Hello Medical-Surgical Nursing Colleagues,

It is my honor to share that the AMSN Annual Convention is going international this year, and you, your nursing team, and your medical-surgical peers are invited to join me!

Taking place Sept. 12-14 in Toronto, Ontario, the 2024 AMSN Annual Convention will be one for the books. Known as the premier medical-surgical event of the year, the AMSN Annual Convention will not only allow you to connect with hundreds of medical-surgical nurses but also take part in unparalleled educational programming.

This year’s education program has been curated with your needs in mind. The convention will feature 30 concurrent sessions from over 70 speakers, allowing you to learn from the best of the best on topics such as clinical practice innovation, leadership, professional development, practice environment, and virtual nursing. It is an engaging way to earn up to 15.25 nursing continuing professional development (NCPD) contact hours while in Toronto.

On the networking front, this year’s event will feature 16 opportunities, inclusive of receptions and lunches, for attendees to connect with one another and build new connections. That’s right — you’ll be able to mix and mingle with 800 fellow medical-surgical nursing peers from over 45 states and three countries over the course of three days. Additionally, over 45 exhibitors are excited to share their information (and goodies!) with you during the dedicated exhibit hall times.

It is exciting to bring the AMSN community to Toronto, a city that puts you in the innovative and cultural heart of Canada. Ever-evolving, Toronto is Canada’s multicultural epicenter, which lends itself to a refreshing selection of museums, galleries and landmarks that honor the city’s rich history and allows visitors to learn about the various, vibrant neighborhoods, artists and innovators that shaped — and continue to shape — it. And you may even take an extra day before or after the convention to visit the famous Niagara Falls.

The countdown to September is on. I hope that you will join me in Toronto! See you soon,

SUSAN HOPKINSON, PHD, MSN, RN
2023-2024 ANNUAL CONVENTION PROGRAM PLANNING COMMITTEE CHAIR

800
FELLOW MEDICAL-SURGICAL NURSING PROFESSIONALS

15.25
TOTAL NURSING CONTINUING PROFESSIONAL DEVELOPMENT (NCPD) CONTACT HOURS

30
CONCURRENT SESSIONS

5
KEYNOTE PRESENTATIONS AND GENERAL SESSIONS

80+
POSTER PRESENTATIONS

45+
EXHIBITORS
NURSING CONTINUING PROFESSIONAL DEVELOPMENT (NCPD) CONTACT HOURS

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Contact Hours</th>
<th>Activities</th>
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<tbody>
<tr>
<td>During the Annual Convention</td>
<td>15.25*</td>
<td>Attend all general sessions and concurrent breakout sessions, review poster presentations</td>
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<tr>
<td>After the Annual Convention</td>
<td>20</td>
<td>Post-convention sessions recording</td>
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<td><strong>TOTAL</strong></td>
<td><strong>35.25</strong></td>
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Attendance at one or more sessions in a multi-session event (credit commensurate with participation).

The Academy of Medical-Surgical Nurses (AMSN) is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

*Current as of May 14, 2024

VIRTUAL ACCESS PASS

AMSN plans to offer a virtual access pass in 2024 for those who are unable to join us in Toronto. More information, including offered sessions and pricing, will be made available in August 2024.

REGISTRATION INFORMATION

Full Convention Registration Pricing

<table>
<thead>
<tr>
<th>Registration Type</th>
<th>Early Registration (on or before June 28)</th>
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<tr>
<td>AMSN Member Full Convention</td>
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<td>$695</td>
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<td>Non-Member Full Convention</td>
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<td>AMSN Member: Guest/Spouse Pass</td>
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<td>Non-Member Guest/Spouse Pass</td>
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Additional information about different registration types, registering as a group, and more can be found on the AMSN website.

CANCELLATION/REFUND REQUESTS

AMSN will provide a full refund of registration fees, less an administrative processing fee of $100, for any cancellations received in writing on or before August 19, 2024. Cancellation requests must be emailed to registration@amsn.org. Telephone cancellations are NOT accepted for refunds. Participant must obtain confirmation of receipt of email from AMSN on or before the cancellation deadline.

