

The NEW YORK STATE ASSOCIATION OF SCHOOL NURSES

Communicator

President's Report

Diane Lightfoote, RN, NCSN, President NYSASN

Spring is on our doorsteps. It's a time of renewal and new life. It's a time to reflect on how well the school year has gone. What new idea did you try this year? Was it successful? A few years ago I was at the School Nurse Orientation as a faculty member and listened in on the hearing practicum. I learned a new technique to screen my kindergarteners. Instead of having them raise their hand when they heard the sound, ask them to say "beep". Demonstrate by stimulating the tone at 40 dB and loudly say "beeeep", and then tell the child "now you do it". It takes once or twice for them to catch on, but it worked wonderfully! I had fewer failures and retests. After years of School Nursing, so simple an idea, it never occurred to me... an old dog can learn new tricks.

How can you learn new techniques or refresh your skills? Our Annual Fall Conference was held at the Sagamore Hotel on Lake George this past November was an example of learning new ideas, refreshing our assessment skills and practicing what we learned. Our 2009 Conference is scheduled for November 6-8, 2009 at the Harbor Hotel in Watkins Glen. Please join us as you can be assured that fresh ideas and current topics will be presented and as always there will be collegial networking. Information will be forthcoming on www.nysasn.com.

This past fall the California School Nurse Organization challenged the order permitting training unlicensed personnel to administer insulin which was in direct violation of their California Nurse Practice Act, the result ~ The decision of the California Superior Court in the case of *American Nurses Association, et al. vs. Jack O'Connell, State Superintendent of Public Instruction, et al.* confirms that the California Department of Education does not have concurrent authority over the administration of medications in California schools and cannot override the California Nurse Practice Act. (NASN talking points, 11/08) Please review the talking points on our website!



Diane Lightfoote

2008 has been fraught with poor economy. School nurses can *continued on page 3*

School Nursing is an Essential School Service

Rita Molloy, RN, NYSASN Past President



Rita Molloy

We are living in tough economic times. When school budgets are tight, and cuts are threatened, the value of the School Nurse to the school community should not be underestimated. School Nurses provide essential services that help to provide vital revenue to school districts everyday. In the role that we play as the Registered Professional School Nurse, we are specialists in infection control measures that help to decrease absenteeism which in turn increases attendance based state aid and educational performance. We provide billable Medicaid services such as medication administration and treatments. The provision of these medical services helps to ensure that all stu-

dents can attend school and have their health needs accommodated, and that safety is maintained. In times of financial crisis, school nurses are increasingly called upon to evaluate students by parents who cannot afford health care services. Our expert assessment skills assist parents to know when to seek additional medical interventions for their child, which will help to protect the health and safety of all in the school environment. Revenues and ratings are influenced by the student's ability to participate fully in their school activities, and the School Nurse is an integral part of keeping students healthy. By enforcing good hygiene practices, excluding those with signs of infectious disease, and providing proactive health interventions we keep schools functioning optimally.

Especially in tough economic times, it is important that our value is not overlooked. Budgets that are created with reduced revenue streams will most certainly be trimmed with an eye toward cost saving measures. By keeping a School Nurse ever present in the school environment, an investment is made in keeping viable revenue streams

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The New York State Association of School Nurses

HISTORY

The New York State Association of School Nurses (NYSASN) was organized in 1986, to maintain, promote, and improve quality school health services and health education throughout the state. NYSASN now has over 1000 members.

MISSION

The mission of NYSASN is to advance the practice of school nursing and to enhance the educational success of students by promoting quality health services.



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Advertisers should direct inquiries to:
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Farmingville, NY 11738

Are you interested in adding
something to our newsletter?
Contact the Editor before April 15, 2009
with your ideas for the
Spring 2009 issue.

Editor's Corner

By Jacki O'Donnell, RN

Do you know someone who won't play lotto for an amount that they consider too small, but will shell out their money when the jackpot hits a certain amount? For example, some people think 1 or 2 million dollars is too little stakes, but consider 10 million dollars worthy of their time and money. It sounds a little crazy when you think about it, doesn't it? I'd be very happy with a million dollars.

Even though it sounds unreasonable, this is the same thinking that prevails in government. Small numbers just don't carry the same weight as large ones.

When an organization approaches a legislator, be it a county, state, or federal representative, they all want to know the same thing – how many people are we talking about? What is your membership? Numbers talk. The larger the group, the more likely the legislator will be to devote time and effort to its cause.

We have been fortunate in that we have a very aggressive legislative chairperson, Stacy Marye, who is extremely knowledgeable and active in contacting our legislators in Albany. What they want to know is how many members are in NYSASN. They want to know that if they take up a cause it will be affecting a large number of constituents (i.e. voters).

There are approximately 4,000 school nurses in New York State. Wouldn't it be wonderful if we could say that we represent all of them? If we could say we have them all as members? Although we do represent the interests of all school nurses, we could be so much more powerful if we had all school nurses behind us, endorsing us, and charging us with advocating for their practice and their job security.

