



# FSARN Newsletter

Florida State Association of Rehabilitation Nurses

Volume 10, Issue 2

June 2002

## The Chapter President Speaks

*Sylvia Marshall-Nolt*

Awesome! Great! Loved it! More fun than I've had all year! Or in the form of a *Jeopardy* question: "What were the most frequently heard comments at the conclusion of this year's FSARN educational conference?" Our host districts, Palm Coast and West Coast, did a superb job of combining cutting edge speakers, top-notch vendors, and ample social networking events. It was obvious to attendees that Co-Chairs Lisa Pervin, Fran Miller, Ina Fletcher, and the Conference Committee members had invested many hours and much energy into making our 2002 educational conference a memorable one. The FSARN Board and membership are very appreciative of their outstanding effort!

United States Assistant Surgeon General, Dr. Susan Blumenthal, delivered the keynote address "*Critical Public Health Issues for the 21<sup>st</sup> Century*." She challenged us to join in the national initiative of making PREVENTION a front burner issue. She reminded us that the effects of smoking, obesity, risk-taking behaviors (alcohol/substance abuse/sex), and preventable accidents could be altered

through life-style changes. We were encouraged to play a critical role in our nation's hope for a healthier future—health education brings about life saving dividends! I believe that as rehabilitation nurses we are uniquely prepared to teach wellness and prevention in our communities because of our keen awareness of what causes disability and our skills at preparing people to live life to the fullest while preventing complications associated with disability and chronic illness. Let's join in this focus on prevention and wellness through education! A great way to start is by getting involved with ARN's community outreach program, which is being used to educate people across the United States. Two 30-minute programs, *Osteoporosis-Prevention and Management* and *Navigating the Health Care System* are available. ARN will provide a complimentary educator "toolkit" to any chapter/district interested in providing rehab-focused education in their community. The toolkits contain everything needed to put on a quality program in your community.

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## The Chapter President Speaks

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For those unable to attend the FSARN conference, several items to note occurred at the annual members' business meeting. Ina Fletcher, treasurer, announced that the FSARN sales tax exemption status expired on 04/23/02 and has not been renewed by the State. Districts should NOT be using this number—failure to comply could result in prosecution of the person using the exemption. Ina will notify District Presidents and Treasurers when the status has been reactivated. Nominating Chair,

Barbara Martelli, announced that her committee is actively seeking qualified candidates for Chapter slate of officers for the 2003-2005 term. She recognized Robin Walker from the North East District as the new FSARN Membership Chair. Robin was welcomed to this leadership position on the Board and Greg Manger, resigning Chair, was thanked for his service. The proposed change to FSARN bylaws regarding election and term of office passed unanimously. (Refer to the previous edition of our FSARN newsletter

Dorothee Custer, Barbara Askin, Jean Kurkowski, Debbie Hannah, Theresa Nachtsheim, Rose Butler, Kerry Nowroozi, Robin Barron, Cindy Tuman, Susan Novak, Susan Redmon, Marie Poole, Candice Janes, and Marie Povey.

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*Prevention and Wellness  
Practice and Educate . . . talk  
the talk. . . walk the walk*

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Mark your calendar for these future conferences: ARN conference "Succeeding in the Complex World of Rehab" October 16-19, 2002 in Kansas City MO. FSARN conference May 2003 at Hyatt OIA hosted by the SouthWest and Suncoast Districts. ARN conference October 13-16, 2003 in New Orleans. Region 3 conference Spring 2004 in Greenville SC.

The next FSARN Board meeting will be Saturday September 21, 2002 at the Hyatt OIA from 9:30 to 3:00. District Presidents, please be in attendance or send your representative.

Have a great summer!

for details of this motion.)

Our annual conference is the foundation of FSARN's operating budget. Its success allows us to return value to our members in the form of scholarships. Congratulations to these 2002 conference scholarship recipients: Lory Wylot-Thomas,



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## CRRN Review Course

Rehabilitation/Restorative  
Nursing: Concepts and Applica-  
tions

October 9th, 10, 11, 2002.

