

Volume 23, Number 1, 2005
Jim Henderson, Editor

In This Issue

ALANA President's Address 2

ALANA Executive Director's Report 4

Autonomic Hyperreflexia: A Case Report 6

Federal Political Director's Report 8

ALANA Annual Spring Meeting Info & Registration 10

First Recipients of the ALANA Outstanding Clinical Preceptor Awards

On behalf of the 1000 members of the ALANA, the Board of Directors, the faculty and staff of our two nurse anesthesia programs, and all students of nurse anesthesia in Alabama, it is my pleasure to announce the recipients of the first Outstanding Clinical Preceptor Awards.

Melissa Kellam Erdemir, Mobile Infirmary, Mobile, Alabama
Mike White, Baptist Shelby Alabaster, Alabama
Melissa Benton, Carraway Methodist, Birmingham, Alabama
Judith Konecny, UAB Hospital, Birmingham, Alabama
Lauren Broussard, Huntsville Hospital, Huntsville, Alabama
Lisa Brascho
Karen Hill
Deb O'Brien
Rodney Overstreet

Congratulations to each of you for your unique contributions to the nurse anesthesia field by your exemplary service to your nurse anesthesia students.

Each of the recipients were issued an award certificate that recognizes them as an Outstanding Clinical Preceptor. In addition, the recipients are invited to attend the ALANA Annual Spring Meeting, where they will be honored during the ALANA Annual Business Meeting. Finally, each of the recipients is awarded an honorarium of \$100 to be applied to tuition at a future educational meeting of the ALANA.

Each nurse anesthesia program is permitted to issue up to five Outstanding Clinical Preceptor Awards per year. The awards will be issued annually during the ALANA celebration of National Nurse Anesthesia Week.

The ALANA Board of Directors would like to thank Dr. Michael Fiedler for proposing this concept of recognizing excellence in Clinical Preceptors.

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**From the Office of the
ALANA President
Jim Henderson, CRNA**

If I had to select a single theme to characterize the activities and direction of the ALANA Board of Directors this year, it would have to be "reaching out." Yes, we have been "reaching out" to individuals and organizations in an attempt to broaden our relationships and increase our circle of influence. Chief among these attempts at reaching out have been with the Alabama Hospital Association, the Alabama Board of Nursing, the Alabama Legislature, and the Alabama State Society of Anesthesiologists.

ASSA and ALANA

On December 2, 2004, the ALANA and the ASSA held our second historic dinner meeting together in Huntsville. Like the first meeting held earlier in the year, this meeting had no set agenda, other than to permit us to get to know each other on a more personal level and establish greater channels of communication. This meeting was attended by ASSA President Mike Gosney, ASSA Secretary - Treasurer Ben Walker, ASSA Executive Director Richard Carson, ALANA President Jim Henderson, ALANA President-elect Brent Ledford, ALANA VP-Secretary David Neal, ALANA Treasurer Joe Williams, and ALANA Executive Director Joe Knight. During this meeting, three significant items were discussed: the ASSA invited the officers of the ALANA Board of Director to attend the annual business meeting of the ASSA in Birmingham on February 26, 2005; the ASSA and ALANA each agreed to contact their respective national association and express an interest in participating in a pilot project of bringing the ThoughtBridge process to the state level; and finally both groups joined together to contribute significantly to a fund to help rebuild a Gadsden couple's house that was devastated by flood.



ASSA and ALANA

Join Together to Help Gadsden Couple

The Alabama State Society of Anesthesiologists and the Alabama Association of Nurse Anesthetists joined together in December to aid a Gadsden couple whose home had been severely damaged by flooding. The Greene's had been living in Birmingham with a daughter while their house was being rebuilt by



volunteers and through donations to their church. The ASSA and ALANA met with the Greene's in Birmingham on December 12th and presented them with a donation. Literally in tears, they thanked us and told us they thought our efforts would complete the work on their home.

Mr. Greene, who was 92 years old, worked as a nursing home administrator and has been retired. Mrs. Greene was an LPN and worked in the nursing home industry also. These two individuals were delightful to talk to and I want to thank all our members on their behalf. This year, during the holiday season, anesthesia providers within Alabama not only helped those undergoing surgery but helped a couple repair their home and make their holiday season more enjoyable.

