## RN Resources

Webinars, articles, courses, good ideas & other things your fellow nurses want to share!



The Clinical Nurse Specialist:

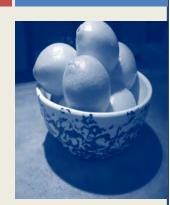




a time when hospitals and health care systems pay tribute to and build awareness of the important role that clinical nurse specialists play in ensuring that patients receive high quality care based on the best and most recent research evidence.

Thank you for your professional dedication to our patients and staff.

# **WELLNESS**



This is a good place to briefly, but effectively, summarize your product or services. Lorem ipsum **Center for Education & Professional Development (CEPD)** and Human Resources partner to promote education and patient safety.

Stanford's Life Support Training Center (LSTC) is an American Heart Association (AHA) Authorized Training Center and has been based at CEPD since 1992.

On July 1, 2015, two proud SHC Summer Workers attended an Initial Basic Life Support (BLS) with us and became BLS certified.

Their shared advice for future BLS first-timers, "Don't be nervous; if you listen during the class, you'll do great on the return demonstration and the test."



**BLS Certified Summer Workers** Bobby K. And Caitlin C.

At some point in our life each of us will encounter a nurse, whether it be as a patient or as a loved one. And that one encounter can mean the difference between suffering and peace; between chaos and order. Nurses matter. The American Nurse Project

### **NURSING GRAND ROUNDS**

Refreshments at 3:00pm. Presentation 3:30pm - 4:30pm. Complimentary admission, CA BRN 1 CE hour.

Held in LPCH Auditorium. Final dates for 2015:

- Tuesday, September 27
- Tuesday, October 27

#### From the CE Center

## 2015 Certification Review Courses

## Critical Care Registered Nurse (CCRN) Review

Session 1 - Wednesday, September 16, 2015

Session 2 - Wednesday, September 23, 2015

Session 3 - Wednesday, September 30, 2015

For more information or to register: www.cecenter.stanfordhospital.com

### ANCC Nurse Executive (NE) / Nurse Executive-Advanced (NEA) Review - Two Day Workshop

Thursday & Friday, October 15 & 16, 2015

See ANCC website for more information and/or to register:

http://www.nursecredentialing.org/reviewseminarsstudygroups

## Progressive Care Certified Nurse (PCCN) Review

Day One - Tuesday, November 10, 2015

Day Two - Wednesday, November 11, 2015

For more information and/or to register: www.cecenter.stanfordhospital.com

#### Gerontological Nursing Certification Review

Day 1 - Thursday, November 12, 2015

Day 2 - Friday, November 13, 2015

For more information or to register: www.cecenter.stanfordhospital.com

## ANCC Psychiatric Mental Health Nursing Review -

Two Day Workshop

Thursday & Friday, November 19 & 20, 2015

See ANCC website for more information and/or to register:

http://www.nursecredentialing.org/reviewseminarsstudygroups

## **Contributors**

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#### **Call for Authors**

Something we should cover? Want to write an article?



## STANFORD NURSING NEWS Juarterlu Stanford **HEALTH CARE** STANFORD MEDICINE September 15th, 2015 Volume 2, Issue 3

# **A New Perspective on Wellness**









## **Caring For Our Colleagues**

Estelle Coopersmith, RN

It was a beautiful cool, crisp late October evening when my colleagues and I were attending the annual hospital employee awards banquet, honoring several hundred longevity employees' anniversaries, ourselves included. The atmosphere was festive, and the hotel in which it was housed, was nothing less than spectacular! However, our thoughts didn't stray far from our friend and fellow RN, for whom we made plans to visit afterwards. She had undergone a lengthy surgery earlier in the day and had just returned to her room from the PACU. It was her request that she be admitted to the same nursing unit on which she had provided care to hundreds of patients. Now, it became our privilege to care for her. During our visit, we saw to it that she was comfortable. Two other close friends and coworkers joined us. The words spoken were few, but we stayed with her, held her hand, and prayed with her.

As I embark on my soon to be thirtieth anniversary of proudly being a nurse, I am seeing and caring for more and more nurses, as they too are aging in the profession. For some, the reason for hospitalization may be as minor as laparoscopic surgery. Yet, for others, it may be an illness or a diagnosis of can-



cer, requiring extensive surgery and treatments afterwards. Having undergone a recent surgery myself, I knew first hand that one significant key to my recovery was having a great nurse caring for me, one who is experienced and compassionate.

Oftentimes, when

a nurse becomes a patient, there can be much anxiety and anticipation involved. Having to be hospitalized is a stressful event for just about anyone, for the fear of the unknown is very real. A "hospitalized" RN is even more sensitive to the nuances of hospitalization, as we know all too well what risks lay ahead should something go wrong.

