Montreal 2005 a Great Success!

On behalf of the Society of International Nurses and Endoscopy Associates, I would like to thank CSGNA for their involvement in the Montreal World Congress held in September. Close to five hundred delegates from 29 countries were present in this SIGNEA’s 9th Quadrennial meeting. There was much camaraderie and sharing of knowledge which has made this event the largest in SIGNEA history. Special thanks to Maria Cirocco for her development of a stellar program and to Leslie Bearss and Elaine Burgess for their help with the daily functioning of the Congress. This was truly an International venture and CSGNA was an integral part of the success.

Merci Beaucoup CSGNA!

Cindy Hamilton RN CGN (C) SIGNEA Executive

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President’s Message

I think it is an overwhelming consensus that the nurses program at the World Congress of Gastroenterology in Montreal was a resounding success. There were nurses from 29 countries in attendance. To participate in a world congress was an experience that may only happen once in a lifetime. Congratulations to SIGNEA on providing us with such an educational venue! After focusing entirely on the World Congress for the past year and a half it will require some refocusing to move on. But move on we will! The challenge will be to present a program as good as or better for you next year. The program committee in Regina is well under way in their planning. They are looking forward to hosting you September 15th and 16th 2006. Mark it on your calendar and plan with your friends and GI colleagues to create some more GI memories.

CSGNA is offering a new award this year. It’s the “Chapter of the Year” award. The criteria were unveiled to your chapter executive at the World Congress chapter dinner. Challenge your chapter and enter into the competition.

Also do not forget the GI Nurse Professional Award. This very prestigious award was won by Michele Paquette in this our inaugural year. I think that it is a very significant award because the recipient is nominated by his or her peers for their outstanding work in GI. Nominations must be submitted before May 31st 2006. Along with the Chapter of the Year and GI Nurses Professional Awards the CSGNA is pleased to inform the membership that our scholarships have been increased from $700 to $1000. We are also adding a New Members Scholarship for first time CSGNA Members.

The CSGNA executive looks forward to another year of representing your interests.

Respectfully yours,
Nancy Campbell, President CSGNA

 Comments on the CSGNA and Your Bylaws

Submitted by:  Debbie Taggart RN, BN, CRGN, CRGN(c), President-elect, CSGNA

The Bylaws Committee has worked very hard to clarify, edit, and reword the bylaws to make them meaningful and useful to members. Resources were accessed to improve our bylaws. These included review of the bylaws of similar organizations to CSGNA such as the SGNA, SIGNEA, and the AARN. Additional references follow:

If any member has a burning interest in parliamentary procedure, Robert’s Rules of Order, or ideas for effectively running meetings using development of bylaws or policies, please contact me by email.

Several members have identified a concern that CSGNA is not recognized as a “Special Interest Group” by at least some of the provincial nursing associations. Your Board is looking into what some members consider an oversight and if you’d like to be involved, please contact Debbie Taggart president-elect at: debra.taggart@calgaryhealthregion.ca.

References:

ADVERTISING

The CSGNA Newsletter “The Guiding Light” welcomes requests for advertisements pertaining to employment. A nominal fee will be assessed based on size.
For more information contact the editor.
lesliejoy@sasktel.net
**DIRECTOR OF CANADA EAST REPORT**

For those of us fortunate enough to have attended the WCOG meeting in Montreal, what an experience! It was a full three day program, covering a wide variety of topics. The many opportunities to mingle with both national and international GI nurses offered great insight into common practices and issues.

All is well on the east coast. Membership is up from last year.

**New Brunswick/Prince Edward Island**

I’m happy to report the chapter is back on track. Thanks to Pat and Kelly for their great work. Nine members attended the Atlantic GI meeting in Lunenburg. While there they held a chapter meeting and obtained their education hours. Keep up the good work!

**Nova Scotia**

The Atlantic Association of Gastroenterologists annual meeting was held in Lunenburg, NS in June. Thirty one GI nurses and associates attended, with a number coming from out of province. The program included topics on Barrett’s, liver transplant, role of infection in functional GI disorders and a number of interesting case presentations. Once again thanks to the Atlantic GI society for including nursing into their program. Plans for an upcoming educational day for November are underway.

**Newfoundland**

The chapter held an educational day in June. Twenty five registrants attended. The program included talks given by physicians on the medical and surgical treatment of bowel disease and Hepatitis C. Nursing presentations included topics on Celiac Disease, “New bugs” and Infection Control/Reprocessing in the GI unit, positive feedback on the day.

As with most chapters the summer has been quiet. A chapter meeting for early fall is planned to report on the WCOG meeting and discuss upcoming events.

Respectfully submitted, Joan Rumsey RN, CGN (C)

It was so nice to meet everyone at my first international conference. I am so very proud to be a part of such a supportive group as the CSGNA. I was not aware of all the hard work each board member contributes. It’s not going to be easy but I am dedicated to doing my part as the new Director Canada East.

**Thank you so much,**

Mabel Chaytor, RN, CGN(C)

**DIRECTOR OF CANADA CENTRE REPORT**

I would like to congratulate the Planning Committee and especially the CSGNA Montreal Chapter for participating in the organization of a great WCOG conference. We had a variety of informative topics with interesting speakers and it was very enlightening thanks to Maria Cirocco.

It was a fantastic opportunity to share our knowledge and learn from our international colleagues around the world. The Chapter’s Executive dinner was a success, thanks to the active participation of all the Executive members that were present. As you know CSGNA’s mandate is to continue educating our members so we can provide a high quality of care to our clients. Your participation, in any way, can influence the success of this mandate.

The CSGNA Ottawa Chapter had an evening conference on June 22, 2005 on Remicade. It was very well attended. The next Chapter meeting was held on October 5 to discuss future Chapter educational events.

The Montreal Chapter was busy with the WCOG by obtaining coupons, goodie bags for the participants, distributing gifts representing Canada to our colleagues from other countries and finding a singer for the Opening Ceremony. Thank you again.

The Greater Toronto Chapter is organizing a meeting and a dinner night for the end of November. Astra Zeneca and Novartis are sponsoring an educational session in February on Cardio and Women’s Issues. They are anticipating another conference in April, 2006.

The South Western Ontario Chapter will meet in October and plan their educational evening.

The Central Ontario Chapter is planning an educational event on C- Difficile the first week of November, 2005. It will be sponsored by Carsen.

The Golden Horseshoe Chapter is organizing an evening conference in November 16, 2005 on Management of IBD and the use of Remicade in the management of IBD in Hamilton. The event will be sponsored by Scherring. A day conference is planned for the spring.

The London Chapter’s new executive, with new President Ellen Irwin, met in September with the outgoing executive and discuss Chapter administration and educational sessions. On October 24, Carsen will sponsor an educational session on equipment and accessories. I look forward to working with all of you. Please do not hesitate to contact me at any time.

Respectfully submitted,

Monique Travers R.N. CGN (C)  
Director of Canada Centre

**DIRECTOR OF CANADA WEST REPORT**

I think everyone who attended the World Congress will agree that the conference was interesting and informative and that the city of Montreal is a great place to visit! I was
excited to attend and energized by being in such a large group of GI professionals. The live endoscopy sessions certainly showed us some new ideas for future procedures.

Thank you for giving me the opportunity to represent you, the members of Western Canada, on the National Board of the CSGNA. I will do my best bring your issues to the national level.

If you have any questions, concerns, please contact me.

**Okanagan Chapter**

Bethany Rode, President of the Okanagan, B.C. Chapter reports that one member attended the Montreal conference and she really enjoyed the experience. A few of the Okanagan members attended the Kamloops education day on Oct. 15. They held a meeting to share information from these events, and to discuss opportunities for education within their region.

**Edmonton Chapter**

The Edmonton Chapter is busy, states Yvonne Verklan, President. They are organizing the fall conference which is fast approaching on Oct. 29. “Celiac – A Closer Look” will be held at the Misericordia Hospital. They are very pleased with the registration numbers they have received from centers around Alberta.

They would like to welcome their new members from the Edmonton area: Ellen McQuabbie, Joanne Satkunas and Ruth Smitten, and from Red Deer: Betty Bradford and Judy Klaus.

They are looking forward to having their members who attended the World Congress conference give them information inservices on the some of the topics they took in. This will be done at the monthly meeting.

One of the newest members will be hosting the meeting on Nov. 21 at her Westview Health Center Site. Ellen McQuabbie has arranged for Linda Smyth, Director of Projects and Planning with the Regional Support Services and Community Hospitals to speak on “No Reuse of Single Use Equipment”.

**Manitoba Chapter**

The Manitoba Chapter has been busy as usual, reports Susan Drysdale, chapter secretary. They recently sent out a call for new members from the smaller facilities in the province in order to share their passion for this specialty.

A group of nurses from a number of GI units attended the World Congress in Montreal in September. They were able to network with new people and meet with some already familiar faces. Everyone benefited from the trip.

On October 22, they held their first Chapter meeting for the fall session. The meeting was held in Brandon. A large group attended and toured the Brandon Regional Hospital GI Unit. Thanks to the Brandon members for their hospitality.

A group of members are trying to arrange time off work in order to attend the Regina GI Days on October 28.

Some are already planning to attend the S.G.N.A Conference in San Antonio in the spring.

The exposure to other facilities and the interfacing with other groups of GI nurses promises to improve their practice, increase their dedication, and fire their passion for the specialty. They welcome the challenges of the 2005/2006 season.

**Calgary Chapter**

Evelyn Matthews, chapter president, states that their first fall meeting is November 3. They are planning to have a spring education day in April 2006.

