

Advanced Registered Nurse Practitioner Care

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Official Newsletter of ARNPs United of Washington State

August 2013

Independent ARNPs Where Are You?

ARNPs United is working to assemble a list of independently practicing ARNPs of all specialties. At the beginning of June we had 25 ARNPs identified.

If you are in private practice please send an email to tracy@nurse.net and let us know who you are. If you know of a practice that's not yours please send that information as well. Thanks in advance.

NP Volunteer Medical Director Sought for North Mason High School

We are looking for a local ARNP with a sports medicine background and/or interest in sports and sports medicine who would like to partner with a high school athletic trainer at a rural high school in Belfair (North Mason High School). This individual would have the title of NMHS Medical Director; would be present for home football games; available for consultations via phone with the athletic trainer; assist with referrals; assist with baseline concussion testing and weekly/monthly site visits if/when possible; and have the ability to partner with a local school in the community to potentially bring in more patients to their clinic.

Rachael A. Joye, M.A., ATC, Head Athletic Trainer
North Mason High School, 360.271.6143

Seeking Board of Directors Members for ARNPs United of Washington State

We need your help. This October, at the Primary Care Conference, we will hold an election for a new board of directors. 4 BOD positions are open; the old board members have the option for running, as does every AUWS member. The bylaws call for 12 members on the BOD, with 4 of them serving as Board officers – President, Vice-President, Treasurer, and Secretary. The Chair of the Legislative Committee is automatically on BOD as well (Legislative Committee members meet separately.) Board officers are determined by the board at their January retreat. The term of the service for board members is 2 years. The time involvement is approximately 5-10 hours per month, as we have board meetings every 2 months (which can be attended via conference call) and subcommittee work based on your area of interest.

If you are interested, know someone you would like to nominate, or have any questions about this opportunity to serve Washington's ARNPs and their clients, please feel free to email tracy@nurse.net.

Miscarriage Management Training

Miscarriage Management Training Initiative: Providing Options for Women with Early Pregnancy Loss

Cardea is pleased to announce this conference for those interested in learning how to integrate miscarriage management into office-based services.

The conference will include a didactic covering all aspects of outpatient miscarriage management plus a hands-on session using papayas to practice uterine evacuation with a manual vacuum aspirator.

Friday, October 11, 2013 8:00 am to 12:30 pm
Location: Univ of WA South Campus Ctr, Seattle, WA

This event is provided by Cardea in collaboration with the UW Department of Obstetrics and Gynecology.

Upon successful completion of this CE activity 4 CNE contact hours will be awarded. AMA hours available.

Questions? Contact Cardea's Seattle office at 206.447.9538 or seattle@cardeaservices.org.

Athletes and Concussion: What The Fuss Is All About

By Cyd Marckmann

According to the Centers for Disease Control there are an estimated 1.7-3.8 million concussions per year (CDC, 2012). A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a fall or a blow to the body that causes the head and brain to move quickly back and forth (CDC, 2012). Common symptoms of a concussion include: headache, neck pain, nausea and vomiting, light sensitivity, sleep pattern changes, feeling "not like yourself", dizziness, problems with concentrating, memory problems, noise sensitivity, personality changes and fatigue. Football is in the press right now with the recent NFL lawsuits but bicycling and motor vehicle accidents as well as girls' soccer are also leading causes of concussions (CDC, 2012). The concerns with concussions are several. Especially in the young and adolescent brain, the brain is still being developed. There is a great deal that is not known about the effects of concussion on this development to include the cumulative effects of more than one concussion. Prolonged concussion symptoms including depression and learning difficulties necessitate that these athletes have healthcare advocates to monitor progress and help navigate the recovery process. Nurse practitioners as healthcare and prevention advocates are poised to be leaders in concussion management as well as educators for parents and com-

munities. With this in mind, here are very quick reference answers to common questions:

What can be done for prevention?

Currently there is no known 100% prevention for concussions however, wearing proper safety equipment including well-fitting helmets and mouth guards (to absorb the impact) are important. There are a number of sensors that are being developed to measure impact but no equipment is "concussion resistant". There is some data with core training, especially neck for football athletes to help decrease the force of the neck snapping forward then back (much like whiplash) that have good preliminary results for football but not studied in other sports.

