



Venous Education & IV newsletter

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Thank you for your continued readership!

OHCA Convention Come visit us at our CIAS Booth

Please visit us at Booth #317 as we attend our first OHCA convention at the Columbus Convention Center in Columbus, Ohio. The Trade Show hours are Tuesday April 28th: 1:45 p.m. - 3:45 p.m. & Wednesday April 29th: 12:15 p.m. - 2:15 p.m.

Please look for the CIAS sign as noted in our recent attendance at the PADONA & ODONA meetings the end of March. We had a great turnout at those shows and we look forward to meeting with you at the OHCA. If you'd like to schedule an appointment prior to this show to review your IV line placement needs or educational needs, please contact us at 724-980-4817



Bring the postcard (pictured above) or this copy of the VEIN.to our table in order to win a \$50 VISA Gift Card!



OHCA Convention, Columbus, OH Tuesday April 28th & Wednesday April 29th



pictured above: Our booth at the PADONA Convention in March

Got Problems? by Bill RIngle

All companies have problems and it is a normal part of business as nothing stays the same. Successful managers solve their problems. They don't let them linger for weeks, months or even years. They exercise the discipline to solve the problems as they arise.

We all want to put off making hard decisions. It is normal to hope a problem will go away. Recognize that having ongoing, unresolved problems hanging over you drains your energy and impedes your progress. The good news is you can learn to deal with problems in a structured manner.

Prioritize your problems. Tackle the most important one affecting your business first. The hardest part of solving a problem is identifying what the problem really is. The stated problem is often a symptom of the real issue. Look for the root cause; the core issue. Once you clearly identify the real issue, discuss solutions among your team. You will find this easier than identifying the problem. Finally, decide on a course of action and who is accountable. The solution may not be unanimous but you must be decisive. It is more important that you decide than what solution you decide upon.

The bad news for all of us is that there will always be problems. Think of this as job security. That is what we need managers for after all; to deal with issues and problems. There are so many variables in the workplace that nothing stays the same for long. There are staff changes, patient changes, corporate changes and new rules and regulations. The sooner you can accept this inevitable fact of life the easier it will be to think of problems as challenges you can and will solve.

So the good news is that often these problems lead to opportunities. They really can be a means for personal and professional growth. No one is a born problem-solver. We all learn by experience or watching how someone we admire deals with issues. By successfully tackling small problems, we gain confidence to take on larger issues. We learn that if we deal with an issue early we can often "nip it in the bud." By ignoring or delaying the problems they usually get worse. Often this is how big problems start. Other opportunities involve customer problems. Only when you have an issue do you really get to know a customer (patient family). This is your chance to demonstrate that you care, you listen, and you will take corrective action to solve their issue.

(Continued on Page 2)

Skin Tears by Susan M. Cleveland, BSN, RN, WCC



This article was originally printed in the NADONA Director Fall 2014 Issue

Q. What is the best way to treat skin tears?

A: The answer to this question lies in discovering what causes them and determining the optimal treatment for each individual tear. Of course, the best treatment is to prevent tears in the first place, but we know cometimes that can seem nearly impossible.

A skin tear is a separation of the dermis and epidermis, the 2 major layers of human skin. The skin anatomy changes as we age, which plays a primary role in the etiology of skin tears. The dermalepidermal junction, providing structural support and fluid exchange, essentially loses its grip, allowing the layers to diminish their hold and separate or detach, leading to a tearing of the uppermost layer.

Both intrinsic and extrinsic factors increase the risk of skin tears. A comprehensive assessment of both the patient and the wound will lead the charge in deciding our course of action in treatment and prevention.

Knowing the patient's age, medical history, underlying comorbidities, and general health status, you can apply your knowledge of anatomy and the healing process to evaluate potential for would healing. Once you have deter-

mined the cause of injury (where, when and how), adjustments can be made to extrinsic factors that may have played a role in skin tear development.

Your aim in treatment is to preserve the skin flap, protect the surrounding tissue, reapproximate the wound edges (when possible), and reduce the risk of infection and further injury. Various types of dressings are available for treating skin tears based on outcomes and goals of care. Soft silicone/silicone-impregnated dressings facilitate flap security and nontraumatic removal. Foams assist with exudate management. Calcium alginates assist with controlling bleeding. Antimicrobial dressings aid infection control. Roller bandages or tubular garments can be used to secure dressings and provide some moderate protection. Adhesive dressings are not recommended when the periwound skin is fragile.

