

Napa Valley



Message from the president

Hello NVONS Chapter Members,

2019 has been a very interesting and creative year for our NVONS Chapter, to sum up the highlights of 2019 year.... we've had our membership increase, had our first Oncology Nurses Month Celebration presented by our very own NVONS Chapter members. We've branded our NVONS Chapter by having our own NVONS white thermos. Our 6th Annual Ed Symposium is bigger, better, and very interactive. There was a lot of creativity in our Passport station. Our presentation brochure was professionally crafted providing lots of information. The NVONS booth was informative and fun, with a photo booth, and we had more vendor participation, in which they were quite happy with all of the nurses who attended visiting their booths. We've also starting marketing and branding our NVONS Logo in various apparels: jacket fleeces, sweaters, and shirts, labelled notebooks, folders, and giveaways. So, I encourage our members to invest in your chapter and be proud of belonging to the NVONS Chapter. So, with the advent of the 2020 year, I would like to welcome into our NVONS leadership some new leaders: President elect: Tanya Brubaker, Treasurer: Karen Stilwell, and Director at Large: Diana Moises. As we venture into the New Year, I encourage all members to support and participate in our growing committees to be active committee members. We could always use your help and assistance wherever needed. I am very excited to see what our future holds as we move onto the New Year.

Always ,

your president

Fe "Sally" Gumay C. Castillo-Recile



Sweater contest: winner: Tricia Wagner, the ELF



NVONS Election Results

Congratulations!!!

President-Elect

Tanya Brubaker,
RN,BSN,MBA,OCN,CCRP



Secretary/Treasurer

Karen Stilwell, RN,MSN,AOCNS



NVONS strongly encourages all members to vote during election time.

ONS Election opens January 6, 2020, closes January 31, 2020.
 Go to www.ons.org

SUMMARY OF Lecture on Febrile Neutropenia

by Dr. Wayne Keiser, August 26, 2019

How do regimens, risk factors, and real life- Impact your patient's risk of Febrile Neutropenia?

Febrile neutropenia (FN) is a serious complication of cancer chemotherapy that can lead to delays in treatment and necessary dose reductions of chemotherapy, which compromise treatment efficacy. FN is characterized by a reduction of neutrophils below normal counts of < 1000 accompanied by fever. Almost 8 out of 10 patients with FN require hospitalization. With ANC < 1000, there is 10% chance of being hospitalized. The average length of stay (LOS) for a patient with FN is 9.6 days. And for patients who have NHL and MM, these patients have longer LOS in the hospital. Clearly, FN hospitalizations are associated with prolonged LOS. FN related care could be costly; an average cost for FN hospitalization is about \$24,770.

High risk of FN- patient with chemo regimen (20% risk).
 Intermediate risk-(10-20%)

Risk Factors that can increase risk of FN: Cytopenia, Age > 65, COPD, Liver disease, Renal disease, CV disease, DM, Poor performance status (ECOG >2), Prior chemotherapy, Prior radiation, Poor nutritional status, HIV, Open wounds, Elevated LDH

NCCN guidelines: If your patient is on intermediate-risk regimen and has 1 or more risk factors, consider Neulasta.

Why do we need to assess the risk factors of patients receiving myelosuppressant chemotherapy? The insurance companies require risk factor documentation in order to approve prior authorizations. Documentation of ICD-10 codes for FN risk factors is important for the insurance to approve proper treatment- like Neulasta. Neulasta if given after the day of chemo, has been used to help reduce the risk of infection and incidence FN and FN related events. The healthcare provider will apply the OBI (on-body injector) to the patient skin after chemo treatment and the Neulasta dose will be automatically given to the patient. Most patients prefer to receive their dose at home instead of going back to the doctor's office.

Submitted by Eva Orcullo, RN, MSN, OCN

A Poem by J Joy Griffith

I touched a heart, I know I did, I held it in my hand

I touched a soul, and it was warm, The soul of a dying
man

I think I made it easier, God I pray it's true

So many things need to be said but the words were just
few

So I held his hand, I kept him safe, I comforted his
moan

I stayed with him, I promised him he would not die
alone,

He told me of his childhood, his family, his wife

Just for a while, he forgot his pain and the losing of his
life

With one last breath he turned to me and

gave me weakened smile, he whispered to me

“thank you, for staying with me for a while”

He shut his eyes and sighed his last

His life and made whole

For I touched a heart, I know I did

And I even touched his soul



Is the “Bright Side of Life” key to longevity
Medscape. August 28, 2019

Do we tell our patients or someone sick to “look at the bright side of life? Better yet, let’s ask ourselves, are we optimistic in life? Greater optimism predicts greater career success, better social relations, better health. Optimistic people are fully engaged and motivated versus pessimistic people disengage from efforts. Boston scientists as posted in the Proceedings of the National Academy of Sciences believe that higher levels of optimism are linked to longer lives. (1). There was greater result of optimism when research subjects were asked how strongly they agreed with statements “in certain times, I usually expect the best” and “overall I expect more good things to happen to me than bad”. Researchers used the Nurses’ Health Study and Veterans Affairs Normative Aging Study. There you have it, being positive is highly linked to longer survival. Next question: can we change individual’s level of optimism?. Evidence shows it can be changed. There are other research studies that complementary alternative strategies such as journaling, meditation, and cognitive-behavioral therapy that can realize these goals. (2,3). We certainly can change ourselves to be optimistic therefore we can affect how our patients care for themselves.

1. Lee et al. Optimism is associated with exceptional longevity in 2 epidemiological cohorts of men and women. Aug.26, 2019Proc Natl Acad Sci USA.
2. Meevissen et al. Become more optimistic by imagining a best possible self:effects of 2 weeks intervention> J Behav Ther Exp Psychiatry. 2011;42:371-378
3. Peters et al. Manipulating Optimism. Can imagining a best possible self be used to increase positive future expectancies. J Post Psychol. 2010;5:204-211

By: A.Terrado-Locquiao,RN,MSN,CNS

2020 NVONS Chapter Board Members

President: Sally Recile

srecile@gmail.com

President-elect: Tanya Brubaker

brubakertanya@gmail.com

Treasurer/Secretary:Karen Stilwell

kmstilwell@sbcglobal.net

Vice-President: AnneMcCaffey

halanne1038@comcast.net

Special Events/Membership Chair:

Lori Durbin:itslori55@gmail.com

Nominating Chair: Grace Palka

glp1959@att.net

Advocacy Liaison: Yvonne D’Angelo

yvonneda@gmail.com

Newsletter Editor?BRN Provider:

Alicia Terrado-Locquiao

asterloc@gmail.com

Scholarship Chair: Jaya D’Silva

jayadsilva@yahoo.com

Student Liaison: Eva Orcullo

esocalifornia@gmail.com

Directors at Large:

Joanne Wakerlin

jwakerlin@gmail.com

Diana Moises

jannah2@comcast.net

VC Editor: Robbie Woolley

robbie.woolley@gmail.com