



Spring Newsletter 2019

Message from the CSORN President

Happy Spring to all of our CSORN Members!

I trust everyone is ready for warmer temperatures after another cold Canadian winter.

Vancouver is enjoying a very quick entry into spring this year. Vancouverites have transitioned quickly from their winter attire into spring clothing. It's great to see everyone enjoying the blue skies and getting an early start to running and cycling.

We have been busy organizing the, guest speakers, funding & events for the national conference in beautiful historical Quebec City. I hope everyone will enjoy the city and the symposium we have organized for you as it has been challenging to arrange the conference from the west coast. I'd like to thank Carole Desharnais & Valerie Rivet from Montreal & Sarah Singh from Surrey, BC for assisting with guest speakers for the annual meeting.

Please visit the following link for conference information <http://www.cos-sco.ca/quebec2019>.

The link provides information on the conference program, the registration deadlines, conference discounts on airfare with Air Canada & WestJet, & recommended conference hotels.

The registration for the early conference rate is April 23rd and CSORN members must register under the Allied Health category. This year's conference rate is \$420. After April 23rd the rate increases to \$520.

Support for the conference is available for the first 10 members requesting funding with the early registration rate. In order to obtain funding you can email your request to the National CSORN Treasurer - Lillian Smithson at treasurer@csorn.ca. To qualify for funding you must be a member in good standing for 2 years and you can ask for support every 2nd year. Approved members will be reimbursed with a receipt during the conference.

The executive meeting will be held on Friday afternoon. All executive members and Regional leads are welcome. Please email Kate if you plan to attend the conference. Kate will contact you with the time & place.

The town hall discussion will return again this year, please send your interests and ideas you would like discussed to catherine.callaghan@vch.ca. This is the perfect opportunity for networking and sharing our ideas on how we resolve practice issues and problems.

2019 CSORN Scientific Program:

Agenda

Saturday June 15, 2019

7:30
AM

Registration

🕒 30 minutes | 7:30 am - 8:00 am | Part of: [CSORN: Patient Advocacy & Leadership](#) |

8:00
AM

Welcome & opening remarks

[Kate Callaghan RN, BsN](#)

🕒 5 minutes | 8:00 am - 8:05 am | Part of: [CSORN: Patient Advocacy & Leadership](#) |

8:05
AM

Complicated cataracts: A retinal perspective

[Steve Levasseur BSc, MD](#)

🕒 40 minutes | 8:05 am - 8:45 am | Part of: [CSORN: Patient Advocacy & Leadership](#) | Talk | Exposé

Allied Health

8:45
AM

Diabetic retinopathy

[Jesia Hasan MD, FRCSC](#)

🕒 40 minutes | 8:45 am - 9:25 am | Part of: [CSORN: Patient Advocacy & Leadership](#) | Talk | Exposé

Allied Health

9:25
AM

Town hall discussion

🕒 35 minutes | 9:25 am - 10:00 am | Part of: [CSORN: Patient Advocacy & Leadership](#) |

10:00
AM

Break

🕒 45 minutes | 10:00 am - 10:45 am | Part of: [CSORN: Patient Advocacy & Leadership](#) |

10:45
AM

Pre-operative assessment for cataract surgery

[Nawaaz Nathoo MD, BSMD, FRCSC](#)

🕒 35 minutes | 10:45 am - 11:20 am | Part of: [CSORN: Patient Advocacy & Leadership](#) | Talk | Exposé

Allied Health

11:20
AM

Annual General Meeting

[Kate Callaghan RN, BsN](#)

🕒 55 minutes | 11:20 am - 12:15 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) | Business Meeting | Séance

De Travail

Allied Health

12:15
PM

Lunch

🕒 1 hour 15 minutes | 12:15 pm - 1:30 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) |

1:30
PM

Vision rehabilitation as part of the continuum of eye care

[Mary Lou Jackson MD, FRCSC](#)

🕒 55 minutes | 1:30 pm - 2:25 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) | Keynote Speaker |

Conférencier Invité

Allied Health

2:25
PM

The role of CNIB in vision rehabilitation

[Jennifer Urosevic Executive Director of VLRC](#)

🕒 35 minutes | 2:25 pm - 3:00 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) | Talk | Exposé

Allied Health

3:00
PM

Break

🕒 30 minutes | 3:00 pm - 3:30 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) |

3:30
PM

Leadership in the role of nurses and nurse managers in ophthalmology

[Andrée-Anne Berube RN, BsN, MsN](#)

🕒 45 minutes | 3:30 pm - 4:15 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) | Talk | Exposé

Allied Health

4:15
PM

Closing remarks

[Kate Callaghan RN, BsN](#)

🕒 15 minutes | 4:15 pm - 4:30 pm | Part of: [CSORN: Patient Advocacy & Leadership](#) |

Post Conference Dinner

Once again we need to give a very big thank you to Paul Charrette & J&J as they will sponsor the CSORN dinner on Saturday evening.

