NEWS

AAOHN
Advancing the Profession of Occupational and Environmental Health Nursing

From the President's Desk

Dear Members,

Your 2014 National Conference was a smashing success! There were numerous praises for the quality of the speakers and the opportunities for networking. During the business meeting, several questions were asked that I would like to communicate to all members. The first was about the potential for raising or reducing dues for people working part-time. Financial stability is a major responsibility of your Board. The cost and value of membership dues is always on the forefront of discussion. AAOHN has not had a dues increase for 14 years. Although the organization is on the road to financial recovery, we can never let our guard down. With the challenging financial climate in which we live, this Board has no intention of raising your dues. Instead, we continue to seek ways to deliver member services in the most efficient and cost effective manner. We have also explored the possibility of reduced dues for those working part-time. In order to do so and be fair to all members, we would need to reduce services to those individuals. At this time, we do not feel that is a feasible option.

The next comment was about the financial stability of AAOHN. As we have learned, a sustainable organization positions itself with adequate reserves to cover a defined period of operational costs. The goal for AAOHN is to have a reserve equal to 50% of operating expenses for 2014. We have met this goal by placing $750,000 into a long-term investment account. This gives us a 98% net operating reserve, placing us in a solid financial position. Although this may seem a considerable amount of money, these funds should provide the membership with financial peace of mind for the organization.

The newly published *Fundamentals of Occupational and Environmental Health Nursing: AAOHN Core Curriculum, 4th Edition*, was unveiled at conference. A BIG thanks goes out to Annette Haag for her generosity in covering a substantial amount of the publication costs! For the first time, AAOHN served as the publisher for this extensive publication through the services and talents of Pam and Roy Moore, who served as editors. With the help of 54 contributors, this resource provides us with current evidence-based practices and a global perspective using a narrative format. The *Core Curriculum* is available for purchase on the AAOHN website or by contacting the AAOHN office.

In closing, I would like to remind you that the 2015 conference will be held a bit earlier than in the past. The conference will be held in Boston, March 23-26, 2015. We will also be celebrating the 100th anniversary of the Northeast Association of Occupational Health Nurses. The theme is "Reimaging AAOHN: Honoring Our Roots to Secure Our Future." As a result of the timing, please note that all deadlines, such as abstract submissions, award applications, and even our election process will be scheduled earlier than normal. Please watch for announcements about these earlier deadlines.

As always, thank you for all the work you are doing. I truly appreciate the communications you send my way. Let's keep those lines of communication open.

Pam Carter

Pam Carter, RN, COHN-S, FAAOHN
AAOHN President

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AAOHN 2014 National Conference in Review

The AAOHN 2014 National Conference took place May 5-8, 2014 in Dallas, Texas.

AAOHN President Pam Carter gives the opening address.

AAOHN members, Judy Ostendorf, MPH, RN, COHN-S, CCM, FAAOHN, and Pat Clapp, RN, ANP-C, COHN-S, FAAOHN, served as reporters covering keynote presentations. The fantastic line-up of keynote speakers included Dan Buettner, Mary Salazar, Linda McCauley, and more. Read the summaries of the general sessions on aaohn.org. Dozens of other sessions, preconference workshops, networking receptions, and the annual business meeting also were a part of the conference.

Jill Kelby, PT, CEA, Senior Ergonomist and problem-solver for Kelby Ergo Design, was a first-time attendee this year. "I was very impressed with everything," Jill says. " I stayed through the majority of the conference, since several topics appealed to me. I've been to many different conferences, and this was definitely one of the better ones."

The 2014 AAOHN lapel pin.

We'll continue to share more from conference in upcoming issues of *AAOHN News*.

If you missed this year's conference, start planning now to join AAOHN in Boston March 23-26, 2015 so you don't miss a minute of the learning, idea-sharing, and networking event of the year!

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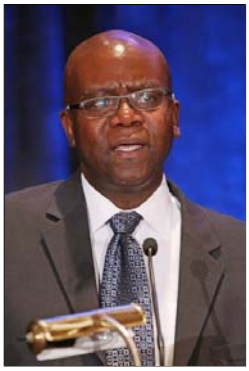
AAOHN 2nd Global Summit in Review

Attendees of the 2014 Global Summit in Dallas, Texas.