I realize I am preaching to the choir here, because if you are reading this, you are already committed to NYSASN's mission statement and its goals. I encourage you to bring our message to your colleagues. In these unsure economic times, with school nurses still not mandated, we need to be strong and stay strong. We need to remind the people who can affect change that we provide necessary services, and that we are invaluable to the education system.

With the new year, I wish you happiness in both your personal and professional lives. Please feel free to contact me at nysasnnews@yahoo.com with any topics you would like to see discussed in the Communicator.



Jacki O'Donnell, RN

Notice of Disclaimer

In order for the New York State Association of School Nurses to remain in compliance with the mission statement of the organization, we are unable to accept responsibility for educational information printed or distributed by the faculty at any conference or workshop presented by NYSASN. The following disclaimer was reviewed by legal counsel and will appear on all literature distributed by faculty members at conferences.

"The NYSASN provides this compilation of information as a service to its members only with the intention that the materials be used as a convenient source of information. The materials are provided "As Is" and without warranties or representations of any kind, whether expressed or implied. NYSASN is not liable for damages of any kind, whether special, indirect or consequential, arising from the use of information supplied herein. Nothing is intended to constitute or to be relied upon as legal advice, which should be obtained from licensed professionals in those fields."

School Nursing is an Essential School Service

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and improved student outcomes flowing. We need to be visible and vocal about the roles that we play to ensure excellence in education. Do not let what you cannot do stop you from doing what you can do. Be an advocate for your students by educating others about the important role that you play. No opportunity to be recognized should be overlooked. Attend Board of Education meetings, PTA meetings, and staff meetings. Offer your expertise on Instructional Support Teams, Disaster planning teams, and when creating Food Allergy Management policies. Be a resource, write articles and submit them to your school newsletter, post them to your school web page, send them to your local newspapers. Contact your District Public Relations

person with ideas for articles that feature what you do that contributes to the success of your school.

Even when times are difficult there is a need to focus on what is truly important. To quote Herophilus:

When health is absent

Wisdom cannot exert itself

Art cannot be created

Wealth becomes useless

And reason is powerless...

We have the power to promote good health. Let us raise our voices and be heard! Best wishes for good health in this New Year.

Report from President-Elect

Suzanne Smith, NCSN, BSN, RN

As your 2008-2009 President-Elect, I extend best wishes for school nurses across New York State. With the state of the economy and stock market ups and down, school nurses, along with the rest of society are waiting for the dust to settle from all the raging financial storms of 2008. Regardless of the outcome, School nurses must remain true to the mission of NYSASN and that is to promote quality health services in all NYS school buildings.

We must continue to educate NYS school nurses so that the safety of the individual student and the public at large is the catalyst of our activities. New York State children will still need school day management of chronic health conditions such as diabetes and asthma, but we may have more students with stress from unemployed parents and lack of medical insurance. Our skills as registered professional nurses will provide a strong base for children and parents.

School nurses can advocate by sharing our assessments/voices about the needs of our populations with administrators, local agencies and legislative representatives so that awareness of present issues will lead to solutions. School Nurses can use the nursing process on a large scale and play a part of the intervention strategies and outcome evaluations. Registered Professional Nurses are respected for their integrity. School Nurses must remain positive and utilize networking not only on a local level but at the state level. We need more school nurses to be involved in professional organizations such as NYSASN. I encourage anyone reading this article to talk to a school nurse and advocate membership in NYSASN.

Visit our website: www.nysasn.org to learn more about NYSASN.

Download an application and join us!

From the President

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attest that they are feeling the pinch. So many school nurses have a discouraging low salary, some have not had raises over the past years and many have had their insurance premiums skyrocket leaving less money in their pockets. So how can I begin to ask you to rejoin or invite others to join NYSASN with the uncertain economy? NYSASN needs to remain a strong voice for the school nurses in NY. We are your advocates and your primary resource to turn to when your job is in jeopardy. We can offer you a crisis packet. We offer top-notch educational offerings. We educate our NYS congressmen and senators of the issues that concern and relate to the children and school nurses of NY. We offer our opinion in the form of position papers. We have unified membership with NASN; we both offer scholarships for higher learning. NASN also has newsletter and journals. For your students are the Vision Certificates offered through VSP (Vision Service Program) for a free exam and glasses if needed to a student in need. Best practice means you belong to your professional organization. Would you feel comfortable having a medical evaluation from a non-board certified MD? So I ask you, encourage one colleague, just one to become a member of NYSASN. If we were all able to have one person to join, we would be twice as strong!

Our students deserve the very best and safe medical care while at school. NYSASN- caring for New Yorks' Future!

If you have any questions I will be available through email: nysasnpres@yahoo.com. Do not hesitate to contact me.

Best wishes for a successful end of the 2008-09 school year.