Paul received funding for 65 people so please RSVP as soon as possible. We like to have the exact number of people attending by May 25th. The details of the dinner are provided on the invitation included in the newsletter.

Also Paul has arranged a wonderful speaker Dr. Lesya Shuba an ophthalmologist from Halifax Nova Scotia to speak and her presentation is titled “Through the Eyes of Artists”.

New Regional Group

I'm pleased to announce that a new regional group is developing in Victoria, BC. The new group will be spearheaded by John Grove who works at the Royal Jubilee Hospital (RJH) in Victoria. He's busy soliciting new members from the RJH ORs and ophthalmology clinics and he hopes to expand the membership to other areas of Vancouver Island. John was very helpful when Linda Wong & I organized the 2015 CSORN conference in Victoria.

I look forward to meeting with everyone in June; please encourage all your nursing colleagues to attend this conference as we have some ophthalmology topics not presented before.

Thank you,
Kate Callaghan

Essay Writing Contest

We had 4 CSORN members participate in the essay writing contest.

I'd like to give each person a big thank you for taking the time to pen a heartfelt composition titled: “Why I'm Proud to be a CSORN Member”. The Executive enjoyed reading all the submissions.

I'd like to explain the process we followed in order to make our decision.

The essays were sent to Adonis. Adonis and Kate redacted person details so the executive could make an unbiased decision without revealing which part of Canada the author came from.

Adonis distributed the submissions to the executive for discussion then the decision was made by Carole, Donna & Lillian. Adonis & Kate abstained from the vote since we were aware of who wrote each essay.

Congratulations goes to Tina Cheng from the Eye Care Centre OR in Vancouver as the winner of the contest.

Tina has been working at the Eye Care Centre for 3 years now and is really excited about attending her first National CSORN conference. Tina's essay is provided below for everyone to read.

Why I am Proud to be a CSORN Member

By Tina Cheng

When I first started peri-operative nursing, I never thought I would be interested in ophthalmology, I had an aversion to eyes and the thought of manipulating and cutting into the eye was an uncomfortable thought. One day, my mother was unexpectedly diagnosed with early stages of glaucoma. I took this as a sign and looked into ophthalmology. As fate would have it, there was a temporary position available at the Vancouver Coastal Health Eye Care Center. I applied and soon after, I joined the Canadian Society of Ophthalmic Registered Nurses (CSORN).

After being exposed to different types of surgeries, I realized that the cataract surgeries moved at a faster pace than I had expected and I had to learn the steps quickly in order to keep up with the surgeons' pace and not delay the room. As I became more comfortable with the rhythm of each surgery, I began to understand the reasoning behind each step. Although the procedures are dramatically faster than the ones I am accustomed to in the Vancouver General Hospital Main Operating Room, the potential complications due to surgical errors also progresses quickly. The ophthalmic RN needs to be proactive and act fast in emergency situations in order to minimize the severity of complications. Without fully being in the ophthalmology world, it can be difficult to understand the challenges that Ophthalmic RNs face. The complexity of ophthalmic surgeries require nurses to not only be fully focused, but also to understand the procedure and reasoning behind each action in order to be able to anticipate need and proactively hand over instruments based on the surgeon's actions. The significance of an ophthalmic RN's role cannot be overlooked.

When I arrived at my very first CSORN meeting, I was excited to learn that an ophthalmologist would be presenting on suprachoroidal hemorrhage. The presentation helped me understand why he is adamant on taking a patient's blood pressure before the start of his glaucoma surgeries. He also explained in detail what to expect and how to act when choroidal hemorrhage occurs. Understanding the reasoning behind each action and step really helped my personal development as a peri-operative nurse. Knowing what to expect and how to handle stressful situation while remaining calm is crucial. I started to apply what I was learning from these presentations and meetings to my daily OR nursing practice. I am more aware of smaller details and have become more stringent on my techniques when preparing my patient for surgery, organizing the back table or setting up the necessary equipment. Joining CSORN has greatly helped my personal education and development while also improving my general nursing and operating room skills.

