgraduate course

Plan to attend and take advantage of the early bird registration fee of $200 by December 31, 1998. For your investment you will have the opportunity to participate in all congress education events.

For more information contact:
Congress Office; c/o Chateau Travel
759 Victoria Square, Suite 105, Montreal, Quebec H2Y 2J7
(514) 288-9889, 1-800-363-9130 Fax (514) 288-1123
EMAIL: gastro99@odysee.net
Website: http://www.cag.ucalgary.ca/gastro99/index.html

MINI QUIZ ANSWERS
1.(2)  2.(3)  3.(4)  4.(1)  5.(4)  6.(4)  7.(4)  8.(4)  9.(2)  10.(2)

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.

Psychological needs of the ALS patient & family
– Help with communication
– Help with family stress & role adjustment
– Need for hope
– Importance of knowledgeable caregivers
– Opportunity to maintain control

BULBAR ALS
When the muscles of the throat, face, neck and tongue are weakened … chewing, swallowing and control of mucous and saliva become a problem. Lower motor neuron involvement leads to atrophy of the muscles innervated (supplied) by the cranial nerves VII (facial) and XII (hypoglossal). Bulbar ALS is slightly more frequent in females than in males.

Today, patients now have options for medical support as the disease progresses: tube feedings (either via nasogastric or gastrostomy tube) and permanent ventilation. People for whom swallowing becomes distressing or dangerous have the option of using tube feeding to provide adequate nutrition in liquid form. A tracheostomy may be indicated to prevent aspiration of food and secretions as well as to secure a permanent airway for mechanical ventilation. Because ALS patients now have options that were not available in the past, the need for counseling and advance directives becomes important. This is preferably done before bulbar symptoms become acute.

ALS is a multifaceted condition which requires a multidisciplinary approach to care for patients, families and caregivers.

For more information on ALS, contact the ALS Society of Ontario: 1-800-268-3301.


Resources for ALS Health Care Providers
Sue Laframboise RN, BScN, CNCC(C)
Working in ICU at the Ottawa Hospital General Site since 1984. First met ALS patients in early 1990 and involved with ALS Society Ottawa Chapter ever since.
### CSGNA CHAPTER EXECUTIVE LIST

#### SEPTEMBER 1998

<table>
<thead>
<tr>
<th>Chapter</th>
<th>President</th>
<th>Address</th>
<th>Phone 1</th>
<th>Phone 2</th>
<th>Inst</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vancouver Regional</td>
<td>Gail Whitley</td>
<td>5520 Lackner Cres., Richmond, BC V7E 6A3</td>
<td>(604) 254-7190 (H)</td>
<td>(604) 875-4155 (B)</td>
<td>Vhhsc MEM/95 R/May/98 Edu:HD.RN</td>
</tr>
<tr>
<td></td>
<td>Judy Deslippe</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nala Murray</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Okanagan</td>
<td>Linda Frandsen</td>
<td>3320 Jackson Court, Kelowna, BC V1W 2T6</td>
<td>(250) 860-7112 (H)</td>
<td>(604) 864-4000 Ext 4427 (B)</td>
<td>Kelowna Gen Hosp MEM/93 R/Junec/98 Edu: RN</td>
</tr>
<tr>
<td></td>
<td>Arlene Schroeder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Debb Devine</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>London &amp; Area</td>
<td>Cheryl Paras</td>
<td>401 Sunnyside Cres., London, ON N5X 3N4</td>
<td>(519) 858-2359 (H)</td>
<td>(519) 646-6000 Ext 4355 (B)</td>
<td>St. Joseph’s Hlth/cent MEM/89 R/May/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Lynnette Elliott</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Laura Mason</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vancouver Island</td>
<td>Irene Ohly</td>
<td>642 Cairndale Rd., Victoria, BC V9C 3L3</td>
<td>(250) 478-2688 (H)</td>
<td>(250) 727-4234 (B)</td>
<td>Victoria Gen Hosp MEM/91 R/May/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Brenda Stevens</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wendy Heater</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calgary</td>
<td>Debora Erickson</td>
<td>Box 1379, Cochrane, AB T0L 0W0</td>
<td>(403) 932-7949 (H)</td>
<td>(403) 670-4711 (B)</td>
<td>calgary Reg Hlt Authority MEM/89 R/Aug/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Debbie Taggart</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Marjorie Owens</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Edmonton</td>
<td>Cathy Capelsky</td>
<td>48 Kirklees Rd., Sherwood Pk, AB T8A 5H7</td>
<td>(403) 467-7269 (H)</td>
<td>(403) 492-6741 (B)</td>
<td>Univ. of Alta Hosp MEM/90 R/Apr/97 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Jo Grassick</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Marjorie Mcdonald</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>Elaine Fehr</td>
<td>195 Edenvold Cres., Regina, SK S4R 8A6</td>
<td>(306) 543-1231 (H)</td>
<td>(306) 766-2441 (B)</td>
<td>Pasqua Hosp MEM/95 R/Junec/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Shannon Cote</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dianne Ryan</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manitoba</td>
<td>Margaret Percival</td>
<td>6 Tyronc Bay, Winnipeg, MB R2M 4R2</td>
<td>(204) 257-8136 (H)</td>
<td>(204) 787-3969 (B)</td>
<td>Health Science Centre MEM/91 R/July/97 TIT:RN</td>
</tr>
<tr>
<td></td>
<td>Wanda Sava</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Joanne Wiedenbacher</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ottawa</td>
<td>Nicole Millaire</td>
<td>1700 Teakdale Ave., Orleans, ON K1C 6M4</td>
<td>(603) 830-4975 (H)</td>
<td>(603) 737-8383 (B)</td>
<td>Ottawa Gen Hosp MEM/95 R/July/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Roch Landriault</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Monique Travers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Greater Toronto</td>
<td>Sheila Yearwood</td>
<td>21 Willowlea Dr., Scarborough, ON M1C 1J4</td>
<td>(905) 286-3549 (H)</td>
<td>(416) 431-8178 (B)</td>
<td>Scarborough Gen Hosp MEM/89 R/Aug/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Kay Rhodes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jean Hoover</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Western Ontario</td>
<td>Debra St. Louis</td>
<td>12490 Dillon Dr., Tecumseh, ON N8N 1C2</td>
<td>(519) 735-7953 (H)</td>
<td>(519) 254-1661 Ext 2222 (B)</td>
<td>Metropolitan Gen Hosp MEM/92 R/April/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Maribeth McLean</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Diane Gray</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Golden Horseshoe</td>
<td>Judy Searay</td>
<td>55 Wellington St. S. #3, Hamilton, ON L8N 2P9</td>
<td>(905) 528-5340 (H)</td>
<td>(905) 521-2100 Ext 6094 (B)</td>
<td>Hamilton Hlt Sc Corp MEM/91 R/Junec/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Marlene Thomas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Brunswick</td>
<td>Carolyn Lewis</td>
<td>47286 Homestead Rd., Steves Mountain, NB E1G 4P4</td>
<td>(506) 852-3400 (H)</td>
<td>(506) 857-5270 (B)</td>
<td>the Moncton Hosp MEM/89 R/May/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Mary Anne Jones</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nova Scotia &amp; PEI</td>
<td>Elizabeth Hendsbbee</td>
<td>284 Ross Rd., Westphal, NS B2Z 1H2</td>
<td>(902) 434-9291 (H)</td>
<td>(902) 473-6541 (B)</td>
<td>qeii Heal.sc. Centre MEM/85 R/Apr/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>Donna Cook</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Theresa MacKinnon</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newfoundland</td>
<td>Ellen Coady</td>
<td>19 Forde Dr., St. John’s, Nfld A1A 4Y1</td>
<td>(709) 576-4228 (H)</td>
<td>(709) 737-6431 (B)</td>
<td>Health Science Centre MEM/89 R/Aug/98 Edu:RN</td>
</tr>
<tr>
<td></td>
<td>June Peckham</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mabel Chaytor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

“Two roads diverged in a wood, and I------I took the one less traveled by, and that has made all the difference----------Robert Frost”
1. An esophageal diverticulum occurring immediately above the upper esophageal sphincter is called a:  
   1. Ephiphrenic diverticulum  
   2. Zenker’s diverticulum  
   3. Meckel’s diverticulum  
   4. Traction diverticulum

2. Prior to storage at the end of each working day, the water bottle should be disinfected because:  
   1. secretions may have overflowed into the water bottle  
   2. bacteria may have travelled upward from the endoscope  
   3. it may serve as a reservoir of contamination  
   4. accumulation of bacteria may have clogged the port

3. In the diagnosis of upper digestive tract diseases, ultrasonography is useful for determining the:  
   1. degree of ulcer formation  
   2. degree of variceal haemorrhage  
   3. depth of ulcer erosion  
   4. depth of cancer invasion

4. Hysocine Butylbromide is best described as:  
   1. an anticholinergic or antispasmodic agent  
   2. a beta blocker  
   3. a narcotic antagonist  
   4. a skeletal muscle relaxant

5. Melanosis Coli is associated with:  
   1. post operative state  
   2. staphlococcus overgrowth  
   3. heavy metal poisoning  
   4. chronic laxative use

6. Which of the following, when marked elevation occurs is specific for biliary obstruction.  
   1. SGOT  
   2. LDH  
   3. Serum albumin  
   4. Alkaline Phosphatase

7. The etiology of primary sclerosing cholangitis is:  
   1. a neoplastic process  
   2. related to hypercholesterolemia  
   3. a consequence of aging  
   4. unknown  
   5. genetically predetermined

8. Which of the following triads is most commonly associated with recurrent ulcer?  
   1. pain, anorexia, weight loss  
   2. pain, anorexia, anemia  
   3. pain, diarrhea, weight loss  
   4. pain, weight loss, anemia

