



From Your 2016 ENA State President

Upcoming Events:

- * Check out the 2016 Calendar in this issue of the newsletter to start planning for the new year!
- * The next ENA member meeting will be held on Tuesday, May 10th at 6:00 pm
- * The 23rd Annual NE ENA Fall Conference will be held Thursday, September 8th, in Lincoln. Plan now to attend!!

Inside this issue:

Government Affairs	2
Member Spotlight	2
Health and Wellness	3
Educational Calendar	4-5
New Member List	5
CEN/CPEN Review	6

Welcome to 2016, a new year for Nebraska ENA. Let me take one moment to introduce myself. My name is Sue Deyke and I am honored to be your president for 2016. My personal goal for 2016 is for Nebraska ENA to meet all your needs as an Emergency Department Nurse. With that being said what are your needs? We had an interesting speaker at the State Leaders Orientation held in Las Vegas February 19-20. If you were not aware I am a baby boomer. Yes this means I was born before 1964. Personally I feel I haven't peaked yet. For the record 10,000 baby boomers are retiring every day, I have awhile to go.

At ENA they shared some interesting data about our changing workforce. Since 2015 the baby boomers are no longer the majority in the workforce. They have ceded that title to Generation Y. If you are not sure where you fall, the Generation Xs are 32-48 and Generation Ys are 18-31. This tells us as an organization we need to engage, the future generations to be active and involved. Genera-

tion Ys are the bulk of the workforce, and need to be represented in the organization. As an organization we must find ways to include connect and develop these future leaders. To me this was an eye opening concept. I have never been in the minority. I need to remind myself that Emergency Nursing is an ever changing arena, and we need to be lifelong learners.

So what can the Generation Y nurses bring to our organization? Well to start their mastery of technology. This generation has seen more technology changes in the last 10 years, than I have in my whole career. This is amazing. We need to tap this resource so we can connect with more Emergency nurses. They have a passion to feel connected. So let's connect. We will be adding a "meet and greet" time to our fall convention, to bridge this gap. They want things available at their fingertips. At Leadership every table brainstormed on making information, EBP and Emergency nursing care, one click away for all ENA members. This generation also

wants to feel their efforts matter. We know as Emergency nurses that every day we impact patient's lives. We teach, console, care and most of advocate for safe practice. Maybe there is more, so with the help of our future leaders we can only improve as an organization.

To end, welcome all Generations to 2016. Let ENA meet your needs, and let us know how we can assist you in your practice.

Sue

Sue Deyke, MSN RN CEN
 2016 NE ENA State President
 sddeyke@columbushosp.org



Government Affairs Update by Adam Bruhn, BSN RN CEN CPEN

It is a very busy year for bills that affect Emergency Nursing:

AGAiNST

LB900—Change motorcycle and moped helmet provisions, motorcycle registration fees, rename the Health Advisory Board, and create the brain injury services program and fund.

LB900 changes the helmet law to state that a person who is at least twenty one years of age does not need to wear a helmet.

FOR

LB668 — Change certain federal references and provisions relating to provision operator’s permit restrictions, use of interactive wireless communication devices, and occupant protection system enforcement

Primary offense to be texting while driving

LB669 - Update certain federal references and change from a secondary to primary offense certain occupant protection system enforcement requirements

Primary offense for all occupants to not be wearing seat belt.

LB1009 - Prohibit the sale and use of certain synthetic drugs under the Uniform Controlled Substances Act and the Uniform Deceptive Trade Practices Act

Would prohibit the sale of such synthetics as “K2” and any similar or look-alike products.

LB1056 - Adopt the Patient Choice at End of Life Act

Provides for assisted end-of-life options for persons with terminal illness.

Passed

LB471 - Change prescription drug monitoring provisions and create the Veterinary Prescription Monitoring Program Task Force.

This bill tasks the Department of Health and Human Services with developing the Prescription Drug Monitoring Program to be used by pharmacists and providers. Patients cannot opt out of this program and all prescriptions of controlled substances are entered into the data base.

On February 29th, Nebraska state lawmakers passed LR413. This legislative resolution establishes a task force to examine gaps in NE behavioral and mental health systems. The state moved to more community-based versus institutional-based programs in 2004, but has not performed a comprehensive evaluation of that directive. This task force will look into the adequacy of resources throughout the state.



NE ENA Member Spotlight

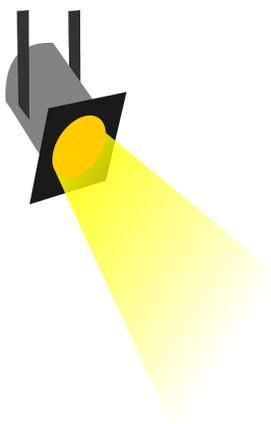
Congratulations go out to NE ENA members Curtis Olson, BSN BA RN EMT-P CEN, and Kim Brandenburg, MSN RN CEN CPEN.

Both were accepted to speak at the upcoming national ENA annual conference being held in Los Angeles in September.

The NE ENA Newsletter is published quarterly. Articles and information for future mailings may be submitted electronically to: amaze610@ya-hoo.com or by mail to: NE ENA.

