



Issue 2 September 2009

PRESIDENT'S REPORT



Welcome all, to the September Edition of the Brainstem, in our 35th Anniversary Year. It has been another year thus far, that has been full of activity for the Executive and within the neuroscience units across Australasia. It has been very pleasing to receive reports that outline activities being undertaken to promote the cutting edge work and dedication of neuroscience clinicians across the spectrum, some of which will be presented at this year's celebratory conference.

The executive have kept busy planning the conference in Adelaide this year. This years conference will not only showcase the advancements within the field, It will bring together to celebrate the advancements and achievements of the association. It is our 35th Anniversary, and we invite you, the members, to join us in celebrating, in style in Adelaide in October.

The conference planning included celebratory activities that will culminate in the "Glitz and Glamour" themed Conference Dinner, so get out your frocks and suits and join us for an event to remember.

May marked another year of celebrations for the Neuroscience Nurses Day, we have received some very entertaining submissions for the Inaugural competition, don't forget to submit your applications and showcase your units activities and celebrations marking this day.

This year also sees the call for expressions of interest and nominations for the Australasian executive positions including the President, Vice president, Treasurer, Journal Editor and Webmaster. This opportunity to represent your peers and learn tremendous amounts about yourself will be called for during the conference proceedings. If you are interested in finding out more information about any of these positions, please contact president@anna.asn.au.

The executive have had a very busy few months not only with conference planning, but with continued strategic activity of the association. The following outlines executive priorities over the past few months;

Journal Planning: Due to limited submissions for publication, we have been unable to produce a journal. The journal will not be published without submissions from members or actively researching clinicians who have an interest in sharing their work.

Life membership: The executive have been working towards establishing more structured criteria for life membership. (from the AGM 08)

Handbook Review: The review of the handbook, a very time consuming activity is near completion.

Financial review: This very large and important task continues this year, with a focus on ensuring the association meets all its taxation and legal obligations and to ensure that the financial security of the association is healthy. Many thanks to Karen Tuqiri for her dogged approach to ensure we get this right.

Website: The executive have started a review of the website and are working with Woof Byte to evaluate the current web page. Feedback is always valued and if you have any comments please do not hesitate to contact the association.

This outlines a small component of the work being done by the executive. The team works very hard, in sometimes very frustrating circumstances

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Australasian Neuroscience Nurses Association

PRESIDENT'S REPORT (cont)

and I would like to thank all of them for what they bring to the table, not only in their knowledge and skill, but in enthusiasm, friendship and humour. For more information about any of the above, please make some time to attend the AGM at this years conference in Adelaide.

State Delegates meeting: This year in October the Australasian executive will be meeting with all the State Delegates from across Australasia.

Please contact your delegate should you wish to table anything for discussion at this level.

PAMS: The President and Treasurer will be visiting PAMS again in September this year. Should you have any questions or concerns pertaining to PAMS, please email them to President@anna.asn.au.

Looking forward to seeing you all for Association celebrations in Adelaide in October. Registration brochures are available on the web now.

Cheers, Tracy

ARCHIVES 2009 by Tracy Desborough - ANNA President

This year marks the 35th Anniversary of the Associations inception. As such, planning for the celebrations of this achievement and looking to the future meant we needed to understand where we have come from and just how the association has developed over the years.

I have always held a particular fascination with history so when the opportunity to delve into the association archives presented itself, I took on the challenge along with my trusty co explorers- Karen Tuqiri (exec Treasurer) and Jenni Blundell (Journal Editor and all round historical expert!!! She has been here since the beginning)

The day was spent, trawling through old journals, a wealth of information, not only about the association activity but the clinical practice of the time, fascinating reading. The archives hold a wealth of history about the association, nursing practice and the personalities of neurosciences

over the years. There were many references to friends, young and old, photo's (some that should never be seen again) and the original member database to peruse.

As current executive with all the technical support that currently exists in today's e environment, we were astounded at the level of success and activities that were undertaken by the dedicated and driven previous executives. Truly motivating.

So despite getting locked in the fire stairs, battling the University students for coffee, a truly entertaining day was had by all. A wealth of information was collected for the representation of

the history of the association and for display at the conference in Adelaide this year.



For more information about what is kept in the archives or if you are interested in accessing archival records, please see the website for the serial catalogue and further information.

