

The HYPODERMIC

North Carolina Association of Nursing Students

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Graduation... It's over, WOW!

By Bethany Rouse- NC A&T State University- Greensboro, NC

WOW! Nursing school is finally over. I really can't believe it maybe I am in shock. Sitting there during graduation I just kept thinking about what I needed to do when I got home. Oh wait; there is nothing I have to do. WOW!

For the first week I sat around my house, cleaned my house and felt really lazy. I kept thinking that I needed to do some homework, or read, or study, or something. I just can't believe it is finally over! I have talked on the phone for hours, spent lots of time on my space, and caught up on all the things I had recorded on the DVR that I didn't have time to watch before. This is the life!

This week I am beginning my focused review for NCLEX. I feel so much more relaxed and interested in the material now that I am doing it for myself and not as an assignment for school. I actually want to do questions and look up things. I never thought I would say that! I am so excited about taking the NCLEX and starting my career.

I remember early on in nursing school thinking that it would be forever before I was done. Looking back I can truly say that the days go by slowly but the years go by much more quickly. So to all the sophomores and juniors keep up the hard work. The end will come. Soon you will be where I am now, standing at the end of the tunnel about to begin another phase of life. I wish you luck and hope to see you in the real world!

Mark your calendar!

- ✓ COSL to be held Sept 8, 2007
- ✓ NCANS Fall Conference: October 11-14, 2007
- ✓ Register now for NCANS Fall Conference On-line

- 1 **Gradation:** It's over, WOW!
- 2 Letter from the President and Hypodermic Editor
- 3 **Reflections:** A Student looks back at visiting Africa.
- 4 **Becoming a Leader:** A board members experience serving on the NC BOD.
- 4 **Meet the Board:** Garrett Straughn, your new District V Director
- 4 **NIWI:** NSOY's experience in Washington
- 6 **Know your Meds:** Keep from going Crazy - Antipsychotics

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Letter from the President

Dear Fellow Students,

First I would like to congratulate all of you who have recently graduated. You all should be extremely proud of what you have accomplished and I hope you find complete satisfaction in your future careers. I hope you have enjoyed your time being involved with our state association and I would urge you to join our parent association the North Carolina Nurses Association (NCNA) by visiting www.ncnurses.org. This organization functions as the advocate for the nursing profession as a whole and it is vitally important for you to become a member of this organization. It was once proposed to me that this organization acts as "professional insurance" so please make it a personal priority to protect and advocate for this great profession by joining NCNA.



This past semester has been full of great triumphs for the state association. I would like to thank each and every one of you who attended our Mid-year conference in March. With a little over 200 attendees, this conference was the largest in several years. I hope you enjoyed the focus sessions, exhibit hall, and NCLEX reviews while in attendance but most importantly I would like to thank you for your generous donations during the penny war event. This event raised over 1400 dollars! Congratulations again to Sampson Community College who won this event and received half of the proceeds. The other half of the proceeds is going towards a cause in conjunction with one of our resolutions which will help prevent unintentional injuries in children under the age of 14.

Speaking of resolutions, I am happy to report that both of the resolutions brought forth by North Carolina passed in the House of Delegates back in April at the National Convention in Anaheim California. These resolutions in their entirety will be posted on our website. I would like to thank all of the delegates at both the annual convention in October and the national convention who helped to make this possible. The first resolution titled "Educating the public about education/prevention of unintentional injuries/deaths in children under age 14 years" was first presented by a student at the state level back in October. The state then took that resolution and edited it to meet national standards. After it passed at the national level, its principles will become part of the mission of the national organization for the next 10 years. This is just one way that a personal passion of one student can make a lasting impact at the national level. The other resolution titled "Advocating for an Accurate and Improved professional portrayal of nurses and the nursing profession" was brought forth directly from the University of North Carolina at Chapel Hill. These resolutions not only helped to form the national mission, they helped guide and create the experience for the students who attended the convention. I would urge you all to submit resolutions to the state level to be voted on in the House of Delegates in October. There will be more information on the website shortly on the deadlines as well as proper procedure for submitting these resolutions.

*Sincerely,
Lisa Biltz – President*

Letter from the Editor

Congratulations to my fellow graduates. It has been a road filled with challenges and successes. My family while supportive got quite frustrated at times with my regimented schedule and last minute changes or cramming because I had taken on a bit too much for the week. But today as I sit here and write this my daughter wants to aspire to be a neonatal nurse, my son sits at my feet listening to his heart with my stethoscope and my husband's at the race track working on a Busch East team pursuing his dreams. This issue reflects back on our nursing school experiences. How our schooling influences and affects our family and the experiences we've had including sitting on the board, a students trip to Africa, and life after graduation.



