

Unbridled Spirit: Achieving Safe, Quality Outcomes in Pain Management



AMERICAN SOCIETY FOR
**Pain Management
Nursing®**

26th National Conference
September 7-10, 2016 Louisville, Kentucky
Louisville Marriott Downtown

ASPMN®

Courtesy of www.gotolouisville.com



The American Society for Pain Management Nursing® (ASPMN®) is pleased to announce its 26th National Conference, September 7–10, 2016 at the Louisville Marriott Downtown in Louisville, Kentucky.

THE GOALS OF THE 26TH NATIONAL CONFERENCE ARE TO:

- Discuss clinical options for the treatment of patients who require pain management nursing care.
- Analyze clinical, research, sociocultural and legal developments in the field of pain management.
- Advocate for the provision of comprehensive, evidence-based, quality care of individuals and their families experiencing problems related to chronic pain conditions.
- Network with nurses and other health care professionals who focus on pain management in their practice.

THE NATIONAL CONFERENCE WILL INCLUDE:

- Nationally recognized speakers and leaders in the field of pain management
- Pre-conference educational opportunities for additional learning
- Innovative educational sessions
- Incorporation of technology and human touch in pain management practice
- Networking opportunities
- Potential to gain new peers and partners

Continuing Education

The Greater Kansas City Chapter of the American Society for Pain Management Nursing is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering has been submitted for 24.75 contact hours applicable for RN, LPN, LMHT relicensure and 12.5 pharmacology hours for APN relicensure. Kansas State Board of Nursing provider number LT0279-0412.

Target Audience

The target audience for the 26th National Conference includes registered nurses and advanced practice nurses practicing in pain management, as well as nursing faculty and nursing students with an interest in pain management.

Learning Objectives

Learning objectives for each session will be posted on the **ASPMN® Conference webpage**.

Cancellations & Transfers

Cancellations and transfers must be requested in writing and received by **Aug. 12, 2016**. Refunds will be issued following the National Conference. A \$50 administrative fee will be assessed. If you transfer your registration to another person, please include a completed registration form from that person with your written request. Requests for cancellation received after Aug. 12, 2016, are not refundable.

Climate & Attire

The average high temperature in September in Louisville is 82 degrees Fahrenheit, and the average low temperature is 61 degrees Fahrenheit.

Attire for the conference is business casual.

26th National Conference Planning Committee

PROGRAM CO-CHAIRS

Pamela Merriam, RN-BC, MSN, ANP-BC, OCN, Keck Medical Center of USC, Los Angeles, CA

Lynn Clark, MS, RN-BC, CPNP-PC, AP-PMN, Children's Medical Center — Dallas, Dallas, TX

COMMITTEE MEMBERS

Cheryl Deters, MSN, RN, CPNP, CHOC Children's, Orange, CA

Cindy Garlesky, MSN, ARNP, CEN, RN-BC, Miami Children's Hospital, Miami, FL

Pamela Geyer, JD, RN-BC, CFN, FACFEI, Henry Mayo Memorial Hospital, Valencia, CA

Susan Jervik, BSN, RN-BC, PIH Health Hospital, Whittier, CA

Susan Miller, RN, University of Kentucky, Lexington, KY

Ann Schreier, PhD, RN, East Carolina University College of Nursing, Greenville, NC

Holly Swensen, MSN, RN-BC, APRN-NP-C, St. Alphonsus Regional Medical Center, Boise, ID

Susan White, MSN, RN-BC, CHPN, CNS, Santa Barbara Cottage Hospital, Santa Barbara, CA

Kimberly Wittmayer, APN, PCNS-BC, AP-PMN, Advocate Children's Hospital, Oak Lawn, IL

LOCAL CHAPTER LIAISON

Christine Yeazell, RN, University Hospital, Cincinnati, OH

BOARD LIAISON

Sharon Wrona, DNP, RN-BC, PNP, PMHS, AP-PMN, Nationwide Children's Hospital, Columbus, OH

SCHEDULE OF EVENTS

► WEDNESDAY, SEPTEMBER 7, 2016

PRE-CONFERENCE WORKSHOPS

8:00 a.m. – 5:00 p.m.

Workshop 1: ASPMN® Pain Management Certification Preparation Course™

Esther Bernhofer, PhD, RN-BC, Senior Nurse Researcher, Cleveland Clinic, Office of Research and Innovation, Nursing Institute, Cleveland, OH; Maureen F. Cooney, DNP, FNP-BC, Nurse Practitioner, Clinical Nurse Specialist, Pain Management, Westchester Medical Center, Valhalla, NY; Renee Manworren, PhD, PCNS-BC, RN-BC, FAAN, Director of Nursing Research and Professional Practice, Posy and Fred Love Chair in Nursing Research, Ann and Robert Lurie Children's Hospital of Chicago; Associate Professor of Pediatrics, Northwestern University, Feinberg School of Medicine, Chicago, IL; Barbara L. Vanderveer, MSN, RN-BC, Clinical Nurse Manager, Pain Management Services, University of Kentucky, Lexington, KY

This course will cover basic physiology of pain, assessment of pain, pharmacologic, non-pharmacologic and interventional management of pain across the lifespan. The information in this course follows the exam content outline created by the Content Expert Panel for ANCC and was compiled by members of the ASPMN®. For those interested in taking the Pain Management Certification Examination while in Louisville, there is a testing site within three miles of the hotel. For more information on the exam, visit: <http://www.nursecredentialing.org/Certification>.

8:00 a.m. – 5:00 p.m.

Workshop 2: Advanced Pharmacology

Deborah Matteliano, PhD, RN, FNP-BC, ANCC Certified Pain Management Specialist, Matteliano Pain Management; Adjunct Assistant Professor, State University of New York at Buffalo School of Nursing, Buffalo, NY; Linda Vanni, MSN, RN, ACNS-BC, NP, Nurse Practitioner, Pain Management, Providence Hospital, West Region, Troy, MI; Marie O'Brien, MSN, RN-BC, ANP-C, CCRN, Pain Management Coordinator/Nurse Practitioner, JT Mather Hospital, Port Jefferson, NY

Pain management nursing has advanced its practice by leaps and bounds. We no longer assume that pain management is simple, algorithmic nor anecdotal. We now advance into evidence-based practice that is based on neurophysiological research. In order to continue to move pain management nursing forward, we must think in terms of pain pathway and multi-modal approaches to pain. This workshop is focused for the seasoned nurse in pain management who is thinking about the depth of a person's individualized pain and how best to treat the etiology of the pain rather than placing a mask over it.

8:00 a.m. – 5:00 p.m.

Workshop 3: Advanced Practice Provider (APP) Workshop—Enriching APP Practice

Participants have the option of attending the full workshop or just morning or afternoon sessions (see registration form).

This workshop is divided into two sections to allow participants to attend the entire workshop or just the morning or afternoon sessions as their schedules allow.

Evidence-based practice improves the quality of patient care and outcomes. Therefore it should be used to assist the advanced practice provider (APP) in clinical decision-making. The morning sessions in this workshop will provide an overview of the evidence-based practice process: formulating a clinical question, overview of available resources, cataloging research information, analyzing method, planning, implementation, evaluation and dissemination of the evidence based project. The AP-PMN portfolio project will be outlined and examples provided for those considering this certificate recognition.

Over lunch, participants will discuss hot pain management topics and dilemmas for advanced practice providers. All workshop participants (full- and half-day) are invited to participate.

