

# Convention Program



Setting the Standard for Infusion Care®



Annual Convention & Industrial Exhibition

# INS 2013

May 18-23 • Charlotte, NC



## LEAD

*Leadership, Education, Accountability, Development*

# Revisit the past...



# ...celebrate the future

## INS 2013

- Three brand-new track sessions featuring –  
Biologics, Quality Improvement & Research
- Enjoy six days filled with important topics  
such as pain assessment and management,  
mitochondrial diseases, and therapeutic  
apheresis
- Join INS in celebration as we look back on the  
past 40 years as the leader in infusion therapy
- The Industrial Exhibition will be jam-packed  
with cutting-edge technology and the newest  
advancements in infusion therapy
- Visit the INS Navigation Station at any time  
during registration hours and learn how to use  
our latest online resources
- Maximize your networking experience by  
signing up for INS' Meeting Mentor program  
and New Speed-Networking event

**The INS Annual Convention provides nurses with the most comprehensive educational experience available within the infusion specialty. It comprises two smaller meetings:**

### **Spring National Academy of Infusion Therapy** **Saturday, May 18 – Sunday, May 19**

- Educational sessions focus on advanced topics in infusion therapy and offer two CRNI® recertification units per hour
- Earn up to 8.0 contact hours and 20 CRNI® recertification units
- Registrants receive access to the Industrial Exhibition on Monday

### **Annual Meeting** **Monday, May 20 – Thursday, May 23**

- Educational sessions focus on a wide variety of topics in infusion therapy and offer one CRNI® recertification unit per hour
- Earn up to 16.0 contact hours and 20 CRNI® recertification units
- Access to the Industrial Exhibition
- Additional networking opportunities at evening social events
- Daily registrations are also available during this portion of the meeting

# Get the World's Best Infusion Education from the Global Authority in Infusion Therapy



## At INS 2013, You're in the Driver's Seat!

Customize your own schedule and attend the sessions that best meet your educational and professional needs. With more than 70 unique sessions offered throughout the week, you'll find a wide variety of cutting-edge topics that will provide you with the knowledge, skills, and evidence-based data that will enable you to have an immediate, positive impact on your infusion practice.



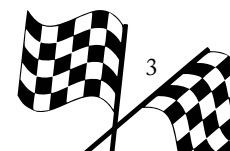
Sessions are designed for infusion nurses and allied health care professionals of all experience levels, so no matter if you're new to the infusion specialty or a veteran in the field, you can create the right curriculum for you.

In addition, with the exhibits and learning opportunities in the Industrial Exhibition, you'll see, touch, and learn first-hand about all of the new technological advances within the specialty that can help you improve patient care.

With the option to register for one day, two days, four days, or all six, you can find the right combination to fit your schedule, CE needs, and budget. So put the pedal to the metal, and register early to take advantage of significant discounts!

## What's Included with My Registration?

- Access to more than 70 educational sessions led by infusion experts, including Biologics, Research, and Quality Improvement Tracks.
- CNE credits and CRNI® recertification units for each accredited session attended.
- Continental breakfast each morning, from Sunday through Thursday.
- Lunch in the Industrial Exhibition, Monday through Wednesday.
- Cocktails and hors d'oeuvres at Monday evening's Gardner Foundation/INCC Reception.
- Dinner and cocktails at Tuesday evening's Celebration of Excellence.
- Discounted hotel rates at official INS hotels.
- Online access to session handouts, before and after the event.
- Access to the Poster Presentations, Monday through Wednesday, in the Industrial Exhibition and the Oral Abstract Presentations on Tuesday.
- Admission to the Industrial Exhibition, Monday through Wednesday, which includes the exhibits, Exhibitor Theater programs, and hands-on Simulation Labs.
- Registration bag, including the *Convention Journal Program*.
- Complimentary download of the INS 2013 Mobile App.
- After the Annual Convention, complimentary online access to recordings of the sessions, synched with the PowerPoint slides.



## Continuing Education

The Infusion Nurses Society exists to promote excellence in infusion nursing through continuing nursing education programs. INS achieves its mission by providing educational opportunities for advanced knowledge and expertise through professional development and resource networking.

INS promotes and improves the quality of infusion care by keeping infusion nurses, clinicians, and allied health care professionals abreast of new practice and technologic advances. INS' educational programs are designed specifically for the specialty practice of infusion therapy. The INS Annual Convention and Industrial Exhibition consists of presentations that address the nine core areas of infusion therapy. Each session in this program is denoted with a symbol to identify which of the nine core areas of infusion therapy the session pertains to.

**Note:** Sessions are subject to change without notice. Updated session offerings can be found on the Annual Convention Web site ([www.ins1.org](http://www.ins1.org)).

## Accreditations



The Infusion Nurses Society is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation (COA).

INS is accredited as a provider of continuing nursing education by the California Board of Registered Nursing, Provider #CEP 14209.



The 2013 Annual Convention and Industrial Exhibition is approved by the Infusion Nurses Certification Corporation (INCC) for CRNI® recertification units.

Accreditation status does not imply endorsement by INS or ANCC of any commercial products discussed or displayed in conjunction with this activity.

## Contact Hours and CRNI® Recertification Units

**RNs:** Each educational session is accredited for 0.8 contact hours of continuing nursing education. Participants are required to attend and submit a completed Continuing Education (CE) form, verifying their attendance, for each session that they are seeking contact hours for.

**CRNI®s:** All education sessions qualify for CRNI® recertification units. CRNI®s earn one or two recertification units for each session attended. Participants who attend all educational session can earn up to 20 recertification units at the Spring National Academy, and 20 recertification units at the Annual Meeting. All 40 recertification units required to recertify the CRNI® credential are available to CRNI®s attending both meetings. Contact INCC at (800) 434-4622 or visit [incc1.org](http://incc1.org) for more information on CRNI® recertification.

Contact hours and CRNI® recertification units are NOT provided for Poster Presentations or the Industrial Exhibition, including Exhibitor Theaters and Simulation Labs. A breakdown of contact hours and CRNI® recertification units available can be found on the Schedule-at-a-Glance pages in this brochure.

## Overall Program Goal

The overall program goal is to provide infusion nurses and other health care professionals with evidence-based education and information to implement best practices and improve patient outcomes.

## Overall Program Objectives

After attending the continuing nursing education programs, attendees will be able to:

1. Identify best practices in infusion therapy.
2. Describe the application of best practices to provide consistency of infusion care across all practice settings.

## Target Audience

The continuing nursing education programs are directed toward all health care professionals including CRNI®s, infusion nurses, clinicians, pharmacists, nurses practicing in all care settings, and nurses practicing in the specialty areas of pediatrics, geriatrics, infection prevention, oncology, and management.

*"Attending a conference as large as this with such a strong focus on infusion therapy is an experience that cannot be gained anywhere else. I reconnected with my college classmates whom I had not seen in 16 years."*







# INS 2013

## A Celebration 40 Years in the Making!



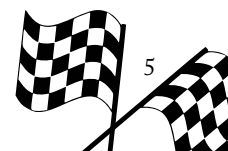
Join INS for the 2013 Annual Convention and Industrial Exhibition, May 18-23, in Charlotte, North Carolina, as we reflect on and celebrate 40 years of your contributions to the infusion specialty.

In 1973, a group of 17 nurses started what is now the Infusion Nurses Society, holding their first national meeting in the Tar Heel State. Today, INS is honored to serve over 7,000 infusion professionals from across the globe, and we are excited to be returning to where it all began. Whether you're a long-time attendee or a first-timer, we look forward to welcoming you to Charlotte for this historic celebration.



### Celebrate 40 years at INS 2013!

Scan this QR code with your smartphone's QR reader app to find out more information on how we are celebrating 40 years at INS throughout 2013!



10:00 – 11:00 AM

**First-time Attendee Orientation**

NOON – 1:00 PM

- QI** Understanding the Legal System and Infusion Nurse Liability
- QI** Management of Central Vascular Access Device-Related Deep Vein Thrombosis

1:00 – 2:00 PM

- PED** Early Recognition and Treatment of Infant Sepsis
- PN** Mitochondrial Diseases

2:30 – 3:30 PM

- TT** Emerging Uses of Adoptive Immunotherapy
- PED** Advances in Pediatric Leukemias

3:30 – 4:30 PM

- A/B** Autoimmune Diseases
- A/B** Current Protocols in Stem Cell Transplant

4:30 – 5:30 PM

- A/B** Understanding the Immune System Response to Biologic Therapies
- FE** Continuous Renal Replacement Therapy: A Delicate Balance

8:00 – 9:00 AM

- TC** Complication Management of the Implanted Vascular Access Port
- IP** Bioterrorism

9:00 – 10:00 AM

- FE** Alterations in Fluids and Electrolytes During Refeeding Syndrome
- PN** Determining Protein Status by the Numbers

10:30 – 11:30 AM

- PH** Management of the Surgical Patient with Bleeding Disorders
- PH** Infusion Management of Alpha-1 Antitrypsin Deficiency Patients

12:30 – 1:30 PM

- TT** Parasitic Diseases Transmitted Through Blood Transfusions
- IP** Infection Rates in Hemodialysis Vascular Access Devices

1:30 – 2:30 PM

- IP** Mycobacterium Waterborne Infections and Central Vascular Access Devices
- TC** The Evolving Practice of Infusion Nurses Placing Central Vascular Access Devices

**Maximum number of credits available:**

**Saturday** 4.0 Contact Hours  
10 CRNI® Recertification Units

**Sunday** 4.0 Contact Hours  
10 CRNI® Recertification Units

8:00 – 9:00 AM

- QI** Opening Session: Year in Review

9:00 – 10:00 AM

- QI** Keynote Address

10:00 AM – 2:00 PM

**Industrial Exhibition**

2:00 – 3:00 PM

- TC** Fundamentals of the Midline Vascular Access Device
- PED** Maintaining Pediatric Vascular Access Devices
- A/B** BIOLOGICS TRACK: Emerging Therapies for Autoimmune Disorders

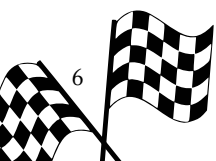
3:00 – 4:00 PM

- TC** Infusion Safety in the Magnetic Resonance Suite
- PH** Understanding Vasoactive Medications and Effective Titration
- A/B** BIOLOGICS TRACK: Efficacy and Complications of Biologic Therapy

4:00 – 5:00 PM

- PN** Parenteral Nutrition Risks and Alternatives
- QI** Preparation for Disaster Management
- A/B** BIOLOGICS TRACK: Challenges Associated with the Administration of Biologics in the Nonhospital Setting

<b>A/B</b> Antineoplastic/ Biologic Therapy	<b>PN</b> Parenteral Nutrition	<b>QI</b> Quality Improvement
<b>FE</b> Fluid & Electrolyte Balance	<b>PED</b> Pediatrics	<b>TC</b> Technology & Clinical Applications
<b>IP</b> Infection Prevention	<b>PH</b> Pharmacology	<b>TT</b> Transfusion Therapy



8:00 – 9:00 AM

- PH** Extravasation of Nonchemotherapy Vesicants
- IP** The Joint Commission's Global Perspective on Central Line-Associated Bloodstream Infections

9:00 – 10:00 AM

- PN** American Society of Parenteral and Enteral Nutrition (A.S.P.E.N.) Clinical Guidelines
- PED** Managing Pediatric Home Infusion Therapies

10:00 AM – 2:00 PM

### Industrial Exhibition

2:00 – 3:00 PM

- QI** Infusion Nursing's Role in the Journey to Magnet Recognition
- IP** Investigating Outbreaks  
Oral Abstract Presentations
- QI** RESEARCH TRACK: Evaluating Research: Should This Study Be Used to Guide My Practice?