By-law Change

*Mary Ellen Heer, RN, NCSN,
Bylaws Chairperson*

As NYSASN continues to grow and change, it necessitates proposed changes to the by-laws to reflect this growth. The following by-laws change was voted on at the Fall Conference general meeting and approved.

NYSASN By-Laws Revision

Article VIII- Board of Directors

Section 1:

- a. Removal of the "independent school nurses" language.

The bylaws are posted on the NYSASN web site.

NYSASN is Seeking Candidates for President-Elect and Secretary!

According to the bylaws of the New York State Association of School Nurses, the transition of the officers occurs at conclusion of the annual meeting in which the officers have been installed. The next annual meeting will be held in November 2009 in conjunction with the annual conference, at which time the next installation of new officers will occur.

Candidates for the offices of President-Elect (a three-year commitment consisting of a one year term as president-elect, president and past president) and secretary (a two year renewable term) are being sought now. Candidates for elected office must be active members (members in good standing) of NYSASN for three consecutive years of membership (current and two previous) and should possess energy and a vision for NYSASN's future. Membership in this organization demonstrates one's commitment to professionalism in school nursing in New York State and in the nation. Serving on the Board of Directors and as an officer is a further demonstration of that commitment.

It is gratifying to be able to view the advances in our specialty profession from a vantage point that is broader than one's own health office or school district. It is reassuring to realize that issues that concern one, concern many-if not all, school nurses in the state. It is invigorating to see the effort being put forth by school nurses

volunteering their time to advance the practice of school nursing and improve the educational success of children in their care. The networking opportunities, professional liaisons and resources that are available as a NYSASN member, Board of Directors member and a NYSASN officer are immeasurable.

I urge each and every NYSASN member to consider "going one step further" than you think you can and giving serious thought to a position on the Board of Directors or an officer position. If you know of a colleague who might be considering a position, I ask that you support that colleague in her/his decision and beyond! No one does this work alone and the supporters play an important, yet different, role in the success of NYSASN. November 2009 might seem a long way off, but we need to plan now. If you are interested in being a part of the leadership team of NYSASN, please contact me. A nomination form can be downloaded from the website at www.nysasn.org. I look forward to hearing from you!

*Rita Molloy R.N., Immediate Past President
Chairperson of the Nominating Committee
nysasnpastpres@yahoo.com
Work: 631-968-1202*

Making the Difference... in School Health

Sally Schoessler and Gail Wold

School Health Update Conferences 2009

Our one day professional development conferences will be presented in 12 locations statewide this year with a focus on "Making the Difference through Collaborations and Clinical Connections". At the request of many of our state's school nurses, we have added two Saturday conferences to the schedule and we hope to once again offer continuing education units (CEUs). The day's agenda will include the following topics:

- New York State Education Department Update
- Student Weight Status Category Reporting: Streamlining the Process
- The ABC's of Hepatitis – presented in collaboration with the HIV Clinical Initiative
- Nebulizers and Asthma Care Update – presented in collaboration with the NYS Community Asthma Network

Please join us at one of the following locations:

E. Long Island, March 10th
New Rochelle, March 11th
Poughkeepsie, March 12th
Latham, March 14th
Lake Placid, March 16th
Watertown, March 17th
Buffalo, March 25th
Chautauqua, March 26th
Binghamton, March 27th
Syracuse, March 28th
Rochester, April 6th

School Nurse Institute Conference

The summer Institute for School Nursing 2009 will be held at the Conference Center at Niagara Falls from July 22 – 24, 2009. This conference is aimed at providing a strong clinical and practice program for the professional advancement of our state's experienced school nurses. Our keynote speakers include Donna Mazyck, the President of the National Association of School Nurses and Daryl Pichan, a relationship management consultant. We look forward to welcoming 250 school nurses to the unique setting of Niagara Falls, NY for a motivating educational and networking conference. Please see details on the "Events" page of our website.

NYSSHSC Resources

Website:

Laws, guidelines and school health information can be found at: www.schoolhealthservicesny.com

Listserv:

Sign up to be included on our e-mail notification system on the home page of our website.

Newsletters:

Fall and Spring Newsletters are mailed to New York's school nurses.

Telephone "Hotline":

Call our office with questions or concerns at 585. 349.7632.

*Sally Schoessler and Gail Wold
New York Statewide School Health Services Center
www.schoolhealthservicesny.com*

NYSASN EXECUTIVE OFFICE NOMINATION FORM

This is a wonderful opportunity for talented school nurses around the state to step forward and serve this organization. Only active members of NYSASN with three (3) consecutive years of membership are eligible for nomination. You may nominate yourself or one of your colleagues. If you are nominating a colleague, please be sure your nominee is willing to serve if elected.

The positions open for the 2009 year are: President-Elect and Secretary.

PRESIDENT-ELECT: serves for a term of one year and then shall succeed to the Presidency for a term of one year. This person shall serve as a member of the Executive Committee for a third year as the Immediate Past-President. This is a total commitment of three years. The Past-President serves as chairperson of the Nominating Committee and the School Nurse of the Year Committee.