AAOHN hosted the 2nd Global Summit May 4-5, 2014 in Dallas, Texas, USA. From the opening and welcome by AAOHN President Pam Carter to the last session, this Global Summit proved to be a rich source for disseminating state-of-the-art OHN research and provided an invaluable environment for participant networking. The AAOHN Global Summit Planning Team organized the 2-day program that was true to the event theme, "Occupational Health Nursing Across Borders: Fostering a Global Culture of Health." The roster of international faculty and summit attendees included brilliant OHNs in academia/research, governmental entities, and major corporate practice settings from around the world.



Dr. Eric Bing, Director of Global Health at the George W. Bush Institute and author of Pharmacy on a Bicycle

Occupational health nursing experts from five of the world's seven continents were in attendance, including Africa, Asia, Europe, Australia/Oceana, and North America. More than 80 participants and 26 faculty representing 15 countries were in attendance. Specifically, summit participants came to Dallas from Nigeria, South Africa, Tanzania, Philippines, Australia, New Zealand, Japan, Germany, Ireland, Hungary, Pakistan, Thailand, United Kingdom, Canada, and 23 US states. This diversity fostered spirited dialogue and provided a broad range of insights regarding culturally sensitive best practices in occupational health.

Dr. Eric Bing signing copies of his book, Pharmacy on a Bicycle, *at the 2014 Global Summit.*

Individual speakers and expert panels presented a wide array of topics including, but not limited to, the following:

The history and evolution of Occupational Health Nursing education and practice in South Africa, England, Hungary, New Zealand, and Japan.

Global trends in the epidemiology of diseases that arise in unique environments and spread around the world through travelers and other vectors, such as food products and even wild animal migration.

Best practice models for protecting employees, their family members, and communities when travel is needed to conduct international business, including being alert to trends in contagious disease prevention through immunizations, early diagnosis, and treatment.

Cultural issues to be considered by OHNs when designing health and safety strategies for vulnerable populations.

Synopses of individual Global Summit sessions are available online for your review.

The Global Summit was designed to seamlessly blend into the AAOHN 2014 Conference, which began May 5. Global Summit faculty is encouraged to submit materials in manuscript form for publication in AAOHN's *Workplace Health & Safety* journal.

Mark your calendars to attend the 3rd AAOHN Global Summit in 2017!

Norman Brown, EdD, MPH, RN, APN
Association Editor for Global Practice, *Workplace Health & Safety*

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From the AAOHN Foundation

It's hard to believe that we are already in the month of June. Spring is in full bloom, and the summer season is just around the corner. The National AAOHN Conference has come and gone and we have already begun preparing for the next conference, to be held in March, 2015. Please make a note in your personal calendars that the 2015 conference will take place in Boston, Massachusetts March 23-26, 2015, with the pre-conference scheduled for March 21-23, 2015. The theme is "Reimaging AAOHN: Honoring Our Roots to Secure Our Future." We will also be celebrating the 100th Anniversary of NEAOHN.

While in Dallas, brainstorming took place at the AAOHN Foundation Board Meeting. The results from the brainstorming session brought new fundraising opportunities for all of us to work toward this coming year. We have a lot of hard work ahead of us and need your help in making this happen. As a gentle reminder, the purpose of the fundraising activities is to ensure that ample funds for professional development scholarships and research grants are available for our healthcare professionals. These grants ensure that they may focus on improving the health and safety of the nation's workforce.

The fundraising strategies this year, as set forth by the Foundation Board, include the following:

1. Employer Matching Funds with contributions given by individuals.
2. Coffee Campaign—Developing a fun campaign for individual donations. The Foundation Board is working on this for the 2015 conference, so watch for marketing to begin in early 2015. *Do you have experience doing such a campaign or know someone who does? Just let us know!*
3. Chapter Solicitation—Chapter donations to the AAOHN Foundation.
4. Silent Auction—Raised monies toward scholarships for our membership. We need donations prior to the annual National Conference.
5. Commemorative Pins—Each year, the pins get more creative. Texas did an outstanding job with their support in garnering donations for the 2014 pin.
6. Planned Giving—Annual contributions or funds left in a will. A webinar on this topic is planned for later in the year.
7. Annette Haag Annual Giving Campaign to assist with growth for our scholarship base.
8. Giving "in honor of" and "in memory of" to build the Legacy Scholarship foundation.

