



THE STATUS POST

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HEALTH HEADLINES

HEALTHCARE SPENDING GROWTH PEAKS

Spending growth reaches a ten year high as the Affordable Care Act plays its role

by Tyre Hodges

In the fourth quarter of 2013, health care spending increased faster than it has in the last decade. According to the Census Bureau, the rise in spending was largely due to increasing hospital revenues. Hospitals saw a profit margin \$8 billion dollars greater than in the previous four quarters combined. This may only be a peek at the higher healthcare costs consumers have to look forward to.

This increase is a drastic difference from the past few years. Health care prices and spending advanced incredibly slowly with the lagging economy. A great deal of Americans, especially those who were unemployed, lived without health insurance or limited their health-care spending during the recession. Moreover, provisions in the Affordable Care Act encouraged hospitals to increase efficiency and lessen patient readmissions. In fact, economists at the Royal Bank of Scotland have called the \$8 billion dollar hospital revenue increase puzzling, as inpatient days have dropped by 1% in the last quarter. With many insurance companies turning costs over to patients, there were more reasons than ever



Photo Credit: aeonnexus.com

before to limit trips to the doctor. But these days, this is all changing.

Since 2011, 2.6 million jobs have been added to the market, and unemployment has fallen nearly two percent. More people may now have the resources to afford those necessary annual check-ups, as well as any additional hospital visits. The mandate in the Affordable Care Act for all Americans to have health care coverage or pay a fine, will likely play a role in the increases in spending to come. An estimated 11 million Americans will be signing up for health insurance this year. The Centers for Medicare & Medicaid Services are already expecting healthcare spending to rise by 6.1% this year. Another factor in the increase in spending last year was low medi-

cal inflation. In January, medical inflation was at 0.9%, a half-century low for the nation. This was heavily related to the enormous number of drug patents that expired in 2011 and 2012. Cheaper generic drugs flooded the market to replace their expensive brand-name counterparts.

Still, some experts do not believe that the U.S. will see a further healthcare spending increase in the years to come. Larry Van Horn, executive director of health affairs at the Vanderbilt University Owen Graduate School of Management, argues that the transfer of costs to the patient will ultimately drive down health-care spending. It remains to be seen just what effects the Affordable Care Act and new policies of health insurance companies will have on the American people.



Source: Davidson, P. (2014, April 1). Health care spending growth hits 10-year high. USA Today. Retrieved May 2, 2014, from <http://www.usatoday.com/story/money/business/2014/03/30/health-care-spending/7007987/>

Honor Society of Nursing Announces Global Panel

by Dong Say Tan

The organizational mission of Sigma Theta Tau International is to advance world healthcare and to celebrate nursing accomplishments in leadership and service. In an effort to meet this goal, the honor society of nursing has created the Global Advisory Panel on the Future of Nursing (GAPFON); a panel of international nursing leaders advocating for the future of nursing in an effort to improve and enhance world health. One of the chairs, Dr. Martha N. Hill says “GAPFON will be a catalyst to stimulate partnerships and collaborations to advance global health outcomes. I am excited and honored to chair this initiative and look forward to working with

nurses, other health professionals, and key stakeholders who are committed to improving global health domestically and internationally.”

The first meeting took place in Basel, Switzerland in March. Members discussed reform/advocacy in healthcare, and improvements in policy, education, work, and leadership. Moving forward, GAPFON will hold a series of meetings with representatives from all over the world to obtain knowledge and social, economic, cultural, and political insight related to important healthcare issues. Using this information, the panel will then establish strategies working toward the improvement of global health. One member of the

panel, Dr. Rowaida Al-Ma'aitah, says “I believe the time is right for a sharper vision and collective voice for nurses and midwives all over the world to influence the global health agenda. GAPFON is a powerful vehicle for paving the future of nurses’ influence in achieving global health outcomes.” The creation of GAPFON holds much potential for changing the future of nursing. As future nurses, the innovations from GAPFON may be integrated into our nursing practice, change our patient care and healthcare systems, and even global healthcare.

