



Office of the American Lung Association of America 490 Concordia Ave. St. Paul, MN 55103-2441 1-800-642-LUNG PRST STD U.S. Postage Paid St. Paul, MN Permit No. 17



Bronchus

Official Newsletter of the Minnesota Society for Respiratory Care

SPRING 2006

VOLUME 30 #1

www.msrcnet.com

President's Message Carrie Bourassa, RRT



As I sit to write my first President's Message I look at all the things I have done in my time as a respiratory therapist. There is so much diversity in this profession. I often think I will never stop being

challenged. I will never stop learning from my patients and peers.

Whether it's the Flu pandemic preparedness, COPD awareness, neonatal research, advances in sleep medicine, or patients gaining access to respiratory therapists in the home, Minnesota respiratory therapists are involved in all the crucial aspects of healthcare. In 2006 we face many of the same things we have faced in years past. Staffing shortages, cuts in healthcare, a rise in lung related illnesses. Yet, with the fast pace of our profession, we continue giving our best and succeed in making a difference in the lives of our patients.

With the ever changing face of healthcare the MSRC is making changes to better serve the needs of the Minnesota RTs. In August of 2004, a survey was sent to all practicing respiratory therapists in the state. As a result of that survey; the MSRC has a new website to improve communication with all respiratory therapists in the state, members and nonmembers alike. There have been free educational offerings, more specialty topics as well as the North Regional Respiratory Care Conference.

President's Message continued on page 19.

Rapid Response Teams Dreams Really Do by Connie Knipp

Many hospitals across the nation are incorporating Rapid Response Teams (RRT) into their Scope of Practice. The Respiratory Care Department at Abbott Northwestern Hospital (ANW) is no exception. The premise for the RRT is to eliminate the slow, traditional model of going up the "chain of command" to contact the physician for an order or to get intervention. The goal of an RRT program is to improve patient outcomes quickly. It allows for faster intervention and rescue operation before the patient has a respiratory or cardiac arrest. Intervention usually occurs within 2-3 minutes rather than the time consuming 2-3 hour models of contacting the physician(s) to receive orders. Critical care providers respond quickly to potential patient crisis before patients start the terrible downward spiral.

The RRT was developed as a result of Abbott's participation in the Institute for Healthcare Improvement "Save 100,000 Lives Campaign". The concept was to develop and implement an RRT program in order to save lives. Research indicates that patients show signs and symptoms of impending doom up to eight hours before they actually arrest. According to Schein and Pena, 1990, 70% of the patients show respiratory deterioration within eight hours before they arrest. Other correlations include a study by Franklin, 1994, which shows that 66%

Article continued on page 4.

Come True

by Patricia Johnson, C.O.R.E. Respiratory Services

Have you ever wondered what it would be like if the one thing you had always dreamed of, came true? Well, I would like to share with you an incredible story of how we (the respiratory community) helped an extraordinary young man make his dream...a reality.

It all began the day C.O.R.E. Respiratory Services read an article about Patrick Ferrick in the October 2005 AARCTimes. Patrick is a local young man diagnosed at a young age with Congenital Myotonic Dystrophy causing him to become permanently ventilator and wheelchair dependent. Patrick requires 24-hour care provided by RT's, RN's and his mother. We read that Patrick had a dream of going to The Price Is Right TV show. Watching The Price Is Right was more than just a hobby, it was a passion of Patrick's.

C.O.R.E. Respiratory Services mission is to give back to the community in which it serves. Could C.O.R.E. create an opportunity for Patrick to visit the Price Is Right? What would be more memorable than to help Patrick? During Respiratory Care Week, I announced to Christine Langteau (Patrick's mom and fellow RT) that we wanted to help Patrick go to The Price Is Right. From that moment on I hadn't a clue to the insurmountable work

Article continued on page 16.

Legislative Update

NRRCC on the "Scandinavian Riviera"

A note from the... "Whatchamacallits"



Oxygen Services

Concentrators • Cylinder Gas Liquid Systems • Conserving Devices



ALLINA. HOME OXYGEN & MEDICAL EQUIPMENT

Allina Hospitals & Clinics

- Buffalo
- Fridley
- Cambridge
- Coon Rapids
- Hutchinson
- New Brighton
- New Ulm
- St. Paul
- Owatonna
- Minneapolis

Respiratory Equipment

CPAP/BiPAP • Apnea Monitors Ventilators • Nebulizers

Call Us Today!

651-628-4800 or 800-737-4473

www.allinahome.com



Partnering with you to enhance the health of the communities we serve.

Editor's Note

SUMMER ISSUE DEADLINE July 3, 2006

I am very excited to be able to attend the NRRCC meeting this year—last year I was one of the party poopers that couldn't make the journey to Wisconsin Dells. I always feel that our annual meeting and other board meetings throughout the year are a great time to network with other Respiratory Therapists. It's important to have friends in the world of Respiratory Care. Nobody else understands what it takes to do your job other than a fellow Respiratory Therapist. Most people in your family or circle of friends don't want to hear about the gory trauma case that came through the ER today or about your patient whose life has totally changed because of CPAP therapy.

The MSRC has been a great resource for me. In our age of technology, I am very excited about the improvements being made to the website. More people from all areas of Minnesota will have easy access to information and will be able to see what a great group of people work within the MSRC.



I would like to also encourage any facilities, individuals or organizations that want a subscription to *The Bronchus* to contact Nick Kuhnley. Annual subscriptions are just \$35. Please send a check and your information including Name, Company or Facility Name, Address, Phone and Email to: Nick Kuhnley, Respiratory Care North Memorial Health Care, 300 Oakdale Ave N, Robbinsdale, MN 55422-2900

Thank you again for all your support.