SECRETARY: serves for a term of two years. The Secretary shall keep the minutes of all meetings of the organization; keep the organization's official membership roll and call roll when required; maintain record books in which the bylaws and minutes are entered and amendments to these documents properly recorded; have the current record books on hand at every meeting; conduct general correspondence of the organization; and perform such duties as required by the President.

TO BE CONSIDERED, NOMINATIONS MUST BE POSTMARKED BY MAY 1, 2009

I WOULD LIKE TO NOMINATE _____
(name of nominee)

for the office of **PRESIDENT-ELECT** **SECRETARY**

(street address) _____
(city, zip code)

(home phone) _____
(work phone)

(email address) _____

I would like to be elected to this office / I am nominating this person for this office for the following reason(s):

I understand that the Nominating Committee will prepare a slate of officers for the ballot from all nominees' names that are submitted. I also understand that the nominee **must be a current active member of NYSASN with three (3) consecutive years of membership** and must consent to serve if elected.

name of member making nomination

signature of member making nomination

(home phone) _____
(work phone)

Return this form to:
Rita Molloy, R. N.
NYSASN Past President
Nominating Committee Chairperson
18 Naylor Avenue
Medford, NY 11763

NOMINATIONS MUST BE POSTMARKED BY MAY 1, 2009

Zone Calendar – Upcoming Events

Zone	Region	Date(s)	Time(s)	Topic(s)	Guest Speakers or Presented By
1	Nassau County	March 11, 2009 April 25, 2009 May 6, 2009	4pm – 6pm	Marfan Syndrome Educational Symposium With Zone 2 School Nurse Dinner	National Marfan Foundation Suzie Delger with keynote Speaker Carolyn McCarthy
2	Suffolk County	Wed. 3/18/09 Sat. 4/25/09 Wed 5/6/09	4:30 – 6pm see website TBA	Marfan Syndrome Symposium with Zone 1 School Nurse Day Dinner	National Marfan Foundation Suzie Delger with keynote speaker Carolyn McCarthy TBA
3	Metropolitan				
4	Westchester/ Putnam Counties				
5	Southeastern	March 18th	Registration 5:30, program 6:00	Spring Dinner Meeting – Information on the use of pulse oximeters	Panel from the Orange County Department of Health
6	Northeastern				
7	Capital	April 4, 2009	9am-1 pm, registration at 8:30 am	Mini ½ Day Educational Conference: Pharmacology in the School Setting and Healthy Eating and Body Image	George Fredericks, RPh Katherine Hager, RD
8	Northern	May 7, 2009	5 pm	School Nurse Day Celebration	TBA
9	North Central	March 4, 2009	5:30 pm	Prescription for Nurses Rejuvenate-Relax-Rest	Stress Reduction Techniques- Organization Tricks-Just Say No
10	Central	April 25, 2009 May 6, 2009	TBA TBA	A one day conference hosted by the Zone 10 officers TBA	TBA Hosted by Southern Cayuga Central School Dist. Nurses
11	Southern	March 2009, date TBA	TBA	“Connecting Your Mind, Body and Spirit”	
12	Central Western	March 27, 2009	TBA	Scoliosis & Spinal Deformities	Dr. Rubery
13	Western	Feb 23, 2009 May 19th	7:00 pm	ENT Concerns	
14	Southwestern				

Location	Information	Zone Rep(s)	Contact Info
3/11: NEW LOCATION: North Bellmore Library 1551 Newbridge Rd. North Bellmore, NY 11710	Fee: \$5 non-members, free to members 4/25: see flyer on website Dinner: Cost & Place TBA	Lois Haque, RN	(516) 237-2280
Sherwood BOCES Center, 15 Andrea Drive, Holbrook, NY Courtyard by Marriott, Ronkonkoma, NY TBA		Mary Alvar, RN	malvar@wfsd.k12.ny.us
Looking for assistance from willing members to build zone 3		Dianne Kay RN, BSN, MA, PHN	H(718)723-5572, W(718)528-5734
		Terese Carey	tcarey@mamkschools.org
Cascarino's, Montgomery, NY	Fee To Be Determined, contact Kathy Manning (845) 457-2400 ext. 6017	Donna Stout, RN	dstout@vcsd.ouboces.org
			Zone rep position open – anyone interested please contact Karen Cofino:cofinok@mamkschools.org
Bone and Joint Center Auditorium	\$25, watch for flyer to be distributed with more information or check out new CRSNA website www.crsna.org	Marie Eoff, RN Betsy Williams, RN	(518) 384-1159, or marieeoff@aol.com (518) 386-5101 BWilliams@srgcsd.net
TBA	Any interested school nurses looking to advance school nursing in zone 8, Franklin & Essex counties, please contact Sue Barton, RN	Sue Barton, RN, BSN	H(518)647-2259, W(518)561-0100,ext455 Nursesue2002@yahoo.com
Indian River Intermediate School	No Fee	O. Jeanne Dolly, RN, BS, SNT, NCSN	E-mail: jdolly@mail.ircsd.org Home: (315) 287-1859 Work: (315) 642-0405
TBA TBA	Contact Ann Mares, Sharon Botsford or June Janssen	Ann Mares	maresa@southern cayuga.org Work: (315) 364-7098
Corning, NY (site TBA)	\$20-22, RSVP Gail Hall See NYSASN website, zone 11	Gail Hall, RN	(607) 589-7128, gailhall124@aol.com
Breakfast meeting at the Lodge at Woodcliff	TBA, contact zone rep for details	Linda DimickRN/	H(585) 278-4579,W(585)324-5919
Cayuga Heights Elementary Como Park Boulevard, Depew	\$20 \$10 for sub & retired nurses	Linda Heinen RN, Past President	Linda Heinen, RN W(716)686-2434, H(716)632-2334 LCC44@yahoo.com , Lheinen@depew.wayric.org
			Zone rep position open – anyone interested please contact Karen Cofino:cofinok@mamkschools.org