The afternoon sessions will focus on pharmacology. Opioid prescribing practices and strategies to minimize risk in chronic pain patients will be explored. A pharmacology update will be provided, which will include an overview of medications, new medications and multimodal therapy. Strategies to facilitate and sustain practice changes within participants' organizations will also be discussed.

5:30 p.m. – 6:00 p.m.

NEW MEMBER/ATTENDEE ORIENTATION

► THURSDAY, SEPTEMBER 8, 2016

7:30 a.m. – 8:15 a.m. CONTINENTAL BREAKFAST

8:15 a.m. – 8:45 a.m. WELCOME & OPENING REMARKS

Ellyn T. Schreiner, MPH, RN-BC, CHPN, Clinical Educator, Adventist St. Thomas Hospice, ASPMN® President, Hinsdale, IL

**8:45 a.m. – 9:45 a.m. OPENING KEYNOTE ADDRESS:
Competencies in Action—Reflective Practice to Transform Quality & Safety in Pain Management**



Gwen D. Sherwood, PhD, MSN, BSN, Professor and Associate Dean for Academic Affairs, University of North Carolina School of Nursing

Pain management is a common experience in health care, yet continues to present challenges for effective management. The competency approach developed by the Quality and Safety Education for Nurses (QSEN) project will be applied to pain management through a case-based approach to illustrate how professionals apply the knowledge, skills and attitudes of teamwork and collaboration to provide patient-centered care, apply evidence-based practice, explore gaps through quality improvement, develop a culture of safety and use skills in informatics. Professionals move toward professional maturity through reflective practices that examine situations to learn from experiences. A mindful approach to assess, manage and evaluate the patient's pain experience can transform outcomes for an effective, coordinated, patient-centered approach that brings joy and satisfaction to patients and providers; we all want to be a part of meaningful work. Using a case-based approach, this session will challenge each of us to use an "unbridled spirit" to transform pain management.

9:45 a.m. – 10:30 a.m. BREAK IN THE EXHIBIT HALL
Silent Auction Items & Posters Available

10:30 a.m. – 11:30 a.m. Balance in Pain Care & Prescription Drug Abuse Prevention: Discussion of Legislation & Policy
Wade Delk, Government Affairs Director, ASPMN®, Washington, D.C.; Michael Barnes, JD, Executive Director, Center for Lawful Access and Abuse Deterrents (CLAAD), Washington, D.C.

The presenters will discuss the major issues affecting pain care policy with a focus on the need for a balanced approach in reducing the risk of prescription drug diversion and abuse, while simultaneously ensuring that patients in pain, with a legitimate need for controlled substances, have access to such medications. Presenters will discuss newly enacted federal policies and noteworthy pending federal- and state-level legislation affecting care for people with pain.

Sponsored by Pernix Therapeutics



*Final registration deadline is **Aug. 12**. If you are registering after Aug. 12, please bring your completed paperwork and payment with you to the conference.*

Courtesy of www.gotolouisville.com

11:45 a.m. – 1:15 p.m.

GROUP LUNCHEON

1:30 p.m. – 2:30 p.m.

Culture of Civility & Respect: A Health Care Leader's Role

Beth Nachtsheim Bolick, DNP, PPCNP-BC, CPNP-AC, FAAN, Robert Wood Johnson Foundation Executive Nurse Fellow Alumna 2012-2015 Cohort; Professor and Director, Acute Care Pediatric Nurse Practitioner Program, Department of Women, Children and Family Nursing, Rush University College of Nursing, Chicago, IL

Incivility and bullying in the health care setting results in the loss of human capital and impairs patient, family and population health outcomes. Directly-affected health care providers and bystanders may experience high levels of stress and anxiety and leave the workforce prematurely, model the behaviors themselves with colleagues and customers and close down communication that affects care. The problem crosses all health care boundaries. Participants will be equipped with strategies, including the action mnemonic, "BE AWARE...and Care", and tools for building cultures of respect in their organizations.

2:30 p.m. – 3:30 p.m.

JEAN GUYEYAN LECTURE

Caring for People with Pain: Understanding the Past & the Present in Order to Shape the Future



Carol Curtiss, MSN, RN-BC, Clinical Nurse Specialist Consultant, Curtiss Consulting; Ani Parseghian, RN, BSN Student (graduating May 2016), Simmons College, Niece of Jean Guveyan

The under-treatment of pain and addiction to opioids are each major public health crises in the U.S. Although they are two separate problems, they are often discussed as if they are one and the same. Recent restrictions, laws and regulations aimed at diminishing the opioid crisis have unintended consequences for people with all types of pain. The presenters will compare and contrast pain management practices over the past 40 years, using patient narratives, published pain management guidelines and discussion of current issues, including unintended consequences for people in pain. The presenters will also describe challenges in providing personalized pain care and discuss strategies that nurses and other health care providers can implement to ensure patients have access to competent, safe pain care.

3:30 p.m. – 4:15 p.m.

POSTER SESSION

3:30 p.m. – 4:15 p.m.

BREAK IN THE EXHIBIT HALL

Silent Auction Items Available

4:15 p.m. – 5:00 p.m.

BUSINESS MEETING

All attendees invited

5:00 p.m. – 5:45 p.m.

CERTIFICATION RECEPTION

All Certified Pain Management Nurses invited

6:00 p.m. – 8:00 p.m.

RECEPTION IN THE EXHIBIT HALL

► FRIDAY, SEPTEMBER 9, 2016

7:15 a.m. – 8:15 a.m.

CONTINENTAL BREAKFAST & ROUNDTABLE DISCUSSIONS

8:30 a.m. – 9:30 a.m.

CONCURRENT SESSION 1

1A. Challenges of Multidisciplinary Education of Pain Management in a Regulatory Environment

Benjamin Bernier, RN, MSN, CCRN, Sedation and Pain Compliance Specialist, Children's Hospital Colorado, Aurora, CO

Pain management is a multidisciplinary effort involving all members of the health care team. Pain management education for all members of the health care team is an intricate balance with multiple overlapping angles and messages. This process is further complicated by the different regulatory requirements and practice limitations for the different roles. Attempting to solve this problem, Children's Hospital of Colorado modeled case studies from actual patient care, citations from The Joint Commission and Centers for Medicare and Medicaid Services and its own identified opportunities for improvement. The goal is a safer and higher quality experience for patients and families.

Category: Accreditation

Patient Population: All

Level: Competent

1B. Acute Traumatic & Post-Operative Pain: A Retrospective Chart Review of Quality of Life Improvement

Anita Watson, NP-C, RN-C, Surgical Trauma Nurse Practitioner, Navicent Health Medical Center, Macon, GA

The purpose of this presentation is to demonstrate the efficacy of a multimodal pain regimen and the expertise of an interprofessional team in providing effective pain management. The population studied included acutely injured trauma and post-operative patients. The goal of this patient-centered approach was to improve the patient experience and ultimately patient outcomes. This study was conducted using a pre- and post- design at an academic, Level 1 Trauma Center and Magnet-designated facility.

Category: Acute Pain

Patient Population: Adult

Level: Proficient

1C./2C. Quality Pain Management Nursing in the "New Normal" of Opioid Prescribing: Barriers & Opportunities

Jason Sawyer, RN-EC, MN, BC, Nurse Practitioner, Acute Pain Service, Sunnybrook Health Sciences Center, Toronto, Ontario, Canada; Wade Delk, BA, Director of Government Affairs, ASPMN®, Washington, D.C.