Megan Schultz Editor



The Bronchus is the official newsletter of the Minnesota Society for Respiratory Care, and an affiliate of the AARC. Published in Minneapolis, Minnesota. The Bronchus welcomes articles from respiratory therapists, physicians, nurses, and other health care personnel interested in pulmonary care.

Editorial Guidelines:

The Bronchus welcomes contributions from readers, whether in the form of editorials, counterpoints, or commentaries. The editors of The Bronchus make the final decision on what letters are published. All letters must include the writer's name, address, telephone number, and email address if available. This information will be included in the letter if it is published. Any reader responses to a submitted letter will be referred back to the author. Letters must also include the writer's signature. We reserve the right to edit all letters. Letters should be kept brief. By submitting a letter to the editor, a counterpoint letter or a commentary article to the MSRC you are agreeing to give the MSRC permission to publish the letter or article in any format and in any medium. All letters submitted become the property of the MSRC.

Disclaimer: All articles published, including editorials, counterpoints, and commentary, represent the opinions of the authors and do not reflect the official policy of the Minnesota Society of Respiratory Care or the institution with which the author is affiliated, unless this is clearly specified.

Editor —	Megan Schultz
Circulation Coordinator -	Jeff Anderson
Advertising Manager —	Nick Kuhnley

All materials for publication including advertisements should be in: MS-Word, Illustrator or QuarkXPress format sent via E-mail to:

The Bronchus:

Megan Schultz: meganterveen@hotmail.com

Change of Address?

If you change your address or are having problems receiving The Bronchus, please notify the MSRC c/o:

Jeff Anderson

8400 Coral Sea St. NE Suite #200 Blaine, MN 55449 (763) 780-0100 jander7337@aol.com

It will also be necessary to notify AARC Membership Services at:
11030 Ables Lane Dallas TX, 75229
so that you continue to receive AARC publications.

Would you like to advertise in THE BRONCHUS?

2006 RATES	3 Issue Rate	Single Rate	One Time Set-up Fee
Full Page Half Page	\$425/issue \$250/issue	\$450/issue \$275/issue	\$100/issue \$60/issue
Quarter Page	\$150/issue	\$175/issue	\$40/issue

Building Ads — At present, those customers who do not have the means to construct ads may submit materials* to *The Bronchus* and we will have basic ads constructed for a fee of:

Full Page \$175 Half Page \$150 Quarter Page \$125

Color is Available -

One additional color beyond B&W add: \$80/issue, any size For full color ads add: \$300/issue, any size

Premium Placement Offered — per each issue Inside Front Cover, full page ads add: \$50/issue Back Cover, half page ads add: \$25/issue

Website 'Bronchus' Electronic Ads -

The website is currently under construction. Please contact Ad Manager for details.

For more information, please contact:

Nick Kuhnley, Advertising Manager Respiratory Care Department, North Memorial Health Center 3300 Oakdale Ave. North Robbinsdale, MN 55422 Phone: (763) 520-7456 Fax: (763) 520-4755

nick.kuhnley@northmemorial.com

^{*}Photos, logos, discs, and script — The builder does not accept camera ready art, please call Ad Manager for assistance.

Rapid Response Teams

(continued from cover)

of the patients have signs and symptoms within six hours before they arrest. Nationwide, the traditional code blue teams, with CPR as the only form of resuscitation, are inappropriate. The challenge is to get trained personnel to the patient's bedside who exhibit the signs and symptoms of failure during the hours before they arrest.

Abbott Northwestern Hospital has two goals for their RRT. One is to decrease hospital mortality by 10% by June 2006 and the other is to decrease the number of code blue calls outside the ICU by 10% by June 2006.

The best part of the RRT is that hospitals can model their team to meet the specifications of their department and patient population. At Abbott, the team consists of a designated respiratory therapist and a critical care nurse who respond to emergency situations throughout the hospital and campus. Any staff member, physician or family member can call the RRT. Below lists the suggested RRT triggers:

- · Acute change in heart rate,
- · Acute change in blood pressure,
- · Acute change in respiratory rate,
- · Acute change in SPO2,
- · Acute change in level of consciousness,
- · Acute change in neuro status,
- · A suspected stroke,
- · Chest pain, and
- Staff worried or concerned about a patient.

During a rapid response the team works together similar to that of a code blue situation. When the team receives a page that a patient is having problems or that staff is uncomfortable with a patient's status, the team is dispatched to perform an assessment, review the chart, make recommendations for care and contact the physician, if necessary. The team helps stabilize the patient and aids with transports to another nursing station or diagnostic procedure as needed. Protocols and job descriptions are in place to expedite the diagnosis and treatment of the patient as quickly as possible. Teams must respond to the patients' room within 5 minutes of the page.

The RRT's goal is not to take over the care of the patient but to help the staff nurse give the appropriate care and treatment in a timely manner. Early intervention and stabilization are essential to the success of the program. One of the team's responsibilities is to help educate the person who made the call in the first place. The purpose of staff education is to aid the nurse in developing critical thinking and assessment skills and help build or increase their confidence. The staff nurse who calls the RRT is responsible for staying with the patient, collaborating with the team, assisting with the intervention and documentation of the response and overall evaluation of the program.

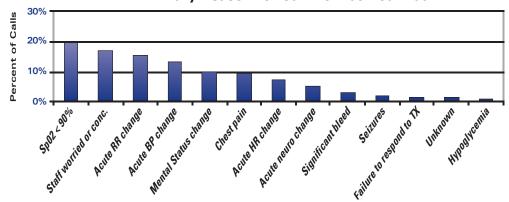
Although Abbott's RRT program is still in its infancy, preliminary quality assurance measures show a bright future. Over 232 calls have been made in the first three months. The majority of the calls have come in on the 3 – 11 shift followed by night shift. The chart below lists the reasons for the RRT calls. The top three calls include: 1. SpO2 < 90%, 2. staff worried or concerned about a patient or lab results, and 3. acute change in respiratory rate.