For the last several years, the AAOHN Foundation has been reminding the membership what we are all about, what services we provide, and why your contributions are so important. The Foundation acts as both a vital source of funds and a stimulus for substantial work to solve today's worker health and safety issues. Supporting the Foundation's fundraising activities ensures improvement in the health and safety of the nation's workforce and a bold, visionary expansion of resources for occupational and environmental health professionals.

I am asking each of you to please support the AAOHN Foundation with a contribution. Please go to http://www.aaohn.org/, click on the Foundation Tab, and you will see the different opportunities available for you to contribute.

On behalf of the AAOHN Foundation, I thank you in advance for your generosity toward our organization.

Sincerely,

Barb Maxwell, MHA, RN, COHN-S, CCM, CWCP, QRP, FAAOHN
Treasurer, AAOHN Foundation

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AAOHN 2014 Conference Poster Winners

At the AAOHN 2014 National Conference Awards Breakfast held on May 7, the first, second, and third place poster winners were announced from the 28 posters displayed during the Dallas Conference. See below for winning poster content.

Poster presentations at the AAOHN 2014 National Conference.

First Place

Workplace Violence: The Role of Occupational and Environmental Health Nurses
Donna Fudale, MPH, BSN, RN, COHN-S
Janet Caldwell, RN, CCM

Violence is a threat to public health regardless of age, occupation, gender, or income. Workplace violence, when assaults and suicides are included, accounted for 17% of all work-related total occupational injuries in 2011 (Bureau of Labor Statistics, 2011). Incidents such as stalking, harassment, and/or bullying may go unreported. The scope of workplace violence is not currently captured by any designated organization. Depending on the nature and severity of the incident, costs from lost work time, wages, diminished productivity, medical costs, workers compensation claims, fines, counseling, training replacement workers, cleaning, remodeling/refurbishing the impacted area, increased insurance costs, legal, and security expenses can only be estimated, but are likely to run in the billions of dollars. Due to their relationship with the workforce and their role in providing safety to employees in the business, Occupational and Environmental Health Nurses are in an ideal position to address workplace violence. These professional nurses can be integral members of an organization's multi-disciplinary Threat Response Team. They can and do respond to potentially dangerous situations with employees, abusive partners, and violent customers. By advising the employer on establishing workplace controls, training team members, and advocating for violence reduction programs in the community, Occupational and Environmental Health Nurses can assist in creating a safer and healthier environment for current and future employees.

Reference

Bureau of Labor Statistics. (2011). *Injuries, illnesses, and fatalities: Frequently asked questions*. Washington, D.C.: Author. Retrieved from http://www.bls.gov/iif/oshfaq1.htm

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Second Place

Quantifying the Value of a Field Attenuation Estimation System (FAES) to Measure Hearing Protector Attenuation and Provide Training for Manufacturing Workers
Pegeen Smith, MS, RN, COHN-S

The research objective is to determine the effect of including fit testing hearing protection devices (HPDs) in a hearing conservation program by comparing the Personal Attenuation Rating (PAR) before and after intervention. The population studied included 327 employees naïve to hearing protector fit-testing from a large metal container manufacturer at four geographic locations. Employees first completed an online questionnaire using a tool similar to one previously validated in the literature (Lusk, Ronis, Hogan, 1997). Employee attitudes of self-efficacy toward hearing protector use were collected. Next, a fit-test was conducted using an FAES to measure baseline PAR50 values on the earplug chosen and fitted by the employee with no coaching from the investigator. Employees who did not achieve adequate protection on the baseline were placed in an intervention group. This group received additional training and/or an alternative hearing protector until adequate protection was achieved. Measurements on the intervention group were repeated after six months. FAES testing documented most workers (70%) achieved adequate attenuation when fitting the earplug of their choice without added intervention. However, fit-testing can help facilitate an increase in PAR50 values for employees who did not. A FAES can assist the occupational health nurse in identifying workers who are at high risk (low PAR50), teach the proper fit and use of HPDs, and assist in hearing protector selection. Workers identified as high-risk for hearing loss may benefit from frequent follow-up. Self-efficacy about wearing hearing protectors was not well-correlated to high PAR50 values in this population.

