Experience emergency nursing education with your colleagues from across Canada from dynamic and engaging speakers during our two and half days of learning, networking and playing in one of Canada’s most beautiful cities.

- APRIL 20 to APRIL 22, 2018

- DELTA GRAND OKANAGAN RESORT
  KELOWNA, BC

NATIONAL EMERGENCY NURSES ASSOCIATION
Greetings, Emergency Nurses

Welcome to NENA 2018 National Conference. The NENA 2018 National Conference Committee invites you to attend the annual conference, scheduled for April 20 – 22, 2018 in the beautiful location Kelowna, British Columbia.
Our venue is the Delta Grand Okanagan Resort, located on the shores of Okanagan Lake, in the heart of wine country.
We have put together a fabulous program, including morning yoga and/or walk/run, presentations covering a wide variety of topics – clinical, education, leadership, innovation, motivation and research – covering the age span from birth to senior. We also offer a choice of 3 pre-conference education sessions, scheduled for Thursday, April 19 – The ABCD’s of Emergency Wound Care, EPICC Trauma and Pediatric Simulations.
Kelowna General Hospital invites you to tour their Emergency Department and meet some local Emergency Department staff. There are 2 opportunities available, as described in the brochure. And, of course, we have time to party – join us for the Friday evening Social at the Laurel Packing House, located just across the street from the hotel for an evening of fun.
NENA Business is also part of our annual conference – all members are encouraged to attend the Annual Meeting of the Members, scheduled for Friday evening. This is your opportunity to meet Board members, provide input to the direction of NENA and propose resolutions and by-law amendments. Election of new Directors to the Board will be announced at the AGM. Please join us – I guarantee a weekend of information and fun.

Thank you,

Sherry Uribe, MBA, BSc, RN, ENC(C)
NENA 2018 Conference Chair

Committee Members
Janet Calnan
Darlene Campana
Sheila Early
Cassi Gray
Debra Pitts
Sherry Stackhouse

Honorable mention to Sharron Lyons for support and guidance
### Pediatric SIM & Skills Day - Not just little adults

This exciting day featuring high fidelity SIM will leave you feeling prepared to care for any pediatric patient presenting in your ED. Our topics will include: Pediatric sepsis, respiratory management, slings and things, pain management strategies, pediatric SIM sessions (2), neonatal red flags, burn care, how to get a urine sample without a urine bag! We will review equipment such as infant warmers, push & pull warmed fluids for resuscitation and much more! It will be hands on, interactive with a group of peds experts available to answer all your peds questions.

**Presenters:**
- **Jackie Allen**: BC Children’s Hospital Emergency SIMS Educator
- **Sarah Hyatt**: SMH Peds ER CNE, PALS Educator
- **Cristina Follador**: CNS BC Children’s Hospital, Langara & ENPC Educator
- **Julie Bomba**: SMH Peds ER PCC, ENPC Educator

**Date/Time:**  
April 19, 2018  
0800 – 1600

**Location:** Clinical Academic Campus- Pritchard Simulation Center, Kelowna General Hospital

**Cost:** $100.00  
Registration fee does not include lunch.

Limited seating - register early!

### The ABCDs of Emergency Wound Care

The doctor’s order reads “polysporin dressing” but is that best practice? This workshop will enhance both knowledge and skill related to the emergency care of acute wounds. You will learn:

- Normal wound healing
- Mechanism of Injury, Assessment, Documentation Tips, Red Flags
- Best Practices for acute wound care at triage, cleansing, irrigation, pain management, debridement
- Wound care closure options overview, controversy around wound care packing, blister management, bite injuries
- Case studies of best practice dressing options for a selection of acute wounds and cautions around harmful practices
- Use of best practice wound care products including dressing options

**Carole Rush, RN, M.Ed., CEN, ENC(C), FAEN**

**Date/Time:**  
April 19, 2018  
0800 – 1600

**Location:** Delta Grand Okanagan Resort – Cassiar/Cascade Rooms

**Cost:** $100.00  
Registration fee does not include lunch.

### EPICC Trauma

This course focuses on the Emergency Department trauma care of the adult patient and teaches a standardized approach to the trauma patient with a variety of presentations. It not only focuses on the resuscitation of the patient but goes further into ongoing care and identifying gaps in care common to this population. In addition to this one day workshop, there are 4-8 hours of pre-course on-line work involved. Topics covered include:

- Communication, Teamwork and Resource Management
- Airway, Ventilation, Oxygenation Skills
- Vascular Access
- Infection Control
- Mechanism of injury
- Trauma Resuscitation
- Shock
- Systems Trauma
- Pain Management
- Trauma in specialty populations

Current EPICC-Foundations certification required as a pre-requisite. For more information on the topics covered, and to register visit [epicclearning.ca](http://epicclearning.ca)

