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### Presidents Report

# Message From The President

Happy Sprinter- at least that is what it has been here in the mountains. Everything is blossoming but it was 34 degrees last night. It was especially difficult after getting to experience some warmth in Nashville for the ASPAN national conference!

This was my first time attending as a member of the Representative Assembly. It was interesting to see how NYSPANA and the other state components have a say in the workings of the organization. It was also exciting to participate in the election process. The choices were not easy to make- there were so many extremely qualified candidates. I am very pleased that our next President -Elect Elizabeth Card made the final runoff. Her energy and forward thinking will be a great addition to the organization. Our current President Amy Dooley is one of those very organized , get-it done types who is ready to put the strength of Perianesthesia nursing to work this coming year. Be sure to read her column in the new issue of Breathline. She encourages us all to find our strengths and put them to good use improving our practice.

Attending National Conference is networking on steroids. I was so pleased to meet quite a few fellow New Yorkers. There is energy building to get District 6 organized again. This is important for our component as we have so many members in that NYC area and we want share our resources to get educational opportunities for them. I was also able to touch base with other component leaders in Region 4. (Continued on page 2)

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### Mission Statement

## The New York State Perianesthesia Nurses Association

advances nursing practice through education, research and standards



## Board Members



**PRESIDENT:**

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Barbara Ochampaugh, BSN, RN CPAN



# President's Report Continued

We are hoping to keep communications open so members are able to learn about events in other states nearby throughout the year.

I am happy to see an increasing interest in the grants , scholarships and awards available through NYSPANA for our members. Be sure to check the website if you are not familiar with these. There are also opportunities at the national level that include help for those returning to school, attending conferences or participating in mission projects.

Belated congratulations to those who passed this spring exam and have become certified. It is great to see the hard work pay off. Remember it's never too soon to start earning CEUs towards your recertification. There is a good article in Breathline on resources available through ASPAN .

Remember if there are 5 or more of you, that the ASPAN Select option is a great way to bring some CEUs to your work group. You get up to 3 presentations on a jump drive to show on your own AV equipment on a set date. The next dates for requests are July 15th and October 15. This can also be used at a District event. Details are on the ASPAN website.

Finally, be sure to keep the Board up to date on happenings in your region so we can share your news and events. Items for the newsletter can be sent to myself - sjwraven@gmail or our current editor care of NYSPANA@gmail.com.

Respectfully Submitted,  
*Sherry Fieroh MSN RN CAPA*



**Succession planning** is the process for identifying and developing new leaders as experienced leaders resign or retire. At this time, NYSPANA has multiple open positions, including editor for Up to Par. Now is the time to explore one of those NYSPANA positions. This, hopefully, will avoid gaps in providing leadership, information and ensure the strength and continuity of our districts. All positions are voluntary. Each position, except editor, requires you to be a board member and each position requires NYSPANA and ASPAN membership. If you have the inclination to volunteer, to be part of an established association and be a leader; contact a board member. All that is required is a few hours of your time two to three times annually.

The Board is available at [NYSPANA@gmail.com](mailto:NYSPANA@gmail.com) to answer any questions you may have and to discuss opportunities.

## NYSPANA Contact E-Mail Address

Sherri Feiroh, MSN, RN, CAPA ● [www.nypana@gmail.com](http://www.nypana@gmail.com)



# NYSPANA Board Meeting was via a Conference Call Nov 03, 2018



Join our team!



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District 6  
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Secretary

District 13  
Vice President

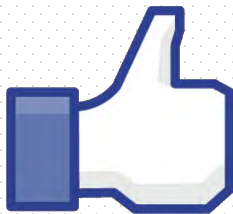
District 14  
Vice President

If interested in any open NYSPANA position or a position in our Districts — email: [NYSPANA@gmail.com](mailto:NYSPANA@gmail.com)



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Like Us  
(NYSPANA)  
on Facebook



Save the Date

ASPAN 39th National Conference

April 26-30<sup>th</sup> 2020

Gaylord Rockies Resort and  
Convention Center  
Denver, CO



NYSPANA Editor

Bronwyn Ship, BSN, RN, CPAN, CAPA • [www.nyspana@gmail.com](http://www.nyspana@gmail.com)

# Did You Know?



The NYSPANA Research/EBP grant of \$500.00 per year is funded by NYSPANA. The grant is available for all NYSPANA members seeking to conduct research that contributes to the advancement of Perianesthesia nursing science and the improvement of patient care.