Six chapter members attended the World Congress in Montreal.

**Vancouver Island Chapter**

Irene Ohly, President, has this to say about the Congress in Montreal: “What a great convention! Thank you to all the organizers for the World Congress of Gastroenterology. It was great to see the CSGNA family again.”

There were five from Vancouver Island at the conference. They are doing “mini inservices” for implementing new information that they found at the conference.

**Regina Chapter**

The Regina Chapter is busy putting the final touches on their annual education day, GI Days, being held on Friday October 28, 2005.

They are in full swing with their plans for the National Conference in 2006. President Linda Buchanan says they are very excited about their program and entertainment plans thus far.

Several of their members are forming a study group in preparation for writing the certification exam in the spring.

**Kamloops Chapter**

On October 15th, Debbie Taggart and I had the pleasure of attending the first education event of our newest chapter, Kamloops and Region. Over 40 people attended from as far as Prince George and Vancouver Island. There was never a dull moment, with topics ranging from Crohn’s to Iron Deficiency Anemia, and Pathology slides to Pharmacology. Particularly innovative were the introductions. Nala Murray, past Director of Canada West, was recognized for her assistance in forming the chapter and for her enthusiastic support. Kudos to Maryanne Dorais and her organizing team for a well-rounded program and a well-run event.

Submitted by: Joanne Glen
REPORT FROM EDUCATION DIRECTOR

The summer went by very quickly as we prepared ourselves for the World Congress Conference in September 2005 in Montreal.

I hope you enjoyed the scientific program put together by Maria Cirocco. On behalf of myself and my committee I would like to commend Maria for putting together a diverse program covering a broad range of topics.

I was impressed with the abstracts submitted and I would like to congratulate these colleagues who were willing to share their knowledge and research in the interest of providing quality patient care.

In July, I attended the CSA (Canadian Standards Association) and I am proud to work with a group of people dedicated to ensure the best standards of practice. CSA is revising a document on reprocessing and sterilization and they have asked representation from CSGNA to help look at their recommendations on cleaning and disinfection of flexible endoscopes and accessories. The Board has selected the Education Director to attend. Our next meeting will be held in Quebec City in January 2006.

Scholarships 2005
These are the scholarships winners

CAG:
Linda Feltham
Rachel Thibeault-Walsh

CSGNA:
Deb Erickson, Cochrane, AB
Belinda Tham, Toronto, ON
Marlene Scrivens, Regina, SK
Shirley Malak, Regina, SK
Dianne Ryan, Regina, SK
Marla Wilson, Edmonton, AB
Joan Statdon, LaSalle, ON
Patsy Gosse, St.John, NFLD
Anna Tsang, Edmonton, AB
Lorraine Majcen, Toronto, ON
Roberta Jozsi, LaSalle, ON
Marilyn Plummer, London, ON

CARSEN:
Canada WEST
L. McGeough
E. Matthews
D. Dunford
D. Ryan
M. Dorais
L. Buchanan
J. McCalla
M. Wild
D. Bourgeois Burton
G. Lazarian
C. Schultz
I. Ohly

Canada CENTER
K. Rhodes
E. Binger
K. Williams
J. Macnab
J. Hoover
M. Lafrance
N. Januszewski
F. Nyentap
D. Joncas
A. Child
E. Hill
J. McKechnie
K. Bonner
M. Zimmerman

Canada EAST
L. Feltham
E. Coady
L. McGe
L. Nash

SciCan:
Adrianna Martin,
Vancouver, BC

This year we have a new scholarship offered by Scican. It is valued at $1,500 and is offered to a GI nurse that has contributed significantly to the field of Gastroenterology. I am proud to say that Adrianna Martin was the recipient of this award. Congratulations.

Certification:
This year we offered once again the “Foundation GI certification prep course” on Sunday September 11. The format was changed from previous year as we wanted to offer more of a selection of topics which were not in the program so that anybody that wishes to receive more educational hours regardless if they write the exam can register for the course. We offered a mock exam and this was well received. I would like to thank the speakers, all Board Directors, who put this program together and did a wonderful job: Usha Chauhan, Elaine Burgis, Branka Stefanac and Jennifer Belbeck.
Leslie Ann Patry from CNA presented a document on how to help nurses with CNA certification preparation. It is an excellent resource manual for nurses planning to facilitate a study group, or participate in a study group or preparing on their own but wanting to consult a study group. This manual is available in French or in English. It is available on-line from CNA web site www.cna-aic.ca. Earning certification and maintaining it should inspire nurses to reflect on their continuing competence and the achievement of their career visions. We have as of 2005 over 152 nurses certified in Gastroenterology. I encourage you to consider writing the certification exam. The exam date is April 1, 2006 and the deadline to register is November 4, 2005.

Respectfully submitted
Michele Paquette CGRN CGNC
Education Director

The Golden Horseshoe Chapter of The CSGNA is holding an Education Presentation all day Saturday, November the 19th, 2005.
For more information you can contact
Joan Mkechnie at jomck@mox.stmaryshosp.on.ca or Marg Hackert at dhack1637@rogers.com

The Nova Scotia Chapter Executive, Evelyn McMullen [President], Suzanne Winter [Secretary] and Lisa McGee [Treasure] enjoying the Annual East Coast CSGNA Conference in Lunenburg N.S. This was held on June 24th and 25th, 2005, in conjunction with the annual meeting of the Atlantic Association of Gastroenterologists. Thirty one of our members attended. Much thanks to the AAG for their support.

The Nova Scotia Chapter

I would like to thank the scholarship committee for awarding me a national scholarship to attend the World Congress in Montreal. It was a very interesting program. Even more interesting and enlightening was networking with 400 nurses from around the world. This was my first visit to Montreal and hopefully not my last. The city certainly has a lot of character and beauty and we were delighted with the hospitality shown by all.

Sincerely:
Shirley Malach, Regina Chapter
CSGNA

MEMBERSHIP DIRECTOR REPORT

I would like to express my thanks to Cindy Hamilton, Nancy Campbell and Maria Cirocco, along with the Montreal Chapter of CSGNA, for a superb WCOG conference. Well done! Montreal was a wonderful experience, one we will all remember.

I am pleased to report that our membership has again increased. We have grown to 619 members. That is an increase of 30 members compared to last year at this time. Among our

Adrianna Martin with Pat Hennessy, National Sales Manager of SciCan.

Winner of a free Registration to the CSGNA National Conference in Regina 2006 – Sheila Lanteigne.

Chapter Dinner.

Kamloops Chapter Receiving Charter.
membership, 87 members indicated that they now have their CNA Certification in Gastroenterology. Congratulations to all of this year’s successful candidates!

As always, we need members to consider a role at both the National and local level. Involvement at either level is an enriching experience. It provides an opportunity for personal growth. It allows you to use your experience to enhance the growth of gastroenterology nursing. Please get involved!!! Our organization can only move forward with our memberships’ participation.

Please feel free to contact me at any time regarding any membership questions and suggestions to promote our association.

Respectfully submitted, Elaine Burgis, RN, CGN(C)
burgis@rogers.com

PUBLIC RELATIONS DIRECTOR REPORT

This has been an exciting year for our membership. I am sure that for those of you who attended the World Congress Meeting September 12, 2005 to September 14, 2005 in Montreal found it a very informative and valuable experience. It was exciting to meet with such a diverse group of GI nurses.

Planning for the next CSGNA Annual Conference, which is to be hosted in Regina, September 15-16, 2006, is well underway. Don’t forget to mark your calendars! More information will be available on our website www.csgna.com in the near future.

The CSGNA website is a valuable tool to keep up to date with what’s happening around the country. We have recently received employment opportunities that have been posted on our website. Also, we have had some changes in the CSGNA Executive and Chapter Executive positions, so please take a look to see who is new in your area. Please remember to submit your local education events to belbeck@hhsc.ca for posting on the website.

Please forward any suggestions or ideas of what you would like to see on the CSGNA website to belbeck@hhsc.ca.

Jennifer Belbeck, Public Relations Director

Chapter Dinner.

Director Practice Report

Montreal was great, I hope that all of you were able to take with you all of the wonderful information that was available. It was helpful to meet some of you in person not just via email, however do continue to send comments and questions to any one of us on the executive. Continue to network and attend your local area education sessions.

Guidelines have been looked at for both PPE and an updated infection control document.

Remember to register yourself for the April 2006 exam before the December deadline.

My email address is bstefanac@smgh.ca.

Branka Stefanac

NEWSLETTER EDITOR REPORT

The Guiding Light continues to improve. There has been much positive feedback from the members as well as more input. The “Spotlights” appears to be popular with the membership as chapters continue to submit them. The CSGNA is very grateful to Pentax for their support of The Guiding Light and look forward to working with them in the future. I encourage all local chapters to continue to send information regarding their education days for publication in the Guiding Light, as well as any articles, stories, pictures, recipes, puzzles/word searches, or any information to share with the other chapters. Please remember that the newsletter is published three times a year, November, March and July. All submissions must be received by the 15th of the previous month. The CSGNA would like to announce that the new sponsor of The Guiding Light for the years 2006 and 2007 is Carsen. Thank you for your support.

Warmest Regards,
Leslie Bearss, Newsletter editor of The Guiding Light
Email: lesliejoy@sasktel.net

Ray Chileshe, RN, from Zambia (co-sponsored with SIGNEA) with CSGNA Executive at Chapter Dinner.
My Experience as a CSGNA Executive

I would like to thank the membership for the opportunity to participate as a member of the National CSGNA executive for the last 11 years. I accepted the opportunity to be the Canada East Director in September 1994 and really didn’t have a clue regarding my role. My first meeting was a really daunting experience and I thought to myself “What have I got myself into now?” The board was in the process of developing guidelines and position statements. After my second meeting I felt “I can do this.” At the end of my first term I had not only organized a regional conference, but I also did a presentation, which was an enormous accomplishment for me.