Cheers

Tracy





conference
Australasian Neuroscience Nurses Association

2009 ANNA Annual Scientific Meeting

Glamour & Glitz



Adelaide Convention Centre
October 21 – 23 2009

The Conference theme which is celebrating 35 years is Glamour & Glitz!
Join in the theme of the conference dinner by putting together a fantastic outfit incorporating Glamour & Glitz!

*******ATTENTION*******

Due to technical difficulties experienced the Executive may not have received your submitted abstracts, therefore we have extended the call for abstracts until: Monday 14th September 2009!

If you have submitted an abstract and have not heard from the Conference Convenor please re-submit via the website **www.anna.asn.au**



WFNN

Australasian Neuroscience Nurses Association

WFNN congress report: the 10th Quadrennial Congress of the World Federation of Neuroscience Nurses.

“Founded on tradition – focused on tomorrow”.
Toronto, Canada, May 23-27, 2009

In May this year I was fortunate to travel to Canada for the 10th World Federation of Neuroscience Nurses congress held in Toronto, Canada. Having worked in NSW as a neuroscience nurse for over 18 years it was very exciting to attend my first international conference, supported by a Nurses and Midwives Board scholarship.

This conference is held only every four years, so culminates many years of research and hard work by nurses from across the globe. The conference and dinner functions were held at the York University campus, a short bus ride from our accommodation. The programme included four workshops, two poster sessions, 4 concurrent sessions, table top talks and mentorship meetings. Other activities included two dinner functions, a trip to Niagara Falls, hospital tours and two early morning fun runs to raise funds for Canadian nursing education/research. I also had the opportunity to attend the Board of Directors meeting with Vicki Evans. As I had experienced the position of ANNA secretary, it was enlightening to see the similarities between both organisations and the many challenges they face.

During the “Federation Celebration” each country was asked to sing a song to represent their culture, so in true Aussie spirit we were the first to take to the stage, to sing “Give me a home among the gum trees..”. It was clear from the enthusiasm of our fellow Australians, that we embraced the WFNN congress, participating in all activities, from congress moderator, paper presentations to fun runs.

With 80 paper presentations conducted as 4 concurrent sessions it was often difficult to decide which to attend. Some of the highlights from the sessions I attended included:

- Case study on neurofibromatosis
- Epilepsy research in Cameroon
- Human Spaceflight and the relapsing of our Nerves (guest speaker Dr Roberta Bondar)
- Managing the agitated patient
- Neuroblend: online neuro education

A recurring theme across many presentations was the need to provide quality discharge planning and adequate education/support for families/carers'. The diverse range of neuroscience nurse practitioners across USA and

Canada also supported these needs. Let's hope we can continue to expand our neuroscience nurse practitioners role across Australia too.

Over 25 nurses from New South Wales alone attended the congress, presenting various posters and oral papers. This was only second in numbers to the Canadians.

POSTERS

1. The Ongoing Professional Development Experience of a Neurosurgery Nurse Practitioner (candidate) from Melbourne Australia in Doctor of Nursing Practice Program at Columbia University, New York, by Andrew Scanlon & Judy Honig
2. NeuroBrainEd – A Simulated Patient Website, by Nicki Pereira and Anne Macleod
3. Everest and Denali: Cerebral Syndromes, by Vicki Evans
4. The Prevalence of Behavioural Sequelae in Patients with Primary Brain Tumour and the Development of Information Resources, by Rochelle Firth
5. Telemetry for Epilepsy, by Sharen Rogers and Robyn Campbell

ORAL PAPERS

1. Spin and Spew – Vertigo and The role of the Neuro-Otology Nurse by Marilia Pereira
2. Cerebral Vasospasm causing Cerebral Ischaemia by Caroline Thomas
3. A Downunder Case Review of Paraneoplastic Limbic Encephalitis by Diane Lear and Violeta Sutherland
4. Restraint Minimisation in the Acute Neurosurgical Setting by Jeanne Barr and Alicia Virgona
5. World First Novel Approach to Treat a Nurse with Osteogenesis Imperfecta and Basilar Invagination by Emma Everingham
6. New Communication Initiatives for Neurosurgical Patients from New Caledonia by Emma Everingham

At the closing ceremony awards were presented to two Australian papers for being in the “top 10” abstract submissions, this included “Restraint Minimisation..” by Jeanne Barr & Alicia Virgona and “World First Novel Approach....” By Emma Everingham.