<http://www.nyspana.net/wp-content/uploads/2018/03/NYSPANA-AG-March-2018.pdf>

## ASPAN Conferences



April 26-30, 2020  
Denver, CO

April 26—29, 2021  
Orlando, FL

2022  
TBA

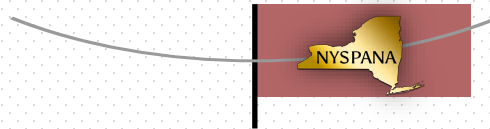


## Financial Report

Money Market Savings:

\$ 43,000

Checking: \$ 55,100



## Constant Contact

NYSPANA subscribes to Constant Contact to keep members updated between newsletters about various events and opportunities. If your district is hosting an educational event, we can promote it. Email President Sherry Fioerch, who will approve and allow me to “blast” NYSPANA members.

I update the membership list every six months. If you are not receiving blasts, check with ASPAN to assure they have the correct email. Also, check our junk mail. This is a mass email to over 800 NYSPANA members.

Any questions, contact me: [CVL54@hotmail.com](mailto:CVL54@hotmail.com).

Cynthia Veltri Lucieer, BSN, RN, CAPA  
[CVL54@hotmail.com](mailto:CVL54@hotmail.com)

## NYSPANA Website

[www.nyspana.net](http://www.nyspana.net)

Website Administrator: Sandra Price, MS, RN, CAPA

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# WHY ISN'T MY PATIENT READY FOR THE OR?

Christine L. Deitrick, BSN, RN, CAPA

Sandy Price, MSN, RN CAPA

Hospital leadership at Strong Memorial Hospital in Rochester, New York challenged nursing units to develop unit based performance improvement projects (UPP) to define, study and offer solutions aimed at improving patient care. Taking up the challenge, the perioperative nurses in the Strong Surgery Center (SSC) along with both the perioperative director and nurse manager embraced the task.

Operating room (OR) delays have significant implications on workflow and resource efficiency in any hospital. Time is the OR's most valuable resource; delays in OR start times can lead to patient dissatisfaction, impact team morale and reduce the OR's profitability. Our UPP would therefore focus on defining, tracking and offering solutions to barriers that are unforeseen on the day of surgery (DOS). Our first objective was to identify barriers and second, find solutions that would increase on-time OR start times for first cases.

The SSC is located within an 830 bed quaternary medical center, where an average of 60 patients a day are prepared for ambulatory, observation or same day admit surgery. As perioperative nurses, the SSC nurses are committed to providing the best experience for patients while targeting on-time OR first cases.

The SSC nursing team was enthusiastic and committed to minimizing interruptions during the admission process. In order to meet this goal, a Lean Six Sigma (LSS) process improvement model analyzed the prevalence of barriers contributing to patient readiness for the OR. Nurses provided solutions using an "Ever Better" poster board titled "Wouldn't it be great if...first OR cases could be nursing ready by 0710?" A multi-

disciplinary perioperative lean measure team consisting of preoperative registered nurses (RN), licensed practical nurses (LPN) and patient care technicians (PCT) was established. This program started with project 1 (P1) July – August 2018, and repeated project 2 (P2) November – December 2018. A delay was defined as not having the patient ready 20 minutes prior to OR start time.

Registered nurses (RNs) collected data on first-case surgery patients for both P1 and P2. RNs tracked additional nursing care contributing to delays (i.e. labs, medications, late arrival etc) after the patient was transferred to the OR. Barriers were identified by the nurse readying the patient and relayed that information to the recording data RN. The data collected was entered into an EXCEL spreadsheet. For all first OR cases, the data tracked included: surgical service, time patient arrived in waiting room, time patient was escorted to their room, time nurse entered the patient's room, time patient was ready for OR, time patient entered the OR and time of incision.

Patients greater than 16 years and scheduled for elective surgery were included. The classification of American Society of Anesthesiologists (ASA) scores for the sampled patients ranged 1 – 5.