ThoughtBridge

The ThoughtBridge Process that has brought our two national organizations together may soon be available to the ASSA and ALANA. Following our dinner meeting, the ASSA and ALANA contacted our respective national organizations expressing our interest in being considered to participate in a pilot project to bring the ThoughtBridge Process to the state level. Both national organizations have endorsed these plans. The next step in the process is for the ALANA and ASSA leadership to participate in a conference call with our ThoughtBridge representative scheduled for March 21, 2005. During the conference call, goals and dates and financing for our first formal meeting will be discussed.

Alabama Board of Nursing

Our good relationship with the Alabama Board of Nursing is critical to the mission of the ALANA. We have established strong relationships with Genelle Lee, Executive Director and many of those who serve on the staff. Sharlene Cotton, ABON Practice Consultant is an excellent resource to our ALANA BOD and to our members on matters of nursing practice. Katie Drake-Spear has been most helpful in clarifying matters of continuing education necessary for license renewal. When members of the ALANA Board of Directors come to Montgomery, we do not miss the opportunity to stop by the ABON and say hello.

Alabama Hospital Association

It has become increasingly evident over the past few years that the ALANA and the Alabama Hospital Association have many common goals. On January



20, 2005 a delegation of the ALANA Board of Directors met with the Alabama Hospital Association's Executive Board of Directors at their office in Montgomery. We were warmly received and engaged in a lively and dynamic discussion of various issues of importance to both associations. This was an extremely important meeting. I believe each of the ALANA members would be proud to know how professionally and positively the nurse anesthetists of Alabama were represented and received at this high-level meeting. It is our goal to devote the time and energy necessary to develop this relationship further.

First Annual ALANA Legislative Reception

"Reaching Out" could certainly have been the theme for our First Annual ALANA Legislative Reception held at the RSA Plaza Terrace on February 22, 2005. This event is the culmination of many years of preparation. Two years ago, Brent Ledford, then GRC Chairman, had the foresight to develop a first class legislative packet filled with information about the practice and profession of nurse anesthesia in Alabama. These were the very legislative packets that were distributed to each elected member in Montgomery on the morning of our reception. Tracy Hall, current GRC Chairman and Shannon Scaturro spent countless hours preparing every detail of this reception. Joe Knight did a superb job in planning the agenda and handling the details associated with throwing a party for 150 invited guests. If our mission was to "reach out" to our elected officials and let them know who we are and what we do ~ the mission was a huge success. It is my hope that this will become a recurring annual event.



"Reaching Out" to establish new relationships and strengthen existing relationships will continue to dominate the activities of the ALANA Board of Directors. These activities require a great deal of thought, energy, time, and money. It is our strong belief that these investments of thought, energy, time, and money are investments in the present and future strength of our beloved organization. You can be assured that our efforts will not stop here.

Jim Henderson, CRNA
President, ALANA



From the Office of the Executive Director

Joe Knight, CRNA, JD

A LEGISLATIVE RECEPTION

It was warm for a February morning as the sun started to peek from behind the clouds casting rays that stretched from the sky to the ground in a peaceful golden medley. The 100 mile trip from Birmingham to Montgomery was uneventful for me except for having to dodge a couple of manufactured homes being dragged down the interstate in excess of 75 miles per hour on their way to their final destination. My mission that day was to lead a delegation of about 20 CRNAs and students from all over Alabama, as we were about to host our first ALANA Legislative Reception for our elected officials in Montgomery.

It was around 10:00 a.m. when I first met with Mr. Ed Xides who is the caterer and caretaker

of the RSA Plaza located right across the street from the huge white building that houses the legislative branch of our state government. Ed Xides is a kind man, with thick glasses, cotton white hair who keeps the end of his tie tucked neatly into the top of his pants. He is the "go-to" guy in getting things done.

At 11:00a.m. the delegation of CRNAs met to place the finishing touches on the legislative packets that would be distributed across Capital Hill. We crossed the street and entered the great white building after surrendering our keys, watches, change and all other metal objects in order to gain passage into the hallowed halls. We split into 4 teams and began the search for our assigned legislators. In the chaos that followed, it was often difficult to differentiate



between the elected officials and the lobbyists who seemingly oozed into the hallways like simmering lava overflowing from the crest of the volcano's peak. In spite of the confusion, many contacts were made and greetings exchanged.

