Program

Target Audience
The target audience for the 30th 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.

Conference Goals
- 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 persistent pain conditions.
- Network with nurses and other health care professionals who focus on pain management in their practice.

Program Objectives
Learning objectives for each session will be posted on the ASPMN® Conference webpage at a later date.

ASPMN® Conference Planning Committee
Program Chair
Laurie Holmes, RN-BC, BSN

Committee Members
Kathy Baule, DNP, RN, APN-ACNS-BC, CCRN, CNRN, RNFA, Co-Chair
Sandra Davis, RN-BC
Brandi O’Brien, RN-BC, CPNP-AC, AGPCNP
Cindy Garlesky, MSN, ARNP, CEN, RN-BC
Tamara Wilkins, DNP, APN, FNP-BC
Danielle Dunwoody, PhD
Pamela Bolyanatz, RN, MSN, FNP, APRN-BC
Michelle Lavelle-Henry, APRN
Megan Filoramo, RN, MSN, APN-C

Jenine Graham, MSN, AGNP, BC
Debra Bruene, RN, MA
Michelle Czarnecki, MSN, RN-BC, CPNP
Madalyn Pelky, MSN, RN-BC, CPNP-AC
Jennifer Creekmur, BSN, RN
Sharon Wrona, DNP, PNP, PMHS, AP-PMN, FAAN
Marsha Stanton, PhD, RN
Cassie Snyder, MS, RN-BC

Accreditation
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 contact hours applicable for RN, LPN, LMHT relicensure and pharmacology hours for APN relicensure. Kansas State Board of Nursing provider number LT0279-0412.
### Wednesday, October 21, 2020

*All education content will be recorded. You may watch the sessions on-demand if you are unable to participate in the live sessions.*

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<tr>
<td>3:30 p.m. – 4:00 p.m.</td>
<td>New Member Orientation (invitation only)</td>
<td>Ann Quinlan-Colwell, PhD, RN-BC, DAAPM, ASPMN President; Laurie Holmes, RN-BC, BSN, Conference Program Chair</td>
</tr>
<tr>
<td>4:30 p.m. – 5:00 p.m.</td>
<td>Welcome &amp; Opening Remarks</td>
<td>ASPMN® Past Presidents</td>
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<tr>
<td>5:00 p.m. – 9:30 p.m.</td>
<td>Poster Viewing/Committee Sign-ups/Exhibit Hall Open</td>
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<tr>
<td>5:00 p.m. – 5:20 p.m.</td>
<td>ASPMN® 30-Year Celebration Kick-Off</td>
<td>ASPMN® Past Presidents</td>
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<tr>
<td>5:20 p.m. – 6:20 p.m.</td>
<td>Opening Keynote Address</td>
<td>April Hazard Vallerand, PhD, RN, FAAN, Director, PhD Program Distinguished Professor, Wayne State University College of Nursing, Detroit, MI</td>
</tr>
<tr>
<td>5:20 p.m. – 6:20 p.m.</td>
<td>Initiatives for Preventing Opioid Misuse &amp; Abuse from Starting in the Post-Operative Setting</td>
<td>Sharon Wrona, DNP, RN-BC, PNP, PMHS, AP-PMN, FAAN, Director, Comprehensive Pain and Palliative Care Services, Nationwide Children’s Hospital, Columbus, OH; Jan Odom-Forren, PhD, RN, CPAN, FASPAN, FAAN, Associate Professor, University of Kentucky, College of Nursing, Lexington, KY; Joni Brady, DNP, RN-BC, CAPA, Chair, Board of Directors, International Collaboration of PeriAnesthesia Nurses, Inc., Alexandria, VA</td>
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<tr>
<td>6:30 p.m. – 7:20 p.m.</td>
<td>1.0 Contact Hour</td>
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<tr>
<td>7:30 p.m. – 8:20 p.m.</td>
<td>1.0 Contact Hour</td>
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<tr>
<td>7:30 p.m. – 8:20 p.m.</td>
<td>POWER SESSION</td>
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<tr>
<td>7:30 p.m. – 8:20 p.m.</td>
<td>1. How to &quot;MOOve&quot; Forward with Assessing the COWS Before and After Buprenorphine Induction</td>
<td>1. Christina Wiekamp, RN-BC, APRN, CNS, CNP, ACHPN, Pain Specialist, M Health Fairview, Maplewood, MN</td>
</tr>
<tr>
<td>7:30 p.m. – 8:20 p.m.</td>
<td>2. Pain Interference Influences Hyperbaric Oxygen Treatment Response during Opioid Dose Tapering</td>
<td>2. Marian Wilson, MPH, PhD, RN-BC, Associate Professor, Washington State University, Spokane, WA</td>
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<tr>
<td>8:30 p.m. – 9:30 p.m.</td>
<td>Virtual Meet-ups; Visit the Exhibit Hall; Review Posters</td>
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### Thursday, October 22, 2020