As OR nurses, we are the patients' advocates and voices for optimal surgical care. We must uphold the standards of ethical practice to ensure patient safety. In order to provide safe patient care, we must be self-motivated and stay updated on current nursing best practices supported by evidence-based research. Practice standards are constantly changing based on study results, as well as physicians' reports of patient outcomes. An example that was presented in one of the meetings was about endophthalmitis and what practice changes were made in order to eradicate this complication from our patients. From changing the practice from our sterile processing team to how we set up the balance salt irrigation on our back table, it was a team effort between surgeons, nurses, and our reprocessing and sterilization staff. It was reassuring and encouraging to see a lowered rate of complications in our Centre.

Advancements in new surgical techniques and implants are being introduced more frequently. Changes in the surgeons' and nursing practices are unavoidable, but it is our responsibility as medical professionals to stay up to date and knowledgeable. In our CSORN meetings, I continue to learn about new technologies and techniques available to patients. Having different ophthalmologists attend our meetings and take the time to educate us on new practices and technologies gives us the opportunity to discuss these new advancements with fellow ophthalmic nurses from different local sites and hear what each person thinks about these new techniques.

CSORN offers a sense of belonging as a group of specialized nurses. Operating Room nurses are a specialized group, but to have an even smaller group of ophthalmology nurses working together is even more humbling. Knowing that there are nurses out there with the same values and views as yourself encourages me to continue advancing in this area. Sharing practices and knowledge between groups helps to improve personal and team development. It would be an honor to attend a national meeting and meet different CSORN members from all over Canada, all of whom have different experiences, backgrounds, techniques and perspectives to offer. I am particularly interested in learning about their thoughts on working with a surgeon who is trialing different techniques and implants.

CSORN offers personal and team development, promotes patient safety with updated practice standards, and provides ophthalmic RNs' a support group for a highly specialized service. I am proud to be a CSORN member and I have decided to pursue further knowledge and education in ophthalmology. The more I understand and learn about surgeries, the more confident I feel in offering the best care for the patients in my care as well as provide the best assistance to our surgeons.

Future Conferences & Meetings

- American Society of Cataract & Refractive Surgeons (ASCRS) Symposium:
May 3-7, 2019 – San Diego Convention Centre
- Canadian Ophthalmological Society (COS):
June 13 -16, 2019 – Quebec City Convention Centre
- Sally Letson Symposium:
September 12-14, 2019 – Westin Hotel, Ottawa
- American Academy of Ophthalmology Annual meeting (AAO)
October 12-15, 2019 – Moscone Center, San Francisco
- Walter Wright Symposium:
December 6-7, 2019, – Metro Toronto Convention Centre

Provincial Reports

BC Vancouver Chapter: Adonis Manglapus

Dr. M. Tan gave a lecture on the review of Glaucoma procedures for our New Year's CSORN. Anna Pasternak-Bananrer, our co-chair did an amazing job organizing the majority of it. The meeting was well attended with 49 nurses with an amazing venue and an interesting topic. Thank you Dr. Tan! The BC-CSORN Chapter stands at 57 members.

In the Eye Care Centre (ECC) at Vancouver General Hospital, we are doing more and more Glaucoma cases. We are pleased to welcome a new Glaucoma specialist on staff. Collectively, our surgical team did nearly 100 Gonioscopy-Assisted Transluminal Trabeculotomy for fiscal year. To help with the increases in Glaucoma and Cataract surgeries, we are excited to welcome 2 new staff to our surgical suite.

Take Care and looking forward to reconnecting at the COS in Quebec

Ontario GTA Chapter: Marcela Tutay

Recent change in the Ontario provincial government has created ripple effects filtering through the conversation mill.

There is a proposal for a “super agency” which means elimination of the LHINs (local Health Integrated Network) and having one (1) governing body manage all funding for Quality Based Procedures (QBP), not just ophthalmology but all surgical procedures. All eye and ears are abuzz for what happens next...

The Toronto Cataract Course was held on Saturday, March 2, Westin Harbour Castle, and was well attended. Discussions included: Private and public funding for cataract surgery, pearls on surgical ophthalmology, when things go bad, and how to deal with unhappy patients. As always, I am sure it was well received.