Many of the skin tears we see occur during daily care activities. Therefore, skin tear management plans must include strategies for preventing development of skin tears or further trauma to existing skin tears. Two key strategies are creating a safe environment, and maintaining skin integrity.

Create a safe environment:

- Provide adequate lighting and remove rugs and excessive furntiture for ambulatory patients.
- Install padding on sharp edges of furniture.
- Use appropriate devices for transfers
- Use lifting devices or slide sheets when repositioning; never use bed sheets to move patients.
- Reduce/eliminate pressure, shearing and friction.
- Encourage patients to wear protective footwear and clothing to reduce the risk of injury.

Maintain skin integrity:

- Avoid using soap, which tends to have a drying effect; instead use pH-friendly cleansing solutions.
- Apply emollients to moisturize and rehydrate dry skin.
- · Control moisture from incontinence.
- Use barrier film or creams to protect vulnerable skin.
- Protect fragile skin with tubular or rolled bandages, long-sleeved clothing, or other skin protection devices.

Skin tears are a concern in our elderly population, but they can be prevented and treated through a facility-wide approach that includes care planning and education.

Got Problems? by Bill RIngle (Continued from Page 1)

The same goes with your boss. When there is a problem in your area, this is the time to demonstrate that you are good; you are capable and will correct the problem. Problems give an effective manager a chance to shine!

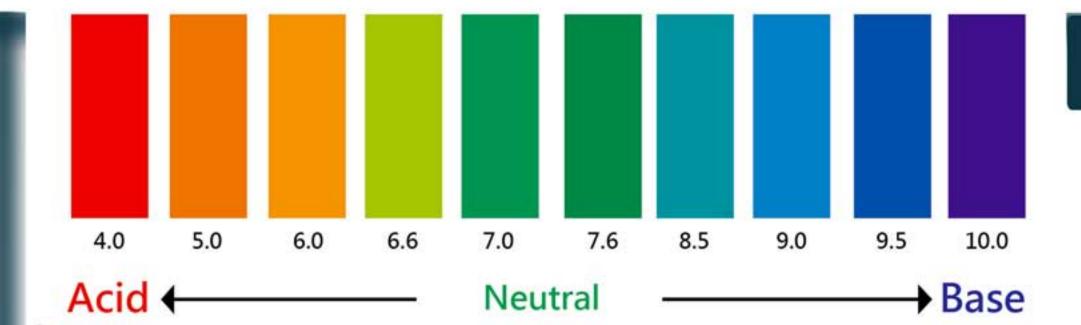
Addressing your problems this way one issue at a time will create new opportunities and move you further on your road to career success.

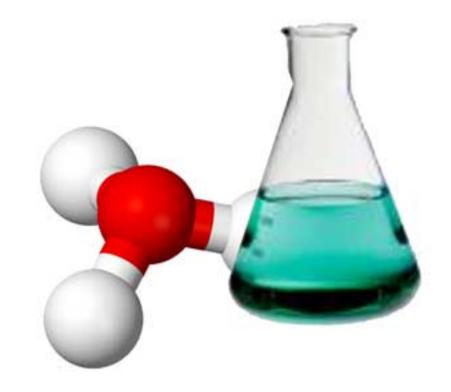
Bill Ringle is founder of SystemRingle ™.

Susan M. Cleveland BSN, RN, WCC, NADONA of Ohio President, is Wound Care Certified through National Association of Wound Care since 2004. Currently she consults in long-term care (LTC) and alternative care settings on wounds, skin care, and other issues. She has been employed in LTC since 1969, spending 25 years in an LTC rehabilitiation facility where the focus was wound healing therapies.

Complete the quiz on the next page with your information for a chance to win either a free Pizza Lunch OR 4 Free passes to the Heinz History Center (a \$60 Value)

Take the Quiz! pH Fun







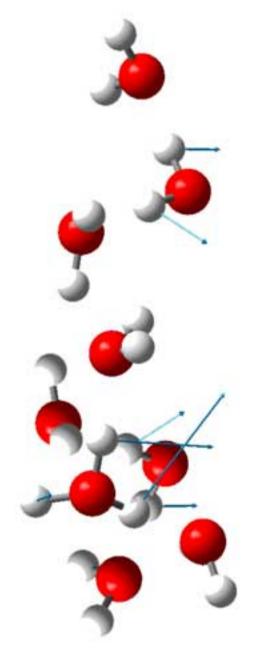
pH reflects hydrogen ion concentration. Normal pH range of blood is 7.35-7.45

The Infusion Nurses Society (INS) Standards of Practice 2011, Standard 32 states that infusates with a pH of Less than 5 or Greater than 9 should NOT be infused via peripheral short or midline catheters.