Quality Assurance will continue to conduct audits and analyze the data.

Rapid Response Teams in the metro area and across the nation are setting new standards of care for the hospitalized patients. The concept of identifying potential serious situations, contacting experienced personnel, and intervening before a downward spiral transpires should make an impact on patient outcomes. Not only has the Institute for Healthcare Improvement (IHI) used this as nationwide campaign but JCAHO is considering making this a Patient Safety Goal for 2007.

Connie Knipp Manager Respiratory Care Abbott Northwestern Hospital

Primary Reason for Call Nov '05 - Jan '06





www.msrcnet.com Spring 2006

Legislative Update

PACT Meeting/435 Plan Implementation by Julie Clark

The 2006 Political Action Contact Team (PACT) meeting was a resounding success as 100 therapists joined together on capital hill to meet with 240 congressional offices on behalf of our respiratory patients. This fruitful day on the hill was shortly after the first trial of the 435 grass roots communication plan that puts therapists and patients into action when a bill related to respiratory care begs a response.

The bill, 1932, contained language that would impact Medicare support for home oxygen patients who are on their therapy longer than 36 months. The official AARC stance on this bill, which has now passed despite our requests to have it defeated, is to work with the Secretary to make sure that the rules and regulations are written in a way to insure safety for our patients in the home.

So how did we fare with the Minnesota congressional offices this year? I have written a score card below indicating the level of support from our leaders thus far. Please take a moment to look up your congressional leader and see where he or she stands on the issues.

District #1 Congressman Gil Gutenecht

RT Medicare Home Care:

Supportive if budget neutral

Outpatient Pulmonary Rehab.

Supportive in concept

Other notes: This was the most positive meeting with this office in 5 years. The staff person was very interested in hearing our issues and had many questions. I was particularly proud to hear about the many student letters received by this office related to bill 1932.

District #2 Congressman John Kline

RT Medicare Home Care:

Will consider support

Outpatient Pulmonary Rehab:

Asked for follow up when this is introduced in the house

Other notes: We are fortunate to have developed a very positive relationship with this office. The staff person will revisit our issues with the congressman at their regular weekly meeting.

District #3 Congressman Jim Ramstad

RT Medicare Home Care (HR 964):

Staff will ask again about co-sponsorship

Outpatient Pulmonary Rehab.:(\$1440)

Congressman supportive, follow up when this is in the house

Other notes: Another long term, positive relationship with this office. Staff person will ask to have the committee request scoring of the bill by the congressional budget office (CBO). Congressman will consider joining the COPD Caucus.

District #4 Congresswoman Betty McCollum

RT Medicare Home Care (HR 964):

Was co-sponsor last session, likely will again

Outpatient Pulmonary Rehab.:(\$1440)

Will support likely co-sponsor when it is introduced in the house

Other notes: very interested in CPR training for their office, will request that HR 964 be scored By CBO, looking into a media event with Carrie and Patrick Ferrick (both in her district)

District #5 Congressman Martin Sabo

RT Medicare Home Care (HR 964):

Will ask congressman to co-sponsor, was in last congress

Outpatient Pulmonary Rehab.:(S1440)

Generally supportive contact when in house

Other notes: some concern about Medicare related bills even if they are budget neutral

District #6 Congressman Mark Kennedy

RT Medicare Home Care (HR 964):

Noncommittal, follow up in 2 weeks

Outpatient Pulmonary Rehab.:(\$1440)

Noncommittal

Other notes: wants information on asthma and COPD

District #7 Congressman Collin Peterson

RT Medicare Home Care (HR 964):

Already is a co-sponsor of this bill

Outpatient Pulmonary Rehab.:(\$1440)

Will consider supporting

Other notes: The office will ask for a CBO score, wants more information on COPD.



Legislative Update (continued from page 6)

District #8 Congressman James Oberstar

RT Medicare Home Care (HR 964):

Will co-sponsor this bill

Outpatient Pulmonary Rehab.:(\$1440)

Supportive, wants to learn more

Other notes: The staff person is very supportive and interested in respiratory health issues, wants more information on COPD and will also ask for a CBO score.

Senator Mark Dayton

RT Medicare Home Care (HR 964):

Will likely co-sponsor when introduced in Senate

Outpatient Pulmonary Rehab.:(\$1440)

Is already a co-sponsor of this bill

Senator Norm Coleman

RT Medicare Home Care (HR 964):

Will ask for CBO score, noncommittal until then

Outpatient Pulmonary Rehab.:(S1440)

Will ask for CBO score, noncommittal until then

Other notes: wants information on COPD, follow up in 1-2 weeks

We have some work ahead of us in Minnesota but are off to a great start!! In order to make the 435 plan more of a success, we need a few more volunteers to help out. Specifically, we need an additional respiratory therapist for Districts #2 and #6. I will also need each member of the PACT 435 group to identify a patient advocate or two.

I would like to take this opportunity to thank the MSRC members and the MSRC Board of Directors for continuing to support sending two representatives to the annual PACT meeting in Washington D.C. Carrie Bourassa and I gain more savvy with each visit. We will now turn our attention to setting up appointments with our leaders in their home districts to continue our mission of improving care for our patients.

The MSRC would like to thank Pressworks, Inc. for their support and help in printing this issue of *The Bronchus!*





Student's **Corner**

MSRC Student Career Fair and Sputum Bowl Competition!