**Date/Time:**  
April 19, 2018  
0800 – 1600

**Location:** Clinical Academic Campus- Pritchard Simulation Center, Kelowna General Hospital

**Cost:** $250.00  
REGISTER AT [epicclearning.ca](http://epicclearning.ca)

Limited seating – register early!
### CONFERENCE PROGRAM
**FRIDAY APRIL 20, 2018**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Details</th>
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</table>
| 0630-0715 | YOGA/RUN – it’s your choice! | - Start the day with an easy paced guided 5km run along the waterfront.  
- Wake up and do some downward doggin’ lead by practitioners from the Ekahi Yoga Center. |
<p>| 0700-1600 | REGISTRATION          |                                                                         |
| 0745-0810 | OPENING CEREMONIES    |                                                                         |
| 0815 -08:55 | PLENARY               | <strong>How the Canadian Nurses Association supports Emergency Nurses</strong>        |
|         |                       | CNA works with over 139,000 registered nurses and nurse practitioners across Canada to bring essential and meaningful change to health care and nursing in the country. In this session, CNA will tell the story of how CNA, together with its members and specialty associations, has championed patient safety and quality care, primary health care, the nursing role in medical assistance in dying, and the need for evidence-based solutions to address the growing opioid crisis — to name just a few areas. |
|         |                       | <strong>CNA President Barbara Shellian RN, BN, MN</strong>                           |
| 09:00-09:40 | PLENARY               | <strong>Cognitive Bias - does it affect your nursing care?</strong>                  |
|         |                       | How do your preconceived ideas affect your interactions with your patients? Come and find out! |
|         |                       | <strong>Monique McLaughlin NP(F) MN &amp; Landon James RN BScN MA CEN PCP</strong>       |
| 0945-10:20 | PLENARY               | <strong>Concussion: the most complex problem of the most complex organ.</strong>     |
|         |                       | Utilizing the Top 5 recommendations from the 2016 Berlin Concussion in Sport Group, and after reviewing predictors for delayed concussion recovery, current ED discharge instructions for concussion patients will be reviewed, followed by recommendations to improve and update your current discharge instructions |
|         |                       | <strong>Dr. Dave Rhine MD, FRCPC</strong>                                          |
| 1020-1045 | NUTRITION BREAK       |                                                                         |</p>
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<th>1045-1130</th>
<th>CONCURRENT 1</th>
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<tr>
<td>A) RSI vs DSI, where are we now? (Clinical/Education)</td>
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RSI is a mainstay for the management of critically ill ED patients but comes with limitations within the realm of pre-oxygenation in the pre-intubation period. DSI provides a unique approach to effectively pre-oxygenating the agitated & non-compliant ED patient in a safe & efficient manner. As this knowledge finds its way into everyday practice, prepare for a shift in how we approach complex ED patients requiring intubation. Join us as we unpack the key components of this newly emerging knowledge & practice!

Ellison Chung BSN & Lauren Sinnott RN

B) Intentional vs Unintentional Injuries How Do You Tell the Difference in the ED. (Forensic Health/Education)

Emergency Nursing is fast paced, stressful and requires a skill set like no other area of nursing. Knowing what may be an intentional injury versus an unintentional one can be crucial in the assessment and treatment the ED nurse provides. This session will cover findings across the lifespan.

Sheila Early RN BScN

C) Endovascular Therapy for Stroke and the Role of the ED nurse (Clinical)

Treatment for acute ischemic stroke focuses on improving perfusion to the affected area of the brain by restoring blood flow though thrombolytic therapy and mechanical thrombectomy of a large vessel occlusion. The potential to save brain tissue is highly time dependent necessitating a coordinated response with an extremely well designed process. Prompt recognition, diagnosis and treatment are imperative and nurses in the emergency department play a vital role in developing and implementing clear protocols as a key to success.

Melanie Penn RN BScN, RN, CNN(c), ANVP

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<tr>
<th>1130-1230</th>
<th>LUNCH</th>
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<td>1230-1330</td>
<td>PLENARY</td>
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ED ECMO

Out-of-hospital cardiac arrest (OHCA) is common, affecting 134 per 100 000 citizens annually. Extracorporeal cardiopulmonary resuscitation (ECPR), providing emergent mechanical circulatory support, may be a means to improve the likelihood of survival among those with refractory OHCA. Carefully planned development of ECPR programs, at experienced ECMO centres within high performing emergency medical systems, may be reasonable as part of systematic efforts to determine ECPR effectiveness and globally improve care for OHCA. Further, the ECPR systems of care may result in increased opportunities for organ donation. The regional ECPR program in Vancouver, created by
St. Paul’s hospital and BCEHS, will be used as a case study for this presentation.

Dr. Brian Grunau MD MHSc

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<th>Time</th>
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<tr>
<td><strong>1340-1430</strong></td>
<td><strong>CONCURRENT 2</strong></td>
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<tr>
<td>A)</td>
<td><strong>What Happens when the Abuse Stops?</strong> (Forensics/Health)</td>
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Intimate Partner Violence is a difficult patient care situation the ED nurse faces on a regular basis. The vast majority of IPV patients are female. Often, the question ED nurses ask is “why doesn’t she just leave him?” This session will explore what does happen when the abuse does stop and how the ED nurse can assist in the future health care of this patient population.

**Sheila Early RN BScN**

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<th>Time</th>
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<tr>
<td><strong>1430-15:00</strong></td>
<td><strong>NUTRITION BREAK</strong></td>
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<tr>
<td><strong>15:00-15:40</strong></td>
<td><strong>CONCURRENT 3</strong></td>
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<tr>
<td>A)</td>
<td><strong>Nurses getting involved to help patients catch their breath.</strong> (Clinical)</td>
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How do you improve the flow of patient care? You ask those who are on the department 24/7 – patients, families and frontline staff. Together, they provide a distinct but comprehensive view of patient care from beginning to end. In this session, you will learn...
about a quality improvement initiative led by frontline staff and a family advisor, with the goal of providing better care for asthmatic patients in a pediatric Emergency Department. Here’s how two staff nurses got involved

Sze Ting Chan RN BSc MSc(A) & Kelley Dionne RN BSc MSc(A)

B) Rural Simulation (Education)

Emergency nurses working in rural sites often do not have as much exposure to regular critical events like their urban colleagues. However, they are expected to perform at a similar level of expertise when these high acuity events occur. Simulation has consistently been shown to be one of the most effective teaching strategies to maintain competency with these critical cases. In-situ simulation is done in the actual sites not in a mock sim lab. This talk will discuss both the benefits and challenges of rural in-situ simulation, however will promote the value of starting up such programs to support the rural sites with ongoing interdisciplinary education for emergency department staff.

Jaime Gallaher RN BSN MSN

C) Fall From Standing is a Trauma - Collaborating With EMS On a Patient Outcome Report to Improve Field Trauma Triage (Research)

In this session we will discuss the results of a 2015 guideline change to the EMS Field trauma triage guidelines in the greater Toronto area. Come and learn the feedback and analysis of this quality improvement project.

Sharon Ramagnano RN BScN(E) ENC(C) MSN MHA

D) Kelowna General Hospital - Emergency Tour #2 (max 20 people)

Kelowna General Hospital is a tertiary referral centre and teaching hospital affiliated with the University of British Columbia. Be part of the tour and view the Emergency Department and the Centennial Tower that were built in 2012 and let us show you the latest in design, functionality and leading-edge technology in emergency services.