Source: . (n.d.) . Retrieved May 13, 2014, from <http://www.nzdoctor.co.nz/un-doctored/2014/april-2014/02/the-future-of-nursing-stti-announces-new-global-health-initiative.aspx>

NATIONAL

Finding A Solution: RWJF’s “Charting Nursing’s Future”

by Teuta Berisha

The Robert Wood Johnson Foundation offers a new “Charting Nursing’s Future” brief that addresses the issues central to nursing and the health care system. According to Maryjoan D. Ladden, RN, PhD, FAAN, senior program officer at RWJF, “Some of the changes needed are systemic and will require collaboration among nurses, doctors, educators, policymakers, patients and others.” The brief outlines efforts to monitor and improve all aspects of health care delivery, starting with maintaining a highly educated, well-trained workforce.

Equally important is creating a work culture that fosters teamwork



Photo Credit: www.theamericannurse.org

and collaboration among health care professionals, as well as establishing strong nursing leadership at all levels of the organization to ultimately offer the highest quality

of care for patients and their families. Developing effective policies can also make a significant impact in improving nursing practice and patient outcome. For instance, mandating safe nurse-to-patient ratios. Thus far, California is the only state to limit the number of patients assigned to a nurse in acute care hospitals. By and large, the “Charting Nurse’s Future” brief will lead to progress not only in keeping patients safe but also in transforming the work environment of nurses.

Source: Report examines efforts to create better RN work environments. (n.d.). Nurse. Retrieved May 3, 2014, from <http://news.nurse.com/article/20140401/NATIONAL06/140331006#.U2VQgsSXTmB>

NYC Measles Outbreak Linked to Medical Facilities

by Renata Berrios

The unfortunate measles outbreak experienced in New York City may have been spread by the failure of medical workers to recognize the disease and immediately institute the necessary isolation precautions. Although no cases had previously been traced to a hospital, on March 12, according to a health department spokeswoman, New York-Presbyterian Hospital/Columbia Medical Center, sent an e-mail to its staff saying that several patients had sought treatment for measles there, “resulting in nearly 600 patients being potentially exposed” to the disease. The e-mail added that many of NYP’s clinical staff had never seen a case of measles. Educational materials on the diagnosis of the disease as well as graphic pictures of the character-

istic measles rash were also included.

Dr. Jay Varma, the health department’s deputy commissioner for disease control, notes that fingers are not being pointed at any particular institution, since incidents like this one are not uncommon in hospitals. However, measles is one of the most contagious diseases and can be spread through airborne droplets, even as much as two hours after an infected person has left the room. Thus, early recognition and prompt action are crucial in preventing its spread. Since the outbreak was detected, nine children and eleven adults have been infected: 16 in Manhattan, 3 in the Bronx, and 1 in Brooklyn.

The best way to prevent the spread of measles, a disease that was considered eradicated in the United States since

2000, is vaccination. However, only three of the eleven adults had records proving vaccination; of the nine children, seven were too young to receive the vaccine and the other two had not received it because of parental refusal.



Photo Credit: <http://www.theyeshivaworld.com/wp-content/uploads/2013/05/meas.jpg>

Source: Hartocollis, A. (2014, March 18). Measles Outbreak May Have Spread in Medical Facilities, a New York City Official Says. *The New York Times*. Retrieved May 6, 2014, from http://www.nytimes.com/2014/03/19/nyregion/measles-outbreak-in-new-york-may-have-spread-in-medical-facilities.html?_r=2

An Officer and a Drug Kit

New York Combats Opiate Overdoses With Naloxone Drug Kits



Photo Credit: <http://www.mytwintiers.com/media/lib/20/7/d/b/7db5e2c2-dba7-4946-a905-f778b7a21257/Original.jpg>

In an attempt to decrease the number of soaring deaths due to overdoses from heroin and prescribed opioids, Attorney General Eric T. Schneiderman has proposed that law enforcement officers across New York State carry drug kits. Schneiderman plans to use money seized from drug dealers in both criminal and civil cases to fund this

program, which will cost approximately \$5 million. These kits will include the antidote drug, Naloxone, and will be available to every state and local officer in New York, upon the completion of training.

Naloxone, also known by its brand name Narcan, is a very potent antidote that prevents the binding of the opiates to the receptors, thereby preventing the fatal respiratory depression characteristic of the opiate overdose. It restores breathing within minutes and allows for transport to the hospital.