All refunds will be processed at the conclusion of the Annual Convention to the original form of payment. After August 19, 2024, there will be no refunds for registrations cancelled whatsoever. Substitutions can be made, without a fee, by contacting the registration team at registration@amsn.org. Hotel reservations must be cancelled separately and directly with the hotel.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

WEDNESDAY, SEPTEMBER 11
1:00 p.m. – 2:00 p.m.
ATTENDEE LUNCH

THURSDAY, SEPTEMBER 12
7:00 a.m. – 7:00 p.m.
REGISTRATION OPEN
9:30 a.m. – 11:00 a.m.
CONVENTION ORIENTATION SESSION AND NETWORKING
11:15 a.m. – 11:45 a.m.
OPENING REMARKS
11:45 a.m. – 1:00 p.m.
101 Opening Keynote: Don’t Just Play — Win!
Lee Rubin
Developing a clear sense of identity is critical to reaching your full potential and setting specific and lofty goals will drive you past your comfort zone. During this engaging keynote, Lee explores the characteristics found among the high achievers across industries and disciplines. Winners embrace adversity and leverage their challenges for individual and team growth. Lee masterfully weaves vivid stories with universal truths into a memorable experience. Audiences leave inspired and equipped to apply the lessons learned and take their performance to new heights.

1:00 p.m. – 2:00 p.m.
CMSRN CERTIFICANT RECEPTION (INVITATION ONLY)

SESSION TRACKS KEY
- Clinical Practice
- Evidence-based Practice, Quality Improvement, Research
- General
- Healthy Practice Environment
- Interprofessional Collaboration
- Professional Development
- Virtual Nursing

1:00 p.m. – 2:15 p.m.
ATTENDEE LUNCH

2:15 p.m. – 3:15 p.m.
102 Supporting Leadership Development in Medical-Surgical Nurses
Emily Nobles, DNP, RN, CCRN, CNE; Hannah Mottel, DNP, RN, CNE, CHSE; Sonya Edwards, DNP, RN
The rapidly changing, technologically-driven, complex healthcare environment requires strong leaders. Participants in this session will have the opportunity to conduct leadership and emotional intelligence self-assessments, identify gaps in leadership acumen using published competencies, and explore leadership development opportunities. After attending this session, participants will be able to better define leadership, identify opportunities for leadership development, and discuss the impact of leadership in healthcare delivery in the medical-surgical setting.

103 Novel Nursing Theory: Trauma Patients Existential Experience and the Impact of Empathic Nursing Care
Patricia Bartzak, DNP, RN, CMSRN, TCRN, CNRN
This session will review the results of a study that sought to better understand the confluence of events and non-events that contribute to injured patients. Exploring the age-old questions of “why” can inform nursing practice in the trauma and medical-surgical space.
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**104 Rapid Fire Session — Clinical Skills:**

104A Ostomy Accessories: So Many Choices!
* Katherine Mehaffey, RN, BSN, CWON; Patricia Anderson, BSN, RN, CWON

The bedside nurse is faced with a wide and often confusing variety of choices in ostomy pouches and accessories. Most ostomates, whether new or established, have received ostomy education and information from a variety of sources, sometimes leading to contradictory, overuse, and misuse of pouch accessories. In addition, what each facility has available may differ from what the patient uses or feels they need to use. This presentation will provide a brief overview of commonly available ostomy accessories and how and when to use them, as well as tools to make the best accessory choice (if needed) for the appropriate situation and help identify accessory over/inappropriate use.

104B Identifying a Vein’s Personality: Helpful Tips for Improving Peripheral IV Insertion
* Kelly Gardner, RN/BSN, CCRN, CRNI

Peripheral IV (PIV) insertion continues to be a source of fear and anxiety for novice and experienced nurses alike. Success of PIV insertion can also make or break a patient’s experience, compounding the stress of the experience for many nurses. Beyond the basic steps on insertion taught in nursing schools, there is a lack of education and guidance for nurses trying to hone their PIV insertion skills, especially when IV access is not straightforward or for nurses who start IVs infrequently. Creativity and innovation are necessary to give nurses the next best thing to experience — practical knowledge from nurses who are experts at PIV starts, presented in a relatable and easy-to-access set of tips and tricks that nurses can employ in the field. This presentation will give nurses a toolbox in which to draw from when approaching a difficult IV start with easily accessible videos that are shareable with the use of QR codes.

104C Building a Bridge: Overcoming Gaps to Safe Intravenous Push Medication Administration
* Christina Colvin, MSN, APRN-AOCNS, CRNI; Jessica Elliot, APRN-CNS, ACCNS, CCRN

In this session, nurses will learn how to support best practices and align with the Institute for Safe Medication Practices’ (ISMP) recommendations for adult intravenous (IV) push medication administration. Information will be presented on how one organization gathered a group of nurse-led multidisciplinary colleagues and collaborated to review and address gaps in knowledge, work through supply chain issues, and create education modules to improve practice and patient safety.