Australian Neuroscience nurses truly represented their country with the highest regard. So get those neuro nursing brains working and start planning for the 11th WFNN congress to be held in Japan in 2013.
Sayoonara

By Emma Everingham

*Neuroscience CNC Westmead Private Hospital,
Sydney*



WFNN

Australasian Neuroscience Nurses Association

10th Quadrennial Congress of the World Federation of Neuroscience Nurses

Founded on tradition - focused on tomorrow



Carving up a feast at Federation Celebration

The RNS Hospital nurses at the Toronto welcome BBQ

Student nurse from York University who sang Canadian National Anthem at the opening ceremony

Dianne Lear, Violeta Sutherland and Emma Everingham in downtown Toronto

7am... the start of the fun run!

Alicia Virgona and Emma Everingham at the Federation Celebration dinner

Founder and first president of WFNN Agnes Marshall-Walker

Guest speaker Dr Roberta Bondar

Dinner in downtown Toronto

Niagra Falls

Marilia and Emma at/in Niagra Falls

11th World Federation of Neuroscience Nurses Congress Japan 2013

Movement Disorder Society (MDS) Congress, Paris, France, June 7 -11

Report by Harriet Chan RN MSc GDip Ed
Neuroscience Nurse

I attended the 2009 MDS 13th International Congress of Parkinson's Disease and Movement Disorders in Paris, France, near the end of spring session in Europe. This 5-day event took place at the Hall Maillot of the Le Palais Des Congrès de Paris hosting approximately 4000 delegates from many countries.

The specific theme of the congress was "Anatomy, Physiology and Pathology of the Basal Ganglia". The scientific program incorporated therapeutic plenary sessions, plenary and parallel sessions, teaching courses, video sessions, and skills workshops. There were 59 sessions in total, led by over 170 esteemed faculties from around the world.

The poster tour experiences were mind opening, with 1700 poster abstracts presented in 11 categories namely Ataxia, Huntington's disease and Chorea, Non-Huntington's, Neuroimaging, Dementia in movement Disorders, Neuropharmacology, Non-Motor Manifestations of Parkinsonism, PD: Clinical Trials, Basic Science, Electrophysiology, Genetics and Epidemiology, and Surgical Therapies.

Furthermore, exploring the wonders of services, technologic or pharmacological products directly related to Parkinson's disease and movement disorders were equally fulfilling experience.

The poster abstract I presented belonged to the neuropharmacology category, titled "Continuous Subcutaneous Apomorphine Infusion (CSAI) in Advanced Parkinson's disease: The West Australian Experience". It detailed a group of 19 patients which failed many oral and transdermal therapies for motor fluctuations and dopa-induced dyskinesias, received the CSAI during the period between April 2006 and February 2009 in Western Australia. Group characteristics included 2 females and 17 males, age ranged 44 – 71 years at CSAI initiation, and CSAI duration averaged from 3 to 9 months, and 4 patients had globus pallidus (GPI) DBS with inadequate anti-PD effect. Results showed 8 patients achieved a reasonable 'ON' state but stopped CSAI due to severe rhinorrhea (1), unrelated medical conditions or death (3), and psychosocial problems (4). Eleven (11)

patients were successfully managed with CSAI for a minimum of 6 months achieving a near-continuous waking 'ON' state, 3 of these patients underwent GPI-DBS because of sustained dyskinesias; another 3 used CSAI alone, and 5 needed ongoing oral therapy though achieved a 50% reduction in L-dopa dose. Overall the UPDRS-motor score dropped 25% to 50% by 6 to 8 months of CSAI, and functional gains included near-normal gait pattern, independence in ADL, and restoration of continence in 2 cases. Side-effects reported included nausea, mild orthostatic hypotension, and rhinorrhea; and hypersexuality and obsessive behaviours were easily alleviated by dose reduction. These outcomes confirmed the efficacy of CSAI in improving motor functioning and quality of life, thus with its relative safety a trial of CSAI should be offered to all patients referred for DBS.

Here was I standing next to my poster displaying a video of a patient's daily activity routine. Lots of interests and enquiries regarding the CSAI program were received from clinicians from many countries in general and Asia-Pacific regions in particular.

My attention was drawn to 4 poster abstracts:

Design of the ParkFit study: an RCT to increase physical activity in PD patients: This study aimed to determine the disease-specific health benefits and risks of a PD physical program over a 2 year period.

