

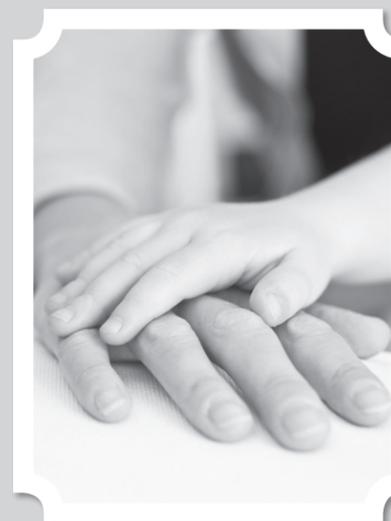
NURSE PRACTITIONER ASSOCIATION
OF SOUTH DAKOTA

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NPASD

NURSE PRACTITIONER ASSOCIATION
OF SOUTH DAKOTA

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Interested in
being included
in our online
Nurse Practitioner
Referral Directory?

Email your professional
contact information to
Andrea Rasmussen at
Executive.Director@npasd.org

REMINDER! NPASD Fall Conference

DATES:
Friday, Sept. 28
Saturday, Sept. 29

LOCATION:
Rapid City Regional Hospital

REGISTRATION:
Register now at
www.npasd.org



Please "like" our NPASD facebook page to get updates
re: conferences, legislation, etc.!

MESSAGE FROM OUR PRESIDENT: Denise Boraas



July has certainly lived up to the typical warm temperatures!
I hope that you all are enjoying a fun and safe summer.
It seems to be going quickly that is for sure.

I had the pleasure to attend the Annual AANP National Conference in Florida last month. It was a great educational conference and I would encourage all of you to attend periodically if not annually. The topics are wide ranged and there is something for everyone. The key note speaker was Dr. James Prochaska, PhD who spoke on how NPs are well suited to promote healthy behaviors (remember his theory). He stated "The # 1 reason patients present to primary care is that they are distressed. How long do they get to talk to a doctor before they are interrupted? Less than 30 seconds. That doesn't happen with nurse practitioners. By talking to patients, you help reduce their stress. Patients begin to feel that they are getting the help that they came for." What a wonderful observation and we all feel is a true statement! We had our Region 8 gathering and update from each state. It is a great time to catch up with others from the region on what they are up to generally and legislatively. Thank you to Kathy Zambo for her report as our state representative. We had 7 NPs from SD there and one was Lori Wegehaupt our state NP winner. There are a couple of key partnerships that AANP announced that they are embarking on. One is called Joining Forces, in which AANP is joining a national effort to help veterans and

military families gain better opportunities, resources and support as they re-enter civilian life. Of particular interest are the psychological issues such as PTSD and also traumatic brain injuries. The other partnership is with Million Hearts™, a national initiative launched by the U. S. Department of Health and Human Services to prevent one million heart attacks and strokes in the U. S. over the next five years. These are exciting areas for NPs to be involved on a national level.

I want to update you on some news that came out last week. Some of you may know if you are a member of AANP or ACNP via emails but for those of you who don't, the 2 organizations are in the due diligence phase of merging into one unified organization. I think that this would be great with both organizations bringing strengths that will present one united and stronger voice for nurse practitioners. I was on a conference call regarding this on July 2nd and they assured us that there would be no certification issues by merging and that the decision would most likely be made sometime this fall. I believe with the growing demand for nurse practitioners, a united organization would benefit us all. I encourage you to pay attention to upcoming email communications for more details.

Continued on page 2.

Bylaw changes

These are a few of the changes that are being recommended for NPASD bylaws. Please read carefully through all of the by-law changes on the website (www.npasd.org) as we will be voting at the annual meeting this fall on the whole group. As you can see with these few important changes along with all the others that are recommended, a fair amount of time has been spent in these changes. Please support the organization and do your part in reviewing and being ready to discuss and vote.