At 1:30 p.m., we gathered in the glassed gallery overlooking the floor of the House of Representatives. We witnessed first hand the legislative process at work as the 105 house members went about their business of making laws. To the untrained eye, it was like watching an army of ants scurrying about after their hill had been rudely disturbed by a wayward boot. More than one CRNA wondered aloud how in the world any legislation ever got passed. Suddenly, the action came to a halt as Speaker of the House, Honorable Seth Hammett, made an announcement that welcomed the delegation of the Alabama Association of Nurse Anesthetists. We were asked to stand and were given an ovation from members of the house below as well as from others visiting in the gallery. Just as suddenly, the House returned to its frenzied action. At 2:30 p.m. the process was repeated in the Senate as Lt. Governor Lucy Baxley extended to us the warmest of welcomes.

At 5:00 p.m., the teams of CRNAs reunited on the 6th floor of the RSA Plaza. Each took their assigned places as the reception began. Ed Xides had done it again. The food was elegantly spread on the white clothed tables, the cocktail area was up and running, the chandeliers were adjusted to give just the right amount of ambiance to the room and the DJ's music was un-intrusive. Members of the adjourned House of Representatives began showing up in groups of 3's and 4's with an occasional burst of more than a half a dozen. They were greeted and welcomed by the contingent representing the Alabama Association of Nurse Anesthetists. A little while later, the senate adjourned and a few state senators were extended CRNA hospitality. One of the more interesting and photogenic guests was Lt. Governor Baxley. She came, stayed awhile and let it be known that she intends to be the next Governor of Alabama. According to some recent polls, she is the early leader.

At about 7:30 p.m., all of our guests had vanished into the night. We began gathering our belongings. We shared our thoughts on how well the day had gone and gave ourselves a little pat on the back for pulling off something that we had never done. Your ALANA officers and Board Members are to be congratulated for a job well done. We said our good-byes and wished each other a safe trip back to Birmingham, Mobile, Dothan, Huntsville and to other parts of the state.

It had been a long day. Our feet were tired, but our spirits were high. As we were exiting the banquet area we noticed some activity in the adjoining room. There,

with the same pleasant expression on his face was Ed Xides, busily preparing for his next event, which was to be held at 7:00 a.m. the following morning. He looked up, waved good-by and methodically went about his business with his tie still neatly tucked into the top of his pants.



Autonomic Hyperreflexia: A Case Report



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Graduate Student
Department of Nurse Anesthesia
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Autonomic Hyperreflexia: A Case Report

Autonomic hyperreflexia is a condition that occurs in spinal cord injury (SCI) patients which results in hypertensive crisis. Stimulation below the level of the SCI causes an uncontrolled reflexive sympathetic outflow.¹ A certified registered nurse anesthetist (CRNA) can detect autonomic hyperreflexia by using monitors that are standards of care. Although prevention is the best method of handling autonomic hyperreflexia, it is important that the CRNA is aware of the steps to take in the event autonomic hyperreflexia occurs. Timely recognition and treatment is essential to prevent untoward events.

The case

Mr. M was a 53-year-old male with a T1 level SCI resulting in quadriplegia. He had a history of hypertension, chronic obstructive pulmonary disease (COPD), emphysema, gastric reflux, gastrointestinal bleed, seizure disorder, pancreatitis, and urinary tract infection. An airway evaluation showed a Class I airway and

lack of dentition. He presented to the operating room for cystoscopy from the Intensive Care Unit (ICU). Standard monitors were applied and oxygen was continued via nasal cannula. Cystoscopy was performed under monitored anesthesia care (MAC) with propofol, fentanyl and midazolam. MAC was maintained with continuous IV propofol and spontaneous ventilation. During the procedure, the patient's bladder was filled with normal saline until it was distended. Immediately thereafter, Mr. M's blood pressure went from 162/75 mmHg to 259/135 mmHg. Intravenous fluids were slowed, the blood pressure verified, the surgeon was informed and the anesthesiologist was consulted. Labetolol was the first pharmacological intervention discussed. It was not chosen for treatment due to its beta 2-antagonist activity that is contraindicated in a patient with COPD and emphysema. Nitroglycerine was chosen and 1mg was given IV. After one dose, the patient's blood pressure fell to 118/58 mmHg and stayed between 100 and 120 mmHg systolic. The patient was transferred to PACU and sent to the ICU with no future problems.