Match these common IV Meds with their average pH:

- 1. __ Venofer
- 2. __ Ciprofloxacin
- 3. __ Cefazolin
- 4. __ Gentamicin
- 5. __ Ampicillin
- 6. __ Levofloxacin
- 7. __ Cefepime
- 8. __ Unasyn
- 9. __ Zosyn
- 10. __ Vancomycin
- 11. __ Daptomycin
- 12. Ceftazidime

- A. 3.5
- **B**. 4.5
- C. 5.0
- D. 4.8
- E. 9.0
- F. 11.0
- **G**. 4.0
- H. 5.25
- I. 8.0 10.0
- **J.** 5.0 8.0
- K. 5.5 6.8
- L. 3.8



ENTER FOR A CHANCE TO WIN: We will have a drawing from those entered to win either prize for your staff... Fax us this entire page with the quiz complete and the information requested below 724.226.2003 fax

Business/Facility Name:

Contact Name & Title:

Contact Phone Number:

Contact Email Address:

THEVEIN APRIL 2015



Complete Intravenous Access Services, Inc. 828 Front Street Creighton, PA 15030

INSIDE THIS ISSUE:

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- Got Problems? by Bill Ringle
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- Caring for Skin Tears
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Ship to:

CIAS offers your staff Professional IV Educational courses

LPN & RN course work

Since 1994, Complete Intravenous Access Services, Inc has been providing quality IV insertion services to your patients. As well, we are able to design an educational course to meet the needs of training for your staff.

Currently, we offer:

- Basic IV Certification Course in Pennsylvania with 14 CEU's.
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- CADD/PCA Pumps
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If you currently have a need for LPN or RN course work, call us to schedule an appointment to review your needs and create the class to best fit your staff's needs. Our classes range from a one hour class to the two day certification course.

724-980-4817

Have you visited our website yet?



Local Pittsburgh Lady Chosen as Rosie the Riveter for Heinz Exhibit





A local Pittsburgh lady was chosen by The Heinz History Center to represent Rosie the Riveter, as a lifelike model in their upcoming exhibition, titled We Can Do Itl WWII.

Anna B. Bratina (Anthony), 1924-2010, worked at a local Pittsburgh plant, The Union Switch & Signal, known as The Switch.

As you can see by the photo, she was making Colt 45 Pistols, known as the M1911A1 pistol.

Out of the 1,100 people working on the production line, 1,000 were women.

The Heinz History Center is set to open their new exhibition this April 25th. **We Can Do It!** will bring the 1940s to life as the nation commemorates the 75th anniversary of the start of WWII

You can find more information about this exhibition by visiting their site at; http://www.heinzhistorycenter.org/exhibits/we-can-do-it-wwii

Rosie the Riveter- Anna Bratina Anthony is the mother of Charles Anthony, the CIAS Director of Marketing & Business Development. The Heinz History Center has offered four free passes, a value of \$60, to offer you as an alternative prize to our normal pizza lunch prize by filling out the PH Fun Quiz and faxing that entry back to us with a chance to win either the pizza staff lunch or The Heinz History Center passes. Good Luckl

CIAS Quiz Answers (from Page 3)

1. F

7. C

2. G

8. |

3. H

9. K

4. L

10. A

5. E

11. B

6. D

12. J

Joke of the Month

SCIENCE FACT: If you took all of the veins from your body and laid them end to end, you would die.