After the data collection was completed, our team reached out to Dr. Mary Carey (Director of Nursing Research Center at the University of Rochester) to assist with data analysis. Dr. Carey referred the SSC nurses to a School of Nursing (SON) analyst, Beth Anson, MS. She transferred the EXCEL workbook data to the Statistical Package for the Social Sciences (SPSS) to obtain the results. (continued on page 6)

# WHY ISN'T MY PATIENT READY FOR THE OR?

Continued from Page 5

**P1/P2 results:** Top six of the 22 recorded barriers were DOS testing, communication with health care provider (HCP), difficult intravenous (IV) access, unplanned DOS medications, physical disabilities requiring additional staff and surgical consent questions. Percentages varied only slightly from P1 to P2. Total first case patients for P1 (n=230) undergoing surgical procedures for a 4-week period revealed 19% (n=43) were partially delayed due to nursing and 47% (n=108) of all patients required additional nursing interventions. Total first case patients for P2 (n=231) undergoing surgical procedures for a 4-week period revealed 25 % (n=58) were partially delayed due to nursing and 53% (n= 123) of all patients required additional nursing interventions.

Preoperative staff successfully recorded real time barriers that interfered with a timely admission process DOS (P1). P2 confirmed data obtained in P1. Analysis revealed that patients with no barriers were more likely to be nursing ready than were patients with barriers. Findings revealed additional nursing interventions contributed to approximately one-third of first case OR delays. We concluded that to decrease first case OR delays, a change in workflow is necessary, development of a patient-based website was needed, and staggering admission times should be

trialed.

Utilizing a research analyst is an expense the perioperative team supported and to offset this financial burden, the team applied for a research grant from New York Perianesthesia Nurses Association (NYSPANANA). And, a \$500 grant was awarded. Thanks to both Dr. Carey's nursing research department and NYSPANANA's contribution. our project data was completed. Those results were shared on both a local [Strong Memorial Hospital, Rochester, NY] and national level [poster at 2019 ASPAN conference in Nashville, TN]. We greatly appreciate their support to the continued improvement of perioperative patient care.

NYSPANANA plays a vital role in serving perioperative nurses and nursing across the state. By doing so, it supports a better tomorrow. The process of applying for the grant was straightforward, so if your perioperative unit has a future project planned and financial backing would be advantageous, check out



## Mid Year Board Meeting

### March 2019

## National Conference

Barb Ochampaugh RN BSN CPAN

I want to thank NYSPANA for the scholarship to attend National Conference in Nashville Tennessee. The warm weather combined with the enthusiasm of 2000 Peri-anesthesia nurses is always a balm for a weary spirit by allowing us to greet old friends from across the country and bond with new [friends](#). Along with the educational offerings and poster presentations, the National Conference offers invaluable knowledge which can be taken back to our everyday nursing practice.

The medical marijuana lecture is vital as more states are legalizing the use of marijuana or cannabis and as Canada and Europe continue to research the medical effects of cannabis. Can this be the solution for the opioid crisis? Our phrasing in Pre-Admission Testing must change as these drugs are becoming legal. A better question may be “Are you using any substances that may have an effect on your anesthesia?” as opposed to “Do you use any illegal or street drugs?” We must also help educate the client about the legalities of using marijuana in each of our individual states. It is important that patients understand, not all states have approved the use of medical marijuana or cannabis. It is still a federal offence to carry your drugs across state lines, yet some states have reciprocity which allows the patient to bring a prescription script to the state to have your formula filled at the dispensary.

Medical marijuana or cannabis, comes in many forms and strengths. It can be eaten, inhaled, rubbed on as in in oil or take in pill form. It is the type of the plant which dictates the effects of the drug. Cannabis indica produces a sedative or calming effect because this type of cannabis has more Cannabidiol (CBD), less Tetrahydrocannabinols (THC) and releases dopamine. Cannabis Sativa is more invigorating and acts as a mental stimulant. Depending upon which plant-based product you choose, it can have an effect on your life style. Smoking will produce an odor and can

produce a high. Safety precautions need to be stressed to the patient undergoing anesthesia.