105 Improving Patient Outcomes Through an Innovative Virtual Nursing Model
* Shanta Subedi, MSN, RN, CMSRN; Lauren Crafton, BSN, RN, CMSRN

Learn how one healthcare system developed a cutting-edge virtual nursing model that shares patient care responsibilities with the unit’s registered nurse. This successful model includes developing workflows to improve focus on direct patient care, the use of simulation labs to identify and resolve potential issues, and a phased pilot approach on identified units. Attendees will better understand how virtual nursing positively impacts patients, families and staff, particularly in areas such as patient education and timely admissions and discharges, and how the model is adaptable to various nursing settings, aiming to improve overall patient outcomes and retention of skilled nurses as integral members of the care team.
106 Acuity-Based Assignments: Improving Nurses’ Satisfaction While Decreasing Nurse Turnover Rates
Hannah Ruehlman, BSN, RN, ONC; Sarah Varney, MSN, RN

In this session, learn about a project aimed to show how implementing an electronic medical record (EMR) based acuity tool could increase nurse satisfaction while decreasing the nurse turnover rate on an inpatient medical-surgical unit.

3:15 p.m. – 3:45 p.m.
AFTERNOON SNACK BREAK

3:45 p.m. – 4:45 p.m.
107 Leaving Soon... Discharge by Noon
Aileen Mazurek, MSN, RN, NE-BC; Ambili John, MSN, APRN, ACNP-BC

Early discharge offers multifaceted benefits, notably reducing hospital-acquired infections, a smoother transition to home, and enhanced post-discharge care with timely prescription filling. It also optimizes hospital resources, creating capacity and improving emergency room efficiency. In response to capacity and efficiency challenges faced by the 350-bed hospital, an initiative was undertaken to enhance patient throughput. An interprofessional team composed of nursing staff, nursing leaders, and physicians collaborated to establish a streamlined discharge process in medical-surgical and observation units, referred to as Discharge By Noon (DCBN). This proactive and adaptive approach has positioned the healthcare system for sustained success in optimizing patient throughput and enhancing the overall quality of care.

108 Rapid Fire Session — Falls:

108A Team CLARITY: Volunteer Interprofessional Collaboration Fall Prevention Program
Holly Shui, MSN, RN-BC, CNN; Kathy Agarwal, MD; Vanessa Parejo, MPH; Ellie Kalatzis, MPH

Hospitalized older adults are highly susceptible to developing delirium, a serious yet often preventable condition associated with an increased risk of patient falls. Recognizing the need for innovation in care delivery amidst a growing aging population and nursing shortages, the utilization of volunteers and the promotion of interprofessional collaboration emerge as vital strategies to address these challenges. Through the collaboration of the hospital’s volunteer department, nursing education, executive administration, and a geriatrician, a fall prevention program named “Team CLARITY,” was implemented utilizing volunteer visits across the hospital. In this session, learn about implementation, expansion, outcomes, and sustainability of a volunteer-based fall reduction program, providing practical information to those interested in developing similar programs.

108B Implementation of Evidence-Based Hourly Rounding to Improve Fall Rates of Adult Patients
David Smith, DNP, RN

Patient falls remain a safety concern for all healthcare organizations, and despite current evidence-based processes available for implementation, learn about the project undertaken to address one site’s lack of widely adopted protocols. This will include examination of the root cause of the falls at this site using different methods, sustaining rounding over a longer timeframe, and using additional measures to achieve zero falls over a 30-day period.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

**108C Fall Prevention: Using the Method Scoring System**  
*Lakeshia Williams, DNP, RN, MEDSURG-BC, NEA-BC*

Falls represent a prevalent adverse event in hospitals, imposing substantial physical and economic burdens on both patients and healthcare organizations. Numerous fall prevention guidelines, aimed at mitigating the risk and severity of falls, have been published. This project established a successful fall prevention program emphasizing collaboration, coordination, and communication to elevate the safety and quality of care provided to our patient population on a 19-bed medical surgical unit.

**109 Improving Patient Outcomes for Aspiration Pneumonia**  
*Cristen Mackwell, DNP, MSN, BSN, RN, CMSRN, EBP-C, GERO-BC, NPD-BC*

Pneumonia is the most common infectious cause of hospitalizations in the United States, with more than one million admissions annually with costs at approximately $10 billion every year, making it the eighth leading cause of death. Aspiration pneumonia is an aggressive type of pneumonia that results from inhalation of oropharyngeal secretions and/or gastric contents and is preventable. In this session, learn about a successful evidence-based clinical care pathway that reduced readmissions and mortality rates, while improving the overall care of patients.

