



9-11-2001

I Heard It Through The Steamline

January 2002

Volume 13, Issue 1

Chapter Newsletter of the Year – 1993, 1995, 1996, 1997, 1999, 2000, 2001

Special Interest Articles:

- This issues inservice is on Anthrax
- Eating right – Grilled Tossed Vegetables
- Spotlight on CS Week – How did you celebrate?

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EDITORIAL BOARD

Paul Hess, Editor
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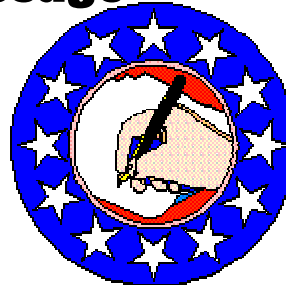
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Susan Avery
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President's Message

A lot has happened to us since my last message. We have been involved in terrorist attacks; watched and felt the horror of someone actually attacking us—THE UNITED STATES OF



AMERICA! Some of us even knew someone who was injured or killed in these attacks. If you lost someone in these attacks, my sympathies to you and your families. If you have someone serving in the Armed Forces fighting these terrorists, let me know so that the chapter can send cards and let them know we are thankful for what they are doing. Look to each other for help in this time of crisis and uncertainty and know that we have always been there for each other and we always will be.

The American Hospital Association web site contains a document that will be of interest to all departments that are trying to get ready for the possibility of chemical or biological warfare. The address is www.aha.org and look under Disaster Readiness. You can also find these documents in the ASHCSP web site www.ashcsp.org.

The ballots for the upcoming elections will be in the mail shortly. Please make sure they are back to me by December 21st. Please take this opportunity to vote. It is so important to have input from you, the chapter members regarding the way you want the chapter to go.

For those of you unable to attend the last meeting, the Board of Directors voted to change the name of the Merit Award to the Bill Dennis Merit Award. We also donated \$1,000.00 to the Bill Dennis Achievement Award at the national level, with a challenge to other chapters in the coming year to meet our pledge of \$500.00. I also sent this to the Region 3 representative to present to the ASHCSP.

The 4th edition of the Technician Training Manual is out. The workbook and Teacher's guide are almost completed. Price is \$70.00 for the manual for members and can be ordered through the web or by form through

the ASHCSP. Be aware that there is someone trying to sell the manual for \$100.00. His name is Randall Reynolds and he is not affiliated with the ASHCSP. If you get a call from this person, try and get as much information as you can and let Chicago know.

I hope that each and every one of you has a joyful and peaceful holiday season. May God bring blessings of untold proportions to you. And may Santa put that new SUV under the tree this year. Take care of yourselves and be safe until we meet again in January for our next meeting. I'm sure it will give good information as always. Don't forget to visit the web page at www.ncahcsp.org and let us know if there is anything that we can do to improve our chapter.

Pam Caudell RN, CNOR
President





“Anthrax Bioterrorism - What we need to know”

By Paul A. Hess, RN, BSN, CRCST

Unfortunately I find it necessary to provide an educational offering regarding this subject. I hope to provide you with the information that we, in the arena that we work, need to know. As a result we can be better prepared to face our challenges.

The organisms that we may face as a result of a bioterrorist's efforts include, as we have seen ANTHRAX (bacillus anthracis). Other organisms that are potential include BOTULINUM TOXIN, PLAGUE, STAPHYLOCOCCAL ENTEROTOXIN B, VENEZUELAN EQUINE ENCEPHALITIS and SMALLPOX. These differ in that some are bacteria and some are virus. Of these some may also be toxins. As a biological weapon their similarities become known. All can be dispersed via aerosolization in particles of 1 to 5 microns in size. They have the ability to remain "...suspended for hours in certain weather conditions and if inhaled will penetrate into distal bronchioles and terminal alveoli of victims. Particles larger than five microns would tend to be filtered out in the upper airway."¹ A micron is one thousandth of a millimeter or

about 0.000039 inch. I have included these organisms because they can be spread easily.