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<tr>
<td>All Day</td>
<td><strong>Exhibit Hall Open/Poster Viewing/Committee Sign-ups</strong></td>
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<tr>
<td>9:30 a.m. – 10:00 a.m.</td>
<td><strong>Start Your Day with a Little Exercise!</strong></td>
<td>You are encouraged to post photos of your run/walk/view from your favorite route to the conference platform.</td>
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| 10:10 a.m. – 11:00 a.m. | **American Anxieties: A Safe-Space Discussion of Pain, Drug Abuse, and Health Care Policy** | **1.0 Contact Hour**  
Michael Barnes, JD, Managing Partner, DCBA Law & Policy, Washington, D.C.; Marsha Stanton, PhD, RN, ASPMN Past President, Los Alamitos, CA; Wade Delk, Director of Governmental Affairs, ASPMN, McLean, VA |
| 11:00 a.m. – 11:30 a.m. | **Coffee Break on Whova – Meet up with old friends and make new ones!**             |                                                                              |
| 11:30 a.m. – 12:20 p.m. | **Pain Management Then and Now**                                                   | Miles Belgrade, MD, Neurologist, Comprehensive Pain Center, Minneapolis VA Medical Center; Associate Professor, Department of Rehabilitation Medicine, University of Minnesota, Minneapolis, MN |
| 12:20 p.m. – 1:00 p.m. | **Lunch Break – View Posters, Visit Exhibitors, Check Out the Silent Auction**     |                                                                              |
| 1:00 p.m. – 1:30 p.m. | **ASPMN® Awards Presentations**                                                    |                                                                              |
1:30 p.m. – 2:20 p.m.
1.0 Contact Hour

**Impact of Nurses in Local and National Efforts to Minimize the Opioid Crisis**
This presentation describes how nurses working in clinical practice, academics and research can powerfully influence the interplay between practice and policy to deliver effective pain management while minimizing the risk of substance abuse disorder. Pain management nurses have unique insights to and appreciation for the complex interplay between pain management, pain medication use, and substance use disorder in the people they serve. As the most trusted professionals, nurses are in the best position to influence public perception and responsible usage of medication, as well as public policy on pain management and pain medication use and abuse. The discussion describes the many ways that pain management nurses can be important players in creating large (and small) victories over the various aspects of the opioid crisis, nationally and locally. The increased scrutiny of controlled substance prescriptions, quantities, and usage, shows nurses occupy an even greater degree of importance. Pain management nurses are instrumental in ensuring that patients utilize medications responsibly, and that they secure excess quantities within their homes to prevent use or abuse by others. The presentation will emphasize new and novel methods of securing and tracking the destruction of any excess pain medicine inventories, either through take back or other programs and processes, to reduce subsequent pain management misuse, abuse and diversion. The discussion also includes the importance of creating systems and scenarios that minimize the risk of medication diversion by healthcare personnel.

Marla Weston, Transformative Executive Leader, Nursing, Health, Leadership, and Growth, former CEO, American Nurses Association, Washington, DC; Jeffrey Wahl, Jeffrey R. Wahl Co., L.P.A., Cleveland, OH

2:30 p.m. – 3:20 p.m.
1.0 Contact Hour

**Diversity of Evidence Translated into Practice: Non-Pharmacologic Pain Planning (NPPP) in Primary Care**
Where do we go from here considering everything that has happen with opioids? This session reviews a nurse-driven quality improvement project to develop and implement a non-pharmacologic pain plan (NPPP) protocol in primary care. The majority of pain is management in primary care. Most primary care settings are not equipped to introduce non-pharmacologic options as first line pain interventions or how to support people to make evidence-based choices. This session will present the three components of the protocol and supporting tools.