9. Which of the following is a major complication of cirrhosis:  
   1. diabetes  
   2. vericeal haemorrhage  
   3. common bile duct stones  
   4. stenosis

10. The disinfection qualities of glutaraldehyde are effective for:  
    1. less than 7 days  
    2. 14 days  
    3. 30 days  
    4. 2 months

---

**MINI-QUIZ**

**WORD SEARCH**

Dianne Ryan

---

**RADIOGRAPHY**

**STENT**

**HEARTBURN**

**REFLUX**

**ULTRASOUND**

**RECTUM**

**VITAMIN**

**PROTEIN**

**LASER**

**DIARRHEA**

**DUODENUM**

**CIRRHOSIS**

**ANEMIA**

**PAPILLA**

**SPHINCTER**

**ASCITES**

**CYTOLOGY**

**SECRETIN**

**CERTIFICATION**

**MEGACOLON**

**MANOMETRY**

**STOMA**

**NARCOTIC**

**DISPHAGIA**

**POLYP**

**ANTRUM**

**SCLEROTHERAPY**

**STRUCTURE**

**ELECTROLYTE**

**DUCT**

**MEGACOLON**

**VOLVULUS**

**BEZOAR**

**NUCTRACKER**

**LITHOTRIPSY**

**DIVERTICULITIS**

**CHOLANGITIS**

**JAUNDICE**

**ULCER**
This is my final note to the members of CSGNA as an Executive/Board member. I wish to thank all those who have worked so diligently by my side the past six years. It has been an honour to know them and call them my friends and I wish Cindy and all the new Board future success.

As we await word regarding our application for Societal status, we can truly state we have put forward an excellent effort and presentation to the C.N.A. to achieve this goal. There may be further refinements necessary in the months to come but we have a tireless liaison between the Executive and the C.N.A., in Michelle Paquette.

We will soon be expanding our website to include a hyperlink to the SGNA website with the assistance of Flolite’s Mary Carbonneau. The new Executive will inform you when that is achieved.

On Sunday, October 18th our members will have the opportunity to write the SGNA Certification exam in Canada for the first time at the two chosen sites of Toronto and Edmonton. Future executives will determine if this is a worthwhile exercise to continue. However, even with societal status, Canadian Certification will be at least three to four years away.

We had a wonderful conference in Toronto in September with a total of 232 registrants. That is the most we have ever had and we have the Planning Committee to thank for a memorable event.

Next year we have agreed to partner with the CAG to be involved with the Pan American Congress of Digestive Diseases at “Gastro 99”. We hope to see many of our own CSGNA members there as well as our colleagues from the U.S., the Caribbean, South America, Central America and Europe. The event takes place from August 30 - September 2, 1999 in Vancouver. We hope to see you there.

One personal note, the first educational meeting I attended was a on a Saturday in 1981 at the Wellesley Hospital and after an on-again off-again relationship I finally joined the CSGNA in 1988. And it has been a blast!! I will never forget the opportunities I had to meet so many wonderful people through my travels and contacts with the CSGNA. It has been an honour to be a part of this organization and I thank you for the chance to contribute. I would urge you to take the time and become a part of the team either as an individual member, as a member of a Chapter or on the National level. You will not regret it.

To my CSGNA colleagues, I wish you all well in your future endeavours, whether they remain in the G.I. field or other professional venues. Although I treasured my time involved with Gastroenterology, I am now spending my days in the field of Nursing Informatics and will continue to pursue that career. But, G.I. is still in my blood and will forever be there. Finally, my parting words of ‘wisdom’ are not about Gastroenterology but about life in general. Please take time in your busy day whether at work or home to laugh. Not just a chuckle, but a real laugh. A laugh can be shared and there is no charge. You can even take the chance and laugh at your own follies. Laughter is fuel for the soul. Without that replenished soul there is nothing from which to draw strength for you or others. In this world of professional, societal and personal chaos that strength will support you.

I bid you adieu not goodbye,
Yours in G.I.
Terry LeDressay
Out-going President, C.S.G.N.A.
PRESIDENT'S REPORT

Congratulations to the Toronto Chapter for the EXCELLENT work in producing a fabulous and fun filled conference! Everyone who attended will agree that not only did we have fun but the Annual Conference was a great learning experience. The speakers had both wit and knowledge and the networking was exceptional. BRAVO TORONTO! Gastro ’99 has its work cut out for them.

Over the past four years on the National Board as Director for Canada Centre and as President-Elect I have had the privilege to work with two exceptional leaders of CSGNA. Deb and Terry both have strong commitment to the Association and strong leadership methods. I have learned from their expertise and value their friendship. As President I will continue this commitment and it is with great pride and excitement that I start my two year term. My vision for the future is to enable the field of gastroenterology nursing to grow and be recognized for the specialty that we all know it is. It is imperative that we actively listen and hear each other and get involved. Involvement makes a difference! Seek out involvement in your chapter or nominate yourself or a co-worker for a chapter or national position! Write an article for The Guiding Light or host an education evening, and when an election takes place don’t forget to vote. Help to strengthen your association at all levels by getting involved. Share your ideas – you can make a difference!

Cindy Hamilton, RN CGRN
President CSGNA

TREASURER/MEMBERSHIP REPORT

It has come to the attention of the National Executive that we apparently have a problem with our mailing list to the membership. First let me define a CSGNA Member: Registered Nurses, Licensed Practical Nurses, Techs. or other Health Care Professionals engaged in full or part-time gastroenterology and endoscopy procedures, who have joined the CSGNA and have paid their annual membership.

Two years ago our annual renewal date was changed to June of each year. Renewals are sent out to members in April of each year. All memberships are to be paid by the 30th of June. All renewals received after June 30th are then considered to be new members; this could adversely affect the accumulation of points awarded towards annual scholarships.

Currently we are experiencing difficulty forwarding information to the membership due to incorrect mailing addresses, please forward any change of address to your local executive or to the national Membership Chair to assist us in keeping an updated mailing list. I would ask that members fill out their membership application form each year when renewing your annual membership noting any changes.

Your cooperation would be greatly appreciated.

Sincerely Edna Lang
CSGNA Membership Chair
I would like to welcome the following New Members:

Nancy Atwood Cambridge, ON
Rosalie Barker Georgetown, ON
Christine Belch Burlington, ON
Mary Babu Ancaster, ON
Linda Becker Kitchener, ON
Brian Cook London, ON
Margaret Deacon Stony Creek, ON
Martha Dicker London, ON
Joan Donald Toronto, ON
Deborah Ellis Burlington, ON
Pam Fabiancich Hamilton, ON
Jocelyn Hilado Burlington, ON
Eva Jennett Hamilton, ON
Lynda Kay Maple, ON
Nelly Kwee Scarborough, ON
Brenda Lach Toronto, ON
Karen Laing Toronto, ON
Jocelyn Manley Stratford, ON
Deborah Michalowski Manchester, NH
Steris Canada Inc Mississauga, ON
Inna Oussova Toronto, ON
Darina Popivanov Hamilton, ON
Judy Querin Stratford, ON
Ruth Ann Robinet Stratford, ON
Donna Reed Sudbury, ON
Cris Robinson Ancaster, ON
Pamela Richards Richmond Hill, ON
Terry Robb Wallacetown, ON
Heather Skippen London, ON
Mary Smith Kingston, ON
Lorraine Spence Hamilton, ON
Ida Stephens Lasalle, ON
Marica Sudac Oakville, ON
Helen Tarvydas Hamilton, ON
Bonnie Wilson London, ON
Collette Wilson Sombra, ON

CANADA EAST REPORT

Thank you Toronto Chapter for hosting an informative and enjoyable conference in September. What a great way for me to begin my term as East Coast Director – NS, PEI and NB. I will do my best to meet the challenges that this position presents.

The NS, PEI Chapter Fall meeting takes place in Halifax, October 30; we will be reviewing recent developments in our area and formulating plans for the upcoming year. Liz will share her experiences from her recent trip, and Edna, Theresa, Donna, and myself will report on GI in Toronto. Our PEI colleagues have no specifics to report at this time, but have been very busy with challenges at their hospitals.

The NB Chapter is holding an education day on November 7 at the Moncton Hospital. Topics will include, “Obscure GI Causes of Anemia”, “Inflammatory Bowel Disease”, “Risk Management”, “The Year 2000 – How Will It Affect You?”, and “Diseases of the Esophagus” plus an open forum information session. What a great program!

The East Coast certainly is a busy region and I look forward to keeping you informed about our activities.

I hope everyone has a Very Merry Christmas and a Happy New Year!

Evelyn McMullen

CANADA EAST REGIONAL REPORT

Thank you Toronto for another excellent Conference. The Planning Committee Members are to be commended for their hard work and dedi-
education to the CSGNA.

This is my last report as Director, Canada East. I would like to thank you for the opportunity of representing you for the past five years. It has been a very rewarding experience and I have thoroughly enjoyed working on your behalf. Congratulations to my replacement, Evelyn McMullen. I know you will not regret your decision to take up this challenge.

The next two years I will serve as President-Elect of the CSGNA under the capable leadership of Cindy Hamilton. I look forward to the challenges of my new role. I am committed to the continued growth of the CSGNA, to making Certification a reality and to responding to the needs of you, the members.

Lorraine Miller Hamlyn

CANADA EAST REPORT

Seven representatives from the Nfld. Chapter had the opportunity to attend an informative and entertaining annual CSGNA conference held in Toronto. Congratulations to Mabel Chaytor, Ellen Coady and June Peckham on obtaining the 1998 annual CSGNA scholarships and also to Mabel and June on the Atlantic CAG registration scholarship. A poster presentation on Barrett's Esophagus was submitted by Ellen and June for display at the conference. Information on the 1999 conference in Vancouver will be sent out soon to GI centers across NFLD and Labrador and hopefully with a positive response. At the last chapter meeting we discussed the possibility of having an education day in the spring so this will be our project over the winter. If there are any suggestions or interest do not hesitate to notify me, also if you are looking for any feedback on the Toronto conference.