During my second term as Canada East Director, our National Treasurer had to resign, so I volunteered to take on the position of Treasurer. There was a restructuring of the executive positions and the position of Treasurer was then amalgamated with Membership Director. I did both positions from September 1997 to September 2001. During those four years I was very busy and I learned to use the Microsoft Excel Program (thanks to some of the secretaries that work in my department) even making my own spreadsheets. My computer skills improved daily, with e-mails and their attachments, even my one finger typing has improved.

In September 2001 in an effort to even the workload, the decision was made to again separate the roles of Treasurer and Membership Director. I became National Treasurer. This decreased my workload, but I was still very busy working on the board, working full time and looking after my family.

When I joined the board, the possibility of a GI Certification exam was a primary topic at that meeting and on the agenda of all of our meetings until it became a reality in April 2004. I initially would not have considered writing the exam; I felt it was a great opportunity for younger nurses, as I am sure it will be a prerequisite to acquire a job in an endoscopy clinic in the near future. As time went on I began to consider writing the certification exam, for my personal satisfaction, but it was a huge decision for me, as I had not written an exam in 16 years. Once I signed up for the exam I began to question if I had made the right decision. I had not told any of my colleagues, just in case I was unsuccessful, so I studied by myself in my free time, thinking there was so much to learn.

As April 2, 2004 got closer, I felt I had read and studied as much as I could. I had done my part, so if I was unsuccessful I knew I did my best.

Our Face-to-Face meeting was a few weeks later and we all discussed our concerns regarding the exam. The next few days waiting for the results was sheer agony. We were e-mailing back and forth between the board and one director wrote and told me she got mail and it came with a pin. The day mine arrived I felt for a pin and it was there. I was so delighted and wanted to share my news, but was reluctant just in case someone was unsuccessful. Within a few days we had heard from everyone on the board and we were all successful. This was great news.

I am sure that without the enthusiasm and commitment of our Educational Director, Michele Paquette, I would not have made the choice to do the exam. Thank you Michele for your dedication to the CSGNA and the Certification Exam, you are truly a role model to pursue.

During the past 11 years I have had the opportunity to travel from coast to coast for national conferences. I have met many GI nurses, who have the same concerns, and issues. It is really helpful to discuss these topics, some to help resolve, some just to vent.

I myself would make a point of trying to make contact with someone from each province or area just to ask how they did certain procedures or tasks. This helped me with my own practice.

If you are interested or approached about doing a national board position, you should consider it. It will be a great educational experience for you, both professionally & socially. The national executives are a great bunch of nurses to work with. I will miss working with all of you.

TREASURER REPORT

First I would like to say congratulations to the WCOG conference committee for a job well done. It was an excellent conference.

I would like to welcome Cindy James to the position of National Treasurer; I truly do know how much work you have to do Cindy. Good Luck!

$1113 was made from the silent auction & $1000.00 was sent to American Red Cross for the Katrina relief donated on behalf of CSGNA & SIGNA. Thanks very much to all of the CSGNA Chapters & our International groups for their donations.

Because of our co hosting the conference with SIGNA, the financial portion of the conference will not be finalized until late this year or early next year 2006.

Submitted By:
Edna Lang
Past CSGNA National Treasurer

Outgoing Executive Nala Murray, Edna Lang and Joan Rumsey.
Abstracts

To all CSGNA chapters,

I am writing to request that each Chapter submit an abstract for the Regina conference in 2006. The deadline for submitting the abstract is April 30, 2006.

I encourage you to submit an abstract because the process is very rewarding.

Share with us what you do in your units. The topics are endless. You could select a research project, an audit, a new procedure, CQI project, etc….

I look forward to your submission.

Michele Paquette

SUBMISSION:

Abstracts must include identification of area(s) of focus (background information); a description of the problem or issue; discussion of planning, implementation, evaluation; how your issue promoted health care outcomes or professional development in your area

COVER SHEET

Please complete a cover sheet and submit with your abstract. The cover sheet must include title of the abstract, names of all presenters/authors, credentials, and place of employment/academic affiliation. Please indicate main contact’s name, telephone number, e-mail address and fax number.

Please note: this information will be used in the conference program should your abstract be selected.

FORMAT

Your typed abstract should not exceed one standard letter size sheet of paper, double-spaced, with one-inch margins and standard 12 fonts.

The title, authors, objective, description, and conclusion should appear on the abstract. This abstract will be included as part of the course syllabus.

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.

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.
FUTURE CSGNA CONFERENCES

REGINA 2006

HALIFAX 2007

VANCOUVER 2008

TORONTO 2009
The GI Professional Nursing Award

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

RECOGNITION CRITERIA:
• Member of CSGNA
• Completion of specialty certification.
• Completion of Bachelor’s degree
• Completion of Master’s degree
• Completion of a post-graduate Nursing certificate.
• Award Recipient: Recognized with Provincial, National or International Award.

On Friday Oct 28th, 2005, the Regina Chapter of the CSGNA held its annual GI Days. It was an overwhelming success, attended by 100 nurses from all over the province. The program was well received and covered everything from GI bleeds to Care of Feeding Tubes. Evaluations were very favorable. Everyone had a great time. The vendor’s responses were also very favorable. Their participation was as always greatly appreciated.

Submitted by: Linda Buchanan,
President of the Regina Chapter of the CSGNA.

Please contact me about any comments you may have about this newsletter or any ideas for future issues.
Leslie Bearss, Newsletter Editor.
Email lesliejoy@sasktel.net

On Friday Oct 29th, 2005 the Edmonton Chapter presented “Celiac Disease: A Closer Look” for over 70 attendees. Speakers included gastroenterologist Dr. Connie Switzer, a dietician and a representative from the Edmonton Chapter of the Canadian Celiac Association. Cherry Weatherman’s “Oprah” hosted three people who shared their experience of living with the disease, which personalized it for those who have only seen it from a medical standpoint. Who knew that a celiac needed a separate toaster to prevent cross-contamination? From the entertaining welcome by the Endo-ettes, to gluten-free snacks and lunch, to a talk show complete with car giveaways, the day was fun as well as informative.

Submitted by: Joanne Glen
Canada West Director

CSGNA MEMBERSHIP FEES ARE NOW $50.00 PAYABLE BY JUNE 1st.
The GI Professional Nursing Award

Nomination Form

I ________________________________ Name and I ________________________________ Name

would like to nominate ________________________________ Name

Hospital ________________________________ for the following reasons:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

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

Nominations must be submitted to CSGNA Education Director by March 15, 2005.
M. Paquette 501 Smyth Road, Ottawa, Ontario K1H 8L6 or fax at 613-737-8385 or by e-mail to
mpaquette@ottawahospital.on.ca (upon request a nomination form can be emailed to you)
CSGNA CHAPTER EXECUTIVE LIST

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Treasurer: Donna Gramigna

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604-988-3131 ext. 4341 (W)
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Secretary: Monica Brennan
Treasurer: Deborah Levine

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Secretary: Dianne Ryan
Treasurer: Susan Latrace

MANITOBA
Manitoba Chapter
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Canadian Society of Gastroenterology Nurses and Associates

**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, an annual conference and website.

Education:

The CSGNA keeps its members abreast of current developments in the field of gastroenterology through seminars and an annual education conference. Members are encouraged to write the Canadian Nurses Association (CNA) Gastroenterology Nursing Certification exam.

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 Society responsive to members’ needs.

**Bylaws**

1.0 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.” The words Officer(s), Board and Executive are used interchangeably.

2.0 PURPOSE

The purpose shall be to unite into an organization, persons engaged in any capacity in the field of Gastroenterology Nursing in any of the ten provinces and three territories of Canada.

3.0 GOALS

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

3.1 Setting standards of practice by developing guidelines and position statements.

3.2 Developing educational programs.

3.3 Encouraging study, discussion, exchange of information related experience and practice.

4.0 HEAD OFFICE

Until changed in accordance with the Act, The Head Office of the corporation shall be in the city of the current Membership chairperson.

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

5.0 MEMBERS

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

5.1 Active – shall be comprised of Registered Nurses or other Health Care Professionals engaged in full or part-time Gastroenterology Nursing or Endoscopy Nursing in clinical, supervisory, teaching, research or administrative capacity. They are eligible to vote. Only registered nurses may hold office.

5.2 Affiliate – shall be comprised of Nurses, Health Care Professional/persons engaged in activities relevant to the field of Gastroenterology but not currently engaged in gastroenterology Nursing or Endoscopy Nursing. They are not eligible to vote or hold office.

5.3 Lifetime – any member, deemed to have contributed substantial time and effort towards the advancement of the CSGNA may be nominated for a lifetime membership. All past Presidents will be awarded lifetime membership at the end of their term in office. Nominations for other lifetime awards may be submitted by any member of the CSGNA to the National 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.

5.4 Retired—shall be comprised of CSGNA members not actively engaged in gastroenterology nursing practice.

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

5.6 The term “Associates” in the title of the Society, refers to CSGNA members who are not qualified as Registered Nurses.

5.7 Any member may resign by providing a written resignation to the Secretary.

6.0 FEES

A membership fee shall be required from the active, affiliate, and retired members annually on June 1 and shall become delinquent after July 1 of that year.

