T.B. – EVERY CASE WAS A CONTACT AT ONE TIME

By Cindy Hamilton, R.N. – President CSGNA

Over the past decade in Canada there has been an increase in the number of cases of tuberculosis, especially in the high risk populations. Those included as high risk areas follows:

1. Foreign born from endemic areas such as the Middle East, Asia, Africa, Latin America and the Caribbean.
2. The socio-economic depressed.
3. Elderly who lived through an era when T.B. was common.
4. The immunosuppressed.
5. Aboriginal communities with a high rate of T.B.
6. Close contact of infectious patients.
7. Those with inactive T.B. that has not been adequately treated.
8. Alcoholics and IV drug users.

TRANSMISSION

Transmission of T.B. has always been a recognized risk for the Health Care Professional. T.B. is transmitted by droplet nuclei. The causative agent, Mycobacterium Tuberculosis, is a small airborne particle less than five microns in size and spread primarily by airborne droplets from persons infected with untreated T.B. in the lungs or larynx. When a person coughs or sneezes small droplets of moisture are expelled. Some of these droplets contain tubercle bacilli or “droplet nuclei” small enough to be inhaled. These nuclei are carried by air currents and are breathed into the lungs where they settle and grow. Tubercule Bacilli that are lodged as fomites, such as linen, furniture, books, and floors, do not constitute a significant infection hazard. Viable bacilli must reach the lung tissue to be established.

In summary the transmission of T.B. infection occurs through combination of several factors.

1. viable bacilli in source sputum.
2. sputum aerosolization caused by cough.
3. adequate concentration of bacilli in the air.
4. a susceptible host.
5. a sufficient length of time during which the host is breathing in contaminated air.

PROTECTION OF THE HEALTH CARE WORKER

The environment can have an impact on the case of T.B. transmission. Small enclosed spaces such as waiting rooms or Emergency Department areas can contribute to the transmission of T.B. by enclosing the airborne nuclei in a tight space. Combining inadequate ventilation (insufficient dilution or removal of droplet nuclei) and the recirculation of air containing droplet nuclei in a small enclosed space can create a perfect environment for the transmission of T.B. Other important transmission factors that put the H.C.W. at risk are cough inducing procedures such as sputum collection, bronchoscopy and aerosol treatments. While the H.C.W must give patient care during these procedures the risk of transmission can be reduced greatly by:

1. using tissues to cover the patient’s mouth and nose when coughing or sneezing.
2. performing cough inducing procedures in adequately ventilated areas.
3. use of high efficiency particle air masks (HEPA) or charcoal filter masks such as LASER, which will filter particles one micron or higher.
4. use of ultra violet irradiation lights.

continued on page 2...
Continued …

5. effectively treating the patient with anti-tuberculosis therapy.

6. the health care worker should be educated to identify those individuals with symptoms of active disease.

Providing adequate ventilation in working areas, isolation rooms, and in rooms where cough inducing procedures are performed is a major factor in prevention of transmission. Air exchange should be at least five to six exchanges in one hour. Procedures should be done in rooms with negative pressure in relation to adjacent rooms or hallways or should be exhausted to the outside away from intake sources. To protect the HCW and other patients, those with suspected T.B. should be placed in separate waiting areas, ideally rooms meeting T.B. isolation requirements. If a separate area is unavailable then the patient should be masked and instructed to keep the mask in place. These masks must be able to filter microns lower than five.

A sealed fit must be adhered to as well. These patients should also be instructed to keep mouth and nose covered when coughing or sneezing. Provided the HCW is in a clinic setting, the patients with active T.B. should be seen at the end of the day or at a time when the number of noninfected patients is at a minimum.

If cough inducing procedures must be done on suspected or diagnosed active T.B. patients they must be done in areas with local exhaust ventilation devices or those that meet ventilation requirements. Specifically Bronchoscopies should never be done in positive pressure rooms such as operating rooms, since these areas are designed to provide cleaner air during operative procedures by directing air flow from the O.R. to the hallway.

To protect the HCW and ultimately safeguard the patient the current CDC (Centre for Disease Control) guidelines recommend the use of HEPA ventilation, Ultraviolet Irradiation, or personal respiratory filtration systems.

One type of ventilation system is local exhaust at or near the source of contaminants. The single pass system (100% exhausted to the outside) is the preferred system for isolation rooms, and cough inducing procedure rooms.

Negative air flow is recommended and can be used in combination with HEPA filtration and is suggested for rooms in which air flow is not negative. HEPA filtration systems can be installed directly into duct work or used as portable systems.

Ultraviolet Germicidal Irradiation (UGVI) is used to disinfect air and minimize exposure to the HCW UGVI should only be used in conjunction with other protective measures. Germicidal irradiation is accomplished one of two ways – duct irradiation or upper air irradiation. Duct irradiation is effective in isolation rooms by treating air and recirculating the treated air back into the rooms. Upper room air irradiation is accomplished by ultraviolet lamps suspended from the ceiling or mounted on walls. These lamps are shielded to direct the radiation upwards. The effectiveness of UGVI depends on room configurations, lamp placement and air flow patterns. UGVI is not used without risks. Short term overexposure can lead to kerato conjunctivitis and skin erythema. The risk of squamous cell carcinoma is also increased. These factors must be considered before using this system and protective measures are supplied for staff.

Personal respiratory protective systems are expensive and cannot be used by all individuals. The HEPA mask has an extremely tight seal and staff must undergo a fitness test prior to usage. Staff members with mild cardiac or respiratory problems may experience problems with the use of these systems and should therefore not be assigned to cough inducing procedures.