Sincerely, K. Brooke Englert, Hypodermic Editor

Reflections: A Student looks back at visiting Africa.

In August of 2006, 15 students and faculty from the Department of Nursing Education at Catawba Valley Community College in Hickory, NC, made a mission trip to Mwandi, Zambia for 15 days. What follows are my reflections on the trip written down on May 11, 2007.
Kelly R Poovey

It's been nearly a year since our return from Mwandi, Zambia and all of the romantic notions which first drew me to the idea of such an adventure, though tempered with experience, have returned. They had all but vanished with the onset of homesickness and the actuality of being there. Before, I imagined a people pure in heart and motives that were victims of an unseen enemy plaguing them with disease and poverty, waiting to be somehow rescued by our interventions. Now my visions are of smiling cherub faces with outstretched hands so small that they could only grasp a couple of my fingers; of dusty chaffed-skinned African children squealing with delight as they chase one another and me on the soccer pitch, seemingly oblivious to the rags that they wear as clothes or the sorry predicament that is their life and probable future.



I often think about what I gained or lost or learned from the experience of our trip to Zambia. What I lost was the conceited idealism that I held in my mind and the false reality that I tried to pin to the backs of the people we visited. I learned that people are people wherever you go; good and bad. I saw the best in humanity there lived out by the numerous examples of grandparents or nearest relatives taking care of children whose mothers and fathers were dead or too sick with AIDS to be able to provide that care themselves. That same sense of goodness was further displayed by the people working at the mission who receive intermittent pay and for the most part, selflessly give help to the masses. The odds that they face and the immense size of the task that they have before them make the pitiful complaints that I have in my day-to-day life seem contemptible. I gained the realization that the problems facing Zambia and nearly every other AIDS racked country in Africa are very complex. This was a jolt to one accustomed as I was and am to the neat little packages that we Americans seem to need everything wrapped up in. There are no easy answers to achieving solutions to the problems facing Africa. Possibly no one yet knows what the solutions are, much less a way to achieve them. Certainly, Africans

themselves bear the lion's share of the responsibility. But we in the industrialized world bear some responsibility as well. Are we not all brothers and sisters on this earth? Is it right for us to waste things so frivolously while half a world a way toddlers cry out in hunger and in need as their parents lay dying? It is tempting to read the media reports that portray the violence in Africa and feel as though everyone there must be barbaric and cruel, thus justifying our indifference. And true, many are the acts of barbaric and cruel men on that continent. Yet a comparison can be made between the uncivilized acts of men in third-world countries and the subtle and indirect cruelties within the hearts of Americans. Can we consider ourselves superior when we spend millions of dollars each year on plastic surgery, SUV's and mini-mansions for a household of two or three people, when just a small

percentage of that money could be used to alleviate the suffering of innocents in Mwandi or any of the other countless mud-hut villages across the continent of Africa? The fact that we do not openly or directly point a gun or wield a machete or any other blatant weapon does not make the damage we allow with our weapons of omission any less. In fact, it could easily be argued that the good we could do with the wealth that we have would tip the scales in favor of a hopeful life for many of the people of Africa.

I try not to be cynical. I try not to be hypocritical, for I have the knowledge that I am at times no less guilty and no more righteous than others who have not had the opportunity that I have had in visiting and working in Mwandi. I want to trust in the goodness of humanity and have the hope that all that is needed is for them to be made aware. Then as if a light had been turned on, they will see what needs to be done. If it is nothing more than being less wasteful, then that is a step in the right direction. If it is nothing more than being more conscious of their purchase decisions, then that is progress.

I am thankful that I was given the opportunity as a nursing student to go to Mwandi, Zambia. I am a changed and better person because of it. My responsibilities to my fellow man were made clearer and my response to that new reality has been to do what I do each day with the scripture in mind that says "...from everyone who has been given much, much will be demanded..." I long to go back to the people of Mwandi and be a part of their lives again and offer what meager help I can give while I am there. In the meantime I search my soul for ways to contribute here at home.

Becoming a Leader

By: Karlin Haskins, District III Director of NCANS

The decision to become a leader on the state board of the Association of Nursing Students was at first apprehensive, yet exciting. As a first-year nursing student, I did not know what to expect, but I knew I wanted to become the best nurse I could be. Now that I look back, it has been one of the best decisions for my career as a nurse because both my professionalism and leadership skills have developed immensely.