Tara Nichols, DNP, APRN, RN-BC, CCNS, ACNS-BC, AGCNS-BC, Program Director, RN-BSN Programs, Waldorf University, Forest City, IA

3:30 p.m. – 4:30 p.m.
1.0 Contact Hours*

**Discussion Sessions**
Topics may include alternative/integrative care; chronic pain; persistent pain; palliative care; health disparity; oncology; geriatrics; pediatrics; advanced practice; interventional; telehealth; opioid misuse; mental health/psychology; ambulatory

7:30 p.m. – 8:30 p.m.
**Virtual Dance Party**
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<td>8:00 a.m. – 9:00 a.m.</td>
<td>Poster Viewing</td>
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<tr>
<td>9:00 a.m. – 10:00 a.m.</td>
<td>Symposium</td>
<td>Carla Jungquist, PhD, ANP-BC, FAAN, Associate Professor, University at Buffalo, Buffalo, NY</td>
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<tr>
<td>10:00 a.m. – 10:30 a.m.</td>
<td>Virtual Yoga Session</td>
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<tr>
<td>10:40 a.m. – 11:10 a.m.</td>
<td>Incoming Presidential Address</td>
<td>Maureen F. Cooney, DNP, FNP, RN-BC, Pain Management Nurse Practitioner, Westchester Medical Center, Valhalla, NY; Lisa Harmon, PhD, RN, CNE, Associate Professor of Nursing, Salish Kootenai College, Polson, MT; Jane Pelosi-Kelly, RN-BC, ANP-BC, ACHPN, Palliative Care Nurse Practitioner, CNS Home Health &amp; Hospice, Plainfield, IL; Alicia Harding, RN, FNP-C, Nurse Practitioner, Children’s Medical Center, Dallas, TX</td>
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<tr>
<td>11:15 a.m. – 12:30 p.m.</td>
<td>Pain Management in the Era of COVID-19 and Its Effect on the Future</td>
<td>Maureen F. Cooney, DNP, FNP, RN-BC, Pain Management Nurse Practitioner, Westchester Medical Center, Valhalla, NY</td>
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<tr>
<td>12:45 p.m. – 1:45 p.m.</td>
<td>Interactive Lunch: Small-Group Case Study Discussions Roulette</td>
<td>Michelle Czarnecki, MSN, RN-BC, CPNP, AP-PMN, Pediatric Pain Management Advanced Practice Nurse, Children’s Wisconsin, Wauwatosa, WI</td>
</tr>
<tr>
<td>2:00 p.m. – 2:50 p.m.</td>
<td>Nurse Initiated Collaboration and Innovation Lead to Positive Patient Outcomes</td>
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3:00 p.m. – 3:50 p.m.  
**Pain Control in the Time of Epidemics**  
1.0 Contact Hour  
Judith A. Paice, PhD, RN, FAAN, Director, Cancer Pain Program, Division of Hematology-Oncology; Research Professor of Medicine, Northwestern University; Feinberg School of Medicine, Chicago, IL

3:50 p.m. – 4:00 p.m.  
**Celebrating the Year of the Nurse & Closing Remarks**  
Maureen F. Cooney, DNP, FNP, RN-BC, Pain Management Nurse Practitioner, Westchester Medical Center, Valhalla, NY

**LIVE WORKSHOPS**

Workshops will be recorded if you aren’t able to participate at the scheduled time.

**Two four-hour sessions**  
1:00 p.m. – 5:00 p.m.  
Eastern Saturday, October 24 and Wednesday, October 28

**Eight-Hour Workshop (additional fee applies)**  
**ASPMN® Pain Management Certification Course™**  
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 more information on the exam, visit: [https://www.nursingworld.org/our-certifications/pain-management/](https://www.nursingworld.org/our-certifications/pain-management/).

**Two four-hour sessions**  
1:00 p.m. – 5:00 p.m.  
Eastern Saturday, October 24 and Wednesday, October 28

**Eight-Hour Workshop (additional fee applies)**  
**Advanced Pharmacology**  
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 advanced pharmacology that incorporates pain pathways and multi-modal approaches. Mastering the use of multi-modal therapies allows for opioid sparing. 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 pain while focusing on safety.

ASPMN Master Faculty  
Renee C.B. Manworren, PhD, PCNS-BC, RN-BC, Director of Nursing Research, Lurie Children's Hospital of Chicago, Chicago, IL; Helen Turner, DNP, APRN, PCNS-BC, Pediatric Pain Management, Clinical Nurse Specialist, Doernbecher Children's Hospital, Portland, OR; Ann Quinlan-Colwell, PhD, RNBC, AHNbc, Pain Management CNS, New Hanover Regional Medical Center, Wilmington, NC; Mary Milano Carter, MS, APRN-BC, RN-BC, Nurse Practitioner, North Shore University Hospital, Manhasset, NY

ASPMN Master Faculty  
Linda Vanni, MSN, RN-BC, ACNS-BC, NP, Nurse Practitioner - Pain Management, Professional Pain Education & Consulting LLC, Troy, MI; June Oliver, MSN, CCNS, APRN-BC, RN-BC, Advanced Practice Nurse, Pain Management Services, Swedish Covenant Hospital, Chicago, IL; Deborah Mattelliano, PhD, RN-BC, FNP-C, Clinical Associate Professor of Nursing, University at Buffalo, Buffalo, NY
ON-DEMAND CONTENT (INCLUDED WITH REGISTRATION FEE)

Clinical, Acute Pain, Pediatric, Competent

**Let’s Give Them Nussin’ to Talk About!**
An expert pain specialized nurse panel will share their experiences when treating the post-operative pain associated with pectus excavatum Nuss bar surgery. A variety of protocols and interventions will be discussed, including peripheral catheters, epidural catheters, PCA, and cryoablation. Successes and challenges will be explored.