North America is struggling to cope with a health care crisis related to prescription opioids. A growing body of literature describes significant harms associated with long-term opioid use without corresponding benefits. There will be two components to this session: 1) The presenters will provide an overview of recent documents evaluating the role of opioids in chronic non-malignant pain. 2) Attendees will break out into three moderated groups and discuss opportunities and barriers for nurses to improve the quality of care for patients with chronic non malignant pain. The three groups will be 1) pain management in the hospital setting, 2) pain management in primary care, 3) pain management in chronic pain clinics. Information from this session will contribute to the development of an ASPMN® nursing strategy for quality pain management in the "new normal" of opioid use for chronic non-malignant pain. Attendees are encouraged to review the 2016 CDC guidelines for Prescribing Opioids for Chronic Pain in advance.

Category: Persistent Pain

Patient Population: Adult

Level: Competent

Session continues through 11:15 a.m. after a 45-minute break.

1D. Exploring Music as a Nursing Intervention for the Management of Pain

Sandra Siedlecki, PhD, RN, CNS, Senior Nurse Scientist, Cleveland Clinic, Cleveland, OH

The purpose of this presentation is to examine the evidence about the use of music as a nursing intervention for the management of acute or chronic pain in adults and children. The presentation compares music interventions and examines their effect and effectiveness for acute and chronic pain. In addition to sharing the information gleaned from a systematic review, the presenter will provide several interactive exercises that demonstrate the power of music as a nursing intervention.

Category: CAM

Patient Population: All

Level: Proficient

1E. Educating Patients on the Physiology of Central Sensitization & the Neurochemical Relationship to Chronic Pain

Connie A. Luedtke, MA, RN-BC, Nurse Supervisor, Mayo Clinic, Rochester, MN; Mary Volcheck, RN, BSN, Staff Nurse, Mayo Clinic, Rochester, MN

Frequently, patients do not understand why they experience the intensity of their pain and a number of other often unexplained symptoms. Nurses are in a unique position to provide this information. Studies have shown that education about chronic pain physiology and the process of central sensitization has positive effects on patients' perception and experience of pain and its impact on their quality of life. This knowledge empowers them to re-conceptualize their experience of pain and other symptoms, turning their focus to the development of coping skills, promoting increased quality of life.

Category: Persistent Pain

Patient Population: All

Level: Proficient

9:30 a.m. – 10:15 a.m.

BREAK IN THE EXHIBIT HALL

Silent Auction Items & Posters Available

10:15 a.m. – 11:15 a.m.

CONCURRENT SESSION 2

2A. Purposeful Pain Assessment in Older Adults with Delirium Can Improve Outcomes

Samantha Undari-Schwartz, ANP-C, AGNP-C, Nurse Practitioner Palliative Medicine, NSLIJ Southside Hospital, East Islip, NY

Assessment of the cognitively impaired older adult can improve cognition, pain behaviors and length of stay in acute care settings. Older adults in the hospital diagnosed with dementia were evaluated using the PAINAD scale and purposeful discussion with caretakers regarding past medical history and cognitive and functional status. A videotaped vignette of one of the patients was created to illustrate this complex assessment. Health care providers were educated on how the use of non-opiates, consistency, caregiver discussion and the PAINAD scale were able to reverse the patient's delirium and return her to a heightened cognitive level in five days.

Category: Misc.

Patient Population: Geriatric

Level: Proficient

2B. Naloxone Harm Reduction Strategies: Saving Lives & Providing Safe Care

Paula A. Kobelt, MSN, RN-BC, Outcomes Manager, Pain Management and CHA, OhioHealth Grant Medical Center, Columbus, OH; Michelle Meyer, PharmD, BCPS, BSNSP, Clinical Pharmacist, Pain Management and Nutrition Support, OhioHealth Grant Medical Center, Columbus, OH

The prescription opioid epidemic devastating the U.S. spares no one, impacting every race, sex, age and socioeconomic group. People who are addicted to opioids are predisposed to heroin addiction, and related deaths have quadrupled in the U.S. The presenters will share the successful naloxone harm reduction efforts implemented in Ohio, results of an IRB-approved study for pregnant women with addiction and efforts in the Emergency Department. The health care team, by increasing knowledge and partnering with the community, law enforcement and government officials, can implement prevention and treatment strategies and provide education to battle this national health care crisis.

Category: Misc.

Patient Population: All

Level: Proficient

1C./2C. Quality Pain Management Nursing in the “New Normal” of Opioid Prescribing: Barriers & Opportunities

Jason Sawyer, RN-EC, MN, BC, Nurse Practitioner, Acute Pain Service, Sunnybrook Health Sciences Center, Toronto, Ontario, Canada; Wade Delk, BA, Director of Government Affairs, ASPMN®, Washington, D.C.

North America is struggling to cope with a health care crisis related to prescription opioids. A growing body of literature describes significant harms associated with long-term opioid use without corresponding benefits. There will be two components to this session: 1) The presenters will provide an overview of recent documents evaluating the role of opioids in chronic non-malignant pain. 2) Attendees will break out into three moderated groups and discuss opportunities and barriers for nurses to improve the quality of care for patients with chronic non-malignant pain. The three groups will be 1) pain management in the hospital setting, 2) pain management in primary care, 3) pain management in chronic pain clinics. Information from this session will contribute to the development of an ASPMN® nursing strategy for quality pain management in the “new normal” of opioid use for chronic non-malignant pain. Attendees are encouraged to review the 2016 CDC guidelines for Prescribing Opioids for Chronic Pain in advance.

Category: Persistent Pain

Patient Population: Adult

Level: Competent

Continuation of 8:30 a.m. session

2D. Chiropractic Medicine’s Role in Pain Management for Cancer Patients

Jeffrey A. Sklar, DC, Director of Chiropractic Services, Cancer Treatment Centers of America at Eastern Regional Medical Center, Philadelphia, PA

The presenter will review literature, emerging research and case reports on how chiropractic medicine can be safely and effectively administered to cancer patients. There will be discussion on specialized low-force and non-force techniques that have been shown to not only reduce musculoskeletal pain and improve function, but that also address debilitating side effects such as nausea, headaches and neuropathy that can severely impact the quality of life for this patient population. Participants will leave with knowledge of an additional resource beyond pharmacological interventions.

Category: CAM

Patient Population: All

Level: Competent

2E. Lassoing Current Ketamine Practice

Cynthia C. Klaess, MSN, RN, ACNS-BC, CCM, Pain Clinical Nurse Specialist, Duke University Hospital, Durham, NC

At the 2015 ASPMN® conference, participant comments during the Ketamine presentation indicated varied practices related to dosing, patient selection, indicators for use and clinical area. Barriers to use were also verbalized. A Ketamine usage questionnaire was developed and disseminated to ASPMN® members via the list serv. Questions included area of practice, indicators for Ketamine use, age range, dosing, route, frequency, side effects and barriers to use. In this session, the presenter will review updated literature on Ketamine use and abuse and present the survey results, including examples and comments as well as recommendations for future practice and guidelines development.

Category: Misc.

Patient Population: All

Level: Competent

11:15 a.m. – 1:00 p.m.

AWARDS LUNCHEON

1:00 p.m. – 2:00 p.m.

