



CoCANN Newsletter

Volume 3, Issue 1

March 2013

We represent neonatal nurses from both Orange County and Los Angeles County. This is the 5th local chapter of NANN in California, and fills a long-standing gap in coverage between our sister chapters to the East (ICANN), the South (SCANN), and the North (NCANN).

Inside this issue:

COCANN ANNUAL CONFERENCE	2
COCANN ANNUAL CONFERENCE	3
CONFERENCE SPEAKER REVIEWS	4
CONFERENCE SPEAKER REVIEWS	5
REFERENCE PAGE	6

Past President Letter

By Kathi Randall

It has been 5 years since Sandy Beaman invited me to a lunch meeting at her home where a small group assembled to plan a new local chapter of NANN in Southern California. Since that meeting I have had the opportunity to serve CoCANN in a variety of roles, to watch our chapter struggle and grow, and to meet many neonatal nurses from the area that I would not have met otherwise.

During this past year I served as CoCANN's President and am excited to say that our membership has almost doubled since January 2012. You may not know that the Board discussed closing the chapter in 2012 because we had such a small membership. But we didn't and instead of closing, we are growing.

In my professional career I would have never imagined that serving as an officer in a local NANN chapter would have been such an enriching experience both personally and professionally; but it has been. My involvement started small, with one local meeting, so I would like to encourage each and every CoCANN

member to commit to attend at least one in-person event this year and see if there is a way you can get more involved in 2013. CoCANN cannot survive without you!

If you are new to CoCANN, I thought I would take this opportunity to share a few highlights the past year. Without a doubt winning the Chapter Award for most members in attendance at the NANN Annual Education Conference in Palm Springs was a high point for CoCANN this past year. We also hosted a joint luncheon with our sister-chapter ICANN to wrap up the weekend; with more than 30 California members in attendance. Another highlight of the year was our Annual Holiday Party. If you haven't attended one of our parties, you really must put this on your calendar. This is a FREE event for members!! We arrange a fantastic meal in a great lounge, offer tons of time for networking with friends and making new ones, and if you dare, you can join in our annual holiday ornament and gift exchange.



In closing, I would like to take this opportunity to say a HUGE Thank You to each of the officers and volunteers that I have had the privilege to serve alongside during these last two years (Mary, Janeen, Senene, Nicole, Cindy and Mila). I can't imagine CoCANN without each of you.

I don't think at that time when I was sitting at Sandy Beaman's dining room table that I could have ever imagined all that we would accomplish in such a short amount of time but I do know that I'm grateful to have been part of CoCANN's history; and I look forward to seeing what is next.

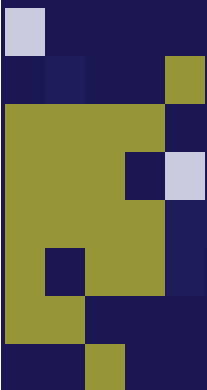
CoCANN Annual Conference: 115 Neonatal Nurses.

5 Outstanding
Speakers.

28
Enthusiastic
Vendors.
Result?..

Success!!

By Mila T. Flores



Seriously, it was a turn-away crowd for CoCANN's 4th Annual Day-Long Education Conference on February 4th at The California Endowment. Based upon the volume of positive feedback, attendees as well as participating vendors could not have been more satisfied with the outcome. Speaker topics this year ranged from ROP to CHD, Medication Safety to Developmental Care and a Case Scenario of a "Perfect Storm." You could call it cogent information interestingly delivered. A sample of audience evaluations reads:

"My only regret was not knowing about CoCANN before. This was a great conference. I wish I had attended the previous conferences as well."

"The presenters were knowledgeable, the information accessible and the length appropriate."

"Thank you for a wonderful day. The lectures were great and vendors were knowledgeable and helpful."

"Entire conference was great. Best one yet. Excellent speakers. Day went by quickly."

Several nurses contributed imaginative poster displays again, creatively emphasizing various topics such as

PICC Care Maintenance and Removal

Safe Sleep Initiative

Development of a Tool to Increase Parent Awareness of Infant Discharge from NICU

Neonatal Hypoglycemia Clinical Algorithm

SBAR Communication

Creating a Primary Nursing Program in the NICU

Use of "H.E.A.T." to Promote Healthy Conversations that stimulated serious thought and healthy general discussion

Importance was also given to "the lighter side" of things in this conference because, well, we take having fun very seriously too! For instance, gotta' have Prize Drawings, lot's of them, right? More than \$1,000 dollars-worth, even. Like: a copy of the new NRP book donated by Senene Owen, numerous gift cards like for Starbucks, movie theater tickets and Chevron gas. Add gift baskets galore of surprise goodies, a free NANN membership worth \$95, Nordstrom's gift cards, and more... whew! With everyone in a good

mood after the conference, we all headed over to one of nearby Olvera Street's convivial cantinas with CoCANN hosting a happy hour for members—who even found time (really) to review the association charter and discuss parts of the conference they found memorable. Needless to say a good time was had by all and a little bit of useful business was taken care of as well.

The overwhelming interest in attending this year's conference and the limitation in the size of the room we have been using suggests we'll be securing a larger space to insure that we can accommodate everyone who may wish to attend next year's conference. We are pleased to say that it is due to wonderful member support like this and the interested involvement of so many worthy contributors that CoCANN remains in a financially secure position. The heightened interest in our programs is an encouraging sign and among other things, we'll continue to emphasize the recruitment of new members.

Please note the dates of our quarterly association meetings this year:

- **Saturday, May 4th** – Location and Time to be determined
- **Saturday, August 10th** – Location and Time to be determined
- **Tuesday, November 12th** – Location and Time to be determined



**Robin
Koeppell
Medication
Safety
Presentation**

Be assured of a worthwhile day, a really good meal as always, and valuable friendship building (or networking).