Features of a bioterrorism attack would include:

1. A rapidly increasing disease incidence (hours or days) in a normally healthy population
2. An epidemic curve rising and falling in a short period of time
3. An unusual increase in people with fever or respiratory symptoms seeking treatment
4. An endemic disease emerging quickly at an unusual time
5. Lower attack rates among people who had been indoors compared to those outdoors.
6. Clusters of patients arriving from a single locale
7. Large numbers of rapidly fatal cases
8. Any patient presenting with an uncommon disease such as pulmonary anthrax, tularemia or plague.¹

Bacteria cause disease in humans in two different ways. The first is to invade the tissues. The second is by

producing a poison or toxins. Bacteria are single celled organisms and some, with the right conditions, have the ability to change into spores. A spore can remain dormant for long periods of time and become active when conditions are again favorable for growth. Think of a spore like a plant seed. In the packet, the seed does not germinate and grow. Place that seed into a pot of soil with water and sunlight and viola! You now have a plant. ANTHRAX is dangerous because it is highly lethal, easy to manufacture, relatively easy to develop as a weapon, easily spread in the air over a large area and can be easily stored and is dangerous for a long period of time.¹

ANTHRAX is a large gram-positive, aerobic, sporogenic, encapsulated rod. It most commonly occurs in mammals such as cattle, sheep, goats, camels and antelopes, but can also occur in humans when they are exposed to infected animals or tissue from infected animals. "Anthrax is global. It is more common in developing countries or countries without veterinary public health programs. Certain regions of the world (South and Central America, Southern and Eastern Europe, Asia, Africa, the Caribbean, and the Middle East) report more anthrax in animals than elsewhere."¹ Persons who may have been exposed to anthrax are not contagious, so quarantine is not appropriate. Transmission from person to person is very rare. ANTHRAX spores are being distributed by bioterrorist's in a powder form. ANTHRAX can produce infection in any of three ways identified by the system they enter.

CUTANEOUS ANTHRAX primarily involves the skin and is caused when the spore comes into contact with broken skin. This may be from contact with infected animals, contaminated animal products or from the powdered form that we have seen used as a weapon. CUTANEOUS ANTHRAX manifests itself initially as a red-brown pustule or boil on the skin. This rapidly develops to a larger lesion with serosanguineous drainage. The incubation period is usually 3 to 5 days. CUTANEOUS ANTHRAX responds very well to antibiotics.

GASTROINTESTINAL ANTHRAX is caused by eating contaminated meat. Always cook meats well. A person with this type of ANTHRAX may present with one of two clinical sets of symptoms, abdominal or oropharyngeal.

Abdominal symptoms include nausea, loss of appetite, vomiting and fever followed by abdominal pain, vomiting of blood and possibly severe, bloody diarrhea. On examination there may be wounds in the colon. Oropharyngeal form usually presents with swelling and tissue necrosis (death) in the back of the throat. Symptoms would include sore throat, difficulty swallowing, fever, and swelling of the lymph nodes of the neck and toxemia.¹

INHALATION ANTHRAX is caused by inhaling the ANTHRAX spores. This is the most deadly and the biggest threat. The incubation period is 1 to 6 days and will present with symptoms of viral-like aches and pains, fever, ill feeling (malaise), fatigue, cough and mild chest discomfort followed by severe difficulty breathing. The spore enters the lungs, migrate to the lymph nodes, change to the bacterial form, multiply and produce toxins. These toxins cause bleeding and destruction of structures in the middle of the chest. Isolating the bacteria from the blood, bodily fluids or skin lesions, blood culture or measuring specific antibodies late in the course of the disease makes definitive diagnosis. Untreated the death rate is about 100% but antibiotic treatment has been known to reduce the death rate to about 90%.

If you come into contact with a letter or package that is suspected to contain ANTHRAX spores, DO NOT carry it around and show it to others. DON'T smell it or inspect it closely! DO NOT try to find a plastic container and place it in the bag. If a package is suspected, the person who sensed the problem should carefully set the package on the nearest flat surface, clear the room of all other people and call 911. "Persons who may have been exposed and are potentially contaminated should be decontaminated with soap and copious amounts of water in a shower. All persons who are to be decontaminated should remove their clothing and personal effects and place all items in plastic bags, which should be labeled clearly with the owner's name, contact telephone number and inventory of the bag's contents. Personal items may be kept as evidence in a criminal trial or returned to the owner if the threat is unsubstantiated."¹

Familiarize yourself with your hospital bioterrorism and disaster plans. Plans should include:

1. communication networks and lines of authority required to coordinate on-site care
2. planning for cancellation of non-emergency services and procedures;
3. Identifying sources able to supply vaccines, immune globulin, antibiotics as well as antitoxins.
4. Planning for efficient discharge of patients
5. Developing discharge instructions for non-infectious patients
6. Determining sources for additional medical equipment and supplies
7. Planning for the allocation and re-allocation of scarce equipment
8. Determining ability to handle a sudden increase in the number of cadavers on site.¹

Cleaning and disinfecting of equipment should be accomplished by using principals of Standard Precautions. Always use PPE that protect you from exposure to direct contact with blood or bodily fluids, secretions, excretions. These include gloves, masks and eye protection, and gowns. As always hand washing is mandatory after removing all PPE.