Discussion

It is important for anesthesia professionals to understand the causes of autonomic hyperreflexia and how to recognize and treat it. Untreated, it can cause convulsions, cerebral hemorrhage and possibly death.⁴ Autonomic hyperreflexia begins when stimulation enters the spinal column below the level of SCI. Reflex sympathetic activity then occurs without mediation by higher brain centers, specifically the hypothalamus.⁵ Lack of hypothalamic mediation allows uncontrolled vasoconstriction below the level of SCI.¹ Parasympathetic outflow above the SCI results in bradycardia and vasodilation above the level of the injury. Any noxious stimulus that occurs below the spinal cord lesion has the potential to cause this condition. The most common stimulus comes from the lower urinary tract with 75% to 85% coming from bladder distension. The second most common precipitant is from

bowel distention, especially fecal impaction. After these two common triggers, among the less common stimuli are cutaneous such as pressure sores and ingrown toenails. With lesions T6 and above, the splanchnic bed, with a large mass of blood vessels, becomes involved which is believed to play a critical role in development of hypertension.¹ Studies have shown that hypertension occurs in 60-80% of people with lesions T6 and above.² It is also more common in people with complete rather than partial SCIs.¹ Symptoms include headache, flushing, and diaphoresis above the level of the lesion and pallor and piloerection below the lesion.² Reflex bradycardia also can occur.

During the acute or flaccid phase, occurring from the time of injury to 3 weeks after injury, autonomic hyperreflexia is rare, although one study cites an incidence of 5.7% for T6 and above SCIs.³ The onset of autonomic hyperreflexia is usually in the reflex stage of the condition which is between 3 weeks and 12 years after injury.² This is due to the return of autonomic reflexes. Treatment involves removing the noxious stimulus and treating the blood pressure. The first step is to sit the patient upright if possible. This causes a typical orthostatic blood pressure drop that is desired in this case.¹ Next, the noxious stimulus should be removed if possible. Many times this relieves the hypertension without having to use pharmacologic measures. If the systolic blood pressure remains above

150mmHg, then pharmacologic treatment should begin. The best medications to use are nitrates due to their rapid onset and short duration. If a nitrate does not work, then IV sodium nitroprusside infusion can be used. Also, hydralazine, prazosin and clonidine have proven effective.¹ One study showed that magnesium sulfate is also a useful intervention. This is due to its ability to decrease systemic vascular resistance by inhibiting catecholamine release from the adrenal medulla and from adrenergic nerve endings.³

Another population that experiences autonomic hyperreflexia is pregnant women with SCIs during labor and delivery. The incidence is 85% to 90% in women during labor and delivery with spinal cord lesions at or above T6.¹ Since pre-eclampsia is common in pregnant women as well, the CRNA needs to know how to differentiate between the two. With autonomic hyperreflexia, symptoms occur during contraction and subside during uterine relaxation.¹ Both epidural and spinal anesthesia are effective in preventing and treating the condition. Continuous epidural analgesia is recommended to maintain hemodynamic stability.⁴

Prevention of autonomic hyperreflexia is achievable. Education about proper bowel, bladder, and skin care techniques is essential to the patient and/or the caregiver.¹ Vigilance allows the anesthesia provider to recognize symptoms early and to treat appropriately, safely, and effectively.

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From the Office of the Federal Political Director

John Morris, CRNA

I just returned from the AANA's FPD meeting in Dallas, Texas and wish to report the meeting a huge success. This year built on past meetings and continues to stress the importance of having a Grassroots Network for local, state and national issues. This year, again, the importance of establishing and using key contacts for legislators in Alabama was stressed. Asking that they build a more personal relationship with our leaders in Washington at a time when we really don't need their help on a particular issue was stressed. There are plans by our AANA leaders to establish a web site that will make contacting any legislator about any issue much easier, faster, more effective, and allow our D.C. office to know immediately that an individual has acted. It is the hope of AANA leaders that this web site will be up and running by Mid-Year Assembly.