Outcome measures included primary

as time spent on physical activities during one week measured by a 7-day recall, and secondary as physical fitness – 6 minute walk test, quality of life – PDQ39 and physical activity in kcal/week - an ambulatory monitor with feedback of daily activities. Michael J Fox Foundation for Parkinson's research supported this study. (Parkinson Centre Nimegen ParC 2009)

Amantadine for refractory dyskinetic storm in emergency room: this was a case report demonstrating Amantadine may be used for hyperacute and out of control dyskinesias secondary to L-dopa treatment in emergency room. The case was reported as only taking L-dopa 150mg/day, and when Ropinirole 10mg was added the patient developed an abrupt, violent dyskinetic storm. The patient had a history of respiratory complication while he was treated with apomorphine infusion and was a non-responder to MAO-B inhibitors. The case might have genetic predisposition to severe dyskinesia secondary to L-



Here was I standing next to my poster displaying a video of a patient's daily activity routine. Lots of interests and enquiries regarding the CSAI program were received from clinicians from many countries in general and Asia-Pacific regions in particular.



barbara lester scholarship

Australasian Neuroscience Nurses Association

dopa hypersensitivity due to one of the 2 genes namely DRD2-Taq1A polymorphism and number of replays of DAT associated allele. The dyskinetic storm was uncontrolled by sedation and intubation; only when Amantadine was administered via a nasogastric tube with concomitant withdrawal of all anti-PD medications the problem was resolved. The rationale for Amantadine use was that it increases the release of dopamine, the dopaminergic receptors affinity and intersynaptic gap dopamine bioavailability, so dopaminergic system continues being stimulated and decreases the risk of malignant neuroleptic syndrome after dopaminergic treatment withdrawal. Amantadine is effective in decreasing L-dopa induced dyskinesia. (Ybot Gorri, Matellano, & Diez 2009; Movement Disorders Unit of Neurology Department, University of Madrid, Spain)

Initiation of apomorphine infusion in advanced PD and effect on non motor symptoms compared to non-invasive strategies: This study evaluated the non motor effects of CSAI and Rotigotine transdermal patch. This study used the PD non motor scale (NMSS) as the primary outcome measure because non motor symptoms in PD were reported to have a strong link to quality of life. Results showed significant improvement in sleep and mood, and reduction in urinary symptom and dribbling of saliva in those receiving CSAI whereas patient on Rotigotine transdermal patch failed to show significant changes in NMSS. Thus CSAI has beneficial effect on both motor and non motor symptom. Its use may improve health related quality of life in PD patients. (Naidu, Tluk, martin, Jacobs, Davidson, Richards, Martinez, -Martin, & Chaudhuri, 2009; London, UK)

Hyperhidrosis and quality of life in PD: The study aimed to examine the prevalence of hyperhidrosis and its impact on quality of life. PDQ39-39 and EuroQoL-5D ratings scales were used. Results showed 53% of PD patients suffering this symptom with no correlation to PD severity or duration; but high impact on QoL domains such as embarrassment, feeling down, avoidance of public situations, limitation of recreational activities, worry about other's reactions, worry about the future and sleep disturbances was highly significant. ($p < .03$ to 0.0005). Marked improvement of hyperhidrosis in a patient taking Gabapentin for neuropathic pain was identified, thus this medication warren formal study. (Browne, Donovan & Counihan, 2009; Galway, Ireland)

Of the sessions I attended, highlights included but not limited to:

Therapeutic plenary sessions: These sessions addressed the scientific and clinical relevance that supported early treatment and proactive management of motor and non-motor symptoms of PD at time of

diagnosis was advocated again and again with quality of life considerations.

Teaching courses tracked topics of clinical relevance: movement disorders emergencies (neuroleptic and post-operative), differential diagnosis of parkinsonism, neuroimaging, what's new in MSA (multi system atrophy), dopa-induced dyskinesias – new insight, dystonia update, restless leg syndrome, etc.

Plenary session: cellular and functional anatomy of the basal ganglia, effects of basal ganglia disorder with neuropsychiatric and other non-motor considerations, what's new in PD therapies, sleep and movement disorders, etc.

Parallel sessions were of treatment focus. Questions from the audience addressed the evidence-based benefits of the 4 treatment options, namely pills (drugs, - tablets, liquid), patches (transdermal drug patches), pumps (Continuous Subcutaneous Apomorphine Infusion, Continuous Duodopa Infusion) and pulses (Deep Brain Stimulation).