CONCURRENT SESSION 3

3A. From Podium or Poster to Publication: Strategies for Success

Patricia Bruckenthal, PhD, APRN-BC, ANP, FAAN, Chair and Associate Professor, Department of Graduate Studies in Advanced Practice Nursing, Interim Associate Dean for Nursing Research, Stony Brook School of Nursing, Stony Brook, NY

The *Pain Management Nursing* journal recently published abstracts from presentations at the ASPMN® 2015 Conference. These, along with the presentations this year, are ready to be transformed into manuscripts ready for publication. This session, led by an Assistant Editor for *Pain Management Nursing*, will provide strategies to move creative clinical ideas to dissemination through publication of a manuscript. Participants will develop skills and obtain tools needed to get to publication. This session is appropriate for anyone interested in writing a manuscript, and those who have submitted an abstract for a presentation are halfway there!

Category: Misc.

Patient Population: All

Level: Competent

3B. A 360-Degree Look at the Sickle Cell Crisis in the Adult

Karen V. Macey-Stewart, MSN, APN-C, RN-BC, Manager, Acute Care Inpatient Pain Service, Mednax-Summit Anesthesia, Elizabeth, NJ; Kerstin Scheper, RN-BC, OCN, CHPN, Nursing Coordinator, Overlook Medical Center, Summit, NJ

Sickle Cell Disease is a long-term, chronic pain condition that affects millions of people worldwide. The lack of understanding of the disease, existing barriers and stigmatism of health care professionals all lead to poor outcomes. This presentation takes a 360-degree look at how to effectively manage a sickle cell patient from the time of admission to discharge. Participants will understand the patients' perspective and their own biases and review current research, case studies and sickle cell protocol used at Overlook Medical Center.

Category: Persistent Pain

Patient Population: Adult

Level: Competent

3C. Monitoring for Opioid-Induced Respiratory Depression: Review of New Evidence

Carla R. Jungquist, ANP-BC, PhD, Assistant Professor, State University of New York at Buffalo School of Nursing, Buffalo, NY

Despite published guidelines, adverse events secondary to opioid-induced respiratory depression continue to occur. This is likely because of two reasons: 1) guidelines are not specific enough, and 2) efforts to establish continuous monitoring in all patients on opioids has resulted in the problem of alarm fatigue. There is new research that shows how nurses are able to recognize the patient that needs aggressive monitoring. In this session Dr. Jungquist will review the current literature that will lead to improved monitoring practices and empower nurses with skills to identify those at risk and match the appropriate monitoring strategy. Examples from current practices will be discussed as well a review of the underlying pathophysiology of respiratory depression and which electronic monitoring systems are appropriate for certain types of patients. Addressing the problem of alarm fatigue with setting appropriate alarm thresholds will also be discussed.

Category: Acute Pain

Patient Population: Adult

Level: Advanced Beginner

3D. A Better Approach to Pain: Interdisciplinary Pain Committees

Tahitia R. Timmons, MSN, RN-BC, OCN, VA-BC, Education Coordinator, Cancer Treatment Centers of America at Eastern Regional Medical Center, Philadelphia, PA; Jeffrey Sklar, DC, Director of Chiropractic Services, Cancer Treatment Centers of America at Eastern Regional Medical Center, Philadelphia, PA

The presenters will discuss the institution's journey of creating an interdisciplinary pain committee. The goals were to increase patient satisfaction, improve pain management and disseminate evidence-based pain education. The presenters will highlight how the committee was created and will discuss how the use of an interdisciplinary committee has increased staff satisfaction related to pain education and improved HCAHP pain scores.

Category: Misc.

Patient Population: All

Level: Advanced Beginner

3E./4E. Opioid Prescribing: Safe Practice, Changing Lives

Paul Arnstein, PhD, RN, FAAN, Director, MGH Cares about Pain Relief, Massachusetts General Hospital; Adjunct Associate Professor, Nurse Practitioner Program, MGH Institute for Health Professionals, Boston, MA; Barbara J. St. Marie, PhD, RN-BC, AGPCNP-BC, Associate Faculty, University of Iowa, Iowa City, IA

This session will provide information on the following:

- Assessing patients for treatment with ER/LA opioid analgesic therapy
- Initiating therapy, modifying dosing and discontinuing use of ER/LA opioid analgesics
- Managing therapy with ER/LA opioid analgesics
- Counseling patients and caregivers about safe use of ER/LA opioid analgesics
- General drug information for ER/LA opioid analgesics
- Specific drug information for ER/LA opioid analgesic products

Objectives for this session include:

- Describe appropriate patient assessment for treatment with ER/LA opioid analgesics.
- Evaluate the risks and potential benefits of ER/LA opioid analgesics.
- Summarize the key components of safe use of ER/LA opioid analgesics.
- Demonstrate accurate knowledge about how to initiate and manage therapy with ER/LA opioid analgesics, including appropriate monitoring for adverse effects and possible misuse.

Content for this session is provided by CO*RE. ASPMN® has not received funding from CO*RE to support this activity. The CO*RE EL/LA Opioid REMS initiative is supported by an independent educational grant from ER/LA Opioid Analgesics REMS Program Companies (RPC). Please see www.er-la-opioidREMS.com for

a listing of the member companies. This activity is intended to be fully compliant with the ER/LA Opioid Analgesic REMS education requirements issued by the FDA.

Category: *Persistent*

Patient Population: *All*

Level: *Proficient*

Session continues through 3:10 p.m.

2:10 p.m. – 3:10 p.m.

CONCURRENT SESSION 4

4A. Acute Pain Management in Patients with Substance Use Disorder

Kathleen Broglio, DNP, ANP-BC, ACHPN, Nurse Practitioner, Adult Palliative Care Services, Columbia University Medical Center, New York, NY; Maureen F. Cooney, DNP, FNP-BC, ACHPN, Nurse Practitioner, Pain Medicine, Westchester Medical Center, Valhalla, NY

The use of alcohol, prescription medicines and illicit substances is widespread in the United States. In 2013, 24.6 million Americans, 9.4% of the population, ages 12 or older, used an illicit drug in the previous month. Patients who are dependent on, under the influence of, or in withdrawal from illicit substances and medications used to treat opioid addiction, may require acute pain management secondary to trauma or surgery. The effects of these agents can impact patient outcomes and are a concern in the acute care setting. Nurses must possess skills to assess and manage pain in this challenging patient population.

Category: *Acute*

Patient Population: *All*

Level: *Advanced Beginner*

4B. APN-led Initiative Creates MVP (Multiple Visit Patient) Care Plans to Decrease Length of Stay

Pamela Bolyanatz, MS, APN, FNP-BC, RN-BC, Pain Management Advanced Practice Nurse, Northwestern Medicine Delnor Hospital, Geneva, IL; Mary Lyons, MSN, APRN, RN-BC, ONC, Inpatient Pain Management Advanced Practice Nurse, Northwestern Central DuPage Hospital, Winfield, IL

The presenters will demonstrate the use of the DMAIC methodology to implement an APN-led multi-hospital, multidisciplinary project to ensure patient access to the appropriate level of care through a coordinated care approach and creation of individualized care plans for patients with persistent pain or other related conditions/symptoms who have frequent emergency department visits and/or inpatient hospitalizations (MVPs). The presenters will discuss team development, creation of a project charter and share procedures and tools developed to ensure consistent implementation and successful patient outcomes. Case studies and lessons learned will be featured during this interactive presentation.