Here in Alabama we have been using, to some degree, the key contact concept for a while now. As FPD for this state, one of my tasks is to select and inform key contacts of legislators and their activities and committee assignments here. ALANA President Jim Henderson asked that I talk a bit about those selections for this FPD update.

One key contact for each representative is required but for most of our officials I have chosen two individuals to serve in this capacity. It affords me the luxury of having twice the opportunity of reaching someone sooner as well as doubling the contact with each member of Congress. Each person selected has had experience either lobbying in Washington and Montgomery or has served the ALANA Board of Directors in some capacity or has a personal relationship with the Congressman.

District 1 – Jo Bonnor – Rep. Mobile

Key Contact: Phil Kendrick and Sara Majors

District 2 – Terry Everett – Rep. Dothan

Key Contact: Tom and Deborah Mallory

District 3 – Mike Rogers – Rep. Anniston

Key Contact: Barry Leath

District 4 – Robert Aderholt – Rep. Haleyville

Key Contact: Mike Harper and John Peeden

District 5 – Robert (Bud) Creamer – Dem. Huntsville

Key Contact: Harry and Tommy O'Bierne

District 6 – Spencer Bachus – Rep. Birmingham

Key Contact: Darrell and Martha Herndon

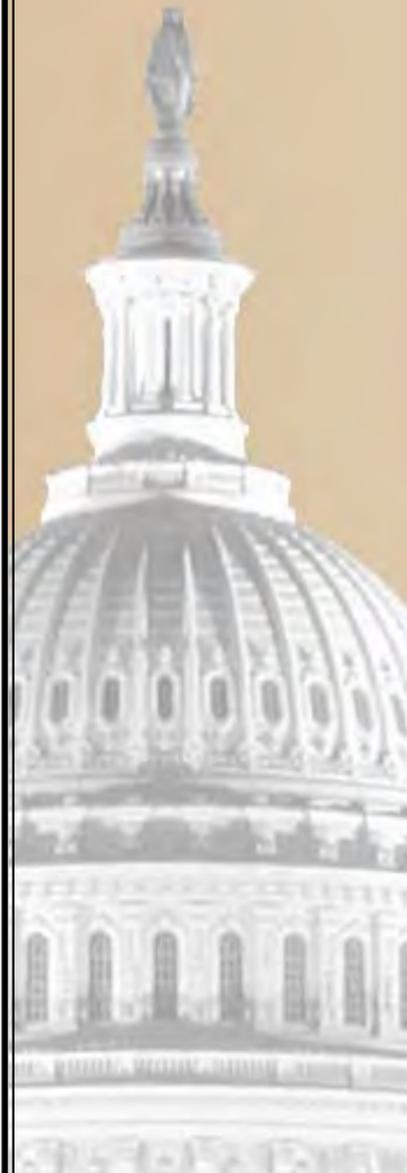
District 7 – Artur Davis – Dem. Birmingham

Key Contact: Cliff Chandler

Senator Shelby – Karen Tidwell and Larry Hornsby

Senator Sessions – John Morris and Joe Knight

I would like to tell briefly why these members were chosen to act as key contacts for ALANA. I also would like for any other members that may be interested in functioning in this capacity please let me know for future reference. It was announced at the recent FPD meeting in Dallas, Texas that we should be able to name and use key contacts for our **state** Representative and Senators in the near future. This is an excellent idea for us here and will be implemented as soon as possible.



District (1) - I have worked with Mr. Kendrick on the Board of Directors in the past and Ms. Majors has been in Washington lobbying in Congress during Mid-year Assembly and is known there. Both are very able individuals and familiar with current issues we face both here in Alabama and nationally.

District (2) - Tom Mallory has served the BOD for several years in a voluntary advisory capacity and currently serves as a member of the Board both he and his wife Deborah, (also a CRNA), are acutely aware of the issues faced daily by CRNAs here.