The availability and accessibility of medical and surgical treatment options were identified as a significant disparity among faculties from around the world. Future strategies for improving functional issues based on latest research findings and evidence, such as pre-clinical gene therapy or stem cell trials, appeared to draw significant interests from clinicians of the developed world.

My attention was drawn to the information from the "Exercises and brain health" session, in which the benefits of voluntary exercises in maintaining and improving brain and body health through scientific evidence, that is, voluntary exercises may enhance neuro stem cell proliferation in the brain was affirmed. The translation of this research finding into clinical practice would be advantageous to everyone, rich or poor, in health or disease.

Movement disorder nurses from Sweden and US presented their perspectives and clinical practice during the session on "Nurses and Movement Disorders – Expanding the quality of care": Nursing strategies to addressing motor concerns in medical and surgical care settings, non-motor concerns, educational and advocacy programs for patients and family caregivers. As a nurse to this field I found the work of these nurses motivating and stimulating in enhancing the care of patients with PD.

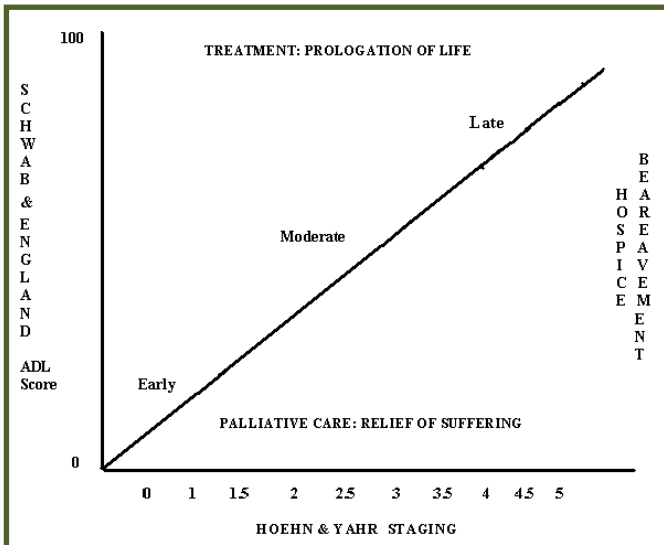
However, none of the work mentioned attuned to care of patients with other movement disorders. Of upmost interest was the perspective on Parkinson's disease



Barbara lester scholarship

Australasian Neuroscience Nurses Association

management model based on the notion of palliative care developed by Blunting-Perry (2006). Ms Mickie Welsh RN PhD explained with a passionate attitude that within this PD model of care the role of the nurse would be in relieving suffering, prolonging and enhancing quality of life (Illustrated in the figure below).



Skills workshops targeting medical faculty staff's patient evaluation skills included eye movements, mental function (Montreal Cognitive Scale versus Mini-Mental Status Exam), electrophysiology, and dysautonomias were extremely popular. Moreover, the session on "Application of the new MDS-UPDRS in practice and research settings" attracted most

delegates; features and caveats included: detailed rating instructions with clinical statement to each level 0 to 4, and items categories (4) - non-motor experiences of daily living, motor experiences of daily living, motor exam and motor complications, and this scale was tested and passed with good reliability, validity and specificity. Trained users would take 30 minutes to complete the rating on one patient, and that training of MDS-UPDRS users would be made available to all MDS members/faculties thus, only those nurses involved in movement disorder research would be included. Watch the web space of MDS announcement after mid 2009.

Concluding thoughts: Attending this international congress reinforced my enthusiasm as a neuroscience nurse in managing patients with Parkinson's disease, updating on current trends of treatment and evidence based practice in this field of nursing, as well as given me the chance to network with colleagues from around the world with the opportunity to Paris, a beautiful and romantic city in Europe. I am now challenged to incorporate the learning from this experience into my daily clinical practice and patient care at large.

I am very honoured to have received the Barbara Lester Scholarship fund for this professional activity. I would like to relate my gratitude with sincere thank you to the Executive of the Australasian Neuroscience Nurses' Association for their support.

Barbara Lester Scholarship Fund

Aim:

- To provide opportunity for an ANNA member who is presenting a verbal paper or poster or who is facilitating a workshop/breakout session at an international, national or local conference to receive financial assistance.

