

SCANNNews

Volume 13, Issue 3

Winter 2005

Calendar

- **Happy Holidays**
- **Happy New Year**
- SCANN Meeting
January 9th
Cancelled
- SCANN Meeting
March 13th 6 to 8 pm
Site TBA
- **March of Dimes
WalkAmerica®
April 22nd**
Cannon Park, Carlsbad
April 29th
Balboa Park
- SCANN Meeting
May 8th 6 to 8 pm
Site TBA
- **Happy Nurses Day**
May 6th

SCANN Officers 2005

President
Leilani Marino RN AS
Sharp Mary Birch
Hospital for Women

Secretary
Lourdes Ibadlit RN BSN
Palomar Medical Center

Treasurer
LCDR Stacia Fridley MS
CCRN CNS
Naval Medical Center

Message From Leilani...

Incredible! Another year flew by sooner than many of us were ready to have happen. Let's look back at the SCANN's happenings in 2005: Bimonthly meetings, March of Dimes walk, and our annual conference at the Hilton Torrey Pines.

Ross Pediatrics corporately sponsored Terry Johnson, MN, RNC, ARNP – our conference evaluations had an overwhelming, positive response to Terry's two lectures! Rick Schwering has agreed to bring her back for our 2006 conference. Rick must be commended for his professionalism in supporting our conference and deferring his speaking time back to our nurses. He also had Ross Pediatrics sponsor the Hospitality time at the end of the conference – the overall milieu of this conference provided a type of pampering each nurse deserved who attended this day.

Mead Johnson kindly sponsored Dr. Michael Fitzgerald – his first talk was so well received that we looked forward to the afternoon lecture having a similar interaction. Unfortunately, as our Conference Evaluations showed, he belabored the "10 minute DHA presentation" and we lost the benefit of his second presentation. It was

clearly understood after his presentation that this was disrespectful to each of you who were looking forward to what our syllabus stated – he extended his apologies and asked to return in the future, with the understanding he would stick to his agreement of our time commitments for nursing presentations.

Dr. Carbine's presentation on Neonatal Abstinence Syndrome and Dr. Vaucher's Expectation and Neurodevelopmental Outcomes in VLBW Infants were also well received.

Overall, each year's conference needs volunteers to give of their time for its success. This year was no exception – I thank each person who helped throughout the year and on the day of our conference. The evaluations complimented SCANN for the new site, topics, presenters and delicious food!

In closing our conference notes, our gratitude is also extended to the sponsors and vendors whose support allowed us to increase the benefits of our educational opportunities.

Election of officers: We encourage each of you to consider coming on board as an officer – we need to fill the position of Secre-

tary. Unfortunately, our current Secretary, "BooBoo" Ibadlit, had an unexpected medical diagnosis that took her away from us. However, she continued to fulfill her role up to our last meeting in September. The expectation is to attend each of our bimonthly meetings, provide an agenda and take meeting minutes – it's several hours every other month – we'd appreciate having you join our team. Also, the office of Past-President will remain open at this time since I'll stay on board to train our incoming President-Elect, Cat Buzzard. Please consider coming on the Executive Council next year. SCANN needs your support of time in order to remain a viable organization – please consider your professional volunteering within our organization. It can only be sustained by those of you who are the lifeline to this special field of nursing. Please submit your name to one of the current officers or nominate someone you believe is qualified.

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Neonatal X-Rays

Palomar Medical Center hosted SCANN's July meeting. Dr. David Golembeski, Neonatologist, presented Neonatal X-Rays.

Our patients are tiny and can deteriorate rapidly. They have some unique conditions such as RDS, CLD, NEC, and congenital anomalies. X-rays provide rapidly available, valuable clinical information. Interpretation of any radiograph needs to be in the context of all clinical information available (history, physical exam, lab work).