6.1 Membership shall lapse automatically as of July 1 if dues have not been received by the National Treasurer.

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

6.3 Members shall be notified of any change in membership requirements by the regional directors and in The Guiding Light publication.

6.4 Members of the National Executive do not pay any fees while in office.

6.5 No membership fee shall be required from a lifetime member.

6.6 Retired members shall pay 50% of the annual membership fee.

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

7.0 MEETINGS

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

7.1 The results of voting for Executive officers open for election shall be announced at the annual business meeting.

7.2 Reports from selected Executive Board members shall be presented, as well as bylaw amendments and any other business deemed of national concern.

7.3 Written notice of the annual business meeting shall be included in the information about the annual conference.

7.4 The Board of Directors shall meet face to face at least twice a year and by teleconference and/or email as deemed necessary by the Board.

8.0 QUORUM

The quorum shall consist of the majority of members present.

9.0 ELECTION OF OFFICE

All members eligible to vote shall be informed of the National Board positions available and the deadline for the nominations via the first Guiding Light publication after the annual business meeting. Nominations must reach the Chair of the Nominations Committee one hundred and fifty (150) days before the annual meeting.

9.1 A slate of candidates for offices open in that fiscal year shall be mailed to the voting membership one hundred and twenty (120) days before the annual meeting.

9.2 Ballots are to be returned to the Chair of the Nominations Committee ninety (90) days before the annual meeting.

9.3 Each active and lifetime member has one vote per office.

9.4 Votes shall be tabulated and recorded in the minutes of the annual business meeting.

9.5 The successful candidates shall be announced to the membership at the annual business meeting.

9.6 If there is only one nomination for an office by the deadline for nominations, the officer shall be elected by acclamation.

9.7 Successful candidates shall be notified as soon as possible after ballot counting enabling them to make the necessary arrangements to attend the annual conference.

9.8 Nominations shall be accepted from the floor at the annual business meeting if no nominations have not been received for an office. If there is more than one nomination, a secret ballot shall be held during the annual business meeting.

9.9 The first meeting with the new Executive shall be scheduled to take place in conjunction with the annual conference and meeting.

9.10 Transfer of duties from retiring Executive to newly elected Executive shall take place at the time of the annual CSGNA conference.

9.11 Officers elected must have served the Society in some capacity in the preceding two years.

9.12 Ballots shall be kept by the Chair of the Bylaws Committee.

9.13 A motion to destroy the ballots shall be made by said Chairperson during the annual business meeting.
9.14 The ballots shall be destroyed only after the motion has carried by a show of hands from the members present.

9.15 Tellers shall be chosen from the members present at the annual conference and the results announced to the membership in the event a motion for a recount of any office is made and carried.

10.0 EXECUTIVE

The executive of the Society shall include President, President-elect, Secretary, Treasurer, Membership Director, Education Director, Practice Director, Newsletter Editor, Canada West Director, Canada Centre Director, Canada East Director and Public Relations Director.

10.1 The Executive offices are open to all active members of the Society. The Executive Officers shall have the powers and authority as described to perform their expected offices. All National Executive members shall attend all Face to Face and Annual conferences. Exemptions shall be considered by the National Board.

10.2 Any member serving in an executive position at the Chapter or National level shall be an active CSGNA member.

11.0 TERMS OF OFFICE

11.1 The President shall serve for two (2) years.

11.2 An election to fill the office of President Elect shall be held every two (2) years.

11.3 The President-elect will automatically accede when the President's term ends in two (2) years.

11.4 He/she shall become acting President and assume the duties of the office in the event of the President's absence.

11.5 The President-elect must have served the Society in some capacity prior to being elected to this office.

11.6 Persons elected Secretary, Treasurer, Membership Director, Education Director, and Newsletter Editor shall hold office for two years or until their successor is elected.

11.7 No person shall be elected to consecutive terms as President.

11.8 No Officer on the National Board shall hold more than one office at a time.

11.9 There shall be no restriction upon the number of terms which other Officers may be elected to succeed themselves.

11.10 Elections to fill the offices of Secretary, Education Director, Treasurer, Canada East Director, Canada West Director, and Practice Director shall be held in odd numbered years.

11.11 Elections to fill the offices of Newsletter Editor, Membership Director, Canada Center Director and Public Relations Director shall be held in even numbered years.

11.12 All Officers shall deliver all records, correspondence or other property of the Society to their successor within thirty (30) days upon retiring from office.

12.0 VACANCIES

12.1 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.

12.2 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.

12.3 The person appointed shall be the first runner up from the election, when possible.

12.4 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.

13.0 DUTIES OF THE EXECUTIVE – Duties shall include the following and may be modified as deemed necessary by the Board to meet the needs of the members.

THE PRESIDENT SHALL:

13.1 Serve as an official representative and spokesperson for the Society.

13.1.1 Represent CSGNA mission, goals and positions to various members of the public.

13.1.2 Manage daily affairs of the organization.

13.1.3 Lead the National Board of Directors.

13.1.4 Chair Nominations Committee.

13.1.5 Provide mentoring to CSGNA leaders.

13.1.6 Submit and present an Annual report to the membership at the annual business meeting, and send it to the membership via the National Secretary sixty (60) days prior to the meeting.

13.1.7 Submit a report per issue of The Guiding Light.
13.1.8 Chair and prepare agenda for the National Board meetings and annual business meeting.

13.1.9 Travel as deemed necessary by the Board.

13.1.10 Attend the SGNA Annual Meeting and the House of Delegates session.

13.1.11 Encourage vision and growth of the organization by fostering educational opportunities and position statement formation.

13.1.12 Serve as an ex-officio on all standing committees.

13.1.13 Serve a two (2) year term with a four (4) year commitment to the Executive.

DUTIES OF THE PRESIDENT-ELECT
THE PRESIDENT-ELECT SHALL:

13.2 Accede to the Presidency when the President’s term ends.

13.2.1 Serve as acting President and assume the duties of the Office in the event of the President's absence, disability or resignation.

13.2.2 Communicate regularly with the President as deemed necessary.

13.2.3 Learn the affairs of the Society.

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

13.2.5 Serve as the CSGNA liaison to SIGNEA.

13.2.6 Serve as advisory member without vote on standing and special committees.

13.2.7 Communicate regularly with the President as deemed necessary.

13.2.8 Serve a two (2) year term with a four (4) year commitment to the Executive.

13.2.9 Communicate regularly with provincial nursing organizations and CNA regarding CSGNA activities.

13.2.10 Perform such duties as delegated by the President.

13.2.11 Submit a report per issue to The Guiding Light.

13.2.12 Assume role of National Conference Director in collaboration with local Chairperson.

DUTIES OF THE SECRETARY
THE SECRETARY SHALL:

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

13.3.1 Provide a summary of National Board meetings for submission in The Guiding Light.

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

13.3.3 Conduct all correspondence for the Association as directed by the Executive.

13.3.4 Compile the annual report for distribution to the members ninety (90) days prior to the annual meeting.

13.3.5 Serve as a member of the Bylaws Committee.

13.3.6 Issue notice of meetings, activities, and conferences to all members.

DUTIES OF THE TREASURER
THE TREASURER SHALL:

13.4.0 Collect and deposit members’ fees into the CSGNA chartered bank or trust company account.

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

13.4.2 Make such payments as are authorized by the Society.

13.4.3 Maintain records of expenditures of the Society.

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

13.4.5 Automatically become a member of the Annual Conference Planning Committee.

13.4.6 Report on the Auditor’s accounts of the Society to the members in the Annual Report and at the annual business meeting.

13.4.7 Contribute a report per issue of The Guiding Light.

13.4.10 The Treasurer shall be custodian of the seal of the corporation, which she will deliver only when authorized by a Resolution of the Board of Directors to do so and to such person or persons as may be named in the resolution.

DUTIES OF THE MEMBERSHIP DIRECTOR
THE MEMBERSHIP DIRECTOR SHALL:

13.5.0 Collect and maintain documentation of all CSGNA members.

13.5.1 Issue membership cards and receipts to members. Collect and maintain records of membership.

13.5.2 Forward to all board members every September a current list of all members of the Society and update as necessary.
13.5.3 Prepare a membership list for the publication and distribution to the members upon request.

DUTIES OF THE EDUCATION DIRECTOR
THE EDUCATION DIRECTOR SHALL:
13.6.1 Serve as Board representative for certification.
13.6.2 Form and chair the Education Committee.
13.6.3 Allocate scholarships in consultation with Education Committee based on established point system.
13.6.4 Establish criteria for use of the fund and review annually.
13.6.5 Provide direction and approval to the Conference Planning Committee regarding the educational content of the CSGNA Annual Conference.
13.6.6 Review scholarship criteria annually.
13.6.7 Maintain records of all CSGNA education events.
13.6.8 Expand and improve publications, informational products and services that support the field of gastroenterology nursing.
13.6.9 Generate ideas for education that best meet the needs of the members.
13.6.10 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 PRACTICE DIRECTOR
THE PRACTICE DIRECTOR SHALL:
13.7.0 Monitor, record and update any practice guidelines, position statements and standards of the CSGNA.
13.7.1 Initiate new practice guidelines, position statements and standards required by the CSGNA.
13.7.2 Maintain a record/library of reference documents reflecting practice guidelines, position statements and standards.
13.7.3 Serve as a resource person for answering questions/concerns on practice guidelines, position statements and standards.