23 contact hours through  
Florida Board of Nursing #2177.  
Cost \$175 early registration.

Sponsored by Brooks Rehabilita-  
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## Another Great Conference



Lisa Pervin says "Am I having fun yet?"

by Lisa Pervin, RN, CRRN, PhD, Fran Miller, RN, BHS, CRRN, CCM, and Ina Fletcher, ARNP, MSN, CRRN, CM  
It seems like only yesterday when we were writing the article for the 2001 FSARN Conference! This year has gone by quickly and yet another conference has come and gone.

The Palm Coast and West Coast Districts hosted this years conference, "The 25<sup>th</sup> Annual Educational Conference: Building the Future with Bridges from the Past". We are pleased to say that it was a successful conference with much thanks and appreciation to both dis-

tricts, our participants, speakers, and vendors. As many of you know, it takes a lot of hard work and effort on the parts of many to make this conference happen and we could not have done it without any of you. The evaluations were outstanding from both participants and vendors with some great suggestions for topics next year.

Everyone who attended the two social and networking events seem to enjoy themselves and we

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## REGISTERED NURSES

*\* We Deliver Health and Hope \**

Each day brings new possibilities. New ideas. New discoveries. All to be shared. And for the top talent at Shands Rehab Hospital, each day brings new opportunities for the Registered Nurses we seek to join our team. Shands Rehab Hospital, located in Gainesville, FL and affiliated with Shands at the University of Florida, is a 40 bed comprehensive medical rehabilitation hospital serving patients and their families with stroke, brain injury, spinal cord injury, orthopedic conditions, amputation, burns and neurologic conditions such as MS and Guillian-Barre. Patients that are debilitated from other medical conditions are included as part of the patient population served and our patient ages range from adolescent to geriatric. As an interdisciplinary team, we are accredited by both JCAHO and CARE. Our brain and spinal cord injury programs are certified by the Florida Brain and Spinal Cord Injury Program.

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For further information about position qualifications, visit our website at [www.shands.org](http://www.shands.org) ("Jobs at Shands") and apply online or call (352) 265-0441/(800) 325-0367. Shands HealthCare, Attn: Nurse Recruiter, 1329 SW 16th Street, Gainesville, FL 32610. Fax: (352) 265-7948. Email: [jonestl@shands.ufl.edu](mailto:jonestl@shands.ufl.edu)

# SHANDS

Rehab Hospital

[www.shands.org](http://www.shands.org)





## FSARN District Presidents

FSARN is divided into 13 districts covering all corners of the state. Each district operates under the guidance and bylaws of FSARN. Listed below are the districts and the president of each district.

Broward District :	Carol Mangan (954) 428-6133	Pnthr1@aol.com
Central District :	Cheryl Cooper (407) 301-6593	cherylcooper@att.net
Citrus District :	Inactive	
Dade District :	Jane Dacks (305) 385-8290	madsj@aol.com
North Central District :	Pat Radloff (352) 726-2024	gradloff@tampabay.rr.com
Northeast District :	Linda Bertino (904) 288-0906	rainbeaus@msn.com
Palm Coast District :	Karen Dimmick(561) 243-2300	Karen.e.dimick.c864@statefarm.com
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Westcoast District :	Lisa Pervin (727) 596-4738	bbpconsulting@aol.com

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thank **Boehringer Ingelheim** and **PMC Employee Benefits** for sponsoring them. The **American Stroke Association** sponsored the Friday breakfast, **Elan Pharmaceutical** the Friday morning break and **MTI/Medcomp USA** provided those great bags! **Allergan** and **Smith Nephew** provided support and grant money for several of our speakers.

Special thanks also need to made to the following:

**Conference Committee:** Phoebe Corwin, Karen Dimick, Pam Dunn, Pat Fredette, Mary Ann Hill, Lynda Liebowitz, Sandra Lohden, Jill Luhrsen, Sandra Martin, Phyllis Mosley, Theresa Nelson, Marie Povey, Margaret Riccardi, Phyllis Tondelli, and Bonnie Wells

### **Our Platinum Sponsors:**

Allergan, American Stroke Association, Boehringer Ingelheim, and MTI/Medcomp USA, Inc.