3:00 – 4:00 PM

- FE** Recognizing and Treating Syndrome of Inappropriate Antidiuretic Hormone (SIADH)
- A/B** Interpretation of Complete Blood Count Results  
Oral Abstract Presentations
- QI** RESEARCH TRACK: Data Collection as a Key to Successful Evidence-Based Research

4:00 – 5:00 PM

- QI** Infusion Therapy and the Novice Nurse
- A/B** Managing Three Common Complications of Chemotherapy: Febrile Neutropenia, Nephrotoxicity, Enterotoxicity  
Oral Abstract Presentations
- QI** RESEARCH TRACK: Disseminating Research: How Can I Create an Effective Poster Presentation?

8:00 – 9:00 AM

- A/B** Chemotherapy-Induced Anaphylactic and Anaphylactoid Reactions: Are You Prepared?
- TC** Use of Simulation Training for Vascular Access Device Insertion
- QI** QUALITY IMPROVEMENT TRACK: Outcome- and Value-Based Infusion Experts

9:00 – 10:00 AM

- TT** Immunoglobulin Therapy Options for the Home Patient
- PN** Acute and Chronic Pain Assessment and Management
- QI** QUALITY IMPROVEMENT TRACK: Improving Outcomes Through Effective Patient Education

10:00 AM – 2:00 PM

### Industrial Exhibition

2:00 – 3:00 PM

- TT** Understanding Therapeutic Apheresis
- PN** Patient Education and Comprehension of Home Parenteral Nutrition Administration
- QI** QUALITY IMPROVEMENT TRACK: Process Improvement for Optimal Outcomes

3:00 – 4:00 PM

- PN** The Infusion Nurse's Role in the Management of Nonthrombotic CVAD Occlusions
- PED** Identification of Risks for Pediatric Thromboembolism
- QI** QUALITY IMPROVEMENT TRACK: Developing Infusion Champions

4:00 – 5:00 PM

- IP** Using the Comprehensive Unit-Based Safety Program (CUSP) to Reduce Central Line-Associated Bloodstream Infections
- TC** Navigating the Purchasing Process While Maintaining Cost and Improving Outcomes
- QI** QUALITY IMPROVEMENT TRACK: Patient Safety in a Culture of Transparency

8:00 – 9:00 AM

### Presidential Address and Gavel Ceremony

9:00 – 10:00 AM

- PH** Challenges in Providing Care for the Drug-Addicted Patient Receiving Infusion Therapy
- QI** Exploring Generational Gaps in the Workplace

10:00 – 11:00 AM

- TT** Safe Transfusion Practices
- FE** The Role of Infusion Therapy in Sepsis Management

11:00 AM – NOON

- IP** Understanding the Centers for Disease Control and Prevention's National Healthcare Safety Network Criteria
- PH** Heparin-Induced Thrombocytopenia

1:00 – 2:00 PM

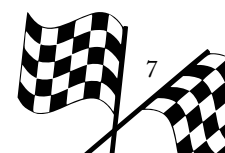
- FE** Hyperkalemia: Management of a Critical Electrolyte Disturbance
- A/B** Monitoring and Improving the Peripheral Intravenous Complications in Patients Receiving Chemotherapy

2:00 – 3:00 PM

- PED** Administration Challenges Related to Pediatric Infusion Therapy
- PN** Parenteral Nutrition: Beyond Fat, Carbohydrate, and Protein

### Maximum number of credits available:

Monday	4.0 Contact Hours 5 CRNI® Recertification Units
Tuesday	4.0 Contact Hours 5 CRNI® Recertification Units
Wednesday	4.0 Contact Hours 5 CRNI® Recertification Units
Thursday	4.0 Contact Hours 5 CRNI® Recertification Units





saturday, may 18

**8:00 AM - 5:30 PM**

## Registration

**10:00 - 11:00 AM**

## First-time Attendee Orientation

Join INS staff and Board of Directors for a fun and interactive workshop that will show you how to make the most of your Annual Convention experience. Learn about the must-attend sessions, the evening social events, the Charlotte Convention Center, and how to navigate the Industrial Exhibition to find the products and services that will make your job easier. This session is also a great way to network with other infusion therapy professionals from across the country and around the globe. During this event, we will also kick off our Meeting Mentor Program.

**Please note: Contact hours and CRNI® recertification units are not offered for this session.**

**NOON - 1:00 PM**

## QI Understanding the Legal System and Infusion Nurse Liability

*Jan Haedt, BS, RN, CPHRM*

**SC: 101 CH: 0.8 CRNI® Recert. Units: 2**

Infusion nurses must have a sound understanding of the legal system and laws that pertain specifically to infusion nursing practice. A recent report published by the Nurses Service Organization states that in the past five years, over \$83 million was paid in judgments and settlements on behalf of nurses, averaging \$204,594 per claim. Nurse liability, negligence, and malpractice can be avoided through the application of the *Infusion Nursing Standards of Practice*. This session will review aspects of the legal system and the effect on infusion nursing practice.

## QI Management of Central Vascular Access Device-Related Deep Vein Thrombosis

*Daniel Hassell, MD*

**SC: 102 CH: 0.8 CRNI® Recert. Units: 2**

Central vascular access devices (CVADs) are widely used for the administration of complex infusion therapy. Careful management and maintenance of the device can preserve device integrity and avoid complications. However, studies have shown alarming rates of CVAD-associated deep vein thrombosis (DVT). This session will identify factors that may contribute to the development of CVAD-associated DVT, including device selection and at-risk patient populations. Appropriate interventions the infusion nurse will need for early detection and treatment will also be discussed.

**1:00 - 2:00 PM**

## PED Early Recognition and Treatment of Infant Sepsis

*Ann L. Anderson Berry, MD*

**SC: 103 CH: 0.8 CRNI® Recert. Units: 2**

Severe infections are a substantial source of infant mortality worldwide. The vulnerabilities inherent to the infant have increased focus on the progression toward and treatment of sepsis. Typically divided into early and late onset, infant sepsis is significantly different than sepsis in other populations, requiring infant-specific preventative measures, rapid recognition, transition of care to a qualified facility, and targeted treatment. This session will review risk factors and early recognition of the development of sepsis in the infant and infusion-related nursing care of this population.

## PN Mitochondrial Diseases

*Lynne Wolfe, MS, CRNP, BC*

**SC: 104 CH: 0.8 CRNI® Recert. Units: 2**

When mitochondria fail at the cellular level to produce energy, cellular damage leads to severely compromised systems and mortality. According to the United Mitochondrial Disease Foundation, these diseases are the result of inherited or spontaneous mutations in the deoxyribonucleic acid (DNA), causing hundreds of different mitochondrial diseases. Patients present with symptoms from gastrointestinal disorders, respiratory complications, seizures, lactic acidosis, and susceptibility to infection, depending on the system affected. This session will discuss the pathophysiology, diagnosis, treatment, and supportive care of the patient with mitochondrial diseases.

**2:00 - 2:30 PM Break**

**2:30 - 3:30 PM**

## TI Emerging Uses of Adoptive Immunotherapy

*Yvette Miller, MD, RN*

**SC: 105 CH: 0.8 CRNI® Recert. Units: 2**

The immune system is a complicated network of cells, organs, and tissues that protects the body from invading pathogens, including bacteria, viruses, parasites, and fungi. Advances in understanding immune system response have led to the development of passive and active means of triggering the immune system to combat cancer. This session will discuss the role of the immune system as a means to treat, and possibly prevent, malignancies through the use of emerging adoptive immunotherapy.





— — — — —  
saturday, may 18



2:30 - 3:30 PM

**PED** **Advances in Pediatric Leukemias**

*Libby Montoya, MSN, APN, CNS-BC*

**SC: 106 CH: 0.8 CRNI® Recert. Units: 2**

Leukemia is the most common form of cancer in childhood. It affects approximately 3,500 children each year in the US, accounting for about 30 percent of childhood cancers. According to the American Cancer Society, acute lymphocytic leukemia (ALL) and acute myelogenous leukemia (AML) are the most common forms of leukemia seen in children. Infusion nurses play a unique role in caring for these patients and their families. This session will explore the advances made in cancer care of the pediatric patient with leukemia.

3:30 - 4:30 PM

**A/B** **Autoimmune Diseases**

*Sharon Dudley-Brown, PhD, FNP-BC, FAAN*

**SC: 107 CH: 0.8 CRNI® Recert. Units: 2**

Autoimmune diseases affect more than 23 million Americans and are the third most common category of disease in the United States after cancer and heart disease. While some autoimmune diseases are rare, 80 known types are a leading cause of disability and death. Autoimmune diseases can affect anyone, yet others are at higher risk for the development of disease based on family history, gender, culture, and environment. This session will discuss the pathophysiology, common diseases, and risk factors for the development of autoimmune diseases.

**A/B** **Current Protocols in Stem Cell Transplant**

*Marcie Tomblyn, MD, MS*

**SC: 108 CH: 0.8 CRNI® Recert. Units: 2**

For more than 50 years, many cancers and nonmyelodysplastic diseases have been treated with stem cell transplantation after the completion of standard chemotherapy. As stem cell transplant protocols continue to evolve, infusion nurses are essential in all phases of treatment. These include premedication for the mitigation of potential side effects of stem cell transplant, administering the stem cell transplant infusion, and monitoring posttransplant complications. This session will review current protocols in stem cell transplant treatment.

4:30 - 5:30 PM

**A/B** **Understanding the Immune System Response to Biologic Therapies**

*Karen Roesser, MSN, RN, AOCNS®*

**SC: 109 CH: 0.8 CRNI® Recert. Units: 2**

The immune system is composed of organs, tissues, cells, and cell products that defend the body from pathogens and other foreign substances. Biologic therapy, also referred to as immunotherapy or biotherapy, uses the response of the immune system to treat cancer and autoimmune disease. This session will discuss the components of the immune system and provide in-depth information on how the immune system is used in biologic therapy. The specific mechanisms of action, as well as indications for use of various biologic therapies, will be explained.