References & Additional Reading

¹ Carol Shenold, RN, BIOTERRORISM: The Newest Nightmare, Managing Infection Control, October 2001, Vol. 1, Number 7; Workhorse Publishing, Scottsdale AZ

¹ *ibid.* Shenold

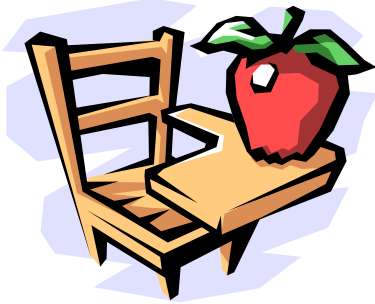
¹ United States Department of Defense, INFORMATION ABOUT THE VACCINE, ANTHRAX THE DISEASE, Anthrax Vaccine Immunization Program Web Site, <http://www.anthrax.osd.mil>

¹ Centers for Disease Control, 10 Things you need to know about anthrax, CNN.com October 29, 2001; <http://www.cnn.com/2001/health/conditions/10/12/anthrax.qanda/>

¹ California Hospital Bioterrorism Response Planning Guide, Clinical Presentation, Gastrointestinal Anthrax, Section 2-A-1- Anthrax; Revised 10/05/2001

¹ Chin J, ed. Control of Communicable Diseases Manual, 17th ed. Washington, DC: American Public Health Association, 2000

¹ *ibid.* Shenold



Post Test

1. Anthrax is the only biological weapon that we need to be concerned about. T F
2. Anthrax had been virtually eliminated as a disease in the United States. T F
3. Spores are a vegetative form of an organism. T F
4. Anthrax is a gram-positive cocci. T F
5. Anthrax is only found in third world countries and as a result of terrorist threats here in the United States. T F
6. Anthrax is highly contagious from person to person. T F
7. Cutaneous anthrax primarily involves the skin and is caused when the spore comes into contact with broken skin. T F
8. If you come into contact with a package suspected to be containing Anthrax you should first carefully set the package on the nearest flat surface. T F
9. A bioterrorism plan should include planning for the cancellation of non-essential services. T F
10. The only PPE that are required for cleaning equipment contaminated with bodily fluids are gloves and masks. T F

Cabarrus College of Health Sciences will offer the CS Preparatory Course for Certification January 8-March 5, 2002. Course will be held on Tuesdays from 6-8 PM.

College is located about 20 minutes north of Charlotte, I 85 to exit 60. Cost is \$120.00 if paid by December 18, 2001. After December 18th, cost will be \$140.00. If interested please contact the CCHS office at 704-783-1555.



Answers are on page 6

To receive 1.0 Contact Hours toward re-certification from NICHSPDP, complete the inservice "quiz" after reading the article. Send the completed "quiz" to:

Margie Morgan
Assistant Director, Sterile Processing
Moore Regional Hospital
P. O. Box 3000
Pinehurst, NC 28374-3000

who will issue a certificate. Be sure to include the information in the required (*) fields below.

NICHSPDP will allow us to give CEU credit for this inservice for five years after publication. Please be aware that this inservice will expire in January 2007.

Your name as you want it to appear on the certificate. Enter the address where you want the certificate to be sent.

***Name:**

Department / Facility:

***Street:**

***City**

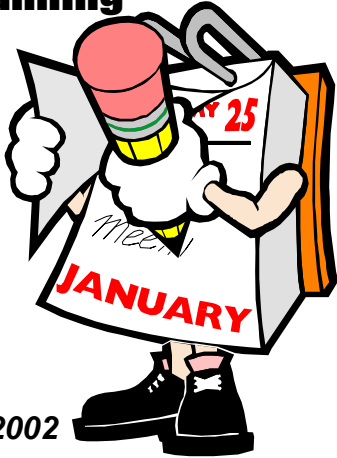
***State**

***Zip**



The North Carolina Association for Hospital Central Service Professionals would like to express it's deepest sympathy to Betty Stubbs on the untimely passing of her husband. We will keep you and your family in our prayers.