**Our Gold Sponsors:** Albors/ Allnet Languages & Transportation, Black Diamond Transportation & Translation, HealthSouth, Orlando Orthopedic Center, PMC Employee Benefits, Inc., The Voice, and Uromed, Inc.

**Our Silver Sponsors:** We had 42 Silver Sponsors, many returning with several new sponsors. We thank you for your continued support of this conference! It is because of all of our sponsors that we are able to provide and do what we do!

**The FSARN Board:** Thanks to the FSARN Board for all of your suggestions, support and help for

this conference. The continual offers of help and appreciation did not go unnoticed!

A special thank you goes to **Sylvia Marshall-Nolt**, our President for her support and ability to keep us focused, provide the needed direction, and her sincerity in all she provides for us.

A lot of fun was had by all and we hope for those of you who attended enjoyed it as much as we did. We pass the baton on to the Southwest and Suncoast Districts for the 2003 Conference and we wish you all the luck and continued success we felt this year!



## A CASE STUDY

### FORWARD:

*"I hope this study will encourage others to get the help they need."  
G.D.*

### HISTORY:

On February 18, 1998, "G.D.," a 24-year-old university student, sustained a gunshot wound to the left parietal region with a track through the midline into the right parietal region. He was in a coma for three days and was later transferred to the inpatient brain injury program at HealthSouth Sunrise Rehabilitation Hospital. He was referred by Vocational Rehabilitation Services to "The Bridge," a HealthSouth outpatient day rehabilitation program. The client was admitted to The Bridge on August 30, 1999 with

the goal of obtaining employment.

When G.D. entered the program, he displayed significant left hemiparesis of upper and lower extremities. With the use of ankle/foot orthotic (AFO), he was able to ambulate at a very slow rate. His left hand was clenched and hung by his side. He demonstrated poor insight, decreased memory function and impaired social pragmatics complicated by rigid thinking. He was completely disinterested in any social interaction and would eat his lunch outside the building away from the other clients and staff. G.D. had dysarthric speech patterns with decreased breath support along with decreased auditory processing skills. His family noted that G.D. would not order in a restaurant and would not venture outside their home without the

security of a family member. He lacked initiative and follow through unless guided by another person. His typical day was spent alone on his computer and shut in from the outside world.

Initially, G.D. was resistant to any therapy that did not include improving the use of the left side of his body. He would display verbally hostile and sullen behavior. Through consistent counseling, urging and positive reinforcement, he began to accept the full range of therapy offered including socializing with other clients during the lunch breaks.

The Bridge treatment team provided individual and group therapy focusing on cognitive skills, memory, auditory processing and brain injury education. He received occupational therapy to develop the left hand as a functional assist and to improve function of his right non-dominant hand. He learned to write with the use of a large grip pen and increased his one-handed typing speed more than 300 percent. He was trained in bed making, hanging up his clothes, meal preparation and money management. He participated in grocery shopping, purchasing of personal items and budgeting of his money. A voice organizer was provided to assist him with his memory and with following a daily schedule. He received speech therapy to

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Melbourne, Florida 32901  
904-984-4600

HEALTHSOUTH Treasure Coast  
Vero Beach, Florida 32960  
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HEALTHSOUTH Sarasota  
Sarasota, FL 34231  
941-921-8600



HEALTHSOUTH Nursing....United in making a Difference

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improve articulation, breath support and increased volume. He received counseling targeting issues of loss and acceptance of current cognitive and physical abilities. Family counseling sessions were provided to educate his parents regarding traumatic brain injury and to provide support to encourage G.D.'s independence.