15:50-17:00 PLENARY

What every ED Nurse needs to know about Alcohol and Drugs

This session will update the ED nurse on how alcohol and drugs including GHB (the date rape drug), hallucinogenic (XTC), dissociative anaesthetics (Ketamine) and the NPS drugs (New Psycho Active Substances) are used in DFSA. It will also include what signs and symptoms to look for in the patient to help prove that these drugs were used. Content will also include the latest information on the abuse of “Designer Opioids”

Wayne Jeffrey B.Sc ;( Pharm). M.Sc (Pharm Chem)

17:15-18:30 NENA AGM
<table>
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<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>19:30-2300</td>
<td>Social at Laurel Packing House</td>
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<tr>
<td>0630-0715</td>
<td>YOGA/RUN</td>
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<td>- Start the day with an easy paced guided 5km run along the waterfront.</td>
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<td>- Wake up and do some downward doggin’ lead by practitioners from the Ekahi Yoga Center.</td>
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<tr>
<td>0700-0800</td>
<td>REGISTRATION</td>
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<td>0800-0900</td>
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<td><strong>What made that Injury, Bruise, FLT (funny looking thing)?? (Forensics/Health)</strong></td>
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<td>Emergency Nurses see injuries that range from minor to severe trauma/fatal injuries. The importance of understanding mechanism of injury and the resulting forensic/legal aspects become increasingly important for the ED nurse. The ED nurse’s ability to recognize patterns of injury and/or patterned injuries assist in the assessment, evaluation and treatment and documentation process for the forensic patient populations of the ED.</td>
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<td><strong>Sheila Early RN BScN</strong></td>
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<tr>
<td>0910-0955</td>
<td>CONCURRENT 4</td>
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<td></td>
<td><strong>A) Don’t call that code yet: ED ECMO (Clinical)</strong></td>
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<td>Extracorporeal membrane oxygenation (ECMO) is a potentially life therapy when ACLS and traditional resuscitation measures have failed. Allan and Rob will review how ECMO works, its role in urban and rural EDs, and explore how it could be implemented in your facility.</td>
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<td><strong>Allan Lai BSN RN ENC(C) &amp; Rob Paquin BSN RN MHPE(c)</strong></td>
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<td><strong>B) Towards Culturally Safe Care of LGBTQ2S+ Clients (Education/Clinical)</strong></td>
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<td>As the gatekeepers to acute care, how do we as emergency department nurses ensure the safety of LGBTQ2S+ clients? “Towards Culturally Safe Nursing Care of LGBTQ2S+ Clients in the Emergency Department” seeks to explore the history of this unique population within Canada; provide a safe space in which to deconstruct participant’s beliefs; examine existing and evolving vocabulary used in describing the community; acknowledge persistent barriers and resulting health disparities experienced by community members; and provide practical suggestions for working with this distinct population in the emergency department.</td>
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<td><strong>Kristin McLaughlin RN BScN (Hons) MPH</strong></td>
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C) From the line to the lab – the impact of collection practice on patient outcomes. (Education)

This presentation reviews the current (2016, 2017) Nursing and Lab standards for blood collection (including new guidance on PIV collections), reviews the rationale and recommendations for essential elements of practice to ensure accurate test results, including techniques to avoid hemolysis, importance of correct Order of Draw, proper tube filling and handling, and guidance on collecting from IVs and CVADs including blood culture collection. Given that up to 85% of all patient therapies are based on Lab results, it is vital that nurses who collect blood are following best practice to avoid errors and ensure optimal patient outcomes.

Susan Csatari RN

0955-1025  NUTRITION BREAK

1025-1110  CONCURRENT 5

A) Neo-Nerds present: Surviving the Unexpected Iddy-Biddy Delivery in your ED. (Clinical)

ER nurses are the most unflappable of all nurses- that is until there is an expected imminent delivery in their ED! This presentation will give you a logical, common sense approach to looking after mom & Baby- & maybe even enjoying the experience.

Denise Devison RN & Caroline McGarry RN

B) Potassium Pointers (Clinical)

Electrolyte imbalances are seen in both ill and injured patients presenting for emergent and urgent care. This presentation will focus on hyperkalemia with current information related to key signs and symptoms, ECG findings and patient management with details on the nursing administration and rationale for the appropriate medications. Case studies and active discussion from the presenter’s practice frame the presentation.

Carole Rush RN MEd CEN ENC(C) FAEN

C) Medical Assistance in Dying (Education)

The Canadian Nurses Association led the development of the *National Nursing Framework on Medical Assistance in Dying in Canada*, which aims to raise awareness with nurses and nurse practitioners (NPs) of recent changes in the law regarding medical assistance in dying (MAID). The framework supports nurses and NPs in their practice as they work with persons considering and receiving MAID. The framework also addresses the needs of families and health-care teams and guides nurses and NPs on ethical issues that may arise. Join this session to learn more about the framework, understand nursing’s ethical values and responsibilities around MAID and review specific pathways for nurses and NPs involved in MAID, especially how the new legislation affects nursing practice.