The 2006 Student Job Fair took place February 17th at the College of St. Catherine. One hundred twenty students from Minnesota, Wisconsin and North Dakota attended the event. During the Fair, participates had the opportunity to speak with twenty one potential employers from the Midwest and the east coast.





The Student Sputum Bowl competition took place after lunch. Six teams from four Minnesota Respiratory Care programs participated. The winner was Mayo, who will compete against the Wisconsin student team at the NRRCC Sputum bowl competition in May.





Other RC student news:

Look for Student Poster Board presentations in the vendor area during the NRRCC in May!

Introducing The Respiratory Technologies & Critical Care Divisions of VIASYS Healthcare Inc.

We're the names you've trusted for years. Now we're stronger than ever with the resources of VIASYS Healthcare, Working tagether our products make your applications easier.

Working together, our more than 100 customer care specialists make your life easier.

And working together -

Excellence for life is a commitment, not just a slogan

Bear

- · Bird
- SensorMedics

Critical Care

Sleep Biagnostics

- SenserMedics
- laeger
- Nicolet Biomedical

Pulmonary Function Diagnostics

- · Jaeger
- SensorMedics
- Spire Tech

For a closer look at our entire product range, visit our website at www.viasys.tv or contact your local representative.

Gerald Ebert, 800-231-2466 ext 3721 for Critical Care Sales Kelly Gefroh, 800-231-2466 ext 8837 for PFT and Sleep Diagnostic Sales Excellence For Life

NRRCC on the "Scandinavian Riviera"

Minnesota will host the 2nd Annual North Regional Respiratory Care Conference (NRRCC) in Duluth on the scenic shores of the "Scandinavian Riviera". This magical place known for its beautiful Lake Superior views along Canal Park, international shipping lanes and Nordic culture will provide a wonderful backdrop for Minnesota Respiratory Care Practitioners to network and learn along with their Wisconsin colleagues.

Once again top-notch national and local speakers will present on the current practice and environment of Respiratory Care. James Stoller, MD, known for his work in promoting Respiratory Therapist consult services will inspire us professionally as he presents on the "effectiveness" of RCPs. Lectures on the topic of mechanical ventilation will be given by highly published Richard Branson, RRT, and Dr. Avi Nahum. Specialty related tracks will be offered in acute and home care, diagnostics, pediatrics, sleep, education, management and something for students.

But wait, there's more!! Social activities include the first-ever NRRCC dodge ball tournament. Or tour the infamous Glensheen Mansion where you can see how the rich and famous lived. Celebrate on the Scandinavian Riviera at the "Get Beached" ball, where your beach duds and beach-y attitude will give you an early start on summer. The exhibit hall, sputum bowl competition and affiliate business lunch will round out this 3 day event.

For more information on the program and events, go to the new and improved MSRC website: www.msrcnet.com



COPD Committee Report

by Kris Mrosak

Our COPD Committee consists of me, Cheryl Sasse, Kim Tran, Matt Struve and Sommer Jensen. We have only had the opportunity to correspond via email thus far. Our Committee goals for 2006 are:

- Promote opportunities for the COPD population to increase their knowledge and ability in taking an active role in their healthcare
- Provide support to the legislative efforts of the MSRC
- Be a resource for individuals or programs seeking information regarding pulmonary rehab implementation and reimbursement

We will be working with the ALA in supporting the Respiratory Rally to be held this spring. The Rally will incorporate our goals of providing educational opportunities for the COPD population and support for the legislative issues.

You may reach me at mrosak@parknicollet.com with any comments or suggestions.

Life is Lovely... Breathe It Insm

With our talented team of respiratory therapists and healthcare professionals, Praxair Healthcare Services is with you every breath of the way—as we have been for 35 years.

We specialize in Home Oxygen, Respiratory Medications, Sleep Therapy Products and Services and Durable Medical Equipment. Experience all the beauty and wonder life has to offer. Call Praxair Healthcare Services today.

800-316-4016
Covering Minnesota and
Western Wisconsin
www.praxair.com/homecare



The New MSRCNET.com Website

by Derek Hustvet

What Has Been Done So Far

The new MSRC website went live in January, 2006, offering updated information related to special events, key contacts within the MSRC, RT schools, advertising, and much more. In just a few months we have had hundreds of visitors to the site and we are working hard at developing the site further and to keep it current. Our main goal is to provide easy access to information that may be needed in the day-to-day activities of all those involved in the respiratory community; students, staff, managers, vendors, etc.

Below you will find a more in-depth description of some key areas the site has to offer you.

Home Page

The Home page, as with all of the site pages, has the menu items listed down the left side of the screen. Each menu item has a pop-up sub-menu allowing you to access other pages with in the site by a click of the mouse. The Home page also offers a welcome/statement section that is a short paragraph from the MSRC President, a Chair Leader, or an important respiratory related news update. There is also a News section where you will find information and links on current items related to the site, the respiratory profession, MSRC activities, etc. On the lower right of the main screen you will find the Save-The-Date section listing the next few months meeting and convention dates.



MSRC Page

The MSRC page offers access to a number of pages related to MSRC business and membership. This is where you will find current officer listings, committee member listings, past board minutes, MSRC forms, bylaws, information on joining the MSRC, and more.



Event Calendar

This page offers links to the Interactive Calendar and the full year's Save-The-Date page. Here you can view more detailed information on upcoming and past events.



Jobs/Recruitment/ RT Schools

Here you will find many valuable links. The Jobs listing page offers employers a low cost way to reach a specific target audience of both local and out of state potential employees. These listings are available to those seeking a new job or just curious about other employment directions within the state, 24 hours a day, 365 days a year.