DUTIES OF THE DIRECTORS
THE REGIONAL DIRECTORS SHALL:
13.8.0 Encourage and assist in the formation of chapters in their area.
13.8.1 Liaise with the Chapter Presidents and individual members in their Region about the work of the Society.
13.8.2 Report to the National Executive at regular intervals as deemed necessary by the Executive.
13.8.3 Attend a minimum of two meetings of the Executive in consultation with the National Board.
13.8.4 Provide a written report in sufficient time for those meetings which cannot be attended.
13.8.5 Submit a report of activities and future plans for inclusion in the Annual Report, ninety (90) days prior to the Annual Business Meeting.
13.8.6 Submit reports about their Region’s activities to The Guiding Light.
13.8.7 There shall be one (1) Director elected from each of Canada East, Centre, and West.
13.8.8 Canada East shall consist of Prince Edward Island, Newfoundland, Nova Scotia, and New Brunswick.
13.8.9 Canada Centre shall consist of Ontario and Quebec.
13.8.10 Canada West shall consist of Manitoba, Saskatchewan, Alberta, British Columbia, Northwest Territories, Yukon and Nunavut.
13.8.11 Divisions of regions shall 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:
13.9.0 Set guidelines for submissions to The Guiding Light.
13.9.1 Set deadlines for submissions to The Guiding Light.
13.9.2 Pursue appropriate material for the Newsletter.
13.9.3 Compile and edit submitted material for publication of the newsletter three (3) times annually.
13.9.4 Approve the final version of the edited newsletter prior to printing.
13.9.5 Provide updated membership list to the newsletter distributor and ensure mail out of newsletter to all membership in good standing.
13.9.6 Store copies of all previous newsletters. Submit a report to the National Secretary ninety (90) days prior to the annual business meeting for the Annual Report.

DUTIES OF THE PUBLIC RELATIONS DIRECTOR
THE PUBLIC RELATIONS DIRECTOR SHALL:
13.10.1 Maintain and update the website.
13.10.2 Chair Vendor Relations Committee.
13.10.3 Serve as the resource person for the vendors.
13.10.4 Chair GI Nurses Day by establishing a theme and informing the Board.

14.0 COMPENSATION
14.1 All CSGNA financial requests over $200.00 must be approved by two (2) Executive officers one of which shall be the Treasurer.
14.2 Verification of the appropriate receipts and the appropriate use of CSGNA funds must be present before reimbursement.
14.3 No reimbursement shall be made without appropriate receipts.
14.4 The expenses of the outgoing Executive shall include those incurred at the Annual conference at which their term of office is complete.
   The expenses of the incoming Executive shall be paid by CSGNA at the Annual Conference where Executive changeover occurs.
   All National CSGNA Executive shall be exempt from paying to attend a CSGNA National Conference during their tenure on the Board.
   A maximum number of ten (10) registration fees will be awarded to the local Annual Conference Planning Committee.

15.0 DISCIPLINARY ACTION
15.1 Members shall be subject to reprimand, censor, suspension or expulsion by a two-thirds vote of the active members for violation of the Constitution, Bylaws or the Charter.
15.2 No such action shall be taken against a member until specific charges have been filed.
15.3 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.
15.4 Executive members of Chapters shall be subject to the same rules of compensation, discipline and removal as the National Executive.
15.5 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.
15.6 Any CSGNA member on a committee or in an Executive position, finding herself in a conflict of interest, shall remove herself from voting on said matters.
15.7 Any CSGNA member who does not identify a conflict of interest shall remain a part of the discussion and/or voting process but may be asked to resign from the said committee and/or Executive position following a review by the National Executive.

16.0 REMOVAL
16.1 Officers elected by the membership may be removed by two-thirds vote of the active members present at the Annual Meeting.
16.2 The successor shall 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 shall be taken from the floor. If there is more than one nomination, a secret ballot shall be held during the Annual Business Meeting.

17.0 PUBLICATION
17.1 The Society shall publish The Guiding Light newsletter three (3) times annually.
17.2 The newsletter shall be sent to all members in winter, spring, and fall.
17.3 The Newsletter Editor shall be responsible for compiling a comprehensive, pertinent communiqué and distributing it free to all members in good standing.

18.0 EDUCATIONAL EVENTS
18.1 An agenda shall be sent by the Chapter Secretary to the Regional Director six (6) weeks before the event for any CSGNA Educational program for a one (1) day conference and two (2) weeks before an evening seminar.
18.2 A report entitled CSGNA Educational Post Program Financial Report (form 01) shall be submitted by the Chapter Treasurer to the National Treasurer within one (1) month of the event upon completion of any CSGNA Educational Program
18.3 The Chapter President shall ensure that appropriate records, financial statements and reimbursements are submitted to the National Treasurer.
18.4 The Chapter treasurer shall submit twenty-five percent (25%) of all profits to the National Treasurer after each event to support scholarships at the National level.
18.5 An extension shall be obtained from the National Treasurer and President in the
event of an extenuating circumstance.

18.6 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 CSGNA members.

18.7 The remainder of profits raised by chapters at CSGNA designated events shall be used for needs as determined by its membership.

18.8 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 fees.

18.9 The national CSGNA shall remit ten percent (10%) of the profits from the annual conference meeting to the CSGNA chapter hosting the event.

18.10 All CSGNA chapters shall submit an annual educational summary to the Education Director by June 30.

18.11 The fiscal year shall run from January 1 to December 31.

19.0 STANDING COMMITTEES

19.1 BYLAWS COMMITTEE SHALL:
19.1.1 Consist of the President, President-elect, Secretary, and two Directors. The committee shall meet at the Spring Board meeting, by teleconference and /or email if deemed necessary to complete the bylaws revisions.
19.1.2 Be chaired by the President-elect.
19.1.3 Review bylaws and all recommendations for bylaw revisions submitted by members annually and make amendments as necessary.
19.1.4 The President-elect shall present to the Board of Directors at the spring board meeting any bylaws for revision or adoption for review by the Board before submission to the membership for a vote.

19.2 NOMINATING COMMITTEE SHALL:
19.2.1 Consist of the President and three members at large.
19.2.2 Be chaired by the President.
19.2.3 Recommend candidate(s) for each office, each of which shall be a member in good standing and shall signify his/her consent to stand for office.
19.2.4 Mail ballots to the membership.
19.2.5 Count the ballots and announce successful candidates to the membership at the annual business meeting.
19.2.6 Report tabulations to the Executive for recording in the minutes.

19.3 EDUCATION COMMITTEE SHALL:
19.3.1 Consist of one Director from each Region and at least four members at large. Effort shall be made to include all facets of the specialty including research, endoscopy, management, and gastroenterology nurses providing direct patient care.

19.4 VENDOR RELATIONS COMMITTEE SHALL:
19.4.1 Be chaired by the Public Relations Director.
19.4.2 Consist of two (2) Directors and the Treasurer.
19.4.3 Liaise with vendors to promote, encourage, and maintain relationships; maintain accurate records of vendor recognition, review recommendations of vendor evaluations at the end of each conference; and make recommendations to the Executive at the spring meeting.
19.4.4 Meet annually or more often as required.

19.5 FINANCE COMMITTEE SHALL:
19.5.1 Be chaired by the Treasurer.
19.5.2 Consist of the Treasurer, the Canada West Director and the Canada East Director.
19.5.3 Review and audit financial statements, monitor financial policies, recommend budget, meet as necessary, and report at each meeting.

20.0 SPECIAL COMMITTEES

20.1 Be appointed by the Board at a general meeting and be given the necessary power to discharge its duties.

20.2 Submit to the National Board a written report upon completion of the special committee’s duties.

21.0 CHAPTERS

21.1 A Chapter shall be described as a geographical area (city, region, or town) where ten (10) or more active members reside.

21.2 These members shall apply to the Executive for Charter as a Chapter.

21.3 A Chapter shall coordinate educational activities and functions of the CSGNA within its designated area in collaboration with its Regional Director.

21.4 The formation of a Chapter shall include a minimum of ten (10) active members applying to the National Membership Director.

21.5 The local group and the Regional Director will determine geographical boundaries for the chapter.

21.6 The Membership Director shall supply a list of all active members in the region.
21.7 The local group shall call for nominations from that list and notify all members of a meeting and election.

21.8 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.

21.9 The National Membership Director and the National Secretary shall be notified within thirty (30) days of the election results and of the title of the Chapter.

21.10 The name CSGNA shall appear within the title of the Chapter. (E.g. the Edmonton Chapter of the CSGNA)

22.0 THE CHAPTER SHALL:

22.1 Promote the Association in its area and encourage membership.

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

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

22.4 Elect officers to include president, secretary and treasurer.

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

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

22.7 No officer shall hold more than one office at a time.

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

22.9 Submit membership fees directly to the National office.

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

22.11 Plan a minimum of four (4) education hours per year for the membership in its area. Notification of an educational event shall be sent to the respective members a minimum of 14 days prior to the event.

22.12 Submit to the National Treasurer by February 15 the Chapter’s financial report.

22.13 All Chapters shall be available for audits at the request of the National Treasurer.

23.0 A CHAPTER MAY BE REVOKED FOR THE FOLLOWING:

23.1 At the request of the Chapter.

23.2 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)

23.3 Repetitive failure to respond to communication requests.

23.4 Failure to meet the minimum of four (4) education hours per year for the membership in its area.

23.5 Failure to assume responsibility for its actions and to comply with CSGNA bylaws.

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

23.7 The Chapter President will report any problems to the Regional Director.

23.8 The Regional Director shall 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.

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

23.10 The CSGNA National Executive shall determine the outcome for the Chapter. A probationary period of twelve (12) months may be granted to comply with Charter requirements.