This is not the first time officials have enacted such a plan; in 2012, a pilot program in Suffolk County trained local emergency medical technicians and police officers to administer the

By Maria Ponce

drug. The chief surgeon and medical director for the Suffolk County Police Department stated, “Within the first week, there were five saves.” The New York Police Department has already trained approximately 180 officers in Staten Island and seeks to expand the program across the borough and the state. The administrator of the drug will not be liable, because Naloxone is not addictive and also non-toxic. Additionally, the state’s Good Samaritan law will protect those who call the police during an overdose, if they were using illegal drugs.

Source: Goodman, J. (2014, April 2). Proposal Would Provide New York Police With Kits to Combat Overdoses. *The New York Times*. Retrieved May 6, 2014, from <http://www.nytimes.com/2014/04/03/nyregion/new-york-program-to-help-police-get-a-kit-to-combat-overdoses>.

Sigma Theta Tau Induction Ceremony:

A Nursing Student's Perspective

by Elizabeth Davidov



Photo Credit: <http://www.gwensherwood.org/wp-content/uploads/2011/09/STTT-logo.jpg>

It was truly an honor to be part of the Sigma Theta Tau Induction Ceremony. The auditorium was beautifully set up leading up to the stage where the President and other board members were

seated. The ceremony began with a few words from Dr. Donna Nickitas, President of the Alpha Phi chapter of the Nursing Honor Society; she welcomed the new members who would soon embark on the journey that Sigma Theta Tau could provide for us. It was explained to the inductees what it means to be a member of such a prominent society and we were encouraged to participate in all the resources the society has to offer. Two graduates from the 2013 class spoke and described their experience with their membership thus far. They spoke proudly of all the opportunities that are now open to them and how the board members are there

for us whenever we need them. Many of us, including myself, are excited to have these resources available to us now and in the future. The ceremony helped us realize that we can do anything and that being a member of Sigma Theta Tau would make it even more possible for us to achieve our dreams! We were welcomed as new members and were each awarded our pins, ropes, stoles, and certificate.

Overall, the induction ceremony was truly an amazing experience to be a part of and I am happy to be able to have Sigma Theta Tau with me in my future practice.

New Blood Pressure Guidelines Could Mean Decreased Need for Hypertensive Medication

by Maria Bea Almendrala

According to researchers at the Duke Clinical Research Institute, 5.8 million adults in the United States will no longer need hypertensive medications due to new guidelines on blood pressure and medication. In February of this year, the Eighth Joint National Committee released new recommendations on blood pressure goals and the medical management of hypertension in adults; the blood pressure goal for adults over the age of 60 is now 150/90 mmHg, instead of the previous goal of 140/90 mmHg. For the general population under 60 years old and adults over the age of 18 years old with chronic kidney



Photo credit: <http://cdn.images.express.co.uk/img/dynamic/108/590x/blood-403349.jpg>

disease and/or diabetes, the goal remains at or below 140/90 mmHg.

In response to this change, researchers from Duke University and McGill University conducted

the first study that aimed to quantify the possible impact of the

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The American Nurse Project

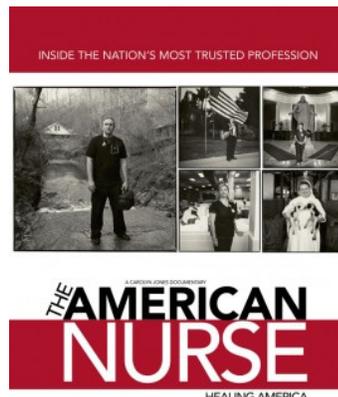


by Amirah Yasin

In 2012, photographer Carolyn Jones began *The American Nurse*, a compilation of personal stories and experiences of nurses across the country. The American Nurse Project states that it “aims to elevate the voices of nurses in this country” by way of photography, and film. The book, published in 2012, contains 75 portraits, interviews and biographies of nurses all over the United States. The project, launched by the global health care company Fresenius Kabi, was spearheaded by Jones. Its success has spawned a documentary that was released during Nurses Week 2014. The film follows five nurses from the book, and their patients.

The book is an honest celebration of American nurses, and a touching collection of stories from the nurse’s perspective. Nurses are so often written about, and their role discussed in the health care system, but this book showed what nursing really is in the words of American nurses themselves.