Even with the use of these various filtration systems, it is important to realize that the first line of defense for the HCW is proper triage of suspected T.B. patients. Knowing the signs of T.B. such as weight loss, night sweats, coughing and hemoptysis, in addition to socioeconomic and family history can provide the information necessary to triage the patient. In preparing to treat these patients the HCW should remember that patients are not infectious if there is no clinical evidence of acute pulmonary or laryngeal disease. Also patients who have been placed on sufficient treatment have been rendered non-infectious.

Proper screening of the health care professional is one of the leading methods of halting spread of T.B. in the health care facility. Look to the next issue of the Guiding Light for current screening methods.

Reprinted Nov. 1999
Health Care Workers

Thank you, thank you, thank you for your kindness in letting my family and I live and grow. We love it here! You usually don’t see us (the laboratory people do sometimes under a microscope) but we’re in the air, the floor, the patients, just every place.

Since we like to travel so well, we especially like to ride on your hands and in your mouth and nose. One day I went to eight different rooms before I decided to jump off. That was all because somebody forgot to wash their hands. Why, did you know that on a good cough or sneeze, I can travel through the air as far as ten feet? It’s just as nice to travel on a dirty mask hanging around someone’s neck.

Personally I was born and raised in a surgical wound. It’s dark, moist and warm and a very nice place to be born. My mother got into that lovely wound because someone got the dressing a “little” contaminated before putting it on.

Now take my sister, she prefers urinary homes. She gets her home by depending on someone to carelessly disconnect the catheter tubing or carelessly emptying the drainage bag. Once she’s in the tubing or drainage bag it only takes her a couple of hours to reach the urinary bladder. Then she starts raising her family and you know how fast kids can grow? It’s strange to me that urinary tract infections are one of your biggest problems, and it’s not even our fault.

One of my other sisters likes to make her home in the water and walls of the mop bucket. (Somebody said they’re supposed to change the water and mop head every day, but sometimes they get in a hurry and it doesn’t get done.) Anyway she raises her millions of children in the water and walls. When the family gets too large they leave home by getting on the mop. After being spread on the floor, they can pretty much go wherever they like.

A brother of mine has a really tricky method of travel. He hides in the linen chute. Occasionally he gets on with a dirty bag of linen and goes to the laundry room. From there he tries to get from the dirty linen to the clean without going through the wash. (Washing is a deadly thing for us.) If he makes it, he goes back to the nursing unit with clean linen and finds a nice unsuspecting patient to infect for a while.

I have other relatives who get around by riding on such things as the basket the lab personnel carry riding on the wheelchairs, attacking Respiratory Therapy equipment and hiding in X-ray Physical Therapy and the Kitchen. It’s a great life!

Oh, sure, doctors use antibiotics to try to kill us but sometimes they don’t always use the right antibiotic and we grow anyway. Other times we’re strong enough not to let the antibiotics bother us. (I think the term is that we’re resistant to the antibiotic.)

Again, thanks to you, my family and I live and grow quite nicely. Please remember it’s deadly for us when you wash your hands after each patient contact, when you carefully work with catheters, when you correctly mop floor, clean linen chutes, handle laundry and use sterile techniques.

I cannot emphasize enough how correct handwashing alone can hurt my family. It’s so deadly to us.

So, think of me the next time you wash your hands.

Sincerely yours,

Your Favorite Infective Microorganism

**CHANGE OF NAME ADDRESS/NAME**

Name: ________________________________________________________________

New Address: __________________________________________________________

City: __________________________ Province: ______________________________

Postal Code: __________________________ Phone: _________________________

Fax: __________________________ E-Mail: _________________________________

**MOVING?**

**LET US KNOW!**

Remember to send in your change of address!
MESSAGE FROM THE PRESIDENT

Congratulations to Deb Erickson Chair of Gastro '99 Nurses Program, and to the Vancouver Chapter and the Gastro '99 Program Committee, whose endless hours of diligence produced an amazing Conference in Gastro '99. It truly was an International Event with Nurses from many Countries including Brazil, Ecuador, Australia, France, Holland, and many from the USA. The friendships formed here will follow us into the New Millennium!

It is my pleasure to welcome new members Sandy Saioud (Director Canada Centre) Elaine Binger (Secretary) and Evelyn Hilderman (Canada West) to the National Executive. As well we bid adieu but not goodbye to Jean McNabb (Past Secretary) Cheryl MacDonald (Canada West) and Monique Travers (Canada Centre).

The past year as President of CSGNA has been a personally rewarding one. It is an honor to work with such a fine tuned machine as the National Executive. Over the next year we will continue to build on the relationship between the National Executive and the Chapters. The Chapters are the voice of the membership. If you as a member have a request or problems please make your Chapter Executive aware. The Chapter Executive will then bring the matter before the National Executive for a resolution. Through working together we will all benefit.

This year at the Chapter/Executive meeting revisions to the chapter package were presented by Nancy Campbell and an interactive discussion between all parties proved fruitful. The Executive Board has worked diligently to provide the membership with support and an array of educational tools. In September at Gastro '99 CSGNA presented Guidelines for Latex allergies and a discussion on Nurse Endoscopy. The Education committee under the direction of Chair Marlene Scrivens will unveil this year an in-depth orientation Program for Employees in Endoscopy. We are gathering information as well to produce Guidelines in Bronchoscopy. Anyone that does Bronchoscopy is asked to send information on his or her methods to Evelyn McMullen (Canada East Director). Thirdly CSGNA plans to produce a paper on the Reuse of Single use Critical Medical Devices. As you can see we have a great deal of ground to cover.

Please let us know of any other matters you would like discussed, or any educational offering you would like us to address. Remember through working together great summits can be reached!

Respectfully Submitted by Cindy Hamilton RN CGRN

PRESIDENT ELECT REPORT

The 1999 revised CSGNA Bylaws are included in this edition of “The Guiding Light”. These Bylaws were ratified by the CSGNA members July 1999. I would like to highlight for you two of the major changes.