Barb Shellian RN BN MN
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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenters</th>
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<tr>
<td>1120-1200</td>
<td><strong>CONCURRENT 6</strong></td>
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<tr>
<td>A)</td>
<td>How do you <strong>RATE</strong> during a disaster: Rapid Assessment Triage for Emergency Department and Urgent Care Centers. (Research/Clinical)</td>
<td>Cathy Dobson RN MN &amp; Theresa Pasquotti RN BN ENC(C)</td>
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<td>This presentation will introduce nurses to a new tool developed for hospital triage nurses to use during an event such as a MCI (Mass Casualty Incident) or patient volume exceeds the triage nurses’ ability to maintain usual triage processes. We will discuss the principles of the RATE tool and hopefully have an interactive demonstration on how to use the algorithm for both adult and pediatric patients, as well as those patients presenting during an MCI (trauma) or as a regular patient needing ED/UCC intervention/treatment (stroke). We will include some of the research that is in progress with regards to the inter-rater reliability testing.</td>
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<td>B)</td>
<td>“But I Have Motion Sickness”. Things to Consider When Tasked to be a Medical Escort. (Clinical)</td>
<td>Colleen Brayman RN BScN ENC(C)</td>
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<td>When an ill or injured patient requires ground transfer to a higher level of care, staff are often tasked to be the medical escort for that patient. They may do so willingly or not so willingly, but may not fully understand, or realize the inherent patient and personal safety risks. This presentation will use open ended questions and case examples to help clinicians explore and realize the questions they should ask, equipment and materials they should bring, and the safety aspects to consider in an ambulance in order to be as prepared as possible for “murphy’s law” when completing a ground transfer.</td>
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<td>C)</td>
<td>Pediatric Trauma: Little patients...big challenges. (Clinical/Education)</td>
<td>Cristina Follador RN</td>
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<td>Why is trauma so prevalent in Peds? What makes children more vulnerable? Peds trauma assessment. Death in the ED. Taking care of yourself and each other after a Peds trauma/death. The session will end with a scenario for group participation.</td>
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<td>1200-1300</td>
<td><strong>LUNCH</strong></td>
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<td>1300-1400</td>
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<td><strong>Nursing for the fun of it- Heaven knows it’s not for the money.</strong></td>
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<td>As a nurse, Jeff Solheim has had an incredible career. He has worked as a staff nurse, flight nurse, nursing director, nurse administrator, trauma coordinator, surveyor, cruise ship nurse and consultant. He has also provided nursing care in some of the most remote areas of the world. In this session, Jeff will take participants on a pictorial journey through his career, revealing lessons he has learned in the varied experiences that nursing has provided him.</td>
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<td><strong>Jeff Solheim MSN RN CEN TCRN CFRN FAEN FAAN</strong></td>
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<td>1410-1510</td>
<td><strong>CONCURRENT 7</strong></td>
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<td>A)</td>
<td><strong>Pediatric Respiratory Red flags. Recognizing subtle signs of decompensation.</strong> (Clinical/Education)</td>
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<td>This session will review the signs and symptoms of respiratory differences in pediatric patients and tips to recognize when they are starting to crash. Common pediatric respiratory illnesses and the latest evidence will be discussed with hands on practice available.</td>
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<td><strong>Julie Bomba RN BSN</strong></td>
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<td>B)</td>
<td><strong>Mental Health in the ED: Assessments, Best care practice.</strong> (Clinical)</td>
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<td>In this presentation we will be reviewing Emergency mental health including pediatric emergency mental health care. We will go over the Mental Health Act, and Emergency Mental Health assessments for both adults and pediatrics. Additionally, for pediatric patients we will include a new screening tool that is being rolled out called IHEARTSMAP.</td>
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<td><strong>Kelsey Lundsburg RPN &amp; Pamela Devick RPN RSW</strong></td>
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<td>C)</td>
<td><strong>Codes: The importance of communication and SIM Practice.</strong> (Clinical)</td>
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<td>Practice and feedback is how we improve – don’t be intimidated by SIM.</td>
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<td><strong>Sarah Hyatt RN BScN</strong></td>
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<td>15:10-1540</td>
<td><strong>NUTRITION BREAK</strong></td>
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<td>1540-1700</td>
<td><strong>PLENARY</strong></td>
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<td><strong>Criminal Law, the Court, and the Emergency Nurse: What Do I Need to Know?</strong></td>
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<td>I got served with a subpoena to attend court as a witness. What do I do? What do I need to know? Am I an expert witness? What happens in a courtroom? Is it safe for me to testify in court?</td>
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<td>What are the laws regarding consent and sexual assault? What is the role of Crown Counsel? These and other criminal law questions will be addressed by a senior trial prosecutor in this Plenary Session.</td>
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<td><strong>Winston L. Sayson Q.C.</strong></td>
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<tr>
<td>0800-0900</td>
<td>PLENARY</td>
<td><strong>Triage Challenges: Case Studies in Nurse Initiated Triage Protocols; Nurse/Physician Collaboration</strong>&lt;br&gt;Do you order investigations at triage? Is there any evidence or science behind what to order for a particular patient? This interactive session provides an opportunity to explore what we can do for our patients that are waiting!&lt;br&gt;&lt;br&gt;Sherry Stackhouse RN BSN &amp; Dr. Grant Innes MD</td>
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<tr>
<td>0910-1010</td>
<td>PLENARY</td>
<td><strong>Moving Patients in a State of Emergency, Images from the BC Wildfires</strong>&lt;br&gt;This past summer was particularly hot and dry for many areas of Canada leading to perfect wildfire conditions. BC experienced the worst wildfire season in its history first hand and over the course of several days closed 19 Interior Health sites/facilities, evacuated 880 patients/clients, and displaced over 700 staff members. This was all done with very little advanced warning and required the collaboration of hundreds of staff members, partners and several health authorities. Many learnings and insights on how to account for, and move, all facility and community patients and clients, both during the evacuation and during the re-entry occurred and these will be shared during this presentation.&lt;br&gt;&lt;br&gt;Colleen Brayman RN BScN ENC(C)&amp; Brent Hobbs RN BSN CNCC(c)</td>
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<td>1010-1050</td>
<td>NUTRITION BREAK</td>
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<tr>
<td>1050-1150</td>
<td>PLENARY</td>
<td><strong>Best Job Ever: 35 years of Saturday nights.</strong>&lt;br&gt;A collection of emergency stories that will have you laughing and crying and remembering why we do the job we do&lt;br&gt;&lt;br&gt;Dr. Bruce Campana MD</td>
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<td>1150-1215</td>
<td>CLOSING CEREMONIES</td>
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**WE RESERVE THE RIGHT TO MAKE SUBSTITUTIONS FOR ANY SPEAKER OR TOPIC**
SPEAKERS:

Julie Bomba

Julie graduated with her BSN in 1999 from the former University College of the Cariboo (now TRU). She has worked in Emergency pediatrics and the community for 18 years. She spent a year working at Starship Children’s Hospital ER in Auckland, New Zealand. She currently works at Surrey Memorial Pediatric Emergency Department and Maple Ridge Pediatric Observation Unit. She has been an instructor with the Emergency Nursing Pediatric Course (ENPC) and Advanced Care Paramedics for the past 3 years. Julie worked as the SMH Peds ER CNE part-time while completing her BCIT Peds ER Specialty Nursing Certificate. She is currently a PCC in the Peds ER at Surrey Memorial Hospital.