**FE** **Continuous Renal Replacement Therapy: A Delicate Balance**

*Jarvis Campbell, RN*

**SC: 110 CH: 0.8 CRNI® Recert. Units: 2**

Continuous renal replacement therapy (CRRT) is becoming the leading form of renal replacement therapy for acute kidney injury. CRRT establishes equilibrium through gradual, continuous alterations in fluid, solute, electrolyte, and acid-base balance, and CRRT is flexible, especially for the unstable patient's changing clinical condition. However, the use of CRRT continues to be controversial, with substantial practice variations, primarily due to the complex clinical situations in which CRRT is considered. This session will cover the process of CRRT, the physiological risks and benefits, and the nursing care associated with this therapy.





sunday, may 19

7:00 AM - 5:00 PM

Registration

8:00 - 9:00 AM

**TC** **Complication Management of the Implanted Vascular Access Port**

*Elena Nelson Squires, BSN, RN, OCN®, VA-BC*

**SC: 202 CH: 0.8 CRNI® Recert. Units: 2**

Implanted vascular access ports are meant to provide reliable long-term access for medication administration, and yet complications occur in up to one-fifth of these patients. Complications include skin erosion, malposition, extravasation, and catheter and needle dislodgment. Successful outcomes for implanted vascular access ports depend on critical assessment and management of the patient with the implanted port. This session will discuss identification of complications and the management of complications in patients with an implanted vascular access port.

**IP** **Bioterrorism**

*Daniel Orenstein, JD*

**SC: 203 CH: 0.8 CRNI® Recert. Units: 2**

With the escalation of terrorist activity in our own country and around the world, the health care community needs to assess its readiness to react to bioterrorism. As clinicians, we may be called on to care for those exposed to biological and chemical agents, while protecting ourselves from the side effects. This session will discuss processes a health care facility is recommended to have in place, methods required to protect you and others from the spread of disease, and the role of the infusion nurse when caring for the patient affected by chemical or biological terrorism.

9:00 - 10:00 AM

**FE** **Alterations in Fluids and Electrolytes During Refeeding Syndrome**

*Barbara Magnuson Woodward, PharmD, BCNSP*

**SC: 204 CH: 0.8 CRNI® Recert. Units: 2**

Refeeding syndrome can occur when carbohydrate nutrition is reintroduced after a period of starvation or severe malnutrition. Refeeding syndrome can be fatal if not recognized and treated properly. During the early stages of refeeding, symptoms of the syndrome can be detected in the neurological, muscular, and hematological systems. These symptoms are often associated with alterations in serum levels of phosphates, potassium, and magnesium; all electrolytes and fluid balances can be affected. This session will discuss important fluid and electrolyte imbalances related to refeeding.

**PN** **Determining Protein Status by the Numbers**

*Georgeane Vigue, RD, CNSC*

**SC: 205 CH: 0.8 CRNI® Recert. Units: 2**

Morbidity and mortality are associated with malnutrition. Parenteral nutrition (PN) is instituted to prevent or correct malnutrition. The laboratory indicators to assess malnutrition are altered by many factors such as inflammation. Identifying these factor markers and using additional methods to assess malnutrition provide an accurate assessment of a patient's protein status. This session will provide the infusion nurse with a comprehensive method to assess malnutrition in the PN patient.

10:00 - 10:30 AM **Break**

10:30 - 11:30 AM

**PH** **Management of the Surgical Patient with Bleeding Disorders**

*Judith Kauffman, MS, RN, CPNP*

**SC: 206 CH: 0.8 CRNI® Recert. Units: 2**

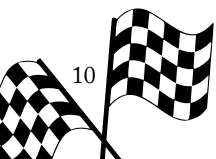
Invasive procedures for patients with bleeding disorders require planning on the part of the health care team. The patient population affected involves those with hereditary bleeding disorders, such as von Willebrand's disease or hemophilia; in addition, these patients who use antithrombotic drugs must be considered relative to the surgical procedure. The choice of treatment depends on a number of factors, including the procedure planned, the type and severity of the disorder, and the age and morbidity of the patient. This session will present the indications, dosing, and timing of presurgical and surgical interventions, as well as special considerations for vascular access device selection.

**PH** **Infusion Management of Alpha-1 Antitrypsin Deficiency Patients**

*Teresa Kitchen, BSN, RN*

**SC: 207 CH: 0.8 CRNI® Recert. Units: 2**

Alpha-1 antitrypsin (AAT) deficiency is a genetic condition in which the body does not make enough of the protein that protects the lungs and liver from damage, leading to emphysema and liver disease. The only Food and Drug Administration-approved therapy for the treatment of alpha-1-related lung disease is augmentation therapy. Alpha-1 antitrypsin protein is derived from the blood plasma of healthy human donors. This session will discuss the administration and management of alpha-1 antitrypsin protein.



11:30 AM - 12:30 PM

Lunch Break

12:30 - 1:30 PM

**IT** **Parasitic Diseases Transmitted Through Blood Transfusions**

*Bryan Spencer, MPH*

**SC: 208 CH: 0.8 CRNI® Recert. Units: 2**

The transmission of parasites through blood transfusions is rare but, unfortunately, can occur. Transfusion-related diseases such as babesiosis and Chagas' disease present the largest threat to patients due to the number of infected donors. Although no reliable serological tests are available to screen donors, the focus remains on donor screening and adherence to donor screening guidelines. This session will discuss the transmission of parasitic organisms through transfusion.

**IP** **Infection Rates in Hemodialysis Vascular Access Devices**

*James Robson, BSN, RN, CCRN-CMC, CNN*

**SC: 209 CH: 0.8 CRNI® Recert. Units: 2**

Hemodialysis (HD) patients are at great risk for infection because of hemodialysis procedures and comorbidities. Frequently, episodes of bacteremia are associated with vascular access devices (VADs) in the HD population. HD VADs include arteriovenous fistula (AVF), arteriovenous graft (AVG), or a central vascular access device placed for dialysis. This session will explain the different VADs used in hemodialysis and their respective infection rates. The role of the infusion nurse in decreasing infection rates will be described.

1:30 - 2:30 PM

**IP** **Mycobacterium Waterborne Infections and Central Vascular Access Devices**

*Mary Ellen Scales, MSN, RN, CIC*

**SC: 210 CH: 0.8 CRNI® Recert. Units: 2**

Mycobacteria organisms live in water and food sources. Colonization can occur without the host showing any manifestations and is difficult to treat due to a natural resistance to many antibiotics. Mycobacterium infections occur in central vascular access devices (CVADs), particularly in the immunosuppressed patient population. This session will give an overview of mycobacterium infections specific to CVADs, the treatment, prevention, and the role of the infusion nurse.

**TC** **The Evolving Practice of Infusion Nurses Placing Central Vascular Access Devices**

*Cathy Perry, MSN, ANP-BC, VA-BC, CRNI®*

**SC: 211 CH: 0.8 CRNI® Recert. Units: 2**

Nurses have successfully placed peripherally inserted central catheters (PICCs) for more than 30 years. Central vascular access device (CVAD) placement by nurses is increasing in prevalence for reasons including a physician shortage, changes in reimbursement, sepsis protocols, and a history of successful nurse-placed peripherally inserted access devices. This session will discuss current practice, educational programs, maintenance of competencies, state-specific scopes of practice, and outcomes evaluation.





## Strength – Certified Registered Nurse Infusion (CRNI®) credential is the ONLY nationally accredited certification for infusion nurses



## Value – The comprehensive exam validates your experience in NINE core areas

### Exam

- RNs with at least 1,600 hours of infusion therapy experience
- Administered in March and September
- More than 180 test centers nationwide; 60 international locations

### Recertification

- Required every three years
- RNs with at least 1,000 hours of infusion therapy experience
- Through continuing education or examination

## Longevity – INCC has a proven track record of more than 25 years



*“I feel by having my certification, I am more aware of the changes in our profession and am more dedicated to keeping up with the new innovations. I am also more apt to attend educational opportunities to stay informed.”*

**Stephanie Smith, BSN, RN, CRNI®**  
Provo, UT

[incc1.org](http://incc1.org) | (800) 434-4622 | [incc@incc1.org](mailto:incc@incc1.org)



Find INCC on Facebook



monday, may 20

INS  
2013

7:00 AM - 5:00 PM

## Registration

8:00 - 9:00 AM

## QI Opening Session: Year in Review

**SC: 302 CH: 0.8 CRNI® Recert. Units: 1**

The Board of Directors and the CEO of INS and INCC take a look back at the past year's growth, progress, and innovations. This session will review the accomplishments for the previous year and the goals that INS has for the upcoming year.

9:00 - 10:00 AM

## QI Keynote Address

**SC: 303 CH: 0.8 CRNI® Recert. Units: 1**

Join us as we kick off the Annual Meeting with a personally rewarding, motivational, and inspirational address.

10:00 AM - 2:00 PM

## Industrial Exhibition



The Industrial Exhibition provides you with the rare opportunity to speak one-on-one with leading infusion suppliers

about your day-to-day challenges and learn how the latest infusion technology and products can help you improve patient care. With exhibits, Exhibitor Theater sessions, hands-on Simulation Labs, and educational Poster Presentations, the Industrial Exhibition has grown to become an extension of your overall learning experience at the Annual Convention. There are many new activities scheduled in the exhibit hall each day, so be sure to take advantage

of the many sponsored programs and product demonstrations available to you.

**NOTE:** *Contact hours and CRNI® recertification units are not offered for the exhibits, Poster Presentations, Exhibitor Theater sessions, or Simulation Labs.*

2:00 - 3:00 PM

## TC Fundamentals of the Midline Vascular Access Device

*Donnalee Steele, AAS, RN, VA-BC*

**SC: 304 CH: 0.8 CRNI® Recert. Units: 1**

Midlines have been used for infusion therapy since the 1950s, yet questions still arise regarding the appropriate use and maintenance of this peripheral vascular access device. Inserted in the upper arm, the tip of the midline dwells distal to the axilla. This session will discuss therapies that are appropriate for use with the midline; considerations for patient selection; care and maintenance; and assessment of, and interventions for, potential complications.

## PEP Maintaining Pediatric Vascular Access Devices

*Theresa Reed, BSN, RN, VA-BC*

**SC: 305 CH: 0.8 CRNI® Recert. Units: 1**

Treatment methods for acutely ill children now include regimens that require frequent infusions. Central vascular access devices (CVADs) have become an important tool in the medical management of children. It is important for patients and their care providers to have an understanding of the intensity of maintenance required and potential complications. This session will cover the care and maintenance of CVADs in children.

## A/B BIOLOGICS TRACK: Emerging Therapies for Autoimmune Disorders

*Eric Zack, MSN, RN, ACNP/BC, AOCN®*

**SC: 306 CH: 0.8 CRNI Recert. Units: 1**

According to the National Institutes of Health, there are more than 80 autoimmune disorders. The American Autoimmune Related Diseases Association reports that approximately 50 million Americans, or one in five, suffer from autoimmune diseases. Due to this high prevalence, therapies are frequently being developed and treatment regimens altered. While this wide array of therapies provides many options for the patient, it also brings a continuing education challenge to the infusion nurse. This session will provide up-to-date information about emerging therapies for autoimmune disorders and infusion nursing.