Government
Affairs Update

Member Spotlight



A HealthiER BettER You! By Ashley Emmel, MSN MBA RN

Caffeine Myth Busters

How many nurses do you think rely on that cup of coffee, can of soda, or energy drink to get through their shift? Umm.... Too many to count! Depending on how much you know about caffeine, there are a lot of myths out there, so let's find out the truth:

Caffeine is Addictive: it depends. We know that it is a stimulant and when consumed regularly, we can develop withdraw symptoms such as headaches, fatigue, anxiety, irritability, depressed mood, and decrease concentration. However, caffeine does not threaten physical, social, or economic health; so most experts do not consider a dependency of caffeine a serious condition.

Caffeine Causes Insomnia: again, it depends. Caffeine is absorbed and metabolized quickly in the body. Processed through the liver, half of it is eliminated from the body in 5-7 hours and 75% is gone in 8-10 hours. Although a few doses in the morning (or beginning of your shift) shouldn't affect your sleep, some people may not be as sensitive to its effects if consumed less than six hours before bedtime.

Caffeine is Harmful for Women trying to Conceive: there are no links to small amounts of caffeine consumption and the following: trouble conceiving, miscarriage, birth defects, premature birth, or low birth rate. There is a suggestion to limit caffeine to 200mg or less for those trying to conceive and women who are already pregnant.

Caffeine Can Help Sober You Up: WRONG! People think that consuming caffeine and alcohol together make you more alert, aka "sober"; but the truth is that reaction time and judgment are still impaired.

Caffeine is Dehydrating: caffeinated beverages are full of other hydrating components that offset the loss of fluid caused by the diuretic effects of caffeine. Therefore, caffeine consumption in moderation actually does not cause dehydration.

There you go! Caffeine Myths Busted... so drink up!



**This month's
health and
wellness
feature in the
NE ENA
Newsletter**



2016 NE ENA State Board and Contact Information

President—Sue Deyke, MSN RN CEN (sddeyke@columbushosp.org)

President-elect—Marcia Harmon, BSN RN CEN (mharmon@cmcfcc.org)

Immediate Past President — Anna May, MSN RN-BC CEN CPEN (amaze610@yahoo.com)

Secretary — Watson, BSN RN CEN (swatson@nebraskamed.com)

Treasurer — Anne Duhs, BSN RN CEN (anneduhs1234@gmail.com)

Committees and Chairpersons

Fall Conference Planning: Ashley Emmel, MSN MBA RN (aemmel@nebraskamed.com)

Injury Prevention: Kim Brandenburg, MSN RN CEN CPEN (kbrandenburg@columbushosp.org)

Pediatrics: Regina Antonio, BSN RN CPN(ReAntonio@childrensomaha.org)

Trauma: Ashley Emmel, MSN MBA RN (aemmel@nebraskamed.com)

Membership: Jennifer Koehlmoos, RN (jkoehlmoos@gmail.com)

Government Affairs (Co-chairs): Anna May, MSN RN-BC CEN CPEN (amaze610@yahoo.com) and Adam Bruhn, BSN RN CEN CPEN (aqbruhn@hotmail.com)

ENA Calendar of Events for 2016

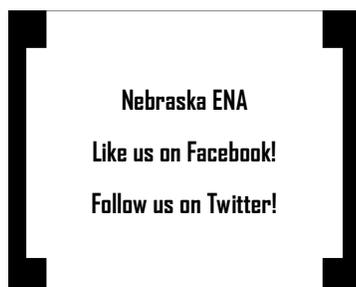
ENA Calendar of Events for 2016		April (cont'd)	TNCC
March	ENPC March 10-11 Omaha Marjorie VanRiper (mvanriper@nebraskamed.com)		April 18-19 Bellevue Marjorie VanRiper (mvanriper@nebraskamed.com)
	TNCC March 14-15 Lincoln Heather Talbott (Heather.Talbott@bryanhealth.org)	May	NE ENA Member Meeting May 10 Time and Location TBD – will be available via TeleHealth
	ENPC March 16-17 Lincoln Jeanette Walsh (jwalsh@southeast.edu)		ENA Day On The Hill May 10-11 Washington DC
	TNCC March 23-24 Grand Island Melanie Frear (mfrear@sfmtc-gi.org)	June	ENPC June 2-3 Scottsbluff Dallas Schaffer (Dallas.Schaffer@rwhs.org)
April	TNCC April 5-6 Lincoln Jeanette Walsh (jwalsh@southeast.edu)		Trauma Outcomes & Performance Improvement Course (TOPIC) June 3 Scottsbluff Matt Witt (mwitt@traumanurses.org)
	Annual Trauma Review April 7 NE Medicine, Omaha Marjorie VanRiper (mvanriper@nebraskamed.com)		TNCC June 9-10 Lincoln Heather Talbott (Heather.Talbott@bryanhealth.org)
	Avera O'Neill Trauma Conference April 7 O'Neill Jennifer Koehlmoos (jkoehlmoos@gmail.com)		ENPC June 15-16 Omaha Kristi Kult (mkkult@cox.net)
	TNCC April 7-8 Aurora Jodi Cregger (jcregger@lifeteam.us)		2016 Trauma Symposium June 17 Omaha, Hilton Downtown Healthsciences.creighton.edu (402) 280-5659
	TNCC April 13-14 Norfolk Bobbie Jo Miller (bmiller@frhs.org)	July	Delegate and ENA Conference Grant Applications due
	ENPC April 14-15 Lincoln Heather Talbott (heather.talbott@bryanhealth.org)		TNCC July 14-15 Scottsbluff Dallas Schaffer (Dallas.Schaffer@rwhs.org)
	TNCC April 14-15 Scottsbluff Dallas Schaffer (Dallas.Schaffer@rwhs.org)	August	NE ENA Member Meeting August 9 Time and Location TBD—will be available via TeleHealth
		September	NE ENA STATE OFFICER ELECTIONS
			SAVE THE DATE!!! 23rd Annual NE ENA Fall Conference September 8 Lincoln, NE