Every nurse should own a copy of *The American Nurse* – not only is it inspiring, and interesting, but it also is a work that is helping to advance the image of the nurse today. One has to only look at the history of nursing to know how much its image has changed. All types of nurses were interviewed - home care nurses, army nurses, nursing managers, bedside nurses and more. The



“As a nurse manager I try to make an impact. I try to explain that it’s not the glass of water you give, it’s how you give it.”

—Mohamed Yasin, MSN/MPH, RN aNE-BC
Montefiore Medical Center



Photo credit - cinemavillage.com

Photo Credit- top right: http://www.huffingtonpost.com/2013/08/19/nurse-stories-american-nurse-project_n_3749082.html

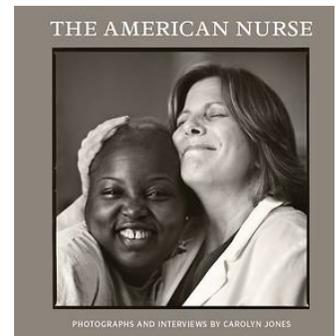


Photo credit: all other photost: american-nurseproject.com

Photo credit - top left: scrubsmag.com

American Nurse Project is a testament to the fact that nursing is an ever-shifting field. It gives a positive, beautiful portrayal of nurses in our country and invites audiences to see nurses in a new light. How do nurses feel after years caring for sick patients? How has nursing played a role in the nurse’s own life story? The book’s many interviews with nurses presents why different nurses joined the field, or how they found their calling in a genuinely touching way.

The American Nurse paints a alluring and fascinating portrayal of nursing in America, looking at the role of care through a journalistic, behind-the-bedside setting.

Additionally, Mohamed Yasin, a 1997 graduate of Hunter’s Masters Nursing program, and the father of a current HBSON student, was

a nurse interviewed for the project. The book is widely available, and the American Nurse documentary is currently showing. From May 8th-May 31st, any nurse that watches the film will be able to receive free Continuing Education credits! Show support to our field by going out to watch the film and celebrating those who care the most.

The American Nurse is honestly a simple, enjoyable coffee-table book about how it feels to work in such a crazy, but compassionate and humanitarian field. Read it, and allow yourself to be inspired by your field. Feel great about working so hard to join the ranks of this honorable profession, and keep going.

Source: *The American Nurse Project*. (n.d.). : *The Project*. Retrieved May 7, 2014, from <http://americannurseproject.com/mission/>

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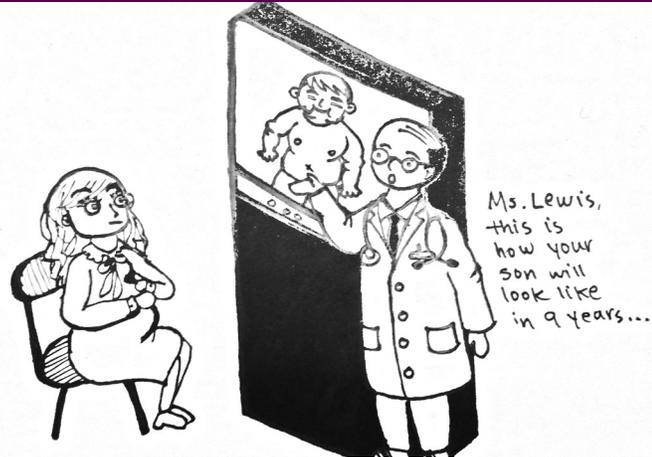
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The Ethical Implications of DNA Testing for Childhood Obesity

By Zahira Navarrete

As part of the increasing use of genetic testing, the likelihood that a young child will become an obese adult can now be gauged non-invasively. New research predicts that similar noninvasive prenatal genetic diagnosis (NIPD) testing will soon allow physicians a preliminary examination of fetal DNA in maternal blood instead of more invasive procedures like amniocentesis. While one may marvel at these advances, ethical concerns bring to light the mainstay tension between ethics and technology reminding us that the information a parent receives about their child can affect the trajectory of parenting practices for better or for worse.

United Kingdom-based researchers have devised a method of testing blood to determine epigenetic switches which impact the activation of the fat storage gene, PGC1a. On a study conducted on 5 year olds, results were linked to a child's lifetime risk of obesity.