Clinical, CAM, All Patients, Advanced Beginner

**CAM Therapies Are No Longer Complementary or Alternative: Yoga, Acupuncture, and Mind-Body Medicine**
This panel will review the neuroscience of yoga and acupuncture. Speakers will discuss how they have developed and incorporated programs for both yoga and acupuncture within the western medical systems to meet the needs of patients with chronic pain. Attendees will leave with a firm understanding of what types of chronic pain these integrative therapies are most useful for and how they can create longer term benefits.

This course on CAM meets 50% (1 hour) of the licensing requirements for the Minnesota Board of Nursing for Advance Practice Providers that hold a current DEA and prescribe controlled substance. Refer to the Minnesota Board of nursing at https://mn.gov/boards/nursing/practice/opioid-practice-resources/opioid-ce-requirement.jsp for other courses on best practice for the implantable devices opioid and controlled substance prescribing.

Clinical, Misc., All Patients, Competent

**Become a Journal Reviewer: Benefits and Guidelines**
Journal reviewers play an important role in the decision-making process as they help the editor decide whether to publish submitted manuscripts. Reviewer input on the strengths and weaknesses of manuscripts significantly contributes to the improvement of submissions and their applicability to practice. The presenters will describe the multiple benefits in becoming a journal reviewer, such as developing one’s own writing and critical thinking skills, career advancement, and contributing to the dissemination of high quality publications. Guidelines to evaluate the major types of manuscripts and illustrations of good versus inadequate reviews will also be discussed.

Clinical, Persistent Pain, All Patients, Competent

**Implementing the Use of Non-Opioid Medications forTreating Pain in the Hospital Setting**
Non-opioid medications are showing promise in treating both acute and persistent pain. The presenters will share the journey to implementation of non-opioid analgesics such as gabapentin, ketamine, and lidocaine in a pediatric setting. They will describe how the implementation was made possible by first looking at current evidence and literature then collaborating with key stakeholders throughout the organization. Examples of how these non-opioid analgesics have been utilized in certain pediatric patient populations, procedures, and medical conditions will be described. Tips and lessons learned from implementation will also be discussed.

Clinical, Persistent Pain, Pediatric, Proficient

**A Healthcare Improvement Initiative to Increase Pain Management Referrals of Youth with Sickle Cell Disease**
Chronic pain treatment guidelines for youth with sickle cell disease (SCD) are unsatisfactory. Youth with SCD often experience chronic pain in addition to unpredictable, recurrent episodes of acute pain. New treatment paradigms are being investigated. The presenter will review the background, methodology and outcomes of a healthcare improvement initiative aimed to increase the number of multidisciplinary pain management referrals for youth with SCD.

Teri Reyburn-Orne, MSN, RN-BC, PPCNP-BC/CPNP-AC, AP-PMN, Advanced Practice Provider/Instructor, University of Colorado, School of Medicine, Anshutz Campus, Aurora, CO; Michelle Czarnecki, MSN, CPNP, AP-PMN, Pediatric Pain Management Advanced Practice Nurse, Children’s Wisconsin, Wauwatosa, WI; Molly M. Matthews, APRN, MSN, CPNP-AC/PC, Jennifer Fanelli, MSN, APRN, CPNP-PC

Sara Hall, MS, RN-BC, APRN, CNS, Clinical Nurse Specialist, HealthPartners, St. Paul, MN; Miles Belgrade, MD, Neurologist, Comprehensive Pain Center, Minneapolis VA Medical Center; Associate Professor, Department of Rehabilitation Medicine, University of Minnesota, Minneapolis, MN

Elaine Miller, PhD, RN, CRRN, FAAN, FAHA, Professor of Nursing/Editor, Pain Management Nursing, University of Cincinnati, College of Nursing, Cincinnati, OH; Patricia Bruckenthal, PhD, APRN-BC, FAAN, Associate Professor, Associate Dean for Research and Innovation, Stony Brook University, School of Nursing, Stony Brook, NY