NE Emergency Nurses Association

P.O. Box 24941
Omaha, NE 68124-0941

Website: nebraskaena.org

Safe Practice, Safe Care



Welcome New Members!!!

Dawn Alladin – Bellevue	Amy Kruse – Farwell
Lynn Baumert – Wahoo	Rebecca Lagler – Grant
Cami Brown – Hyannis	Jane McNally – Sidney
Amanda Curran – Omaha	Chris Morehouse – San Antonio, TX
Raven Darnell – Scottsbluff	Jody Morris – Omaha
Teresa Dethlefs – Loup City	Anna Novak – O'Neill
David Forbush – Omaha	Libby Nutzman – Crete
Nicole Hansen – Omaha	Madelyn Tobin-Shubin – Omaha
Austin Hennings – Council Bluffs	

Nebraska membership is currently at 300 members! Spread the word and get your friends and coworkers to join this great organization! Contact Jennifer Koehlmoos (jkoehlmoos@gmail.com) for any questions or more information.

Start planning now! 2016 is RN License Renewal year in Nebraska!

September
(cont'd)

Regional Trauma Conference

September
North Platte
More info coming!

ENPC

September 1-2
Scottsbluff
Dallas Schaffer (dallas.schaffer@rwhs.org)

TNCC

September 12-13
Bellevue
Marjorie Van Riper (mvanriper@nebraskamed.com)

Emergency Nursing 2016 Conference

September 14-17
Los Angeles, CA

TNCC

September 27-28
Norfolk
Bobbie Jo Miller (bmiller@frhs.org)

October

TNCC

October 6-7
Scottsbluff
Dallas Schaffer (dallas.schaffer@rwhs.org)

TNCC

October 10-11
Bellevue
Marjorie Van Riper (mvanriper@nebraskamed.com)

ENPC

October 20-21
Lincoln
Heather Talbott (Heather.Talbott@bryanhealth.org)

November

NE ENA Member Meeting

November 8
Time and Location TBD – will be available via Tele-Health

December

ENPC

December 1-2
Scottsbluff
Dallas Schaffer (Dallas.Schaffer@rwhs.org)

CEN/CPEN Review Questions:

Test your knowledge with the following CEN/CPEN review questions:

1. The priority for a patient who verbalizes suicidal thoughts is to:
 - A. Determine if the patient has a past medical history of depression
 - B. Determine if the patient has a supportive spouse
 - C. Ascertain if the patient has a plan to kill himself
 - D. Identify recent diagnosis of a chronic condition
2. A primary adverse effect that is associated with a patient taking bethanechol (Urecholine) for gastroesophageal reflux disease (GERD) is:
 - A. urinary urgency
 - B. constipation
 - C. hypertension
 - D. dry mucous membranes
3. A 16-year-old male who is currently receiving treatment for a psychiatric disorder is experiencing labored breathing, difficulty speaking, and neck spasms. He is most likely experiencing adverse effects from which class of psychotropic medication?
 - A. Anti-anxiety
 - B. Antipsychotic
 - C. Selective serotonin reuptake inhibitor
 - D. Amphetamine
4. A 14-year-old male with hydrocephalus and ventriculoperitoneal shunt presents with complaints of irritability, nausea, and headache. He is awake and alert. His vital signs are T 99.0F, HR 84 beats per minute, RR 18 breaths per minute, SpO2 95%, and BP 108/74 mmHg. The parents and patient deny any knowledge of recent injury or ill contacts. Parents are concerned that there is a shunt malfunction because this is how the patient presented previously when he had a shunt obstruction. What is the best action for the nurse to take?
 - A. Offer ondansetron (Zofran) oral dissolving tablet and acetaminophen (Tylenol) and re-evaluate in 30 minutes.
 - B. Call for a neurosurgical consult and prepare the patient for transfer to the operating room
 - C. Prepare the patient for a lumbar puncture to determine the severity of intracranial pressure (ICP)
 - D. Draw a complete blood count and blood culture, and prepare for diagnostic imaging, such as computed tomography

Answers: 1. c, 2. a, 3. b, 4. d