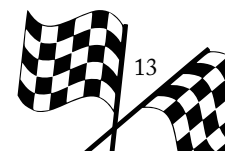
3:00 - 4:00 PM

## TC Infusion Safety in the Magnetic Resonance Suite

*Maureen Hood, PhD, RN*

**SC: 307 CH: 0.8 CRNI® Recert. Units: 1**

Advances in technology over the past decade have led to exponential growth in diagnostic imaging. Approximately 28,000 magnetic resonance imaging (MRI) scans are done in the United States every year. Critically ill patients may require precise dosing of infusion medications that cannot be discontinued, yet standard infusion equipment is not allowed in the magnetic resonance (MR) suite. This session will discuss the challenges of providing patients uninterrupted infusion care while maintaining safety in the MR environment.





monday, may 20

3:00 - 4:00 PM

**PH Understanding Vasoactive Medications and Effective Titration**

*John Allen, PharmD, BCPS*

**SC: 308 CH: 0.8 CRNI® Recert. Units: 1**

Administration and titration of vasoactive medications require careful monitoring of the patient's hemodynamic status against the intended goals for therapy. Nurses must recognize the indications for vasoactive therapy and understand specific vasopressor action on the alpha-1, beta-1, beta-2, and dopamine receptors. This session will review vasoactive medications and the action of each, administration including titration, and the role of the infusion nurse.

**A/B BIOLOGICS TRACK: Efficacy and Complications of Biologic Therapy**

*Victoria Ruffing, RN, CCRP*

**SC: 309 CH: 0.8 CRNI® Recert. Units: 1**

The introduction and development of biological disease-modifying drugs improved the management of several oncology and autoimmune diseases. These biologic therapies, however, are not without risk to the patients receiving therapy. Patients receiving biologics may be at risk for injection and infusion reactions, opportunistic infections, and potential pulmonary and/or cardiac complications. Evaluating the benefits and risks of biologic treatment challenges the health care provider. This session will discuss the benefits, risks, and complications associated with the administration of biologic therapy.

4:00 - 5:00 PM

**PN Parenteral Nutrition Risks and Alternatives**

*Laurie Reyen, MN, RN*

**SC: 310 CH: 0.8 CRNI® Recert. Units: 1**

Parenteral nutrition (PN) provides life-saving nutritional support for complex patients in settings such as trauma, large abdominal surgery, oncology, and hyperemesis. Despite the benefits, PN carries significant risks for fluid and electrolyte imbalances, liver disease, and development of central line bloodstream infection (CLABSI). Because of these risks, efforts are under way to establish guidelines to optimize the use of PN and nutritional alternatives that promote positive patient outcomes. This session will review proper use of PN, risks of PN in the complex patient, and alternatives that can be used to optimize patient nutritional status and promote positive outcomes.

**QI Preparation for Disaster Management**

*Kathryn Tagnessi, MA, BSN, RN, NEA-BC*

**SC: 311 CH: 0.8 CRNI® Recert. Units: 1**

Disasters result from natural or man-made events. Health care providers must be prepared to provide effective medical care to minimize morbidity and mortality when a catastrophic event occurs. Infusion therapy plays a major role in the treatment of many disaster patients, and infusion nurses have a responsibility to participate in the preparedness phase to increase their effectiveness during a disaster response. This session will discuss the components of a disaster plan and the role of the infusion nurse in disaster management.

**A/B BIOLOGICS TRACK: Challenges Associated with the Administration of Biologics in the Non-hospital Setting**

*Cora Vizcarra, MBA, RN, CRNI®*

**SC: 312 CH: 0.8 CRNI® Recert. Units: 1**

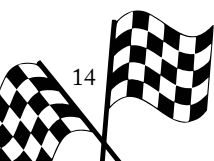
Biologic therapy has become one of the preferred treatments in the areas of oncology and immunology. Biologic therapy is not only administered in hospital- and nonhospital-based outpatient infusion clinics but in physician offices and patient homes as well. Challenges related to biologic therapy administration outside of the traditional hospital setting include which biologics can be safely given as well as the management of acute infusion-related hypersensitivity reactions. This session will discuss the administration of parenteral biologic therapy in the nonhospital setting and the role and responsibility of the infusion nurse.

6:00 - 7:30 PM

**Gardner Foundation/INCC Reception**

The Gardner Foundation/INCC Reception recognizes the achievements of infusion nurses who have demonstrated extraordinary service in the field of infusion therapy. During the reception, we will announce the recipients of the Gardner Foundation scholarships, as well as the winner of the prestigious CRNI® of the Year award. Light hors d'oeuvres and cocktails will be served. Business casual dress is suggested.

**NOTE: Contact hours and CRNI® recertification units are not offered for this event.**



## posters

Monday, May 20

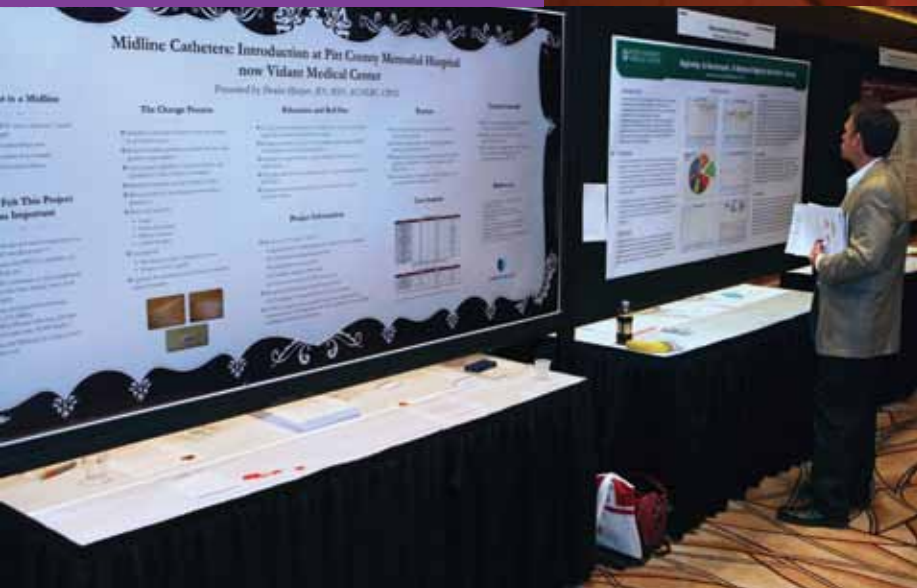
10:00 AM – 2:00 PM

Tuesday, May 21

10:00 AM – 2:00 PM

Wednesday, May 22

10:00 AM – 2:00 PM



## oral abstracts

Tuesday, May 21

2:00 – 3:00 PM

3:00 – 4:00 PM

4:00 – 5:00 PM

## oral abstract and poster presentations

### Oral Abstract and Poster

Presentations provide convention attendees with the opportunity to present information on their research and clinical practice achievements within the specialty of infusion nursing. Winners of the presentations will be announced at the Celebration of Excellence.







tuesday, may 21

7:00 AM - 5:00 PM

## Registration

8:00 - 9:00 AM

### PH Extravasation of Nonchemotherapy Vesicants

*Dora Hallock, MSN, RN, CRNI®, OCN®, CHPN*

**SC: 402 CH: 0.8 CRNI® Recert. Units: 1**

Extravasation occurs with nonchemotherapy medications and solutions. This is an area of increased risk due to the variety of clinical settings, pharmacologic agents, and the differing routes of delivery. Prevention and knowledge is essential for rapid recognition and treatment of the patient with an extravasation. This session will review composition of medications, measures to prevent extravasation, and recognition and treatment of nonchemotherapeutic extravasations.

### IP The Joint Commission's Global Perspective on Central Line-Associated Bloodstream Infections

TBD

**SC: 403 CH: 0.8 CRNI® Recert. Units: 1**

Written by The Joint Commission in conjunction with infection prevention leaders around the world, *Preventing Central Line-Associated Bloodstream Infections (CLABSI): A Global Challenge*, *A Global Perspective* discusses types of catheters, risk factors, evidence-based guidelines, strategies for prevention, surveillance, benchmarking, reporting, and the economic impact of CLABSI. This session will review the most recent evidence-based guidelines and provide an understanding of the importance of the infusion nurse's role in the prevention of this life-altering complication.

9:00 - 10:00 AM

### PN American Society of Parenteral and Enteral Nutrition (A.S.P.E.N.) Clinical Guidelines

*Ainsley Malone, MS, RD, CNSC, LD*

**SC: 404 CH: 0.8 CRNI® Recert. Units: 1**

The American Society for Parenteral and Enteral Nutrition (A.S.P.E.N.) clinical guidelines are "systematically developed statements to assist practitioner and patient decisions about appropriate nutrition care for specific clinical circumstances." These guidelines are updated and published one topic at a time to ensure the most up-to-date information for the health care community. This session will discuss the most recent updates to the clinical guidelines and the implications for the infusion nurse caring for the parenteral nutrition patient.

### PED Managing Pediatric Home Infusion Therapies

*Judy Heilman, MSN, RN*

**SC: 405 CH: 0.8 CRNI® Recert. Units: 1**

Pediatric patients receive multiple therapies such as chemotherapy, antibiotics, parenteral nutrition, and IV fluids at home. The pediatric patient presents unique challenges in care management, regarding the access device to be used, fluid volume needs, and medication dosing. Home care management of pediatric patients requires knowledge of multiple access devices, the effects of the prescribed therapies, and necessary developmental interventions. Keeping current with pediatric therapies and competencies is necessary for safe practice. This session will provide an update on pediatric home infusion therapies, nursing resources, and interventions to provide safe practice.

10:00 AM - 2:00 PM

## Industrial Exhibition

NOON - 2:00 PM

### Chapter Officers' Luncheon (Invitation Only)

Chapter officers are invited to attend this informative and interactive luncheon to discuss management strategies, resources, tips on maximizing the relationship between the national office and your chapter, and communication ideas for growth.

*Please note: Contact hours and CRNI® recertification units are not offered for this session.*

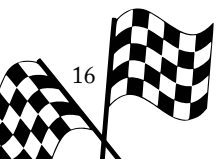
2:00 - 3:00 PM

### QI Infusion Nursing's Role in the Journey to Magnet Recognition

*Roxanne Perucca, MS, RN, CRNI®*

**SC: 406 CH: 0.8 CRNI® Recert. Units: 1**

In today's health care environment, every organization is striving for nursing excellence and working to exemplify value-added care, high-quality outcomes, and professionalism. Infusion nurses are absolutely essential in building a professional practice environment that provides high-quality care and quality outcomes. This session will focus on how infusion nurses can apply the Magnet Recognition Standards to create and sustain an organization's culture of excellence.





tuesday, may 21

INS  
2013

2:00 - 3:00 PM

**IP Investigating Outbreaks**

*Joyanna Wendt, MD, MPH*

**SC: 407 CH: 0.8 CRNI® Recert. Units: 1**

According to the Centers for Disease Control and Prevention (CDC), an *outbreak* is the occurrence of more cases of disease than normally expected in a specific group of people or a certain place over a given period of time. Clinicians investigate outbreaks to control and prevent the spread of disease and infection. Investigation of outbreaks is important when the infection in question has high rates of transmission. This session will discuss types of outbreaks and the methods used to investigate, control, and prevent the spread of disease and infection.