Category: *Acute*

Patient Population: *Adult*

Level: *Proficient*



The target audience for the 26th National Conference includes registered nurses and advanced practice nurses practicing in pain management, as well as nursing faculty and nursing students with an interest in pain management.

Courtesy of www.gotolouisville.com

4C. Influencing Health Policy with Pain Management Nursing Research

Ann M. Schreier, PhD, RN, Associate Professor, East Carolina University College of Nursing, Greenville, NC

It is a critical time in pain management health policy development. The presenter will describe how nurses can influence health policy through nursing research. One framework for evidence-informed health policy development will be discussed, and the role of pain management nurses as stakeholders will be addressed. The presenter and participants will discuss priorities for pain management nursing research.

Category: Legislative

Patient Population: All

Level: Competent

4D. Implementation of a Peer Support Group for Adolescents with Persistent Pain

Lucinda Brown, DNP, RN, CNS, Clinical Nurse Specialist, Dayton Children's Hospital, Dayton, OH

Multimodal pain management is an important part of a chronic pain plan. Peer support and use of complementary care is known to be very beneficial. A support group for adolescents with chronic pain is an effective way to provide both peer support and complementary care. The presenter will review the evidence behind the strategy, the steps to implement a group, the process of the group and the data from the participants' evaluations.

Category: Pediatric Pain

Patient Population: Pediatric

Level: Proficient

3E./4E. Opioid Prescribing: Safe Practice, Changing Lives

Paul Arnstein, PhD, RN, FAAN, Director, MGH Cares about Pain Relief, Massachusetts General Hospital; Adjunct Associate Professor, Nurse Practitioner Program, MGH Institute for Health Professionals, Boston, MA; Barbara J. St. Marie, PhD, RN-BC, AGPCNP-BC, Associate Faculty, University of Iowa, Iowa City, IA

This session will provide information on the following:

- Assessing patients for treatment with ER/LA opioid analgesic therapy
- Initiating therapy, modifying dosing and discontinuing use of ER/LA opioid analgesics
- Managing therapy with ER/LA opioid analgesics
- Counseling patients and caregivers about safe use of ER/LA opioid analgesics
- General drug information for ER/LA opioid analgesics
- Specific drug information for ER/LA opioid analgesic products

Objectives for this session include:

- Describe appropriate patient assessment for treatment with ER/LA opioid analgesics.
- Evaluate the risks and potential benefits of ER/LA opioid analgesics.
- Summarize the key components of safe use of ER/LA opioid analgesics.
- Demonstrate accurate knowledge about how to initiate and manage therapy with ER/LA opioid analgesics, including appropriate monitoring for adverse effects and possible misuse.

Content for this session is provided by CO*RE. ASPMN® has not received funding from CO*RE to support this activity. The CO*RE EL/LA Opioid REMS initiative is supported by an independent educational grant from ER/LA Opioid Analgesics REMS Program Companies (RPC). Please see www.er-la-opioidREMS.com for a listing of the member companies. This activity is intended to be fully compliant with the ER/LA Opioid Analgesic REMS education requirements issued by the FDA.

Category: Persistent

Patient Population: All

Level: Proficient

Continuation of 1:00 p.m. session

3:10 p.m. – 4:00 p.m.

BREAK IN THE EXHIBIT HALL

Silent Auction Items & Posters Available

4:00 p.m. – 5:00 p.m.

CONCURRENT SESSION 5

5A. Developing a Specialized Pain Rehabilitation Program Targeting Young Adults Who Have Failed to Successfully Launch

Connie Luedtke, MA, RN-BC, Nursing Supervisor, Mayo Clinic, Rochester, MN; Andrea Eickhoff, MS, RN, RN Case Manager, Mayo Clinic, Rochester, MN

Helicopter parents are a known phenomenon in today's society. Raising a child with chronic health problems makes it almost impossible for both parents and their young adult children to imagine the child becoming an independently functioning adult. Many health care providers are at a loss on how to manage this population: young adults with chronic pain, Postural Orthostatic Tachycardia Syndrome (POTS) or other persistent chronic symptoms. The presenters will provide an overview of a multidisciplinary program developed to target this young adult population and their parents, along with some lessons learned.

Category: Persistent Pain

Patient Population: Adult/Pediatrics

Level: Proficient

5B. APRN Super Team! Successful Implementation of a Shared Pain & Palliative Care Consult Service Led by APRNs

Christina Wiekamp, APRN, CNS, Pain Management Nurse, Fairview Ridges Hospital, Burnsville, MN; Amy Klopp, MS, APRN, CNS-BC, ACHPN, Clinical Nurse Specialist, Fairview Ridges Hospital, Burnsville, MN

There are numerous palliative care teams in the in-patient setting that are led by APRNs. They exemplify commitment to varied roles in direct consultation or in quality improvement and research. Fewer teams include both pain and palliative care consultation. After numerous in-patient pain consult services continued to be successful, an APRN-led team combined forces to provide pain and palliative care consultation to serve a small community. The question was asked: To what extent are pain specialists and palliative care specialists availing of each other's expertise?

Category: Misc.

Patient Population: All

Level: Competent

5C. Does a Pain & Comfort Menu Have the Power to Improve HCAHPS Pain Satisfaction Scores? Results from Two Urban Organizations

Carrie Brunson, MSN, APRN, ACNS-BC, Regional Pain Clinical Nurse Specialist, Banner Health Northern Colorado, Longmont, CO; Sheryl Klevin, BSN, MSNc, RN-BC, Pain Champion, University of Colorado Hospital, Westminster, CO; Heather Ihrig, RN, BSN, RN Senior Manager, Banner Health Northern Colorado, Longmont, CO

The presenters will describe how two urban hospitals implemented a pain and comfort menu and the resultant impact on patient satisfaction with pain-associated HCAHPS scores. The impetus for design and implementation of the pain and comfort menu were multifactorial and included the following: to provide patients, families and health care providers adjuvant strategies to pharmacologic interventions, to empower nursing staff with alternate strategies to promote comfort and relieve suffering and to provide a consistent education tool for communicating with adults about their pain while simultaneously reinforcing nursing interventions and patient perception of "staff doing all they could".

Category: Misc.

Patient Population: All

Level: Competent

5D. Creating Winning Posters

Patricia Bruckenthal, PhD, APRN-BC, ANP, FAAN, Chair and Associate Professor, Department of Graduate Studies in Advanced Practice Nursing, Interim Associate Dean for Nursing Research, Stony Brook School of Nursing, Stony Brook, NY

Professional and organizational meetings often put out a call for posters and are a great venue to disseminate your evidence-based practice and research projects. When designing a poster, you must be very selective about which information to include in order to get your message across. Posters need to be visually pleasing in order to attract an interested audience. This session will offer helpful hints to accomplish these goals. Several examples of “good” and “not so good” posters will be presented to illustrate attributes of winning posters.

Category: Misc.

Patient Population: All

Level: Proficient

5E. Evolution of a Cross-Continuum Pain Steering Committee: A Model of Interprofessional Shared Governance

Peggy S. Lutz, MSN, FNP-BC, RN-BC, Service Line Director, Pain Management, Ministry St. Joseph's Hospital, Marshfield, WI

Promoting ownership for pain management across the care continuum requires high-level clinician engagement and executive-level support. An interprofessional Pain Steering Committee was developed to provide oversight of a comprehensive pain initiative aimed at addressing gaps in pain management across the life span and focused on creating a holistic, person-centered model of care. The Pain Steering Committee supports standardization of evidence-based best practices, continually evaluating where it can achieve the largest impact with available resources.