1. Article 17.4 Bylaws Committee

The committee structure has changed from three members at large to three Regional Directors. One each from East, West and Center. Under article 19 all active members may submit recommendations to the committee for Bylaw changes thus eliminating the need for members at large on the committee.

Meetings will be held in conjunction with the CSGNA Spring Board Meeting and by teleconference if necessary. Previously all meetings were held by teleconference. It was agreed that Bylaw changes require much discussion and debate and this can best be accomplished at face to face meetings.

Article 19 Amendments

All ACTIVE members may submit recommendations for bylaw changes to the Chair of the committee (President Elect) 180 days prior to the annual business meeting for review and discussion at the Bylaws Committee Meeting in April. The committee will discuss your recommendations and decide which bylaw changes will be recommended to the membership. The membership will continue to vote on all Bylaw changes.

All active members and Chapters are encouraged to review the bylaws and submit any recommendations for bylaw changes to me by March 22, 2000. My address is on the back of this newsletter.

Lorraine Miller Hamlyn

MESSAGE FROM THE EDITOR

Congratulations to Gastro 99 planning people and all the others in the background. Excellent work.

This issue will review TB and help to refresh us on those issues. We also have implemented many revisions to the CSGNA BYLAWS. Please familiarize yourself with them.

We welcome new members to the CSGNA Executive, Sandy Saioud, Evelyn Hilderman and Elaine Binger.

A gentle reminder for all members please submit any articles or information you would like to share with others. This is your networking tool, please use it as such.

A congratulations and thank you to all of the people that have contributed to the newsletter this past year. You are the ones that have made The Guiding Light a success. Keep up the good work!

Sincerely,

Lorie McGeough

CANADA EAST REPORT

Thank you Vancouver Chapter for the fine program and the great hospitality that was enjoyed by everyone in attendance at the CSGNA National Conference at Gastro 99. You did an excellent job.

The Annual Canada East Conference took place on June 17, 18 & 19th in Prince Edward Island. The Loyalist Inn in Summerside provided beautiful surroundings for the 29 delegates from 10 hospitals in NS, NB and PEI. The topics included; C. difficile-morbidity and mortality, infection control, chromatosis – an overview, ERCP – a nursing perspective and several lectures on current research studies. Ottawa Chapter’s poster on the evolution of
the CSGNA was presented and a brief review of several of our policy statements and guidelines were featured. The open discussion among colleagues from so many institutions was, as usual, enjoyable and informative. All comments were positive and the delegates left with a feeling of satisfaction with CSGNA’s role.

The NB/PEI Chapter is hosting an education day at the Moncton Hospital on October 16th. The NS Chapter is hosting their education day at the QEII Health Sciences Center, VMB site on November 6th. Both programs contain timely topics and will provide our colleagues with the opportunity to meet, greet and learn from one another.

As the year end draws closer and we approach the new millennium we will continue striving to meet our goals and objectives.

Merry Christmas and Happy New Year everyone!

Evelyn McMullen
Director, Canada East

CANADA EAST REPORT

Thank you to Vancouver for a very informative conference and giving us an outlook to what lies ahead in the next millennium in GI nursing. Also a thank-you to the vendors for their excellent displays and contribution to the CSGNA. At this conference Nfld. had four representatives.

I have agreed to stay on as Canada East director for another two years and we will have many challenges in the 21st century such as the issue of nurse endoscopist.

The next Nfld. Chapter meeting will be the end of Oct. which the planning committee for the 2002 national conference will be organized. Also we are looking at an education day in the spring which will give others involved in gastroenterology an opportunity to participate. An update will follow as it becomes available. If there are any suggestions from across the island please forward them.

Don’t forget to start planning to send representation to the Atlantic and National CSGNA conference in 2000.

Linda Feltham

REPORT FROM CANADA CENTRE

I am pleased to be the new Director for Canada Centre. I am looking forward to working with the Chapter Executives to promote our organization and increase our membership.

The Greater Toronto Chapter has organized an education evening for November 18th at 6:00 P.M. at Kings Health Centre. Penax and Fibertech will sponsor this evening. Election for Toronto Chapter Executives will also be held. Please consider getting involved in your chapters.

The Golden Horseshoe Chapter had an education session on June 26th. It was an informative session. I would like to take this opportunity to thank Judy Searay and Sharon Thomas for their efforts, dedication and hard work over the past three years.

This Chapter will be having an education session/Business meeting on November 25th at McMaster. Election for new Chapter Executives will also be done at this time. Please consider supporting your chapter. Together we can make a difference. If you are interested in being part of the Chapter Executive, please call Sharon Thomas (905) 388-0035.

The London Area Chapter held an education night on Oct. 7th. Doug Jowett did the presentation from Cook Canada. It was an informative session on Esophageal Varices and Cholangitis. Cook Canada sponsored the evening.

The South Western Ontario Chapter is planning an all day seminar for sometime this fall. More information on this will soon be available on our web site.

Sincerely,

Sandy Saioud
Director of Canada Centre

OTTAWA CHAPTER

Having just returned from GASTRO 99 I am still extolling its virtues to my fellow colleagues who were not as privileged as I was to attend. Both educationally and socially it was a very fulfilling conference. Perhaps so much was accomplished simply because there were five days instead of our usual two. However, there were so many other variables to this conference. The Pan American scope making its sheer size unheard of in CSGNA’s fifteen year history. The sharing of the Wellsley program with the physicians was a wonderful experience. I think CSGNA is doing an excellent job for all its members and GASTRO 99 was a prime example of it’s dedication to educational excellence. My thanks to the organizing committee for a wonderful conference. In this same venue Ottawa is hosting our national conference on September 22nd and 23rd, 2000 and we continue to pledge educational excellence. We look forward to seeing you there!