The Image of the Profession of School Nursing

Linda Dychkowski, RN, BSN, SNT

The first article I ever wrote was published in *The Communicator* twenty years ago. The subject of that article focused on the misperceptions about both school nurses and the profession of school nursing. Two decades later, I am once again addressing the same topic – because just when I thought that school nursing was viewed as other nursing disciplines, I recently saw the following ad for a school nurse position in a nursing journal:

SCHOOL NURSES NEEDED
Work in a relaxed environment
No experience necessary
Summers off

School nurses and the profession-at-large who have worked tirelessly to communicate the professional image of the school nurse should be justly discouraged by the wording of this ad. Let's start by looking at the words, "relaxed working environment." It is difficult to fathom any job, including positions in other nursing disciplines, described in this manner. Now let's look at the wording, "No experience necessary." It is also hard to imagine that the only health care professional caring for hundreds and thousands of students – would enter the profession without previous skills and expertise in emergency care, pediatric, adolescent, and emotional and behavioral nursing. And once again, rarely is a position in other nursing disciplines advertised as, "No experience necessary."

Years ago, the words used in this ad were unfortunately, commonly-used descriptors of the practice of school nursing. Inaccurate viewpoints existed about school nursing - from those who were either not informed or misinformed – concerning the role of nurses in school settings. Because I remember those days, it did not take me long to contact the health care agency that posted the ad:

To Whom It May Concern:

I am writing to you regarding your recent ad for school nursing positions. I felt compelled to write because I find the wording used is not representative of the practice of school nursing. Your ad states that school nursing offers: "A more relaxed working environment." If you have ever ventured into any school health office, this is certainly not the case. This statement does a disservice to those nurses who are struggling to meet the multiple and complex needs of thousands of students in our schools today. School nurses have worked for years to communicate an image of school nursing that accurately reflects the demands, knowledge, and expertise the profession requires. Perhaps a more accurate description of school nursing would be that it is a profession that offers a "clinically-challenging environment."

I would also suggest that you remove the statement: "No experience necessary," and replace it with, "prior experience with pediatric/adolescent illnesses, diseases, and disorders preferred." This wording would more accurately reflect the demands of the position because the school nurse is oftentimes the only medical person in school settings, and as a result must draw on previous nursing experiences and expertise. It is the school nurse who stands alone in assessing, managing, and intervening on behalf of students in his/her care without the benefit of back up from other health professionals.

Thank you for the opportunity to comment and to offer recommendations...

I also referred the health care agency to the National Association of School Nurses website (www.nasn.org) to review and incorporate the wording contained in NASN's Issue Brief, *The Role of the School Nurse*. Although I did receive a response that the ad would be rewritten and I have yet to see the newly written version, I know I did the right thing. How could I not react to such an inaccurate and demeaning description of school nursing?

When I entered school nursing in the late 80's, I remember the misconceptions that abounded about the role of the school nurse, both within the educational community and among colleagues in other nursing disciplines. As has been written throughout the history about our practice, school nursing was oftentimes defined by what others (parents, administrators and the school community) expected the role to be. In years past, it was not uncommon to hear comments to school nurses along these lines: "Lucky you, you have summers off," or "What great hours you work!" Occasionally we were even asked: "Did you ever work in a hospital?" Rarely did one hear from anyone, other than school nurses, comments and descriptions that accurately reflected the complexities, challenges, and responsibilities that is the profession of school nursing.

School nurses have worked long and hard to turn the focus away from perceived 'perks' in defining our role, and instead have accentuated the professional demands and level of skill that the profession requires. Nurses who are new to the profession will probably have difficulty imagining this past view of school nursing. For those who were employed as school nurses in the 80's and early 90's, they will remember the bias, and lack of respect that few other nursing disciplines endured.