As G.D. continued to progress, he was included in the Career Motivation group. He learned how to write a resume, approach an employer, how to interview for a job and how to explain his abilities and the need for accommodations in the workplace. He was also placed in a volunteer capacity based on his interests, which included his love of fishing and the outdoors. He continued to receive job coaching throughout his volunteer

work at the International Game Fishing Association (IGFA). This experience enabled him to hone his computer skills and to test himself in a social/work setting. It proved to be a successful venture both socially and functionally and prepared the client for gainful employment.

### OUTCOME:

Upon discharge from The Bridge program, G.D. was employed full-time as a data entry operator at the Broward County Tax Assessor's office. The vocational team had developed this position and job-coached him until he became proficient and independent in completing the duties of the job description. While working this full-time job, he continued to volunteer on the weekends at the IGFA and also enrolled in computer classes.

G.D. remained at the Tax Assessor's office for seven months, completed his computer courses and was offered a paid staff position by the IGFA. At present, he remains employed by the IGFA, attends The Bridge Support Group and Alumni Group and socializes with friends in his spare time. He aspires to return to school and continue his higher education in the future.

### PREPARED BY:

Kenane Colvin, Job Coach & Kathleen Sells, M.Ed, CRC

*HEALTHSOUTH* Sunrise Rehabilitation Hospital, Outpatient Rehabilitation Center and The Bridge



*We all thought the May conference was fun!*



## SIG News Area

The "Tiny but Mighty" Pediatric SIG group met with enthusiasm and energy. We discussed our priorities and the need to increase awareness of the number of children issues impacting Pediatric and Adult Rehabilitation nurses. The following are the issues we felt needed to be brought to the forefront.

First and foremost is there has been a dramatic increase in the number of children with chronic diseases that have been historically adult onset illness. Childhood obesity has become the leading gateway to childhood hypertension, diabetes, high cholesterol, high blood pressure, heart attack and stroke. Rehabilitation nurses will find it increasing necessary to deal with adult issues in younger patients. Patient and parent teaching and training will need to be adapted to address this concern.

Another priority is the successful reintegration of special needs children back into their community after an illness or injury. This involves the realization, acceptance and practical know-how of dealing with the child's physical, mental, spiritual and emotional needs but sharing the practical how to's with the local county school system and the child's neighborhood school. Preparing the family and the necessary school personnel is

essential for a successful transition.

The third issue we identified was that there should be an effort to increase the awareness of nurses regarding the crossover of specialized interest groups. Some specialized nurse groups may not realize they are also functioning as rehabilitation nurses. Some examples are: For example, School Nurses, especially the Exceptional Student Educational Nurses, and Case Managers and Public Health nurses. The sharing of information and resources would benefit the child, family, nurse and community.

In closing the "Tiny but Mighty" SIG Pediatric group would like to invite any interested nurse to join us in discussions and sharing of information.

*By Penny Kehoe, B.S.N., R.N.,  
C.R.R.N. (penny56@yahoo.com)*

The Pain SIG felt that this year has been full of JACHO /pain educational offerings. It was a "tiny, but mighty group" that included: Adelia Schmidt, Cindy Hernandez, Sandy Augusta, and Karen Dimick. We found it helpful to have a meeting and share information at this conference. Received the ARN pamphlet and found it similar to JACHO expectations for all rehab nurses. We need a leader

to continue leading the group in activities throughout the next year.

*By Karen Dimick R.N., C.R.R.N.  
(Karen.e.dimick.c864@statefarm.com)*

The Advanced Practice SIG talked about Prescriptive Privileges, Reimbursement equal to Physicians, and Independent Practice. We feel that FSARN should support the lobbying efforts of FNA in dealing with these ARNP issues.

*By Margaret Riccardi ARNP, CRRN  
(Margaret\_C.Riccardi@uhg.com)*

The other SIG GROUPS had a large group, with the exception of SubAcute. IF anyone is interested in SubAcute issues, please contact Marie Povey RN., CRRN, CCM (marie@povey.org)-SIG CHAIRMAN.

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## One-Hand Typing

*by Lilly Walters*

We help people learn to type with one hand. I have had many people with CP contact me lately.