Yours in CGNA,

Nancy Campbell RN.

REPORT FROM CANADA WEST

I am excited and pleased to be the new Director for Canada West. I look forward to working with the CSGNA Executive and all of the CSGNA members. My address and numbers are on the back of The Guiding Light, please feel free to call me.

Thank you for this opportunity.

Sincerely,

Evelyn Hilderman

WESTERN DIRECTOR REPORT

Manitoba Chapter

For the September meeting of the Manitoba Chapter: “Solutions for Flexible Endoscope Reprocessing Dilemmas” was presented by Mr. Ken MacKinnon from Dialife Medical Products Inc. The evening was sponsored by Fibertech Canada E.R. and Dialife Medical Products Inc.
Edmonton Chapter

The Edmonton Chapter has planned a meeting for October 14, 1999. The guest speaker will be Dr. Beth Perry presenting “Stories of Exemplary Nursing”. We know it will be an inspiring evening.

Calgary Chapter

The Calgary chapter have discussed sponsoring a Spring 2000 conference. We look forward to a great learning opportunity in the spring.

Just a reminder to all our membership – it’s time to renew. We count on your support in order to promote learning for all our members. Gastro ’99 was a great opportunity for learning but we need to continue to move forward!

Respectfully submitted by
Judy Langner
Director, Alberta, Manitoba

GASTRO 99 SCHOLARSHIP/ PRECEPTORSHIP PROGRAM

FULL SCHOLARSHIP WINNER: Luisa Fanes – Brazil

PRECEPTOR: Linda Frandsen – Kelowna General Hospital, Kelowna, B.C.

PARTIAL SCHOLARSHIP WINNER: Margarita Duran Duran – Ecuador

PRECEPTOR: Marlene Scrivens – Pasqua Hospital, Regina, Sask.

SPECIAL THANKS TO CUSTOM ULTRASONICS AND ALL THE CHAPTERS AND INDIVIDUALS WHO CONTRIBUTED TO THE SCHOLARSHIP FUND

The Okanagan Chapter of C.S.G.N.A. was fortunate to be chosen to be a host as part of the Gastro 99 nursing sponsorship. Luisa Fanes came from Curitiba, Brazil to the conference in Vancouver and then to the G.I. Unit at Kelowna General Hospital.

In Brazil she is in charge of an Endoscopy Unit and also teaches nursing assistants at a college level. She has a constant battle to convince the hospital Administration and doctors of the importance of having nurses involved in the Unit and respecting their knowledge. She was given the C.S.G.N.A. policies and procedures as well as contacts of suppliers for different equipment, solutions, etc. Because she is also in charge of Radiology, CT and Ultrasound, she spent a day in that department, and spoke with instructors from the college nursing program. When she returns to Brazil, she will be helping to write the standards and recommendations for their National G.I. Organization that has just recently been formed.

It is always interesting to exchange ideas and fortunately Luisa’s English is much better than our Portuguese. The nine days here were a whirlwind for her I’m sure. As well as coming to work with us, she experienced the Okanagan orchards and wineries, a church service, fitness classes, Dragon Boat races, and golf. She is a warm, intelligent person with a great sense of humor and we all feel the richer for meeting her.

Thank you for providing this opportunity.

Linda Frandsen, President Okanagan Chapter
MINI QUIZ

1. An esophageal diverticulum occurring immediately above the upper esophageal sphincter is called a:
   a. epiphrenic diverticulum
   b. Zenker’s diverticulum
   c. Meckel’s diverticulum
   d. Traction diverticulum

2. Which one of the following blood test provides an index of the liver’s ability to synthesize and release clotting factors II, VII and X?
   a. prothrombin time
   b. sylfobromophthalein (BSP) test
   c. platelet count
   d. serum ferritin

3. With which one of the following should a physical examination always begin?
   a. auscultation
   b. inspection
   c. palpation
   d. percussion

4. During an esophagogastroduodenoscopy (EGD), the physician reports seeing a phytobezoar, which is a/an:
   a. tumor or growth
   b. parasite
   c. food ball
   d. ulceration

5. To help prevent anaphylaxis from occurring, the GI professional should:
   a. check the patient’s serum IgE levels
   b. maintain a patent intravenous route
   c. not administer a drug that the patient has not received before
   d. always ask about allergies when taking the patient’s history

6. Which of the following measures can be used the GI professional to promote patient relaxation during a procedure?
   a. keeping the room dark and not talking with the patient
   b. gentle touching and ongoing verbal reassurance
   c. monitoring of vital signs and use of an intravenous line
   d. heavy sedation and oxygen application

7. Each of the following is an adverse effect of anticholinergic drugs except:
   a. headache
   b. bradycardia
   c. dry mouth
   d. urinary retention

8. Prior to storage at the end of each working day, the water bottle should be sterilized because:
   a. secretions may have overflowed into the water bottle
   b. bacteria may have traveled upward from the endoscope
   c. it may serve as a reservoir of contamination
   d. accumulation of bacteria may have clogged the port

9. In the diagnosis of upper digestive tract diseases, ultrasonography is useful for determining the:
   a. degree of ulcer formation
   b. degree of variceal hemorrhage
   c. depth of ulcer erosion
   d. depth of cancer invasion

10. Naloxone is best described as a/an:
    a. anti-epileptic agent
    b. narcotic antagonist
    c. narcotic
    d. anticholinergic agent
SYNOPSIS OF CSGNA EXECUTIVE MEETING, VANCOUVER – AUGUST 30, 1999

NEW EXECUTIVES: Canada Center Director – Sandy Saioud, Canada West Director – Evelyn Hilderman, Secretary – Elaine Binger.