Linda Feltham

CANADA CENTRE REPORT

I have just completed my first year as Director of Canada Centre and although this was a new and challenging position for me I feel that I have accomplished a lot of what I had initially set out to do. The presidents of the various chapters have been very helpful and co-operative despite all the turmoil caused by hospital restructuring throughout Ontario. It certainly has been a learning experience to participate in the growth of the different Chapters.

I would like to congratulate the Greater Toronto Chapter on a first class effort in hosting this years National Conference. On Saturday, November 14, 1998 they are presenting A.M.T. Laser Frontier in Endoscopy, History of Gastroenterology and E-Sophageal Stenting sponsored by A.M.T.

I am pleased to announce that a new chapter has been founded in London, Ontario which is called London and Area Chapter of CSGNA. Their first educational session, sponsored by Astra, on Helicobacter Pylori was held on October 6, 1998. Twenty six participants attended the very successful event.

The Golden Horseshoe Chapter remains active and are planning an evening session on “Dollars, Diarrhea and Dyspepsia” as well as “Nsaid and Gastroenteropathy” on November 12, 1998 sponsored by Abbott Laboratories.

The Southwestern Chapter is organizing a half day conference October 24, 1998 on Sclerotherapy. Banding, ERCP, Stent removal and Liver biopsy which will be sponsored by Cook.

I am looking forward enthusiastically to the upcoming year. The early indications show that we will enjoy another productive year.

Sincerely Monique Travers, RN
Director of Canada Centre

OTTAWA CHAPTER

Ottawa has already begun to prepare for our National conference in the year 2000 which they are hosting. The hotel has been booked and Gilles Rozen from Chateau Travel spoke at our September meeting outlining how they could work with us. We are all confident that we will see Chateau Travel on board.

Thank you Toronto for a wonderful conference September 25th to 27th. A very nice mix of fun and knowledge.

Several members of the Ottawa Chapter produced a poster entitled “The Evolution of CSGNA” for the Toronto conference. It proved to be a very interesting and informative project.

The Ottawa chapter is hosting an evening seminar on scope cleaning and maintenance to be held October 28th, 1998, from 7 to 9 p.m. at the Ottawa Hospital main auditorium. Thank you to our sponsor Carsen for making this evening possible. All personnel involved in scope cleaning would benefit from this seminar.

Nicolle Millaire, the president of the Ottawa chapter and myself are planning to attend a week-end GI conference in Quebec City, November 20th to 22nd. We plan to do some networking and see how they do things. This conference is “toutes en Francais!”

Nancy Campbell, RN
Director of Canada Centre

CANADA WEST REPORT

Edmonton Chapter hosted a spring conference April 25/98 at the University of Alberta Hospital. It was a full day of guest speakers, good food and lots of door prizes. Well attended.

Topics included:

– Infection Control
– Liver Transplant
– Insult and Injury to the Esophagus
– Potpourri of Drugs
– Pan 99 Conference update

Edmonton will be a site for the certification examination in October/98, providing the minimum number of people consider writing the exam.

A general meeting will be taking place in September.

The current executive is as follows:

Co-Presidents
– Sonja Shaw / Judy Langner
Secretary – Doris Strudwich
Treasurer – Patti Osner
Calgary Chapter attended the spring conference which was held in Edmonton April 25/98. Next year Calgary will be hosting this one day conference.

A wind-up was held in June. Guest speaker was Dr. Noel Hershfield who spoke on a “China Experience”. Approximately 12-15 attended.

Plans are under way for elections of the Chapter executive this fall. Meeting to be held in September.

Congratulations to Judy Langner, newly elected director of Canada West.

**WINNIPEG**

Our final educational event for the year was sponsored by FiberTech Canada on June 6/98 at the Crowne Plaza Hotel. “Preventative Maintenance of Scopes” Cheryl MacKinnon spoke on the procedures for reprocessing of scopes, cleaning and disinfection of endoscope and accessories following C.S.G.N.A. guidelines for infection prevention.

Paul Laborie illustrated the different components of the scope, damage and repair that can occur.

Well attended with 30 people, followed by a luncheon – compliments of FiberTech.

Elections took place with an entire new executive for 1999.

President – Sylvia Dolychnuk

Secretary – Wanda Gembarsky

Treasurer – Olivine Jessop

Past executive/new executive to meet in September for changeover of duties.

First official meeting for the fall will take place in October with an evening education session on “Electrosurgery – Controlling the Risks”.

Sylvia Dolychnuk, RN

**WESTERN DIRECTOR REPORT**

Firstly, I would like to take this opportunity to thank the conference planning committee of “G.I. in Toronto” for a very informative and well executed conference. Your hard work paid off!

**SASKATCHEWAN**

Chapter president Elaine Fehr reports that late this month they will be meeting with a number of enthusiastic Gastroenterology Nurses from Saskatchewan. The focus of their meeting will be to introduce the CSGNA, outlining it’s policies, guidelines, protocols, newsletter, etc. They hope to report an increase in membership as a result of this meeting and possibly the formation of a new Chapter. Stay tuned to the Spring issue of “The Guiding Light” for the outcome.

**OKANAGAN**

Chapter president Linda Frandsen attended the annual conference in Toronto and the members in her region are looking forward to hearing all about it. Treasurer Deb Levine reports that after a long, HOT summer the Okanagan Chapter is focusing on “work” again. In September they had a day-long in-service dealing with general topics such as central lines, a new region-wide glucometer system and coping with angry patients. That evening they attended a dinner meeting. Dr. Richard Fedorak, from Edmonton, spoke of research and advancements in the treatment of Inflammatory Bowel Disease. A very informative and full day!!

**VANCOUVER REGIONAL**

Chapter president Gail Whitley reports that twenty five out of eight surveys were returned from members in the region requesting their input into planning the next education session. The next session will be a half day on November 21. One topic will be “parasites”, and there will also be a panel speaking on liver and pancreatic oncology. It is hoped that money generated from this session be used to assist members attending “Gastro ’99”. Three members of the Chapter will be attending The 16th Annual Fall Conference of the Pacific Northwest SGNA in Seattle Washington on October 24.

Christmas is just around the corner and I would like to wish all of you a happy festive season!

Cheryl McDonald, Director West

**NOVA SCOTIA REPORT**

Our group has had an education filled fall.

Four members attended the Toronto CSGNA annual conference.

- Edna Lang, our National Treasurer
- Evelyn McMullen, our newly appointed Canada East Director
- Donna Cook and Theresa McKinnon were fortunate to receive the CSGNA sponsorship, and their registration fee was sponsored by the Atlantic Division of the CAG.

In October, I attended a two day ERCP conference in Milwaukee. An excellent learning experience with hands-on work shops and live presentations. Compliments to St. Luke’s Hospital and all the GI Staff for the great display of teamwork.

My trip was sponsored by Wilson Cook Medical Inc. and Boston Scientific Inc. (Microvasive). Thanks to both companies.

Our Chapter will have a fall meeting in late October to share our new wealth of knowledge.

Liz Hendsbee, Chapter President
The CSGNA is committed to excellence in client care while enhancing the educational and professional growth of the membership within the resources available.

The CSGNA carries out its mission by providing opportunities for networking, education, and communication for its members.

In September 1998 the CSGNA Executive and Board of Directors met in Toronto to develop a Strategic Plan for the future of CSGNA. The CSGNA Mission Statement was reviewed and strategies were examined to continue the efforts of past leaders as well as focus on new endeavors. The following is the resultant Strategic Plan in order of priority.

1. MEMBERSHIP
   CSGNA will increase the value of membership by focusing on the following:
   - a data base to ensure all members are current and all members receive information published by the Association.
   - improved and continuing communication through Chapters.
   - invoicing renewing members.
   - providing value through newsletters and other services such as directories and special reports.
   - improving communication between the National Board and membership.
   - providing a menu of services available with membership to the Association.

2. PROGRAMS AND SERVICES
   - provide programs to advance the practice of gastroenterology nursing.
   - research and provide Position Statements and Guidelines to aid in providing an out come of excellence in patient care.

3. STRUCTURE AND GOVERNANCE
   - reviewing annually the job descriptions of Executive and Board members both Nationally and at the chapter level.
   - updating and adjusting those positions to reflect current practice.
   - provide mentoring and seek out potential leaders for the future.
   - abide by a code of ethics in our association with shareholders (ie vendors and sponsors).

4. FISCAL RESOURCES
   - maintain a financially stable organization responsive to the membership.
   - explore opportunities for fund raising.
   - explore opportunities for partnerships with other organizations and specialty groups.
   - research and develop a marketing plan for programs and services.
   - maintain a reserve of a minimum of one years operational cost.

5. IMAGE AND IDENTITY
   - reflect on our mission statement to define the organizations image and the specialty’s identity.
   - increase visibility and promote CSGNA’s image through alliances with other specialty nursing organizations.
   - maintain constant communication with the CNA to achieve Certification level.
DOES ANYBODY KNOW?

Is there any written patient education material out there that explains the need for or encourages family members to have colon screenings done after a first degree relative has been found to have colon cancer?

We are checking with the Cancer Society but we were hoping a GI group had come up with something.

If anyone knows of any material out there or has a copy of the same could you please send to:

Mary Lee Allen
Out-patient Department, Scarborough Grace Hospital
3030 Birchmount Rd., Scarborough, Ontario M1W 3W3

CERTIFICATION CORNER

Well we are still waiting for the CNA’s ruling in response to our proposal for specialty status. We will hear by January 1999 what their decision is. CSGNA has appointed past president Michele Paquette as Certification chair and she will keep us informed of our progress.