**110 Defined Uninterrupted Nurse Breaks: A Feasibility Study**  
*Brenden Sickles, BSN, BSc; Olawunmi Obisesan, PhD, DHEd., CPHQ, MCHES, RN; Tamara Otey, PhD, RN*

While there is no particular solution to preventing nurse burnout, there is emerging evidence that taking even the briefest breaks can provide much-needed reinvigoration. However, many nurses feel uncomfortable handing off their patients to their peers because it doubles their responsibilities, and their institutions lack a well-organized schedule necessary to allow a break schedule. This feasibility study examined registered nurses’ perceptions of an alternative staffing model of having a designated four-hour registered nurse provide a defined uninterrupted 30-minute rest break to bedside nurses using a well-organized schedule.

**111 Taking a Walk in Their Shoes: A Patient Experience Simulation for Medical-Surgical Nursing Teams**  
*Megan Kirchen, MSN, RN, NPD-BC, CMSRN, CLC; Amy Capasso, MSN, RN*

Utilizing experiential and transformational learning, nursing professional development specialists (NPDS), simulation team (Sim), and inpatient medical-surgical care area leadership leveraged a collaborative approach to develop a simulation to improve patient experience scores and increase confidence in utilizing learned tools and tactics of patient experience.

5:00 p.m. – 6:30 p.m.  
**GRAND OPENING RECEPTION IN EXHIBIT HALL AND POSTER VIEWING**
SCHEDULE

Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

FRIDAY, SEPTEMBER 13

6:00 a.m. – 6:45 a.m.
AMSN YOGA

7:00 a.m. – 5:00 p.m.
REGISTRATION OPEN

7:30 a.m. – 9:00 a.m.
COMMITTEES AND CHAPTER LEADERSHIP BREAKFAST (INVITATION ONLY)

7:30 a.m. – 9:00 a.m.
EXHIBIT HALL OPEN WITH BREAKFAST AND POSTER VIEWING

8:00 a.m. – 9:00 a.m.
POSTER VIEWING WITH PRESENTERS

9:15 a.m. – 9:30 a.m.
PRESIDENT’S AWARD PRESENTATION

9:30 a.m. – 10:30 a.m.
🌟 201 General Session: AMSN Town Hall — The Medical-Surgical Nurse as a Change Agent: Problem Solver, Innovator, Transformational Leader, and Advocate
Kristi Campoe, PhD, RN, CMSRN, CPHQ, sMBA; Michael Szeliga, MSN, APRN, AGCNS-BC, CMSRN

In this evolving healthcare landscape, the medical-surgical nurse is uniquely positioned to own their practice through positive disruptions. This session aims to empower the medical-surgical nurse to strengthen their foundation as a problem solver thinking outside the box, an innovator to create new workflows that work for them, a transformational leader creating a stronger identity and community, and an advocate for their profession and the specialty of medical-surgical nursing. As a change agent, the medical-surgical nurse can not only thrive in their current environment...they can accelerate a change in how deliver healthcare as a 21st century medical-surgical nurse.

10:30 a.m. – 11:00 a.m.
MORNING COFFEE BREAK IN THE EXHIBIT HALL
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

11:15 a.m. – 12:15 p.m.

**202** Boosting Handoff Conversations: Increasing Efficiency With a Standardized Nurse Handoff Shift Report

Meredith Kuhlman, BSN, RN; Olawunmi Obisesan, PhD, DHEd., CPHQ, MCHES, RN; Tamara Otey, PhD, RN

The purpose of this quality improvement study was to examine the effectiveness of an electronic medical record (EMR)-prefilled standardized nursing handoff report in improving the quality and relevance of objective patient information provided during the handoff process. The implementation of a standardized prefilled nursing handoff report can help reduce human errors and variations in handoff information, which can subsequently translate into higher-quality handoff reports, decreased duration report time, and even nurses’ satisfaction in the patient handoff communication process.

**203** Frailty and the Older Adult Patient

Lee Anne Siegmund, PhD, RN, ACSM-CEP, FAAN

In the absence of guidelines to help nursing professionals identify and care for older adults who are frail or at risk for frailty, the newly created Frailty Care Model addresses a gap in the evidence regarding nursing care of the older adult from robust to severely frail. The model is an illustration of a middle range theory designed to guide frailty care, using primary, secondary, and tertiary prevention, within the framework of the nursing process. Risk factors and supportive strategies are included in the theory.

**204A** Investing in New Graduate Nurses: The New Graduate Nurse Resource Guide

Brooke Hartman, BSN, RN; Kasey Robinson, MSN, RN, MEDSURG-BC

With an increase in the number of new graduate nurses coming to the unit along with the differing levels of skill availability, there was a need identified to produce a resource guide to assist in skill and documentation development. The “New Graduate Nurse Resource Guide” is a succinct, unit-based, population-specific resource guide for new graduate nurses to utilize during their orientation period and into the first year of practice, with the goal of increasing their knowledge and comfortability as they are supported in their learning and professional growth as nurses.

