

# “The Siren”

## Dallas County ENA



*Newsletter of the Dallas County  
Emergency Nurses Association*

*January – March 2007*

### ENA VISION

“Defining the future of emergency nursing and emergency care through advocacy, expertise, innovation and leadership.”

#### **Dallas County ENA Officers**

##### *President*

Mary Dunklin, RN  
Presbyterian Hospital of  
Dallas

##### *President-Elect*

Loren Larkin, RN  
Presbyterian Hospital of  
Dallas

##### *Secretary*

Cathy Stang, RN  
Baylor University Medical  
Center - Dallas

##### *Treasurer*

Joann Craze, RN

##### *Newsletter*

Cathy Stang, RN

##### *Past President*

Hollie Gehring, RN

DCENA Website  
[www.dcena.org](http://www.dcena.org)

TENA Website  
[www.TXENA.org](http://www.TXENA.org)

National ENA website  
[www.ena.org/](http://www.ena.org/)

### Dallas ENA Meetings

CEU Offering and Dinner and  
Business Meeting :

April 10th @1900  
Medical Center  
Plano

Topic: Seizure  
Management Issues  
Facing the  
Emergency  
Department  
Speaker: Dr.  
Kathleen Delaney



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**Happy St Patrick's Day!**



## DCENA Membership Drive Goal for 2007

Increase membership by 10%

Texas ENA has 2744 members  
and most in the nation!

Dallas ENA Chapter now has 438  
members

### Membership

Whether you are a staff nurse or a manager in an emergency department, an administrator, a pre-hospital, flight, pediatric, or trauma emergency nurse, an emergency clinical nurse specialist, a nurse practitioner, a student or an educator, you can benefit from membership in ENA. No matter your level of experience or the size of your emergency department, membership in ENA contributes to your professional growth. For more information about ENA, please visit the national website: [www.ena.org](http://www.ena.org) then click on Membership

### Who We Are

The Emergency Nurses Association (ENA) is an international, action-oriented organization ready to support the nursing profession with access to important scientific information and the latest research; networking opportunities with key governmental, academic, and professional contacts; and monitoring of government activities affecting the profession.

#### Mission Statement

ENA's mission is to provide visionary leadership for emergency nursing and emergency care.

*Welcome to the New DCENA Chapter  
Officers for 2007!*

President: Mary Dunklin

President Elect: Loren D. Larkin

Treasurer: JoAnn Craze

Secretary: Cathy Stang

Past President: Hollie Gehring

### Case Review Triage:

#### What do you suspect?

A family arrives in the ED on a cold winter morning, all complaining of headache, nausea, vomiting and dizziness since awakening this AM. The family says they have been using a space heater to keep warm during the recent cold spell.

#### What do you suspect, and what should you do?

### Baby Moses (Baby Save Haven) Law

The Texas "Baby Moses" or "Safe Haven" law provides a responsible alternative to mothers who might otherwise abandon, neglect or harm a newborn child. It states that a parent may leave an unharmed infant, up to 60 days old, at any **hospital or fire station** with "no questions asked."

#### SAFE BABY SITE INSTRUCTIONS



**Receive an unharmed infant that appears to be under 60 days old.**

Any parent may voluntarily deliver a child 60 days old or younger to a designated emergency infant care provider when the parent does not

express intent to return for the child. The law protects parents from criminal prosecution when they deliver an unharmed child.

**Medically stabilize the infant if needed.**

Use prudent judgment to protect the physical health and safety of the child until a Department of Family and Protective Services (DFPS) worker takes possession of the child.

**Offer the parent medical treatment and voluntary medical disclosure form.**

You may not detain or pursue the parent unless the child appears to have been abused or neglected.