Category: Misc.

Patient Population: All

Level: Expert

5:00 p.m. – 5:45 p.m.

COMMITTEE MEETINGS

6:00 p.m. – 6:45 p.m.

CHAPTER MEETINGS

8:00 p.m. – 11:00 p.m.

ASPMN® PARTY!

Join us as we celebrate this year's conference! A great opportunity to enjoy new and old friends made through your involvement with ASPMN® as well as by attending this year's conference. The evening will be filled with snacks, fun, dancing and socializing.

► SATURDAY, SEPTEMBER 10, 2016

7:30 a.m. – 8:30 a.m. **CONTINENTAL BREAKFAST**

8:30 a.m. – 9:30 a.m. **“And They’re Off!”: The Race for Regulatory Guidance to Nurses for Mitigating Prescription Medication Abuse & Diversion**

Cathy Carlson, PhD, APN, FNP-BC, Associate Professor, Northern Illinois University, DeKalb, IL; Aaron Gilson, MS, MSSW, PhD, Research Program Manager, Senior Scientist, University of Wisconsin Pain and Policy Studies Group, Madison, WI

Acknowledging the integral role of nurses in quality health care, the presenters will describe the extent that nursing regulatory authorities in each state are now communicating methods for their licensees to use to reduce the potential for medication abuse or diversion. The categories and frequencies of all available types of information will be reviewed, and available resources will be identified to help nurses take advantage of these resources. Quality indicators and metrics for benchmarking competencies to reduce harms also will be ascertained. Suggestions for outcomes assessment and additional regulatory efforts to parlay success will be announced.

9:40 a.m. – 10:40 a.m. **CONCURRENT SESSION 6**

6A/7A. It’s All about Safety When Delivering Pain Management: Current Tools, Techniques & Trends

Linda M. Vanni, MSN, RN-BC, ACNS-BC, NP, Nurse Practitioner, Pain Management, St. John Providence, Providence Hospital, Troy, MI

Beyond the use of a reliable and valid sedation scale, there are additional tools, techniques and trends to assist clinicians in delivering safe pain management. The presenter will explore tools such as state monitoring systems, methadone use verification, poly sedative alerts and practice guidelines for the emergency room. Anti-abuse preparations and quantity limitations on opioids are current techniques also being utilized. Use of EtCO₂ monitoring, smart PCA pumps and the program Sentri 7 will also be described. Lastly, trends such as opioid weaning protocols, communication with the patient’s primary pain provider and pharmacogenetic testing are the future of safe pain management.

Category: Misc.

Patient Population: All

Level: Competent

Session continues through 12:00 p.m. after a 20-minute break.

6B. Sustained Release Opioids or Continuous Infusions + PCA Is Safe in the Opioid-Naïve Post-Operative Patient

Jason Sawyer, RN-EC, MN, BC, Nurse Practitioner, Acute Pain Service, Sunnybrook Health Sciences Center, Toronto, Ontario, Canada

In this prospective observational study, 404 post-operative patients receiving oral sustained release opioids or intravenous continuous opioid infusions plus IV-opioid PCA were evaluated for the incidence of common or concerning opioid-related side effects. Respiratory depression, as defined by naloxone use, was the primary outcome. Three of 404 patients received naloxone, which is within the incidence rates from the published literature. In the described setting, patients can safely receive oral sustained release opioids or intravenous continuous opioid infusions plus IV-opioid PCA. Further research is warranted to establish if this approach provides benefit.

Category: Acute

Patient Population: Adult

Level: Competent

6C. Drug Diversion Prevention, Detection & Response Programs: Essential Knowledge for the Health Care Professional

John Burke, Commander, Warren County Ohio Drug Task Force, Ret., Cincinnati, OH; Kimberly New, Founder, Diversion Specialists, Knoxville, TN

Drug diversion by health care personnel occurs in facilities across the U.S. every day. Access to controlled substances represents an under-appreciated patient safety and quality of care risk. Participants will learn about the fundamental components of a diversion prevention, detection and response program, gain knowledge about how to conduct a diversion investigation from experts in the field, gain understanding of personal and professional implications in diversion cases, become familiar with how to interact with legal and regulatory authorities with a goal of mitigating damage and acquire knowledge from actual case studies. This session provides a unique opportunity to learn about drug diversion within health care facilities and become familiar with why a diversion prevention, detection and response program is essential for staff and patient safety.

Category: Misc.

Patient Population: All

Level: Competent

6D. Changing Practice from ‘Dosing to Numbers’ to Survey-Proof Range Orders

Chris Pasero, MS, RN-BC, FAAN, Pain Management Author, Educator, Clinical Consultant, Rio Rancho, NM; Ann Quinlan-Colwell, PhD, RNC, DAAPM, Pain Management Clinical Nurse Specialist, New Hanover Regional Medical Center, Wilmington, NC; Debra Drew, MS, ACNS-BC-Retired, RN-BC-Retired, AP-PMN, Clinical Nurse Specialist, Pain Management, University of Minnesota Medical Center, Ret., Minneapolis, MN; Kathleen Broglio, DNP, ANP-BC, ACHPN, Nurse Practitioner, Adult Palliative Care Services, Columbia University Medical Center, New York, NY

The presenters will provide an overview of ASPMN®’s newly published Dosing to Numbers position paper, including the background that led to the paper. Key recommendations will be highlighted, and safety issues will be identified. The presenters will discuss ways to implement a change from dosing to numbers to utilizing range orders that can withstand surveyor evaluation. Examples from hospitals that have successfully used range orders while successfully passing surveys will be presented.

Category: Misc.

Patient Population: All

Level: Proficient

10:40 a.m. – 11:00 a.m. **BREAK**

11:00 a.m. – 12:00 p.m. **CONCURRENT SESSION 7**

6A/7A. It’s All about Safety When Delivering Pain Management: Current Tools, Techniques & Trends

Linda M. Vanni, MSN, RN-BC, ACNS-BC, NP, Nurse Practitioner, Pain Management, St. John Providence, Providence Hospital, Troy, MI

Beyond the use of a reliable and valid sedation scale, there are additional tools, techniques and trends to assist clinicians in delivering safe pain management. The presenter will explore tools such as state monitoring systems, methadone use verification, poly sedative alerts and practice guidelines for the emergency room. Anti-abuse preparations and quantity limitations on opioids are current techniques also being utilized. Use of EtCO₂ monitoring, smart PCA pumps and the program Senti 7 will also be described. Lastly, trends such as opioid weaning protocols, communication with the patient’s primary pain provider and pharmacogenetic testing are the future of safe pain management.

Category: Misc.

Patient Population: All

Level: Competent

Continuation of 9:40 a.m. session

7B. Decision Support for the Advanced Practice Nurse

Barbara J. St. Marie, PhD, RN-BC, AGPCNP-BC, Associate Faculty, University of Iowa, Iowa City, IA

Results from a study of Advanced Practice Nurses in Pain Management who care for patients with coexisting substance use disorder and chronic pain, revealed a need for pain management information that is easily accessed to guide clinicians on managing pain in patients with high risk for substance use disorder. This foundational research identified a gap that exists in knowing how to support safe and effective pain treatment decisions while minimizing risk for prescription opioid misuse. We must re-envision how to help the clinician integrate large volumes of opioid and pain guidelines with knowledge from clinical experts to structure clinical domains during the limited time of an encounter with a patient with pain. We can package pain management information for increased accessibility at the point of care. The presenter will review the results of the study of APRNs, review the literature on what is currently being done to support evidence-based decisions in the clinical arena and describe methods used in an innovative study to develop a decision support tool.