**204B** Nurse Residency Program: A Journey to Accreditation

Elizabeth Hoover, MSN, RN

Using the Practice Transition Accreditation Program (PTAP) accreditation standards, ANCC guidelines for nurse residency programs, and evidence-based research, it was determined that a formalized program was necessary to transition new grads into the workforce and to address onboarding and retention of new nurses. Using the new Gradate Nurse Residency Transition into Practice Program, retention rates have increased, and turnover rates have decreased.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

205 Creation of a Post-Rapid Response Algorithm for Medical-Surgical Patients Remaining on Unit
Laurel Dolejs, MS, BSN, BA, RN, CPHQ, HACP; Jennifer Katlen, MEd, MSN, APRN, ACNS-BC, CCRN, GER-BC; Roman Saini, RN, MSN; Katelyn Rose, RN, BSN, CCRN
Learn about the process of creating an interdisciplinary algorithm for rapid response patients who remain on the medical-surgical unit after an event, identifying interdisciplinary role responsibilities and suggested timeframes for follow-up.

206 Learning to Swim in the Float Pool: Cultivating the Next Generation of Medical-Surgical Nurses
Rajimol Nair, BSN, CCRN-K; Anna Herbst, MSN, RN, NEA-BC, NPD, GER-BC
This session will showcase the successful implementation of an evidence-based nurse orientation program designed for onboarding new graduate nurses (NGNs) into the medical-surgical float pool. This innovative professional development strategy effectively addresses immediate staffing needs, reduces first-year turnover, and minimizes reliance on contingency staff, presenting a forward-thinking solution to medical-surgical staffing challenges.

12:15 p.m. – 1:30 p.m.
LUNCH WITH EXHIBITORS AND POSTER VIEWING

1:45 p.m. – 2:45 p.m.
207 General Session: AMSN Founders Award, Ernest Grant, PhD, RN, FAAN
Join us to hear from Dr. Ernest Grant, the recipient of the 2024 AMSN Founders Award for Distinguished Practice. As an expert in the field of Diversity, Equity, Inclusion and Belonging in the nursing field as well as the first male president of the ANA, this session will be sure to be insightful and deeply impactful for nurses at every stage of their career.

2:45 p.m. – 3:30 p.m.
AFTERNOON SNACK BREAK IN THE EXHIBIT HALL

3:45 p.m. – 4:45 p.m.
208 Rapid Fire Session — Staffing and Retention:
208A Recognizing Nursing Employees via Pop-Up Celebrations: Is There Value?
Tonya Moyse, MSN, RN; Josalyn Meyer, MSN, RN, NE-BC
Using a research study methodology, a large, urban hospital gathered data to better understand the impact of pop-up celebrations on perceptions of appreciation and recognition and overall morale. Hear about the data and results gleaned from it and strategies to implement a novel recognition plan at your institution or within your unit.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

**208B Generation Z Nurses: Embracing and Supporting the Next Generation of Nurses**  
*Margot Lisa Hedenstrom, PhD, RN, MSN, MBA, NEA-BC*

While there is limited wide research on nurses that are considered “Generation Z,” they make up a large portion of new nurses entering the workforce. Based on this project, learners will get a better understanding of the needs of this new generation of nurses as well as inform nurse colleagues and leaders of the unique qualities and characteristics of the Gen Z nurse. This information will help improve collaboration and communication as these nurses transition into the workforce.

**209 Low English Proficiency: Nurse Utilization of Interpreter Services**  
*Hilda Gonzalez-Tagliaferro, RN, BA; Kathryn James, RN, BSN, CMSRN*

Patients with low English proficiency (LEP) are at higher risk of adverse outcomes due to language barriers. However, consistent use of interpreter services has not been well documented. This session will review the results of a survey on nurses’ use of interpreters for LEP patients and explain the benefits of interpreter services, the clinical challenges associated with the use of interpreter services, and potential interventions to ensure culturally focused models of care.

**210 Failure Is Not an Option: Assessment Strategies to Identify Patients at Risk for Deterioration**  
*Matt Bemer, BSN, CCRN*

Standardized systems-based physical assessment tools can reduce delays in recognizing and treating patients at risk for deterioration. Participants will learn about the importance of early recognition of deteriorating patients, what resources are available for the escalation of care, and an organized approach to physical assessment using standardized assessment tools.