University of Southampton professor Graham Burdge remarked that this advance may facilitate crucial preventative measures among parents with at-risk children. Dr. Serena Chen, Director of the Reproductive Endocrinology Division at Saint Barnabas Medical Center ex-

plains that upon detecting a predictable genetic abnormality, new options are now available which constitute an ethical step forward. During in vitro fertilization, selective embryos can be implanted using mitochondrial alteration. This method combines genetic code from three people, replacing abnormalities with healthy DNA. Council for Responsible Genetics president Jeremy E. Gruber disagrees, asking whether genetic testing is being used solely to determine inherited illnesses or to harvest a generation of "designer babies." He also notes the stark lack of ethical discussion around genetic testing and mitochondrial replacement and notes that stakeholders are eager to market these new diagnostic methods.

One must wonder whether technological access is always for the benefit of the people. We are often awed by the mystique of new technology but its necessity must always be scrutinized. Genetics are only one of a wide span of predictors of obesity. It would be interesting to weigh unborn children's genes against parental lifestyles and other factors to see which is most predictive.

Source: New DNA Test Can Predict Childhood Obesity. Has Gene Screening Gone Too Far?. (n.d.). Healthlines RSS News. Retrieved May 6, 2014, from <http://www.healthline.com/health-news/tech-genetic-test-for-obesity-new-born-gene-screenings-032814>

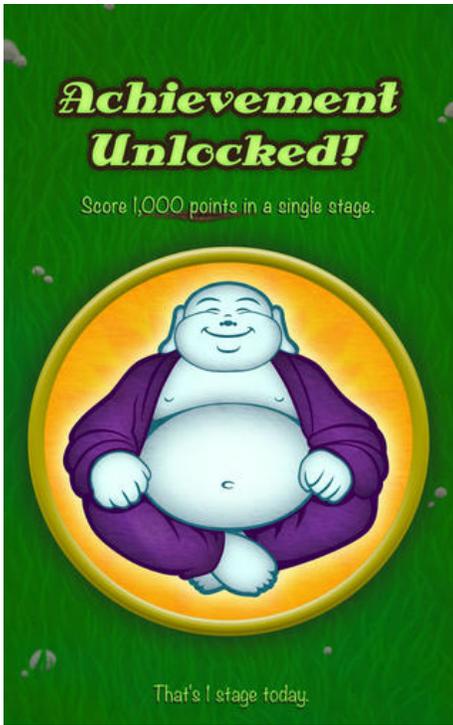


Photo Credit: <https://itunes.apple.com/us/app/personal-zen/id689013447?mt=8>

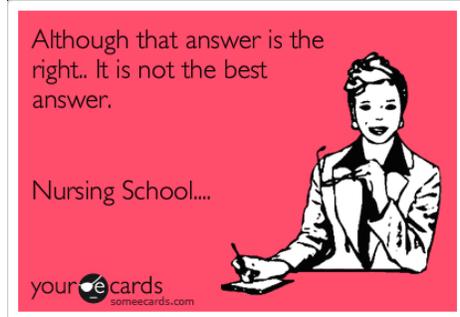
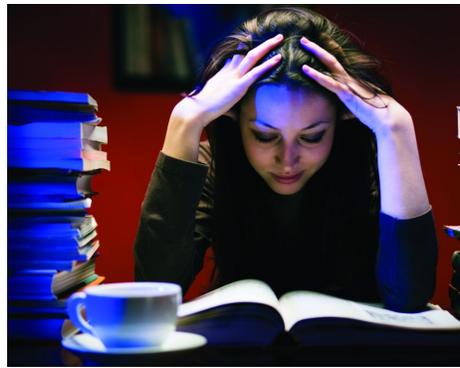


Photo Credit- top: www.edgehill.ac.uk
Photo credit: bottom: www.someecards.com

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new guidelines and found that the number of adults in the United States who are eligible for hypertension treatment would decrease from 40.6% to 31.7% under the new guidelines. Additionally, 13.5 million US adults will no longer be considered in danger of having poorly controlled hypertension, rather they will be classified as adequately managed. This creates a dilemma in treatment, as these adults may be in a gray zone of whether or not they should still be treated for their hypertension; experts also worry that the less stringent guidelines will be harmful for older adults, as even a slight increase in blood pressure can have cascading health effects.

