VOL. II

SPRING ISSUE 1977

NO.1

FROM THE DESK OF ...

Message from the President:

Joan

As some of you know, the Mid East Region recently held its second annual Nursing Symposium in Louisville, Kentucky. It was a tremendous success with some 360 nurses and allied health professionals in attendance. Many thanks to Jane Younger, Sue Hughes, and the Louisville area E.T.s for the energy and hours of work poured into making the program a worthwhile educational experience.

Where to next? Already we are seeking volunteers for the third annual symposium. If each state is to take a turn, we look for bids from Michigan, Indiana and West Virginia. The three girls in West Virginia would have to work double time if they were to volunteer. How about Indiana or Michigan? Please submit all proposals to me and the Board will choose the location to save arguments. O.K.? Each of you will have a chance and there are several experienced people who will be happy to offer suggestions.

Following the symposium, there was a Mid-East Regional Membership Meeting with 29 E.T.s present. The minutes of the meeting can be found in this issue of the Eas-Dropper. If you have any questions about topics discussed, please direct them to either me or the Eas-Dropper editorial staff. We will be most happy to expand upon any subject.

One area we touched upon - Regionalization vs. Statehood - is a topic we are going to be hearing more about in the future. For instance, sometime in the spring I believe each of you can expect to receive a questionnaire to investigate this issue. I would like to offer some points, pro and con, for considering the ramifications of individual State affiliation with I.A.E.T. as opposed to Regional (composed of several states) affiliation.

The propose of dividing into Regions initially was to make the distance for communication geographically shorter and therefore more effective. A State organization contact theoretically accomplish this goal even more effectively provided it has the membership. How can the states with an E.T. population of 3 or 4 manage to feel a part of the organization?

Our new system of representation to be initiated immediately after the San Diego conference provides an I.A.E.T. Board of Trustees composed of I elected representative from each Region. How will individual states be represented? (50 trustees is a lot!) Can we have organized States affiliating with organized Regions in turn affiliating with I.A.E.T. and still maintain Democracy? Economically speaking, how much dues are due? Who is responsible for financing travel expenses to various Board meetings?

These questions are not meant to indicate impossibilities just things to think about since they will be asked again in the future.

How many are going to San Diego August 13-17? Start planning now. Happy Spring!

Joan,

WRITERS WANTED

The response to our "Dear Ettie" column has been great. There are still lots of E.T.s in the region we haven't heard from. PLEASE, send news, things you wish to share, and origional articles. Input from YOU makes this newsletter yours.

Trudy Helen

EDITORS

Trudy Blied, R.N.
Leila Hospital
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Battle Creek, MI 49016
(616) 962-8551 ex. 506

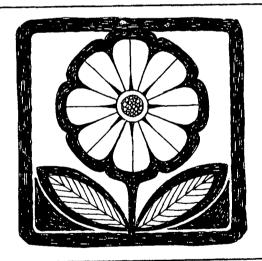
Helen Arend, R.N. Bronson Methodist Hospital 252 E. Lovell St. Kalamazoo, MI 49006 (616) 383-7654 page Regional Address Booklets are available to any mamber of the region who doesn't already have one. Send requests to

Jane. Jane Younger R.N.

Jewish Hospital

Louisville, Kentucky

40202



MIDEAST REGION I.A.E.T.

OFFICERS August 1976-August 1977

PRESIDENT--Joan Kerr
PRESIDENT ELECT--Jane Younger
SECRETARY--Helen Arend
TREASURER--Sue Hughes
TRUSTEES--Trudy Blæd Publications
Juanita Jenkins Membership
Sally Thompson Legislative

TO OUR REGIONAL E.T.'s.

Jane Younger's program was great. All the participating E.T.'s did a fantastic job, (oh, yes-the Docs did fine too). The part that makes my job as E.T. the best in the hospital, in my opinion, is the friendship and sharing of the group. There are some of the greatest "people" in the world in our region.

I really want to encourage those of you who have not become active at the regional level to give us a try. The knowledge shared and association with this supportive group will carry you through from one meeting to the next.