**Oral Abstract Presentations**

**SC: 408 CH: 0.8 CRNI® Recert. Units: 1**

Oral abstracts present research or clinical innovations related to the specialty of infusion nursing. The oral abstracts being presented during this hour were submitted to INS and selected by blind review. These presentations will be judged, and the winner will be announced at the Celebration of Excellence.

**QI RESEARCH TRACK:  
Evaluating Research:  
Should This Study  
Be Used to Guide My  
Practice?**

*Mary Zugic, RN, ACNS-BC, CRNI®*

**SC: 415 CH: 0.8 CRNI® Recert. Units: 1**

Research findings are disseminated in written publications and via poster and podium presentations at professional conferences. Clinicians need to be aware of current research related to their practice but also need to be able to evaluate the usefulness of research findings for their practice. This session

will present examples of two infusion-related research studies to illustrate how to evaluate the usefulness of research.

3:00 - 4:00 PM

**FE Recognizing and  
Treating Syndrome  
of Inappropriate  
Antidiuretic Hormone  
(SIADH)**

*John Maesaka, MD*

**SC: 409 CH: 0.8 CRNI® Recert. Units: 1**

The syndrome of inappropriate antidiuretic hormone (SIADH) secretion is the most common cause of euvoletic hyponatremia in hospitalized patients. Numerous disease processes and medications used in the treatment of these symptoms affect the secretion of antidiuretic hormone (ADH). The resulting fluid and electrolyte imbalances further complicate treatment of these patients. This session will discuss the etiology of SIADH, recognition of symptoms, and treatment of the syndrome.

**A/B Interpretation of  
Complete Blood Count  
Results**

*Carl Kulpa, MS, RN, ANP-BC, ACNP-BC, AOCNP®*

**SC: 410 CH: 0.8 CRNI® Recert. Units: 1**

The complete blood count (CBC) is one of the most commonly performed laboratory tests used across the continuum in health care. It provides important information to the health care provider regarding the patient's health status and response to treatments. This session will identify the components assessed with a CBC and differential, the reference range for each component, and the significance of values falling outside of the reference range.

**Oral Abstract Presentations**

**SC: 411 CH: 0.8 CRNI® Recert. Units: 1**

**QI RESEARCH TRACK: Data  
Collection as a Key to  
Successful Evidence-  
Based Research**

*Wanda Kay North, PhD, MBA, RN, CCRC, CIM*

**SC: 416 CH: 0.8 CRNI® Recert. Units: 1**

Understanding the process for implementation of evidence-based research is instrumental to the success of any research protocol. Effective data collection is an important aspect of any type of research study. Inaccurate data collection can affect the outcomes of a study and the overall care given to patients. This session will focus on the concept of data collection methods and the application to evidence-based research.

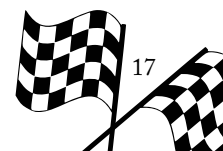
4:00 - 5:00 PM

**QI Infusion Therapy and the  
Novice Nurse**

*Barbara Wenger, MS, RN, AOCNS®, CRNI®*

**SC: 412 CH: 0.8 CRNI® Recert. Units: 1**

A recent study by the Nursing Executive Center found that while nearly 90 percent of academic leaders believe their nursing students are fully prepared to provide safe and effective care, only 10 percent of hospital and health system nurse executives shared that view. This barrier in the transition to professional nursing practice is largely due to the lack of a standardized program to transition new nurses into the increasingly complex nursing profession. This session will discuss learning ideas and strategies to transition the novice nurse into the practice of infusion therapy.



4:00 PM - 5:00 PM

A/B

**Managing Three  
Common Complications  
of Chemotherapy:  
Febrile Neutropenia,  
Nephrotoxicity,  
Enterotoxiciy**

*Laura Milligan, FNPBC, AOCN®*

**SC: 413 CH: 0.8 CRNI® Recert. Units: 1**

For cancer patients, chemotherapy-associated complications can be life threatening. Risks for complications are often compounded when the chemotherapeutic regimen requires drugs to be administered in combination. Management of the most serious complications of chemotherapy—febrile neutropenia and chemotherapy-related nephrotoxicity and enterotoxiciy—requires that nurses be skilled in assessment and the administration of interventions that will reduce morbidity and mortality. This session will review febrile neutropenia, chemotherapy-related nephrotoxicity, enterotoxiciy, and the associated interventions.

**Oral Abstract Presentations**

**SC: 414 CH: 0.8 CRNI® Recert. Units: 1**

QI

**RESEARCH TRACK:  
Disseminating Research:  
How Can I Create  
an Effective Poster  
Presentation?**

*William Warrington, PhD, RN, CCRP*

**SC: 417 CH: 0.8 CRNI® Recert. Units: 1**

Dissemination of research findings is a crucial element in the research process. Once the study data has been analyzed, how do you share the results of your study? Posters are an acceptable and popular presentation format at many nursing conferences. However, if a reader is not attracted to your poster in less than five seconds, he or she will walk away. Your goal should be to get other nurses to stop and start a conversation. To accomplish this goal your poster needs to be attractive, yet informative. This session will focus on the key elements and concepts that should be included in every research poster.

7:30 - 10:30 PM

**Celebration of Excellence**

During the Celebration of Excellence, we will take time to honor INS President Kathy Puglise, MSN/ED, RN, CRNI®, as well as the winners of the INS Member of the Year and Chapter President of the Year awards. We will also recognize the winners of the Oral Abstract and Poster Presentations, and celebrate INS' 40th Anniversary. The evening will feature cocktails, dinner, music, and dancing. Business dress/cocktail attire is suggested.

**NOTE: Contact hours and CRNI® recertification units are not offered for this event.**



wednesday, may 22



7:00 AM - 5:00 PM

Registration

8:00 - 9:00 AM

**A/B** **Chemotherapy-Induced Hypersensitivity Reactions: Are You Prepared?**

*Elizabeth Abernathy, MSN, RN, AOCNS®*

**SC: 502 CH: 0.8 CRNI® Recert. Units: 1**

Chemotherapy-induced hypersensitivity reactions are true medical emergencies. Often, the difference between patient survival and death is determined by rapid assessment and treatment. Infusion nurses must possess expert knowledge and skills necessary for quick recognition of hypersensitivity reactions, and be prepared to deliver immediate, effective treatment.

**TC** **Use of Simulation Training for Vascular Access Device Insertion**

*Laura T. Gantt, PhD, RN, CEN, NE-BC*

**SC: 503 CH: 0.8 CRNI® Recert. Units: 1**

For a number of years, simulators have been used in other industries as a training tool and method to assess performance. Recently the use of simulation in medicine has increased markedly, in part due to greater awareness of the importance of patient safety. Skilled placement of vascular access devices has a profound impact on patient well-being and costs of care. This session will discuss the recognition and treatment of evidence-based practice supporting simulation-based training for vascular access device insertion.

**QI** **QUALITY IMPROVEMENT TRACK: Outcome- and Value-Based Infusion Experts**

*Lorelei Papke, MSN, RN, CRNI®, VA-BC, CEd*

**SC: 504 CH: 0.8 CRNI® Recert. Units: 1**

In the current health care climate, specialty nursing practices appear to be losing value. There are many perceptions and reasons behind eliminating infusion teams and specialty infusion services across the country. Specialized nursing services need to provide simple and quick information on value-based outcomes, turning them into outcome- and value-based infusion experts. This session will discuss strategies to deliver outcomes using quality measurements to the financial decision makers and customers of infusion therapy.

9:00 - 10:00 AM

**TT** **Immunoglobulin Therapy Options for the Home Patient**

*Lou Anne Epperson, MSN, RN*

**SC: 505 CH: 0.8 CRNI® Recert. Units: 1**

Immunoglobulin therapy helps the body fight off infection and helps control the symptoms of many chronic diseases. Evidence-based practice has allowed patients the option of now receiving immunoglobulin G (IgG) therapy via the intravenous or subcutaneous routes. This session will provide insight into these treatment options for the home infusion nurse.

**PH** **Acute and Chronic Pain Assessment and Management**

*Marsha Rehm, MSN, RN-BC, FAAPM*

**SC: 506 CH: 0.8 CRNI® Recert. Units: 1**

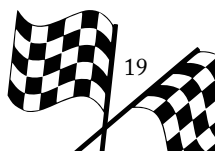
Pain, presenting with potential or actual tissue damage, is a complex, subjective experience for the patient. The accurate assessment of pain is essential for its successful treatment. Patients with chronic pain presenting with acute pain challenge clinicians to provide therapeutic pain management. This session will discuss the assessment of and treatment strategies for acute and chronic pain.

**QI** **QUALITY IMPROVEMENT TRACK: Improving Outcomes Through Effective Patient Education**

*Diane Moyer, MS, RN*

**SC: 507 CH: 0.8 CRNI® Recert. Units: 1**

Patients and their families have the right to be able to comprehend their health care information and to make informed choices about alternatives. Unfortunately, recent studies confirm that patients are often left with a poor understanding of their illness and their treatment regimen. This translates into negative patient outcomes and increased costs felt across the health care system. This session will discuss techniques proven to verify patients' and caregivers' comprehension of the plan of care, and how this improves outcomes.



10:00 AM - 2:00 PM

Industrial Exhibition

2:00 - 3:00 PM

**TT Understanding Therapeutic Apheresis**

*Charles Muck, RN*

**SC: 508 CH: 0.8 CRNI® Recert. Units: 1**

Therapeutic apheresis is a procedure that can be used in the management of autoimmune disease, myeloproliferic disorders, and leukemia. Therapeutic apheresis can also be used to collect specific blood components such as stem cells. Therapeutic apheresis is a filtering process in which whole blood is separated into its component parts. This session will explain the therapeutic apheresis process, discuss indications for use, identify potential complications, and identify the role of the infusion nurse.

**PN Patient Education and Comprehension of Home Parenteral Nutrition Administration**

*Carol Cheney, RN, CNSC*

**SC: 509 CH: 0.8 CRNI® Recert. Units: 1**

Home parenteral nutrition (PN) is one of the most complicated therapies a patient is expected to manage. Patient education for home PN includes storage and preparation of the infusate, use of pumps, care of vascular access devices, and infection control measures. Health literacy addresses readability and cultural diversity for improved patient education. This session will explore patient education and comprehension of education for the administration of PN in the home care setting.

**QI QUALITY IMPROVEMENT TRACK: Process Improvement for Optimal Outcomes**

*Linda Stevens, DNP, RN-BC, CPHQ, CSPHP*

**SC: 510 CH: 0.8 CRNI® Recert. Units: 1**

As organizational leaders, infusion nurses are accountable to patients and nurses for using current best evidence to guide clinical practice. Accountability in this role requires infusion nurses to examine and validate the evidence, as well as develop policies and procedures for infusion-related practices. This process will produce improved outcomes. In this session, participants will explore the aspects of their leadership role to develop an evidenced-based practice, write policies and procedures to standardize practice, and evaluate the patient and/or nurse-focused outcomes.