MSRCNET.com (continued from page 10)

There are also key links to pages that provide recruiting resources for encouraging others to choose a career in Respiratory Therapy. Links and information are provided to the five RT Schools within the state and to a list of all the accredited RT schools in the country.



Bronchus

Here you will find past issues of *The Bronchus* available for reading in an Adobe Acrobat format.



R.T. Fun

This section offers respiratory related word jumbles and crossword puzzles. Feel free to use them for extra credit in schools or a little friendly competition in your department. Either way they promise to be a challenge or a great way to brush up on your respiratory knowledge.



Professional/ Educational Resources

The Links from this page connect you with many sites covering a broad range of useful information for both professionals and nonprofessionals. For professionals there are links to the AARC's code of ethics in respiratory care, a link the state medical board where state registration may be obtained, RT org-



anizations throughout the country, military RT information, and respiratory related publications. There is general contact information for local and national equipment and service providers, including homecare companies and hospitals. For both the nonprofessional and the professional there is a disease and medical resource page with links to various research sites, organizations, and publications. Also for the nonprofessional there are pages for educational posters and information covering "What is an RCP".

Vendor/Advertising

Here employers and vendors can access information on advertising options/ pricing with either The Bronchus or the website. They will also be able to get booth registration information related to up coming conferences, job fairs, etc.



Please enjoy the site and always feel free to contact us with questions or comments related to the site and on what you would like to see available via the new MSRCNET!!

Spring 2006 11

Lung Cancer IS Preventable, By Nearly 90%!1

by Tobacco Abuse Prevention Committee

Estimated New Cancer Cases in Minnesota for 2005: 22,890
Estimated Cancer Deaths in Minnesota for 2005: 9,510

Estimated New Lung/Bronchus Cases in Minnesota for 2005: 2,620
Estimated Deaths Lung/Bronchus Cancers Minnesota for in 2005: 2,480²

Lung cancer is the leading cause of cancerrelated deaths in both men and women. Cigarette smoking is by far the most important risk factor for lung cancer.

Consider asking your patients, "What can I do to help you quit tobacco?" Free resources are available to all Minnesota Residents simply by calling 1-888-354-PLAN or the national hotline at 1-800-QUIT-NOW. Your hospital or clinic may also have resources help your patients quit.

Respiratory Therapists need to do their part and encourage their patients to quit. Ethically, how can we not?

¹American Lung Association's *Trends in Lung Cancer Morbidity and Mortality*, May 2005, p. 6 ²American Cancer Society's *Cancer Facts and Figures 2005*, p. 5-6

Do these statistics surprise you?

We all learned them in school, but did we really understand them? When compared to other cancers such as breast, colon, or prostate, the death rate from lung/bronchus cancer far exceeds the death rate of these 3 cancer death rates combined!!! The 5 year survival rate for a person diagnosed with lung cancer is 15%. We, as Respiratory Therapists, know this statistic all too well. But sometimes we forget about the magnitude of these numbers in relation to other cancers. Lung/bronchus cancer statistics starkly illustrate the incredibly high death rate once the diagnosis of lung cancer is given to a patient.

Did you know that tobacco also greatly increases the risk of other cancers including:

- Oropharynx
- Esophagus
- Larynx
- Bladder
- Kidney
- Pancreas

And the statistic that Respiratory Therapists really need to understand is that **87% of lung** cancer deaths are preventable, just by not smoking.

In The News

Ben Steverman, *StarTribune* Last update: February 28, 2006 – 2:06 PM

Lawmakers involved in bringing a new hospital to Maple Grove are optimistic that the state Legislature soon will break a stalemate over the issue.

For more than a year, the Legislature has been unable to agree on who should get to build a hospital for the fast-growing suburbs. Competition between hospital providers has been fierce.

Maple Grove's own legislators, State Sen. Warren Limmer and State Rep. Kurt Zellers, both Republicans, are on opposite sides of the question. But both say an agreement is likely during the legislative session that starts today.

Limmer pushed a plan that would let state public health officials choose a hospital provider based on set criteria. The Senate approved that proposal last year.



But the House approved a different bill, supported by Zellers, that would give the hospital contract to North Memorial Health

"I'm very optimistic that something will happen this session," Zellers said. He said he thinks North Memorial will get the right to build the hospital in cooperation with Fairview Health Services.

"I expect we'll come to agreement," said Limmer, who added he's working hard to find "closure" on the issue so that Maple Grove can finally get a hospital.

"Everything's on the table for discussion," Limmer said, but he declined to give further details about the ongoing negotiations.

Another key factor this year that makes participants optimistic is the hope that Gov. Tim Pawlenty will help bring the two sides together.

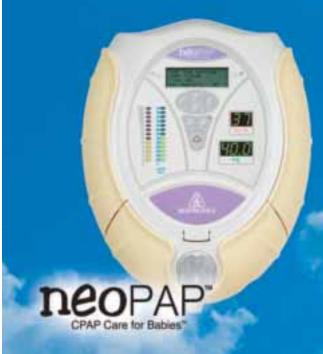
"I think... that he will get involved," said Maple Grove Mayor Mark Steffenson, who has talked to Pawlenty about the issue. "He thinks it's important to get this done." Several things have happened since the last legislative session to change the issue's politics this year:

- North Memorial teamed up with Fairview, a former rival for the hospital contract.
- The other three competitors to build the hospital are united in the Tri-Care Partnership -- a joint effort by Park Nicollet Health System, Children's Hospitals and Clinics and Allina Hospitals and Clinics. Late last year, they proposed joining with North Memorial and Fairview to build a hospital operated by all five providers.
- Last month, the Maple Grove City Council endorsed the North Memorial/Fairview proposal in a unanimous vote. The council, which had previously stayed neutral on the issue, has no direct influence on the hospital question, but its vote will be symbolically important to the legislators, Zellers said.
- On March 22, Governor Tim Pawlenty signed the bill passed by both the House and Senate endorsing the North Memorial/Fairview proposal and authorizing construction of the new facility.