Objectives

- To promote professional development in the field of Neuroscience within Australasia.
- To maintain availability of a scholarship from the ANNA on a yearly basis (that provides equal opportunity) for ANNA members presenting at conference.
- To assist with funding to attend the conference where the presentation will be delivered.

Eligibility Criteria

- Available to full financial members.
- A minimum of 24 months of continuous period of membership is required.
- Priority accorded to members working within an environment where neuroscience patients receive care/management.
- Nurses must have current registration in their state/territory/country.
- The conference presentation or workshop/breakout session must have relevance to the neuroscience specialty.

For complete information and to download application form go to www.anna.asn.au



state news

Australasian Neuroscience Nurses Association

ANNA Victoria Branch

Update – August 2009

Meetings & Education plans

Our AGM in June saw Kellie McIntosh (state secretary) and Philippa Balfour (state treasurer) vacate their positions. We all thank Kellie and Pip for all their work for ANNA Victoria over the last two years! Nigel Wapling was happy to take up the role of state secretary. The position of treasurer will be filled next meeting.

Our next meetings are **August 12th** at the Royal Melbourne Hospital (topic – brain tumours & neurosurgery), and **October** at the Alfred Hospital. Our focus for education delivery at meetings is to provide practical information that neuroscience nurses can apply at the bedside.

Neuroscience Nurses Day

Neurosciences Nurses Day was celebrated at the Austin Hospital and Royal Melbourne Hospital.

Neurology Ward – Austin Hospital

Taking a quick breather from a hectic day, the staff on the neurology ward at the Austin Hospital gathered around a mould of aeroplane jelly shaped as a brain. Awards were presented to the nurses for their special contributions to the wonderful team. Amongst the accolades included the traffic controller award, the hairstylist, fun runner and events organiser.

At the grand finale, an empty skull was produced. Inside went all the nurse's names and the one pulled out won a year's ANNA membership.

Stroke Study Day plans

ANNA Victoria, with the support of the Victorian Stroke Clinical Network, is planning for a Stroke Study Day in November. This will be aimed at nurses and allied health staff caring for stroke patients, and will look at the patient's journey across the continuum of care. We'll have details out soon – keep an eye on the ANNA Victoria page for details.

Liz Mackey

ANNA VIC President

Neuroscience Unit – 4 South – Royal Melbourne Hospital



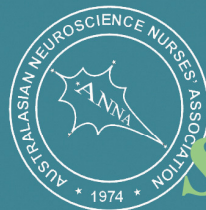
The Educators and Nurse Managers of 4 South held a fabulous afternoon tea for all of the staff to thank them for their fantastic work and commitment to neuroscience nursing.



The educators, Monique Poulter and Chris Nicholson, wore Neuroscience capes and t-shirts highlighting the Brain Power of Neuroscience Nurses!

Subarachnoid Haemorrhage Seminar

Graduates and new neuroscience nurses are invited to the Subarachnoid Haemorrhage Seminar
Epworth Richmond
Wednesday 30th September 2009
2.30pm - 4pm.
Only \$20.
See the ANNA Victoria page at www.anna.asn.au



state news

Australasian Neuroscience Nurses Association

ANNA NSW

President's Report



ANNA NSW has managed to make itself well known over the last 35 years and it is great to see the wide distribution of areas that members come from, many metropolitan hospitals and academic institutions are represented. It would be great to see a further expansion of numbers in hospitals and institutions and in the community and rural centres. To promote ANNA in its 35th year ANNA NSW is putting out a challenge to the members. The facility that increases its numbers the most in the next 6 months will receive a prize from ANNA NSW, such as a book voucher, to buy your unit its "dream" text or authored book. In December we will review the membership and let you know the winner.

This year sees the end to my 3rd year as ANNA NSW President and delegate. At the ANNA NSW AGM this year I will step down from the position

and would like to encourage any member of ANNA NSW interested in taking up the position to contact me to discuss the role. Closer to the AGM, nomination forms will be available and distributed via email.

The **John Sheard Travel Award closing date is the 31st August**. Applications will be considered for travel, registration and/or accommodation expenses associated with attending a professional development activity such as an educational/professional conference, forum, workshop, meeting or short course (excluding formal/higher education course fees); where the content is relevant to neuroscience nursing. There are two \$500 awards or 1x \$1000 award available.