Additionally, pre-screening athletes for risk factors, learning disabilities, history of headaches, balance problems can be invaluable to the healthcare team in assisting the athlete in identifying risk and aiding recovery. Students with a history of concussion are at higher risk for a subsequent concussion and while this does not preclude participation, may help the provider guide parents with participation concerns. There is research that athletes with ADD/ADHD are at a higher risk for concussion but this may be due to balance/coordination comorbidities and not ADD itself. Identifying athletes with coordination/learning/headache history prior to injury may also help the clinician differentiate between a head injury or not. For example, if a student has a history of headache and has a headache prior to game or practice, this most likely is not a head injury. Students with a history of migraine typically will recover slower from concussion than those without. If an athlete has dyslexia and cannot sequence letters/numbers prior to an injury, this is not a reliable screen for concussion. The CDC now recommends all athletes in high-risk sports be pre-screened for concussion so that the healthcare team has this health history available for review and intervention just like a pre-season physical exam. This can be accomplished with computer based testing such as IMPACT or paper/pen such as the SCAT 3 or NFL tool that is a modified SCAT 3 (available free from the Seattle Sports Concussion website below).

Probably the most important pre-season prevention that nurse practitioners can do is education. Teaching the athletes and parents about what a concussion is and why it is so very important to identify the concussion to remove the athlete from play immediately can be life-saving. Often parents and athletes are hesitant to report a concussion because they don't want to let their team down or miss play, however, it is well known that a second impact (a rapid second concussion) can kill or cause permanent brain injury. This is why Washington and 47 other states have laws mandating removing an athlete from play if a suspected concussion occurs. Un-

fortunately, often coaches and sideline personnel may not see an impact occur and must rely on the athlete themselves to report symptoms. Having the parents and athletes understand that this is not to penalize but a critical healthcare decision (like starting CPR) is paramount.

Are there a number of concussions that should keep an athlete from participating?

No, but maybe. There is no magic number of concussions that should force a child to stop playing sports but there is a great deal of research that concussion effects on the brain may be cumulative after the symptoms have subsided and it is widely accepted that kids who have had one or more concussions are more easily susceptible to subsequent concussions. With this in mind, the general rule of thumb is two or more concussions within a season should keep the athlete sidelined for the remainder of the season. Three or more concussions within a year should trigger the provider to have a discussion with the athlete and parents to stop playing high risk sports. The athlete can still participate in athletics but should switch to lower impact activities such as track, swimming (not water polo), tennis or golf.

What should athletes do to recover from a concussion?

Rest. They need to rest their brains that for some (especially teens) can be extremely difficult. This means no TV, texting, computer, video games, social media or driving. The more they are able to rest their brains, the faster the recovery. This means that they should be excused from testing and school assignments for at least 48 hours to rest. They may need to be excused from school entirely if symptomatic for headaches or dizziness. If they are taking PE in school, they absolutely should be excluded until after completing a return to play protocol. Acetaminophen should be used for headaches avoiding ibuprofen as it may act as a blood thinner (in the event of a subdural hematoma). Imaging such as a CT scan is not necessary unless the symptoms are prolonged or if there is concern for a brain bleed.

When should athletes be allowed to participate after a concussion?

There is no prescribed time before releasing an athlete as recovery times vary from person to person. The CDC and the International Consensus on Concussions recommend that the athlete be symptom free for a minimum of 48 hours then undergo a graduated exercise based return to play before being released completely. This includes participation in PE at school or any club sports they participate in. Concussion symptoms can get worse with exercise that shows that the brain has not adequately recovered. During a graduated exercise protocol, the athlete is increasingly stressed then tested for

return of concussion symptoms. Any return of symptoms demonstrates that the brain is not healed and needs further rest. The athlete is asked to rest for an additional 48 hours and the protocol is started from the beginning again. Typically this protocol can be completed by the athletic trainer and does not require an office visit as insurance does not usually reimburse for this testing. An athlete should never be released to full participation without exertion testing if at all possible. If no exertion training is available, care must be made that the athlete not have symptoms after exercise before being released (this may be weeks or months). When in doubt, sit the athlete out is a general rule of thumb. If an athlete has not had a reduction of symptoms (or has worsening symptoms) within 5 days and definitely by 2 weeks, it is reasonable to refer them to a concussion specialist such as the Seattle Sports Concussion Program.

Where can I learn more?