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Third Place

Nailing Sleep and Fatigue Assessment in Workers: Tools You Can Use
Kenya Kirkendoll, MPH, MSN, RN
Karen Heaton, PhD, FNP-BC

According to the Centers for Disease Control and Prevention, about one-third of workers in the United States do not get enough sleep. Inadequate sleep and sleep disorders increase the risk for work-related injuries and the development of or worsening of co-morbid medical conditions. Assessing sleep and fatigue among workers is key in the early identification of sleep problems and initiation of sleep management interventions. This presentation will describe valid and reliable measurements that may be used to assess sleep and fatigue in workers. A variety of evidence-based, subjective measurement tools may be used to assess the characteristics and contributors to sleep and fatigue. The Piper Fatigue Scale is often used to assess different types of fatigue. The Epworth Sleepiness Scale is commonly used to assess daytime sleepiness and in screening for obstructive sleep apnea. The Pittsburgh Sleep Quality Index is widely used to measure sleep quality using self-reports of sleep time, sleep disturbances, and symptoms of sleep disorders. Instruments are also available to screen individuals for specific conditions. For example, the Berlin Questionnaire provides a means of identifying patients who are likely to have sleep apnea. The impact of shift work on sleep quality and quantity is of particular interest in occupational health. The Bergen Shift Work Questionnaire is designed to evaluate sleep problems related to shift work. Occupational health nurses are in a prime position to help workers better understand their sleep health. The measures described can be used as initial assessments and follow-ups.

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AAOHN Foundation Grant Opportunities

Are you interested in conducting research in the field of occupational and environmental health? Take advantage of the funding opportunities available to new principal investigators to conduct research on occupational and environmental health issues.

There are two grants available to new principal investigators: one $3,000 grant funded by Kelly Services, and one $3,000 grant funded by Medique Products.

The grant sponsored by Kelly Services will fund a research project focused on demonstrating the return on investment of one or more nurse-initiated and -managed health programs.

The Medique Products-sponsored grant will fund a research project focused on one of the identified AAOHN research priorities (as listed in the grant packet). For example:

- The nature and effects of stress and workplace stressors on worker health
- Health effects resulting from the interaction between aging and workplace hazards
- Effectiveness of health promotion nursing intervention strategies
- Evaluation of critical pathways to effectively improve worker health and safety and to enhance maximum recovery and safe return to work.

For more information regarding funding opportunities, please download the AAOHN Foundation 2014 Grants Packet, or e-mail aaohngov@aaohn.org .

The deadline to apply for AAOHN Foundation Grants is **July 1, 2014**.

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AAOHN Call for Nominations

The AAOHN Election Committee invites members to nominate a colleague or submit a self-nomination for this year's ballot, which will consist of the following positions:

President-Elect
Term: 2015-2017
The President-Elect shall automatically succeed to the office of President after a 2-year term, and in the absence of the President, assume the duties of the President and other duties as assigned by the bylaws, governance policies, or Board of Directors, and succeed to office of President in accordance with provisions in Sections 7A (bylaws) in event of vacancy of that office. (To be eligible for President-Elect, candidates must have served a minimum of 2 years as a Director within the preceding 5 years.)

Secretary
Term: 2015-2017
The Secretary shall be responsible for the integrity of the Board's documents. The Secretary shall serve for 2 years or until a successor has been elected and assumes office. (To be eligible for Secretary, candidates

must have served a minimum of 2 years as a Director within the preceding 5 years.)

Director (5)
Term: 2015-2018
One Director from each region shall be elected. The term of office for Directors shall be 3 years or until their successors have been elected and assume office.

Election Committee (5)
Term: 2015-2017
One Election Committee from each region shall be elected. Election Committee members shall serve a term of 2 years. The Chairman of the Election Committee shall be the person who receives the most votes.