As you are aware CSGNA is hosting two sites on October 18, 1998 for the writing of the American certification exam. When the results of these exams are known we will publish the results.

GOOD LUCK to those who are writing and CONGRATULATIONS for your commitment to learning.

CALL FOR NOMINATIONS

The following positions will be up for nominations for The CSGNA National Executive and Board positions. Please send all nominations to the chair of the Nomination Committee (President of CSGNA) by April 1, 1999.

Positions open:
- Secretary, Director Canada East
- Director Canada Centre
- Director Canada West
- Education Chair

GUIDELINES FOR SUBMISSION to “THE GUIDING LIGHT”

- white paper with dimensions of 8 1/2 x 11 inches
- double space
- typewritten
- margin of 1 inch
- submission must be in the possession of the newsletter editor 6 weeks prior to the next issue
- keep a copy of submission for your record
- All submissions to the newsletter “The Guiding Light” will not be returned.

SIGNEA

The meeting in Austria was a great success. CSGNA was given recognition as one of the leader groups in National endoscopy organizations. The meeting was attended by 380 nurses from 53 countries. It was interesting to hear the extreme variances between nursing in the different countries especially the developing countries. We sometimes forget how fortunate we are.

I was allowed to address the assembly on two separate occasions to speak about Gastro ’99. Also the Gastro ’99 booth in the exhibit had a great deal of traffic. Interest seemed high for attending our conference.

SIGNEA was left with a positive balance after the conference which will allow them to continue the work they have been trying to do on a very sparse budget. Canada must continue to support this group as their work in the developing countries is crucial to the nurses in these countries.

The SIGNEA executive will not meet face to face again until Gastro ’99 and will not hold another conference until 2002 in Bangkok, Thailand in conjunction with the World Congress again. However a representative will be in Nashville at the SGNA annual conference.

During the Vienna conference I had the opportunity to network with the SGNA President Marilyn Shaffner and Executive Director Eileen Widmar. We have been offered a booth at SGNA Nashville for a modest fee. SGNA also has expressed support of Gastro ’99. As well as have been offered to “hyperlink” with their website which will be beneficial to all members as well as great advertising for our Conferences.

In all it was profitable trip …

ATTENTION ALL MEMBERS

Needed three volunteers to serve on the Bylaws Committee.
One member from each Region East, Center and West.
If you are interested in serving on this committee, please contact Lorraine Miller Hamlyn. Address and phone number are on the back of this newsletter.
MINUTES OF THE CSGNA ANNUAL BUSINESS MEETING
TORONTO, ONTARIO - SEPTEMBER 26, 1998

1. Meeting opened at 11.50 by Terry LeDressay, President.
2. Introduction of the Executive.
3. Minutes of the 1997 annual business meeting.
   **MOTION:** To approve the minutes of the 1997 annual business meeting as presented in the annual report. Gail McDermott/Jocelyn Hollo.
4. Reports:
   - **President** – Terry
     Please note that reports from the CSGNA executive are included in the Annual report. Terry welcomed everyone and thanked all the members of the Toronto planning committee for all their hard work.
   - **Treasurer** – Edna
     Edna renewed all the chapter charters.
     London chapter was welcomed as a new chapter. President Cheryl Parsons and Treasurer Laura Mason were present to receive their charter.
   - **BYLAWS** – Cindy
     28 votes were received. One no vote was received on the Bylaw regarding the education committee She explained why 8 members from across the country were required for the committee and explained that only the Chair of the committee was a board member.
     **9.4 – add the word capacity to clarify.**
     **MOTION:** to destroy the Bylaw ballots Gail McDermott/Elaine De Castro.
   - **EDUCATION** – Marlene
     CAG SCHOLARSHIP – Jennifer Martin of St Lambert, Quebec.
     CSGNA – REGIONAL SCHOLARSHIP
     CSGNA ANNUAL
     Mabel Chaytor – Conception Bay, Newfoundland
     Margaret Percival – Winnipeg, Manitoba
     Theresa McKinnon – Halifax, Nova Scotia
     Madonna Cook – Lower Sackville, Nova Scotia
     Ellen Coady – St. John’s, Newfoundland
     Lynn Fraser – Winnipeg, Manitoba
     Irene Ohly – Victoria, British Columbia
     June Peckham – St. John’s, Newfoundland
     Wanda Gembarsky – Winnipeg, Manitoba
     Shannon Cote – Regina, Saskatchewan
     **Nomination Committee**
     President – Cindy Hamilton
     President Elect – Lorraine Miller Hamlyn
     Canada East – Evelyn McMullen acclaimed
     Canada West – Judy Langner
     **MOTION:** To destroy the ballots. Cindy James/Irene Ohly
   - 7. Closing remarks Terry thanked everyone she has met over the years in CSGNA and commented on the dedication she has repeatedly observed. We are still awaiting societal status from CNA but Terry hopes this will occur soon. We wish you best of luck Terry and thanks for the great job as President.
   - 8. Meeting Adjourned.
   Respectively submitted by
   Jean Macnab, Secretary

SCHOLARSHIP AWARDS 1998

CAG:
1. Jennifer Martin – St. Lambert, Quebec

CSGNA – REGIONAL:

1. Mabel Chaytor – Conception Bay, Newfoundland
2. Margaret Percival – Winnipeg, Manitoba
3. Theresa McKinnon – Halifax, Nova Scotia
4. Madonna Cook – Lower Sackville, Nova Scotia
5. Ellen Coady – St. John’s, Newfoundland
6. Lynn Fraser – Winnipeg, Manitoba
7. Irene Ohly – Victoria, British Columbia
8. June Peckham – St. John’s, Newfoundland
9. Wanda Gembarsky – Winnipeg, Manitoba
10. Shannon Cote – Regina, Saskatchewan

TORONTO CONFERENCE PLANNING COMMITTEE
_left to right_
back row: Jocelyn Hollo, Jackie Hyacinth, Gail McDermott, Maria Cirocco, Harriet Kunz, Belinda Tham, Judy Ellis-Paxton.
front row: Elaine Binger; Sandy Sainod, Pat Muchelutte (missing), Jane O’Toole-Goodman, Kay Rhodes, Sheila Yearwood.
The Educational Committee is working on an orientation package. We have had many problems this year with our membership list and are working on different ways to rectify the problem.

New Directors are Evelyn McMullen for Canada East and Judy Langner for Canada West. Many thanks and a fond farewell to Sylvia Dolynchuk former Director Canada West and Terry LeDressay our Past President. Our new President is Cindy Hamilton and our President elect is Lorraine Miller Hamlyn.

All the new Bylaws were passed.

The last SGNA conference Terry attended the CEU’s were tabulated by giving the participants a carbonated form that was filled out and the participant kept a copy for their records. This would save a lot of time and money and we will investigate this method for future conferences.

Cindy attended a SIGNEA conference in Vienna in September.

Attendance at the Toronto conference was the highest ever at 130. The conference was excellent for those of you who could not attend.

Flolite is continuing to sponsor our web page and Mary Carbonneau updates it for us. The next development will be a hyperlink with SGNA.

London Chapter was welcomed as the newest chapter.

Gastro 99 – Deb Erickson gave an update on this exciting conference which will take place at the end of August in Vancouver. The price is right at $200 Canadian if you pay before December 31, 1998.

CSGNA are working on a Definition of Advanced Practice, a Position statement on Flexible Sigmoidoscopy, Guidelines on Bronchoscopy and Guidelines on the use of Latex. All of these will be ready for presentation at Gastro 99.

Certification exam will be taking place in October in Toronto and Edmonton. CBGNA will tell us after it is finished how many people wrote the exam.


If all members encouraged one new member to join we would be at an all time high for membership just in time for our 15th year celebration next year in Vancouver. We will be running a contest this year for the member who brings in the most new members.

Our chapter packages need revising. The Directors will be contacting the Chapter Presidents for ideas and input.

A considerable amount of time was spent developing a strategic plan for our future. The next Board meeting will be a teleconference on December 5, 1998 and a 3-day meeting in Toronto on March 26, 27 and 28, 1999.

Jean Macnab
Secretary CSGNA

TOOLS FOR CERTIFICATION

Gastroenterology Nursing: A Core Curriculum 1997

Designed to meet the needs of all members of the gastroenterology nursing team, this volume reviews the body of knowledge that underlies the gastroenterology nursing practice. It is designed to serve as a primary source for nurses and associates preparing for the gastroenterology nursing certification examination. By nature an overview, the Core Curriculum contains reference for further study, and is intended to be used with complimentary texts to provide additional depth of information.

Available solely from the publisher. All requests must be made to Mosby-Yearbook, c/o Pat Newman, 11830 Westline Drive, PO Box 46908, St. Louis MO 63146-9806. Phone: 1-800-426-4545.

Presenting the Core: 1995

This collection of slides, developed by SGNA with a grant from Olympus America, is designed to complement A Core Curriculum. It is intended to be used with the accompanying outline and objectives as the basis for a presentation of The Core Curriculum as a continuing education offering and/or in preparation for the gastroenterology certification exam. The slides are available for rent: you provide the faculty. Additional information and an application are available by calling SGNA Headquarters at 1-312-644-4267.

Member rental fee $85
Non-member rental fee $120.

CONGRATULATIONS TO LINDA KNIPFEL OF PETERSBURG, ONTARIO

Linda will be sponsored by Steris to attend the Gastro ’99 Convention in Vancouver. Congratulations Linda and thank you Steris. left to right

Deborah Michalowski (Steris), Linda Knipfel, Steve Timpano (Steris).
Timeline

1984/1985

• 1984 – Formation of the Ontario Society of Gastrointestinal Assistants (OSGA). Executive members included: Mary Lowery, Vera Simmons, Shirley Samms, Maryanne Thomson.