The CDC has a free online CME and resources (including downloadable material for parents) at:

<http://www.cdc.gov/concussion/headsup/clinicians.html>

The Seattle Sports Concussion program:

<http://www.uwmedicine.org/patient-care/our-services/medical-services/sports-concussion/pages/default.aspx>

Classified Ads

Office Space for Rent — Kent, WA

13 x 16 office space available immediately, rent negotiable. Great space for counseling or even a satellite office. Located next door to a well established Family Health Care Clinic. For more information contact Bob Smithing at 253.852.7723

Flexible Nurse Practitioner Opportunities Offering Work/Life Balance

UnitedHealth Group is proud to offer per diem, part-time, and full-time Nurse Practitioner opportunities throughout Washington with our House Calls program! You will have the freedom to set your own schedule and work remotely and independently. We often hear our Nurse Practitioners love their jobs because they get to spend quality time with patients discussing their individual medical histories, answering important questions, and sharing valuable educational information to better their health and well-being! Qualified candidates must have an active and unrestricted NP license in the state of Washington, certification in Adult, Family, Geriatrics, or Acute Care, and at least one year of clinical experience. Contact Kaitlin Osborn today at Kaitlin_Osborn@uhg.com / 952.936.3888 if you, or someone you know, have an interest in learning more!

CE Opportunities

Have a few hours available? Help cure breast cancer! Earn CEU's!

On September 20-22, 2013 The Susan G. Koman Breast Cancer 3 Day is coming to the streets of Seattle (exact locations still to be announced) and the Medical Crew is looking for volunteers for a few hours (or a few days) to help make the event successful. All you need

is a positive attitude, compassionate heart and an RN or ARNP license to participate. All training to be a team member will be provided prior to the event and most of the training can be done online. RN's who participate in all 3 days of the event can earn 27 CEU's. Medical crews are stationed every 3-4 miles along the 20 mile route each day to assist walkers along their journey as well as a larger facility at camp. Last year over 1200 bold walkers walked 60 miles raising over 4.2 million dollars; 75 percent of which directly go to fund breast cancer research projects (many of which are conducted here in the Seattle area) and 25 percent are used for local screening and outreach programs for the Puget Sound affiliate. This is an uplifting, inspirational event with many healthcare providers from around the state coming together to make a difference in the lives of walkers and those struck by breast cancer. Please feel free to contact the Medical Director, Cyd Marckmann, ARNP: arnpcyd@comcast.net or the Medical Crew Captain, Wendy Murchie, RN: Wendy.Murchie@seattlechildrens.org if you have questions. If you are ready to participate in the boldest breast cancer event ever contact Robin Shapiro: rshapiro@event360.com to get signed up

EPHT Online CE

Are you looking for some continuing education credits? Do you have an interest in environmental hazards and health outcomes? If yes, the CDC has a free online class available for nurses and nurse practitioners worth four CEUs.

Visit the [National Environmental Public Health Tracking Network \(EPHT\)](#) with the CDC to take the free online class "Tracking 101".

This course gives an overview of the major components of EPHT. EPHT is the ongoing collection, integration, analysis, interpretation, and dissemination of data on environmental hazards, exposures to those hazards, and health effects that may be related to the exposures. The goal of tracking is to provide information that can be used to plan, apply, and evaluate actions to prevent and control environmentally related diseases. CDC is currently leading the initiative to build a National EPHT Network, to integrate these three types of data into a standardized electronic network.

For more information about EPHT or the training, please contact the CDC Tracking Program: 1-877-923-TRACK trackingsupport@cdc.gov

UW Health Care and Social Work Certificates

Advance your skills, expand your network or earn contact hours and CEUs. UW Professional & Continuing Education offers the following certificate programs: Gerontology (online), Geriatric Mental Health (classroom), Medical Management (classroom), Psychological Trauma: Effective Treatment and Practice (online & classroom), Integrated Behavioral Health (online), and Infant Mental Health (classroom). Visit our website for full descriptions and start dates: www.keeplearning.uw.edu.

Pediatric Obesity Prevention in Primary Care FREE 1 hr AANP CE Opportunity:

Please allow me to invite you to complete an online CE program about: Pediatric Obesity Prevention in Primary Care

The program will take an hour or less, and has a research component/survey, so your participation is highly valued!

To access the program, please access the following link: www.unco.edu/nhs/nines/HesslerCEforWeb2011/HesslerCEforWeb2011.html

Service Ads

Guiding the Future... Love to teach...

Precept an FNP, ANP or PNP student!

Precepting involves 1 to 2 days a week for the 10-week quarter, Fall, Winter and/or Spring.

Preceptors needed for beginning to advanced students.

Contact Fiona Shannon, fiona@uw.edu for more information on pre-

cepting University of Washington students.

Interested in Mentoring the Next Generation of ARNPs?