**Contact Child Protective Services as quickly as possible.**

*For more information, and to receive Safe Baby Site signs and Information cards for your hospital:  
[babymosesdallas.org](http://babymosesdallas.org)*



Wonder what's happening at Texas ENA State Level (TENA)? Check out the TENA website for news, upcoming State meetings and events, educational offerings, committee reports and much more. You can access the TENA website at: [www.TXENA.org](http://www.TXENA.org)

Answer to Triage Question: **Carbon Monoxide Poisoning.** Carbon monoxide is a colorless, odorless and tasteless gas. It is produced whenever any fuel such as gas, oil, kerosene, wood, or charcoal is burned. CO binds to hemoglobin to form carboxyhemoglobin. CO has a 200x higher affinity for hemoglobin than oxygen does, which decreases the ability of the blood to carry oxygen, leading to severe hypoxia at the cellular level. **Diagnostics:** ABGs, carboxyhemoglobin levels, UA to assess myoglobin, cardiac enzymes. **Interventions:** 100% oxygen NRB mask 15L/min, IV NS, cardiac monitoring, seizure precautions & meds, consider hyperbaric oxygen chamber when COHb levels > 25%.

## Educational Opportunities

*UPCOMING COURSES: check website for more information:*

[www.dцена.org](http://www.dцена.org)



**Mark Your Calendars:**

## 2007 COOL TOPICS IN EMERGENCY & TRAUMA CARE SYMPOSIUM HOUSTON, TX

April 26 - 27, 2007

## CEN REVIEW

July 26&27, 2007

## DFW Symposium

August 17th



**Texas State ENA Meeting  
April 13 & 14, 2007  
South Padre Island**



If you have a story, article or event you would like to share with your colleagues, or would like to give "kudos" to a fellow co-worker, new CEN's, etc.. please let me know so that I can make your voice heard! Email: [cathy.stang@gmail.com](mailto:cathy.stang@gmail.com)

# CEN REVIEW

## Substance Abuse & Toxicology



1. Which of the following drugs should be avoided in the treatment of cocaine toxicity:
  - A. Diazepam (Valium)
  - B. Haloperidol (Haldol)
  - C. Sodium bicarbonate
  - D. Dopamine
2. The primary mode of decreasing systemic absorption of ingested toxins in the ED is which of the following:
  - A. Gastric lavage
  - B. Whole-bowel lavage
  - C. Syrup of ipecac
  - D. Activated charcoal
3. A wide QRS is noted on the ECG monitor of a patient who presented to the ED with tricyclic antidepressant poisoning. The drug of choice for treatment would be which of the following:
  - A. Sodium bicarbonate
  - B. Physostigmine (Antilirium)
  - C. Diazepam (Valium)
  - D. Flumazenil (Romazicon)
4. A drug of choice for treatment of suspected organophosphate poisoning would be:
  - A. Naloxone (Narcan)
  - B. Physostigmine (Antilirium)
  - C. Pralidoxime (2-PAM)
  - D. Flumazenil (Romazicon)

### Answers:

1. B- Haloperidol should be avoided in the treatment of cocaine toxicity. It could interact with the cocaine to cause hyperthermia.
2. D- Activated charcoal is the primary mode of decreasing systemic absorption of ingested toxins. Activated charcoal has fewer side effects than other methods.
3. A- Sodium bicarb is the drug of choice in the treatment of wide QRS, which may occur in tricyclic antidepressant poisoning, because it enhances the protein binding of the drug.
4. C- Pralidoxime (2-PAM) is utilized as an antidote for organophosphate poisoning because it releases binding of the insecticide. Atropine is given to ease symptoms. Narcan is a narcotic antidote; Antilirium is an anticholinergic antidote; Romazicon is a benzodiazepine antidote.

### Why be a CEN?



*Passing the CEN exam demonstrates knowledge of current emergency nursing practice. Emergency nurses who have become CEN's experience:*

- ✓ *Personal satisfaction*
- ✓ *Increased self-esteem*
- ✓ *Validation of their emergency nursing expertise*
- ✓ *Career advancement opportunities*
- ✓ *Financial rewards*

Visit [www.ena.org](http://www.ena.org) and click on "Certification/BCEN"