2. ADVANCE PRACTICE: Now our members are more informed, questionnaires will be repeated in magazine.


4. C.N.A. Exams: Changes to proposals and specifics to standards have been completed and submitted to C.N.A. as requested. A reply is anticipated by the end of September.

5. FUNDRAISING FOR 2000: Many brilliant ideas and suggestions were presented by the group. Some will be implemented, others to be researched and investigated prior to implementation.


7. GUIDELINES: Advance Practice, Bronchoscopies, use of reusables will be published next year March. Position Statement: Infection Control, advancement of scope, peg insertion will be reviewed this year.

8. CERTIFICATION: Number of members required for exam 2001.

9. Next Meeting: Teleconference December 11, 10:00 ONT. Conference April 7-9, 2000.

Respectfully submitted, Elaine Binger

GREAT NEWS

I have been corresponding with Mary Carbonneau over the past few weeks. Primed and Flolite have offered to set up our own website for us. And they will foot the bill for upkeep and costs. Our new website will be www.csgna.com <http://www.csgna.com>. The old website will work until everyone is on board with the new one kind of like when you change your address. Mary has offered to stay at the CSGNA booth at Gastro ’99 and offer tips on the website and internet teaching for the members. Thank you Primed and Flolite!!

Many thanks to the Education Committee of the National CSGNA for a scholarship to attend the Gastro ’99 Conference in Vancouver.

Congratulations to the Vancouver Chapter for a wonderful educational SGNA for a scholarship to attend the Gastro ’99 Conference in Vancouver.

Congratulations to the Vancouver Chapter for a wonderful educational experience and for the excellent hospitality extended to us while in your beautiful city. Definitely a time to remember.

Shirley Malach
Regina, Saskatchewan

CERTIFICATION UPDATE

In the Fall of 1998 CNA council on Certification reached a decision to designate Gastroenterology Nursing in principle. In principle meant that because we are a relatively small group there has to be a plan put together for the development of the exam so that the CNA does not loose money. We were asked to review the language expressed in the Standards of care to bring out the uniqueness of Gastroenterology Nursing and the revised copy was done very well by Cheryl McKinnon and was received by CNA.

CNA board members on council of Certification were asked to review our standards and to provide their final feedback at a meeting scheduled Mid-September. We are awaiting the results of that meeting.

CNA was setting a meeting with CBGNA in September to discuss the possibility of buying some of their banked questions.

CBGNA will discuss at their Fall board meeting our interest to buy some of their banked questions. A follow up on these issues will occur in the next 3 weeks.

Last but not least CNA tells us that possibly in the year 2002 we could be writing our First Canadian Certification exam.

Michele Paquette, Certification Chair
“Nurses” is a poem that was written by William James Lyon. He died in the Comex General Hospital, B.C. on June 28, 1998 after a long battle with COPD. His daughter Sherry Cooke from Dartmouth, NS found many poems he wrote throughout his life. This tribute to nurses was among them and she sent me a copy to be shared with all nurses.

Thank you,
Janet Watters, RN, BN, MHSA, Halifax, NS

NURSES
Oh! I have read it and I’ve been told
That a nurse is a slave who can’t be sold
That they are uppity, biggity and immune to pity
As mean as men and only half as witty
You can use them and abuse them
Then throw them away
They are not worth their meager pay.

Well if you believe all that
As some of you must
You’re not interested in the filling only the crust
So come in closer, gaze into my eyes
And I will tell you a story that will make you wise.

When it’s late at night and the lights have been lowed
Pain comes calling with the usual crowd
Agony with her talon to hook and to tear
Ache with his gibbering, slobbering wear
Misery with his pulsing stare
They crowd up close and nudge and lean
Thriving on your waning, strength and fear.

Then screaming leads them at pains behest
Towards your hurt with all the rest
You lay on your sick bed and painfully fret
Wracked with fever and soaked with sweat
The crazies float before your red eyes
The spots on the walls crawl as if alive
Then death looks like a trophy or prize
If only you knew how to win it.

Then pain begins her hurtful ride
And suddenly the nurse is at your side
She is cool and soothing as the gentle rain
In her hand she holds your surcease of pain
A soft spoken word, a gentle pat
Pillow fluffed up, sheets made flat
Your pain subsides with a peaceful feeling
You sleep the sleep that starts the healing.

The nurse poor drudge while you still sleep
Returns to the front of her families keep
Children to be readied and off to school near
House to be tidied and other chores drear
Some sleep a few hours worry free
Then back to the wretches such as me.

Now when nurses pass on as they must
And all the patients have turned to dust
And you and I are just Adam’s curses
Then GOD will keep Eden just for the nurses.

WHAT DISINFECTANT OR STERILANT DO YOU USE ??

CSGNA is conducting a survey to see what disinfectant or sterilant the membership is using. With this information we will produce a list of all available disinfectants in Canada and the suppliers. Please send your information to Cindy Hamilton, President of CSGNA by fax, mail, email or phone. (see back of Newsletter)

CSGNA does not condone the use of any one disinfectant or sterilant over another.

DO YOU WANT TO CERTIFY?

CSGNA urgently needs to hear from members interested in writing the American Certification Exam in May 2000. If there are enough interested parties (greater than ten people per site), the CSGNA will sponsor a site. It costs us $700.00 (USD) to host a site. If we do not have the interest we will not have a site. Please respond to the President of CSGNA prior to December 31st, 1999. If a site is established information will be sent to the interested parties.
The Ottawa Chapter of CSGNA is proud to be hosting the 16th National Conference September 22, 23, 2000

A New Millennium

Glancing Back
Moving Forward

Come and spend an educational weekend in the beautiful National Capital Region where, as our title suggests, we will look at our past and explore the future.