A Chapter may also belong to its Provincial Nurses’ Association provided there is no conflict of interests with the CSGNA.

24.0 CHANGING CHAPTER NAME

A Chapter may change its name if fifty-one percent (51%) of the Chapter membership is in favour. The National President of the CSGNA shall be informed of the name change within thirty (30) days of adoption of the new name.

25.0 DISSOLUTION OF A CHAPTER AND SOCIETY

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.

In the event of dissolution of the Society, after payment of or making provisions for payment of all liabilities, the National Executive shall dispose of the assets to one or more Canadian non-profit associations with similar activities to the CSGNA such as Specialty Practice Groups.
26.0 AMENDMENTS

26.1 Active Members may submit recommendation 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.

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

26.3 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.

26.4 Any Bylaws of the corporation repealed or amended shall not be enforced or acted upon until the approval of the Ministry of Industry has been obtained.

27.0 PARLIAMENTARY AUTHORITY

The rules contained in the current edition of ROBERT’S RULES OF ORDER shall govern the Society in all cases to which they are applicable and are not inconsistent with these Bylaws.

REMINDER
As per Bylaw 22.12 all CSGNA Chapters shall submit to the National Treasurer by February the 15th the Chapter’s financial report.

REMINDER
As per Bylaw 18.10, all CSGNA Chapters shall submit an annual educational summary to the Education Director by June 30th annually.

Moderate Sedation/Analgesia

Presented in a panel format at the WCOG 2005
Lorie McGeough RN, CGNC

Outpatient procedures have been on a dramatic increase for the past 10 years, enlisting with this increase new technology, advanced pharmacology and anesthesia techniques. Today, a significant amount of these procedures will be done under intravenous moderate sedation and analgesia.

The term moderate sedation/analgesia was coined in 2001 by the American Society of Anesthesiologists. This term replaced the old one of ‘conscious sedation’. Part of the reason for redefining this term is to reflect and emphasize sedation works on a continuum.

So why the popularity of moderate sedation/analgesia? One of the main advantages is the rapid return to presedation levels of the patient. Other considerations include shorter recovery periods, earlier ambulating and increased readiness to participate in the discharge process. Side effects are minimal and complications rare.

The most commonly used pharmacological agents include benzodiazepines, opioids and reversal agents. Benzodiazepines when titrated properly and alone produce minimal side effects on the respiratory and cardiovascular system in healthy patients. The beauty of benzodiazepines is their ability to produce sedation and amnesia while maintaining consciousness. The most common benzodiazepines are diazepam and midazolam. Compared with each other the significant difference is a shorter elimination half-life of midazolam, making it slightly more popular than diazepam. Opioids on the other hand alter the patient’s perception of pain and produce a dose-related analgesia. Opioids tend to create a synergy with benzodiazepines greatly increasing the potential for respiratory depression. The most commonly used opioids are morphine, meperidine and fentanyl. Fentanyl is rapidly becoming the drug of choice mostly due to its rapid onset, minimal histamine release and short duration time of between 5-15 minutes. Of course when using these types of agents one must have available reversal agents such as naloxone and flumazenil.

With the increased use of moderate sedation/analgesia by non-anesthetists practice issues are being brought forward by areas faced with the increased use of this technique and the safe use of the drugs. Each hospital/facility is responsible for providing the users with a policy and procedure to govern the practice of moderate sedation. Guidelines that include emergency procedures, who can administer what, proper rescue equipment available, adequately trained and educated
staff must be in place. Training of drug administering staff should include knowledge of anatomy and physiology, pharmacology of drugs, cardiac dysrhythmias, recognizing potential complications and demonstrated skills in airway management. Personnel with ACLS should be within a less than 5 minute time response.

Other key elements of successful use of moderate sedation/analgesia include:

- competency based programs
- staffing levels in procedure rooms this includes: one RN responsible for monitoring the patient with no other duties that would leave the patient unattended, one circulating RN.
- monitoring related to the drug used, eg: pulse oximetry, BP, oxygen, ECG monitoring and capnography
- ongoing education competency reviews
- specific discharge criteria

Rapidly evolving technology in procedural areas carry inherent risks for the nurse as their role expands. It is important the nurse stay current on issues and controversies. The nurse should also be aware of common causes of liability associated with moderate sedation/analgesia and promote prevention.

Some common issues, which contribute to liability, include:

- titration and proper administration of drugs
- IV access, making sure you IV is in good working order
- emergency support, bagging units, crash cart
- reversal agents, have on hand
- failure to communicate
- lack of competency reviews and education
- failure to document accurately

Some common causes of liability for the RN

- failure to monitor
- failure to communicate
- errors in the use of equipment
- errors in medication or treatment
- patient falls
- failure to report deviations from practice
- failure to follow a physicians orders
- failure to follow hospital procedure
- discharge teaching
- lack of appropriate response to emergency situations

Although the issues associated with moderate sedation/analgesia seem overwhelming, it is important that facilities address these as concisely, accurately, quickly and based on the current literature. We face a window of opportunity to improve our practice and ensure patient safety.

References/Suggested Readings

American Society of Anesthesiologists (ASA, ASA physical status classification system, extracted from web site: www.asahq.org/clinical/physicalstatus.htm.

American Society of Anesthesiologists (ASA), Continuum of depth of sedation, extracted from web site: www.asahq.org/publicationsAndServices/standards/20.htm.


Lorie McGeough is the Unit Coordinator for the GI Unit at the Pasqua Hospital in Regina, Sask.
The following Board positions are available September 2006.

They are:

- Membership Director
- Newsletter Editor
- President Elect
- Canada Center Director
- Public Relations director

These are two year positions. The job descriptions can be found on our website at www.csgna.com. Please submit your nomination to Nancy Campbell 6596 Delorme Ave, Orleans, Ontario, K1C6N6 or fax to 1-613-837-5049, you may also email to nlcampbell@rogers.com. Please consider stepping out of the box and submitting your nomination. You will grow as a person; not to mention the wonderful experiences and friendships you will gain.

We welcome all members to become involved with CSGNA. We have committees that need membership participation. Please contact the following executive for more information:

- By-law committee – Deb Taggart – President Elect – debra.taggart@calgaryhealthregion.ca
- Standards of Practice – Branka Stefanac – bstefanac@smgh.ca
- Education – Michele Paquette – Education Director – michpaquette@rogers.com
- Membership – Elaine Burgis – Membership Director – burgis@rogers.com
- Conference Planning – Jennifer Belbeck – belbeck@hhsc.ca
- Newsletter – Leslie Bearss – Newsletter Editor – lesliejoy@sasktel.net

If you would like to become more involved at the local level, please contact your Chapter President or the National Director in your area:

- Canada West – Joanne Glen – jgg@telus.net
- Canada Centre – Monique Travers – mtravers@rogers.com
- Canada East – Mabel Chaytor – chamab@hccs.nf.ca

CSGNA QUESTION CORNER

When you do a case at night what do you do with your scope? Do you:

1. Process it completely?
2. Flush it with enzymatic and leave it to be cleaned in the morning?
3. Flush it with enzymatic and leave it to soak overnight in cidex?

Please send your unit’s practice on this issue to nlcampbell@rogers.com
The Ottawa Chapter encompasses several different hospitals including the surrounding regions of Eastern Ontario and Western Quebec. In the Ottawa area we have The Children’s Hospital of Eastern Ontario (CHEO), The Montfort Hospital, The Queensway Carleton Hospital as well as The Ottawa Hospital (TOH). TOH alone consists of three GI units – The Riverside Campus, The Civic Campus and The General Campus. The Ottawa Chapter has large boundaries extending from Oshawa in the west to the Province of Quebec in the east, the St. Lawrence River to the south and Kapuskasing to the North. Being the capital area makes Ottawa centrally located and where we have a small group of dedicated nurses who organize the meetings and educational sessions for the membership. We meet once a month to discuss business and plan future events. In the Ottawa region we have approximately forty RN’s working in Endoscopy. The procedure numbers are difficult to establish but we do bronchoscopies, gastroscopies, colonoscopies and ERCP. Frequently our patients require variceal banding, glueing, injecting, endoclip insertions, dilatation, PEG/PEJ insertion, metallic esophageal, colonic and biliary stent insertion and argon treatment. The chapter sessions have given everyone an opportunity to meet and exchange information from other units that are unique, from large teaching hospitals to outpatient clinics. We try to make the evening social and pleasant with everyone going home with much more than what they came with. We have become a very close knit group with several members from our chapter having moved on to the National Executive with great success.