Please take a moment to consider running for National Office and/or nominate a colleague. Your help in this important process can make AAOHN an even stronger organization.

The deadline to submit nominations is **July 1, 2014**, and candidate materials are due **July 31, 2014**.

For more information, visit the AAOHN website, or contact Shelah Fletcher .

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News and Announcements from the AAOHN Academy

Just Released: Respiratory Protection Education & Resources Webkit

Earn CNE as you learn with a 90-minute, self-paced, 10-module online program designed to help you polish your respiratory protection competencies and have the highest performance as your organization's Respiratory Protection Administrator. Developed with a NIOSH grant, a team from AAOHN, AOHP, ANA, and ABOHN designed the program to ensure you are meeting the Federal OSHA Respiratory Protection Standard (1910.134 CFR). In addition, you'll find every respiratory protection reference and resource you've ever needed in one convenient location, available now at aaohn.org!

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DOT Medical Examiner Training
Ann Arbor, MI
July 26, 2014

This certificate course meets the core curriculum requirements for medical examiner training, according to the Federal Motor Carrier Safety Administration (FMCSA). Upon satisfactory completion of this program, those eligible to serve as examiners will be prepared to sit for the National Registry of Certified Medical Examiners (NRCME) certification examination. Content will follow the core curriculum with a focus on body systems. It will address the medical examiner's responsibility to teach or inform the driver about medications and the impact the medications may have on the safe operation of a commercial motor vehicle. It will address the use of the process in performing examinations and coaching techniques to better engage CMV drivers in safe highway practices. Case studies will help attendees address exceptions and sample questions will aid in planning for the certification exam. Learn more at aaohn.org.

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Upcoming Webinars

Register now for upcoming webinars:

June 24, 2014: This Job Has Made Me Sick: Investigating Health Events at the Workplace

July 17, 2014: Case Studies of Exposure Assessments in Healthcare, Manufacturing, and Research
Sponsored by Axion Healthcare

August 7: Mayo Nicotine Dependence Series: Having the Conversation with Clients About Tobacco

August 19: Mayo Nicotine Dependence Series: Pharmacology for Treating Tobacco Use and Dependence

August 21 – Free: Seasonal Influenza
Co-Sponsored by the University of Michigan Center for Occupational Health & Safety Engineering

The American Association of Occupational Health Nurses, Inc. is an Approved Provider of continuing nursing education by the American Association of Occupational Health Nurses, Inc., an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

The American Association of Occupational Health Nurses, Inc. is additionally approved as a CNE provider by the California Board of Registered Nursing (#CEP9283).

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Workplace Health & Safety: June Table of Contents

PROFESSIONAL PRACTICE
Fighting Violence Against Health Workers: A Way to Improve Quality of Care?
This article describes a participatory approach used to ensure health care workers take an active role in designing and implementing anti-violence measures.
Maxime Gignon, MD, PhD; Jean-Charles Verheye, RN, MPH; Cécile Manaouil, MD, PhD; Christine Ammirati, MD, PhD; Emmanuelle Turban-Castel, MD; Olivier Ganry, MD, PhD
A Longitudinal Study of the Impact of Cumulative Violence Victimization on Comorbid Posttraumatic Stress and Depression Among Female Nurses and Nursing Personnel
Interventions to address violence and mental health symptoms among female nursing personnel in the hospital setting could improve their health, retention, and occupational functioning.
Courtenay Cavanaugh, PhD; Jacquelyn Campbell, PhD, RN, FAAN; Jill T. Messing, PhD, MSW
Professional Activities of Experienced Occupational Health Nurses
Understanding the actual work of occupational health nurses is necessary to align training, certification, and competency maintenance systems such as continuing education with the unique skills used in actual practice activities.
Philip Harber, MD, MPH; Gabriela Alongi, BS; Jing Su, MS
Needle Safety Awareness Among Dental Nurses
The overall awareness and attitudes of the study population toward needle safety was poor.
Anand Prabhu, MDS; Arun P. Rao, MDS; Venugopal Reddy, MDS; Kaliyamoorthy Sugumaran, MDS; Govindharajan Mohan, MDS; Syed Ahamed, MDS
Anesthesia Personnel's Knowledge of, Attitudes Toward, and Practice to Prevent Needlestick Injuries
Anesthesia personnel need appropriate training on standard precautions related to needles and other sharps to improve their practices.
Mahsa Motavaf, MSc; Mahmoud R. Mohaghegh Dolatabadi, MD; Mohammad R. Ghodraty, MD; Seyed Alireza Seyed Siamdoust, MD; Saeid Safari; Masood Mohseni, MD
Shift Work and Employee Fatigue: Implications for Occupational Health Nursing
Providing health promotion interventions and education to both employees and employers on ways to mitigate employee fatigue is paramount to nurses' roles.
Doreen J. Yumang-Ross, MPH, MS, RN; Candace Burns, PhD, ARNP
HEALTH UPDATES
Limitations of Body Mass Index to Assess Body Fat
Body Mass Index is a useful screening measure, but there are limitations to consider when using it to evaluate body fat.
Julia Buss, RN, MS

