

SCR

14

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: _____
 Bill Version: SCR 14
 () Publish Date: _____

Identifier (file name): _____ Dept. Affected: _____
 Title SCR 14 PERIANESTHESIA NURSES WEEK: FEB 2008 RDU _____
 Component _____
 Sponsor Senator Green Component Number _____
 Requester (S) Health, Education and Social Services Committee

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING		0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
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CHANGE IN REVENUES ()								
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2008) cost: _____

POSITIONS

Full-time								
Part-time								
Temporary								

ANALYSIS: (Attach a separate page if necessary)

Prepared by: SENATE HEALTH, EDUCATION & SOCIAL SERVICES COMMITTEE
 Division: _____
 Approved by: /s/ Senator Davis, Chair

Phone 465-3822
 Date/Time 3/12/08 12:00 AM
 Date 3/12/2008

Don Burrell

From: Ginger Blaisdell
Sent: Wednesday, March 12, 2008 9:37 AM
To: Don Burrell
Subject: Emailing: Welcome To ASPAN

**ASPAN**

American Society of PeriAnesthesia Nurses

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PeriAnesthesia Nurse Awareness Week (PANAW)

February 4 - 10, 2008

PERIANESTHESIA NURSING focuses on the care of patients undergoing surgery and invasive procedures that require sedation, analgesia, and anesthesia. To practice perianesthesia nursing, specialty nurses must have comprehensive knowledge and competencies that are grounded in perianesthesia-specific scientific theory. Because of the expertise and dedication of the perianesthesia nurse, each year during the first full week of February, PeriAnesthesia Nurse Awareness Week (PANAW) is celebrated. Do your part in getting the word out about perianesthesia nursing by supporting the efforts of ASPAN during PANAW.

PANAW Resources

[2008 PANAW Promotional
Items Catalog](#)

[Working with the Media](#)

[How to obtain a Proclamation](#)

[2008 Proclamation](#)

[2008 PANAW Press Release](#)

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From: Ginger Blaisdell
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ASPAN

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ASPAN's Core Ideology

✿ CORE PURPOSE ✿

To advance the unique specialty of perianesthesia nursing.

Core Values

Honesty, truthfulness, fair, pride, respect, diversity, ethical, stewardship, mentoring, passion and family/community.

Value Discipline

ASPAN's image, reputation and identity of excellence must become that of eminent influence. The association will be branded as being the leading advocate and spokesperson for perianesthesia nursing.

ASPAN's Envisioned Future

Big Audacious Goal

ASPAN will be recognized by the healthcare community worldwide as the leading organization for perianesthesia nursing education, practice, standards and research.

Goal Descriptions

- A. ASPAN will be its members' indispensable resource for perianesthesia education and knowledge exchange worldwide.
- B. ASPAN will be the influential force for perianesthesia patient safety, public policy and practice standards.
- C. ASPAN will be recognized voice and source of perianesthesia information to the public.
- D. The art and science of perianesthesia nursing will be advanced through ASPAN's evidence-based practice and research activities.

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ASPAN Facts

The American Society of PeriAnesthesia Nurses (ASPAN) is the professional specialty nursing organization representing the interests of more than 55,000 nurses practicing in all phases of preanesthesia and postanesthesia care, ambulatory surgery, and pain management.

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CORE PURPOSE

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Historical Information

From Fifty Years of Progress in Postanesthesia Nursing, 1940-1990

In 1980 the American Society of Post Anesthesia Nurses (ASPAN) was born of the need for education specific to perianesthesia care. ASPAN has continued to prosper with membership over 5,600 in 1989. Through ASPAN other avenues of growth have occurred which include a bimonthly journal devoted to perianesthesia nursing, a bimonthly newsletter, annual conferences, and an opportunity to become certified in this specialty of nursing.

FOUNDING DIRECTORS:

Margaret Bailey, RN
Maine

Jovita Keane Gilligan, RN
Ohio

Mary Lou Barnett, RN
Minnesota

Anita Kay Kubin, RN
Texas

Elaine Brown, RN
Arizona

Jeanne R. Maher, RN
Illinois

Charlene Cusick, RN
Michigan

Coleen C. Meyer, RN
Kansas

Marie A. Darcy, RN
Florida

Ina F. Pipkin, BSN, RN
Washington

Alma Derway, RN
Connecticut

Mary Ruzzovan, RN
California

Jane H. Dillon, RN
New York

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Maryland/D.C.

Betty Elliot, RN
Alabama

Mary Ann Seinar, RN
Pennsylvania

Hallie J. Ennis, RN
Oklahoma

Marge Wareham, RN
New Jersey

Judy Ferrey, RN
Georgia

PACU Progress in the ...

1940s

1970s

1950s

1980s

3/12/2008

1960s1990s**PACU Progress in the 1940s**

The birth of Post Anesthesia Care Units (PACU, formerly known as Recovery Rooms) in the 1940s was the result of the necessity to centralize patients, equipment and personnel for the immediate and efficient postoperative treatment required. More extensive and complicated surgeries were being performed and the need for adequate and more detailed postoperative care increased. Surgery patients were cared for postoperatively in all nursing areas of the hospitals. During these years the medical and nursing staffs were at a minimum and most hospitals were not blessed with an abundance of equipment. To combat these problems, it was deemed necessary to introduce an area with specially prepared nurses to care for the newly operated patient.