For the big highlight of the year, join us at San Diego for the I.A.E.T. We need the association, sharing and support to give the best service to our patients.

Joyce Hawley

MIDEAST REGION DUES

Ø

The dues for the Mideast Region are \$5.00. Payments should be sent to:

Sue Hughes, Treasurer %Stoma Clinic Jewish Hospital 217 East Chestnut St. Louisville, KY 40202

Your promptness and cooperation will be appreciated. Let's support our region first by paying our dues. Remember I.A.E.T. Membership is required for regional membership. Attorney Galen White of Louisville, whose practice is 80% medical mal-practice, spoke on the changing climate of liability for the health care professio-Two factors contribute to this change, according to Mr. White, consumerism and advanced technology. "consumer" is backed by legislatures and the courts and is able to demand near perfection in services rendered. Advanced technology provides the ability to deliver highly sophisticated care and treatment, but carries with it the responsibility for management of complicated machines and procedures. only is the nurse expected to "observe" and carry out orders, but is charged with using good judgement and has a legal responsibility to conform to accepted standards of nursing practice. The speaker cited examples of malpractice claims within his practice and there was a general discussion pertinent to specialists within the nursing profession.

Trauma to Triumph

GREAT LAKES REGION UNITED OSTOMY ASSN.
Regional Conference April 16&17, 1977
Airport Ramada Inn
Detroit, Michigan



DEAR Ettie:

Dear E.T.,

Regarding the answer to R. Plug by Norma Gill in "Dear Ettie", please give the proportions of the mixture of cotton seed oil and aqueous aerosol. Thanks, Marjorie Rose

Dear Marjorie,

The proportions for the enema are, 1 pt. cottonseed oil 1 pt. aq. aerosol 1/3 tsp. liquid detergent

Joan Kerr

Dear Ettie,

When a patient calls me on the telephone and says their stoma has gotten larger, whether it is an Ileostomy, Colostomy, or Ileal Conduit I'm always suspicious what is really the matter. Would describe for me what would be the obvious reasons for this problem, with each one?

Mrs. S.T. Hole

Dear "Hole".

One's "ostomy" should never "normally" become larger. Smaller, yes. There fore, an ET should always be alerted when a phone message such as this comes in. In case of a colostomy (generally always a transverse) the "distal" end of the stoma is prolapsed and the colostomy is bigger. This can happen to an ileostomy, too, almost always a Loop Ileostomy. The other reason would be a cut stoma from an appliance where it has caused swelling. The Ileal Conduit most always is Psuedoepithelial (P.E.H.) "Dish-pan-Hands" where the patient has too large an opening in his appliance and instead of a smaller opening, they get a larger On certain Ureterostomies they will project out further and one should keep the same opening, for if you go to a larger one the ureters will just fill that opening. Play it safe and always ask the patient to come see you, and look. Norma Gill

Dear E.T..

I'd like to hear from E.T.s who have had much exposure to decubitus (different stages) care. What are the most effective methods of care used to promote healing?

Let's have feedback on some of the new products. One in particular I'd like to hear about is Crixiline.

Betty Gerth

Dear Ettie.

Recently I have had occasion to help desperate ostomates who have had aurgery at other hospitals by surgeons not on our staff. Many times problems of a medical nature are in question. Contacts with the attending physician may be welcome or unwelcome. While I am concerned with helping the poorly informed ostomate there lurks the formidable question: "Am I practicing medicine without a license?" What do you suggest? How can I most effectively care for the "Outside" referrals?

CVH

Dear CVH,

The following suggestions might be helpful to those of you asked to see patients at another institution; or in your own, as an out-patient.

- 1. Make certain there is a written "order" or request by the attending physician. (Call for verbal; if not).
- 2. I chart on the progress notes as follows: Ostomy consultation (or ostomy instruction to patient) per request Dr.___.
- 3. Have R.N. supervisor or director sign ok and name at bottom of charge slip; if in another institution.
- 4. Send follow-up letter concerning consultation to physician.
- 5. Make certain you have your own "Medical Advisor" in your own institution. He or she should have signed a slip to have written legal back-up from your medical staff. This may be your chief of surgery or -??