Pacific Lutheran University in Tacoma, WA is looking for preceptors in the south Puget Sound area for the Family Nurse Practitioner program. Your commitment requires a minimum of 1 day a week for a semester. We need preceptors Fall (Sep to Dec), Spring (Feb to May) and Summer (May to August) semesters. If interested, please contact Dr. Lorena Guerrero at guerrelc@plu.edu or call (253) 535-7374.

Meetings

Puget Sound Nurse Practitioners Association

Join us! Puget Sound Nurse Practitioners Association is a non-profit organization supporting ARNPs in Puget Sound since 1998. We meet every other month and offer a social hour/networking and a speaker presentation.

Annual dues are \$40/\$20 for students. \$20 per meeting for guests. Apply for membership and find meeting information at <http://PSNPA.org>

West Sound Advanced Practice Association

Meets the second Thursday of the month. Meetings include networking/dinner/educational session. E-mail Fionafnp@centurytel.net for more information.

Ad Information

Copy deadline is the second Tuesday of the month prior to publication. Ads may be accepted later than this on a space-available basis. Position Available and Continuing Education Ads of less than 66 words are \$45, of 66 to 130 words are \$75, 131-180 words are \$105, and greater than 181 words are \$175. Position Available Ads are priced

per insertion. Continuing Education Announcements are per offering for up to three (3) consecutive insertions. New Product Announcements per product for one insertion of 130 words or less are \$75, more than 130 words are \$175. Ad Inserts are \$750 for one issue. All ads are subject to space limitations and editing. Call for detailed rate information. Mail copy to ARNP Care, 10024 SE 240th St, #230, Kent, WA 98031. Phone 253.852.9042. Fax 253.852.7725. Email care@nurse.net.

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Photograph of the Month



Washington ospreys are remodeling their nest. (Photo by Bob Smithing)



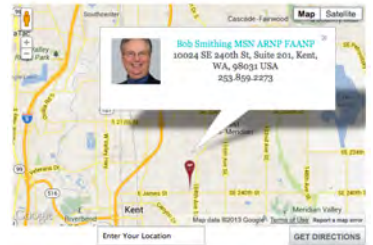
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Launch of the National Nurse Practitioner Directory

Kent, WA: Bob Smithing, MSN, ARNP, FAANP & Maddy Wiley, MSN, ARNP, FAANP **announce the launch of NPDirectory.com** a resource for finding nurse practitioners in the US and Canada. Designed to help consumers to find a nurse practitioner for their care and to help nurse practitioners connect with consumers. The service is **free to nurse practitioners of all specialties** who are interested in having patients find them in their practices.

Currently the site is in Beta testing and all NPs are invited to give it a try. Those who have previously been listed in the directory NPclinics.com are in the process of being moved over.

Regardless of specialty or organizational affiliation **all nurse practitioners and other APRNs are welcome to be listed**. As you know, nurse practitioners are the best-kept secret in healthcare and NPDirectory.com is going to help change this. If you're a patient who wants to see a nurse practitioner you have a hard time finding us wherever you look.



Have you ever tried to refer a patient to a nurse practitioner (including CNM or psychiatric NP) in another state? Tough doesn't begin to describe it. Even people with a national network of NP contacts have trouble making these referrals.

We stand on the verge of the largest marketing push ever done by NPs, but when patients go to find an NP where will they look? Do you want potential patients to be able to find you? Do you have a specialty practice and want other nurse practitioners to find you? How can consumers demand access to your care if they don't know you are there?

So, what's a Nurse Practitioner to do? **List yourself and your practice in the National Nurse Practitioner Directory at NPDirectory.com. It's so inexpensive (FREE) that you can't afford not to be listed.** For NP Business owners who want to highlight their practices there are two paid upgrade options that let you get more information to consumers who are looking for you.

The National Nurse Practitioner Directory is located at npdirectory.com. An easy to remember web address that you can give to your patients, friends and family. It's always up-to-date because you can update your listing any time, 24/7.

Consumers look for health related information on the Internet. Make it easy for them to find a nurse practitioner. Get your practice listed today. **Go to www.npdirectory.com and add your directory listing. Then get at least one other NP to join as well.** There is power in numbers and at the moment we've been divided and hidden, but not any more!

The National Nurse Practitioner Directory is sponsored by NP Central (www.npcentral.net & www.npjobs.com). NP Central was the first web site for NPs. It is a non-profit, NP run, business promoting nurse practitioners since 1994.

Basic Listing: **Annual subscription is FREE**

Please share this information with other nurse practitioners, consumers and most importantly take a moment to



Join Today! NPDirectory.com