• Inaugural conference of OSGA is held at Prince Hotel in Toronto.

• 1985 – First publication of quarterly “Guiding Light”.

1986/1989

• Society expands to National level. Name is changed to Canadian Society of Gastrointestinal Assistants (CSGA).

• Canada is divided into three sections: Canada East – 22 members, Canada Centre Ontario – 141 members, Canada West – 43 members.

• CSGA becomes member of Society Gastroenterology Association, (USA).

• 1989 – Name is changed to: Canadian Society of Gastroenterology Nurses & Associates (CSGNA).

Certification Process

1986 • Mary Hopkins is the first Canadian to write the American Certification exam.

1994 • Michele Paquette contacts CNA for guidance on how to develop proposal to obtain specialty status.

1996 • Cheryl MacKinnon is hired part time as project coordinator to develop practice proposal for CSGNA.

• Approval obtained from American Certifying Board of Gastroenterology Nurses & Associates (CBGNA) for Continued Education Units (CEU’s) for contact hours during Annual National Conference held in Ottawa.

1997 • Proposal for Canadian specialty status completed and submitted to CNA for approval.
1991/1992

• CSGNA leaves the umbrella of SGNA and becomes an independent organization.

• Formation of provincial Chapters to liaise with National body of CSGNA.

• Six Directors are elected: two each for Canada East, Canada West and Canada Centre.

• In September 1992 the National Conference is held in Ottawa, the first time that it is held outside of Toronto.


• 1996 – 3 position statements presented at the Annual Conference: Scope advancement, PEG and Patient Education.

• 1997 – The CSGNA website is up and running. Check our address at www.webray.com/csgna, for updates on activities at the national and chapter levels.

• 1998 – Edmonton and Toronto become the first test sites for CBGNA certification exam.

1998 – We are now 645 members strong, divided into 14 chapters.
CSGNA MISSION STATEMENT
The Canadian Society of Gastroenterology Nurses and Associates is committed to excellence of client care while enhancing the educational and professional growth of the membership within the resources available.

CSGNA PURPOSE STATEMENT
The CSGNA carries out its mission by providing opportunities for networking, education, and communication for its members.

CSGNA GOALS
Nursing Practice:
The CSGNA is committed to encouraging members to achieve high standards of care in daily practice by establishing standards of practice.

Networking:
The CSGNA encourages discussion and exchange of experience between nurses through the formation of Chapters, quarterly newsletters, and an annual conference.

Education:
The CSGNA keeps its members abreast of current developments in the field of gastroenterology through seminars and an annual educational conference.

Research:
The CSGNA encourages initiatives and studies in advancement of the field of gastroenterology through seminars and an annual educational conference.

Organization:
The CSGNA is a dynamic, financially stable, well organized association responsive to membership needs.

1.1 NAME
The name of the organization shall be the “Canadian Society of Gastroenterology Nurses and Associates” (CSGNA). Hereinafter the word “Society” shall refer to “Canadian Society of Gastroenterology Nurses and Associates”.

2.1 PURPOSE
The purpose shall be to unite into an organization, persons engaged in any capacity in the field of Gastroenterology Nursing in Canada (i.e. in any of the ten provinces and two territories).

3.1 GOALS
The goals of the Society shall be to promote education and quality of patient care by:

3.1.1 Promotion of continual enhancement of knowledge and skills.
3.1.2 Setting standards of practice.
3.1.3 Developing educational programs.
3.1.4 Encouraging study, discussion, exchange of information related to experience and practice.
3.1.5 Promoting continually through the examination of principles and development of protocols.
3.1.6 Encouraging understanding of the advancements in related technology and sciences.

4.1 HEAD OFFICE
The head office shall be located at the address designated by the Executive for that fiscal year.
7.2 Written notice of the annual business meeting shall be included in the information about the annual conference and shall be mailed at least thirty (30) days prior to that date.
7.3.1 Each Chapter shall plan a minimum of four (4) education hours per year for the membership in its area.
7.3.2 Notification of these are to be sent to the respective members a minimum of fourteen (14) days prior to the event.
8.1 QUORUM
The quorum shall consist of the majority of members present.
9.1.1 ELECTION OF OFFICE
All members eligible to vote will be informed of the National Board positions available, and the deadline for nominations via the first "Guiding Light" publication after the annual business meeting. Nominations must reach the Nominations Committee by the date specified.
9.1.2 A slate of candidates for officers open in that fiscal year shall be mailed to the Active membership one hundred and twenty (120) days before the annual meeting.
9.1.3 Ballots are to be returned to the Chair of the Nominating Committee ninety (90) days before the annual meeting.
9.1.4 Each member has one vote per office.
9.2.1 Votes will be tabulated and recorded in the minutes of the Executive.
9.2.2 The successful candidates will be announced to the membership at the annual business meeting.
9.2.3 If there is only one nomination for an office by the deadline for nominations, the officer is elected by acclamation.
9.2.4 Successful candidates will be notified as soon as possible after counting of the ballots in order that they may make the necessary arrangements to attend the annual conference.
9.2.5 If no one is nominated for an office, nominations will be accepted from the floor at the annual business meeting.
9.3.1 As the first meeting of the new Executive is extremely important and sets the tone for the whole year, this meeting should be scheduled to take place in conjunction with the annual conference and meeting.
9.3.2 Hand over of duties from retiring Executives to newly elected Executives shall take place at the time of the annual CSGNA conference.
9.4 Officers elected must have served the association in some capacity the preceding two years.
9.5.1 Ballots will be kept by the Chair of the Nominations committee.
9.5.2 A motion to destroy the ballots will be made by said chairperson during the annual business meeting.
9.5.3 The ballots will be destroyed only after the motion is carried by a show of hands from the members present.
9.5.4 If a motion for a recount of any office is made and carried tellers will be chosen from the members present prior to the end of the annual conference and the results announced to the membership.
10.1 EXECUTIVE
The Executive of the Association shall include: President, President-Elect, Secretary, Treasurer, Education Chair, Newsletter Editor, and the Board of Directors.
10.2 Included ex-officio officers on the Executive is the Board of Medical Advisors.
10.3 The Executive offices are open to all active members of the Association.
10.4 The Executive officers shall have the powers and authority as described to perform their expected offices.
11.1 TERMS OF OFFICE
11.1.1 The President shall serve for two (2) years.
11.1.2 The President-Elect will automatically accede to the presidency when the President's term ends.
11.1.3 He/she shall become acting President and assume the duties of the office in the event of the President’s absence.
11.2 The President-Elect must have served the Association in some capacity prior to being elected to this office.
11.3.1 Persons elected Secretary, Treasurer, Education chair, Director, and Newsletter Editor, shall hold office for two years or until their successors are elected.
11.3.2 No person can be elected to consecutive terms as President or President-Elect.
11.3.3 No officer of the Executive can hold more than one office at a time.
11.3.4 There shall be no restriction upon the number of terms which other officers may be elected to succeed themselves.
11.4.1 Elections to fill the offices of Secretary, Education chair, and one Director from each of Canada East, Centre and West shall be held in odd numbered years.
11.4.2 Elections to fill the offices of Treasurer, Newsletter Editor, and one Director from each of Canada East, Centre and West will be held in even numbered years.
11.4.3 Upon retiring from office, all officers shall deliver all records, correspondence, or other property of the Association to their successor within thirty (30) days.
11.4.4 VACANCIES
A: Whenever the office of President becomes vacant, the President Elect shall succeed to the Presidency for the completion of the unexpired term and continue in office for another full term. If the office of President becomes vacant while there is a vacancy in the office of President-Elect, officers shall appoint an acting President from the present Board members who shall serve until the end of the term. Special election shall be held to fill the office of President-Elect.
B: If an elected member resigns or can no longer fulfill his/her duties before the term of office is completed, the Executive shall appoint an interim replacement until the annual meeting, when an election can take place.
11.4.5 If an officer should resign before completion of their term a written resignation shall be sent to the President at least fourteen (14) days prior to the resignation date.

BYLAW 12: DUTIES OF THE OFFICERS.

THE PRESIDENT SHALL:

BYLAW 12.1.1 Serve as an official representative and spokesperson for the society.

BYLAW 12.1.2 Represents CSGNA missions, goals and positions to various publics.

BYLAW 12.1.3 Manages daily affairs of the organization.

BYLAW 12.1.4 Leads the National Board of Directors.

BYLAW 12.1.5 Chairs Nominating Committee.

BYLAW 12.1.6 Provides mentoring to CSGNA leaders.

BYLAW 12.1.7 Submits and presents an Annual report to the membership at the Annual Business meeting, and sends it to the members via the National Secretary ninety (90) days prior to the meeting.

BYLAW 12.1.8 Submits an article three (3) times a year to the "Guiding Light".

BYLAW 12.1.9 Chairs and prepares agenda for the National Board Meetings and Annual Business meeting.

“Keep your head and your heart in the right direction and you will never have to worry about your feet.”
BYLAW 12.1.10 Travel commitments as deemed necessary by the Board.

BYLAW 12.1.11 Attends the SGNA Conference and the House of Delegates.

BYLAW 12.1.12 Encourages vision and growth of the organization by fostering educational opportunities and position statement formation.

BYLAW 12.1.13 Be an ex officio on all standing committees.

BYLAW 12.1.14 A two (2) year term.

**DUTIES OF THE TREASURER/MEMBERSHIP**

**THE TREASURER/MEMBERSHIP SHALL:**

BYLAW 12.2.1 Accedes to the Presidency when the President’s term ends.

BYLAW 12.2.2 Becomes acting President and assumes the duties of the office in the event of the President’s absence, disability or resignation.