3:00 - 4:00 PM

**PH The Infusion Nurse's Role in the Management of Nonthrombotic CVAD Occlusions**

*Lauren Blough, BS, RN, CRNI®, VA-BC*

**SC: 511 CH: 0.8 CRNI® Recert. Units: 1**

Routine assessment of CVADs can identify an occlusion. Further evaluation assesses for potential causes of the catheter occlusion. When it is determined that the source of the occlusion is nonthrombotic, the use of appropriate procedures should be evaluated in order to restore patency of the CVAD. This session will explain the assessment and management of the CVAD with a nonthrombotic occlusion, as well as indications for CVAD removal, and patient and caregiver education.

**PED Identification of Risks for Pediatric Thromboembolism**

*Brent Weston, MD*

**SC: 512 CH: 0.8 CRNI® Recert. Units: 1**

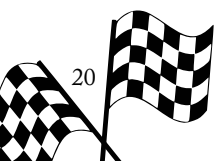
The use of central vascular access devices is reportedly the most common cause of thromboembolism in pediatric patients, with up to 90% of neonate cases and more than 50% of all other pediatric cases attributed to their use. Early recognition of thromboembolism in children requires identifying the potential risk factors that lead to its occurrence. This session will identify the risk factors associated with the occurrence of thromboembolism in the pediatric patient.

**QI QUALITY IMPROVEMENT TRACK: Developing Infusion Champions**

*Mary Ann Cope, RPh*

**SC: 513 CH: 0.8 CRNI® Recert. Units: 1**

Develop infusion experts by sharing knowledge and expertise. This is accomplished through mentoring and educating our peers, physicians, and hospital leadership. It is essential to encourage our nursing colleagues to aspire to specialty certification. Leading by example and educating throughout our workplace will produce clinicians who better understand the practice of infusion therapy and lead to improved patient outcomes.





wednesday, may 22



4:00 PM - 5:00 PM

**IP** **Using the Comprehensive Unit-Based Safety Program (CUSP) to Reduce Central Line-Associated Bloodstream Infections**

*Laura Kate Tyner, BSN, RN, CIC*

**SC: 514 CH: 0.8 CRNI® Recert. Units: 1**

Over 250,000 central line-associated bloodstream infections (CLABSI) are reported by health care organizations each year. CUSP is a structured, strategic framework for safety improvement that integrates communication, teamwork, and leadership to create and support a culture of patient safety that can prevent CLABSI and other harms. This session will discuss CUSP features, including measuring and tracking outcomes, evidence-based safety practices, and staff training tools.

**TC** **Navigating the Purchasing Process While Maintaining Cost and Improving Outcomes**

*Timothy Goedvolk, MSN, BScN, RN*

**SC: 515 CH: 0.8 CRNI® Recert. Units: 1**

Understanding the value analysis process may contribute to the infusion nurse's credibility as clinically preferred products are presented in business terms that will resonate with your organization in these economically challenging times. Key steps are needed when constructing a business case. Analyzing product performance, product waste, education time, and adverse patient outcomes may strengthen the business case presented. This session will examine the steps needed to present a cogent case for your cause.

**QI** **QUALITY IMPROVEMENT TRACK: Patient Safety in a Culture of Transparency**

*Mary Jean Schumann, DNP, MBA, RN, CPNP*

**SC: 516 CH: 0.8 CRNI® Recert. Units: 1**

Patient safety has seen a paradigm shift away from retrospective reviews of numbers of patients harmed to a zero-tolerance policy for errors affecting patients. In an effort to make patient safety their central focus, organizations are working to develop an integrated body of scientific knowledge and a multidisciplinary infrastructure intended to prevent patient injury through early, appropriate response to actual and potential problems. But such an environment can only take place in a transparent culture that embraces trust, honesty, and integrity in every interaction. This session will review methods to engage leaders, patients, and employees at all levels to develop a sustainable culture of patient safety.



**INS Navigation Station**

Staying connected to INS is easier than you think! Are you new to social media (Facebook, Twitter, LinkedIn, YouTube)? Not sure how to download the INS 2013 Mobile App? Wondering what a QR Code is and how to scan it? Are you curious about the new *Journal of Infusion Nursing* iPad App? Would you like to learn how to navigate all of the tools available to you on the INS Knowledge Center?

We're here to help! Stop by the INS Navigation Station—your connection to INS social media, apps and online resources—in the registration area. We'll answer any questions you have, and get you up and running in no time!

**Get "Social" with INS**



"Like" **Infusion Nurses Society**.



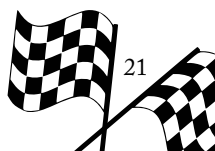
"Follow" **ins1org** and "tweet" about the Annual Convention by including the **#INS2013** hashtag.



Follow recent updates at **Infusion Nurses Society**



Subscribe to the **Infusion Nurses Society** channel.





thursday, may 23

7:30 AM - 3:00 PM

## Registration

8:00 - 9:00 AM

## Presidential Address & Gavel Ceremony

Join INS for the installment of the 2013-2014 INS Board of Directors. During this ceremony, you'll meet the new INS leadership and hear from the newly elected INS president about the goals and objectives for the coming year.

**NOTE: Contact hours and CRNI® recertification units are not offered for this session.**

9:00 - 10:00 AM



## Challenges in Providing Care for the Drug-Addicted Patient Receiving Infusion Therapy

*Donna White, PhD, RN, CNS, CADC*

**SC: 602 CH: 0.8 CRNI® Recert. Units: 1**

It is estimated that 20 million Americans abuse substances. The use of opiates has exploded four fold in the last decade. When the addicted person becomes a patient, this creates multiple challenges for the infusion nurse, including intravenous (IV) access, pain management, and discharge planning. This session will discuss the challenges of providing care for the drug-addicted patient receiving infusion therapy.



## Exploring Generational Gaps in the Workplace

*Lynn Phillips, MSN, RN, CRNI®*

**SC: 603 CH: 0.8 CRNI® Recert. Units: 1**

People of various generations and cultures live and work together, making communication a challenge. Differences in values, norms, views, mind-sets, and demographics of the generations present barriers in communication and education. This session will discuss values and perspectives for each of the three generations in the workplace today: boomers, Generation X, and Generation Y/millennials.

10:00 - 11:00 AM



## Safe Transfusion Practices

*Amelia Baffa, MSN, RN*

**SC: 604 CH: 0.8 CRNI® Recert. Units: 1**

Transfusion of blood and blood products is a safe process that is known to save lives and improve the quality of life for many patients with chronic diseases. Administration of this "living transplant" is not without risk or serious complications. Each step, beginning with initial typing and crossmatching through posttransfusion monitoring, is important to ensure the best outcomes. This session will discuss practices to ensure the safe administration of blood and blood products, identification and management of transfusion reactions, and posttransfusion patient monitoring.



## The Role of Infusion Therapy in Sepsis Management

*Patrick A. Laird, DNP, APRN, ACNP-BC*

**SC: 605 CH: 0.8 CRNI® Recert. Units: 1**

According to the 2008 Surviving Sepsis Campaign Guidelines, key

survival metrics for sepsis patients include time from recognition to the start of broad-spectrum antibiotics, fluid resuscitation, and administration of vasoactive medications and packed red blood cells in certain patients. The infusion nurse's role goes beyond delivery of infusions and includes critical thinking skills, such as identification and mitigation of patient risk factors for sepsis, early recognition and communication of changes in patient status, and optimization of vascular access. This session will review preventative measures for high-risk patients, pathophysiological changes and early recognition of sepsis, and components of infusion therapy that are critical to the septic patient.

11:00 AM - NOON



## Understanding the Centers for Disease Control and Prevention's National Healthcare Safety Network Criteria

*Mary Ann Daehler, MS, RN, CRNI®, OCN®*

**SC: 606 CH: 0.8 CRNI® Recert. Units: 1**

Many facilities are reporting hospital-acquired infections (HAIs) to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN). The NHSN criteria provide a standard language for infection surveillance, which allows benchmarking of data. This session will explain the criteria used for reporting, their purpose, and how to use the information to improve the care and outcomes of the infusion-therapy patient.



annual meeting

11:00 AM - NOON

**PH Heparin-Induced Thrombocytopenia**

*Lisa Forsyth, PharmD*

**SC: 607 CH: 0.8 CRNI® Recert. Units: 1**

Heparin-induced thrombocytopenia (HIT) is a well-defined clinical syndrome that can be defined as thrombocytopenia in a patient who is receiving, or who has recently received, heparin and has HIT antibodies. Thrombocytopenia is the most common event in HIT and occurs in at least 90% of patients. A high proportion of patients with HIT develop thrombosis. This session will discuss the pathogens, treatment options, alternative anticoagulation strategies, and the role of the infusion nurse.

NOON - 1:00 PM

**Lunch Break**

1:00 - 2:00 PM

**FE Hyperkalemia: Management of a Critical Electrolyte Disturbance**

*Ann Crawford, PhD, RN, CNS, CEN*

**SC: 608 CH: 0.8 CRNI® Recert. Units: 1**

Electrolytes are critical in regulating many body functions including myocardial and neurological functions, oxygenation, and fluid and acid-base balance. Consequently, imbalance of electrolyte concentrations can mean significant problems for our patients. Hyperkalemia is considered one of the most critical of electrolyte disturbances, but it is often challenging to recognize due to limited distinctive signs and symptoms. The condition must, however, be treated promptly. This session will identify the potential causes of hyperkalemia, laboratory testing for diagnosis, and treatment options to restore balance.

**A/B Monitoring and Improving the Peripheral Intravenous Complications in Patients Receiving Chemotherapy**

*Patricia J. Meyer, MS, RN, AOCN®, LMT, CCAP*

**SC: 609 CH: 0.8 CRNI® Recert. Units: 1**

Chemotherapy agents given through peripheral intravenous (PIV) catheters are at risk for extravasation. This inadvertent infiltration of a vesicant solution or medication into the surrounding tissue can cause blistering, peeling, and sloughing of the skin; damage to tendons, nerves, and joints; or limb loss. Quality monitoring, interpretation of data, and appropriate interventions are imperative to achieve optimal outcomes. This session will examine a quality monitoring process for patients receiving chemotherapy via PIV catheters and appropriate interventions to improve outcomes.

2:00 - 3:00 PM

**PED Administration Challenges Related to Pediatric Infusion Therapy**

*JoBeth McBee, MSN, APN, NE-BC, PPCNP-BC*

**SC: 610 CH: 0.8 CRNI® Recert. Units: 1**

Administration of infusion therapy to the pediatric patient presents unique challenges for the infusion nurse. In addition to being skilled in the basic principles of safe administration of parenteral solutions and medications, and selection of appropriate infusion equipment and venipuncture sites, the infusion nurse must be knowledgeable

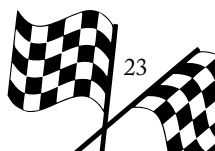
in the physiological, physical, developmental, cognitive, and emotional differences among children themselves. This session will discuss strategies for identifying and managing administration challenges unique to infusion therapy for children.