The process for becoming a state leader was quite simple. It required a short essay, recommendations, and giving a short speech to the House of Delegates. These first few steps enhanced my growth as a leader before ever fulfilling the position as District III Director. During the three-day Annual NCANS Convention, the House of Delegate members were able to meet all of the candidates before casting their vote. On the last day of the convention, the newly elected board conducted its first meeting of the year. From then on, the NCANS board of 2006-2007 has had nothing but successes.

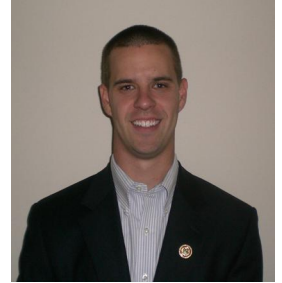
It has truly been an honor to be on the state board and show leadership state-wide. I have had the opportunity to develop my professionalism through networking with members of professional organizations, meeting nursing students across the nation, building relationships with hospitals and universities for future career opportunities, and representing the state of North Carolina on the national level. As a member of NCANS, I was able to travel to both national conferences and be a voting delegate on the resolutions that the National Student Nurses' Association will support for the next ten years. Also as a voting member, I was able to elect the board members who will represent the nursing student voice nationally. When I first came into nursing school, I did not realize how strong of a voice I already had as a nurse professional. The resolutions that were passed at the NSNA conference will affect us all as nurses. Thus, it is vitally important to get involved early in our careers, so that we can build upon each other's ideas to make healthcare better.

Overall, being apart of the North Carolina Association of Nursing Students has been an unforgettable experience and one that has already impacted my nursing career. I will be a better leader, communicator, team player, and healthcare provider due to my involvement in this pre-professional organization. There are also numerous professional organizations for specialty nurses to join. As a nurse, it is our responsibility to make our voices heard in our profession to better the care we give to our patients.

Want to run for office. For more info go to www.ncans.org/board.html/candidatepkg.doc

Meet the Board: Garrett Straughn, the new District V Director.

My name is Garrett Straughn, and I am a senior at the University of North Carolina at Pembroke. I am extremely excited about serving as your NCANS District V Director. I have many new ideas that should make for a great year. I plan on pursuing a career as a CRNA one day. I love to serve others and if you have any questions for me please don't hesitate to contact me.



The NSOY's experience at NIWI By Carolyn Helms

As the NCNAS Nursing student of the Year I had the opportunity to attend the Nurse in Washington Internship (NIWI). This gave me the opportunity to go to Washington and not only network with a 100 other nurses from all over the country but also meet with 10 congressmen and their representatives. With this window of opportunity I was able to sit down and discuss the NCANS Platform for 2006-2007. Today there is a nursing shortage that does not seem to be improving. In 2003 The Nurse Reinvestment Act was passed to increase the amount of students entering the nursing profession. Now in 2007 the problem is not that we don't have enough eligible students to enter the nursing school programs, but we do not have the professors to teach them. This year 42,000 eligible students were denied admission into our nursing schools; this is an issue that must be addressed. The Nurse Reinvestment Act addresses this very issue by offering loans and financial aid for nurses to obtain their advanced education. Details about the NCANS Platform for 2006-2007 can be found through the link on our website. We encourage you to read the platform and help us to promote it through out North Carolina.



If you would like more information or have any questions please contact Carolyn Helms at chelms@email.unc.edu. We also encourage you to consider applying for our Nursing Student of the Year 2007-2008, we see this position accomplishing great things within the next year, so please get involved. Look for an updated scholarship packet on the website soon.

ANTIPSYCHOTICS –major tranquilizers, neuroleptics

- Phenothiazines

Chlorpromazine (Thorazine)
Fluphenazine (Prolixin)
Perphenazine (Trilafon)
Thiordazine (Mellaril)

- Thioxanthene (Navane)
- Haloperidol (Haldol)
- Molindone (Moban)
- Pimozide (Orap)
- Ziprasidone (Geodon)

- Risperidone (Risperdal)
- Loxapine (Loxitane)
- Clozapine (Clozaril)
- Quetiapine (Seroquel)
- Aripiprazole (Abilify)

GENERAL ACTION: block post synaptic dopamine receptors in basal ganglia, hypothalamus, limbic system, brain stem, medulla

USE: treat acute/chronic psychoses, antiemetics, hiccups, tics/vocal utterances w/ tourettes

CONTRAINDICATION: not with blood dyscrasias, Parkinson's, liver/renal or cardiac insufficiencies; caution with elderly, severely ill, respiratory insufficiency, BPH, intestinal obstruction, avoid extreme temps, may lower seizure threshold