**211 Leveraging Virtual Care Partners to Add an Extra Layer of Support to Our Patients and Team Members**  
*Kristen Dickens, MBA, BSN, BA, RN, CENP; Cindy Merrow, MSN, RN, MEDSURG-BC*

A southeastern acute care community hospital implemented the Virtual Care Partners (VCP) program in a medical-surgical unit to address concerns about the impact of the workforce shortage on quality and safety metrics by incorporating virtual support to the nurse team. Learn how the VCP pilot program successfully improved discharge times and lowered length of stay and readmissions.

**212 The Coach Calls the Shots: Onboarding New Graduate Nurses With a Coach Model of Precepting**  
*Jessica Tolzman, MSN, RN, PCCN; Christina Freeman, MSN, RN, PCCN-K*

Participants will learn how one multihospital system developed a coach model of precepting for new graduate nurses (NGNs) to ease the burden on RN preceptors and provide a safe, supportive environment for NGN orientation amid a nursing shortage. This session will detail the structure of the coach model, observed outcomes, and strategies to customize the model for different units and patient populations.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

**SATURDAY, SEPTEMBER 14**

**6:00 a.m. – 7:00 a.m.**

**AMSN MORNING WALKING CLUB**

**7:30 a.m. – 9:00 a.m.**

**EXHIBIT HALL OPEN WITH BREAKFAST AND POSTER VIEWING**

**8:00 a.m. – 12:00 p.m.**

**REGISTRATION OPEN**

**8:00 a.m. – 9:00 a.m.**

**POSTER VIEWING WITH PRESENTERS**

**9:15 a.m. – 9:30 a.m.**

**UPDATE FROM MSNCB AND CMSRN OF DISTINCTION AND CLINICAL LEADERSHIP AWARD PRESENTATIONS**

**9:30 a.m. – 10:30 a.m.**

**301 General Session: Empathy in Action — Elevating Nursing Practice in Pain Management**

*Michael Urton, DNP, APRN, AGCNS-BC, NEA-BC*

Helping patients address acute and chronic pain while in the hospital is an almost-universal challenge for nurses, requiring knowledge about pain physiology, assessment techniques, and a variety of treatment modalities. But successful pain management demands more than pain scales and medications; it requires compassion, empathy, and a commitment towards relieving suffering. This presentation will review foundational pain management skills while highlighting the role nurse empathy plays in care delivery.

**10:30 a.m. – 10:45 a.m.**

**MORNING COFFEE BREAK IN THE EXHIBIT HALL**

**11:00 a.m. – 12:00 p.m.**

**302 Mentoring Matters! The Future Is Now**

*Margot Lisa Hedenstrom, PhD, RN, MSN, MBA, NEA-BC*

A study found that mentoring helped engage nurses at a time of high vacancy and attrition rates during the COVID-19 pandemic. Learn about the implementation of a clinical nurse mentoring program that uses structured education, tools, and evaluation and how it benefited both mentors and mentees.

**303 Collaborative Conversations on Equity, Inclusion, and Justice**

*Christine Ijiomah, BSN, RN; Tara Lerew, BSN, RN, NE-BC*

An acute care burn and pediatric trauma unit used monthly equity in the moment (EIM) forums and the Halt, Engage, Allow, Learn, and Synthesize (HEALS) model to address inequities and microaggressions in real time. Learn how EIM and HEALS fostered an environment for bias recognition, individual growth, and collective action and how they could be implemented in other facilities to address the role of bias and microaggressions in healthcare disparities.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

### 304 MSNCB Presents... CAVRN
*Jessica Tully, DNP, RN, CMSRN, CNML, CENP; Dominick Pahl, MS, RN, CAVRN; Lisbeth Votruba, MSN, RN, CAVRN; Michael Szeli, MSN, APRN, AGCNS-BC, CMSRN; Allison Nelson, BSN, RN, AMBC, CAVRN*

Join the MSNCB president to learn about the Certified Acute-Care Virtual Registered Nurse (CAVRN) certification: who it’s for, why it was developed, and how it was developed. A group of panelists will discuss the present reality and possible future of acute-care virtual nursing, what certification can add to this field, and what MSNCB should consider in the development and defense of the certification.

### 305 Rapid Fire Session — Respiratory:

#### 305A Clean Teeth, Clean Lungs: An Evidence-Based Practice Approach to Reducing NV-HAP in the Medical-Surgical Population
*Holly Wirth, MSN, RN, NE-BC, CNE, SCRN*

This short format presentation will provide participants with a better understanding of the prevalence of non-ventilator hospital-acquired pneumonia (NV-HAP). Although oral hygiene is considered a cost-effective and easy-to-perform risk reduction strategy for NV-HAP, it tends to be overlooked or underperformed by clinical staff. Learn how an evidence-based oral hygiene quality improvement project implemented in two medical-surgical units at a large urban hospital helped reduce NV-HAP.