The panel members of the Eighth Joint National Committee used evidence-based research and systematic reviews of literature to develop their recommendations, and intend them to be used as a clear reference for all clinicians regarding the care and management of patients with hypertension. The reports state that although the guidelines for blood pressure were based on credible literature and thorough evidence-based review, healthcare providers should use their clinical judgments in planning the care and treatment of their patients.

To read more about the new recommendations set by the Joint National Committee, refer to the article at: <http://jama.jamanetwork.com/article.aspx?articleid=1791497>

Source: *Relaxed Blood Pressure Guidelines Cut Millions from Needing Medication*. (n.d.). *Bioscience Technology*. Retrieved May 5, 2014, from <http://www.biosciencetechnology.com/news/2014/03/relaxed-blood-pressure-guidelines-cut-millions-needing-medication>



Anxiety Relief at Our Fingertips

By Sarah Roth

A final exam, a public speaking, a confrontation- these are just some examples of a multitude of situations that can make us feel anxious. Once that anxiety has crept up into our consciousness, once we have become absorbed in thoughts of failure and defeat, how do we behave? We all have ways of coping, such as nail biting, finger tapping, and crying in despair, to name a few. What if there were a way to deal with anxiety by simply using the tool we would never leave our home without--our cellphones? Researchers, from our very own Hunter College and the City University of New York, have developed an app aimed to focus its user's attention away from negativity and towards serenity. The app called "PersonalZen" features two figures -- one being angry while the other happy-- in a field of grass,

accompanied by calm background music. The goal of the game is to follow the happy figure's trail through the grass, while ignoring the angry figure entirely. This exercise, after being played for 25-45 minutes, has proven, in a sample of 75 anxious individuals, to reduce anxiety prior to public speaking. Extending beyond anxiety, there are additional apps available that target other mental health issues such as suicide ideation ("ReliefLink"). The genius of these apps lies in their accessibility. As Nadine Kaslow, President of the American Psychological Association, stated in support of these and other mental health related apps, "a lot of people are willing to download an app but not see a therapist" (Singh). A finger-tap away, these apps offer support and relief to anyone who seeks it at any moment they choose.

Source: Singh, M. (n.d.). *Therapists' Apps Aim To Help With Mental Health Issues*. NPR. Retrieved April 30, 2014, from <http://www.npr.org/blogs/health/2014/03/26/294374936/therapists-apps-aim-to-help-with-mental-health-issues>



Professor Carmen L. Morano and Dean McCain



HBSON students volunteered for the event.



Photo Credits: HPEC

HBSON: Annual Spring Forum 2014

By Ha Eun Kim

Earlier this semester, HBSON students had a great opportunity to hear Professor Carmen L. Morano, Associate Professor of Hunter College School of Social Work, discourse and illustrate about the topic “Inter-Professional Education and Practice: Key to Safe, Optimal Person-Centered Care.” At HBSON’s Annual Spring Forum, Professor Morano emphasized the importance of teamwork between all health care professions, and how cooperation and collaboration between different members of the health care system is essential to providing optimal patient centered care.

In order to establish and acquire

teamwork, which is so critical, she stressed the significance of communication. The biggest step that needs to be taken to achieve participation from all members of the health care community is to disable and breakdown the barriers between the social classes and statuses within the workplace. For example, nurses’ aides might be reluctant to approach or alert a nurse about the patient to avoid the possibility of being disregarded or overlooked. There is also a wide gap between nurses and doctors in our current clinical area. Even though they work together to care and improve the health of the same patient, they perform sepa-

rate duties and thus work independently from one another. They are also viewed differently by society, further increasing and expanding the gap between the two professions.

The lack of interaction between all health care occupations could potentially prevent staffs from pursuing and advocating for patients’ chances of receiving optimal person-centered care.

As Professor Morano emphasized, current and future health care workers need to keep in mind that teamwork is crucial and collaboration is required to deliver safe and optimal person centered care.

From Classroom to Church Clinic: The Value of Health Education After Typhoon Haiyan

by Franki Pena and Kristine Sy

As we prepared for our first set of nursing school finals, it became increasingly difficult to sit back and watch images of the catastrophe Typhoon Haiyan/Yolanda left behind in the Philippines. Those images are long gone from the news, but for one of us, it is her home. On January 10th 2014, HBSON students Franki Pena and Kristine Sy flew to Cebu, Philippines with the Alliance for Global Health Project Inc. to respond to health needs of typhoon survivors. Our team consisted of energetic health professionals from various NYC institutions, many of whom have provided disaster relief in the past.