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Chapter and Regional Conferences

To see a listing of upcoming AAOHN chapter and regional conferences, visit this page.

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AAOHN New Members - May

AAOHN welcomes new and renewing members who joined in May 2014. Below are their names and credentials, listed with location and chapter (information not listed has not been provided by the member).

Angelique Carter-Roberts, RN, COHN, Cordova, TN, Tennessee State, Memphis Tennessee, South Central/Southwest

Jackie Pasztor

Donna Tucker, RN, North Wales, PA, Pennsylvania State, Philadelphia, Pennsylvania, Northeast

Julia Bartram, RN, Avon Lake, OH

Sarah Obstfeld, RN, Chicago, IL, Illinois State, Illinois Hospital, North Central

Jennessa V. Offutt, Oregon State, Mountain/Western

Cynthia Truficant, Ohio State, Southwestern Ohio, South Central/Southwest

Jennessa Offutt

Mary Slover-McMichael, LPN, Fort Worth, TX, Texas State, North Texas, South Central/Southwest

Jan Harris, Texas State, Houston, Texas, South Central/Southwest

Natalie K. Abshire, Indiana State, Indiana, North Central

Sarah A. Griffin-Mbodj, Tennessee State, Memphis Tennessee, South Central/Southwest

Rodney Duke Chennault, Tennessee State, Middle Tennessee, South Central/Southwest

Adrienne Biles, MBA, BSN, RN, Bismarck, ND, North Central

Richard Ashner

Corinne Bronkema, RN, OT-C, Somersworth, NH, New Hampshire State, North of Boston Massachusetts, Northeast

Cheryl Schmitt, North Central

Tracy Darmody, RN, Garden City, NY, New York State, Greater New York, Northeast

Jessica Greni, MSN, RN, Kearney, NE, Nebraska State, North Central

Cheryl Stafford, RN, Salisbury, MD, Maryland Area, Southeast

Rebecca Libal, RN, Anchorage, AK

Sileen Pringle, RN, ANP-C, ARNP, Ottumwa, IA

Julie Alcorn-Webb, RN, Minneapolis, MN, Minnesota State, North Central

Bev Vander Pol, BA, Mitchell, SD, North Central

Chelsea McEvoy, CRNP, Philadelphia, PA, Pennsylvania State, Philadelphia, Pennsylvania, Northeast

Anne Borden, Massachusetts State, Greater Boston Massachusetts, Northeast

Elizabeth Erickson, BSN, RN, Nashua, NH, New Hampshire State, North of Boston Massachusetts, Northeast

C'Sara R. Strong, DNP, FNP-BC, COHN, Memphis, TN

Lisa Ronner, MEd, RN, Sudbury, MA, Massachusetts State, North of Boston Massachusetts, Northeast

Deborah Redmon, RN, Catonsville, MH, Maryland Area, Southeast

Doug Schwartz, RN, Fort Wayne, IN

Pam Smith, BSN, RN, CRRN, Powell, OH, Ohio State, Midwestern Ohio, South Central/Southwest

Warren Seher, BSN, OHN, ANC, Johnston, IA, Northeast Iowa, North Central

Mary Taschner, MS, ANP-BC, Andover, MA, Massachusetts State, North of Boston Massachusetts, Northeast

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