For further information you may contact our co-chairs: Michèle Paquette and Monique Travers at: 613-737-8383 or Fax: 613-737-8385

Please note change of dates.
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.

GUIDELINES FOR SUBMISSION to “THE GUIDING LIGHT”

- white paper with dimensions of 8½ 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.
CANADIAN SOCIETY of GASTROENTEROLOGY NURSES and ASSOCIATES

BYLAWS

REVISED 1999

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, newsletter publication, 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 gastroenterology and endoscopy nursing practice.

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:

3.1.2 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.

4.1.1 HEAD OFFICE

The head office shall be located at the address designated by the Executive for that fiscal year.

4.1.2 The Corporate Seal of the Society shall be held in safekeeping by the officer designated by the Executive for fiscal year.

5.1 MEMBERS

There shall be four classes of members consisting of active, affiliate, lifetime, and inactive.

5.2 Active – shall be comprised of licensed Registered Nurses and associates engaged in gastroenterology nursing or endoscopic procedures. They are eligible to vote. Only Registered and Licensed Nurses may hold office.

5.3 Affiliate – shall be comprised of persons interested in the field of gastroenterology nursing. They will not be eligible to vote or hold office.

5.4 Lifetime – an individual deemed to have contributed substantial time and effort towards the advancement of the CSGNA may be nominated for a lifetime membership. Nominations may be submitted by the general membership and/or Executive. Lifetime awards are to be voted on by the general membership in attendance at the annual business meeting. Lifetime membership will include voting privileges.

5.5 Inactive – shall be a member who is not currently engaged in gastroenterology nursing or Endoscopic procedures. They are not eligible to vote or hold office. The period of time can be indefinite providing fees are kept current.

Membership is not transferable. All members shall receive all publications from the Association.

6.1.1 FEES

A membership fee will be required from the active and affiliate members annually on June 1st and will become delinquent after July 1st of that year.
6.1.2 Membership shall lapse automatically as of July 1st if dues have not been received by the National Treasurer by that time.

6.1.3 The Executive shall determine annual dues payable and shall give appropriate notice to members.

6.1.4 Members will be notified of any change in membership requirements by the regional directors and in “The Guiding Light” publication.

6.1.5 Members of the Executive do not pay any dues while in office.

6.1.6 No membership fee is required from a lifetime member.

6.2 All dues are payable in Canadian funds to the “Canadian Society of Gastroenterology Nurses and Associates”.

7.1.1 MEETINGS
The annual business meeting shall be held in conjunction with the annual conference.

7.1.2 At the annual business meeting the results of voting for Executive officers open for election will be announced.

7.1.3 Reports from the Executive officers will be presented as well as bylaw amendments, and any other significant business will be transacted as may be deemed of national concern.

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.

7.2.1 The board of directors shall meet face to face at least twice a year and by teleconference as deemed necessary by the board.

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 offices open in that fiscal year shall be mailed to the Active membership one hundred and twenty (120) days before the annual meeting. Ballots are to be returned to the Chair of the Nominating Committee ninety (90) days before the annual meeting.

9.1.3 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. If more than one nomination, a secret ballot will be held during 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 Transfer of duties from retiring Executive to newly elected Executives shall take place at the time of the annual CSGNA conference.

9.3.3 Officers elected must have served the association in some capacity prior to being elected to this office.

9.4 Officers elected have the powers and authority as described to perform their expected offices.

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.

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/ Membership Chair, Education Chair, Newsletter Editor, and the Regional Directors.

10.2 The Executive officers are open to all active members of the Association.

10.3 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 persons 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 form 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 that term. A 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:

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

12.1.2 Represent CSGNA missions, goals and positions to various publics.

12.1.3 Manage daily affairs of the organization.

12.1.4 Lead the National Board of Directors.

12.1.5 Chair Nominating Committee.

12.1.6 Provide mentoring to CSGNA leaders.

12.1.7 Submit and present an Annual report to the membership at the Annual Business meeting, and send it to the members via the National Secretary ninety (90) days prior to the meeting.

12.1.8 Submit an article three (3) times a year to the “Guiding Light”.

12.1.9 Chair and prepare agenda for the National Board Meetings and Annual Business meeting.

12.1.10 Travel commitment as deemed necessary by the Board.

12.1.11 Attend the SGNA Conference and the House of Delegates.

12.1.12 Encourage vision and growth of the organization by Fostering educational opportunities and position statement formation.

12.1.13 Be an ex-officio on all standing committees.

12.1.14 Serve a two (2) year term.

DUTIES OF THE PRESIDENT-ELECT

THE PRESIDENT-ELECT SHALL:

12.2.1 Accede to the Presidency when the President’s terms ends.

12.2.2 Become acting President and assume the duties of the office in the event of the President’s absence, disability or resignation.

12.2.3 Communicate regularly with the President as deemed necessary.

12.2.4 Learn the affairs of the Association.

12.2.5 Accompany the President to SGNA Annual Conference and attend the House of Delegates session.

12.2.6 Be the CSGNA liaison to SIGNEA.

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

12.2.8 Form and chair the Bylaw Committee.

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

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

12.2.11 Perform such duties as delegated by the President.

12.2.12 Serve a two (2) year term 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 Provide 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 Conduct all correspondence for the Association as directed by the Executive.

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

12.3.6 Be a member of the Bylaw Committee.

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

DUTIES OF THE TREASURER/MEMBERSHIP

THE TREASURER/MEMBERSHIP SHALL:

12.4.1 Be responsible for collecting fees from the members and deposit their fees in a chartered bank or trust company.

12.4.2 Maintain a bank account for the Society with a minimum of three signing officers appointed and two signatures required for any transaction.

12.4.3 Make such payments as are authorized by the Association.

12.4.4 Maintain records of expenditures of the Association.

12.4.5 Submit to the Executive, sixty (60) days prior to the annual meeting, a Treasurer’s report for publication in the annual report.