Adapted from an article submitted to nurse.com Estelle Coopersmith is part of the F3 nursing team.

## Connect

Nancy Lee, MSN, RN, NEA-BC

Nurses Week was a good time to reflect on what sets the nursing profession apart from so many others. Nurses have a reverence for the work, and a commitment to bettering the "caring profession," requiring us to practice self-care and build resiliency. Resilience is the capacity to adapt successfully in the face





of difficult circumstances. Early in life we developed behaviors and perspectives that have enhanced or hampered our ability to be adaptable and resilient as adults. Resiliency can be cultivated at any time in life and is important because change is prevalent. Take a moment to think about all the changes in today's world and our typical organizational encounters that each of us experience daily.

perspectives and competencies so that personal, organizational, life and school changes can be engaged and contribute to your personal and pro-

fessional development. In an era of restructuring, advancing



LET ME KNOW WHAT YOU THINK! I want to hear from you with ideas, suggestions and comments, not only about this topic but any others.

Feel free to email me any time at AskNancy@stanfordmed.org.



# Tiny Resilience Habits for Nurses' Wellbeing

Barbette Weimer-Elder, PhD, RN

In preparation for next year's Super Bowl, a small group of SHC personnel attended a week-long FEMA Center for Disaster Preparedness course in Alabama to improve their skills in handling mass casualty incidents (MCI's). In this course, industry experts uncovered techniques to address high-stress scenarios, such as managing mass fatalities and acquiring/distributing hospital resources.

These experts explained the National Incident Management System; the chain of command implemented at all levels (from private hospitals through local, state and federal emergency response agencies) during MCI's to manage complex interactions between hospitals, first responders, press, and non-government organizations (i.e. Red Cross, local businesses and churches).

After teaching these techniques and command chain, chose varied leadership roles - from incident commander to liaison officer to charge nurse – to address emergencies in the fictitious city of Noble, where everything that can go wrong, does go wrong.

This unique training environment houses the only hospital in the US that is dedicated to training healthcare professionals in disaster preparedness and response. The former Army hospital contains a trauma bay, modern treatment areas, sound and visual effect capabilities, hidden observation/control rooms, and a helipad. Here, students provided patient healthcare during multiple disaster scenari-

os: from shooters to sarin gas to Ebola outbreaks.

The course concluded with an Integrated Capstone Event, where interdisciplinary responses to an all-hazards MCI were simulated with a slew of actors and realistic props. This final exercise created challenges that improved our MCI awareness and honed our abilities to make critical decisions during future disasters.

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# FGR TINY HABITS

For Nurses

After I clock in/out I will drink three sips of water

After I put my stethoscope in my bag I will pack three healthy snacks

After everyone is assembled for the huddle we will practice 4-7-8 breathing

To participate in a future free Tiny Habits session, go to www.tinyhabits.com

# In The Spotlight: Outpatient Vascular Nurse Practitioners

Fae Lindo, MSN, ANP-BC, Lily Toy, MSc, MS, GNP-BC, Christie Wilson MS, ACNP-BC

Vascular Surgery is a dynamic specialty involving diseases of the arteries and the veins. Abdominal and thoracic aneurysms, peripheral arterial disease resulting in lower extremity claudication and nonhealing wounds, carotid occlusive disease, and DVT are some examples of vascular disease. Patients with vascular disease have many comorbidities including elderly age, ESRD, diabetes, HTN, dyslipidemia, obesity, tobacco abuse, and coronary artery disease. The complex nature of the vascular patient population requires a multidisciplinary approach. We have found that nurse practitioners (NPs) are an excellent addition to our team.

Our Vascular Clinic at Stanford treats over 6,000 patients annually. Although Vascular surgery is a surgical specialty, we have found that NPs are a very important part of our team. The role of the NP was designed to increase access to care and improve patient satisfaction In our clinic NPs order and review of diagnostic studies, perform advanced wound care, obtain pre and postoperative evaluation, and provide patient teaching during independent visits. Because of our complicated elderly patient population NPs are utilized to triage urgent patient phone calls. These calls often result in urgent clinic visits and add on surgical procedures. The addition of NPs to our clinic has greatly increased access to care and patient satisfaction while reducing unnecessary ER visits. NPs also see patients that require annual surveillance thereby freeing up the surgeons to see new patients.

Vascular disease is chronic, progressive, and systemic and it cuts across ethnic, cultural, social and economic lines. This diverse and complicated population requires a multidisciplinary approach. We, as NPs are proud of our ability to provide safe, efficient quality care to our vascular population with



cost savings to our entire health care system. Ultimately we are improving the quality of life of our patients.