Thank you again, sincerely, to everybody—and there are so many of you: members, member volunteers, business associates—who so tirelessly contributed so much in so many ways towards making this conference the outstanding success it was. CoCANN has been honored by your talents, your spirit, and your support.

***The
conference
was enriched
with
wonderful
poster
presenters!***



***As always,
there was
great
opportunity
for
networking
between
hospitals***



Medication Safety Lecture Hits Home

by Ellen Mack

Robin Koeppel graced the conference with an excellent lecture on medication safety – one of her topics of expertise. Giving background on the problem in general, Robin quickly got into the issues that make medication errors of particular risk to neonates. Robin's talk was rich with examples and case studies, the strengths and weaknesses technology bring to the practice of medication safety, and specific things the bedside RN can do to reduce risk. After years of experience studying and speaking on the topic, her presentation was fresh, relevant, and enormously important. All of us present were left sobered, yet better able to understand how to perform more safely for our very fragile patients.

A Summary of the Presentation, “A New Look at Developmental Care in the NICU: A Trauma Informed Approach,”

By Corinne Maloney, RN, MSN

In her inspiring talk, “A New Look at Developmental Care in the NICU: A Trauma Informed Approach,” Mary Coughlin, RN, MS, NNP asked the audience of neonatal nurses to consider a different perspective about the experience of infants in the hospital—that of “developmental trauma.” In this perspective, the infant in the NICU begins its life experience exposed to trauma—frequent and unpredictable stressful experiences—without the neurological organization to cope. The result of which, Coughlin proposed, is that like other victims of trauma, negative neurological patterns develop that hinder healthy functioning. She suggested evidence of these changes might be seen in the high percentage of preterm infants that display behavior problems later in childhood. We as nurses, Coughlin encouraged, by understanding the patient experience from this perspective and implementing appropriate interventions, can make a huge impact. By providing consistent, developmentally appropriate care we might better preserve the fragile early developmental stages. Coughlin recognized that as neonatal professionals we have become excellent at saving the lives of premature and medically challenged infants. Our next challenge, she proposed, will be to save lives *and* preserve the innocence of infancy.

Mary E. Coughlin, RN, MS, NNP is the President and Global Leading Officer of Caring Essentials Collaborative based out of Boston, MA. For more information, visit www.caringessentials.org or she can be reached via email at mec.cares@gmail.com.

A Summary of the Presentation, “ROP-Prevention, Prognosis, and a Parent’s Perspective”

By Corinne Maloney, RN, MSN

As NICU nurses, we provide the best care we know how to our patients. While we often know of the challenges our patients may face as they leave the NICU and grow into childhood, we will not experience it with them. Retinopathy of Prematurity (ROP) is one of those conditions—born in the NICU, struggled with long after. Sharon Bacot-Carter, BSN, NNP-BC, and mother of children born prematurely, got the conference off to an excellent start with her presentation on ROP. It was a thorough review of ROP, made personal with her experience of having her own children in the NICU and in the years beyond. She very clearly explained the pathophysiology of the disease, in which the premature infant born from the normal hypoxic environment in utero into the NICU environment, where oxygen exposure sometimes coupled with sepsis and other complications thereafter disrupt normal retinal vascularization. Bacot-Carter reviewed the classification of the disease with excellent photos demonstrating the stages of progression and plus disease. She highlighted important nursing interventions to help decrease the incidence and severity of ROP. Screening and treatment for the disease were also reviewed along with best practices for nursing care to support the infant during such procedures. Bacot-Carter reminded the audience of the important role nurses play in mitigating the hazards premature birth presents for eye development and sight.

Neonatal Congenital Heart Defects – Who Knew?

By Ellen Mack

Who knew that anyone – Kirsti Catton, NP, specifically, could present “Neonatal Congenital Heart Defects and Surgical Interventions” in only one hour and make sense of things! Ms. Catton organized her talk around lesions that are life threatening in the infancy. She focused on hemodynamic effects, diagnostic techniques, and early interventions. Ms. Catton showed how x-ray, EKG, echo, CT scan, MRI, and cardiac catheterization are used to evaluate suspected defects. By focusing on hemodynamics between pulmonary flow and the systemic circulation she was able to explain that important feature in a variety of lesions relating the mechanics to the interventions. The lecture was a very structured, organized way of looking at such diverse lesions as tricuspid atresia, tetralogy of Fallot, Coarctation, and more in a manner that was easy to follow and made great sense of the interventions, as well. Nurses left feeling better able to approach care for these complex patients and their families.

The Perfect Storm – a Case Study in Imperfect Care

By Ellen Mack

Dr. Adrian Lavery presented “A Perfect Storm: A case study of when everything goes wrong”. In this case he shared how a misdiagnosis in the middle of the night by a physician who had not yet examined the patient led both a referring hospital and the receiving hospital down a path which led all involved to a dire outcome. In this case, pertinent history was overlooked once the team became committed to the diagnosis. Interventions meant to treat the incorrect condition were pursued while crucial interventions were not undertaken. While the patient did not die, the resulting condition has been catastrophic for both the patient and family. This presentation reminded us that when it comes to safety, fatigue, inattention, and presumptions about a situation may result in tragedies that stay with families and health care professionals forever.

Your 2013 Current CoCANN Officers

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Mila Flores, RN, NNP, CNS at Kaiser Anaheim & Irvine

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Outgoing-Treasurer

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Senene Owen, RN, NNP at Methodist Hospital, Arcadia

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