BYLAW 12.2.3 Communicates regularly with the President as deemed necessary.

BYLAW 12.2.4 Learns the affairs of the Association.

BYLAW 12.2.5 Accompanies the President to SGNA Annual Conference and attends the House of Delegates session.

BYLAW 12.2.6 Is the SGNA liaison to SIGNEA.

BYLAW 12.2.7 Serves as Advisory member without vote on standing and special committees.

BYLAW 12.2.8 Forms and chairs the Bylaw Committee.

BYLAW 12.2.9 Forwards amendments to these bylaws to the National Secretary in writing ninety (90) days prior to the Annual Meeting.

BYLAW 12.2.10 Communicates regularly with provincial nurses organizations and CNA about activities of the Association.

BYLAW 12.2.11 Performs such duties as delegated by the President.

BYLAW 12.2.12 A two (2) year commitment with a four (4) year commitment to the Executive.

**DUTIES OF THE SECRETARY**

**THE SECRETARY SHALL:**

12.3.1 Record the minutes of all meetings of the National Board.

12.3.2 Provides a summary of National Board meetings for submission in “The Guiding Light”.

12.3.3 Forward the minutes of the meetings to all Board members and Chapter Presidents.

12.3.4 Conducts all correspondence for the Association as directed by the Executive.

12.3.5 Compiles the Annual Report for distribution to the members ninety (90) days prior to the Annual Meeting.

12.3.6 Is a member of the Bylaw Committee.

12.3.7 Issue notices of meetings, activities, and conferences to all members.

**DUTIES OF THE EDUCATION CHAIR**

**THE EDUCATION CHAIR SHALL:**

12.5.1 Form a committee consisting of The Education Chair, One Regional Director from each region, at least four members at large. Effort should be made to include all facets of the specialty, (i.e.) research, endoscopy, management, and general GI wards.

12.5.2 Monitor CSGNA Education Fund in conjunction with the National Treasurer.

12.5.3 Establish criteria for use of the fund and review annually.

12.5.4 Provide direction to the Conference planning Committee regarding the CSGNA Annual Conference.

12.5.5 Review scholarship criteria annually.

12.5.6 Ensure that all CSGNA educational events remit appropriate reports, financial statements and reimbursements.

12.5.7 Review, provides recommendations and approve educational content for CSGNA events.

12.5.8 Expand and improve publications, informational products and services that support the field of gastroenterology nursing.

12.5.9 Generate ideas for education that best meet needs of the members.

12.5.10 Submits a report of activities of the Committee to the National Secretary ninety (90) days prior to the Annual Meeting for submission in the Annual Report.

**DUTIES OF THE DIRECTORS**

**THE REGIONAL DIRECTORS SHALL:**

12.6.1 Encourage and assist in the formation of chapters in their area.

12.6.2 Liaise with the Chapter Presidents and individual members in their Region about the work of the Association.

12.6.3 Report to the National Executive at regular intervals as deemed necessary by the Executive.

12.6.4 Attend a minimum of two meetings of the Executive in consultation with the National Board.

12.6.5 Responds with a written report in sufficient time for those meetings which cannot be attended.

12.6.6 Submit a report of activities and future plans for inclusion in the Annual Report, ninety (90) days prior to the Annual Business Meeting.

12.6.7 Submits reports about their region’s activities to the Newsletter.

12.6.8 There shall be two (2) Directors elected from each of Canada East, Centre, and West. One Regional Director will be elected yearly in each designated region, by the members of that region.

12.6.9 Canada East consisting of Prince Edward Island, Newfoundland, Nova Scotia, and New Brunswick.

12.6.10 Canada Centre consisting of Ontario and Quebec.

12.6.11 Canada West consisting of Manitoba, Saskatchewan, Alberta, British Columbia, Northwest Territories and the Yukon.
12.6.12 Divisions of regions will be decided by the co-directors. The Director will then inform the National Board and members of their areas of responsibility.

DUTIES OF NEWSLETTER EDITOR
THE NEWSLETTER EDITOR SHALL:
12.7.1 Set guidelines for submissions to “The Guiding Light”.
12.7.2 Set deadlines for submissions to “The Guiding Light”.
12.7.3 Pursue appropriate material for the newsletter.
12.7.4 Compile and edit submitted material for publication of the newsletter three (3) times annually.
12.7.5 Approve the final version of the edited newsletter prior to printing.
12.7.6 Provide updated membership list to the newsletter distributor and ensure mail out of newsletter to all membership in good standing.
12.7.7 Store copies of all previous newsletters.
12.7.8 Submit a report to the National Secretary ninety (90) days prior to the Annual Business Meeting for the Annual Report.
13.1.1 COMPENSATION
All members of the Executive should attempt to receive funding from their usual sources (hospital nursing funds, research funds, and incentive programs).
13.1.2 Any expenses not covered in this way will be paid by CSGNA.
13.2.1 All CSGNA financial inquests over $200.00 must be approved by two (2) Executives, one of which shall be the Treasurer.
13.2.2 Verification of the appropriate receipts and the appropriate use of CSGNA funds must be present before reimbursement.
13.2.3 No reimbursement shall be made without appropriate receipts.
13.3.1 The expenses of the outgoing executive will include those incurred at the Annual Conference at which their term of office is complete.
13.3.2 The expenses of the incoming Executive will be paid by CSGNA.

14. DISCIPLINARY ACTION
14.1.1 Members shall be subject to reprimand, censor, suspension or expulsion by a two-thirds vote of the active members for violation of the Constitution and Bylaws or the Charter.
14.2 No such action shall be taken against a member until specific charges have been filed.
14.3 Members reprimanded, censored, suspended or expelled under the provisions as stated may within thirty (30) days after notification of such action, request the Executive of the CSGNA to review any questions of law or procedure involved therein.
14.4 Executive members of chapters are subject to the same rules of compensation, discipline and removal as the National Executive.
14.5.1 A “conflict of interest” shall be defined as any situation or potential situation where an individual may gain or is perceived to gain, directly or indirectly, from discussion or voting on said matters.
14.5.2 Any CSGNA member on a committee or in an Executive position, finding themselves in a conflict of interest, will remove themselves from voting on said matter.
14.5.3 Any CSGNA member who does not identify a conflict of interest, remains as part of the discussion and/or voting process, may be asked to resign from the said committee and/or Executive position following a review by the National Executive.
15.1 REMOVAL
15.1.1 Officers elected by the membership may be removed by two-thirds vote of the active members present at the Annual Meeting.
15.1.2 The successor will be the runner up in the previous election and remains in office until the end of the stated term.

PUBLICATION
16.1.1 The association shall publish three newsletters annually entitled “The Guiding Light”.
16.1.2 It shall be sent to all members Winter, Spring, and Fall.
16.1.3 The Editor is responsible for compiling a comprehensive pertinent communiqué and distributing it free to all members in good standing.

EDUCATIONAL EVENTS
17.1.1 All CSGNA educational programs must complete an “Educational Pre-Program Proposal” form and submit it along with their budget to a regional Director six (6) weeks prior to the event.
17.1.2 The proposal will be approved by a Director and the Education Committee Chair one (1) month prior to the event.
17.1.3 If the program is being presented by a director approval by another Director and the National Treasurer must be obtained.
17.1.4 Chapters will have their educational program and budget approved by the Chapter Treasurer, a Director of their region and the Education Chair one (1) month prior to the event.
17.1.5 If the program and/or budget is not approved by either the Director or the Education Chair, it must be brought to the President or in her/his absence the President-Elect.
17.1.6 The above will result in a discussion with the individual presenting the program and acceptance or rejection of the proposed program and/or budget.
17.2.1 Upon completion of any CSGNA educational program (including chapters), a final report on the “Education Post-Program Report” form must be submitted to the National Treasurer within one (1) month of the event.
17.2.2 The Treasurer will review the report and forward a copy to the Education Chair for the retention in the CSGNA records.
17.3.1 All CSGNA events, sponsored or held by chapters or individual members, shall remit twenty-five percent (25%) of all profits generated, to the National Society to support programs for the general membership. (i.e. guidelines for practice, certification process etc.)
17.3.2 Any CSGNA member hosting/conducting an educational or fund raising event utilizing the CSGNA title shall have a bank account requiring two (2) signing officers, both members of the CSGNA.
17.3.3 All CSGNA chapters shall remit twenty-five percent (25%) of all profits at year-end December 31, with their financial report for that said year.
17.3.4 An extenuating circumstance needing an extension must be obtained from the National Treasurer and President.
17.3.5 The remainder of profits raised by chapters at CSGNA designated events are to be used for needs as determined by its membership.
17.3.6 The remainder of profits raised by CSGNA members shall be placed in a bank to organize future CSGNA educational meetings, supporting chapter formation costs, and to pay for bank account expenses. (i.e. service charges).
17.3.7 The national CSGNA shall remit ten percent (10%) of the profits from the annual conference meeting to the CSGNA chapter hosting the event. This reimbursement shall be an exception to bylaw 17.3.1 but should be acknowledged in bylaw 17.3.9.
17.3.8 All CSGNA chapters will submit an annual financial report to the National Treasurer at fiscal year end December 31.
17.3.9 All chapters should be available for audits at the request of the National Treasurer.

17.4 BYLAWS COMMITTEE
17.4.1 Shall consist of the President-Elect, President, Secretary, and three members at large. The members at large will be one from East, Centre, and West.
17.4.2 It shall be chaired by the President-Elect.
17.4.3 Duties: Review annually and make amendments as necessary.

18.4.1 Promote the Association in its area and encourage membership.

18.4.2 It shall be chaired by the President-Elect.
18.4.3 Duties: Review annually and make amendments as necessary.

18.4.4 Elect a minimum of three officers to include a chairperson, secretary and treasurer to serve the committees as may be deemed necessary to fulfill the educational mandate of its area.