Elaine Borg

Elaine Borg, B.N.Sc., R.N., LL.B., is Legal Counsel with the Canadian Nurses Protective Society. She received her undergraduate degree in nursing from Queens University at Kingston, Ontario. She worked in the infant neurosurgery unit at The Hospital for Sick Children in Toronto prior to focusing on her main interest, obstetrics, which she practiced at Mount Sinai Hospital, Toronto and The Ottawa Civic Hospital. Her interest in ethical decision-making led to a position on a hospital clinical ethics committee, and from there, to a career in law after graduating from University of Ottawa law school. Elaine is a member of the College of Nurses of Ontario, the Registered Nurses Association of Ontario, and the Law Society of Upper Canada. She was on the working group that drafted the National Disclosure Guidelines published by the Canadian Patient Safety Institute. She was on the Advisory Council for Queen’s University’s Masters in Healthcare Quality.

Colleen Brayman

An RN for 32 years including Neonates, Antenatal/Post-Partum Unit, Pediatric Intensive Care Unit, Pediatric Critical Care Transport, Cardiac Catheterization Lab, Pediatric Emergency and Adult Emergency - so basically I have nursed from the womb to the tomb. I am currently the High Acuity Response Team Program Leader for Interior Health. This is a critical care, interfacility RN/RT transport team, of which I lead the regional oversight. I also love teaching ENPC, ACLS, PALS and CTAS throughout BC. My true loves, though, are my husband, my 5 children and my 6 grandchildren.

Bruce Campana MD

Dr Bruce Campana has been practicing emergency medicine for 30 years, and in that time he’s accumulated a few stories. Having done med school at McGill, he then interned at St. Paul’s Hospital in Vancouver, followed by a year of locums in BC. This scared the crap out of him, (and BC), so he did a residency in Denver, and returned to BC where he has worked as an emergency physician since. Mostly. Ok, the odd stint (not stent) in California, then a few years in Saudi Arabia where he took care the king, who is now dead, which is a coincidence. He now practices in Victoria, loves Vancouver Island, and is luckier than he deserves. He is happily married to Darlene, and they have twin 15 year old boys who wonder why he never amounted to anything.

Sze Ting Chan

Sze earned her Bachelor of Science degree and her Master of Science Applied degree in nursing from McGill University. She has 8 years of nursing experience in Pediatrics. For the past year, she is involved in quality improvement projects of the emergency department at the Montreal Children’s Hospital.
Susan Csatari

A Registered Nurse with over thirty years of experience, Susan’s background is in Med/Surg ICU, Neurosurgical ICU, and Endoscopy procedure nursing. In her role as National Clinical Practice Consultant, Vascular Access Blood Collection for BD-Canada, she presents evidence-based best practice information to national and provincial Nursing associations, including Vascular Access, Critical Care, Paediatric, Emergency and Oncology organizations. Susan also leads and facilitates Clinical partnership projects, bringing Labs and Nursing together to resolve issues with specimen quality, and to foster understanding between both groups of the other’s practice requirements and challenges.

Pamela Devick

I have a degree in Social Work and am a Registered Psychiatric Nurse. I have worked at Hillside Tertiary Psychiatric Center, 1 South, Community Mental Health, and also Mental Health Emergency. Working in Community Mental Health is with clients with serious and persistent mental illness in providing services that assist clients in staying well in community and needing less hospitalizations. Working in Mental Health Emergency is working with client’s who are experiencing acute mental health issues and assisting them through the process from either discharge to admission to hospital. Throughout my experiences working in the different areas I have a passion for supporting client’s in accessing the most affective care as well as navigating through this. When I am not working I love to hike and enjoy a good book.

Denise Devison & Caroline McGarry

Caroline & Denise are two seasoned flight nurses who have been RN’s for over thirty years (eek!) working critical care, emergency and flight nursing. They have done various presentations at the provincial, national and international level. This will be their third appearance at the NENA conference & they are thrilled to be in beautiful Kelowna!

Kelley Anne Dionne

Kelley earned her Bachelor of Science degree and her Master of Science Applied degree in nursing from McGill University. She has 8 years of nursing experience in Pediatrics and has been working for the last 4 years at the Montreal Children’s Emergency Department. She has a particular interest in patient flow and family centered care.

Cathy Dobson

Cathy is currently the Clinical Nurse Educator (CNE) in the Urgent Care Department (UCC) in Cochrane, Alberta. Her past experience of 25 years in Alberta Health Services includes; Manager of UCC, CNE in a large Urban Emergency Department in Calgary, and Pediatric Trauma Coordinator at the Alberta Children’s Hospital in Calgary. She completed her Master of Nursing Degree with specialization in Disaster Planning and Response for Emergency Departments and Rural Health Centers, and she currently also work as a Legal Nurse Consultant for Emergency/Urgent Care related nursing cases.

Sheila Early

Sheila has four decades of experience in health care graduating from the University of Saskatchewan School of Nursing. She is faculty at BCIT Forensic Science and Technology Program as Coordinator/Instructor in Forensic Health Sciences (FHS) Option having developed the first Canadian classroom curriculum in 2005. She is also a legal nurse consultant and educator. She developed the first sexual assault nurse examiner program in British Columbia starting the process in 1992-3 and performed the first medical forensic examination by a B.C. nurse examiner in February, 1994. Sheila has provided the initial education for sexual assault nurse examiners in many Canadian sites and Forensic Nursing continuing education both nationally and internationally.
Sheila has been the grateful recipient of several awards, most recently (2017) the first Visionary Award from the Canadian Forensic Nurses Association.

Her 2016 publications include the Forensic Nursing Chapter in “The Lawyer’s Guide to Forensic Sciences” and Forensic Nursing article in Journal of Legal Nurse Consulting (USA). She also co-authored the Forensic Evidence Chapter in “Sexual Victimization across the Lifespan”.