Free-Breathing... Defined





Breathing In Balance[™] through Total Ventilation Solutions[™]



Total Ventilation Solutions is our customizable wide range of products, programs and services designed to keep clinicians, hospitals and respiratory-impaired patients Breathing in Balance. To find out how:

Visit us at www.respironics.com; or call 1-800-553-5781 ext 5152.

Russ Kruger











onics" and "Esprit" are registered trademarks; "Free-Breathing", "Flow-Trak", "NeoPAP" and "CPAP Care for Babies" are trademarks; "Power Program" icons, "Breathing in Balance" and "Total Ventilation Solutions" are service marks of Respironics, Inc. and its affiliates. All rights reserved. ©2005 Respirances. Inc. All right reserved.

Delegates Report

Updatesby Jessie Christopherson and Deb Skees

The House of Delegates (HOD) met 2 days prior to the AARC Congressional meeting in San Antonio on December 1 and 2, 2005. It was jammed packed as usual with ideas, conflict, discussion and resolution. To highlight items that you may find important to your practice are the following:

- Political Advocacy-Jill Eicher resigned, Miriam O'Day has been retained to assist the AARC with lobbying efforts
- PACT meeting was held on February 7 and 8 in Washington DC. Julie Clark and Carrie Bourassa will share with you all that happened in those two days
- S 1440: would require consistent Medicare coverage for outpatient pulmonary rehabilitation services. HR 215 and S473: calls for the secretary of Education to fund public awareness programs that highlight the importance and need for individuals to enter careers in allied health.
- HR 964: coverage for home health services provided By respiratory therapists under Medicare's Home Health Services 435 plan: 2 respiratory therapists and one consumer in each of the 435 congressional districts across the nation have been enacted by a vast majority of states including Minnesota.

Resolutions that were brought forth at this meeting and passed are:

- Respiratory Therapists qualifications in the VA health system. It was determined that there would be a recommendation to the Veteran's Health Administration that they amend the qualification standard for RT's to include language stating that RT's in VA hospitals should meet licensure requirements of that particular state, if applicable.
- Free AARC membership to those experiencing financial hardships in the wake of Katrina and Rita.

AARC Bylaws:

 Changes to the AARC bylaws will allow the AARC to precede with the implementation of an electronic voting process for the AARC elections. Currently, the speaker, our very own Denise Johnson has opened discussion to the HOD until March 15, 2006 via the list serve of HOD and thereafter a vote will ensue either in favor or not in favor of this change.

The Disaster Relief Fund has received more then \$50,000.00 in donations in which Minnesota gave \$1,500.00.

Lastly, I would like to thank Charlie McArthur for all of his hard work and dedication serving as delegate for Minnesota the past 4 years. He has not disappeared into the sunset but will be quite busy as section chair for Diagnostics. We are very fortunate to have the people that we have representing Minnesota at the AARC. It is quite impressive to have as many as we do and the quality of those people goes without saying.

I look forward to my new partner Deb Skees who will be taking on the role of junior delegate for the next two years and then stepping into the role of senior delegate the last two years. Deb brings many years of experience and expertise and will serve you and Minnesota very well. We both look forward to the year of 2006 and representing you. Please let us know if you have any concerns or ideas that you would like us to bring to the AARC.



Where We Work

Riverwood Healthcare Center, Aitkin, MN by Ethel Jaeger

After working for several years in a large hospital in Arizona where a regular day consisted of managing ventilators, neb treatments, patient education, taking patients to CT scans, X-ray, Cath Lab and handling whatever else came my way, I have found that working in a smaller hospital you can be very busy but in different ways.

My job at Riverwood Healthcare Center consists of scheduling outpatient appointments for RT department which consists of 3 Therapists and our Manager, who is also a therapist. We also do a variety of testing in our department including Cardiac Stress Testing, PFTs, Cardiac Rehab, Pulmonary Rehab and EMGs. Part of my job is also to assist the doctor with the Cardiac Stress Tests on Wednesdays and Fridays. I work with Pulmonary Rehab patients on Tuesdays and Thursdays. In addition, I perform EMGs, back up for Cardiac Rehab, back up for the floor RT when they need help and try to catch most of the phone calls that come into the department. Occasionally, I am the floor therapist and take call at night to cover for vacations. Like in any size hospital, my biggest challenge is dealing with whatever comes my way.

I like the smaller hospital atmosphere since I am able to get to know more of the people in different departments and also more of the patients and their families. What I probably miss most about working in a larger hospital is the excitement and interesting cases that you get to be involved with working at a Level I Trauma Center and Burn Center.

Asthma Walk

Saturday, June 3, 2006

Join US! On Saturday, June 3, 2006, the American Lung Association of Minnesota will hold the first annual Asthma Walk in the Twin Cities. The 3.5-mile walk will begin and end at Boom Island, near downtown Minneapolis, as walkers enjoy the sites of the Mississippi River and an historic area of the Twin Cities.

Funds raised through the Asthma Walk will be used to support local programs such as:

- · Minnesota youth asthma camps
- Educational opportunities for patients and medical professionals dealing with asthma
- American Lung Association Help Line, where people can call for answers to their questions about asthma
- Asthma Clinical Research Centers, finding new treatments and a
 potential cure for asthma. We will Blow the Whistle on Asthma to
 save lives, lower the economic costs of asthma and help
 everyone living with this chronic disease lead full, active lives!