Goals

- **2. Identify best practices/models evidence based health care** in providing NP educational programs **and networking opportunities.**

ARTICLE II: PURPOSE

The purpose of the NPASD is to establish an association ~~to assist Certified Nurse Practitioners (CNPs) maintain and advance the profession of the nurse practitioner~~ in the delivery of accessible and affordable health care to South Dakota **citizens and the region.**

ARTICLE ~~VH~~ VIII: MEETINGS

Full general membership **and business** meetings will be held **at least** annually. ~~The annual business full-membership meeting will be held at this meeting.~~ The time and place of the meeting shall be published a minimum of two months prior to the **yearly conference meeting.** This membership **and business** meeting shall include an annual report of all committees, including election results. **A quorum shall consist of not less than 10% of the membership on record. The rules contained in Robert's Rules of Order Revised (current edition) shall govern meetings of NPASD.**

- **** Addition to ARTICLE VI, Section G (vacancies)**

- **The president will appoint an experienced BOD member to complete a vacated officer position to complete that term. This replacement would be eligible to run for that office at the next term election unless completed 2 consecutive terms as a BOD. The BOD director position that was opened may be filled by a runner up candidate from the last election. If there is no runner up candidate, the vacant BOD position will be filled at the next election.**

President's Message continued.

The other main issue for health care in general including nurse practitioners these days is the recent upheld decision by the Supreme Court regarding the Affordable Care Act. The purpose is to provide affordable, quality health care for all Americans and reduce the growth in health care spending, and for other purposes. Some aspects have already been implemented including:

- Recognition of nurse practitioners as PCP's
- Maintaining patient choice of providers
- Authorizing nurse practitioner face to face visits for home care authorization
- Prohibiting health insurers from refusing coverage based on patient's medical histories

The full impact of this act is still coming, some central changes that have not been implemented but that could occur include but not limited to:

- Establishing minimum standards for qualified health benefit plans
- Requiring most employers to provide coverage for their workers or pay a surtax
- Expansion of Medicaid to include more low-income Americans and covering adults without dependents that meet criteria
- Requiring most Americans to carry or obtain qualifying health insurance coverage or face a fine for non-compliance
- Allowing insurers to continue to dictate limits on evaluation and care provided consumers by their providers ("managed" or "rationed" care)
- Reductions in projected spending on Medicare of \$400 billion over a 10 year period

Some are a positive for health care and others could cause some practice issues/changes for us. For those of you who may not be interested in legislative issues, the need to stay aware of the changes that will be coming in the future is vital. We will do our best at NPASD to keep you informed as well. This may be the perfect time to utilize our NPASD face book page to share and compare questions, concerns, and thoughts. I feel that communication is important and I look forward to improving this avenue for our membership.

This is the second newsletter with a different format as your Board of Directors has been working to improve this form of communication to make it more valuable for our membership. You will even notice a new logo for our organization! We would appreciate your input and suggestions for further changes. We are also looking for NP's who would like to share a clinical pearl with the rest of their colleagues. Please feel free to contact us through our website if you are interested.

Lastly, I would like to encourage all of you to attend our Annual NPASD Conference which will be held in Rapid City this year. The planning group has been working hard to set up a great listing of topics. They hope to have the brochure out to you all in the next few weeks and you will be able to register on-line. Hope to see you there!

Denise Boraas

NPASD President

Voting for New NPASD Board members now open

Vote on our website (www.npasd.org)!

Candidates are:

Vice President: Kara Stapert CNP

Secretary: Nicole Gibson CNP

Board of Directors:

Emily Hutchinson CNP

Tonya Benson CNP

Cassandra "Cassie" L. Bondesen CNP

Jennifer Reitsma, CNP

Online voting will end Wed. Sept. 26 at midnight. Paper ballots will be available on the first day of the Fall Conference for new NPASD members who join at the conference. Voting results to be given at NPASD member board meeting Friday, Sept 28 during the Fall Conference.