Liz O'Brien,

ANNA NSW President

An Australasian Neuroscience Nurses' Association Evening and ANNA NSW Annual General Meeting

Tuesday 29th September 2009 Time: 1800hrs – 2030hrs

Guest Speaker

Dr Jacqueline Baker (University of Technology Sydney)

Presenting

"The Nurse Practitioner program and its impact on Neuroscience Nursing"

Venue : Level 13 Boardroom

Royal North Shore Hospital,

Pacific Highway, St Leonards

Cost: Free for ANNA members Non members \$10



state news

Australasian Neuroscience Nurses Association

ANNA WA Branch news

We are proud to announce that Sir Charles Gairdner Hospital (SCGH) has been accredited with the prestigious nursing Magnet Hospital Award by American Nurse Credentialing Centre in April 2009.

The tertiary Neuroscience Clinical Division within SCGH is the home base of ANNA WA Branch.

www.nursingaustralia.net

This is the home site for WA Department of Health Postgraduate Neuroscience Nursing Program. The university-accredited program provides multiple award options:

- Graduate Certificate Neuroscience
- Certificate - Neurology, Neurosurgery, Multiple Sclerosis

Enquires: email directly
to scgh.cne@health.wa.gov.au

Harriet Chan – ANNA WA President



noticeboard

Australasian Neuroscience Nurses Association

SA Report

State branch meeting dates for 2009 are:

➤ 23rd November

Meetings will be held at 7pm at the Broadway Hotel, Glenelg.

For further information please contact your SA Branch President on

mwatchman@calvarysa.com.au

Congratulations and good luck to two of our SA ANNA members – Judy Deimel and Sharon Horn who are undertaking further study to qualify as nurse practitioners, one specialising in cognitive health and the other in epilepsy.

Dementia and Delirium group chaired by Judy has also been established at The Queen Elizabeth Hospital to provide evidence based staff education on the recognition, management and evaluation of patient outcomes hospital wide.

Mahlah Watchman - ANNA SA President

POSITIONS VACANT

The following Executive positions will become vacant at the next Annual General Meeting in October 09

**PRESIDENT
TREASURER
WEBMASTER**

**VICE PRESIDENT
JOURNAL EDITOR**

Expressions of interest are welcome for those who are interested in representing the Association and the interest of Neuroscience Nurses both at regional and international levels.

If you would like more information about what is required to be part of the Australasian Neuroscience Nurses Association Executive Committee, please contact a member of the

Executive or your branch delegate for more information or a position description.

PROFESSIONAL STANDARDS REVIEW COMMITTEE

Expression of interest are wanted for those who would like to be a part of the committee responsible for reviewing the Professional Standards of Neuroscience Nursing.

Please contact ANNA Executive at
anna@pams.org.au for further information



noticeboard

Australasian Neuroscience Nurses Association

EDITORIAL ADVISORY BOARD

Calling for expressions of interest to join the journal team. The Australasian Neuroscience Nurses Association is seeking expressions of interest from ANNA members who wish to join the editorial advisory board or become a peer reviewer for the *Australasian Journal of Neuroscience*. Associate editors would provide assistance and advice to the editor and peer reviewers advice to the editor/s and authors on manuscripts submitted for publication.

A position description is available for these positions. Contact ANNA Executive for further information.

Journal editor

The Australasian Neuroscience Nurses Association is seeking expressions of interest from ANNA members who wish to take on the role of Editor of the *Australasian Journal of Neuroscience* from October **2009**. The editor co-ordinates the publication of the Journal through liaison with the Editorial Advisory Board, peer reviewers, ANNA Executive and authors.

A position description including selection criteria is available.

Authors - ON THE HUNT!

The *Australasian Journal of Neuroscience* is in search of authors interested in submitting manuscripts for publication.

New and experienced authors are welcome and support is available for new authors.

Persons who presented at the 2008 ANNA Conference are invited to submit their presentations for review for publication.

The journal is looking for manuscripts in the following areas:

- Literature reviews of subjects related to neuroscience nursing
- Case studies of neuroscience patients, children or adults
- Research reports
- Ethical issues in neuroscience nursing
- Outcome studies
- Quality management
- Systematic reviews of nursing interventions

- Nursing management of neuroscience patients in outpatient clinics (diagnostic or treatment focussed)
- Peri-operative care of the neurosurgical patient
- Emergency management of the neuroscience patient
- Care of persons with chronic neurological problems
- Patient/family education related to neuroscience nursing
- Developing roles in nursing care of neuroscience patients
- New therapies



WHAT'S ON....