Sharon K. Wrona, DNP, RN-BC, PNP, PMHS, AP-PMN, FAAN, Director, Comprehensive Pain and Palliative Care Services, Nationwide Children’s Hospital, Columbus, OH; Lauren Renner, MS, RN-BC, PNP, Clinical Leader, Comprehensive Pain Services, Nationwide Children’s Hospital, Columbus, OH

Rae Ann Kingsley, DNP, APRN, CPNP-AC/PC, Nurse Practitioner, Children’s Mercy Hospital, Kansas City, MO
Clinical, Misc., All Patients, Advanced Beginner
1.0 Contact Hour

**Your Career…Own It! LinkedIn and Other Essential Tools to Build Your Personal Brand**
Your career is your responsibility. You are your personal brand! What are you doing to maximize your brand? This session will provide you with practical information on using LinkedIn and other social media to develop, establish, and maximize your brand effectiveness and network. We will review what makes an effective LinkedIn profile, how to set a strategy to develop a network that will bring you closer to your "next" career step, and answer your questions around personal branding! Bring your laptop so that you can immediately apply what you learn!

Pamela Bennett, RN, BSN, CCE, Founder and CEO, Joytrek153 Enterprises LLC, Queen Creek, AZ

Clinical, Acute Pain, Adult, Advanced Beginner
1.0 Contact Hour

**When Medications Can’t Be Avoided: Pharmacology for Pain Management**
Caring for patients with chronic pain impacts nurses in every specialty. This can be frustrating as pain is often a secondary diagnosis that the nurse is managing along with other medical conditions, and referral to pain management is not always an option. The presenter will review the pharmacological options available in the pain management tool box, including NSAIDs, neuropathic medications, topical agents, and opioids. In addition to understanding the evidence supporting each of these medication classes, clinical tips on how to effectively communicate with patients to maximize great patient outcomes will be reviewed.

Megan Filoramo, RN, MSN, APN-C, AP-PMN, Nurse Practitioner, New Jersey Pain Consultants, Altair Health, Hillsborough, NJ

Clinical, Persistent Pain, Adult, Competent
1.0 Contact Hour

**Challenges in the Management of Veterans with Chronic Pain**
Chronic pain management in veterans can be particularly challenging. Veterans suffer from multiple sources of pain, including injuries in training and combat. Many veterans’ pain is complicated by the effects of PTSD. The presenter will focus on the challenges in pain management for veterans with chronic pain. She will address the causes of pain, the effects of PTSD on chronic pain, and many ways that are offered by the Veterans Health Administration to safely manage chronic pain so that the veteran can achieve a mutually agreed upon positive quality of life.

Renee Holleran, FNP-BC, PhD, RN-BC, FAEN, APRN Integrative Pain Medicine, Veterans Health Administration Salt Lake City, Salt Lake City, UT

Research, Misc., Pediatric, Competent
0.5 Contact Hour

**ASPMN® 2018 RESEARCH GRANT RECIPIENT: Leveraging Parent Pain Perspectives to Improve Pain Practices for School Children with Intellectual Disability**
There is a critical need to leverage the perspectives of parents of children with intellectual disability to improve pain identification and assessment practices. During this session, attendees will be informed of the process and results of a study aiming to: (1) ascertain parents’ perceived characteristics of child pain experiences (i.e., pain antecedents, behaviors, frequency, relief measures), (2) determine the extent to which parents feel that caregivers adequately address pain, and (3) identify ways in which pain collaboration between parents and caregivers may be improved.

Brenna Morse, PhD, RN-BC, NCSN, CNE, Assistant Professor, University of Massachusetts Lowell, Lowell, MA

Research, Cancer Pain, Pediatric, Competent
0.5 Contact Hour

**Gut Microbiome Associated with Abdominal Pain in Children with Solid Tumors Post-Chemotherapy and Healthy Controls**
This study aimed to examine associations between GM and abdominal pain in children with solid tumors post-chemotherapy and healthy controls.

Jinbing Bai, PhD, RN, FAAN, Assistant Professor, Emory University School of Nursing, Atlanta, GA

Clinical, Misc., All Patients, Proficient
1.0 Contact Hour

**A New Era of Pain Management: Finding the Moral Frameworks**
Nurses have long ascribed to a moral obligation to treat pain. But which moral frameworks support pain management in an era of opioid abuse, increased patient autonomy, and moral pluralism? Moral clarity in policy and treatment protocols can prevent confusion over what is right for patients with pain, thus preventing nurse moral distress, patient stigma, and suboptimal pain care. Participants will explore how changes in the public and professional moral viewpoint regarding pain contribute to changes in policies and treatment protocols and how nurses who are able to ask clear moral/ethical questions can effectively contribute to more just policies.