6. Carry the fullest available personal and professional liability coverage.

7. Keep your recommendations to patient within "nursing care" scope If you disagree with some methods of care the doctor has prescribed, such as dilating daily, irrigation of a transverse colostomy, etc., use much tact. Ask the patient what he/she has been instructed to do, then do your best to correct the problem without making the physician appear inept. I find the best way to suggest change is using the term nursing care or specialty patient education, which nursing staff is responsible for.

8. Last, but not least, have any written instruction or procedure sheets reviewed by the medical staff with their stamp of approval. Any instructions or booklets should fall into this category.

Betty Gerth



SMITTY RETIRES

On February 25, 1977, co-workers and former students gathered at Sayfees in Grand Rapids for a retirement party for Bernadette Smith. The influence of "Smitty" in the ostomy care field reaches far. Many patients, co-workers, and former E.T. students have had the benefit of her excellent care, expertise and attitudes. F.D.F. will surely miss her. We all wish her lots of good health and happiness in her "newest venture".



in

Familiar

places

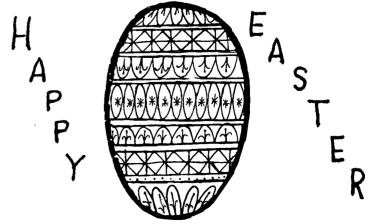
REGIONAL NEWS

From Cincinnati:

Betty Gerth and her husband hosted a picnic for a small group of ostomates in the young adult age in an effort to acquaint these young people with others sharing similar problems. Discussion was informal. Topics ranged from preop teaching and post-op care to family, social and occupational adjustments. Sexuality with personal adjustment and management was discussed openly and in great detail. Of her own response to the evening Betty says: " I felt it was a spontaneous "group therapy", which was beneficial to each of us. My own awareness of the concerns and needs of these young people is much more keen that before. We hope to make this an annual affair."

Also from Cincinnati:
E.T.s from this area met with the Public Education Committee of the ACS to develop a presentation to be made available to area schools upon request dealing with the child ostomate. The education of the public, beginning with the schools is a major step in which the E.T. can take positive action toward the understanding and acceptance of the child ostomate.

From Indiana and Michigan:
March 17 was E.T. Day in the states of
Michigan and Indiana by official proclamation of the governor of each state.



WHICH REUSABLE APPLIANCE?

There is no cookbook for appliance choice. Face Plate, Mounting Ring, Disk, Pouch, Bag or whatever name you call it, which one to choose?

I believe that the use of a midgid face plate is limited. It should be considered for use on a well padded, flacid abdomen, where greater pressure is needed immediately around the stema base to prevent leaking.

If I was limited to only two choices, I would select a flat flexible one and a slightly convex, flexible one, with cuter diameters of about 3". The flat one to be used on a smooth, fairly firm site, the convex for an area that may have a groove, or is somewhat flacid, has too short a stoma, a scar or simular situation. This is an over simplification as any experienced E.T. knows. It is still at times a case of trial and error. The selected disc may have passed all the criteria that your experience dictates for that particular case only to find that some skin pecularity, unusual activity etc. does not permit an adequate period of adherence.

I am an E.T. of the vintage (I hope like wire, improved with age) pre karaya ring, karaya paste, Relia Seal, Stomahesive and like blessings that research has given us. I whittled and carved, beveled and sanded available materials to mold into some semblance of the conformity of the terrain.

There are variations of the flexible ring, such as the oval, useful for a short pelvic area. In some instances more effective when applied at an angle to conform to the contour formed by the tension from the ileum and pubic bones. The round one is more commonly used.

The "Mini" face plate (infant or baby) has it's use on an adult who has an extremely limited area around the stoma base for adherence. I came to the conclusion many years ago that a large face plate with more body surface contact does not make for a more secure attachment and can be a hinderance as it may extend into an area that bends and breaks the seal. The vital area is that immediately around the stoma base. If there is good adherence here, there will be no leakage. One problem with the use of the infant plate is the difference in the adult pouches face plate opening in relation to the size of the groove it fits into on the smaller plate, if you try to gather it tight enough to make contact in this groove you are left with "gathers" that allow liquid to escape. I have improvised with a "bag" that has no pre cut area (baggie" type supplied by many Ostomy products manufactures) by gathering the open end around the groove and tieing it very snuggly with an elastic cord and cut off the closed end of the bag. A small Colostomy irrigation drain may also be used. (There is another effective way to use these bags as Ileo pouches using the closed end for contact with the face plate, but I would have to draw pictures to make it clear, unfortunately I never won the Nobel Prize in Art).