Dr. Golembeski reminds us to "look at the whole film". Bones: look at the clavicles and humerus for periosteal reactions, breaks or irregularities. Neck: examine the area for evidence of masses, such as subcutaneous emphysema (seen as dark



or light stippling or linear dark streaks). Ribs: should be 12 sets; look at their shape; are they intact?. Diaphragms: should be similar on both sides and dome shaped; the right diaphragm is usually one vertebral body higher than that of the left. A good inspiration will put the diaphragm around T8 or T9. Abdomen: the stomach bubble should be present on the left and the liver on the right.; look at the size of the stomach bubble and the gas distribution in the bowel. Cardiac silhouette: look at the shape of heart, the apex, the borders; look at the position. Trachea: usually deviates to the left. Hilum (root) of the lungs: the blood vessels (vascularity) that supply the lungs can be seen; increase pulmonary vascular markings are seen with congenital heart defects

such as TGA, HLHS, TAPVR, PDA, VSD, ASD, AV Canal, and Truncus arteriosus; decrease pulmonary vascular markings can be associated with defects such as Pulmonary or Tricuspid atresia, and Tetralogy of Fallot. Bronchi: usually can't be seen beyond the hilum because they are filled with air but may visible (air bronchograms) with RDS, pneumonia and aspiration syndromes when there is fluid densities in the lung.

Dr Golembeski showed us numerous films as a teaching tool, focusing on pulmonary and GI pathology. We also had a chance to show our x-ray reading skills in "You Call It..."

Nurses are the most important part of obtaining a quality radiograph while providing safety and causing minimal "trauma" for the neonate.

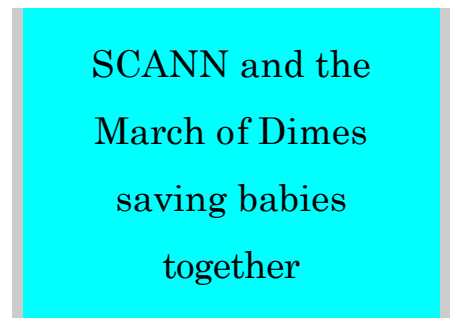
Community Service...March of Dimes WalkAmerica®

Mark your calendar...the March of Dimes WalkAmerica® will take place on Saturday, April 22 at Cannon Park, Carlsbad and on Saturday, April 29 at Balboa Park. The walk in Carlsbad is a little over 3 miles; the walk around Balboa Park will be about 5 miles. Join SCANN for our 15th year supporting the March of Dimes by participating in WalkAmerica®.

The "usual" SCANN walkers have elected to walk at Cannon Park (some of us are unable to walk on the 29th); please join us or get a group together and walk at Balboa Park (we've done this before).

Last year SCANN raised \$2,665; let's try to top that. SCANN donates an additional \$0.10 for every dollar our walkers raise.

Look for more info on our website or watch your mail.



Message From Leilani (cont'd)...

I would like to take this opportunity to thank the following: Meena Walser, Past President; Lourdes "Boo Boo" Ibadlit, Secretary (our continued thoughts are with her as she continues to heal from breast cancer surgery); Myreda Erickson, former President-Elect (best wishes in your new endeavor); volunteers: Maida Advento-Castillo, Lynn Angeles, Stephanie Boyd, Cat Buzzard, Briana Martinez, Erika McKnight, Jennifer Meis-

berger, Ellen Milan, Effie Tolato, Bill Hamer and Stefanie Moffat. Without these individuals this year, SCANN could not have accomplished all it did in 2005.

We had to cancel our meeting in January but we'll be reconnecting in March - please visit our website, www.neonatenurses.com or watch your mail for our newsletters and flyers for upcoming meeting information.

Thank you for continuing to support SCANN and I look forward to seeing you all in the coming months. The gift of your hands and knowledge of neonatal nursing is truly a privilege for each baby and family you touch.

With much aloha,
Leilani Marino,
SCANN President

Non-Contentious Medication Controversies

Sharp Mary Birch Hospital for Women hosted SCANN's September meeting. Jason Sauberan, PharmD presented Non-Contentious Medication Controversies in the NICU.

One of the controversial and non-contentious drugs discussed was caffeine.