With an entire van packed with medical supplies and medications from New York, we traveled to the village of Maya, Daanbantayan, and turned the Parish of San Isidro Labrador into a clinic. There, it was difficult to ignore the remnants of Yolanda. We saw countless roofless walls that once stood as homes and tall and thick tree trunks plucked at the roots. Evidence of calamity; however, was difficult to trace in our patients' faces with their welcoming smiles.

For four days, we triaged adult and pediatric patients who diligently walked kilometers to take advantage of the free clinic and medication. Many pediatric patients complained of upper respiratory infections and rashes, while adult patients suffered from chronic illnesses like hypertension and diabetes.

After triaging on the first day, we helped pharmacists distribute prescribed medications. With each patient, we discussed each medication's indication, dosage, frequency, and storage requirements, then assessed their understanding using the teach-back method. Since we anticipated water contamination, we had handouts that guided discussions on prevention and treatment of diarrhea and dehydration.

We were then inspired to assess the village's reproductive health after noticing many unmarried young mothers with small children. We learned that the local midwife administers birth control pills and Depo-Provera shots only to married



Photo Credit: Danny Chong



Photo Credit: Soumia Nair



Photo Credit: Mayano Ochi



Photo Credit: Irada Avshalumova



Photo Credit: Soumia Nair

mothers. The culture's conservative outlook on sex leaves many unmarried young people susceptible to unwanted pregnancies related to the lack of access to information on contraception and contraception itself. After triaging on the second day, we held confidential discussions with teenagers and young adults to increase their knowledge on availability and use of contraception - particularly condoms.

Contraception use was not the only topic we educated patients about [DH1]. As a response to many hypertensive patients, we held workshops on its prevention and treatment on the third and fourth days. Our discussions, both on contraception and hypertension, were rewarding because we empowered patients with knowledge about their health. Their receptiveness and willingness to learn was

extremely gratifying. Since we were only able to administer a limited amount of medications, the importance of providing education as a nurse had never been more apparent to us than it was during this trip.

As nursing students, it was liberating to apply the skills and knowledge we acquired in just one semester of nursing school. All the while, it was humbling to help survivors get back on track for recovery. The team made a huge impact in Maya: we provided checkups to 983 survivors. Still, all that we aimed to give them was reciprocated to us tenfold; it was a life-changing experience with a team we now call a family. The group is currently establishing a nonprofit organization, and we plan to do annual trips together to other countries in need.

62ND ANNUAL NSNA CONVENTION



Students were able to have their resumes reviewed.



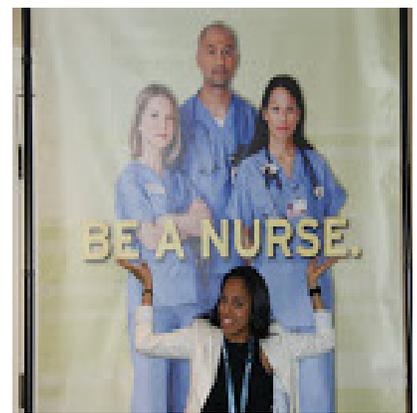
Nursing students proudly wore their usefully large NSNA bags throughout the conference at Gaylord Opryland Convention Center



Some students presented community health projects.



HBSON's fearless resolution speakers in action!



HBSON's very own NSP president is a nursing role model herself!

NATIONAL STUDENTS OF NURSING 62ND ANNUAL CONVENTION - NASHVILLE, TN



Nursing students demonstrated a strong affinity toward the excellent Cracker Barrel restaurant in Nashville.

Photo Credits: Maria Bea Almendrala

By Amirah Yasin

The National Students of Nursing Association's (NSNA) 62nd Annual Convention this year was held in Nashville, Tennessee at the Gaylord Opryland Convention Center. Thirty-five HBSON students were given the opportunity to attend and bring back the knowledge gained from the "Strong Voices – Big Dreams" themed event. Over one thousand nursing students from all over the country attended. The convention served as a meeting ground for nursing students from all fifty states. Business cards came in handy!