The Toronto GTA chapter is currently planning on an education session that will not only include current members but also hoping to expand to staff working in private centres in the city. This will not only promote CSORN membership but also allows networking in all levels, more importantly learning from each other.

We are looking at a date sometime in May with the relevant topic: IOL types and indication of use/ Multifocal lens update. Marlene Griffin will be presenting on this topic.

Looking forward to this session.

On another note, we have all been seeing a retirement trend in our centre. Although expected, it may potentially cause a huge knowledge gap in the workforce. There should be more incentives for succession planning as we empower the new generation of ophthalmology nurses. We all know, it takes a special breed of health care providers to be eye nurses... passion and dedication with technical expertise...

Cheers and hope to see you in June!

Quebec Chapter: Carole Desharnais

We had a very long and cold winter. It did not stop us from working very hard in our respective establishments.

During the first week of February we had «white cane week». This gave us the opportunity to raise awareness of the reality of people living with a loss of vision. Web accessibility among other things, was discussed because it enables social integration and participation in daily life. Much work remains to be done in this regard.

Then in March came the World Glaucoma Week. There were activities organized in different health institutions. At Sacré-Coeur Hospital, Dr. Heckler distributed to her support staff a small questionnaire on Glaucoma with information and answers. On March 21st, they also organized a session on Glaucoma during the lunch hour. It was a unifying event that allowed the team to exchange and share their knowledge.

In recent year, Glaucoma Surgeons from different centers are offering minimally invasive glaucoma surgery (MIGS). Using microscopic-sized equipment and small incision reduce the incidence of complications but the surgeries are not always as effective as the classic glaucoma operation. So far the results seem good.

On March 19, the Quebec Minister of Health, made a statement at the National Assembly regarding Glaucoma. They recognized the importance of the World Glaucoma Week. They also recognized the importance of education and awareness in the domain of glaucoma, a first in Quebec. Thanks to the effort and hard work of the McGill Glaucoma Information Centre.

Our Quebec Chapter is planning an informal reunion during the first week of May. If you are interested, you can contact us desharnaiscaro@gmail.com or valerie.rivet.hsc@ssss.gouv.qc.ca

Hope to see you all in Quebec City for the 2019 CSORN Annual meeting

Ontario Ottawa Chapter: Rosemary Bickerton

The Ottawa CSORN chapter held their annual meeting in November with a wonderful presentation on glaucoma by Dr Maryam Abtahi. We are struggling with staffing these days as many of our longstanding nurses are retiring. It takes a special nurse to work in ophthalmology and many of these nurses have been with us for over 40 yrs. Replacing that wealth of knowledge will take time, however it is exciting to see the new and younger nurses get involved and see that ophthalmology nursing is much more than

meets the eye. 😊

The Ottawa Hospital is launching a new electronic medical record called EPIC. It is keeping us extremely busy with training, and building templates. It will certainly be epic when we begin to use this new program June 1st. It is very challenging and stressful while we prepare for this. Ophthalmology as you know has huge volumes in both the OR and the clinic areas so in preparation, we are decreasing our volumes by 30% across the board in both clinics and ORs. This will have quite an impact on our physicians and our patients but we hope to get back to normal volumes in 1 month.

We completed over 11,500 cataracts this year, 1,500 retinal cases and about 3,000 other including glaucoma, cornea, strabismus, and oculoplastics. Our glaucoma service seems to be growing as we are seeing increased patient volumes in the clinics and the OR. MIGS such as the XEN and iSTENT are being monitored closely with excellent results in the short term. We are hoping OHIP will fund these in the future. We are recruiting for an additional comprehensive surgeon with a subspecialty in glaucoma if you know of any one wanting to move to Ottawa.

Looking forward to seeing the CSORN team in Quebec City. We hope to have 6-8 nurses attend.

Atlantic Chapter: Mary Stairs

Halifax chapter continues on, we have actively been trying to maintain membership. Planning a meeting in the near future. Preparing for Summer and hoping not as warm as last year.

The hospital is underway with the Redevelopment of the Eye Center and Ophthalmology Operating room in a new building. We have received a New Cornea, Glaucoma and Comprehensive Surgeons Looking forward to development our program and the ongoing growth.

The Executive looks forward to seeing you in Quebec City.