**PN Parenteral Nutrition: Beyond Fat, Carbohydrate, and Protein**

*Whitney Abramic, RD, CNSC*

**SC: 611 CH: 0.8 CRNI® Recert. Units: 1**

Parenteral Nutrition (PN) constitutes intravenous administration of nutrients. It is a complex therapy that provides macronutrients of carbohydrate, fat, and protein to reach and sustain appropriate weight. In addition, PN must supply micronutrients (vitamins and trace minerals) to meet body requirements. The industry shortages of these micronutrients have resulted in a need to reexamine the current products available and patient requirements. It is essential to examine PN and devise a plan to meet these requirements with the current product availability. This session will explain the role of micronutrients in PN and compare requirements with available product.



## 2013 Spring National Academy of Infusion Therapy

Ann L. Anderson Berry, MD	University of Nebraska Medical Center
Jarvis Campbell, RN	Vidant Medical Center
Sharon Dudley-Brown, PhD, FNP-BC, FAAN	Johns Hopkins University
Jan Haedt, BS, RN, CPHRM	University of Wisconsin Hospital and Clinics
Daniel Hassell, MD	Greensboro Radiology
Judith Kauffman, MS, RN, CPNP	Children's Mercy Hospital and Clinics
Teresa Kitchen, BSN, RN	AlphaNet, Inc.
Yvette Miller, MD, RN	American Red Cross
Libby Montoya, MSN, APN, CNS-BC	St Jude Children's Research Hospital
Daniel Orenstein, JD	Network for Public Health Law
Cathy Perry, MSN, ANP-BC, VA-BC, CRNI®	Vanderbilt University Medical Center
James Robson, BSN, RN, CCRN-CMC, CNN	Carolinas HealthCare System
Karen Roesser, MSN, RN, AOCNS®	Thomas Johns Cancer Hospital
Mary Ellen Scales, MSN, RN, CIC	Baystate Medical Center
Bryan Spencer, MPH	American Red Cross
Elena Nelson Squires, BSN, RN, OCN®, VA-BC	North Colorado Medical Center
Marcie Tomblyn, MD, MS	H. Lee Moffitt Cancer Center
Georgeane Vigue, RD, CNSC	University of Colorado Hospital
Lynne Wolfe, MS, CRNP, BC	National Institutes of Health
Barbara Magnuson Woodward, PharmD, BCNSP	University of Kentucky Hospital & UK College of Pharmacy

## 2013 Annual Meeting

Elizabeth Abernathy, MSN, RN, AOCNS®	Duke Cancer Institute
Whitney Abramic, RD, CNSC	Children's Hospital Colorado
John Allen, PharmD, BCPS	Auburn University Harrison School of Pharmacy
Amelia Baffa, MSN, RN	Strategic Healthcare Group, LLC
Lauren Blough, BS, RN, CRNI®, VA-BC	Bioline, LLC
Carol Cheney, RN, CNSC	ThriveRx
Mary Ann Cope, RPh	HomeChoice Partners, Inc.
Ann Crawford, PhD, RN, CNS, CEN	University of Mary Hardin-Baylor
Mary Ann Daehler, MS, RN, CRNI®, OCN®	Baxter
Lou Anne Epperson, MSN, RN	Coram Specialty Infusion Services
Lisa Forsyth, PharmD	Beaumont Hospital, Royal Oak
Laura T. Gantt, PhD, RN, CEN, NE-BC	East Carolina University College of Nursing
Timothy Goedvolk, MSN, BScN, RN	Aspen Healthcare Metrics/Med Assets





Dora Hallock, MSN, RN, CRNI®, OCN®, CHPN	UMass Memorial Medical Center
Judy Heilman, MSN, RN	Cincinnati Children's Home Care Services
Maureen Hood, PhD, RN	Uniformed Services University of the Health Sciences
Carl Kulpa, MS, RN, ANP-BC, ACNP-BC, AOCNP®	Stanford Hospital & Clinics
Patrick A. Laird, DNP, APRN, ACNP-BC	The University of Texas Health Science Center at Houston School of Nursing
John Maesaka, MD	Winthrop-University Hospital
Ainsley Malone, MS, RD, CNSC, LD	Mt. Carmel West Hospital
JoBeth McBee, MSN, APN, NE-BC, PPCNP-BC	St. Jude Children's Research Hospital
Patricia J. Meyer, MS, RN, AOCN®, LMT, CCAP	Alegent Creighton Health
Laura Milligan, FNPBC, AOCN®	Medical University of South Carolina
Diane Moyer, MS, RN	The Ohio State University Wexner Medical Center
Charles Muck, RN	University of Michigan
Wanda Kay North, PhD, MBA, RN, CCRC, CIM	St. Joseph's/Chandler Health System
Lorelei Papke, MSN, RN, CRNI®, VA-BC, CED	University of Louisville Hospital
Roxanne Perucca, MS, RN, CRNI®	University of Michigan Health Center
Lynn Phillips, MSN, RN, CRNI®	Nursing Education Consultant
Theresa Reed, BSN, RN, VA-BC	Texas Children's Hospital
Marsha Rehm, MSN, RN-BC, FAAPM	Vidant Medical Center
Laurie Reyen, MN, RN	UCLA Health System
Victoria Ruffing, RN, CCRP	Johns Hopkins Arthritis Center
Mary Jean Schumann, DNP, MBA, RN, CPNP	Nursing Alliance for Quality Care (NAQC)
Donnalee Steele, AAS, RN, VA-BC	Hospital of University of Pennsylvania
Linda Stevens, DNP, RN-BC, CPHQ, CSPHP	University of Wisconsin Hospital and Clinics
Kathryn Tagnesi, MA, BSN, RN, NEA-BC	Winchester Medical Center
Laura Kate Tyner, BSN, RN, CIC	The Nebraska Medical Center
Cora Vizcarra, MBA, RN, CRNI®	MCV & Associates Healthcare Inc
William Warrington, PhD, RN, CCRP	Orlando Health
Joyanna Wendt, MD, MPH	Centers for Disease Control and Prevention
Barbara Wenger, MS, RN, AOCNS®, CRNI®	University of Colorado Hospital
Brent Weston, MD	UNC Dept. Pediatrics, Division - Hematology Oncology
Donna White, PhD, RN, CNS, CADC	Lemuel Shattuck Hospital
Eric Zack, MSN, RN, ACNPBC, AOCN®	Rush University Medical Center
Mary Zugic, RN, ACNS-BC, CRNI®	Wayne State University College of Nursing





## first-time attendee orientation

Saturday, May 18 10:00 – 11:00 am

Join INS staff and Board of Directors for a fun and interactive workshop that will show you how to make the most of your Annual Convention experience. Learn about the must-attend sessions, the evening social events, the Charlotte Convention Center, and how to navigate the Industrial Exhibition to find the products and services that will make your job easier.

## meeting mentor program

For first-time attendees, the INS Annual Convention can be an overwhelming experience. To make this a more comfortable and enjoyable experience, INS has created a Meeting Mentor Program where we pair first-timers and new members up with a mentor who can help them navigate the event and assist them in connecting with others in the infusion specialty.

We'll connect First-Timers with their Mentors prior to the Annual Convention, and they will all meet face-to-face at Saturday's First-time Attendee Orientation so they can enjoy the Annual Convention experience right from the very beginning.

*If you would like to volunteer to be a mentor, or would like to request a mentor, please check the appropriate box on your registration form.*

## speed networking – NEW!

Monday, May 20 5:00 pm

INS is excited to offer a brand-new (and really fun!) way to break the ice and make some valuable new connections during the Annual Convention—Speed Networking! Similar to “speed dating,” participants will be paired up at random and given a couple of minutes to get to know one another and see what you may have in common. Once the two minutes are up, participants rotate and the process begins again. When the event ends, there'll be extra time for mingling to reach out to those you were interested in continuing the conversation with, before heading over to the Gardner Foundation/INCC Reception. Watch your e-mail for instructions on how to sign up or check the box on your registration form!

## chapter officers' luncheon *(invitation only)*



Tuesday, May 21 Noon – 2:00 pm

Chapter officers are invited to attend this informative and interactive luncheon to discuss management strategies, resources, tips on maximizing the relationship between the national office and your chapter, and communication ideas for growth.



## networking events

## celebration of excellence

Tuesday, May 21 7:30 – 10:30 pm

During the Celebration of Excellence, we will take time to honor INS President Kathy Puglise, MSN/ED, RN, CRNI®, as well as the winners of the INS Member of the Year and Chapter President of the Year awards. We will also recognize the winners of the Oral Abstract and Poster Presentations, and celebrate INS' 40th Anniversary. The evening will feature cocktails, dinner, music, and dancing. Business dress/cocktail attire is suggested.

## gardner foundation incc reception

Monday, May 20 6:00 – 7:30 pm

The Gardner Foundation/INCC Reception recognizes the achievements of infusion nurses who have demonstrated extraordinary service in the field of infusion therapy. During the reception, we will announce the recipients of the Gardner Foundation scholarships, as well as the winner of the prestigious CRNI® of the Year award. Light hors d'oeuvres and cocktails will be served. Business casual dress is suggested.





# General Information

## Convention Location



The 2013 Annual Convention and Industrial Exhibition will be held at the **Charlotte Convention Center** in Charlotte, NC. The Convention Center is located in downtown Charlotte just 15 minutes from the Charlotte Douglas International Airport (CLT).

**Charlotte Convention Center**  
501 South College Street  
Charlotte, NC 28202

## Meals

Continental breakfast will be provided Sunday–Thursday outside the ballroom. Lunch vouchers are included with your badge for your use on Monday – Wednesday in the exhibition hall.

## Employer Support/Financial Assistance

Understanding the current economic climate, INS has a number of ways to help you save money on your registration fees and gain support from your employer to attend the Annual Convention, including Gardner Foundation scholarships and a proposal letter that you can present to your employer that highlights the benefits that you and your employer will receive by participating in this year's event. Visit the Annual Convention Web site for additional details.

## AdvaMed Code, PhRMA Code, and State Regulations

Many exhibitors at the INS Annual Convention and Industrial Exhibition abide by the AdvaMed Code of Ethics on Interactions with Health Care Professionals or the PhRMA Code on Interactions with Healthcare Professionals and can no longer provide giveaways that are not educational in nature. In addition, to comply with individual state laws, exhibitors can no longer provide refreshments to health care professionals from Maine, Massachusetts, Vermont, Minnesota, and the District of Columbia in their booths or at their sponsored events. We appreciate your understanding and support.

## Disclosure of National Provider Identifier (NPI #) – NEW!

Due to new federal health care reform laws in effect, exhibitors and sponsors are now required to file an annual report to the federal government disclosing items of value (such as educational giveaways, refreshments, etc.) given to health care professionals. This report must include the

business address of the recipient and, if the recipient is a physician, the specialty and National Provider Identifier [NPI] of the covered recipient.