18.4.5 Officers shall hold office for two (2) years or until their successors are elected.

18.4.6 There shall be no restrictions upon the number of terms to which an officer may be elected to succeed themselves.

18.4.7 No officer may hold more than one office at a time.

18.4.8 Open and maintain a bank account for the chapter with a minimum of two (2) signing officers.

18.4.9 Membership fees are paid directly to the National office.

18.4.10 A one-time one year zero percent (0%) loan may be available to a local group for chapter formation upon application to the National Executive.

18.5 A CHAPTER MAY BE REVOKE FOR THE FOLLOWING:
18.5.1 At the request of the chapter.
18.5.2 Failure to have ten (10) active members. (Until such time that there is one (1) chapter in each province this minimum number may be waived)
18.5.3 Repetitive failure to respond to communication requests.
18.5.4 Failure to meet the minimum of four (4) education hours per year for the membership in its area.
18.5.5 Failure to assume responsibility for its actions and to comply with CSGNA bylaws.

18.6.1 The chapter President will report to the CSGNA National Executive any Chapter having serious internal problems or failure to meet charter requirements.

18.6.2 Chapter President will report any problems to the Regional Director.

18.6.3 The Regional Director will make arrangements for the chapter and its executive to meet with the CSGNA President or a member of the CSGNA National Executive for the purpose of evaluating the problems.

18.6.4 The results of this meeting will be presented to the National Executive at the next regularly scheduled executive meeting.

18.7 The CSGNA National Executive will determine the outcome for the Chapter.

18.8 A probationary period of twelve (12) months may be granted to comply with charter requirements.

18.9 The chapter may be revoked.

18.10 A chapter may also belong to its Provincial Nurses Association provided there is no conflict of interest with the CSGNA.

18.11 DISOLUTION CHAPTER OR NATIONAL
18.11.1 In the event of dissolution, the chapter executive, after payment of or making provisions for the payment of all liabilities, shall dispose of the assets of the chapter by forwarding the assets to the CSGNA National Executive.

18.11.2 In the event of dissolution of the Society, after payment of or making provisions for payment of all liabilities, the CSGNA Executive shall dispose of the assets of the Association by forwarding assets to one or more Canadian non-profit Association with similar activities to the CSGNA. (i.e. AORN, ERN, or Geriatric Nurses Association.)

18.12 AMENDMENTS
19.1.1 Recommendations for amendments to these bylaws shall be forwarded to the Secretary of the Association in writing ninety (90) days prior to the annual meeting.

19.1.2 Members shall be notified of the proposed amendments in writing, to be included with the information of the annual meeting.

20. PARLIAMENTARY AUTHORITY
20.1.1 The results contained in the current edition of ROBERTS RULES OF ORDER shall govern the Association in all cases to which they are applicable and which are not consistent with these bylaws.

“We cannot direct the wind, but we can adjust the sails.”
POSTER PRESENTATIONS

A thank you to the following chapters who submitted posters for display at the 1998 annual conference in Toronto:

- **ENDOSCOPIC ULTRASOUND**
  - Carina Rondeau, RN BN HSC, Winnipeg
  - Vancouver Island Chapter

- **HISTOACRYL**
  - Gail McDermott, RN Research, St. Michael’s, Toronto

- **RESEARCH-ARTIFICIAL BOWEL SPINCTER**
  - Ellen Coady, June Peckham, NFLD. Chapter

- **BARRETT’S ESOPHAGUS**
  - Ottawa Chapter

- **THE EVOLUTION OF CSGNA**
  - Golden Horseshoe Chapter

- **THE LIVER**

This will be an ongoing event at our annual conferences. In the next issue of THE GUIDING LIGHT there will be an article on poster presentation and suggestions. This will give you an opportunity to plan for the Vancouver poster display.
CNGA 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 a content article for publication in “The Guiding Light” - not reports (cumulative points). 2 Points
- Can demonstrate actively recruited members. 1 Point
- Each time has acted as a speaker at a CSGNA conference or seminar (cumulative points). 2 Points
- Each time has 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

REVISED June 04, 1998
M. SCRIVENS, EDUCATION CHAIR
APPLICATION FORM
FOR CSGNA ANNUAL SCHOLARSHIP AWARD

The Annual National Conference award of $700.00 is to be used for travel and accommodation to the Annual National Conference in Canada.

EXEMPTIONS:

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.

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR BY JUNE 1, 1998 TO THE ABOVE ADDRESS.

NAME: ____________________________________________________________

CIRCLE ALL THAT APPLY: RN  BSN  BAN  MSN  OTHER ________________

HOME ADDRESS: __________________________________________________

CITY: _____________________________   PROV: ________________________

POSTAL CODE: ___________   HOME TELEPHONE: (   ) _____________

FAX: (   ) __________________

HOSPITAL/EMPLOYER: ______________________________________________

WORK ADDRESS: __________________________________________________

CITY: _____________________________   PROV: ________________________

POSTAL CODE: ___________   JOINED THE CSGNA IN 19__

SIGNATURE: ___________________________   DATE: ___________________
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 $500.00 each, to be used for travel to an appropriate endoscopic gastroenterology or research meeting. The CAG nurse scholarship prize is sponsored by an Educational Grant from the Canadian Association of Gastroenterology.

ELIGIBILITY:

1. You are and have been for two years or more, an active member of the CSGNA.
2. You actively support CSGNA goals and objectives.

PRIZE APPLYING FOR: (please circle one) RESEARCH NURSE ENDOSCOPY NURSE

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.

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR BY FEBRUARY 15, 1998 TO THE ABOVE ADDRESS. THEY WILL BE FORWARDED TO THE SECRETARY OF THE CAG FOR SELECTION.

NAME: ______________________________

CIRCLE ALL THAT APPLY: RN BSN BAN MSN OTHER __________________________

HOME ADDRESS: ______________________________

CITY: _____________________ PROV: __________ POSTAL CODE: ___________

HOME TELEPHONE: ( ) ___________________ FAX: ( ) ___________________

HOSPITAL / EMPLOYER: ____________________________________

WORK ADDRESS: ______________________________

CITY: _____________________ PROV: __________ POSTAL CODE: ___________

NAME OF DIRECTOR OF UNIT: ____________________________________

NAME OF THE MEETING YOU WISH TO ATTEND: __________________________

DATE OF THE MEETING: ___________ CITY WHERE MEETING WILL BE HELD: __________

JOINED THE CSGNA IN 19____

SIGNATURE: ___________________________ DATE: ___________________
NOMINATION FORM

Please complete this form and submit to the Chair of the Nominations Committee (currently the President of the CSGNA) 150 days before the Annual Meeting for national office. Ballots will be sent to the active members 120 days before the Annual meeting and must be returned within 90 days.

Candidates must be active CSGNA members in good standing.

Name of nominee: ____________________________________________

Address: ___________________________________________________

__________________________________________ Postal Code ________________

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 ___________________ 19____. Signed ________________________

Nominated by ______________________________ & _______________________________
Signea Membership
Membership Application
Society of International Gastroenterological Nurses and Endoscopy Associates

Individual Membership
Individual memberships for gastroenterological nurses and endoscopy associates are available for $10.00 annually ($US).

Affiliate Membership
Individuals interested in joining SIGNEA, such as physicians, other medical professionals, and non G.E. nurses, pay affiliate membership fees of $50 annually ($US).

National G.E. Nursing Organization Membership
Membership in SIGNEA is available to national nursing organizations. Membership inquiries may be sent to the SIGNEA Secretariat. National G.E. Nursing organization dues are dependent upon the number of national members in each organization. Membership applications should be accompanied by payment and the name of the organization’s official contact person.

Corporate Membership
SIGNEA welcomes corporate memberships by companies which supply G.E. products, drugs, general medical equipment and any service that would be utilized by G.E. nurses. Detailed corporate membership information may be obtained from: Pat Perthigal, Chair, fax: 206.223.6379, phone: 206.223.6965 or the SIGNEA Secretariat.

WORKPLACE
- Endoscopy Unit/Hospital
- Endoscopy Unit/Clinic
- Inpatient/Outpatient

POSITION
- Administrative/Director
- Consultant Nurse
- Head Nurse
- Staff Nurse
- Supervisor/Coordinator
- Technician (Patient Care)
- Clinical Specialist
- Educator
- Researcher
- Technician (machine)
- Nurse Practitioner
- Manufacturer Representative
- Corporate Nurse Consultant
- Other

Check Membership Level/Payment

<table>
<thead>
<tr>
<th></th>
<th>1 year</th>
<th>2 year</th>
<th>3 year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Membership</td>
<td>$10</td>
<td>$20</td>
<td>$30</td>
</tr>
<tr>
<td>Affiliate Membership</td>
<td>$50</td>
<td>$100</td>
<td>$150</td>
</tr>
<tr>
<td>National G.E. Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership up to 100</td>
<td>$50</td>
<td>$100</td>
<td>$150</td>
</tr>
<tr>
<td>101 - 400</td>
<td>$200</td>
<td>$400</td>
<td>$600</td>
</tr>
<tr>
<td>401 - 1,000</td>
<td>$400</td>
<td>$800</td>
<td>$1,200</td>
</tr>
<tr>
<td>Over 1,000</td>
<td>$750</td>
<td>$1,500</td>
<td>$2,250</td>
</tr>
<tr>
<td>Corporate Membership</td>
<td>$1,000</td>
<td>$2,000</td>
<td>$3,000</td>
</tr>
</tbody>
</table>

Please add an additional $15 for those checks that are drawn off Non-US banks. $ __________ Total Pymnt.