TEACHING

- don't stop abruptly
- don't drive
- use sunscreen, and sunglasses
- report weekly for blood draws
- report sore throat, etc
- rise slowly, good oral hygiene
- smoking increases metabolism, requiring adjustment in dosage
- avoid temp changes
- no alcohol, no other meds without dr ok
- be aware of risks, se

OUTCOMES

- no harm to others
- no injury r/t SE
- maintain WBC
- no symptoms of EPS
- maintain wt, activity tolerance, take meds willingly
- verbalize med regimen, importance of taking regularly

PLANNING/ IMPLICATIONS

- Anticholinergic effects – drymouth, blurred vision, constipation, urinary retention
- Nausea – admin w/ food
- **Tardive Dyskinesia – 1st sign bizarre face/tongue movement, difficulty swallowing, long-term client at risk, w/d at first signs** –potentially irreversible damage basal ganglia
- Skin Rash – report to Dr, don't spill liquid on skin
- Sedation – admin at bedtime, decrease dose, don't drive
- Orthostatic hypotension – rise slowly, monitor BP
- Photosensitivity – sunscreen, sunglasses
- Hormonal effects – decreased libido, retrograde ejaculation, gynocomastia, amenorrhea (Can still get pregnant) – interferes with oral contraceptives
- **Hyperglycemia and Diabetes – tx emergent hyperglycemia r/t adverse events in clients using atypical antipsychotics; monitor blood sugar**
- Hypothyroidism
- ECG changes – prolonged QT intervals, VS q shift, observe for dizziness, palpitations
- Reduction of seizure threshold – observe, protect, document
- **Agranulocytosis – occurs within 1st 3 months, sore throat, fever, malaise, CBC – monitor (clozapine – monitor 6mo if <3000WBC or 1500granulocytes d/c therapy)**
- Hypersalivation (clozapine)

Many adverse effects of antipsychotics are reflected in the carriage and movement of body making STANCE an easy reminder

S – sedation
sunlight sensitive
seizure threshold
T – tardive dyskinesia
tachycardia, tachypnea
tremors
A – anticholinergic
aggranulocytosis
N – Neuroleptic Malignant Syndrome
C – cardiac arrhythmias
chemical hepatitis
check blood glucose
E – ExtraPyramidal Symptoms
Effects Affect – flat

From Pharmacology Made Insanely Easy

MAJOR ADVERSE REACTIONS

Extrapyramidal Symptoms

related to relative ↑acetylcholine, ↓dopamine

give anticholinergics - *Cogentin IV (ER), Artane, Benedryl –IM*

S/S:

- pseudo-parkinsonism (tremor, shuffling gait, drooling, rigidity)
1-5 days of start therapy
more common in women, elderly or dehydrated
- akinesia – muscle weakness
- akathisia – restlessness, common in women 50-60 days from start
- dystonia – spasms, common in men <25 (ER)
- oculogyric crisis – uncontrolled rolling back of eyes

Additive Anticholinergic Effects

related to relative ↓ acetylcholine, relative ↑ dopamine

Give dopaminergics

Occurs with hotter weather

S/S:

- Mad as a Hatter
- Red as a Beet
- Dry as a Bone

Neuroleptic Malignant Syndrome – NMS

Onset hours to years with rapid progression within 24-72 hrs

- Routinely assess Temperature
- Observe for parkinsonian symptoms

S/S: – severe parkinsonian muscle rigidity

- hyperpyrexia 107F
- tachycardia and tachypnea
- fluctuation in BP
- diaphoresis
- rapid deterioration of mental status
- stupor, coma

RX:

- D/C med
- monitor VS I&O, LOC
- Dr may order *bromocriptine (Parlodel)*
or *dantrolene(dantrium)*

Typical- older antipsychotics have greater risk side effects especially EPS, AAE and NMS

COSL
Council of State Leaders

- ❖ Learn about holding a board position
- ❖ Learn about upcoming conferences and scholarship opportunities
- ❖ Have fun and meet with other nursing student leaders

**Mark your calendar
for September
8, 2007**

Have your Board work for you...

- ? Need help recruiting members?**
- ? Want someone to help explain what state and national conferences are all about?**
- ? Just want to hear what it's like to sit on the board or what NCANS can do for you?**

Contact your district director for help.

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District II Director
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**North Carolina Association of Nursing Students Annual Conference
October 11-14 , 2007**

Nursing Redefined: **Passionate, **P**owerful, **P**rofessional**