(Must be an active NPASD Member to vote)

Clinical Pearl: Vitamin D Deficiency in Adults

Subclinical vitamin D deficiency is more common than once thought in the adult population. Vitamin D stores decline with age, especially in winter months. Treatment of vitamin D deficiency is important for musculoskeletal health and possibly immune and cardiovascular systems as well. Low vitamin D levels increase risk for osteomalacia, osteoporosis and thus fracture risk long term. Some studies also link vitamin D to muscle weakness, cancer risk, immune system function, cardiovascular disease and metabolic syndrome- however no causal association has been found.

Vitamin D deficiency is measured by 25-hydroxyvitamin D concentrations in the serum. As levels fall intestinal absorption of calcium also falls, leading to low serum concentration of calcium. Thus, this leads to increased risk of osteoporosis by decreasing normal bone mineralization and remodeling. Experts agree that levels lower than 20-30 ng/ml are suboptimal for skeletal health. Most agree the goal is to maintain levels 30-50 ng/ml.

Those at highest risk for vitamin D deficiency should be screened. Broad based screening is not recommended. Those patients at highest risk include: elderly, institutionalized, dark skinned, limited sun exposure, known osteoporosis, obesity, medications that increase metabolism of vitamin D (phenytoin), pregnancy and malabsorption (inflammatory bowel, celiac, gastric bypass, etc.).

If vitamin D deficiency is found treatment recommendations include replacement with vitamin D3 (cholecalciferol) or vitamin D2 (ergocalciferol). Most agree that vitamin D3 increases levels more efficiently than the vitamin D2. Common clinical practice is to treat high risk individuals with serum 25OHD levels <20 ng/ml with 50,000 units of vitamin D3 or D2 once weekly for 6-8 weeks, followed by doses needed to maintain target levels, typically 800 units daily thereafter. For high risk patients with levels 20-30 ng/ml supplementation with 600-800 units of vitamin D3 daily may be sufficient. In addition encourage intake of vitamin D through enriched foods (milk, fish) and sun exposure as safe (assess skin cancer risk). Levels should be rechecked 3-4 months after treatment initiated as toxicity can be problematic also. If the patient has renal or liver disease, treatment with vitamin D metabolites alternatively may be needed due to abnormal vitamin D metabolism in these conditions. In addition, patients should be reminded to maintain daily calcium intake of 1000-1200 mg per day. Consider risk assessment, screening as indicated and treatment of vitamin D deficiency as part of the yearly health maintenance evaluation for all adults.

Rebecca Moen, CNP

Are you struggling to access your NPASD online member account?

Please email Andrea Rasmussen at Executive.Director@npasd.org

Contact us at www.npasd.org

(click on the contact us link)

Come one
come all!

JOIN
NOW FOR
\$100

JOIN NPASD

WE HAVE A GREAT DEAL FOR YOU!

Join NPASD now for \$100.00 or renew your membership if it has lapsed. There is a new improved website at NPASD.org where you can join and pay online. You can also update your profile.

Here are some benefits for joining NPASD:

- NPASD membership guarantees a discount on State Conference fee
- NPASD provides a referral databank list of NPASD members
- NPASD provides a communication network for Nurse Practitioners
- NPASD serves as an advocate of Legislative Action benefiting Nurse Practitioners
- NPASD will represent you in state health forums
- NPASD serves as your voice in issues of concern to Nurse Practitioners such as certification, liability insurance, third party reimbursement, rural health, and barriers to practice
- NPASD serves as a resource for practice, research, legislative and marketing assistance to grass roots and state organizations and individuals
- NPASD provides continuing education and information concerning other regional and national conferences

Renew/Join NPASD www.npasd.org

ATTENTION all South Dakota Nurse Practitioner Students!
Reminder:

Applications for the \$500 NPASD Scholarship are due by SEPTEMBER 15th, 2012!

Check out our website at:
www.npasd.org for more details