Category: Misc.

Patient Population: All

Level: Expert

7C. Breast Cancer Survivors' Symptoms of Pain, Sleep Disturbance, Fatigue & Anxiety

Ann M. Schreier, PhD, RN, Associate Professor, East Carolina University College of Nursing, Greenville, NC

Breast Cancer Survivors (BCS) report that symptoms continue following completion of therapy and that this time period is critical for them to regain their health. The purpose of this study was to describe the symptom cluster of pain, sleep disturbance, fatigue and anxiety in a sample of 40 BCS in preparation for an intervention study. Women completed symptom questionnaires and wore activity/sleep trackers. There were statistically significant correlations between sleep disturbance, pain intensity, pain interference, anxiety and steps per day. Average pain interference and sleep disturbance were above the national norms. Symptom distress was greater for those less physically active.

Category: Cancer Pain

Patient Population: Adult

Level: Proficient

7D. A Multidisciplinary Multi-modal Approach to Managing Pain in Trauma Patients

Ann Quinlan-Colwell, PhD, RNC, DAAPM, Pain Management Clinical Nurse Specialist, New Hanover Regional Medical Center, Wilmington, NC

Trauma patients come to the medical center from various backgrounds with a wide variety of injuries ranging from falling on the stairs to losing limbs in shark attacks. A key group who participate in trauma rounds were dedicated to improving pain management among this diverse group of patients. The team consisted of the head of trauma surgery, trauma coordinator, mid-level trauma and orthopedic providers, pain management clinical nurse specialist, nurse managers and pharmacists as well as physical therapists, nurses, social workers and case managers. Together, the group developed, implemented and monitored a multi-modal approach to improving pain experienced by the patients who had experienced traumas.

Category: Acute Pain

Patient Population: All

Level: Proficient

12:00 p.m. – 1:30 p.m.

LUNCH ON YOUR OWN

1:30 p.m. – 2:00 p.m.

INCOMING PRESIDENTIAL ADDRESS

Melanie H. Simpson, PhD, RN-BC, OCN, CHPN, CPE, Pain Management Team Coordinator, University of Kansas Hospital, Kansas City, KS

2:00 p.m. – 3:00 p.m.

ChildKind International: Recognizing Organizations Committed to Reducing Children's Pain

Renee Manworren, PhD, PCNS-BC, RN-BC, FAAN, Director of Nursing Research and Professional Practice, Posy and Fred Love Chair in Nursing Research, Ann and Robert Lurie Children's Hospital of Chicago; Associate Professor of Pediatrics, Northwestern University, Feinberg School of Medicine, Chicago, IL; Neil Shechter, MD, FAAP, President and Chief Executive Officer, ChildKind International; Senior Associate in Pain Medicine, Boston Children's Hospital; Director, Chronic Pain Program, Harvard Medical School, Boston, MA

ChildKind is a global initiative aimed at reducing pain and unnecessary suffering in children by offering a special designation to facilities that have demonstrated an institutional commitment to pain relief and by providing the technical support to achieve that goal. Principles of ChildKind Organizations and the need for this international recognition will be presented. Methods of creating a culture sensitive to pain and examples of successful initiatives will be discussed.

3:00 p.m. – 3:15 p.m.

BREAK

3:15 p.m. – 4:15 p.m.

The Use of Opioids for Chronic Non-Cancer Pain While Preventing Abuse & Diversion

June Oliver, MSN, APN/CNS, CCNS, Clinical Nurse Specialist, Pain Service, Swedish Covenant Hospital, Chicago, IL; Cathy Carlson PhD, APN, FNP-BC, Associate Professor, Northern Illinois University, DeKalb, IL; Susan Hagan ARNP-C, RN-BC, Coordinator, Pain Programs, James A. Haley Veterans' Hospital, Tampa, FL; Pamela Bolyanatz MS, APN, FNP-BC, RN-BC, Pain Management Nurse Practitioner, Cadence Health—Delnor Hospital, Geneva, IL

ASPMN® recently published an advocacy statement regarding the use of opioids for chronic pain while preventing abuse and diversion. The presenters will review the published support for the advocacy statement and review problems associated with the use of opioids in treating chronic non-cancer pain and its impact on society. A literature review examining the legitimate use of opioids for chronic non-cancer pain will be discussed. The recommendations of the ASPMN® advocacy statement will be further explored. Finally, the recommendations will be compared to the CDC Opioid Prescribing Guidelines.

4:15 p.m. – 4:30 p.m.

CLOSING REMARKS

Melanie H. Simpson, PhD, RN-BC, OCN, CHPN, CPE, Pain Management Team Coordinator, University of Kansas Hospital, Kansas City, KS



ADDITIONAL CE OPPORTUNITY! INTERACTIVE PROFESSOR™ PROGRAM

Again this year, attendees will have an opportunity to attend the Interactive Professor™ program for an additional 0.5 CE.

This CE-accredited Interactive Professor™ program features pre-recorded experts in pain management, projected on a high-resolution display, discussing best practices for assessing and managing patients with severe persistent pain using intrathecally delivered medications. Each 30-minute, case-based session covers the latest clinical practice guidelines on intrathecal drug therapy, comparative safety data for FDA-approved intrathecal analgesics and practical recommendations on performing therapeutic trials, monitoring patients after a pump has been implanted and managing treatment-emergent adverse events.

Courtesy of www.gotolouisville.com

HOTEL INFORMATION

Louisville Marriott Downtown
280 W. Jefferson St.
Louisville, KY 40202
800-533-0127

- **Click here** to reserve your room online.
- For additional reservation help, please call: **800-533-0127**.
- **Rate:** \$169; rate includes guestroom wireless Internet
- **Reservation Deadline:** August 12, 2016

The Louisville Marriott Downtown is the only 4 Diamond AAA convention hotel in downtown Louisville. This convenient location in the heart of the city is nearby many of Louisville's main attractions, including the Muhammad Ali Center, Louisville Slugger Museum and Churchill Downs, while within walking distance of the 4th Street Live Entertainment District.

This beautiful Louisville downtown hotel is equipped with luxurious amenities and renovated guest rooms that will truly make you feel like royalty. The friendly staff greets you with a speedy check-in,

while you're free to admire our grand lobby staircase and check out the full-service business center, indoor pool and whirlpool and state-of-the-art health club. As you walk into your renovated guest room, take notice of the beautiful views of the Ohio River Valley and city sights and sink into your luxury bedding.

Hotel description from the Louisville Marriott Downtown website.

Transportation Information

To access the Louisville Marriott Downtown from the airport, we suggest the following methods of transportation to and from the hotel.

TAXI: estimated \$16 one-way

BUS SERVICE: \$2.50 one-way

Parking Information

VALET PARKING: \$32 daily

OFF-SITE PARKING: \$5 hourly, \$27 daily

Giving Back to the Community

Each year ASPMN®, with the help of the local chapter, chooses a charity to support in the host city. This year's charity is The Healing Place.