Let everyone know about your education

evenings and advertise in Brainstem!

Send information at least 2 months

before the event, including event, date, venue.

If you run out of time a "post-mortem" report would be great too.

Send information to

Renae Baker

secretary@anna.asn.au



membership

Australasian Neuroscience Nurses Association

Welcome to our new members

Victoria	Byiers	NSW	Prince of Wales Hospital
Katrina	Mastello	NSW	Westmead Hospital
Dianne	Adamek	NSW	
Jessica	Prexl	NSW	Liverpool Hospital
Michelle	Forde	NSW	St Vincents Private Hospital
Anne	Leupen	NSW	
Justine	Watkins	NSW	NSCCAHS
Michael	Sham	NSW	Royal North Shore Hospital
Simon	Quinn	NSW	
Janet	Boserio	NSW	Royal Prince Alfred Hospital
Susan	Davies	NZ	
Hyun Mi	Kim	QLD	
Lee	Nolan	QLD	The Townsville Hospital
Judith	Deimel	SA	The Queen Elizabeth Hospital
Geraldine	Clark	SA	Royal Adelaide Hospital
Sue-Ellen	King	SA	Flinders Medical Centre
Karen	Daly	TAS	
Vanessa	Cascone	VIC	Epworth Hospital
Angela	Wilkinson	VIC	Precision Neurosurgery
Christine	Nicholson	VIC	Royal Melbourne Hospital
Sarah	McGregor	VIC	Melbourne Private Hospital
Pok	Ee	VIC	The Alfred Hospital
Josephine	Chadwick	WA	Parkinson's WA

MEMBERSHIP MATTERS

•Please notify ANNA promptly of change of address via the website

OVERDUE: as per your ANNA handbook, if renewal payments are not received within 3 months you are required to rejoin as a new member

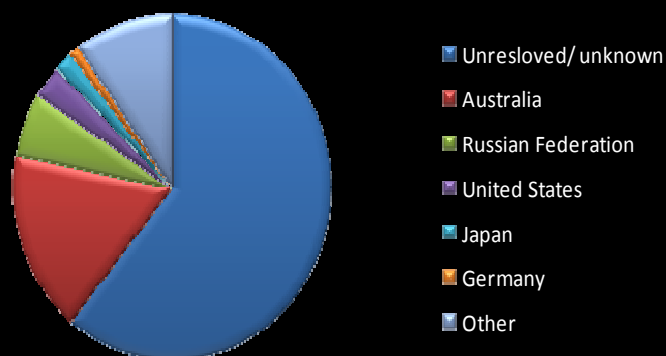
ANNA Professional Standards are posted to all new members and additional copies are available for \$30, contact PAMS

All renewals are \$90 and new members \$100 per annum

All membership specific enquiries can now be directed to PAMS, the Professional Association Management Service,

PHONE 03 9895 4461
FAX 03 9898 0249

ANNA Website Statistics July 2009



	May	June	July
Total website hits	19215	15891	20394
Average hits per hour	25	22	27
Average hits per day	619	529	657

Top downloads in July were Conference brochure and Brainstem newsletter



contacts

Australasian Neuroscience Nurses Association

State Delegates		
QLD	Calling all Queensland members, we urgently need new state delegates to represent you, all positions are currently vacant, president, secretary and treasurer. Please contact ANNA executive	
NSW	Liz O'Brien	eobrien@nscchhs.health.nsw.gov.au
ACT	Sonja Eldridge	Sonja.Eldridge@act.gov.au
VIC	Liz Mackey	annavicbranch@gmail.com
SA	Mahlah Watchman	mwatchman@calvarysa.com.au
WA	Harriet Chan	Harriet.Chan@health.wa.gov.au
NZ	Denise Le Lievre	denisell@adhb.govt.nz

ANNA Contacts		
For all enquiries in the first instance contact PAMS		
ANNA	PO Box 193 Surrey Hills Vic 3127 Phone: 03 9895 4461	anna@pams.org.au Fax: 03 9898 0249
For specific executive enquiries please contact the relevant committee member ** annaexecutive@anna.asn.au is now closed... please update your records.		
President	Tracy Desborough	president@anna.asn.au
Vice President	Sharon Eriksson	vicepresident@anna.asn.au
Treasurer	Karen Tuqiri	treasurer@anna.asn.au
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