Esther Bernhofer, PhD, RN-BC, CPE, Associate Professor, Case Western Reserve University, Parma, OH
Music Therapy and Post-operative Pain Management: Improved Outcomes

Music therapy may be used to help reduce pain perception and anxiety for patients of all ages in a variety of hospital settings. This presentation will use case studies to describe how music therapy has impacted patient perception of pain and comfort from neonatal to adult age patients. An interdisciplinary research study will further demonstrate positive outcomes in pain and anxiety scores and caregiver satisfaction.

Objectives of presentation:

- Define medical music therapy and identify differences between passive music listening and music therapy intervention
- Discuss the impact of music therapy on pain perception from a bio-psychosocial approach; to relieve physiologic symptoms, anxious thoughts and emotional suffering
- Through case examples, describe music therapy interventions that address multidimensional components of pain in neonates, children & adolescents, and adult inpatients

Mechanisms and Management of Intractable Spine Pain: A Novel Surgical Approach and Post-Operative Management

Intractable Spinal Pain implies most pain treatment options have been exhausted. Minimally Invasive Oblique Lateral Lumbar Fusion (OLLIF), a novel unique intervertebral approach, is less traumatic to tissue, is sparing to abdominal organs, reduces blood loss and intraoperative time, as well as speeds up recovery. In most cases, patients have reduced their opioid use, demonstrate reduced length of stay, and show improvement in functional status. The immediate post-operative period is critical in functionality. Understanding this novel approach with intractable spinal pain and understanding the mechanisms of pain can assist the nurse in applying an effective comprehensive pain treatment plan.

Where’s the Curriculum? APN ALERT (Advanced LEaRner Training)

Expert pain specialized advanced practice nurse panel members will share their experiences and challenges when training advanced practice providers new to pain management. Settings include inpatient acute and outpatient chronic pain clinics for care of both adult and pediatric patients from various academic and private medical centers across the country. Overview discussion about assets of and difficulties in instituting training models, importance of outcome measures, and enhancing career satisfaction will be reviewed. Future opportunities to have standardized curricula will be addressed for audience participation.

Pediatric Headache Management

Headaches can be a life-long struggle for many people, and many have them start when they are very young. Headaches can range from occasional tension headaches to migraines to chronic daily headaches. Management of headaches is similar to adults, but there are specific considerations when dealing with the pediatric population. The multidisciplinary team approach that is utilized at Children’s Wisconsin, which includes both a medical provider and a mental health provider during the visit, works to manage pediatric headaches in what is best for our younger patients.
**Mentorship in Nursing: Influence on Career and Clinical Practice**
Mentorship is a process that promotes professional and clinical growth. Whether you have been a mentor or mentee throughout your career you have contributed to our nursing profession. The presenter will review those nurses who have influenced the presenter’s career (and maybe yours too!) and created friendships through involvement in professional organizations.  

**WE Are Excited: Coaching and Mentoring the Next Generation of Pain Management Nurses**
Listen to the journey of two staff nurses and mentor discuss generating staff nurse engagement to become pain management nurses. Both staff nurses submitted abstracts for posters on practice questions they researched and are studying to obtain their pain certification. Both nurses work at Magnet organizations and will use these professional development experiences as part of their evidence toward exceeding objectives on their yearly evaluation. Great session to learn from front line staff how they want to be coached, mentored, and engaged.  

**Grant Writing Doesn’t Have to Be a Pain! Tips for Preparation and Dissemination**
Developing new knowledge of pain management via research could inform and transform clinical nursing practice and nursing policy. Pain management nurses should be prepared to develop, lead, and participate in research programs. This research session will provide nurses with practical steps in building and conducting research studies, including establishing collaborative relationships with research and practice partners and mentors; preparing, writing, and submitting grant applications; and disseminating the findings from research studies through traditional and emerging engagement platforms.  

**A Clinical Practice Guideline for Pain Management in the Post-Anesthesia Care Unit**
The presenter will describe an evidence-based clinical practice guideline developed for acute pain in a post-anesthesia care unit. She will also describe proper titration of pain medications through the use on an algorithm. Content includes basic opiate conversions, pharmacodynamics and pharmacokinetics of opiates and how they should be properly utilized based on evidence.  

**Beyond Epidurals: Minimally Invasive Lumbar Decompression for Lumbar Spinal Stenosis**
Lumbar spinal stenosis affects millions of patients nationwide. When conservative treatments and epidural injections fail to manage chronic back and leg pain, there may be other interventions that can manage pain without having to undergo major surgery. Although surgery may be the only option for some, this topic will help you identify what other options exist and when patients are a good candidate for other minimally invasive lumbar decompression treatment options.  