Call your mom.
12.4.13 Contribute a report per issue of "The Guiding Light".

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 education events remit appropriate reports, financial statements and reimbursements.
12.5.7 Review, provide 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 the needs of the members.
12.5.10 Submit 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 Respond 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 Submit 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 re 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 requests 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 presented 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
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 on 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 matters.

14.5.3 Any CSGNA member who does not identify a conflict of interest, remains as a 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. When there is no runner up or the runner up is not available to take office, nominations will be taken from the floor. If more than one nomination, a secret ballot will be held during the Annual Business Meeting.

16. 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 approval 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 immediate attention of the President or in his/her 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 Any extenuating circumstances 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.

Say bless you when someone sneezes.
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 regional directors. One director from each region; East, Centre, and West. The committee shall meet at the Spring Board meeting and by teleconference if deemed necessary to complete the bylaws revisions.

17.4.2 Shall be chaired by the President-Elect.

17.4.3 Reviews Bylaws and all recommendations for bylaw revisions submitted by members annually and make amendments as necessary.

17.4.4 All revisions will be presented to the board of directors at the spring board meeting for approval before submission to the membership for a vote.

17.5 NOMINATING COMMITTEE
17.5.1 Shall consist of the President and three members at large.

17.5.2 It shall be chaired by the President.

17.5.3 Duties: recommend candidate(s) for each office. Each nominee must be a member in good standing and must signify his/her consent to stand for office.

17.5.4 Mail ballots to the membership.

17.5.5 Count the ballots and announce successful candidates to the membership at the annual business meeting.

17.5.6 Report tabulations to the Executive for recording in the minutes.

17.5.7 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 intern replacement until the annual meeting when this situation can duly be resolved.

17.5.8 The person appointed should be the first runner up from the election, when possible.

17.6 SPECIAL COMMITTEES

17.6.1 The Executive, at a general meeting, may appoint a special committee and give it the power as necessary to discharge its duties.

17.6.2 A written report shall be submitted to the Executive upon completion of the special committee’s duties.

17.7 ELECTRONIC VOTING
17.7.1 The Executive, at a general meeting, may authorize the use of electronic voting where deemed necessary.

17.8 CHARTERS
17.8.1 Definition: a chapter is a geographical area (city, region, or town) where ten (10) or more active members reside.

17.8.2 They may apply to the Executive for charter as a chapter.

18. A CHAPTER MAY BE
18.1.1 Promotion: a chapter shall, in conjunction with its Regional Directors, coordinate educational activities and functions of the CSGNA within its designated area.

18.1.2 Criteria for formation of chapters: A minimum of ten (10) active members (hereinafter referred to as the local group) must apply to the Executive.

18.1.3 The Executive will supply a list of all active members in the region.

18.1.4 The local group must call for nominations from that list and notify all members of a meeting and election.

18.1.5 The number of officers required for the chapter executive shall initially be determined by the local group and henceforth by the Executive of the chapter.

18.1.6 The National Executive of the Society must be notified within thirty (30) days of the election results and of the title of the chapter.

18.1.7 The name CSGNA must appear within the title of the chapter. (e.g. The Edmonton Chapter of the CSGNA)

18.4 A CHAPTER SHALL

18.4.1 Promote the Association in its area and encourage membership.

18.4.2 Be sensitive to the concerns and problems of its area and communicate them to its Directors for discussion at the National Executive.

18.4.3 Tabulate the activities of its area and submit details to its Directors for inclusion in the Newsletter and Annual Report.

18.4.4 Elect a minimum of three officers to include a chairperson, secretary and treasurer to serve the committee 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 REVOKED 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.

When you say I love you ... mean it.
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 interests with the CSGNA.

18.11 DISSOLUTION 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 asset 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, shall dispose of the assets to one or more Canadian non-profit Association with similar activities to the CSGNA. (i.e. AORN, ERN, or Geriatric Nurses Association.)

19. AMENDMENTS

19.1.1 Active Members may submit recommendations for amendments to these bylaws to the Chair of the Bylaws Committee no later than 180 days prior to the Annual Business Meeting. All recommendations will be reviewed. Recommendations inconsistent with or contrary to the current Bylaws or the goals and objectives of the CSGNA will be returned to the member.

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

19.1.3 Vote shall be by mail to be received by the committee chair not later than 60 days prior to the Annual Business Meeting. To pass two thirds of the membership must vote in favor of an amendment. All members not voting will be considered a “yes” vote.

20. PARLIAMENTARY AUTHORITY

20.1.1 The rules 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 inconsistent with these bylaws.
MINI QUIZ ANSWERS

1. b, 2. a, 3. b, 4. c, 5. d, 6. b, 7. b, 8. c, 9. d, 10. b
APPLICATION FORM
FOR CSGNA REGIONAL SCHOLARSHIP AWARD

The Regional Conference award of $400.00 is to be used for travel and accommodation to a Regional Conference in Canada. Three scholarships each will be awarded at the Spring and Fall deadlines.

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 SENT TO THE EDUCATION CHAIRPERSON.

NAME: ________________________________________________________________

CIRCLE ALL THAT APPLY:  RN  BSN  BAN  MSN  OTHER __________________________

HOME ADDRESS: ______________________________________________________

CITY: ___________________________  PROV: ___________________________

POSTAL CODE: ____________  HOME TELEPHONE: (   ) ____________

FAX: (  ) __________________________

NAME OF THE MEETING YOU WISH TO ATTEND: __________________________

DATE OF THE MEETING: _____________

CITY WHERE PROPOSED MEETING WILL BE HELD: _______________________

JOINED THE CSGNA IN 19 __________

SIGNATURE __________________________  DATE ________________________
Canadian Society of Gastroenterology Nurses & Associates
C/O EDUCATION CHAIR: MARLENE SCRIVENS, 2107 BONNEAU PLACE 4, REGINA, SASK. S4V 0L4

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.