Program Planning



January 25th, 2002

Plan to attend the next quarterly meeting to be held on January 25th at the Hawthorne Inn in Winston-Salem. The agenda will be starting with Mr. Greg Stecklein, the Marketing Manager of Surgical and Processing Supplies for Allegiance Healthcare. His presentation will cover "Packaging Selection for Surgical Instrumentation". The second presenter will be Mr. George Jacobs who is the Associate Director of Security at Wake Forest University, Baptist Medical Center. Mr. Jacobs

will present "Disaster Readiness". Sue McManus, RN, Surgical Services Clinical Support at Mission / Saint Joseph's Health in Asheville will close out the day with "SPD – Disaster Emergency Management". We hope to see you there!

Please remember that we will do whatever we can to see that you are comfortable, but the temperature of meeting rooms varies with the environmental conditions and is out of our control. Please dress accordingly.

Board of Directors Meeting
October 2001

At the Board of Directors meeting in October we were asked to readdress the issue of the membership plaques. Based on the production cost, the cost of mailings and storage, we sincerely do not feel that we can continue to provide the plaque. As of January 2002 we will no longer provide the plaques to the membership and liquidate the remaining plaques from our inventory.

Membership Report

As of the close of business at the October meeting we have 243 members. Please welcome our new members.

Congratulations!

On passing the October 20th NICHSPDP Technician certification exam to:

- James Bailey – Fort Bragg
- Netra Bollinger – Rockwell
- Alisha Buelin – Winston-Salem
- Rebecca Cox – Winston-Salem
- Jamie Davis – Jacksonville
- Dollie Edwards – New Bern
- Bessie Edwards – Vanceboro
- Edward Ford – Greensboro
- Frances Gerald – Tabor City
- Jermiah Hendricks – Jacksonville
- Lisa Mammay – Oak Island
- Jerry McLarty – Midway Park
- Steven Paluck – Jacksonville
- Virginia Proulx – Summerfield
- Earnestine Ratliff – Charlotte
- Jill Saunders – Highfalls
- Heriberto Segoviano – Kernersville

On passing the October 20th NICHSPDP Supervisors certification exam to:
Cynthia Holland Cullowhee

On passing the October 20th NICHSPDP Managers certification exam to:
Donald Long - Sylva

The next certification exam will be held on April 20, 2002. The application deadline is March 8th 2002. Visit the NICHSPDP website at <http://www.sterileprocessing.org> for more information.

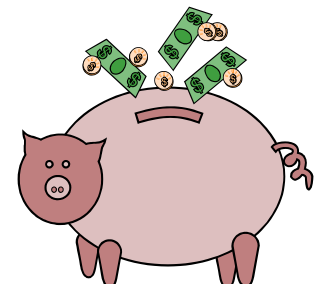
Recipe for your health: Grilled Tossed Vegetables

- 6 cups eggplant, peeled & cubed
- 1 green bell pepper chopped
- 1 large onion chopped
- 1/2 tablespoon margarine
- 1/4 teaspoon basil
- 2 tomatoes
- salt to taste
- pepper to taste
- 1. Peel and cube eggplant to make about 6 cups. Mix with the chopped green pepper and chopped onion.
- 2. Cut 3 pieces of heavy-duty foil about 12 x 18 inches. Divide the eggplant mixture evenly on foil.

- Place 1 teaspoon margarine on mixture; sprinkle with basil, or if preferred use chopped fresh basil. Close foil tightly.
- 3. Place foil packs on grill 3-4 inches from heat; cook for about 35 minutes.
- 4. Chop tomato and place on another piece of foil. Close foil and place on grill the last 15 minutes of eggplant cooking time.
- 5. Remove vegetables from foil; blend together in large bowl. Season to taste with salt and black pepper.