**Use of Auricular Acupressure in Pain Management**
Diverse and holistic pain management treatments have always been at the core of nursing practice. With a federal initiative in finding more non-pharmacological pain management treatments, nurses are well positioned to lead this endeavor. Auricular acupressure has been shown to be safe and effective for improving pain. The presenter will describe auricular acupressure, review the current evidence showing its efficacy, share how auricular acupressure became implemented at an academic children’s hospital by a nurse, review case studies in adult and pediatric patients, and share pending/proposed research and clinical initiatives for auricular acupressure in the pediatric population.
**Interprofessional Education on Pain and Opioid Use Meets Team-based Learning Needs**

Attendees will learn how to deliver a team-based interprofessional education (IPE) program to improve care for patients prescribed opioids. Program evaluation results will be shared along with curricular materials that nurses can bring back to their practice or educational settings to address stigmatization of persistent pain and opioid use disorder. Case-based scenarios and active learning strategies will be used to demonstrate how interdisciplinary learning needs can be integrated into clinical settings.

*Marian Wilson, PhD, MPH, RN-BC, Associate Professor, Washington State University, Spokane, WA*

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**Let Us Introduce You to Ways Clinical Nurse Specialists Impact Pain Management in Healthcare Systems**

The aim of this session is to highlight the CNS role in pain management within the three distinct spheres of impact: Patient/family, nursing, and systems. Each of the presenters will highlight CNS-led outcomes related to quality improvement or research projects.

*Marilyn Ann Bazinski, DNP/AGCNS, RN-BC, Pain Management CNS, UW Health, Madison, WI; Ann Quinlan-Colwell, PhD, RNBC, AHNBC, Pain Management CNS, New Hanover Regional Medical Center, Wilmington, NC; Lydia Booher, PhDr, APRN, ACNS-BC, ONC, Coordinator APN PA/Clinical Nurse Specialist, Cleveland Clinic, Cleveland, OH; Debra Drew, MS, ACNS, BC, Pain Management Clinical Nurse Specialist, Maplewood, MN*

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**Incidence of Respiratory Depression and Derivation of a Novel Opioid-Induced Respiratory Depression Risk Prediction Tool**

Despite the serious consequences of opioid-induced respiratory depression, it is difficult to identify patients at risk of respiratory depression (RD) on the general care floor (GCF). The PRODIGY trial examined the incidence of respiratory depression among 1,355 medical-surgical patients receiving parenteral opioids on the GCF, and derived a novel respiratory depression risk prediction tool based on continuous capnography and pulse oximetry monitoring. This tool, which will be presented in detail during this session, can be used to identify patients receiving opioids on the GCF who are at risk for RD, and may help prevent respiratory compromise with appropriate monitoring strategies.

*Susan Dempsey, MN, CNS, RN-BC, Clinical Nurse Specialist, University of California, Los Angeles, Madera, CA*

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**The Relationship between ACEs, Trauma, and Pain**

Adverse childhood experiences (ACEs) and other types of trauma affect the body both physically and mentally. Traumatic experiences are related to chronic illness, lower life expectancy, an increase in pain experiences, and a decrease in quality of life. This session will help you learn how to identify trauma and understand the neurobiological connection between trauma and pain. The presenters will help you examine how to assess for ACEs, which will better inform care planning, improve treatment outcomes, and identify potential referral needs. Finally, we will analyze how using a trauma-informed approach can enhance pain management practices.

*Brenda Nordstrom, DNP, BS, RN-BC, CHPN, Adjunct Nursing Faculty, South College, School of Nursing/Muskegon Community College, Nursing Department, Twin Lake, MI*

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**Chaplaincy: Spiritual Care as an Integral Part of the Pain Management Team**

The inclusion of a professional chaplain as part of the interdisciplinary medical team can enhance the team’s understanding of a patient’s reaction to their medical condition. Contrary to the typically accepted belief on the part of medical professionals as well as the patients themselves, the role and function of the chaplain is not limited to providing prayer for patients in crisis. Even as a chaplain’s ability to provide therapeutic prayer is helpful for patients who value prayer as an important part of their spiritual or religious life, chaplains also have the training and skill to explore with the patient how a patient’s religious and/or spiritual beliefs can affect their response to treatment, which can include the management of pain. Studies have shown an existential crisis brought on by a serious diagnosis or medical crisis can often be experienced through the framework of a foundational religious or spiritual belief. A chaplain’s training in deep listening, reflective questions, and use of self, allows for a patient to explore their beliefs in a way that permits the patient to experience wholeness of self while undergoing medical treatment. It has been found that patients who feel supported in their existential pain often feel more in control of their physical pain.