#### 305B A Breathtaking E-Learning Experience: Evidence-Based Practice Quality Improvement Initiative for COPD and Pneumonia
*Cristen Mackwell, DNP, MSN, BSN, RN, CMSRN, EBP-C, GEROB-C, NPD-BC; Kelsey Day, MSN, RN, MEDSURG-BC*

A study of RNs at a mid-sized, integrated healthcare system found that interactive learning management system (LMS) modules for chronic obstructive pulmonary disease (COPD) and pneumonia increased RNs’ knowledge and comfort level in caring for patients with these conditions. This session will explain how LMS platforms can be more accessible and fiscally responsible than in-person classes.

### 306 Rapid Fire Session — Innovative Education Programs:

#### 306A Kidney Land: Renew the Review
*Linda Juriga, M.Ed., BSN, RN, CMSRN*

Learn how a simulated board game helped improve nurses' knowledge of peritoneal dialysis. Find out why study participants called Kidney Land “fun,” “educational,” and “kidney-tastic” and why four hospitals are using the format for knowledge validation.

#### 306B Heparin and All: Escape or Fall
*Kayleigh Dusza, MSN, RN, CMSRN; Evangeline Galizio, BSN, RN, CMSRN*

The Heparin Escape Room was launched at one hospital to reduce heparin errors by RNs through an interactive learning session. Learn how the escape room improved patient outcomes and why it has been added to new hire orientation.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

12:00 p.m. – 1:00 p.m.
**LUNCH WITH EXHIBITORS, POSTER VIEWING, AND PASSPORT TO PRIZES DRAWING**

1:15 p.m. – 2:15 p.m.

**307** Operationalizing Managerial Coaching in Day-to-Day Activities of the Nurse Manager
Karen Percell, PhD, RN, CPHRM
This session will provide tools to operationalize managerial coaching for nurse managers, with a focus on model coaching conversations, dashboarding, and creating meaningful datapoints.

**308** Staying on Your Feet Is Sweet: An Evidence-Based Practice Initiative (Falls)
Cristen Mackwell, DNP, MSN, BSN, RN, CMSRN, EBP-C, GERON-BC, NPD-BC; Kelsey Day, MSN, RN, MEDSURG-BC
Two medical-surgical units implemented evidence-based practice (EBP) strategies for fall prevention that were identified through a literature search. This session will detail those strategies, their impact on fall rates, and how the EBP fall reduction initiative can be replicated by other facilities.

**309 Rapid Fire Session — Opioids:**

**309A** One Breath at a Time: Keeping Patients Safe With PRODIGY Risk Assessment
Susan Bohnenkamp, MS, RN, ACNS-BC, CCM
The PRediction of Opioid induced respiratory Depression In patients monitored by capnoGraphY (PRODIGY) risk assessment was incorporated into the workflow on two surgical units at an academic medical center in the southwest to identify high-risk patients based on several risk factors. Participants will learn how PRODIGY supports critical thinking related to ventilation, early intervention, and safe administration of opioids and about its impact on patient safety.

**309B** Interprofessional Opioid Safety in the Medical-Surgical Unit
Brooke Schmitt, MSN, RN, CNML; Jessica Scheideler, BSN, RN, CMSRN; Aimee Burch, DNP, APRN-CNS, CMSRN, SCRN
This session will review the results of a study that involved the implementation of an interdisciplinary-created nurse-driven protocol to initiate defined monitoring guidelines based on patient risk factors and amount of intravenous push opioids (IVPO) given to prevent opioid-induced respiratory suppression. Learn how the nurse-driven monitoring algorithm for IVPO improved patient safety, reduced naloxone use, and could be adopted at other facilities.
Please note that the schedule is subject to change and all times are listed in Eastern Daylight Time.

Krystal Lott, MSN, RN, CMSRN; Miranda Scoggins, MSN, RN, PCCN, CCRN
Learn how a nurse-led peer-to-peer support program can bolster personal and professional growth, self-leadership skills, and the overall well-being of healthcare workers and how it could have an impact in your organization.

311 Building Confidence in Practice for New Graduate Nurses Through Simulation
Emily Moser, MSN, APRN, AGCNS-BC; Kecia Hall, MSN, RN, NPD-BC
This session will detail the results of a study involving a simulation of a patient exhibiting the signs and symptoms of a chronic obstructive pulmonary disease (COPD) exacerbation, which required participants to recognize clinical deterioration, work together as a team, and call a rapid response. Learn how simulation-based learning can boost confidence among new graduate nurses.