This year Therese Carriere, the Ottawa chapter president attended the World Congress of Gastroenterology in Montreal and presented our strategies for educational sessions in Ottawa. We would like to share these strategies with you, our colleagues.
CSGNA Ottawa Chapter

TIPS ON HOW TO HOLD EDUCATIONAL SESSIONS

Three (3) Strategies were attempted throughout the years:

• All Day Session on a given weekend (ex. Saturday)
• A 2 hour weekday evening session 7 - 9PM
• An “after work” session on a weekday 5:30 – 8:30PM

The Weekend Sessions were generally held at a university hall:

• Required much prep time & work
  – The Agenda needed to be completed
  – 3 to 4 topics & speakers needed to be identified and scheduled in
  – 5 to 6 sponsors always had an interest in being there ($250/booth was charged)
  – Meals & coffee breaks needed to be organised
• Attendance was variable
  – Seen as the loss of a weekend for many & therefore low turnout from local nurses
  – A good point was attendance from “out-of-towners”. They generally made it a weekend of it (ex. Shopping)

The Weekday Evening Sessions were held at the auditoriums of either the Civic or General campuses of the Ottawa Hospital:

These were held in the fall, winter & spring
• Some prep time required:
  – Topic(s) & Speaker(s) and an Agenda
  – The sessions included wine & cheese or coffee/tea & sweets
• Attendance was variable (low)
  – Sessions finished too late
  – Mostly local attendance

The After Work Sessions were always on a Tuesday or Wednesday

• CSGNA members were allowed to choose the topics
  – CSGNA meeting(s)
  – Suggestions from previous educational seminars
  – Speakers were then identified & asked to present
• The Sessions:
  – Held either at one of the hospital campuses or at a popular restaurant
  – Cocktails 5:30 to 6PM
  – One (1) presentation 6 to 7PM
  – Dinner 7 to 8:30PM
    – Included door prizes (usually related to the subject) & a 50/50 draw
    – Appreciation for speakers shown by way of a gift certificate & a dinner invitation
    – Opportunity is there for some national recruiting (always a special table set up for this)
  – Talk to potential sponsors. It turns out that sponsors have been very willing to participate with these sessions
    – They are willing to design & mail the invitations
    – They can generously organise & pay for the cocktail, supper (ex. Sit down, choose the menu)
    – They generally provide a company folder or bag with product info. We insert a “thank you” letter, Attendance certificate & an Evaluation form
    – In return, we give them a free booth where they exhibit their product. Generally, 2 attendees are present to answer questions
  – When sessions are held at a hospital campus, the hospital has been willing to contribute
    – They provide catering for the supper (for a fee)
    – They provide free parking
    – They provide free of charge any equipment required (ex. Audio visual)
  – Attendance much more encouraging
    – Favourable feedback on time/day, length, free parking, session location, food, 50/50 draw, door prize etc
    – Local & some “out-of-town” attendance

CONCLUSION:
• Our experience is that the After Work Sessions are by far the best strategy for educational seminars
• Positive feedback from attendees
• Enthusiastic participation by sponsors & the Ottawa Hospital
A “Certificate of Attendance” is always given to participants
• This fulfills our 4 hours of educational requirement
The SciCan Educational Scholarship

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

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

Choosing a winner from among the seventeen candidates will not be an easy task! We expect that the caliber of applicants will be very high, and neither SciCan nor the CSGNA executive believes that they should stand in judgment of the applicants and deem that one are more deserving than the others. Therefore, assuming that the seventeen candidates all meet the criteria, a draw will be made for the winner. That person will be announced in the June/July issue of The Guiding Light and will be presented a commemorative plaque at the CSGNA annual meeting. The winner’s name and photograph will also be published on SciCan’s website. Applications for this scholarship are due May 31, 2005.

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

Example:

CERTIFICATE OF ATTENDANCE
January 18, 2005

I __________________________ hereby confirm my attendance at the above conference.

Signature: __________________________

HERBAL MEDICINE: A HEALTHY ALTERNATIVE 60 minutes

Signature: __________________________

Chairperson

Respectfully submitted by:
Therese Carriere, Nancy Campbell, Francine Nyentap, Michele Paquette, Joanne Waite, Micheala Hanna, Rebecca Leitch, Kathy O’Grady, Rachel Walsh, Sylviane Herve, Elizabeth Hill, Jean Macnab, Monique Travers and Micheline LaFrance.
The CSGNA would like to extend the most tremendous Thank You to Maria Cirocco. She put together the most superb Educational Course in Montreal this past September. Congratulations Maria on a job very well done! We would also like to extend a big thank-you to all the sponsors that made the program possible. Thank you to all who contributed to the Abstracts. Lastly, THANK YOU to the presenters for such a dynamic, informative, enlightening and educational program.

PRESENTERS:
Lucille Auffrey, RN, MSN
Kathy B. Bean, PhD, RN, CGN[C]
Nancy Campbell, RN, CGN[C]
Joylene Morcom, RN, RNP, MN,
Dr. Alan Barkun
Dr. S. Seewald
Dr. Kenneth I. O’Riordan
Dr. N. Buttar
R. David Hambrick III, RN CGRN
Michele Paquette, RN, CGRN CGN[C]
Dr. April S. Elliott, MD, FRCP[C]
Lorie McGeough, RN, CGN[C]
Jo Harabaugh, BS, RN, CGRN
S. Harden, RN
Nancy DeNiro, RN, CGRN
Di Jones, RN
W. Robert Bruce, PH.D., MD
G Sandha, MD, FRCP[C]
N. Eisemon, RN, MPH. CGRN, APN/CNS
J. Martin, MD
Cindy Hamilton, RN, BSN
L. M. Wong Kee Song, MD, FRCP

Free Paper Presentations:
S. Downey
G. Walters
H. Herve-Desirat
S. Ratanalert

Abstracts:
S. Downey
J. Tokar
O. Haluszka
G. Walters
H. Herve-Desirat
C. Nevin
L. Mazeraill
C. Bidwell
L. MacMilliam
J. Henry
L. Lothridge, A. Gaber
G. Walters, M. Reis
L. McGeough, S. Ratanalert
P. Soontarapornshai, B. Ovartlanporn
W. Pichitporncpai, M. Ketcheson
N. Connelly, L. Raslau
M. Stenson, A. Lew
M. Patel, T. Carriere
F Nynetap, J. Macnab
M. Travers, M. Lafrance
M. Paquette, R. Thibault
N. Campbell, B. Hye Kyung
J. Sutherland, D. Walsh
A. McEntee, O. Baxter
E. Wegman, J. Peery
R. Jacobson, W. Thompson H.H. IM
C. James, M. Thabane
M. Borgaonkar, J.K. Marswhall
S. Scott, P. Raymond
W. Thompson, M. Jimeno Saenz
M. ZGalvez Deltoro, O.Espinar Rodrigues
T.Ibanez Armengod, J. Hoeflok
M. Tincani, R. Sassatelli
D. Formisano, L. Pastore
A. Gigliobianco, M. Pinotti
G. Bedogni, N. Basset
B. Howard, K. Fujita
K. Kikuchi, T. Yamakawa
V. Swafford, M. Chileshe

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Monique Travers presenting her Abstract, Montreal 2005.

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- Dr. Eldon Shaffer
  Professor of Medicine, University of Calgary, Alberta

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SIGNEA NURSES NIGHT

Thank You Sponsors.

SIGNEA’s Welcome Reception.

SIGNEA’s Nurses Welcome Reception.

CHANGE OF NAME/ADDRESS

NAME: ________________________

NEW ADDRESS: ________________________

CITY: ___________ PROVINCE: ___________

POSTAL CODE: ___________ PHONE: ___________

FAX: ___________ E-MAIL: ___________

[Send change of name/address to the Membership Director]
Pernicious Anemia

Shafina Bandali, RN, BScN, CGN(C)

Recently, a patient came into our Endoscopy Unit for an esophagogastroduodenoscopy (EGD) with symptoms of anemia. During the procedure gastritis was found and this area was biopsied for histology. The doctor commented that this gastritis resembled gastritis due to pernicious anemia. This case motivated me to learn more about pernicious anemia.

Pernicious anemia is defined as a megaloblastic anemia occurring in children, or more commonly, in later life. It is characterized by histamine-fast achlorhydria. Laboratory and clinical manifestations are based on malabsorption of vitamin B12 because of a failure of the gastric mucosa to secrete adequate and potent intrinsic factor. (Griffin, Vanessa (Ed). (2003). Gastroenterology Nursing, A Core Curriculum, (3rd Ed.). United States of America: Society of Gastroenterology Nurses and Associates pp 378)

Intrinsic factor is a glycoprotein secreted by the gastric parietal cells. It is necessary for vitamin B12 absorption. Intrinsic factor binds to free vitamin B12 in the stomach and facilitates the vitamin’s absorption in the ileum. Lack of intrinsic factor allows the free vitamin B12 molecules to be used up by bacteria, or form unabsorbable aggregates in the small bowel.

The body’s inability to produce intrinsic factor in adulthood may be the result of chronic gastritis, previous gastrectomy (partial or complete), autoimmune endocrine disease (type 1 diabetes and thyroid disease) or family history of pernicious anemia. In infants and children, inability to produce intrinsic factor is very rare. However, congenital pernicious anemia can be inherited as an autosomal recessive disorder (needs defective gene from both parents). Although a juvenile form of disease can occur, pernicious anemia is usually not apparent before the age of 30 years. The average age of diagnosis is 60 years.

Vitamin B12 is essential for the production of red blood cells (RBC). These cells carry oxygen to the body’s tissues. Vitamin B12 deficiency causes a decrease in RBC production and the cells that are produced are defective. Vitamin B12 is also necessary for the maintenance of the nervous system.

People with pernicious anemia have a wide variety of symptoms. They can experience shortness of breath, fatigue, pallor and rapid heart rate. They often have loss of appetite and diarrhea. They can present with tingling and numbness of the hands and feet, and an unsteady gait, especially in the dark. Their ability to smell can be impaired, or have bleeding gums. A positive Babinski’s reflex (great toe flexes toward the top of the foot, while the other toes fan out when the sole of the foot is firmly stroked) may be present. Other deep tendon reflexes may be lost. Personality changes have been noted.

The presence of pernicious anemia may be diagnosed several ways. Complete blood count (CBC) could show a low hematocrit and hemoglobin with an elevated MCV (low red blood cell count with large sized RBC). White blood count, platelets and reticulocyte count may also be low. Below normal serum B12 level may also be noted.