Urinary retention was a great review. I knew that general anesthesia affects the ability to void, but I didn't know the why. The analgesic drugs given during surgery often disrupt the neural circuitry that controls the nerves and muscles in the urination process. This can lead to abnormal storage of urine because patients often don't feel like they have to urinate despite having a full bladder. A normal bladder holds 400-600 mL of urine, the bladder wall begins to stretch at 200-400 mL of urine and the bladder is distended at >600 mL of urine. The sympathetic and parasympathetic systems which control our urge to void are particularly affected by neostigmine and glycopyrrolate which can cause urinary retention. Opioids affect the sensation of bladder fullness so that the patient may not be aware of a full bladder. Other common medications that effect bladder function are: atropine, scopolamine patch, Compazine, and Benadryl. It is a wonder that any of our patient's void on their own. Special considerations should also be paid to the patient who has received spinal anesthesia. We as peri-anesthesia nurses need to be vigilant, bladder scan our patient if they are unable to void and seek a straight catheterization order if needed.

So many topics to learn and share with our colleagues while the comradery of fellow Peri-Anesthesia nurses from across the country. I hope that each and every once of you will be able to experience the uplift atmosphere of National Conference.



## MY National Experience:

I was so very proud to be one of the ten representatives from NYSPANNA District 14 at national conference. There is always an offering for everyone. I enjoyed meeting people and sharing my passion for peri-anesthesia nursing.

One of the offerings I found interesting and very informative was “Up in Vapor”: Peri-anesthesia Considerations with the Rise of Recreational Vaping.

I did not realize that vaping is now at epidemic proportions among middle school children. There are no FDA regulations, so it is hard to assess the nicotine content. While many teens are inhaling “fruity” flavors, they are unaware of the packed nicotine content.

The first evidence of long term daily use is that it doubles risk of heart attack. There have been many reported airway issues from reactive airway disease, non infectious pneumonia, bronchitis. COPD development is associated with these effects. Research in mice exposed to vapor displayed DNA damage in lungs, bladder, and heart.

As Katrina Bickerstaff, ASPAN speaker on this topic, noted “nurses are with patients and families more often than any other health professional” We need to take the time to help our patients become tobacco free.

Respectfully submitted,

Cindy Veltri Lucieer, BSN, RN, CAPA



## My Chi Eta Phi, Inc. Northeast Regional Conference Experience

I was very proud to attend the 67<sup>th</sup> Northeast Regional Leadership Conference of Chi Eta Phi, Inc. It was a great 4-day conference covering Leadership, Electronic Medical Record Documentation, Legal issues and many other areas of nursing. Dr. Angela R. Jourdan’s workshop “*Developing Nurse Leaders to Build and Sustain Healthy Work Environments*” addressed “*Authentic Leadership*”. According to Dr. Jourdain, “*Authentic Leadership*” is knowing what is true and real inside yourself, your team and your organization as well as the world. The Authentic Leader is one whose word can be trusted, that they will do what they say and they are personally excited about their area and the organization. Also, they must have the knowledge and skill to lead. Authentic leaders are interested in empowering the people they lead to make a difference. Their focus is not power, money and prestige. Authentic leaders know their strengths and weaknesses, and how they may impact others. They see themselves as *trust worthy, compassionate, transparent and objective in their decision making*. As we navigate this digital world, we must not forget the people: patient and their families.

To be an Authentic Leader and accomplish one’s goal of Optimal Patient Outcomes, Clinical Excellence, and a Healthy Work Environment, one must have Effective Communication, Effective Decision Making, True Collaboration, Meaningful Recognition and Appropriate Staffing.

As Health Care Leaders and Managers, we must continue to deliver patient centered care as an interdisciplinary team. We must also utilize Evidence Based Practice and quality improvement methods to meet the needs of our staff and customers.

Respectfully Submitted,

Theresa Carter, MSN, RN

\$250 Scholarship Winner to attend Northeast Regional Conference



# Photos from 2019 National Conference, Nashville, TN



NYSPANA attendees enjoying the conference.



ABRANC SHINING STAR AWARD WINNERS



Component Night at Nationals



Winners of Full Tuition to National Conference



L-R: Sandra Price; Cynthia Vetri Luceer; Cheri Buckley



L-R: ASPAN Immediate Past President Regina Hoefner-Notz; IASPAN President Amy Dooley

**A Word from our ASPAN  
Regional Director  
Region 4 (2018-2020)**

**Bronwyn Ship, BSN, RN, CPAN**

[bship@aspan.org](mailto:bship@aspan.org)

Happy summer! Finally the weather is reflective of the season. I for one am glad to have the rain behind us at least for now. I wish each and every one of you a safe and happy summer full of time to enjoy the season and family and friends.