*Lorraine Ceniceros, M.Div., Associate Conference Minister, United Church of Christ, Madison, WI*
**Pain Management Education Initiative: Creating S.T.A.R.S. (Specialized Treatment Approach Requires a Skill-set)**
A pain management program for acute care surgical nurses improves clinicians’ knowledge, confidence, assessment and documentation compliance, and use of non-pharmacological interventions. The program also had a positive impact on the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) pain communication scores.

**Preparing the Next Generation of Pain Management Nurses**
The presenters will present up-to-date research on best practice in developing on-boarding and orienting processes of the next generation of pain management nurses and advanced practice nurses. The presenters will provide a number of ways to differentiate and personalize the on-boarding experience in order to make the on-boarding process as efficient and effective as possible.

**Nurse’s Perception of Caring: As Diverse As Our Patients**
Providing care to chronic pain patients can be rewarding and disappointing all at the same time. A competency developed to explore nurse’s thoughts and stories regarding the provision of chronic pain care will be reviewed. Key words and thoughts will be explored.

**Treating Acute and Chronic Pain in Post-operative Patients: Best Practices**
The presenters will discuss a staff nurse’s journey to creating a post-operative pain management presentation on people with chronic pain. Are surgical patients with a history of chronic pain at an increased risk of uncontrolled post-operative pain as compared to patients without a history of chronic pain? Using the PICO question method and mentorship from an experienced pain nurse, the question was explored which enhanced the staff nurses’ accountability and professional development.

**Women with Chronic Low Back Pain and Low Socio-economic Status: Self-efficacy and Multi-site Pain Predictors**
Due to the higher prevalence of pain among adult women and those belonging to the low socio-economic status (SES), it is important to evaluate the predictors of self-efficacy and multisite pain in this population. One in four of those with chronic low back pain (CLBP) go on to develop multi-site pain, and this is common among women and those with low SES. Without adequate self-management through self-efficacy, these individuals experience greater disability and more challenges in management. Targeting significant predictors can facilitate better pain care and minimize disparities.

**Using Healing Touch in a Hospital Setting to Relieve Pain, Anxiety, and Assist with Sleep**
The presenter will describe how a 150-bed community hospital has been able to utilize Healing Touch to assist the Pain and Palliative Consult Service as well as the staff nurses with patients experiencing pain, anxiety, and sleep issues. The presenter, working the night shift, performs Healing Touch per the request of consult service and the nursing staff. Examples of patients who have benefited from Healing Touch will be explored and questions answered. After this question session, volunteers will be available to provide demonstrations of Healing Touch.

**Toward a New Pain Assessment Paradigm: Measuring Pain during Movement**
Pain with movement is a significant problem in older adults with chronic musculoskeletal pain, such as osteoarthritis. However, pain assessments often do not account for the variation in pain that occurs during movement in contrast to at rest. Furthermore, the new Joint Commission requirements state to consider the impact of pain on function. The presenters will offer new insight into (1) research-based evidence on
movement-evoked pain and function in racially diverse older adults, (2) self-report tools to facilitate pain assessment that emphasizes interference with function, and (3) practical strategies for nurses to re-tool their pain assessment approach.
Clinical, Persistent Pain, Adult, Competent

1.0 Contact Hour

Spinal Cord Stimulation: Is It for My Patient?

Neuromodulation is changing the environment of pain management. As the technology progresses, more and more chronic pain states are being effectively treated with this modality including diabetic and chemo-induced neuropathy, low back pain, cervical radiculitis, and complex regional pain syndrome. By having an understanding of the technology, its appropriate uses, and its risk-to-benefit ratio, the nurse can educate appropriate patients earlier on in the treatment algorithm, before they potentially get started on multiple medications. Spinal cord stimulation is a safe and effective treatment that has very few contraindications. Find out which of your patients it can potentially help, how to set reasonable expectations, and how to adequately prepare the patient to pursue this non-opioid technique.

This session on implantable devices meets 50% (1 hour) of the licensing requirements for the Minnesota Board of Nursing for Advance Practice Providers that hold a current DEA and prescribe controlled substance. Refer to the Minnesota Board of nursing at https://mn.gov/boards/nursing/practice/opioid-practice-resources/opioid-ce-requirement.jsp for other courses on best practice for the non-pharmacologic, opioid and controlled substance courses that meets this requirement.