A Schilling test, used to determine whether the body absorbs vitamin B12 normally, is commonly used to evaluate patients for pernicious anemia. In Stage I of this test, the patient is given 2 doses of vitamin B12 (cobalamin). The first dose is radioactive and given orally. The second dose is not radioactive and given in an injection 2 - 6 hours later. Urine is then collected for 24 hours to measure if the vitamin B12 is normally absorbed. If Stage I is abnormal, Stage II will be normal.

Endoscopic examination of the stomach may show nonerosive, non-specific gastritis (NNG). Biopsy provides a histological diagnosis.

Treatment for pernicious anemia requires a lifelong therapy of monthly vitamin B12 injections. Patient outcome is usually excellent.

Patients with pernicious anemia are more prone to have gastric polyps. They have twice the incidence of gastric cancer and gastric carcinoid tumors than the normal population. Neurological symptoms may persist if treatment is delayed. For women, pernicious anemia can cause a false-positive Pap smear, since a vitamin B12 deficiency affects the appearance of all epithelial cells.

Pernicious anemia is not preventable, but early diagnosis and treatment of the vitamin B12 deficiency can relieve the symptoms and complications.

REFERENCES:

Shafina Bandali, RN, BScN, CGN(C), works in Endoscopy at the Scarborough Hospital, General Campus, in Toronto, ON
Canada Night Celebration
Montreal 2005

Western Band.

Monique Travers and Ray Chileshe.

French Traditional Dancers.

Canada Night.

East Coast Musicians.
SYNOPSIS OF CSGNA at WGOG 2005

SEPTEMBER 9TH-15TH 2005

1. REVIEW AND ADOPTION OF AGENDA:
A motion was passed to adopt the agenda after being reviewed.

2. REPORTS:
   Canada EAST- NFLD, NS, PEI/NB chapter.

3. TREASURER:
   This year CSGNA gave out 12 scholarships at $700 and this will be increased next year to 12 scholarships @ $1,000. This year we were also fortunate to have 30 scholarships sponsored by Carsen, 2 by CAG, one by SciCan. For the first time next year there will be a new $1,000 new member scholarship.

4. BYLAWS:
   There were four new bylaws and two amended for 2005, these bylaws were accepted as voted in the 2005 annual report.

5. WGOG:
   Presentation by Cindy Hamilton SIGNEA on WGOG duties for the executive board members. These duties included responsibilities for Nurses registration desk, CSGNA booth, introduction of the speakers and silent auction. SIGNEA arranged for donations to be collected at the conference for New Orleans at the welcome reception. There was also a proposal to have doctors to match this donation. Regina Chileshe a nurse from Zambia was introduced to the group. She was co-sponsored by CSGNA & SIGNEA to attend WCOG.

6. NEWSLETTER:
   The Guiding Light continues to improve. There has been much positive feedback from the members as well as more input. The “Spotlights” appears to be popular. Members are encouraged at the local chapter level to continue to send information regarding their education days for publication in the Guiding Light. The CSGNA is very grateful to Pentax for their support of The Guiding Light and look forward to working with them in the future. The new sponsor for The Guiding Light for 2006-2007 is Carsen. Thank you for your support.

7. EDUCATION:
   Michelle was elected by the Board to represent CSGNA at the CSA (Canadian Standard Association) meeting which was held in July 2005. C.S.A. is looking at developing of a document on reprocessing and sterilization of endoscopes and accessories. She will keep us updated; the next meeting is scheduled to be held in Quebec City January 2006.

8. MEMBERSHIP:
   Membership 588, up from 554 from last year at this time, 117 true new members. New membership level for 2006, there will be an article in February Guiding Light. Reminder cards were sent out with 25% renewal response. Next year membership renewal will be looked at closely. Chapter presidents will be approached by the membership director, to enquire the reason for lack of membership renewal. This will be done via e-mail at the same time as well being asked the reasons for not renewing. Chapter of the Year award, new award for next year was introduced at the annual chapter dinner meeting and at the annual business meeting. The selection criteria for this award was handed out to all Chapters Presidents at the Chapter dinner in Montreal.

9. PUBLIC RELATIONS:
   Things have been quite since April due to WGOG. Regular updates were made on the websites. Approached by the drug companies who are very interested in sponsoring the website.

10. PRACTICE:
    Bronchoscopy and Sigmoidoscopy practice guidelines are finalized and will be appearing on the websites soon.

11. DUTIES AND TIME LINES:
    Nala has almost completed duties and timelines document for the executive board members.

12. 2005-2006 EXCECUTIVE COMMITTEES:
    The committee for bylaws, nominations, vendor, education and finance were selected.

13. CHAPTER DINNER MEETING SEPTEMBER 11TH 2005:
    Discussed strategies to have education sessions, Ray Chileshe GI nurse from Zambia spoke regarding her GI unit in Lusaka Zambia (was cosponsored by CSGNA & SIGNEA). Elaine Burgess presented the new Chapter of the Year Award, new award commencing next year.

14. EXCITING NEWS FOR CSGNA:
    Nancy Campbell and Deb Taggart met with Lucille Aufrey C.N.A who is interested in supporting to set up a Canadian Colon Screening program. They want to try and use the model from UK set up by Sarah Harding.

15. SIGNA CONFERENCE:
    Currently CSGNA president and president elect attend the SGNA conference. It voted that other board member on a rotational basis to be sent to the conference to replace the president and president elect.

16. NEW EXECUTIVE POSITIONS FOR RENEWAL NEXT YEAR:
    ➢ President elect
    ➢ Membership
    ➢ Newsletter
    ➢ Canada Centre
    ➢ Public relations

17. REGINA CONFERENCE 2006:
    The dates of the conference are September 12-14. Conference will not only be endoscopy focused but there will be other topics such as pathophysiology of IBD and nursing liabilities. Regina is looking forward to seeing all of you at the 2006 annual GI conference. Winner for the 2006 conference registration for Regina is Sheila Lanteigne.

18. UPCOMING CSGNA MEETINGS:
    Email meeting at the end of November and face to face meeting March 3, 4 & 5 2006 Location to be determined.

Submitted by Usha Chauhan
CSGNA Secretary.
# CSGNA Education Committee
## Point Scoring System for Awarding Scholarships

Each year as a member (cumulative points) | 1 Point
---|---
Each year served on National Executive (cumulative points) | 3 Points
Each year served on Annual Conference Planning Committee (cumulative points) | 3 Points
Each year served on Chapter Executive (cumulative points) | 2 Points
Each time submitted an article for publication in “The Guiding Light” not reports (cumulative points) | 2 Points
Can demonstrate actively recruited members | 1 Point
Each time has acted as speaker at a CSGNA conference or seminar (cumulative points) | 2 Points
Each time served on an ad hoc committee of the CSGNA (e.g.) Bylaws (cumulative points) | 2 Points
Outlines geographical location and travel expenses | 1 Point
Actively participates in Chapter events (E.G.) fundraising | 1 Point
Each year as a member on the planning committee for a regional conference (cumulative points) | 1 Point
CGN(C) | 3 Points
CBGNA certification | 1 Point
Typed format | 1 Point

REVISED September 2002
M. Paquette, Education Director
NOMINATION FORM

Please complete this form and submit to the Chair of the Nominations Committee (currently the President of the CSGNA) 150 days (April 20th, 2006) 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.

Please include a curriculum vitae with the nomination form.

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 __________________________ 20___.

Signed: ________________________________

Nominated by ______________________________ & ________________________________

____________________________
APPLICATION FORM
FOR CSGNA ANNUAL SCHOLARSHIP AWARD

The Annual National Conference award of $1,000.00 is to be used for travel and accommodation to the Annual National Conference in Canada.

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

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

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

NAME: ________________________________________________________________________

CIRCLE ALL THAT APPLY: RN BSN BAN MSN OTHER ____________________________

HOME ADDRESS:____________________________________________________________

CITY: ____________________________________________ PROV: __________________

POSTAL CODE: ___________________ HOME TELEPHONE: ( ) __________________

FAX: ( ) ___________________________ E-MAIL: __________________________________

HOSPITAL/EMPLOYER:________________________________________________________

WORK ADDRESS: ________________________________

CITY: ____________________________________________ PROV: ________________

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

SIGNATURE______________________________________ DATE ___________________
# Canadian Society of Gastroenterology Nurses & Associates

**CSGNA Membership runs from June to June of each year.**
Elaine Burgis, 102 Tilman Circle, Markham, Ontario L3P 5V3

## MEMBERSHIP APPLICATION

(CHECK ONE)

- **ACTIVE**
  - $50.00
  - 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**
  - $50.00
  - Open to physicians active in gastroenterology/endoscopy or persons engaged in any activities relevant to gastroenterology/endoscopy (includes commercial representatives on an individual basis).

- **LIFETIME MEMBERSHIP**
  - Appointed by CSGNA Executive.

## FORMULE D’APPLICATION

(COCHÉE UN)

- **ACTIVE**
  - 50,00$ (Canadian)
  - 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**
  - 50,00$ (Canadian)
  - Ouvert aux médecins, actifs en gastroentérologie endoscopique ou personnes engagés en activités en gastroentérologie/endoscopiques incluant représentants de compagnies sur une base individuelle.

- **MEMBRE À VIE**
  - Nomme par l’exécutif.

## APPLICANT INFORMATION / INFORMATION DU MEMBRE

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

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

Prière de libeller le chèque à CSGNA
(Envoyez avec cette formule d’application dûment remplie à l’adresse ci-haut mentionnée.)
CSGNA 2004-2005 Executive

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