National Conference in Nashville was an invigorating experience and very successful (over 2000 nurses attended). The educational offerings were varied and pertinent of our practice as peri-anesthesia nurses. I enjoyed meeting my fellow NYSPANA members during the conference. Networking with nurses from across our state and the country is one of the most invaluable perks to attending conferences. Those who attended had great information to bring back to their colleagues. Please save the date for ASPAN's 39<sup>th</sup> National Conference which will be held in Denver, Colorado on April 26<sup>th</sup>-30<sup>th</sup>.

District 1 is hard at work planning our Fall State Conference. Please plan on attending the event. The information provided will surely be instrumen-

tal to help us all provide the most up-to-date evidenced base care to our patients.

I would like to remind everyone that ASPAN provide numerous educational offerings in addition to National Conference. Remember that JoPAN articles are available on line and coming late summer all of these articles will be free to ASPAN members. I encourage each and every one of you to take advantage of this educational opportunity.

It has been my honor and privilege to serve as your ASPAN Region 4 Director. If you have any questions or concern, please feel free to contact me and I will do my best to assist you in any way I can. Please consult both the NYSPANA and ASPAN websites frequently as both contain information to help us all provide the highest quality of care to our patients.

Once again, thank you for the opportunity to serve as your Region 4 Director. I look forward to meeting with you at future conferences and at ASPAN's National Conference in Denver, Colorado.



ASPAN Members can now access up to three articles per calendar year for FREE  
As of August 2019: Unlimited FREE Articles

<https://www.aspan.org/Education/JoPAN-Continuing-Education-Articles>



## CPAN – Newly Certified Spring 2019

\*Mary Johnson

\*Karen Abril

Carmen Caroline Anne Ianra

Maria G Ejerta

Larissa Colombier

Angela Balzano

Mona Guerrero

\*Suk Hui

Margaret Drybk

Cheryll Lynn DiVincenzo

Elisa Kurzyna

Jessica DeBiase

Melina Morales

Christina Hyun

Cheryl James

Sandra Baez

Shauna Marie Kilcommons,

Mark Charzanowski

Christine Marie Rauschenbach

Audrey Lynn Turner

## CAPA – Newly Certified Spring 2019

Stephanie Herandez

\*Erbere Nwankpa

Mei Yuk Gian-Nguyen

Shannon Marie Diaz

Nicole M Geiger

Marie Horowitz

\*Bronwyn Ship

\*Indicates Dual Certification



*CONTRATULATIONS!!!!*

# DISTRICT NEWS

**District One** is preparing for the State Conference and is looking forward to presenting our members and fellow nurses with a truly educational venue. Hotel accommodations are available at the Hilton Melville Long Island for both Thursday Nov. 7th and Friday Nov. 8 for anyone interested. Brochure will be distributed in the middle of July with additional information. We look forward to having the pleasure of your company.

Tina Stoebe, MS, RN, CPAN

District 6—Dormant

District 10— No Report

District 8—No Report

Pam Werner, RN

District 13—No Activity

Christine Angiolilo, RN, CPAN

**District 14** had a productive spring hosting our annual PANAW Conference in February and our first ever Member Appreciation dinner in April. Both were well attended and there was overwhelming positive feedback on all speakers at both events. Before adjourning for the summer, the District 14 board began making plans for a Fall Evening Conference, hopefully to be held in September. The date & site yet to be determined. We do hope to make it convenient for both our Rochester & Buffalo members, so stay tuned!! We hope everyone is enjoying their summer!! See you in the Fall!

Kathi Peers, RN



# SAVE THE DATE

**NYSPANA District 1**

**State Conference**

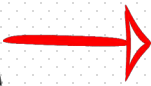
**Saturday, November 9, 2019 @ 7:30am**

**Huntington Hilton**

**Melville, NY**

**Breakfast, Lunch, Vendors & Raffles**

**More info coming on discounts for ASPAN,  
AORN, as well as early registration and  
room rate discounts.**



# NYS BILL NO S.03330

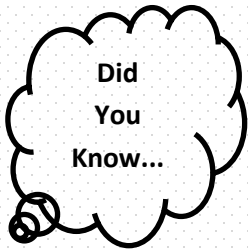
Under Consideration in New York State

"Enacts the "safe staffing for quality care act" to require acute care facilities and nursing homes to implement certain direct-care nurse to patient ratios in all nursing units; sets minimum staffing requirements; requires every such facility to submit a documented staffing plan to the department on an annual basis and upon application for an operating certificate; requires acute care facilities to maintain staffing records during all shifts; authorizes nurses to refuse work assignments if the assignment exceeds the nurse's abilities or if minimum staffing is not present; requires public access to documented staffing plans; imposes civil penalties for violations of such provisions; establishes private right of action for nurses discriminated against for refusing any illegal work assignment."