EXCEPTIONS:

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

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:

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

APPLICATION FORM AND SUBMISSIONS MUST BE RECEIVED BY THE EDUCATION CHAIR BY JUNE 1, 2000 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, 2000 TO THE ABOVE ADDRESS. THEY WILL BE FORWARD 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 choose 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 Perghal, 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 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  
State/Province  
Zip  
Country  
Phone  
Fax  

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

**PROFESSIONAL PROFILE**

1.) Professional Setting (Check one.)

☐ Free Standing/ 
Ambulatory  
☐ Equipment 
Sales  
☐ GI Clinic  
☐ GI Nursing Floor  
☐ Inpatient Only  
☐ Outpatient Only  
☐ Inpatient/Outpatient 
Combination  
☐ Manufacture*  
☐ Physicians Office  
☐ Other  

2.) Position (Check one.)

☐ Administrative/ 
Director  
☐ Clinical 
Specialist  
☐ Consultant  
☐ Educator  
☐ Head Nurse  
☐ Researcher  
☐ Staff Nurse  
☐ Nurse 
Practitioner  
☐ Supervisor/ 
Coordinator  
☐ Sales  
☐ Technician 
(patient care)  
☐ Technician 
(machine)  
☐ Other  

3.) Memberships in Other Nursing Organizations (Check all that apply.)

☐ ANA/SNA  
☐ AACN  
☐ ENA  
☐ ASPAN  
☐ AORN  
☐ Sigma Theta Tau  
☐ Other  

**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>

**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 additional $15.00 (if after July 1, remit $75.00.)

**SUBTOTAL A**  

**SUBTOTAL B** (If applicable):  

---

*Note: All dues are subject to change.*
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
(COCHÈZE UN)

☐ ACTIVE
40,00 $

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

☐ AFFILIÉE
40,00 $

Ouvert aux médecins, actifs en gastroenterologie endoscopique ou personnes engagés en activités en gastroenterologie/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 / MILLE ☐ MS / MS

HOME ADDRESS
ADRESSE MAISON

CITY
VILLE

PROV.
PROV.

POSTAL CODE
CODE POSTAL

HOME PHONE
TÉLÉPHONE

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

TITLE / POSITION

BUSINESS ADDRESS / ADRESSE TRAVAIL

CITY
VILLE

PROV.
PROV.

POSTAL CODE
CODE POSTAL

BUSINESS PHONE
TÉLÉPHONE TRAVAIL

EXT.
LOCAL

FAX
TELECOPIE

CHAPTER NAME
NOM DU CHAPITRE

SEND MAIL TO (CHECK ONE)
☐ HOME ☐ BUSINESS ☐ MAISON ☐ TRAVAIL

EDUCATION (CHECK ONE)
☐ RN ☐ RNA ☐ TECH ☐ OTHER (EXPLAIN)

EDUCATION (COCHÈZE UN)
☐ IN ☐ I AUX ☐ TECH ☐ AUTRE (SPÉCIFIEZ)

MEMBERSHIP (CHECK ONE)
☐ RENEWAL ☐ NEW

ABONNEMENT (COCHÈZE UN) ☐ RENOUVELLEMENT ☐ NOUVEAU

WOULD YOU BE INTERESTED IN HELPING ON ANY OF THE FOLLOWING COMMITTEES?
☐ BY-LAW
☐ STANDARDS OF PRACTICE
☐ EDUCATION
☐ MEMBERSHIP
☐ CONFERENCE PLANNING
☐ NEWSLETTER

☐ I have enclosed my cheque payable to CSGNA.
(Mail with this completed application to the above address.)

SERIEZ-VOUS INTERÉSSÉS À AIDER EN FAISANT PARTIE DE CERTAINS COMITÉS?
☐ BY-LAWS
☐ STANDARD DE PRATIQUE
☐ ÉDUCATION
☐ ABONNEMENT
☐ PLANIFICATION CONFÉRENCE
☐ JOURNAL

☐ J’ai inclus mon chèque payable à CSGNA
(Envoyez avec cette formule d’application dûment remplie à l’adresse ci-haut mentionnée.)
CSGNA 1999-2000 Executive

PRESIDENT
CINDY HAMILTON
546 Kennmarr Cres.
Burlington, Ontario
L7L 4R7
(905) 569-8100 Ext. 26 (W)
(905) 632-6410 (H)
FAX: (905) 634-0323
E-MAIL: chamil@netcom.ca

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(306) 766-2762 (W)
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E-MAIL: lmcgeough@reginahealth.sk.ca

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St. John’s’s Newfoundland
A1E 1E2
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(709) 778-6737 (W)
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FAX: (709) 722-0294

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Markham, Ontario
L3P 7N4
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(905) 472-7036 (W)
FAX: (905) 472-7086
E-MAIL: ebinger@myna.com

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FAX: (709) 737-3605

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(902) 473-6541 (W)
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FAX: (613) 748-4914
E-MAIL: ancambell@sprint.ca

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Scarborough, Ontario
M1K 4K6
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G.I. Unit
Pasqua Hospital
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S4T 1A5
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E-MAIL: scrivens@sk.sympatico.ca

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109 Strathcarr Garden S.W.
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T3H 2R1
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(403) 291-8922 (W)

JUDY LANGNER
129 Greencres Cres.
Edmonton, Alberta
T6L 1W6
(780) 463-1934 (H)
(780) 450-7116 (W)
or (780) 450-7323 (W)
FAX: (780) 450-7208

Website: www.csgna.com