Cristina Follador

Cristina received her BSN 2000 (from Langara/UVIC) and MSN 2014 (UBC - advanced nursing practice). She began her career at BC Children’s Hospital on an inpatient renal and metabolic ward. She moved to the Emergency Department almost 12 years ago and has never looked back. She has been teaching Undergrad Pediatrics in the classroom at Langara since 2004. She has been an ENPC Instructor for 5 years. In recent years she has been teaching clinical for BCIT in Pediatric Emergency Specialty course. She plans to return to school and get a NP.

Jaime Gallagher

Jaime loves mainly in-situ simulation for the 3 main benefits of discussing; latent safety threats within people’s home sites, CRM principle’s with the actual health care team and Interprofessional education – learning together from each other!

She is an emergency nurse by training. She taught the BCIT emergency nursing specialty course from 2010-2012, then worked at UBC and Langara as a nursing instructor in the undergrad program. She was one of the emergency nursing clinical educators at Vancouver General Hospital from 2016-2017 before moving to beautiful Powell River with her partner Phil where she was then exposed to the pros and cons of rural nursing. She participated on 3 international nursing missions to Nigeria, Haiti and India where she was involved with education and resuscitation protocols. She has taught many emergency nursing courses such as ACLS, TNCC, EPICC, CTAS and BLS around the province. Jaime was first exposed to quality in-situ simulation in early 2016 and went on to complete her ‘Masters of Nursing Education’ from UBC in April 2017 with a final paper on “the nurse’s role in the planning and evaluation of large interdisciplinary in-situ simulations”. She continues to do regular rural simulation within Vancouver Coastal Health and is working with the rural sites on developing sustainable simulation facilitators to provide quality simulation across the coast. In her down time she can be found in a horizontal position in the corner of her couch, wrapped in a blanket with the fireplace on watching the bachelor (maybe with a glass of wine depending on the time of day).

Brian Grunau

Dr. Grunau is a Clinical Assistant Professor in the University of British Columbia (UBC) Department of Emergency Medicine, a Scientist at the Centre for Health Evaluation and Outcome Sciences (CHEOS) within the Providence Healthcare Research Institute, and is the Director of the St. Paul’s Hospital (SPH) ECPR program for out-of-hospital cardiac arrest (OHCA). Since completing a Doctor of Medicine from the University of Manitoba, and residency training at UBC, he has worked as a staff Emergency Physician at SPH since 2011. He completed a clinical research fellowship and a Masters of Health Sciences (MHSc) at the UBC School of Population and Public Health (2014 – 2016). Dr. Grunau’s primary research interest is the management of OHCA in refractory arrest, and has published over 40 peer-reviewed articles. He is an investigator and member of the Publications Committee within the Canadian Resuscitation Outcomes Consortium, and is the chair of the Resuscitation Science Committee of the BC site. He has twice been awarded the American Heart Association (AHA) Young Investigator Award. He has developed protocols for cardiac arrest for the Providence Health Care (PHC) and Vancouver Coastal Health emergency departments. He sits on the PHC Cardiac Arrest Committee and the Canadian Association of Emergency Physicians Critical Care Committee. Dr. Grunau has contributed to the Heart and Stroke Foundation / AHA Heartsaver and ACLS Experienced Provider courses. Extracorporeal CPR (ECPR) is a research interest of Dr. Grunau, and he played the lead role in the development of the ED-based SPH OHCA ECPR Program, and in the expansion of this service to a regional program in partnership with BC Emergency Health Services. He is specifically interested in how the integration of ECPR into the management of OHCA’s may improve the overall survival of eligible patients.
within a regional emergency medical system. He has spoken to multiple audiences on the topic of ECPR program development, and is the co-chair of the Canadian ECPR Research Network.

**Brent Hobbs**

An RN for 26 years including Emergency and Adult Intensive Care. I am currently the Network Director for Patient Transportation Services for Interior Health in southern interior of BC. I am responsible for coordinating the access/flow and transportation of patients between Interior Health hospitals and I am the administrative lead of the High Acuity Response Teams. When not working, I am coaching youth endurance sports (cross country skiing, marathon swimming and triathlon).

**Sarah Hyatt**

CNE Pediatric ED at SMH  
PALS instructor  
Have worked all of my 15 years in either Pediatrics or NICU  
Partner with Simulation coordinator to establish SIM program in Peds ED at SMH  
Pediatric Simulations at Struc Trauma course.

**Grant Innes MD**

Grant Innes has practiced emergency medicine (EM) for 35 years. He has served as Head of EM at St. Paul’s Hospital, Regional Head of EM for the city of Calgary, and Editor-in-chief of the Canadian Journal of Emergency Medicine. He currently works as an emergency physician and researcher Calgary.

**Wayne Jeffery**

Wayne has a B.Sc. in Pharmacy and M.Sc. in Pharmaceutical Chemistry. He worked for the RCMP for 35 years directly in the Toxicology Section of The RCMP Forensic Laboratory in Edmonton and Vancouver and spent the last 27 years as Chief Toxicologist running the West Coast RCMP Forensic Toxicology Lab in Vancouver. During his Career in the RCMP he has assisted Police Drug Section across Canada providing Drug/Alcohol Expert testimony. Since retiring in 2003, he has built a worldwide business as a Forensic Alcohol, Toxicology and Drug Consultant servicing clients such as the RCMP, the organization of American States (OAS) and other police and government agencies. He is an expert in Cannabis and most other Narcotics. He is a member of 7 Professional Organizations including the Alberta Pharmaceutical Association and International Association of Forensic Toxicology. He has published over 30 accredited papers on Drugs and Alcohol. Mr. Jeffery is very active in training businesses in how to detect drug impairment through physical signs and symptoms.

**Allan Lai**

Allan completed his nursing degree at Thompson Rivers University and his Emergency Nursing Specialty at the British Columbia Institute of Technology. He is an emergency nurse at Vancouver General Hospital and a clinical instructor for the BCIT Emergency Nursing Specialty program.