The Nursing-saturated forum served to promote questions, learning, and excellence in Nursing. The 5-day event featured seasoned Nursing professionals as speakers and hosted interesting "focus sessions" every afternoon. Students were able to attend workshops to improve their career outlook, as well as informational classes about Nursing (such as its involvement in forensics). However, opportunities did not stop here. Representatives from graduate schools flooded the Exhibit Fair, where students were able to collect information (along with pens and bags along the way!), not too far away from where Informational student-made posters were being presented. This included presentations from HBSON students themselves! The convention also offered nursing gadgets and t-shirts for sale, provided useful resume reviewing, and the option to take professional headshots. At the conclusion of one of the days filled with learning sessions and delegate sessions, nursing students were able to come together for an appropriately southern-themed "Jamboree" or go explore downtown Nashville on other days. Our long days were balanced with fun evenings.

In another aspect of the convention, Delegates from each state - after lengthy debate and discussion - were able to vote on resolutions proposed by different nursing schools. HBSON students brought intensity to the debate grounds, presenting two resolutions. The first resolution involved the cholera epidemic in Haiti and bringing about its awareness (prevention and treatment). This passed with a 82:18 vote! HBSON's second resolution, calling to cease the sale of tobacco products in pharmacies, ignited major controversy. Unfortunately, this resolution did not pass, even though the final vote was close (42:58). HBSON students worked diligently on their resolutions, and we are proud of their hard work! The 2014 NSNA Annual Convention was a fun, rich learning experience that HBSON students are grateful to have attended!

FAREWELL HBSON SENIORS

*We are where you were
In your footsteps we follow
For today you are the leaders of tomorrow.*

*Your advice we seek
In times of adversity
Be it Nursing 310, clinical or pharmacology*

*As you depart, your mark is left
Class of 2014, we wish you the best.*

poem by Ray Anthony Gejon



RUNNERS WANT THE BEES KNEES

By Emilie Dabrowski

Hey Runners, you want the highest quality of knee health? You should know about Iliotibial Band Syndrome (ITBS), a common overtraining injury. Signs include tightness outside the knee/hip, burning outside the knee that worsens with cool down, or pain when extending and flexing knees. Usually it's chronic - slow to set in and slow to recover from. The iliotibial band is a thick fibrous connective tissue that runs outside the pelvis, over the hip, and inserts into the knee. This band stabilizes the knee while running. When tight, the iliotibial band becomes stiff and hurts when it slides over the outside of the knee. The more miles, the worse the pain. The cause of ITBS is still unclear, but it's thought to come from knee and hip motion. A weak gluteus medius (a hip stabilizer) is one of the

most common muscle weakness and imbalances connected to such injuries. If you have ITBS and want to get back to training, it's recommended to rest 2-6 weeks, stretch, and cut back on running. As you improve, you can try to bike or use the elliptical, but running through the pain can make the injury worse. Most runners are able to begin running again within six months. Soft tissue work can stretch the iliotibial band and provide relief as well. Strength exercises can help strengthen running muscles. ITBS will continue to be a problem until its root cause is found. Find a trained physical therapist to help find the right treatment program for you.

Source: Sore Knees? You May Have This Common Running Injury. (n.d.). Health News / Tips & Trends / Celebrity Health. Retrieved May 12, 2014, from <http://news.health.com/2014/04/03/sore-knees-you-may-have-this-common-running-injury/>

UPCOMING EVENTS

Spring Finals Brunch

Tuesday May 20th, 12-4pm, Rotunda
Come celebrate the end of the semester with your fellow HBSON classmates and lots of food!

Hurst Review

Hurst registration is now available online for the Brookdale Campus June 2-June 4 Live Sessions. Those who register before May 9th will be awarded 30-days online.

34th Annual Convocation

Wednesday, May 28th, 2014 at Hunter Main Campus (68th Street)

Best of luck to our graduating seniors!

NCLEX REVIEW

A client receiving a blood transfusion begins to have chills and headache within the first 15 minutes of the transfusion. The nurse should first:

- Administer acetaminophen
- Take the client's blood pressure
- Discontinue the transfusion
- Check the infusion rate of the blood

ANSWER: C

Chills and headaches are signs of febrile, nonhemolytic blood transfusion reaction and the nurse's first action should be to discontinue the transfusion as soon as possible and notify the physician.