Yield: 4 servings
Each serving provides:
Calories: 75 **Total Fat:** 3.3g
Saturated Fat: 0.6g **Cholesterol:** 0mg
Sodium: 190mg

Treasurer's Report



Roadside Wisdom – Signs seen along life's highway.
 There is more to life than increasing its speed. - Mahatma Gandhi



Region Three Report

**HAVE A VERY HAPPY AND
HEALTHY HOLIDAY SEASON
FROM YOUR REGION 3
DIRECTOR!!!!!!!!!!**

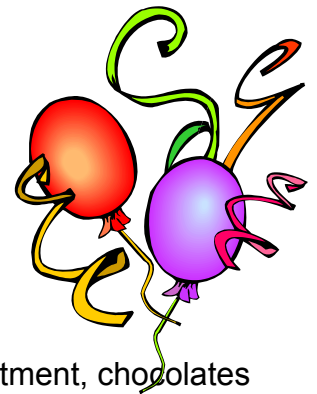
- ❖ If you have not received your Nursing CE's, please sent the form back to Educational Designs. The Planning Committee is looking at not using them next year, because of what they have done this year and last.
 - ❖ New board members are: Rose Seavey president-elect, Etta Bushong, Dave Wise, and Tim Darnel. Please welcome them. Also say good-bye to the board members that are leaving: Arlene Carlo, Mike Murphy, Jean Hodge, and Frank Sizemore. Rose Seavey's region board position will be filled for one year by appointment from President Bryant Broder
 - ❖ Please encourage your chapter members to join the ASHCSP so that we can have a stronger organization. Also notify me if you have any changes in your chapter so that I can send them on to Chicago. Your Chapter report is due into Chicago. If you need a report form contact me or Chicago for one.
 - ❖ Use our web site – www.ashcsp.org. Visit the pages; this will help us have more sponsors. They will look at the number of hits that the website gets and they will feel that it is beneficial for them. It only takes a few minutes to do and it will be very helpful to the Organization.
 - ❖ The 4th edition of the Tech Training Manual is out and the Workbook and teachers guide is almost completed. Friday November 16 someone called me and offered a 4th tech training manual for \$100. His name was Randall Reynolds and I contacted Chicago and they didn't know anything about it. Order only through the Web site or through a form from ASHCSP. The price is \$70 for members and \$90 for nonmembers. That call was very suspicious. If you are contacted by this person, please get as much information and let either Chicago or myself know.
 - ❖ NICHSPDP will be doing testing for certification at the annual conference in San Antonio, Texas. What a nice way to get your certification and attend the San Antonio conference also.
 - ❖ Patti Costello and her staff are willing to go to chapter meetings by driving to them and talk about ASHCSP. If you are willing to have them, please contact Patti and she will try to make arrangements.
- Submitted by *Dottie Conroy*, RN, BS
ASHCSP Region 3 Director



How Did You Celebrate CS Week?

This year the Northeast Medical Center Celebrated CS Week with different vendors providing meals, tee shirts etc. Door prizes were received by all staff members, in addition to Employee Recognition gifts provided by the hospital. SPD staff prepared a storyboard about their job function and photographs of all staff members were displayed throughout the week in the hallway outside the cafeteria. A pocket handout identifying SPD services, candy and pens were given to all who stopped by. SPD staff made a "mini" cookbook with the employee's favorite recipes and these were handed out to the hospital staff who visited our display table.

At New Hanover Regional Medical Center, Sonia Alden coordinated a similar effort to celebrate the work that is done by the CSP Department. At the "Sterilefest" Various tables were set up in the classroom and an open house was held all day. The physicians were invited as well as the staff of the Medical Center. Vendors provided over 200 door prizes that were handed out to the winners of the guessing contests. The first challenge was to guess the number of "Goldfish" crackers in a bowl. The second was to guess the number of arrow locks in a sterilization container. The grand prize was a \$50.00 dinner gift certificate. Everyone was given a brochure that described the function of the department and also presented some vital statistics. Over 200 employees and physicians attended with over half receiving a door prize. Everyone was given candy, pencils, pens and rulers donated by the Medical Center. Within the department, chocolates from "Just Because" were a super hit with the staff.



NHRMC Sterilefest Door Prizes



NHRMC Sterilefest Display

REMEMBER to renew your membership!

Mission Statement

North Carolina Association for Hospital Central Service Professionals will establish itself statewide as the leading educational organization through innovative programs that enhance the development of the Central Service Professionals.

North Carolina Association for Hospital Central Service Professionals

N.C. Baptist Hospital
Medical Center Blvd.
Winston-Salem, NC
27157

E-MAIL:
phwilmnc@ncahcsp.org



We're on the Web!
See us at:
www.ncahcsp.org

Post Test Answer Key

1. F
2. T
3. T
4. F
5. F
6. F
7. T
8. T
9. T
10. F

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