# Years Education/Training
- 1 Year
- 2 Year
- 3 Year
- 4 Year
- 5 Year

First Name (Given Name)

Last Name (Family Name)

Address for Mail

City

State/Province

Country

Postal Code

Telephone

Fax

Email address

Employing Organization

Title

Send completed form to:
Kimberly Svevo, SIGNEA
401 N. Michigan Ave., Suite 2200 Chicago, IL 60611 USA
Phone: 312.644.6610 Fax: 312.321.6869 E-mail: kimsvevo@sba.com
SGNA Membership Application

CONTACT INFORMATION (Please print or type.)

First        MI        Last

Nickname

Hospital/Office/Company Name

Social Security Number        Date of Birth

Please provide both addresses and check your preferred mailing address:

☐ Work
Street Address ____________________________
City ____________________________ Zip __________
State/Province ____________________________
Country ____________________________
Phone ____________________________
Fax ____________________________

☐ Home
Street Address ____________________________
City ____________________________ Zip __________
State/Province ____________________________
Country ____________________________
Phone ____________________________
Internet/E-Mail Address ____________________________

REFERRED BY ____________________________
(If applicable)

PAYMENT INFORMATION • dues subject to change
A. Membership (SGNA membership runs on a calendar year and is renewable by January 1 of the following year.)
Check the category of membership for which you are applying:

<table>
<thead>
<tr>
<th>Voting Status</th>
<th>Type</th>
<th>Definition</th>
<th>Annual Dues</th>
<th>Prorated Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Voting</td>
<td>Licensed Nurse</td>
<td>Limited to Registered Nurses and Licensed Vocational/Practical Nurses involved in, or associated with gastroenterology and/or endoscopy nursing practice</td>
<td>$105.00</td>
<td>$60.00</td>
</tr>
<tr>
<td>☐ Voting</td>
<td>Associate</td>
<td>Limited to Assistive Personnel - technicians, technologists, assistants involved in, or associated with gastroenterology and/or endoscopy nursing practice</td>
<td>$105.00</td>
<td>$60.00</td>
</tr>
<tr>
<td>☐ Non-Voting</td>
<td>Affiliate</td>
<td>Includes, but is not limited to, physicians, consultants, industry representatives, educators involved in, or associated with, gastroenterology and/or endoscopy nursing practice</td>
<td>$90.00</td>
<td>$45.00</td>
</tr>
</tbody>
</table>

SUBTOTAL A ____________________________

B. Regional Societies
All voting members (licensed nurses and associates) residing in the U.S. are required to affiliate with an SGNA regional society.
Regional Society preference (Indicate two-digit code of preferred region from the table listed on opposite page): ____________________________

Regional Society Dues:

Voting Licensed Nurses and Associates
No additional payment needed Included in Annual Dues Amount

Non-Voting Affiliate
Optional payment, if interested please indicate preferred region above and remit an additional $15.00 (If after July 1, remit $250.)

SUBTOTAL B (If applicable): ____________________________
MEMBERSHIP APPLICATION  
(CHECK ONE)  
☐ ACTIVE  
$40.00  
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  
$40.00  
Open to physicians active in gastroenterology/endoscopy, or persons engaged in any activities relevant to gastroenterology/endoscopy (includes commercial representatives on an individual basis).

FORMULE D’APPLICATION  
(COchez UN)  
☐ ACTIVE  
40,00 $  
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  
40,00 $  
Ouvert aux médecins, actifs en gastroentérologie endoscopique ou personnes engagées en activités en gastroentérologie/ endoscopiques incluant représentants de compagnies sur une base individuelle.

APPLICANT INFORMATION / INFORMATION DU MEMBRE

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

SURNAME  
NOM DE FAMILLE  
☐ MR / M  ☐ MRS / MME  ☐ MISS / Mlle  ☐ MS / MS  
PRENOM  
FIRST NAME  
HOME ADDRESS  
ADRESSE MAISON  
CITY  
VILLE  
PROV.  
PROV.  
POSTAL CODE  
CODE POSTAL  
POSTAL CODE  
CODE POSTAL  
HOME PHONE  
TELEPHONE (  )
HOSPITAL/OFFICE/COMPANY NAME  
NOM DE HÔPITAL/BUREAU/COMPAGNIE  
TITLE / POSITION  
TITLE / POSITION  
BUSINESS ADDRESS / ADRESSE TRAVAIL  
CITY  
VILLE  
DEF.  
PROV.  
PROV.  
POSTAL CODE  
CODE POSTAL  
BUSINESS PHONE  
TELEPHONE TRAVAIL (  )  
EXT.  
LOCAL  
FAX  
TELEcop. (  )  
CHAPTER NAME  
NOM DU CHAPITRE  
SEND MAIL TO  
ENVOYEZ COURRIER À  
☐ HOME  
☐ BUSINESS  
☐ MAISON  
☐ TRAVAIL  
EDUCATION (CHECK ONE)  
☐ RN  ☐ RNA  ☐ TECH  ☐ OTHER (EXPLAIN)  
☐ MAISON  
☐ TRAVAIL  
EDUCATION (COchez UN)  
☐ IN  ☐ I AUX  ☐ TECH  ☐ AUTRE (SPECIFIEZ)  
MEMBERSHIP (CHECK ONE)  
☐ RENEWAL  ☐ NEW  ☐ NOUVEAU  
ABONNEMENT (COchez UN)  
☐ RENOUVELLEMENT  
WOULD YOU BE INTERESTED IN HELPING ON ANY OF THE FOLLOWING COMMITTEES?  
☐ BY-LAW  
☐ STANDARDS OF PRACTICE  
☐ EDUCATION  
☐ MEMBERSHIP  
☐ CONFERENCE PLANNING  
☐ NEWSLETTER  
SERIEZ-VOUS INTERESSES À AIDER EN FAISANT  
PARTIE DE CERTAINS COMITÉS?  
☐ BY-LAWS  
☐ STANDARD DE PRATIQUE  
☐ EDUCATION  
☐ MEMBERSHIP  
☐ CONFERENCE PLANNING  
☐ NEWSLETTER  
☐ I have enclosed my cheque payable to CSGNA.  
(Mail with this completed application to the above address.)  
☐ J’ai inclus mon chèque payable à CSGNA.  
(Envoyez avec cette formule d’application dûment remplie à l’adresse ci-haut mentionnée.)
CSGNA 1998-1999 Executive

**PRESIDENT**

CINDY HAMILTON  
Credit Valley Hospital  
2200 Eglinton Ave. W.  
Mississauga, Ontario  
L5M 2M1  
(905) 813-4267 (W)  
(905) 632-4110 (H)  
FAX: (905) 634-0323  
E-MAIL: chamilt@netcom.ca

**NEWSLETTER EDITOR**

LORIE McGEOUGH  
G. I. Unit  
Pasqua Hospital  
4101 Dewdney Avenue  
Regina, Saskatchewan  
S4T 1A5  
(306) 766-2441 (W)  
(306) 766-2762 (W)  
FAX: (306) 766-2513  
E-MAIL: lmcgeough@reginahealth.sk.ca

**PRESIDENT ELECT**

LORRAINE MILLER HAMLYN  
180 Waterford Br. Rd.  
St. John’s Newfoundland  
A1E 1E2  
(709) 722-0294 (H)  
(709) 778-6737 (W)

**SECRETARY**

JEAN MACNAB  
Endoscopy Unit - Ottawa Civic Hospital  
3381 Greenland Road  
R.R. #1, Dunrobin, Ontario  
K0A 1T0  
(613) 832-0906  
(613) 798-5555 Ext. 3179 (W)  
FAX: (613) 761-5269

**CANADA EAST DIRECTORS**

LINDA FELTHAM  
74 Penetanguishene Road  
St. John’s, Newfoundland  
A1A 4Z8  
(709) 753-6756 (H)  
(709) 737-6431 (W)  
FAX: (709) 737-3605

EVELYN McMULLEN  
5532 Northridge Rd.  
Halifax, Nova Scotia  
B3K 4B1  
(902) 453-6151 (H)  
(902) 473-6541 (W)  
FAX: (902) 473-4406

**TREASURER/MEMBERSHIP**

EDNA LANG  
27 Nicholson Dr.  
Lakeside, Nova Scotia  
B3T 1B3  
(902) 876-2521 (H)  
(902) 473-6541 (W)  
FAX: (902) 473-4406  
E-MAIL: ednalang@hotmail.com

**CANADA CENTRE DIRECTORS**

NANCY CAMPBELL  
Endoscopy Unit  
Montfort Hospital  
713 Montreal Road  
Ottawa, Ontario  
K1K 0T2  
(613) 746-4621 Ext. 2704  
FAX: (613) 748-4914

MONIQUE TRAVERS  
G. I. Unit  
Ottawa General Hospital  
501 Smyth Road  
Ottawa, Ontario  
K1H 8L6  
(613) 737-8383 (W)  
(613) 837-6576 (H)  
FAX: (613) 737-8470

**EDUCATION CHAIR**

MARLENE SCRIVENS  
G.I. Unit  
Pasqua Hospital  
4101 Dewdney Avenue  
Regina, Saskatchewan  
S4T 1A5  
(306) 766-2441 (W)  
(306) 789-3305 (H)  
FAX: (306) 766-2513  
E-MAIL: scrivens@sk.sympatico.ca

**CANADA WEST DIRECTORS**

CHERYL MCDONALD  
4644 - 51st Street  
Delta, B.C.  
V4K 2V7  
(604) 940-4432 (H)  
(604) 682-2344 (W) Ext. 2713  
FAX: (604) 631-5048

JUDY LANGNER  
129 Greshnach Cres.  
Edmonton, Alberta  
T6L 1W6  
(403) 463-1934 (H)  
(403) 450-7116 (W)  
or (403) 450-7323 (W)

Website: www.webray.com/csgna