Based on the past struggles of our profession, each of us has a responsibility to respond and to react when school nursing is perceived as anything less than what we know it to be. Today, because of concentrated efforts of school nurses in individual schools nationwide, and through collaborative initiatives of our state and national school nurse organizations, school nurses, including those who are new to the practice, are recognized and valued for the skills and knowledge they bring to the multi-faceted and clearly defined role of the professional school nurse. We must be aware of our history, so that it is not repeated. To remain silent is a disservice to those who have worked for decades to change the misperceptions of the role of the school nurse, and also to those who will follow in our footsteps.

Linda Dychkowski, RN, BSN, SNT

Long Island Regional Student Support Services
ldychkow@wsboces.org

Western Suffolk BOCES

<http://lirssc.wsboces.org/>

Charlotte Grace Scholarship

NYSASN is proud to share with our membership the winners of the Charlotte Grace Scholarship 2008:

Deborah Ilardi BSN RN from Zone 10 is the recipient of \$1000.00 as a graduate candidate.

Audrey Seibert RN from Zone 12 is the recipient of \$1000.00 as a BSN candidate.

Congratulations from the NYSASN Officers and Board of Directors.

Legislation Committee Report

by Stacey Marye, RN, BSN, SNT

NYSASN continues to promote legislation advocating for the healthcare needs of our students. When our students are kept healthy, with the assistance of their Registered Professional School Nurse, their improved attendance increases their academic success, and helps to reduce healthcare system costs. Although our state is experiencing a period of financial stress, we can still hope to advance our legislative agenda, because chronic disease management and health promotion are cost effective interventions!

NYSASN is proud of the inroads we have made in voicing our desire to see every school building attended by a full time School Nurse. We would like to do even more! In the works are plans to expand our legislative activities in Albany! Updates will be provided on the legislation page of the NYSASN website, as our membership continues to advocate for the issues that are important to school nursing. Don't forget about these bills that align with our positions:

A9519/S6625:

Requires certain school districts; New York City, Yonkers, Syracuse, Buffalo and Rochester to employ a minimum of one school nurse per school building; authorizes the commissioner of education to promulgate additional staffing requirements.

A1181/S1536:

Requires that a registered nurse be in each school when medically fragile students are in attendance or when students are at major risk of injury.

A378a and S5403:

Relates to the employment of school nurses for the inspection of pupils...shall employ a minimum of one school nurse, who shall be a registered professional nurse, in each school building.

A3224:

Provides for school nurses on premises during school hours.

Breaking News from the Webmaster...

As part of our continuing effort to provide valuable information to our members in a timely manner, we are excited to share with you the addition of a "Member's Only" new feature to our web site. This will be a password protected area of our site that will only be available to our members. We are planning to post an electronic version of our newsletter as well as other important documents or information that will be useful to you in your school nursing practice.

Beginning March 1st, you will be able to access this "Member's Only" area of the web site by following the procedures as outlined below.

- Go to our website at <http://www.nysasn.org>
- Click on "Member's Login" on the top navigational bar, to the far right
- Your "Username" will be your first name, last name, all lower case, no spaces
For example, Cynthia Kaiser is *cynthiakaiser*
- Your initial "Password" to enter will be *schoolnurse* (all one word)
- Then click "Submit", you will now be on the Member's Only page
- Click on "User Preferences" under the NYSASN banner (it's the person icon)
- This will bring up your Name, Email and Password.
- Your **MUST** change your password to a password unique for you only, and then reconfirm the password. This will be your password for all future logins.
- You may also update your email address here as necessary

It is extremely important that you follow all the procedures as listed above. We want you to be able to take advantage of being able to access any documents that we share with you. We look forward to being able to provide this service to you, a valuable member of our statewide school nursing organization.

Thank you for continued membership and support of NYSASN. Keep this page of instructions handy when you are ready to access the Member's page. If you have any questions, please feel free to email me at nysasnweb@yahoo.com

*Cynthia Kaiser, RN
NYSASN Webmaster*

Would you like to receive email notices informing you of any upcoming conferences, legislative initiatives, or health alerts pertinent to school nursing?

It's as easy going to NYSASN's website at <http://www.nysasn.org>, click on "Join our Listserve" and follow the instructions.

It's just another way for us to help keep you updated and informed.

We hope you'll consider signing on!

Exciting News! NYSASN Award for Excellence in School Nursing

By Rita Molloy, RN, Past President

In an effort to better serve our members and recognize the wealth of talented, outstanding and dedicated professionals that we represent, NYSASN has redeveloped our School Nurse of the Year Award. After input from our Zone representatives and a talented committee to include your NYSASN Executive Board of Directors, we are proud to announce this new honor. Zone representatives throughout New York State will be bringing back the details of this award at your Zone meetings. NYSASN will hope to acknowledge school nurses from across New York State on National School Nurses Day in May, as well as at our NYSASN Fall Conference. We plan to award certificates and pins to those candidates selected by the nurses in each Zone. I will be looking forward to the privilege of recognizing our honorees, along with our Zone Coordinator, Karen Cofino. Ask for nomination forms and further details from your Zone Representatives. Best of luck to all who are considered for this exciting new award!