Which Pouch to use? Some factors influencing that decision: CUC, Crohns, how much terminal ileum was removed, body chemistry?

The semi-disposable vinyl pouches present a problem with those who have had some terminal ileum removed; after short usage they become stiff and have an unpleasant odor: with the double layered ones, the inner layer stiffins and distorts the shape of the outter layer. The "rubber" type pouches made of or lined with black butyl eliminates these problems, others use the "throw away" type pouches.

Upon reading this over I discovered that I have said that experience is the best teacher, that the dear Lord, knowing how bor ing it would be otherwise, made us in all different kinds of shapes, but being understanding as He is gave E.Ts great love and dedication, so blend the two together and you will find the answer.

Bernadette G. Smith R.N., E.T. Ferguson-Droste-Ferguson H ospital

Louisville, Kentucky February 12, 1977

Members of the Mideast Region of the International Association for Enterostomal Therapy met in the Label Room of the Executive Inn in Louisville, Kentucky on February 12, 1977.

At 8:15 A.M. president, Joan Kerr, introduced Mr. John Snyder, sales representative for American Airlines; the purpose was to discuss charter flights to the national conference in San Diego in August. He explained the following 3 types of air service:

- 1. Charter plane-not recommended because the minimum seats are 170-200. Payment is made for the plane, not the passengers. The cost is approximately \$30,000. This plan would not fit needs because of different departure times and locations.
- 2. Group fare on scheduled air-This is somewhat better than charter, in that no contract is necessary, but still is not flexible enough. The savings is up to 30%. There is no departure or payment schedule. However, there must be 40 people departing at the same time from the same location.
- 3. Individual tour basing fare-this plan is worked out with the hotel and can be very flexible and could meet the needs of most of the people. The air fare and ground package are purchased together and a considerable savings, approximately 25%, can be realized. There is no contract required, and departures are very flexible in that they can be instituted any day from any city. There is no minimum stay. An additional savings of one free air fare for each 15 paid fares is realized with this plan. World Wide Travel in Louisville could handle this. The membership was very interested in this plan and wished Mr. Snyder to check into it further.

At this point the meeting was officially called to order at 8:50 A.M. by president Joan Kerr.

Motion was made by Betty Gerth and seconded by Joyce Hawley to have Mr. Snyder work on the Individual Tour Base Fare. The motion was passed by majority verbal affirmative vote. Pat Zollærs will get the mailing list of 715 members (Canadian and USA) and

work with Mr. Snyder to arrange the best plan.

The president determined that a quorum of 27 voting members was present.

The minutes of the August meeting in Pittsburgh have been mailed to the membership with the newsletter and Joan Kerr asked if anyone wished them reread. No one so wished. A motion was made by Pat Martin and seconded by Trudy Blied to accept the minutes. Motion was passed by majority verbal affermative vote.

The treasurer's report was read by Sue Hughes. There are 92 E.T.s in the Mideast region of which 77 are paid members. There is \$2,264.60 (\$2,224.85-savings account, \$39.75 checking account) in the treasury. This does not include any profits from yesterday's conference.

Jane Younger gave a report of the conference(2/11/77). There were 359 total registrations of which 75 were students and 20 were pharmacists. They were awarded .8 C.E.U. from University of Louisville, .8 C.E.R.P. and 8 C.E.U. for Pharmacists. Evaluations were favorable for the most part. She recognized the people from Louisville who had helped her and most especially Sue. The membership complimented and thanked her for the excellent program.