https://

assem-



CA is the only state that stipulates in law and regulations, a required minimum nurse to patient ratios to be maintained at all times by unit.

*Mandated Nurse Staffing Ratios in California: A Comparison of Staffing and Nursing-Sensitive Outcomes Pre- and Postregulation*



**Citation:**

Bolton, Linda & Aydin, Carolyn & Donaldson, Nancy & Brown, Diane & Sandhu, Meenu & Fridman, Moshe & Aronow, Harriet. (2007). Mandated Nurse Staffing Ratios in California: A Comparison of Staffing and Nursing-Sensitive Outcomes Pre- and Postregulation. Policy, politics & nursing practice. 8. 238-50. 10.1177/1527154407312737.



### CERTIFICATION

**Not Yet Certified? Now is Your Time!**

**Currently Certified?  
Encourage a Colleague!**

## Yes You Can...

Any NYSPANA member may submit an article, a photo of an event, a research project/idea or an Evidence Based Project (EBP) your unit or team is conducting.

We want to hear about the great projects, educational conferences, gatherings or community work that NYSPANA nurses and your co-workers believe in or interested in.

It is easier than you think, give it a try.

# Up to Par Submissions

Please send all of your articles of interest, district news, events and photos to NYSPANA newsletter Editor for the December newsletter edition of **Up To Par** by November 01, 2019.

[www.nyspana@gmail.com](mailto:www.nyspana@gmail.com)



# NYSpana District Officers\*

## District 1 Long Island

### PRESIDENT

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 C: 631.835.8917  
 W: 631.476.2729  
 ts77838690.1more01@gmail.com

### VICE PRESIDENT

Irene Healy, RN, CAPA

### SECRETARY

Diane Sambo, MS, RN

### TREASURER

Christine Molinari, BSN, RN

## District 6 New York City

### PRESIDENT

**Position Open**

### VICE PRESIDENT

**Position Open**

### SECRETARY

### TREASURER

} **Positions  
Open**

## District 8 Westchester, Rockland

### PRESIDENT

Pam Werner, RN  
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 pamwerner@hotmail.com

### VICE PRESIDENT

Doreen Dozier, MHA, RN, CAPA

### SECRETARY

MaryAnn Servidio, MSN, RN, CAPA

## District 10 Albany

### PRESIDENT

Korrin White, RN CPAN

### VICE PRESIDENT

Bonnie Bessette RN BSN CPAN

### SECRETARY

Kaitlyn Coriale, BSN, RN, CPAN

### TREASURER

Charli Knight, BSN, RN

## District 13 Syracuse

### PRESIDENT

Christine Angiolillo, RN, CPAN  
 C: 315.726.9436

Christine.angiolillo@sjhsyr.org

### VICE PRESIDENT

**Position Open**

### SECRETARY

Kelly Cortini

### TREASURER

Maureen Iacono

## District 14 Roches-

### PRESIDENT

Kathi Peers, RN  
 kathi\_peers@URMC.rochester.edu

### VICE PRESIDENT

**Position Open**

### SECRETARY

Debra Farmer, RN, CAPA

### TREASURER

Kari Alicea-Santiago, BSN, RN, CAPA

### EDUCATION

**Position Open**

## Know your District

- [District 1] Nassau/Suffolk
- [District 6] New York City (All Boroughs)
- [District 8] Delaware, Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester
- [District 10] Albany, Clinton, Columbia, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington
- [District 13] Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga
- [District 14] Allegheny, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Thompsonkins, Wayne, Wyoming, Yates

\* Any changes/updates in District Officers may be emailed to Sherry Fieroh: [www.nyspana@gmail.com](mailto:www.nyspana@gmail.com)







Celebrate Strength

**STRENGTH**

Elevate Practice