**Kelsey Landsburg**

Kelsey a Registered Psychiatric Nurse. I have worked in all aspects of mental health including Acute, Tertiary, community crisis response and Emergency department. Most of my experience as an RPN is in Kamloops Emergency department and have had the opportunity to be a part of its development into a Psychiatric Emergency. I am exceptionally passionate about Mental health and am excited to be included in its continuing development and recognition.
**Kirstin McLaughlin**

Kirstin McLaughlin is a lecturer within the School of Nursing at Thompson Rivers University with a background in emergency, intensive care, and mental health/substance use nursing. Kirstin is the administrator of Canada’s first Take Home Naloxone program run out of an emergency department, and her research and scholarship interests focus on the intersections between social policy, health equity, and the care of underserved populations; as well as culturally safe nursing care of LGBTQ2S+ populations. Kirstin lives in Kamloops, B.C. where she is the Kamloops Pride President and Chair of the City of Kamloops Diversity Advisory Committee.

**Rob Paquin**

Rob is a faculty member of the BCIT Emergency Nursing Specialty program, an emergency nurse at the Royal Columbian Hospital in New Westminster, BC, a paramedic for the BC Emergency Health Services and a paramedic educator and clinician.

**Theresa Pasquotti**

Graduated 30 years ago from Foothills School of Nursing, Calgary, AB. I worked various positions initially including med-surg and ICU. I have been in the ED in Lethbridge, AB for 25 + years as staff nurse, ED Manager, and now Staff nurse and Trauma Coordinator for the past 9 years. And I still love nursing. I have been a CNA certified Emergency Nurse for 15 years and have been teaching TNCC for 20+ years! YIKES—how did I get that old!

**Melanie Penn**

Melanie Penn is a Registered Nurse and Advanced Neurovascular Practitioner and has dedicated the past 16 years solely to the management of stroke including policy development at a provincial and national level. She began her career on the neurology ward at the Victoria General Hospital and then spent several years as an acute stroke research coordinator. In 2004 she became the lead nurse of the Secondary Stroke Prevention Clinic and spent many years assessing mild stroke and TIA patients as well as participating in statistical analysis and data quality. In 2012 she completed the Advanced Practice Nursing Fellowship program from Alabama University and won an award for Clinical Excellence. She is currently working as a Stroke Nurse Clinician assisting with program development of the Victoria General Hospital Stroke Program.

**Sharon Ramagnano**

Sharon has worked as an RN since 1993 where she began her career at North York General Hospital in Toronto working in Acute Medicine/Surgery and transitioned quickly into the Emergency Department where she worked for 5 years. She moved to Sunnybrook Health Sciences Centre Emergency/Trauma in 1997 where over the years she worked as a staff nurse, charge nurse, clinical care leader, emergency medicine research coordinator, clinical educator and advanced practice nurse for just over 16 years. During this time Sharon also was a clinical course director at York University for 3rd and 4th year nursing students as well as the lead program instructor at centennial college in the emergency nursing certificate program. In 2012 Sharon left the hospital setting to work with the Ministry of Health at Trillium Gift of Life as the Director for Policy, Education and Professional Practice in Transplant for the Province of Ontario. After 3 years she received an opportunity to return to Sunnybrook as the Manager for Trauma services to help lead a new strategic plan for trauma at Sunnybrook. Sharon oversees all of trauma program initiatives including trauma quality improvement, trauma registry, performance, program planning and development, P.A.R.T.Y. Program, Office for Injury Prevention, Regional trauma program development, and new initiatives such as Stop the Bleed. Sharon completed a double master’s program and is currently pursuing Executive Leadership Program courses.
David Rhine MD

Reform and Criminal Justice Policy. In 2015, the International Association of Forensic Nurses presented Winston with the Vision Award in recognition of his leadership in teaching, supporting, and promoting the practice of FRCPC Emergency Medicine with 36 years of active practice

- LifeMark, Kelowna – from September 2013 to present
  - Physician consultant to the HIATS/Kelowna program
- Medical Advisor, WorkSafe BC, Kelowna office, from September 2014
- Emergency Physician, Active staff, KGH, Department of Emergency Medicine August 200 to present
- Owner/operator Sports Concussion Management, a Kelowna based concussion management group, 2009 to present
- Co-owner/operator of PACE Concussion, an iOS app for concussion recognitions and management, currently available on iTunes and being translated to French, Android and desktop versions

- My role as a Physician in disability management (e.g. return to work, insurance based setting).
  - HIATS Medical Consultant
  - MARP assessments for LifeMark
  - ICBC ITA assessments out of the Kelowna LifeMark office
  - Independent medical exams, specifically wrt TBI cases
  - Owner/Operator of Sports Concussion Management since 2009 (baseline testing of over 8000 athletes, management of over 600 sports-related concussion during the same time period)
  - Co-owner/operator of PACE Concussion, an iOS app for concussion recognitions and management
  - Medical Advisor for WorkSafe BC, since September 2014

Carole Rush

Carole graduated from the University of Ottawa with a B.Sc.N in 1984, and from the University of Calgary with a Masters in Adult Education in 1993. Her experience includes positions as an Emergency and Urgent Care staff nurse, clinical educator, Trauma Coordinator, Injury Prevention Specialist and Flight nurse. She is currently the Clinical Nurse Educator for the Okotoks Urgent Care, which is located 45 km south of Calgary, Alberta. She enjoys delving into emergency clinical topics and looking at the evidence to determine “should we still be doing things the way we always have been doing” and often those questions come from her clinical patient care. She has a particular interest in emergency wound care for the past 15 years.

Barbara Shellian

Barb Shellian, CNA President, is a visionary nurse leader whose contributions to the advancement of nursing in the public interest span an extensive professional career. From 1995 to 1997, as president of the College and Association of Registered Nurses of Alberta, she served on numerous committees at the vanguard of policy changes to improve nursing. She has also been active at CNA for many years, both in committee work and on the board of directors.

Sherry Stackhouse

Sherry Stackhouse has been nursing for 34 years, with a focus on emergency nursing since 1995. She teaches CTAS, ACLS, EPICC & is passionate about quality improvement in the ED.

Winston Sayson, Q.C.

Winston Sayson, Q.C. – Winston is a senior trial Crown Counsel with the B.C. Prosecution Service of the Ministry of Attorney General. For the past 29 years, he has prosecuted criminal cases in the Provincial and Supreme Courts of
British Columbia. He specializes in the prosecution of cases involving children and vulnerable victims and witnesses. He provides training to Forensic Nurse Examiners, Victim Services Workers, Police, Social Workers, and Crown Counsel on all aspects of the investigation and prosecution of cases involving vulnerable witnesses.