Publications report was given by Trudy Blied. The MidEas Dropper has gone out on schedule, but the editors need help badly with articles, news and material for the Dear Ettie column. She urged members to contribute to the newsletter. Pat Zollærs suggested we include an officer profile. She also asked for comments on the Regional Newsline. Several people gave opinions that it was not useful. It was suggested that a proposal be sent to the National Board of Directors to discontinue the newsline. A motion was made by Pat Zollærs and seconded by Mary Lou Walker to write a proposal to discontinue the newsline and revise communication channels. Motion was passed by majority affirmative verbal vote.

Joan introduced the subject of the I.A.E.T. pins which were presented to the National officers at the induction ceremony in August. The mideast region purchased the die cast from the

Joslin Co. and it can be reused for additional pins in the future. It is hoped that regions doing the installing will continue this. Joan stated that thank you notes have been received by all of the members who received pins. A sample pin was passed around for everyone to see. Pat Zollærs stated that Dr. Turnbull will be honored and presented with a gift at this conference and asked if the Mid-east region would like to be involved in the program. She asked for suggestions. Pat suggested that the Regional presidents should install the regional trustees. After a short discussion a motion was made by Betty Gerth and seconded by Sally Thompson for the Mideast region to organize the installation ceremony for the National Board of Trustees and notify other regional presidents of their duties. The motion was passed by affirmative verbal vote. Jan Joseph volunteered to take charge of this.

A discussion followed about the pins. A motion was made by Jan Joseph and seconded by Judy Welch that we send a proposal to the chairperson of the Educational committee that the pin presentation initiated by the Mideast region last year be evaluated and possibly be incorporated as a continuing function of that committee. Motion passed by affirmative verbal vote.

A motion was made by Betty Gerth and seconded by Sarah Crawford that 'the Mideast region, with the approval of the chairperson of the Education committee, purchase the I.A.E.T. incoming officer pins again this year. The motion was passed with an affirmative verbal vote.

Joan introduced the matter of the state E.T. Day. Last year letters were sent to all of the state's governors requesting March 17 as official E.T. Day. Thus far there have been no replies. It was decided to contact the people who wrote origionally and request they write follow-up letters again.

Meeting was recessed for a break.

Meeting was recalled at 10:30 A.M.

By-Iaws revision proposals were read by Sally Thompson.

National by-laws regarding regionalization were read and discussed. The areas of replacement of the regional trustee and dissolution of the group were questioned. Bonnie Bolinger agreed and will propose changes accordingly to the National Membership.

By Iaws amendments Article VI Regional Trustee were read. Motion to accept was made by Betty Gerth and seconded by Joyce Hawley. Motion passed by majority affirmative verbal vote.

By law change of wording changing "first membership meeting of each fiscal year" to annual membership meeting was read. Motion to accept was made by Mary Lou Walker and seconded by Angie Lamb. Motion passed by majority affirmative verbal vote.

Change in Article VI to "Regional Trustee" and numbers after that changed. Motion to accept made by Juanita Simon and seconded by Helen Myers. Motion passed by majority affirmative vote.

Change in Article V read. Motion to accept made by Sara Crawford and seconded by Nancy Baines. Motion passed by majority affirmative verbal vote.

Article V, section VIII, all numbers after Number 2, deleting Number 3, changed. Motion made by Pat Martin and seconded by Polly BeViser. Motion passed by majority affirmative verbal vote.

Sally Thompson stated that the changes will be made and copies sent to the membership.

Motion was made by Jan Joseph and seconded by Judy Welch to amend the by laws to the effect that future proposed by-law amendments will be submitted to the membership 30 days prior to the meeting by the by-laws committee for the purpose of expediating meetings. Motion passed by majority affirmative verbal vote.

Proposal Yvonne Fowler to discontinue the regional newsline read by Joan Kerr. Motion made by Betty Gerth and seconded by Mary Iou Walker to send proposal to Yvonne and all members of the Board of Directors of the National I.A.E.T.

Bonnie Bolinger spoke for a few minutes. She thanked the Mideast region for support and stated she feels the region is doing well in organization and activities. She has a great deal of work and is requesting help with it. The Accredication committee needs a philosophy developed to help them with guidelines. The Bylaws committee has been asked to institute proxy vote and this will need to be researched well so the National Board can decide whether to do it. The Legislative committee wants to compile statistics about legislation, insurance, etc.