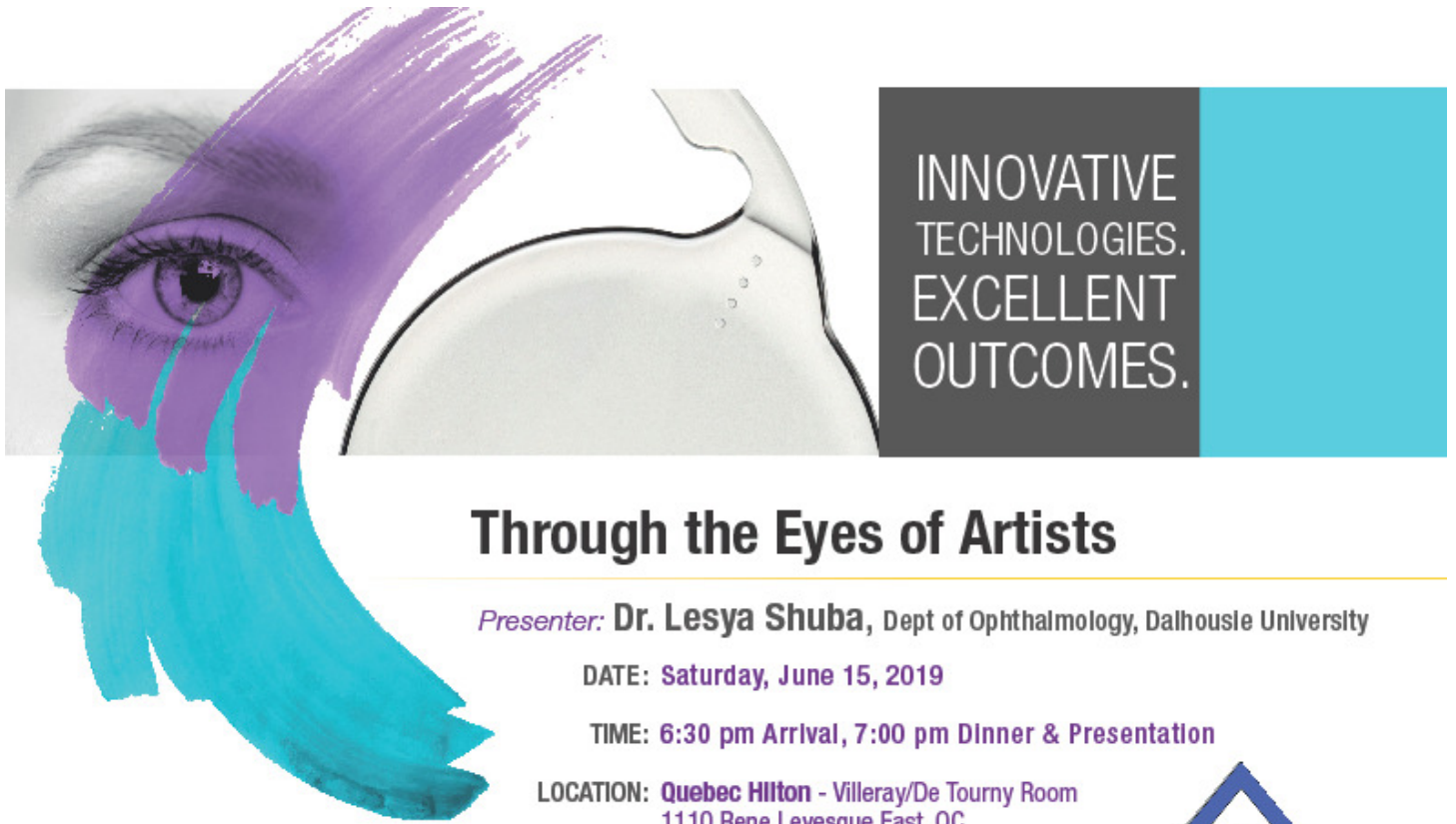
Kate Callaghan – President

Donna Punch – Past President

Carole Deharnais – Vice President

Adonis Manglapus – Secretary

Lillian Smithson – Treasurer



INNOVATIVE
TECHNOLOGIES.
EXCELLENT
OUTCOMES.

Through the Eyes of Artists

Presenter: **Dr. Lesya Shuba**, Dept of Ophthalmology, Dalhousie University

DATE: Saturday, June 15, 2019

TIME: 6:30 pm Arrival, 7:00 pm Dinner & Presentation

LOCATION: Quebec Hilton - Villeray/De Tourny Room
1110 Rene Levesque East, QC



RSVP to Paul Charette at pcharett@its.ini.com or 613-292-0001
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Johnson+Johnson VISION

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