Winston was appointed Queen’s Counsel by the Attorney General of B.C. in 2011. In 2010, he was awarded the Criminal Justice System Leadership Award by Police Victim Services of B.C. to recognize his compassionate work with victims of crimes and their families. In 2014, Winston was presented with the Recognizing Excellence Award from the Criminal Justice Branch of the Ministry. He is an ambassador for the CJB, having represented the Ministry on the Canada-China Procuratorate Reform Cooperation Project with the International Centre for Criminal Law Reform and Criminal Justice Policy. In 2015, the International Association of Forensic Nurses presented Winston with the Vision Award in recognition of his leadership in teaching, supporting, and promoting the practice of Forensic Nursing in the context of sexual assault investigations and prosecutions.

**Jeff Solheim**

Jeff, who currently calls his own Portland Oregon, is the President of the Emergency Nurses Association. He has been a Registered Nurse since 1990 working as a staff nurse, charge nurse, manager, director, educator, trauma coordinator, flight nurse, cruise ship nurse and state surveyor in critical care and the emergency department. Jeff is also the Emeritus Executive Director and Founder of Project Helping Hands, a not-for-profit humanitarian medical organization that deploys medical teams to developing nations with the purpose of creating sustainable health care programs in communities that lack access to health care.
Online:  https://ers.snapuptickets.com/UHN/NENA2018
Register online with your payment by VISA or MasterCard. All transactions will be processed in Canadian dollars.
To ensure course materials are ready for you at the conference your registration and payment must be received by April 15, 2018.

REGISTRATION FEES

Registration fee includes conference registration for April 20-22, nutrition breaks, lunches and social on Friday, April 20, 2018.
Extra tickets for the social can be purchased for $50.00.
Study Credits: Nursing CME credits are 15 hours

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** Students are to submit their student ID/enrollment letter with registration form**

We must receive written notification of your cancellation. A $50.00 processing fee will be deducted from the registration refund.
No refund will be issued after April 15, 2018.
Substitutes accepted.

PRE – CONFERENCE REGISTRATION FEES

Pediatric SIM and Skills Day - $100.00 LIMITED SEATING – REGISTER EARLY
The ABCD’S of Emergency Wound Care – $100.00 LIMITED SEATING – REGISTER EARLY
EPICC Trauma - $250.00 LIMITED SEATING – REGISTER EARLY
COME AND BE SOCIAL AT THE LAUREL PACKING HOUSE!

We’re Emergency Nurses and we love to dance, socialize and have a good time! Join us Friday night for some mingling, wine sampling and dancing to the awesome sounds of “Easy Fix” – you don’t want to get a DVT after that long flight!

We will be serving appies, but no dinner – and there is a cash bar. Admission cost is included in your registration fee – additional tickets can be purchased for $50.
TRANSPORTATION

Kelowna International Airport (YLW) is located in the heart of the Central Okanagan - just 15 km from Kelowna's city Centre.

For ease, convenience and door-to-door service, use alternative transportation to the airport, such as YLW's licensed shuttle services, taxis, limousines or rental cars.

**Shuttle services**
Licensed Airport Shuttle Bus Services are located outside the south terminal building entrance near pre-board screening. Just follow the signs.
For schedules, bookings and group rates, contact the shuttle companies directly.

**Let's Go Transportation Airport Shuttle**
Licensed to pick up and drop off throughout Kelowna, Vernon & South Okanagan
778-821-0101 or 1-844-877-0101
Delta Grand Okanagan Resort
1310 Water Street
Kelowna, BC V1Y 9P3
250-763-4500

NENA Conference Rates:
Single/Double: $169
Triple: $194
Quad: $219
Additional Person: $25.00
Conference rates honored 3 days pre and post with availability

Upgrades Available:
Guestroom Lakeview - +$25
Deluxe Room King - +$25
Club Room King - +$60
One Bedroom Suite - +$100
Two Bedroom Condo - starting from +$130
One Bedroom Villa - starting from +$60
Two Bedroom Villa - starting from +$170

Above are subject to tax as well - PST 8%, GST 5%, Destination Marketing Fee 3%

To book a room go to: Book your group rate for National Emergency Nurses Association Annual General Meeting

http://www.marriott.com/meeting-event-hotels/group-corporate-travel/groupCorp.mi?resLinkData=National%20Emergency%20Nurses%20Association%20Annual%20General%20Meeting%5EYLWOK%60NENNENA%7CNENNENB%60169.00%60CAD%60false%604%604/19/18%604/22/18%603/23/18&app=resvlink&stop_mobi=yes
KELOWNA GENERAL HOSPITAL TOURS

Join us for a tour of the Emergency Department in the modern Centennial Tower at Kelowna General Hospital!

On Friday April 20th, Interior Health is hosting tours of the Emergency Department at Kelowna General Hospital. This facility is located centrally within the city and is only steps from the beach along beautiful Okanagan Lake.

Kelowna General Hospital is a tertiary referral centre and teaching hospital affiliated with the University of British Columbia. Be part of the tour and view the Emergency Department and the Centennial Tower that were built in 2012.

The emergency department has approximately 82,000 visits a year, houses 3 state-of-the-art trauma rooms with a hybrid trauma room featuring diagnostic imaging tools such as ultrasound and video equipment for intubation. The department features 15 acute beds; an 8 bed clinical decision unit, a minor treatment area, 3 isolation rooms, 3 bariatric rooms, 2 seclusion rooms, a heli-pad and is designed with patient streaming in mind.

· KGH Emergency nursing is part of the world-class healthcare services found in the southern interior
of British Columbia. Have a look at this video of incredible teams working together to save a life!

Marissa's Story // FAST Trauma Suite at KGH

Join us at Kelowna General Hospital for a brief overview and let us show you the latest in design, functionality and leading-edge technology in emergency services.

Tour spaces and bus seats are limited so don’t wait, sign up now! We look forward to seeing you!

Tours are offered on Friday, April 20th from 13:40 - 14:30 and again from 15:00 - 15:40hrs