

Fiscal Year 2021 AANA Board of Directors to Take Office During Annual Business Meeting



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The official results of the 2020 election (corresponding to Fiscal Year 2021) were posted on the members-only portion of the AANA website on Thursday, May 21, 2020, at 10 a.m. CDT. They will also be announced at the 2020 Annual Business Meeting. This year's election cycle was shortened from the previous four-week cycle to a two-week cycle, which ran from May 5, 2020–May 19, 2020.

A total of 6,329 votes from 47,382 eligible members were cast in this election, representing 13.36% of the members eligible to vote. A total of 6,315 members

voted online this year representing approximately 99.8% of the total votes. A total of 14 paper ballots were received representing approximately 0.2% of the total votes. Look for a state-by-state voting breakdown on page 8 in this *NewsBulletin*.

Presented here are the photographs of the FY2021 AANA Board of Directors.* Also featured are photographs of the newly elected members of the Nominating Committee and Resolutions Committee.

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Time to Renew!

RENEW TODAY

[AANA.com/Renewal](https://www.aana.com/Renewal)

In this month's President's Message, Kate Jansky, MHS, CRNA, APRN, USA LTC (ret) looks back at an unprecedented year as her term of office comes to a close.

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Read this month's Inside the Association section for information about the Virtual AANA Business Meeting, stories about CRNAs on the front lines of the COVID-19 epidemic, and more news about the AANA and its members.

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Suicide ranks as the 10th leading cause of death in the United States, according to the American Foundation for Suicide Prevention. Unfortunately, CRNAs and SRNAs are not exempt from this healthcare crisis. This month's Wellness Milestones column offers vital information on risk factors, warning signs, and resources for help.

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Global Grand Rounds in Nurse Anesthesia

Once a month, grand rounds are held between the Phebe Nurse Anesthesia Program in Liberia and the Northeastern University (NEU) nurse anesthesia program in Boston, along with other invited healthcare provider guests. A different topic is chosen every month, research is presented, and possible solutions are discussed. With the onslaught of the COVID-19 pandemic, the purpose of the grand rounds hasn't changed, but the focus has.

Grand rounds are a methodology of medical education and inpatient care, consisting of presenting the medical problems and treatment of a particular patient to an audience consisting of healthcare providers, students, and educators.

"We started doing grand rounds via video last fall and due to COVID-19, we've increased these from once per month to every week," said Janet Dewan, PhD, MS, CRNA. "Presently, we've had as many as 10 nurses and nurse anesthetists from Liberia joining these sessions."

Prior to COVID-19, some of the cases presented by the Phebe Nurse Anesthesia Program for analyses and discussion include a patient with major facial trauma needing airway management and an emergency abdominal surgery case that arrived on a day when Liberian nurse anesthetists had no inhalation anesthetics available.

"We as American Certified Registered Nurse Anesthetists (CRNAs) presented techniques for total intravenous anesthesia with drugs they have in Liberia like ketamine, fentanyl, and diazepam," explained Dewan.

The Liberian nurse anesthetists are uniquely positioned to share lessons learned from the Ebola crisis with CRNAs in the United States. The Ebola virus, which started in 2014 and continued through June 2016, required many of the same strategies, advanced treatment plans, contact tracing, and other practices that will be needed to defeat COVID-19.

Although the situation with COVID-19 is fluid, the weekly grand rounds have given all those involved a way to share experiences across the world.

"We've encouraged the Liberian nurse anesthetists to prepare equipment such as personal protective equipment. They have supplies in storage related to Ebola, but it would serve them well to start collecting other critical items so they don't make some of the courageous errors that killed clinicians before the extent of the COVID-19 contagion was grasped in China and Europe," said Dewan.

Dewan went on to add, "We also give data from our current experiences and therapies and make suggestions that fit Liberian context and resources. The fact that I, along with CRNAs Donnell Carter, Mary O'Sullivan, and nurse practitioner Eileen Stuart-Shor, who works with anesthesia, have all been to Liberia and worked in their operating rooms and clinical floors makes it possible to conceptualize the issues and confines they face. Some of these limitations include electricity and oxygen, which are unreliable in Liberia." ■

Please Note: The partnership between the Phebe Nurse Anesthesia Program and American CRNAs began nearly five years ago. In 2018 Liberian faculty nurse anesthetists began traveling to Boston for an intensive four-week session that includes classroom and clinical education. The session earns participants a certificate in advanced nurse anesthesia education with experiences at NEU and other clinical sites. The goal is to expand the program to train up to 40 nurse anesthetists annually.

Position Statement and More: Resuming Elective Non-Urgent Gastrointestinal Procedures during the COVID-19 Pandemic

The AANA has created a **new resource webpage** dedicated to compiling relevant references and resources to help facilities and clinicians determine whether the timing of reopening and resuming elective non-urgent cases and the safety of the working environment are appropriate prior to returning to work. www.aana.com/aana-covid-19-resources/resuming-elective-non-urgent-surgical-procedures.

The page includes these downloadable resources:

- AANA infographic
- AANA's position statement
- Guidelines for Elective Surgery in Patients with COVID-19
- Infographic *Developed by Cormac O'Sullivan, PhD, CRNA, ARNP* ■