PACU Progress in the 1950s

The 1950s ushered in an era of great progress in PACUs. Many hospitals realized the necessity for larger and more efficient facilities. This resulted in remodeling of the older units and special planning for the units in the construction of new hospital buildings. New "respirators" and blood pressure manometers were perfected and purchased by the more aggressive administrations.

At the close of the decade the need for increased staff was being addressed by administrators, and nurses were searching for more sources of education specific to their specialty.

PACU Progress in the 1960s

The 1960s were a time of growth and change within the postanesthesia arena throughout the country. Conceptually, postanesthesia rooms had been incorporated in most hospitals by 1960. It was apparent that these areas should be in close proximity to the operating suites.

PACU Progress in the 1970s

The decade of the 1970s was one of modernization and mechanization of both hospitals and their PACUs. More monitoring devices were introduced and computers were coming into use in some phases of hospital procedures, especially in the business office. Bed capacity increased markedly.

With the increase in PACU beds came increases in nursing staff and in many instances an increase in the number of hours the PACUs were open for patient care. The 1970s were years of rapid invention and manufacture of monitoring equipment of all varieties. Plastic and disposable items proliferated, making some aspects of PACU nursing easier.

PACU Progress in the 1980s

By the early 1980s exciting things were appearing in PACUs. New equipment and technology to improve patient care were being introduced. Computers were being installed and utilized in 23 of the 39 hospital PACUs questioned in one survey. Monitoring equipment was becoming an important adjunct to meeting standards of care. Forty percent of all PACU patients were being monitored with ECG monitors. Monitors with the ECG were most often used, followed closely by invasive monitoring systems.

Quality Assurance (QA) and the ASPAN Standards of Perianesthesia Nursing Practice were important as hospitals were becoming aware of the importance of risk management. Thirty-seven hospital PACUs utilized QA Programs and 32 utilized the ASPAN Standards of Perianesthesia Nursing Practice. Although care plans were available, many PACUs had not initiated these.

Ambulatory Surgery services were being established more frequently in the early 1980s as an alternative to the expense of inpatient surgery. Thirty-seven [hospitals] stated that the usual stay for the outpatient was one hour. The Ambulatory Surgery service was a separate department in 32 of the hospitals responding to the survey.

Into the 1990s

Since 1980, postanesthesia care of patients has vastly improved. Equipment has been updated to give the most accurate findings by using noninvasive and invasive monitoring. Nurses have been a part of the decision making team for purchase of equipment for their units. Input of the perianesthesia nurse is sought and equipment made to perianesthesia specifications.

Increasing numbers of hospitals use the ASPAN Standards of Perianesthesia Nursing Practice. As more practicing perianesthesia nurses learn about the American Society of PeriAnesthesia Nurses, more nurses will use the Standards.

Benefitting health care, computers have been incorporated into the hospital and ambulatory surgery setting. In the future, nursing paperwork will be converted to computer data systems, allowing nurses more time with patients and their families.

As the 1980s ended, more outpatient surgical procedures were performed, increasing PACU and ASU patient cases per day. Ambulatory surgical centers are an integral part of the health care system. Nurses who work specifically with outpatients are supported by ASPAN. These ambulatory surgical nurses share many of the concerns of nurses working with inpatient perianesthesia patients.

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ANALYSIS: (Attach a separate page if necessary)

Prepared by: SENATE HEALTH, EDUCATION & SOCIAL SERVICES COMMITTEE
 Division: _____
 Approved by: /s/ Senator Davis, Chair

Phone 465-3822
 Date/Time 3/12/08 12:00 AM
 Date 3/12/2008

SENATE COMMITTEE REPORT
First Committee of Referral

DATE: 1/18/08

FURTHER:

Date of 5-Day Notice: _____
(in accordance with Uniform Rule 23)

DATE TURNED
IN TO OFFICE: 3/13/08

Health, Education and Social Services Committee considered SENATE CONCURRENT RESOLUTION NO. 14

SCR 14 PERIANESTHESIA NURSES WEEK: FEB 2008

Proclaiming February 4 - 10, 2008, as Perianesthesia Nurses Week.

and recommends:

be replaced with SCS or CS _____ ()

adopt previous SCS or CS SCR 14 ()

attached amendment(s)

adopt _____ Letter of Intent

further referral to _____ Committee

SENATE BILL:

- Same Title
 New Title

HOUSE BILL:

- Same Title
 Technical Title Change
 New Title w/
SCR # _____

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet	Zero	FN#
DHSS	3/12/08			✓	

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet	Zero	FN#

APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS:	PRINTED LAST NAME	DO PASS	DO NOT PASS	NO REC	ABEND
	Elton	✓			
	Thomas	✓			
	Conderby	✓			
CHAIR: <u>Bettye Davis</u>	DAVIS	✓			