Please join us at the walk. Call 651-227-8014 (or 1-800-LUNG-USA outside the metro area) or visit www.alamn.org/walk for complete details. Forming a team, making a donation and raising funds are great ways have fun with friends, family and colleagues while making a positive impact on local asthma programs and making a difference in every breath we take.



Community Of Respiratory Excellence

Not Simple, just simply the best.

Let us serve your Respiratory and Polysomnography staffing needs.

We offer assistance with:

- Adult, Pediatric and Neonatal ICU staffing
 - Pulmonary Function Testing
 - Pulmonary Rehab
 - Clinical Research
 - BLS Instruction
 - · Sleep Lab Staffing

612-770-2964 email: respiratoryrt@yahoo.com

11272 Kenworth Lane, Lakeville, MN 55044 www.corerespiratory.com



Respiratory Therapists

On Assignment Healthcare Staffing, the leader in Respiratory staffing, has immediate openings in most Twin City-Metro area hospitals.

(Greater MN and travel opportunities available also!)

We offer:

- Flexible Hours
- Top Pay & Full Benefits

651-647-1160 800-279-2345

2550 UNIVERSITY AVE. W., Suite 315 N, St. Paul MN www.healthpersonnel.com

Dreams Really Do Come True (continued from cover)

and coordination it would require to pull this type of event all together. We needed to arrange for extra ventilator batteries, back-up suction, a commode, hoyer, wheelchair accessible van, airline tickets, a hotel that could accommodate our needs, as well as provide packets of information to the airlines, get ticket confirmation to the show, etc. The list was endless.

Nonetheless, with the dedication and persistence of many, it happened. On January 23rd, 2006, Patrick, his family, his caretakers, and a few of us from C.O.R.E. Respiratory Services boarded a plane bound for Los Angeles. On January 24th, 2006, after a 5hour wait with 300 other people, we made it to the taping of The Price Is Right. Patrick was in "awe" of the studio and all that went into the making of one episode. During the taping, a producer approached Patrick and Christine and said that Bob Barker would like to meet Patrick after the show. Bob Barker has never met a contestant in the 34 years of taping. Wow, what an extra thrill!! Patrick and Christine met Bob, had his pictures taken with "Barker's Beauties", got to spin the wheel and see Bob's dressing room. It was an emotional, teary-eved moment for all.

Three months of hard work had definitely paid off. Bob Barker and all those at the CBS studio were so very gracious. We can't thank them enough for their hospitality. On behalf of C.O.R.E. Respiratory Services, we would like to thank those that collaborated with our efforts helping Patrick's dream become a true reality. They include: MSRC, PHS, Pulmonetics, North Memorial Medical Center and Nick Kuhnley, Joe Buhain, Forest Lake Travel and Karen Jeska.



Elections Committee Report by Cheryl Sasse

As the new chairperson of the Elections Committee, I am committed to do my best to facilitate a successful election process this year. I'm sure that this has also been the goal of my predecessors; it's just that while intentions are honorable, human error is always a possibility and in the elections committee - those errors are highly visible to the entire membership. Let's all remember that these are volunteer positions and the most we can offer is to do our best.

I have completed a thorough assessment of the elections process and the errors that occurred in past years. I want to thank all the respiratory therapists that provided insight and history of these issues. The only way we can improve is to acknowledge our mistakes and learn from them. My specific election goals for 2006 include:

- Organize the elections process with detailed timeline
- Identify errors with past elections
- Create process to eliminate/diminish possibility of errors with election process
- Ensure cross check system within election committee

I look forward to tackling this process and am keeping my fingers crossed that I will have success. If you have suggestions or concerns, please email me at cheryl.sasse@alamn.org.

12 Locations serving Minnesota Over 650 locations in the United States



ARROWHEATH Medical Supply- is an organization dedicated to providing comprehensive home respiratory care services with the utmost quality and professionalism.

Services Include:

≥ 24-hour on call service

Patient Assessment &

Follow-up visits by RCP

Patient Education **➤** Delivery Service

Equipment Includes:

Oxygen Concentrators

Nebulizers

Oxygen Conserving Devices

CPAP, BiPAP & NiPPV

Portable Oxygen Systems

DME Equipment

Unit Dose Medications

Liquid Oxygen

(952) 924-8884 • (877) 924-8884 fax (952) 703-5852

JCAHO ACCREDITED

Proud to Support the MSRC and the Respiratory Profession

Clinically Focused

For Your Patients' Clinical Needs

- Clinical Assessments/Follow-up
 - Oxygen dependent patients
 - COPD patients
- Oxygen Delivery Systems
 - Invacare HomeFill II unlimited ambulatory oxygen supply
 - Spirit liquid conserving device
 - Helios liquid conserving device
 - Conservers compressed gas devices
- Respiratory Medications
- CPAP/BiLevel Pressure Therapy
- Home Ventilatory Program
- Infusion/Enteral Therapy

Visit us at: www.Apria.com





APRIA HEALTHCARE®

For more information, contact the office nearest you:

Twin Cities (651) 523-8829

Rochester (507) 285-0065

St. Cloud (320) 252-0655

Duluth (218) 723-7121

www.msrcnet.com Spring 2006 1

A note from the..."Whatchamacallits"

by Laurie Olson, St. Mary's Regional Health Center Therapy Services Manager, Detroit Lakes, MN

When a group of Rural MN RT Managers got together informally, in August of 1992, little did they realize that they were embarking on a tradition that would carry on for more than 14 years! This group of managers from "small-town Minnesota" found value in getting together to kick around ideas, compare notes and talk about some of the unique issues their profession faces in rural Minnesota.