District (3) - Mr. Leath is politically active locally and hosted fundraisers for Rep. Rogers's election bid. Larry Hornsby also maintains a close personal relationship with Rep. Rogers.



District (4) – Mike Harper CRNA, JD is a long time respected CRNA from the Gadsden area. Mike has addressed legislators in Montgomery and Washington and knows Congressman Aderholt well. John Peeden has served the BOD in the past but most recently served his country in Iraq thank you John for your service and for agreeing to work for your profession in this capacity.

District (5) – Harry and Tommy O'Bierne of Huntsville are both politically active in North Alabama attending political rallies there and reporting to the BOD about candidates running for office from that area. Harry has served the ALANA BOD, hosts a North Alabama educational district seminar and has lobbied with us in Washington at Mid-year Assembly.

District (6) – Darrell and Martha Herndon, both of Birmingham (and both CRNAs), are residents of the same community as Mr. Bachus and have served in the past as contacts for him regarding issues of importance. Darrell is a past ALANA BOD member and remains acutely aware of issues that may affect CRNA practice.

District (7) – Cliff Chandler (the gentle giant) has

agreed to serve as key contact for Rep. Davis. Mr. Chandler has served on the ALANA BOD in the past but took a "leave of absence" from public service to ALANA to raise a family. I am happy that he has agreed to serve us again in this capacity. I know that he has already begun building a relationship with Congressman Davis and I welcome his help and advice.

Senator Shelby – Karen Tidwell, many years ago established a line of communication with Senator Shelby regarding an issue that was important to her personally and has continued to build on the relationship over the years. As many of you know Senator Shelby is a very influential member of Congress and we are fortunate to have Karen serving in this role for ALANA. Mr. Hornsby could act as a key contact for any individual on the above list and would be happy to do so. He has had many face to face meetings with Senator Shelby over the years and continues to maintain a presence in Washington as a Past-President of the AANA.

Senator Sessions – Joe Knight, CRNA, JD worked to raise funds for Senator Sessions's initial election campaign and has had numerous occasions to meet with him both in Washington and here at home. Joe is known quite well by both the Senator and his staff and surely is an asset for us regarding the Senator. As for my self, I have had occasion to meet with Senator Sessions at a number of functions over the years and have attended his fund raisers and met with him in his Washington office. I have contacted his office many times regarding issues of importance to CRNAs in Alabama.

In closing I would like to leave with some comments on a recent trip by members of ALANA. On Feb. 22 a contingency of ALANA BOD's, interested members and students from both Nurse Anesthesia programs visited members of Alabama's Legislators in Montgomery to "let them learn more about CRNA's in Alabama". We traveled there with no other agenda than one of educating them on who we are and what we do and to put a few faces on the profession. Based on the turnout of Legislators, both Senators and Representatives (including the Lieutenant Governor), our inaugural reception effort was a rousing success. Many thanks must go to the entire BOD and especially to Joe Knight, Tracy Hall, Jim Henderson, Brent Ledford, and many others who worked extremely hard to make this a class event. Thanks to all of you, I was proud to be allowed to play a small part.

John Morris, ALANA FPD

ALANA Annual Spring Meeting Information

Welcome

Mark your calendars and complete the registration form for the Annual Spring Meeting of the ALANA to be held in beautiful Destin, Florida at the Sandestin Hilton Beach Resort, April 29 - May 1, 2005. Every year the attendance at this meeting grows bigger and bigger. Is this growth due to the outstanding faculty assembled at this meeting to present the state-of-the-art in anesthesia continuing education? Is it the fabulous accommodations and resort amenities offered at the Sandestin Hilton? Is it the time of year, held at a time when we all need a spring break? Whatever the reason, find out for yourself why the Annual Spring Meeting of the ALANA is consistently rated as one of the top ten anesthesia meetings in the nation!

Speakers

This year's meeting again highlights speakers of both national and regional repute. Among the speakers known nationally are Richard and Sandra Ouellette, Gray McCall, Ken Plitt, and Tim Murry. Our own Jeff Case and Michael Fiedler will be presenting from Alabama. A favorite from last year's meeting, Dr. Steve Dickerson is back to speak to us again. Our special guest is current AANA President Frank Maziariski. This "all-star" faculty has been carefully selected to offer you the best in nurse anesthesia continuing education.