Here is my current challenge...

In one hand typing, we always try to use both hands when possible. The less able hand is used for the mouse, or track ball, and also tries to do the SHIFT, and the other keys on the side of the keyboard on the less able hand. If the right hand is the less able, it would DELTE, RETURN, SHIFT, maybe CONTROL (etc.)

I usually have those with tremors, or other problems in the less hand able place that hand and arm on a pillow, and allow it hang down towards those keys. This helps keeps it stable.

However, if the right hand is the less able hand, then the numeric keypad is in the way!

I suggest they put something over the top of the numeric keypad. Perhaps a one of those stackable trays, that are meant to lay papers in. On top of that, I suggest a pillow. But these are all suggestions for which I have not had any in the field experience with, nor feedback as to how well it is working.

Have you tried this? Have you tried another solution? Do you have any tips on this issue for me?

For our free monthly e-newsletter on resources and comparison strategies for those with a disability of the hand, especially regarding keyboarding and typing, just e-mail me at the address below.

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### *From the Editor*

I want to thank all those who produce articles for this newsletter. To make everyone's life easier, please don't bother with any formatting in your article, just 'put words on paper', and leave the formatting to me.

On a personal note, please excuse the delay in the publication of this issue, but my father had unexpected abdominal surgery, and I had to assist my mother with his care. The next issue will appear in October.



*We enjoyed being sponsors for your conference!*



## Internet Corner

Lisa Pervin, [bbpconsulting@aol.com](mailto:bbpconsulting@aol.com)

As many of you realize, the newsletter is now posted on the website so if you need an extra copy or want to read it online, can view it there under 'Newsletter' or [www.bbpconsulting//FSARNNLTR.html](http://www.bbpconsulting//FSARNNLTR.html). You will need Adobe Acrobat Reader to view this file for which there is a link there to download it for free.

An update of the 2002 Conference is also on the site under 'Updates' or can go directly to [www.bbpconsulting//FSARNUpdates.html](http://www.bbpconsulting//FSARNUpdates.html) so check it out!

If districts have any information they would like posted such as conferences, etc., please send the information on to me at my email address and will get it posted for you.

ARN ([www.rehabnurse.org](http://www.rehabnurse.org)) has a list-serv to join which is very active and the topics are of a wide range and of interest to most in the field, a great place to get answers from your peers.

### Interesting places to visit

I thought I might put some websites addresses in from the conference. Many of our speakers discussed topics that you might want some additional

information on and they are listed below:

**American Stroke Association:**  
<http://www.strokeassociation.org/>

**American Heart Association:**  
<http://www.americanheart.org/>

**Hospice:** <http://www.hospicenet.org/>

**National Institute of Health:**  
<http://www.nih.gov/news/stemcell/index.htm>

If you have anything you want posted on the website, email me at the above address with FSARN in the subject heading. Viruses still abound and I almost got another one, the 'Klez' virus. So, stay safe, and keep those virus definition files up to date!



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Florida State Association of Rehabilitation Nurses Provider Number is: FBN-3107

**The Provider Number must be on your advertisements of offerings if awarding continuing education hours.**

The Florida State Board of Nursing has approved FSARN as a provider for both traditional and non-traditional programming. The Board stresses that all referenced bibliography must have a currency period of five (5) years unless it is a classic.

### *Conference Pictures*

*Top: terry and Sandy plan on having fun with the evaluations.*

*Middle: Shands Hospital had an upbeat booth!*

*Bottom: Sarasota group looks forward to hosting the 2003 conference.*

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Marie Povey, FSARN Newsletter Editor  
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### **Florida State Association of Rehabilitation Nurses Newsletter Advertising**

The FSARN Newsletter is currently published three times yearly: February, June, and October. It is distributed to members and rehabilitation professionals throughout the state. The newsletter and association is a not-for-profit organization with the purpose of providing educational information, professional events, updates, and resource information. Deadline for submitting articles, professional information, and advertisements is the last day of January, May, and September.

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