THE HEALING PLACE

Where hope is found

The Healing Place truly is "where hope is found." It offers assistance to those struggling with addiction, looking to get help for a loved one or searching for a recovery model.

The program is unlike any other in the country. Because it's based on a social model—one that's about empowerment rather than entitlement—it is more than five times more effective than the national average at keeping people clean and sober. Best of all, it's open to everyone, and it is maintained with a far lower cost than most other facilities.

For more information on the organization or to donate online, visit <http://www.thehealingplace.org>. A list of needed supplies will be provided on the ASPMN® website.



Courtesy of www.gotolouisville.com

ASPMN® National Office, P.O. Box 15473, Lenexa, KS 66285-5473 or Fax to 913-222-8606 • Register Online: www.aspmn.org

*Final registration deadline is Aug. 12. If you are registering after Aug. 12,
please bring your completed paperwork and payment with you to the conference.*

► **STEP ONE: Registration Information**

First Name	M.I.	Last Name (no credentials will appear on your name badge)	
Name as you wish it to appear on your name badge, if different from your first name listed above			
Employer			
☐ Home ☐ Work			
Preferred Address – please indicate home or work			
City	State	Zip	Country
Daytime Telephone Number		Email Address	
☐ Please exclude my information from any mail list sales.			

SPECIAL NEEDS

☐ I will need assistance: _____

I have the following dietary requirements: ☐ Gluten-Free ☐ Diabetic ☐ Kosher ☐ Vegetarian ☐ Vegan

☐ Other (describe allergies here): _____

EMERGENCY CONTACT INFORMATION

Name
Relationship
Phone Number

☐ This is my first time attending an ASPMN® National Conference.

☐ I am a new member of ASPMN® (joining after September 2015).

► **STEP TWO: Workshops/Registration**

A. ASPMN® PRE-CONFERENCE WORKSHOPS

	Members	Non-Members
Full-Day Workshops		
Workshop 1: ASPMN® Pain Management Certification Preparation Course™	☐ \$250	☐ \$300
Workshop 2: Advanced Pharmacology	☐ \$250	☐ \$300
Half-Day Workshops		
Workshop 3: Enriching APP Practice (full-day)	☐ \$250	☐ \$300
Morning or Afternoon Workshop 3 Sessions Only		
☐ AM Sessions ☐ PM Sessions	☐ \$145	☐ \$175
Subtotal A: _____		

B. FULL-MEETING REGISTRATION

	Early-Bird Registration: Postmarked or Faxed by July 8	July 9 – August 12	After August 12 On-Site
ASPMN® Member	☐ \$450	☐ \$500	☐ \$550
Non-Member	☐ \$550	☐ \$600	☐ \$650
Student ASPMN® Member	☐ \$260	☐ \$260	☐ \$275
Student Non-Member	☐ \$295	☐ \$295	☐ \$310
Subtotal B: _____			

C. SINGLE-DAY REGISTRATION

☐ ASPMN® Member	\$250/day
Please indicate which day you will attend.	
☐ Thursday ☐ Friday ☐ Saturday	
☐ Non-Member	\$300/day
Please indicate which day you will attend.	
☐ Thursday ☐ Friday ☐ Saturday	
☐ Student ASPMN® Member	\$100/day
Please indicate which day you will attend.	
☐ Thursday ☐ Friday ☐ Saturday	
☐ Student Non-Member	\$150/day
Please indicate which day you will attend.	
☐ Thursday ☐ Friday ☐ Saturday	
Subtotal C: _____	

D. SPOUSE OR GUEST REGISTRATION

- ☐ Spouse or Guest(s) \$130 each
(This fee only includes Thursday evening reception and the ASPMN® Party – breakfasts and lunches are NOT included.)

_____ Number of Guests x \$130 = _____

Name(s) _____

Subtotal D: _____

E. MEMBERSHIP FEES

Current Members:

Save Time – Renew your membership for 2017 today! If you are a current ASPMN® member, your membership will expire on Dec. 31, 2016, but you can take the opportunity to renew for the next cycle at this time.

- ☐ Active – \$125
☐ International (U.S. Funds) – \$135
☐ Student – \$40
☐ Associate – \$80
☐ Retired – \$62.50

New Members:

Join ASPMN® at this time and take advantage of member conference registration rates. Your membership will take effect on Nov. 1, 2016 and will not expire until Dec. 31, 2017!

- ☐ Active – \$125
☐ International (U.S. Funds) – \$135
☐ Student – \$40
☐ Associate – \$80

Subtotal E: _____

F. RSVP! You MUST RSVP in order to gain entry to these events.

- ☐ Thursday, Sept. 8 – Breakfast
☐ Thursday, Sept. 8 – Lunch
☐ Thursday, Sept. 8 – Reception
☐ Friday, Sept. 9 – Breakfast
☐ Friday, Sept. 9 – Awards Lunch
☐ Friday, Sept. 9 – ASPMN® Party
☐ Saturday, Sept. 10 – Breakfast

IMPORTANT!

Please indicate which Concurrent Sessions you are interested in attending. Please check one session letter for each column.

ASPMN® Concurrent Sessions

# 1	#2	#3	#4	#5	#6	#7
☐ A	☐ A	☐ A	☐ A	☐ A	☐ A	☐ A
☐ B	☐ B	☐ B	☐ B	☐ B	☐ B	☐ B
☐ C	☐ C	☐ C	☐ C	☐ C	☐ C	☐ C
☐ D	☐ D	☐ D	☐ D	☐ D	☐ D	☐ D
☐ E	☐ E	☐ E	☐ E	☐ E		

Cancellations & Transfers

Cancellations and transfers must be requested in writing and postmarked or faxed by **Aug. 12, 2016**. Refunds will be issued following the conference. A \$50 administrative fee will be assessed. If you transfer your registration to another person, please include a completed registration form for that person with your written request. Requests for cancellation postmarked, emailed or faxed after **Aug. 12, 2016** are not refundable.

Late Registration

If you register after Aug. 12, please bring your registration form and payment with you to the conference as it will NOT be processed at the ASPMN® Executive Office after that date.

- ☐ I DO NOT consent to allow any photos taken of me during the meeting to be published on ASPMN® social media sites, ASPMN®'s website or in publications to promote ASPMN® and the National Conference.

► STEP THREE: Fees/Payment

- A. Pre-Conference Workshops \$ _____
B. Full Meeting Registration \$ _____
C. Single-Day Registration \$ _____
D. Spouse or Guest Registration \$ _____
E. Membership \$ _____

Total Enclosed \$ _____

All fees must be paid in U.S. dollars, with checks drawn in U.S. funds on U.S. banks.

- ☐ Check (Made payable to: ASPMN®) Tax ID 58-1905277
☐ AMERICAN EXPRESS ☐ DISCOVER
☐ MASTERCARD ☐ VISA

Card Number _____

Expiration Date _____

Cardholder Name _____

Cardholder Signature _____

Please return this form and TOTAL AMOUNT DUE to:

Register Online at:
www.aspmn.org

By Mail:
ASPMN® National Office
P.O. Box 15473
Lenexa, KS 66285-5473

By Overnight Courier ONLY:
ASPMN® National Office
18000 W. 105th St.
Olathe, KS 66061

By Fax (with credit card info):
913-222-8606

Contact the ASPMN® National Office for further information: 888-342-7766