

May 2007 Newsletter

The May meeting of NETNPA was held at The Chop House in Kingsport. The speaker, Dr. [Name], a Gastroenterologist from the University of Kentucky, spoke about chronic constipation. The [Name] is from Boston from Takeda Pharmaceuticals.

NETNPA June 21, 2007

Our June 2007 meeting was held Thursday, June 21, at 6:30 PM at the Peerless in Johnson City. The speaker, Dr. [Name], spoke on the topic "Management of Inflammation and Bronchoconstriction in Adults and Children with Asthma." Our general sponsor is Glaxo/Smith/Kline.

Meeting Highlights

Reminder that the Partnership for Prescription Assistance is available for patients who have trouble with their prescription coverage. Call 1-888-4PPA-NOW (1-888-477-2669) for information

Asthma – Chronic inflammatory disorder of airways with variable obstruction, recurrent symptoms, and with eosinophils, lymphocytes, and neutrophils.

Affects 8 to 10% of pediatric population and causes 5000 deaths per year. Results in 2 million ER visits per year. Direct care cost is \$11.5 billion per year. Indirect cost is \$5 billion per year.

Asthma is a combination of 3 pathological events: 1) Hyperactive airways 2) obstruction from acute inflammation to chronic inflammation to remodeling of airways to potentially irreversible damage

Control: The definition of control varies whether it is the patient, the parent, or the healthcare provider's view. The parent is more focused on the # of episodes, while patient may be more focused on activity interruptions and symptoms. Parents measure attendance and performance, as well as severity of symptoms.

Control is measured by: 1) patient report, 2) day/night symptoms, 3) lung function, 4) quality of life, 5) healthcare utilization (urgent and unscheduled visits), 6) Inflammation (measured by eosinophils)

Poor control usually has more than one cause. Control is generally overestimated by patients and healthcare providers.

The newest guidelines say: 1) prevent symptoms day and night, 2) minimize the need for rescue inhalers

normal or near normal PFTs, 4) maintain normal activity.

To do this the healthcare provider must: 1) Identify and decrease risk factor exposure, 2) i symptoms appropriately.

Use the rule of “2’s” – more than albuterol 2 nights a week, 2 days a month or > 2 refills of inhaler per year

If there is poor control: 1) confirm diagnosis of asthma, 2) look at poor monitoring by pt, underestimating severity, 4) underuse of inhaled steroids, 5) continued exposure to smoke factors such as GERD, sinus disease, allergic rhinitis, unknown occupational exposure {especially in new

Global Initiative for Asthma Control released in 11/06. Now classified as 1) controlled – goal is fin maintain 2) partly controlled – step up meds to achieve control 3) uncontrolled – find out wl

General Treatment Steps 1) low dose inhaled steroids 2) low dose inhaled steroids plus lor medium or high dose inhaled steroids plus long-acting beta agonist 4) oral steroids

Allergic Rhinitis

affects 40 million Americans

6th most prevalent chronic illness

Is a quality of life burden with work-activity interruptions, fatigue and daytime sleepiness

Is the most common reason for decreased work productivity

Veramyst is newest treatment: It has an exact amount in delivery system It is scent free in each dose Unique delivery system allows viewing of the amount left in bottle

Meeting Minutes

President Kathy Sharp welcomed the speaker, the sponsor, and the members, and expressed thanks to th

SECRETARY REPORT: Minutes were posted on the website and accepted as correct TREASURER REF

OLD BUSINESS

Congratulation to our NP of the Year , Kay Bone, who received her award c celebration.

Reminder: NETNPA will have the positions of President and Secretary up for election in August. Nomin until the next meeting. Ballots will be sent email to all paid members after the July meeting . New officers

opportunity to be mentored for a month by the outgoing officers. Jeannie Walls has been nominated for p obligations.

Survey on the DNP. Members asked to do the survey at www.npjjournal.org

NEW BUSINESS

Discussion on the DNP in North Carolina

Copies of the recently completed salary survey article were shared with those present. The article will be Nurse, scheduled to come out next week.

Communication from Cheri Glass at TNA announcing a special on-hour documentary titled "A Profession & It will premier tomorrow in the 3 major markets, Memphis, Nashville, and Knoxville on Comcast Cable Cha producer is working on getting the video aired on our local channels. We will communicate that to you wh

TNA will be hosting a conference for next year with planning input provided by the 3 NP organizations, ie C and us. I will be participating in the planning stages and would like input on topics of interest. What is a re etc.

JOBS – Details of all jobs are on the website

Cardiovascular Associates in Bristol – Full-time Nurse Practitioner for office and hospital. C

Buchanan Health Center – NP for small family clinic

Washington County Health Department – primary care NP for TN disenrollees. M-F 8:30-5 prescriptions handled. Good benefits. Applicant must go onto the State Registrar through the inte at 423-979-4682 or via email at Linda.McClure@state.tn.us.

Jonesboro Elementary School – NP for 1 day per week from 8 am to 3 pm, Contact Jeann