Methylxanthines (aminophylline, theophylline and caffeine) have been used for more than 30 years to treat apnea of prematurity. They are among the most commonly prescribed drugs in the NICU, but is caffeine (the preferred methylxanthine, because of its wider therapeutic index) effective and safe?

Randomized trials of caffeine use in premature infants have been small and focused only on short-term benefits and effects. Trials included both placebo controlled and various drug doses.

Caffeine was shown to decrease the number of apnea episodes in one placebo controlled study presented (69%

of caffeine treated infants had a $\geq 50\%$ reduction in events vs. 43% of placebo). The trial included 10 days of treatment; 10 mg per kg loading dose; 2.5 mg per kg per day maintenance dose. The reason for the high percentage of placebo infants with $\geq 50\%$ reduction in the number of apneas is unclear. It may be impossible to identify those who will improve without pharmacologic intervention. There was no clinically significant difference seen in the # and % of adverse events between the 2 groups.

Two studies presented looked at the efficacy of caffeine in facilitating extubation, decreasing the duration of mechanical ventilation and the number of apnea episodes post extubation. These were not placebo controlled, but evaluated various doses of caffeine (30 mg vs. 15 mg vs. 3 mg [caffeine base] per kg loading dose followed by 1/2 the loading dose every 24 hours x 7 days; 40 mg vs. 10 mg [caffeine base] per kg loading dose, then 10 mg vs. 2.5 mg per kg per day). The trial evaluating 30 mg vs. 15 mg vs. 3 mg dosing did not dem-

onstrate a statistically significant difference in the proportion of infants "successfully" extubated, though there was a trend to a benefit in the 30 and 15 mg per kg groups. The trial evaluating 40 mg vs. 10 mg per kg dosing showed that the higher dose was more effective in facilitating extubation, decreasing the duration of mechanical ventilation (in the <28 wk subgroup) and reducing apnea after extubation. Both studies showed no statistical significance in regards to adverse effects and morbidity.

Adenosine is neuroprotective during ischemia and methylxanthines act as non-specific inhibitors of adenosine A1 and A2a receptors. Recent and rapidly growing research into the actions of adenosine and its receptors raise concerns about the safety of methylxanthine use in the very premature infant. Caffeine for Apnea of Prematurity (CAP), an international, randomized, placebo-controlled trial started in 2000, will look at whether xanthine therapy affects growth, neurological development and childhood behavior.

It's Time to Renew Your Membership...

It's time to renew your membership. Find a membership application in this newsletter. If you joined SCANN or renewed your membership with your conference registration this past November...Welcome! Your membership is current through December 2006.

Support your local professional neonatal association, share your expertise

and experiences, and network with colleagues. Get 5 free contact hours, a discount for our popular annual full-day conference, and 3 newsletters each year.

Watch your mail or check our website for information about our March 13th SCANN meeting sponsored by Byron Patel and MedImmune.

Community Service... Grocery Gift Cards

Grocery gift cards, are an easy way to help others while we're doing our own shopping. Pick up a \$5 or \$10 grocery card when you're doing your family shopping. Bring the cards to each SCANN meeting and at the end of the year we'll donate them to families in need.

Please help us choose where the gift cards collected in 2005 will go.

NANN's
22nd Annual Conference
Neonatal Nursing Excellence
Growing and Knowing
November 8-11, 2006
Nashville, TN



Don't Forget to Pick
up a
Grocery Card

Mark Your Calendar...

SCANN Meetings 2006 (Site and topics TBA)

January 9th cancelled

March 13th

May 8th

July 10th

September 11th

SCANN's 12th Annual Conference

November 6 (date subject to change due to NANN conference)

SCANN meetings are held on the second Monday of every other month
(beginning with January), from 6 pm-8 pm.

Dinner is provided, please RSVP to the contact number (to help with a food headcount in advance...forgot to RSVP?...no problem, you're still welcomed to attend).

For up-to-date information about SCANN activities visit our website:

www.neonatenurses.com

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