Attention NYSASN Members: Charlotte Grace Memorial Scholarship

This is a wonderful opportunity for NYSASN members who are enrolled in advanced courses to apply for The Charlotte Grace Memorial Scholarship. It is a one thousand dollar (\$1,000.00) scholarship to use towards your educational costs. Up to two (2) scholarships are awarded each year at the fall NYSASN conference.

Eligibility:

1. Employment as a school nurse for at least three (3) years, with the intention of continuing in school nursing practice.
2. Membership in NYSASN for the past three (3) years (includes current membership year).
3. Thirty (30) credits completed towards a Bachelor degree, or fifteen (15) credits towards a Masters or Advanced degree, or enrolled in a Nurse Practitioner program.

The application can found on the NYSASN website, or you may request one by email. If you meet the requirements please consider applying now.

Questions may be directed to:

NYSASN Charlotte Grace Memorial Scholarship
c/o Suzanne Smith NCSN BSN RN
216 East Main Street
Sackets Harbor, New York 13685-0334
E-mail: ssmith@sacketspatriots.org

Deadline:

The completed application and transcript must be postmarked by October 15th, 2009 to be considered for this year's scholarship.

Fibromuscular Dysplasia

by Kari Ulrich, RN

A child comes into the nurse's office complaining that her tummy hurts; she is tired and has a headache. The teacher and her parents have noticed she is not eating that well. As a school nurse you hear these symptoms frequently. In some children, however, these symptoms are more than the typical stomachache. Such was the case with Jordan, who presented with the above complaints and was found to have a blood pressure of 290/150 mmHg. Jordan has a disease called Fibromuscular Dysplasia, or FMD. Looking back at Jordan's symptoms, would your nursing assessment have included a blood pressure check along with taking her temperature?

Fibromuscular Dysplasia is a non-atherosclerotic, non-inflammatory disease that usually affects medium sized arteries. Although many physicians consider FMD to be rare, it is most likely overlooked or misdiagnosed. Fibromuscular dysplasia typically presents with hypertension and on physical examination auscultation may reveal a bruit. FMD typically involves the renal and carotid arteries, although it can be present in most other vascular beds.

Three histological types of FMD are recognized and are characterized by which layer of the artery is predominately affected:

- Medial fibroplasia:** is characterized by its classic "string of beads" appearance which represents the most common type of medial dysplasia
- Intimal fibroplasia:** Most common form found in children¹ appears as a concentric band or a long smooth narrowing
- Adventitial fibroplasia:** Rare, accounts for less than 1% of cases

Renal and mesenteric involvement may be more common in children than in adults. Taking a few extra minutes to assess a child's vital signs including a blood pressure check could make an impact on finding this disease. Depending on which arterial bed is involved will depend on what symptoms if any a person will present with. Persons with FMD of the carotid arteries may present with dizziness, visual problems, tinnitus, neck pain, headaches, TIA or stroke. Persons where FMD affects the mesenteric arteries may experience nausea and vomiting that can lead to dehydration, abdominal pain and unintentional weight loss. FMD in the limbs may cause circulatory symptoms such as cold hands and feet, and pain with movement. FMD of the renal arteries may present with

hypertension even at a young age. There can be more than one artery involved with FMD.

The etiology of FMD is unknown. Several theories have been suggested as a cause of FMD such as genetic, environmental, hormonal and mechanical. The disease is more commonly seen in young women but it can affect men, children and in rare case infants. There are a few connective tissue disorders that may be associated with FMD, such as Ehlers-Danlos Type (IV) syndrome and Marfan syndrome.

The "Gold-Standard" for diagnosing FMD is by angiography. The appearance of the "string of beads" is most commonly found in young adult women. The "string of beads" appearance is caused by abnormal cell development of the arterial wall in which the cellular tissue becomes narrowed and dilated. Other diagnostic tests include ultrasound, MRI, MRA, and 3D CTA. Consideration must be made if using contrast materials in someone who has impaired renal function. If carotid artery FMD is present a MRA is warranted to rule out an aneurysm. When obtaining an ultrasound of the carotid arteries it is important that the technician be familiar with the disease. FMD of the carotids can be missed if the technician does not look high enough toward the base of the skull to view the distal carotid arteries.

Unfortunately there is no cure for FMD. At this time there is no established protocol for treatment of FMD. Treatment depends on which vascular bed is affected with FMD. Good control of blood pressure can usually be achieved by using antihypertensive medications. Some patients will need several medications to keep their blood pressure under control to prevent further damage to the kidney and loss of kidney function. Efforts to improve the blood flow to a severely stenosed artery are made by performing angioplasty otherwise known as PTA (percutaneous transluminal angioplasty). If angioplasty fails other options may include stenting and bypass, although these options are not usually recommended as primary treatment. Preventing an event such as a stroke or dissection from occurring is a key factor in this disease. Patients should be placed on daily aspirin for the anti-platelet effect; also blood thinners such as Coumadin maybe required. All treatment options should be discussed with the patient's physician. If an aneurysm is present careful monitoring must be established and if needed coiling or clipping of the aneurysm may be done. It is

continued next page

1. Meyers, Kevin E. C. MD & Sharma, Neha BA Cath Lab Digest 2007

Fibromuscular Dysplasia

continued

important for patients to work with their physicians to decrease other risk factors.