**If you already have an NPI number, please include this on your registration form.** For more information, visit the Regulations & Guidance section at [www.cms.gov](http://www.cms.gov).

## Hotel Reservations

INS has secured discounted room rates at each of the **official hotels** exclusively for registered attendees of the 2013 Annual Convention. Both hotels are located within walking distance of the convention center.

To receive the INS discounted rate, reservations **MUST** be made directly with the INS Housing Bureau. Online reservations and housing forms are available on the Hotel and Travel page of the attendee section of the Annual Convention Web site.

**NOTE:** *A credit card is required to guarantee each reservation.*

**The reservation deadline for the INS group rate is Monday, April 19, 2013, but rooms may sell out before the deadline, so don't delay!** Group rates and availability are subject to change after the reservation deadline.

### The Westin Charlotte (Headquarters)

601 South College Street  
Charlotte, NC 28226

Single/Double Occupancy:



\$174+ tax/night

### Hilton Charlotte Center City

222 East Third Street  
Charlotte, NC 28202

Single/Double Occupancy:



\$174+ tax/night

## DID YOU KNOW?

INS negotiates with our convention hotels to offer the best rates available at these hotels over our event dates, and in turn, is responsible for our group occupying a minimum number of hotel rooms in the INS Room Block during our event. If this minimum is not met, INS is required to pay for any unsold rooms until our minimum is achieved.

By making your reservations within the INS Room Block, you help us keep overall meeting expenses lower and project hotel room demand for future events.





Monday, May 20  
10:00 AM – 2:00 PM

Tuesday, May 21  
10:00 AM – 2:00 PM

Wednesday, May 22  
10:00 AM – 2:00 PM

## industrial exhibition

The Industrial Exhibition provides you with the rare opportunity to speak one-on-one with leading infusion suppliers about your day-to-day challenges and experiences and to learn how the latest infusion technology and products can help you improve patient care. With exhibits, Exhibitor Theater sessions, hands-on Simulation Labs, and educational Poster Presentations, the Industrial Exhibition has grown to become an extension of your overall learning experience at the Annual Convention.





## Three Easy Ways to Register:

- Register online using our secure online form.
- Fax your completed registration form with payment to INS at (781) 440-9409.
- Mail your completed registration form and payment to:  
**Infusion Nurses Society, 315 Norwood Park South,  
Norwood, MA 02062.** Please make checks payable to:  
**Infusion Nurses Society.**

## Registration Discounts

INS is pleased to offer the following registration discounts:

### INS Member Discount

INS members who register at the INS Member rate must keep their membership active through May 2013 or nonmember rates will apply.

### First-time Members

If you are a first-time member joining INS, you can save on your first-year membership fee by attending the INS Annual Convention & Industrial Exhibition. Simply check the appropriate box on the registration form. Lapsed members renewing their membership are not eligible for this discount. INS memberships are nonrefundable and nontransferable.

### Retired Members' Discount

INS members who have retired from nursing should contact Membership Services at (800) 694-0298 for information on a special registration fee discount.

### Group Discount

Any organization registering five INS members for BOTH meetings (the Spring National Academy AND Annual Meeting) will have the opportunity to register a sixth member for FREE. This discount applies only to Early-Bird and Advanced Registrations. **All applications must be sent together with a single payment in order to qualify.** If a member of the group cancels, the group is no longer eligible for this discount, and the complimentary registration is forfeited.

### Advanced and Regular Registration Discounts

Save over \$150 by registering early! Advanced or Regular Registration discounts are available to those whose registration is received by INS by midnight ET on the deadlines published on the registration form. Registrations received after each discount date will be processed at the next pricing tier.

## Guests

Each attendee has the opportunity to register one guest for a fee of \$100. Guests are allowed to attend social events; however, they are NOT allowed to attend educational sessions. **INS members, CRNI®s, and exhibitors are not allowed to attend as guests.**

## Infants/Children

Infants and children under the age of 18 are not permitted in the educational sessions or Industrial Exhibition at any time.

## Exhibit Personnel

Exhibit personnel who wish to attend educational sessions **must** also register for the convention.

## Exhibit Hall-Only Passes

INS does not offer an Exhibit Hall-only option for this convention.

## Confirmation

You will receive a confirmation e-mail and a letter by mail once your registration is processed by INS. Incomplete forms will not be processed, and registration will not be confirmed until paid in full. The confirmation will indicate the meeting(s) for which you are registered and is your receipt. If you do not receive a confirmation letter within 14 days, please call INS Membership Services at (800) 694-0298.

## Cancellation and Refund Policy

All registration cancellations must be made in writing to INS and will be refunded only if received by **April 15, 2013**. All refund requests are subject to a \$50 cancellation fee. No refunds or credits will be issued for any reason after April 15, 2013. No exceptions will be made. "No-shows" forfeit all registration fees paid and are not eligible for any refunds or credits. Cancellations of hotel reservations cannot be made through INS.

## Transfers/Substitutions

If you register for the Spring National Academy, Annual Meeting, or the entire Annual Convention and are unable to attend, you may transfer your registration to a colleague. A \$50 transfer fee will apply.

## Adding on to an Existing Registration

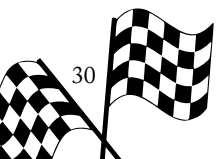
If you register for the Spring National Academy only or Annual Meeting only and decide at a later date to attend the entire six-day convention, you will be charged at the current rate (Early-Bird, Advanced, or On-Site) for the meeting you are adding. **The discount for registering for both programs is applicable only when registering for both meetings in one transaction.**

## Tax Deduction

You may be able to deduct the cost of the Annual Convention & Industrial Exhibition and related expenses from your federal income taxes. Please consult your tax advisor for details.

## No Solicitation Policy ("Suitcasing")

*Suitcasing* is defined as any activity designed to solicit or sell products or services to delegates attending a convention without the proper authorization by show management or in ways that violate the rules of the event. Any attendee who is observed to be soliciting business in the aisles or other public spaces, in another company's booth, or in violation of any portion of this policy, is subject to removal from the event, and any and all registration fees paid will be forfeited. Additional penalties may also apply.







**LEAD**  
**Leadership, Education, Accountability, Development**  
**2013 INS Annual Convention & Industrial Exhibition**  
**May 18 - 23, 2013 • Charlotte, NC**  
**Charlotte Convention Center**



**Mailing Instructions:** Forward completed registration form (one per applicant) with full payment to:  
Infusion Nurses Society, 315 Norwood Park South, Norwood, MA 02062

If you are paying by credit card, you may fax to (781) 440-9409. This form is also available online at [www.ins1.org](http://www.ins1.org).

### Registration Information

All meeting correspondence will be sent to the address/e-mail address indicated below.

Are you a first-time attendee? ☐ Yes ☐ No Would you like a Meeting Mentor? ☐ Yes ☐ No

Would you like to volunteer to be a Meeting Mentor? ☐ Yes ☐ No

Would you like to attend the Speed Networking Program? ☐ Yes ☐ No

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Business (if mailing to business address) \_\_\_\_\_

Street \_\_\_\_\_ ☐ Home ☐ Business

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Province \_\_\_\_\_ Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ ☐ Home ☐ Business

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

INS Membership No. \_\_\_\_\_ National Provider Identifier No. \_\_\_\_\_

### Badge Information

Nickname for badge \_\_\_\_\_

Last Name \_\_\_\_\_

Credentials: ☐ RN ☐ CRNI® ☐ LPN/LVN

☐ OCN® ☐ RPh ☐ MD ☐ Other \_\_\_\_\_

Business \_\_\_\_\_

Business City \_\_\_\_\_

Business State \_\_\_\_\_

### Emergency Contact Information

Name \_\_\_\_\_

Telephone \_\_\_\_\_

### Registration Fees

	INS Member	1st-time Member Joining*	Nonmember
Advanced (Received by 3/15/13)	National Academy Only (Sat. & Sun.) <input type="checkbox"/> \$390 Annual Meeting Only (Mon. – Thurs.) <input type="checkbox"/> \$400 Both Meetings (Sat. – Thurs.) <input type="checkbox"/> \$675	<input type="checkbox"/> \$465 <input type="checkbox"/> \$475 <input type="checkbox"/> \$750	<input type="checkbox"/> \$540 <input type="checkbox"/> \$550 <input type="checkbox"/> \$825
Daily: <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs.	<input type="checkbox"/> \$175/Day	<input type="checkbox"/> N/A	<input type="checkbox"/> \$225/Day
Regular (Received by 4/15/13)	National Academy Only (Sat. & Sun.) <input type="checkbox"/> \$440 Annual Meeting Only (Mon. – Thurs.) <input type="checkbox"/> \$450 Both Meetings (Sat. – Thurs.) <input type="checkbox"/> \$775	<input type="checkbox"/> \$515 <input type="checkbox"/> \$525 <input type="checkbox"/> \$850	<input type="checkbox"/> \$590 <input type="checkbox"/> \$600 <input type="checkbox"/> \$925
Daily: <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs.	<input type="checkbox"/> \$195/Day	<input type="checkbox"/> N/A	<input type="checkbox"/> \$250/Day
On-Site (Received after 4/15/13)	National Academy Only (Sat. & Sun.) <input type="checkbox"/> \$490 Annual Meeting Only (Mon. – Thurs.) <input type="checkbox"/> \$500 Both Meetings (Sat. – Thurs.) <input type="checkbox"/> \$825	<input type="checkbox"/> \$565 <input type="checkbox"/> \$575 <input type="checkbox"/> \$900	<input type="checkbox"/> \$640 <input type="checkbox"/> \$650 <input type="checkbox"/> \$975
Daily: <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs.	<input type="checkbox"/> \$245/Day	<input type="checkbox"/> N/A	<input type="checkbox"/> \$300/Day
<b>Guest Fee</b> (one only; social events only)	<input type="checkbox"/> \$100.00		
Guest Name _____	City, State _____		

**Membership Renewal** ☐ \$90 One-year ☐ \$170 Two-year ☐ \$240 Three-year

\*Includes one-year INS membership—not applicable for lapsed members rejoining.  
INS memberships are nonrefundable and nontransferable.

**Registrations must be received by INS by midnight ET on discount deadline to be eligible for that rate.**

TOTAL ENCLOSED: \$

### Payment

☐ Check or Money Order (DO NOT SEND CASH). Please make check or money order payable to **Infusion Nurses Society**.

☐ Credit Card Information: ☐ VISA ☐ MC ☐ AMEX Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder name \_\_\_\_\_ Cardholder signature \_\_\_\_\_

Registration and attendance at INS meetings and events constitutes an agreement by the registrant for Infusion Nurses Society's use and distribution (both now and in the future) of the registrant's or attendee's image or voice in photographs, videotapes, electronic reproductions, or audiotapes of such meetings and events.



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and so does  
INS 2013!



register **today** to be a part  
of our 40th anniversary  
celebration!