2:30 p.m. – 2:45 p.m.
CLOSING REMARKS

2:45 p.m. – 3:45 p.m.
312 Closing Keynote: Staying Joyfully Engaged at Every Stage of Your Career
Donna Cardillo, MA, RN, CSP, FAAN
Florence Nightingale said, “Nursing should not be a sacrifice, but one of the highest delights of life.” Staying fully engaged and happy through the continuum of your career is vital to your success, your effectiveness as a healthcare professional, and even your health. Spend a fun, energetic, and practical session with The Inspiration Nurse as we explore ways to pump up the volume in your career...and your life!
## THURSDAY, SEPTEMBER 12

11:45 a.m. – 1:00 p.m.

**Opening Keynote: Don’t Just Play — Win!**  
*Lee Rubin*

Developing a clear sense of identity is critical to reaching your full potential and setting specific and lofty goals will drive you past your comfort zone. During this engaging keynote, Lee explores the characteristics found among the high achievers across industries and disciplines. Winners embrace adversity and leverage their challenges for individual and team growth. Lee masterfully weaves vivid stories with universal truths into a memorable experience. Audiences leave inspired and equipped to apply the lessons learned and take their performance to new heights.

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## FRIDAY, SEPTEMBER 13

9:30 a.m. – 10:30 a.m.

**General Session**  
*Kristi Campoe, PhD, RN, CMSRN, CPHQ, sMBA; Michael Szeliga, MSN, APRN, AGCNS-BC, CMSRN*

In this evolving healthcare landscape, the medical-surgical nurse is uniquely positioned to own their practice through positive disruptions. This session aims to empower the medical-surgical nurse to strengthen their foundation as a problem solver thinking outside the box, an innovator to create new workflows that work for them, a transformational leader creating a stronger identity and community, and an advocate for their profession and the nursing specialty.

1:45 p.m. – 2:45 p.m.

**General Session: AMSN Founders Award, Ernest Grant, PhD, RN, FAAN**

Hear from Dr. Ernest Grant, the recipient of the 2024 AMSN Founders Award for Distinguished Practice. As an expert in the field of diversity, equity, inclusion and belonging in the nursing field as well as the first male president of the ANA, this session will be sure to be insightful and deeply impactful for nurses at every stage of their career.
SUNDAY, SEPTEMBER 14

9:30 a.m. – 10:30 a.m.

General Session: Empathy in Action — Elevating Nursing Practice in Pain Management
Michael Urton, DNP, APRN, AGCNS-BC, NEA-BC
Helping patients address acute and chronic pain while in the hospital is an almost-universal challenge for nurses, requiring knowledge about pain physiology, assessment techniques, and a variety of treatment modalities. But successful pain management demands more than pain scales and medications; it requires compassion, empathy, and a commitment towards relieving suffering. This presentation will review foundational pain management skills while highlighting the role nurse empathy plays in care delivery.

2:45 p.m. – 3:45 p.m.

Closing Keynote: Staying Joyfully Engaged at Every Stage of Your Career
Donna Cardillo, MA, RN, CSP, FAAN
Florence Nightingale said, “Nursing should not be a sacrifice, but one of the highest delights of life.” Staying fully engaged and happy through the continuum of your career is vital to your success, your effectiveness as a healthcare professional, and even your health. Spend a fun, energetic, and practical session with The Inspiration Nurse as we explore ways to pump up the volume in your career...and your life.
HOTEL
The 2024 AMSN Annual Convention will take place at the Sheraton Centre Toronto Hotel and AMSN has secured a block of rooms for attendees.

Sheraton Centre Toronto Hotel
123 Queen Street West, Toronto, ON M5H 2M9
Room Rate: $244 USD/$322 CAD/night

The link to book your hotel for the Sheraton Centre Toronto Hotel will be provided in your registration confirmation email.

TRAVEL
The airports closest to the convention center and hotel are the Toronto Pearson International Airport (YYZ) and Billy Bishop Toronto City Airport (YTZ).

RECOMMENDED
- Toronto Pearson International Airport (YYZ)
  16.8 miles away
- Billy Bishop Toronto City Airport (YTZ)
  2.8 miles away

PASSPORT INFORMATION
AMSN would like to remind all U.S. citizens that they are required to have a valid U.S. Department of State-issued passport to enter Canada. The U.S. State Department is currently recommending that new applications for a passport are submitted 12-16 weeks prior to travel and that renewals are submitted 6-8 weeks prior to travel.