Special Features

Your registration fees include all of the meeting's special features, including: printed syllabus, complimentary continental breakfast, snacks, and a box lunch. Also included is your invitation to the Opening Night Reception and the Beach Party.

Continuing Education Units

This educational program has been approved by the American Association of Nurse Anesthetists for 20 CEUs (prior approval number 27455). The program includes 7 hours of designated pharmacology content.

Accommodations

Reservations should be made directly with the Sandestin Hilton to assure you get the group rate. Rooms blocked for the ALANA are at a discounted group rate of \$194 per night, including tax and fees. Check in time is 4PM and checkout is 11AM. Deadline for receiving rooms at this special pricing is March 28, 2005. Contact the hotel directly to make your reservations and identify yourself as attending this meeting: **1-800-367-1271**

Meeting Fees

AANA Members:	Before 4-15	After 4-15
3 Days:	\$300.00	\$350.00
1 Day:	\$125.00	\$150.00

Non-AANA Members:	Before 4-15	After 4-15
3 Days:	\$375.00	\$425.00
1 Day:	\$175.00	\$200.00

CRNA Students and ALANA Emeritus Members:
No charge

Sponsor-A-Student Program

This year the ALANA is offering each of you an opportunity to show your support for the future of our profession by sponsoring a student to attend the Spring Meeting. The ALANA does not charge a fee for attendance by students, so all of your contributions will be combined to offer additional hotel rooms for the students to share. A ribbon will be added to your nametag designating you as a Sponsor-A-Student Donor. Wear it proudly!

Announcements

March 28, 2005 Deadline for receiving group rate for hotel reservations.

April 15, 2005 Deadline for receiving pre-registration pricing for seminar.

ALANA Annual Spring Meeting Information & Registration

The Sandestin Hilton Beach Resort

This is Northwest Florida's premier luxury Gulf-front hotel. Located along Florida's Emerald Coast, the Hilton Sandestin is situated on a 2,400-acre playground overlooking the most beautiful beaches in the world. The hotel boasts a heated indoor pool, two outdoor pools, two whirlpools, private beach, a full-service spa, salon and fitness center, and the finest dining options, from elegant to casual. Resort amenities include fourteen tennis courts, four championship golf courses, and a full-service marina and bicycle rental. Children's recreational programs and beach equipment rentals are also available.

Opening Reception

Friday, April 29, 2005, 6:00PM

Typically held poolside when weather permits, this casual reception features heavy hors d'oeuvres and cocktails. It is the perfect place to meet your friends and make some new friends, as the sun begins to set over the beautiful Gulf of Mexico.

Beach Party

Saturday, April 30, 2005, 3:30PM

This event has made the ALANA Spring Meeting famous! This is the time to relax at the beach and enjoy seafood treats with a cold beverage. Chat with your friends, classmates, speakers, and board members at this fun-filled event. Thanks to the following sponsors for making this event possible:

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AANA Member: Yes No AANA Number: _____

- I will attend all three days.
AANA Member \$300/ Non-member \$375 _____
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- I will attend two days only.
AANA Member \$250/ Non-member \$350 _____
 Friday & Saturday Saturday & Sunday
- Reserve me a box lunch: Friday Saturday
- I will be staying at the Sandestin Hilton
- I want to Sponsor-A-Student (enter \$50.00) _____
- Optional ALA-CRNA PAC contribution _____
Total _____
- My check to ALANA is enclosed
- Charge to my credit card: MC VISA
Card Number: _____
Expiration date: _____
Name as appears on card: _____

Send completed registration form and payment to:

Bruce Von Hagel, CRNA
613 Trace Crossings Trail
Hoover, Alabama 35244

For those with special needs or questions about the meeting, call Bruce Von Hagel at 205-902-9600 or send e-mail to: vons205@aol.com

Refund policy: Refunds on tuition will be honored upon receipt of a written request prior to April 15, 2005, subject to a \$50.00 cancellation fee.

ALANA Spring Meeting Sandestin Hilton

APRIL 29 - MAY 1, 2005

Alabama Association of Nurse Anesthetists, Inc.
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