Thanks to the efforts of the Fibromuscular Dysplasia Society of America this disease has gained the attention of the medical community. Currently, FMDSA is working toward establishing an International Patient Registry. In June 2008 FMDSA held its first conference where patients and doctors came together to bring awareness and education to this disease. Both the American and National Stroke Association recognize FMD as a cause of stroke. FMD is listed on The National Organization of Rare Diseases.

Your assessment skills as a school nurse can play a critical role in the health care of a child with this disease and prevention of many other diseases. As nurses we must not minimize the important role of blood pressure screening as a tool we can easily utilize. Often, elevated blood pressure can be asymptomatic. Blood Pressure screenings in school age children can make an impact in disease prevention. FMD can strike young women, men and children and when left undiagnosed or mistreated it may be critical causing strokes, arterial dissections, loss of kidney function and sometimes death. Educating health care professionals is a start in preventing adverse outcomes in both children and adults with FMD. At a time when funding for school nurses is not a priority, and staff to student ratios are high, what seems to be a simple task of taking a blood pressure can be a challenge. With the help of School Nurses across the nation together we can make an impact on children's health.

For more information on FMD and FMDSA please visit our web site at www.FMDSA.org or write to us at FMDSA, 20325 Center Ridge Road, Suite 620 Rocky River, Ohio 44116. Membership to FMDSA is free.

Kari Ulrich is a Registered Nurse with both Pediatric and Adult Emergency Room experience; she is a FMD patient and currently serves on FMDSA Board of Directors

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SAVE THE DATE!

NYSASN Fall Conference
November 6 – 8, 2009

Watkins Glen Harbor Hotel, Watkins Glen, NY
WATCH FOR MORE DETAILS ON THE WEBSITE
www.nysasn.org

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Skaneateles, New York

August 16 – 20, 2009

These comments from attendees of the August 2008 conference attest to the quality and relevance of School Nurse Orientation.

"I thoroughly enjoyed every minute of this conference. It has given me so much knowledge."

"This conference was amazing. The speakers were all so dynamic and knowledgeable. It exceeded my expectations."

"The program and location were awesome!"

"Great conference. I feel confident for September 3rd. Thank you!!"

Are you or one of your colleagues new to the practice of school nursing? Be among the 1900+ school nurses in New York State who have completed School Nurse Orientation, a professional development conference that provides new school nurses with the 'best practice' fundamentals of school nursing. Join your registered professional nursing colleagues to review medication administration, screening procedures (including implementation of the new BMI regulations), emergency preparedness, physical examination, legal issues, communicable disease, students with special needs (IEP/504). Discuss school management of common conditions such as diabetes, asthma, anaphylaxis, mental health disorders, as well as learning tips of the trade.

Don't be left out. Look for further information and conference brochure on the NYSASN website (www.nysasn.org) starting February 2009.

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Continuous Glucose Monitoring

By Diane Lightfoote, RN, NCSN

One of the latest electronic tools for diabetics is the continuous glucose monitor (CGM). Several companies are now fine tuning the system but what is CGM?

The continuous glucose monitor is a small oval device, about the size of ½ a golf ball. It shows continuous “real-time” glucose readings. A spring loaded insertion device inserts 2 small glucose sensors (electrodes) subcutaneously. The electrodes produce a tiny current in the interstitial fluid. When the blood glucose level increases, the current increases and when the blood glucose level decreases, so does the current. Since the electrodes measure the current in the interstitial fluid, not the bloodstream, the person needs to know how to decipher the value. After the device is inserted, calibration is needed; a finger stick glucose level is obtained so the current value now corresponds to a glucose value. Calibration is critical to maintain accuracy of the device.

There are several advantages of the CGM. The person can easily note when the glucose levels are changing as it happens! The monitor has an alarm and can be programmed to alarm at specific levels. For example it can be set for 70; if the alarm sounds, the person knows his glucose level is low and needs to eat. In addition, setting the alarm for a high level will remind the person an insulin bolus was possibly missed or is needed. The device also monitors trends in the readings. The expectation is that the CGM's will help people maintain tight control of their glucose levels. Clinical studies have shown that people with CGM's are more apt to keep their glucose levels in the normal range. Glucose readings in the normal range means the risk of complications from diabetes should decrease.

There are a few disadvantages of CGM. There are only a few monitors available on the market, the CGM needs to be used in conjunction with finger sticks and insurance companies may not pay for the device.

Expect to see more about the continuous glucose monitoring system in the future.