The manager group continues to meet about every 3 or 4 months, and managers take turns hosting the meeting. It's interesting to note, that several things have not changed in 14 years...some of the "founding fathers" and/or "charter members" still regularly participate in the meetings today, including: Molly Leinen – Lake Region Fergus Falls, Laurie Olson – St. Mary's Detroit Lakes, Deb Breuer – Aitkin, Pat Malvin – TriCounty Wadena and Kim Borgstrom – St. Gabriel's Little Falls.

There are some things that have changed over the years, however, as the group has become a little more organized. Meetings include planned educational sessions, demonstrations, and networking. The group typically meets for 4 hours, and lunch is often provided by a product or drug representative. The manager hosting the meeting prepares the objectives and CEU's for each meeting. Other managers from the following locations have also participated: Park Rapids (Phil Miller), Alexandria (Dave Holm), Bagley (Nathan Hough), Breckenridge, Morris (Kristie Davis), Wadena (Pat Malvin), Granite Falls (Dennis Baumann), Thief River Falls (Laura Williams), Willmar (Dean Boike), Roseau (Chris Berger), Grand Rapids (Ann Hauser), Hibbing, Onamia, Staples (Troy Helland), and Deer River (Mike Vaneps). In an attempt to shorten the travel time for each manager,

the meeting locations have been narrowed down to be more centrally located. As of late, the locations typically rotate between Fergus Falls, Detroit Lakes, Alexandria, and Little Falls.

This group has realized many networking benefits, but perhaps one of the greatest accomplishments was getting two of the regular mem-

bers elected to the MSRC board! (Phil Miller, Park Rapids, and Deb Breuer, Aitkin.) This provides a great opportunity for our region of rural MN to channel issues up to the state level. For example, the last meeting (February 2006) included a discussion regarding the RT role on the Rapid Response Team. The group discussed the professional assessment role of the RT, and proposed that the MSRC consider taking a stand on changing the status of Minnesota RT's statewide, from "technical" to "professional".

The question of becoming a formal "charter" of the MSRC has also been discussed. An advantage in being an official charter would be the representation of a board member for the MSRC. For this group however, two members have already been elected - providing the level of involvement needed.

Another frequent topic of discussion is... "What do we call this group?" (Other than the *Whatchamacallits*?) Apparently a formal name is not a priority for this informal group, but if anyone has a great idea – please forward it to a member of the team or email me at: lolson@smrhc.com. The next meeting is scheduled for June 15 in Fergus Falls. Anyone interested in attending any of these meetings is welcome, and should contact one of the team members for more information.



Open Monday - Friday 8:00 am - 5:30 pm



Medical

500 Central Ave. Osseo, MN 55369



"We Strive to Make a Difference in Our Patients' Lives and in Our Community."

763-315-6565

Visit our other locations in Redwing, Watertown, Apple Valley & Osseo

Medical Equipment

- Wheelchairs and Cushions
- Scooters
- Walkers and Accessories
- Seat Lift Chairs
- Hospital Beds and Accessories

Respiratory Equipment

- CPAP, Auto PAP, BIPAP and Supplies
- Nebulizers and Supplies
- Oxygen and Equipment

Contracted with insurance companies.
One of our specialties is treating patients with OSA (Obstructive Sleep Apnea).
If you need help with your CPAP or mask, please call for an appointment with one of our clinical specialists.

Owned and Managed by a Respiratory Therapist















Save the Date

Important Dates for Upcoming Events. MSRC 2006

April 7, 2006:	Electronic BOD Meeting: 3:00pm; MSRC Website			
May 3–5, 2006:	Annual NRRCC; Duluth, MN			
May 18, 2006:	3 rd Annual Asthma Sharing Conference; St. Cloud, MN Contact Glory Dennison, 651-268-7581 or glory@alamn.org			
June 1–2, 2006:	ALAMN COPD Educator Course; Bloomington, MN Contact Glory Dennison, 651-268-7581 or glory@alamn.org			
June 23–24, 2006: AARC Asthma Prep Course; Bloomington, MN For more information visit www.aarc.org/education/meetings/				
July 8–14, 2006:	Camp Superkids; Loretto, MN			

President's Message

(continued from cover)

In 2006 the MSRC will continue to work on implementing the results of the survey. Stay tuned for more information and updates.

As you read *The Bronchus* and visit the website at www.msrcnet.com, you will see all the areas in which the MSRC is working to support the respiratory care community. Examples are political advocacy, recruitment and retention, smoking cessation, patient education, and home care. These are only a few of the ways the MSRC is striving to meet the needs of the respiratory therapists in Minnesota. The AARC works with the state societies on a national level playing a critical role in all these issues and more. For more information please visit the AARC website at www.aarc.org.

Because we do have such a diverse profession there is always a need for fresh ideas. Please take the time to comment on the changes within the organization. What you like about the new website? What changes you would like to see? Are we better meeting your educational needs? Areas of interest that you don't see us currently involved in? Let us know!

We are working to make it easier for people who are interested in attending Board Meetings. Board meetings can be attended via teleconferencing. In the future there is potential for evening board meetings as well. This information is available on the MSRC interactive calendar. ALL ARE WELCOME!

Each therapist gives a great deal to our profession in our daily activities. If you are looking for another way to get involved and would like more information please feel free to contact myself or any MSRC Officer, Board Member or Committee chair. Please watch for volunteer opportunities on the website. Thank you for all you do for your profession!

With communication being a key goal please look for President's updates on the website. The MSRC and the respiratory care profession has a *rich history* and indeed a *brilliant future*. I am looking forwarding to serving you in the coming year.



website: www.reliamed.com

e-mail: reliamed@reliamed.com