CIAS Welcomes your resumé if you have the experience. Please fax your resumé to: (724) 226-2003

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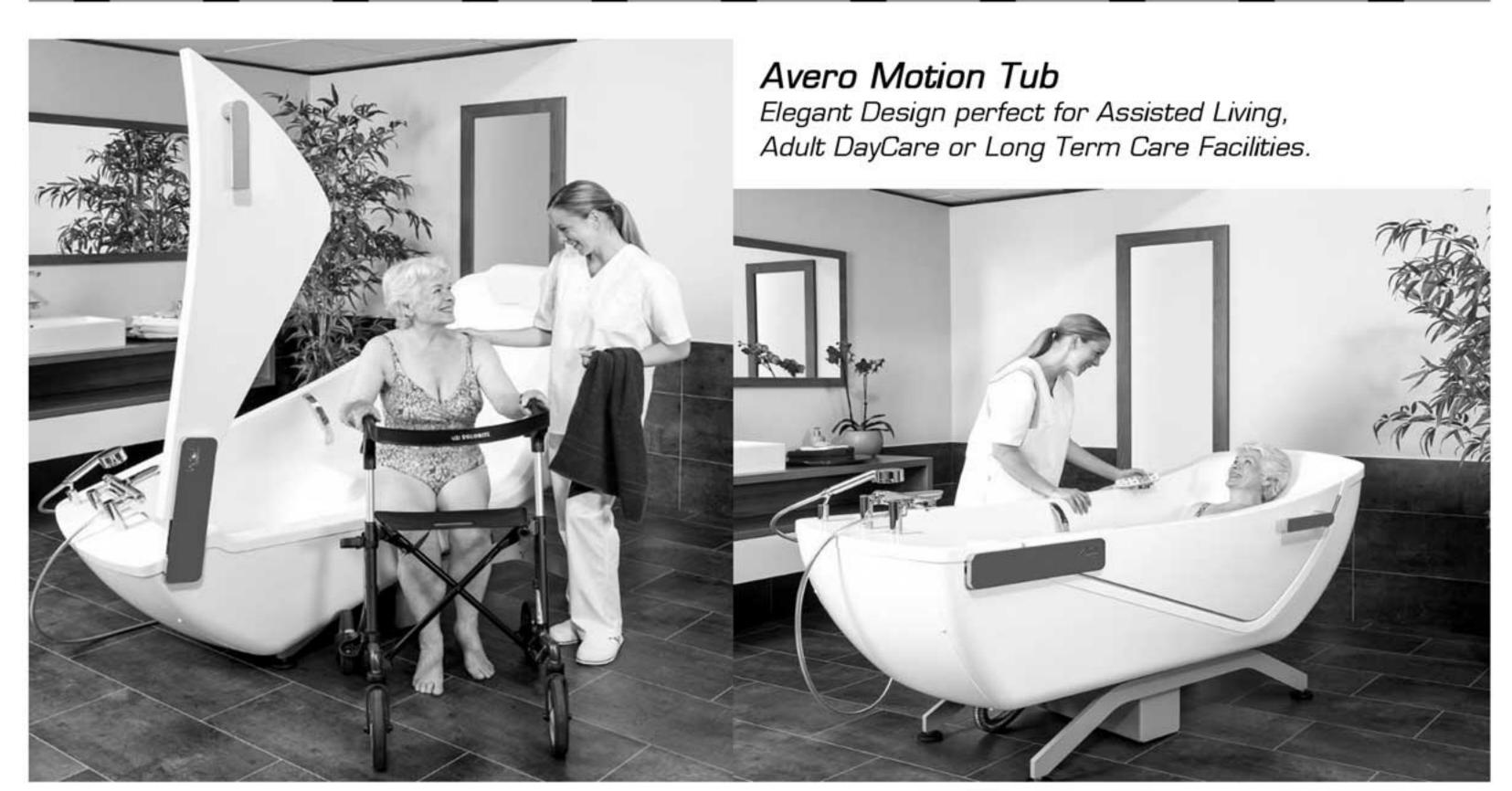
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CIAS BONUS QUIZ

TRUE OR FALSE

1	Vancomycin is a vesicant.
2	Ampicillin is a non-vesicant.
3	It is safe to administer vesicants through short catheters
4	Extravasation of a vesicant can cause tissue necrosis.
5	Midline catheters can remain in place for 60 days.
6	Central line dressing changes can be done using clean technique.
7	LPNs can monitor blood transfusion when an RN supervises.
8	It is necessary to chart sites of unsuccessful venipuncture attempts.
9	IV catheters cannot be a source of septicemia.
10	LPNs can remove midlines.
11	Medications can be added to IV bags that are infusing.
12	LPNs can instill Cath Flo Activase if an RN supervises.
13	Incompatible medications should not be infused via piggyback method.
14	LPNs cannot administer PN
15	Gloves should be changed after each client contact.

For the answers, call 724-980-4817 and leave your name, account name and email address and we will email the answers to you!