She requested volunteers from each state to meet with her and work hard to accomplish these tasks. Paper was circulated for members to sign for commitments.

Report from Joyce Hawley, chairperson of Nominating committee. Other members were Helen Myers, Betty Gerth and Joan Kerr. She submitted slate of officers as follows:

President-Elect: Sue Hughes, Helen Arend

Secretary: Rose McNiel, Pat Hurd

Treasurer: Sally Thompson, Jack Fillinger, Marquise Kriete

National Trustee: Betty Gerth, Helen Arend, Joan Kerr

Regional Trustee: Trudy Blied, Sally Thompson, Joyce

Hawley, Angie Lamb, Angie Ward

Nominations were taken from the floor.

President-Elect: none

Secretary: Trudy Blied (?accept)

Treasurer: Sally Thompson declined

Regional Trustee: Helen Arend declined, Jane Younger

Trustees: Trudy Blied declined, Helen Myer, Jan Joseph

National Slate recommendations:

President: Marilyn Schauder, Vickie Jensen, Betty Jackson

Vice President: Bonnie Bolinger

Secretary: Rosemary Watt

Meeting adjourned for lunch at 12:15 P.M.

Meeting recalled by president Joan Kerr at approximately 2 P.M.

Joan introduced discussion of the subject of the National organization requiring 25% of seminar profit proceeds from the Regions. Jane Younger offered that organizations with affiliate groups in which dues were paid by members to both groups possibly might not be able to make these requirements. Subject was discussed but no conclusion was reached and no action was taken.

Joan introduced subject of the ostomy visitor program. She asked if there was need for a standardized program. Bonnie stated that I.A.E.T. did not support the program which was outlined by the U.O.A. National A.C.S. has set up guidelines for programs and these are available.

Pat Zollars stated that Marilyn Schauder, National Trustee, in charge of public relations, has requested the MidEast Region to serve as hostesses at the National Conference. Motion was made by Betty Gerth and seconded by Sally Thompson that we notify Marilyn that we will assist her at the conference. Motion passed by majority affirmative verbal vote.

Motion to adjourn by Joyce Hawley and seconded by Angie Lamb. Meeting adjourned at 3:15 P.M.

Respectfully Submitted,

Helen M. Arend

Secretary Mideast Region

I.A.E.T.

VOL. II

SUMMER ISSUE 1917

NO.2



FROM IAET REGIONAL NEWSLINE:

1. Operational Manual-The Association Management Center will design an Operational Manual to facilitate organizational activities of IAET.

2. Packets for new IAET Members will be sent from the Central office.

3. Membership-Total IAET membership,

744. 4. L

4. <u>Legislation</u>-Protocol and procedure is being developed to seek information pertinent to any state pursuing or proposing legislation affecting enterostomal therapy. All states will be asked to reply as to the following areas:

Legislation affecting enterostomal

therapy:

Legislation instituting licensure for enterostomal therapy Coverage problems with Medicare

or Medicaid

Year work was begun

5. Continuing Education-In the near future each region will receive a calendar of dates for available educational activities throughout the IAET.

MIDEAST REGION I.A.E.T.
OFFICERS August 1976-August 1977

PRESIDENT--Joan Kerr
PRESIDENT ELECT--Jane Younger
SECRETARY--Helen Arend
TREASURER--Sue Hughes
TRUSTEES--Trudy Blied Publications
Juanita Jenkins Membership
Sally Thompson Legislative

IAET NATIONAL CONFERENCE August 14-17 San Diego, California

Look over the brochures you have received. The program is exciting and educational with something for everyone.

The MidEast Regional Meeting will be held Saturday, August, 13, 6:30 p.m.

in San Diego.

The Nominating Committee was chosen at the Regional meeting in Louisville, Kentucky in February. Joyce Hawley-Chairperson has presented the following slate of offices to be voted upon:

President-Elect: Sue Hughes Helen Arend

Secretary: Rose(anna) McNeil Treasurer: Marquise Kriete

Trustees: Jane Beerck

3 to be Helen Myers
elected Sally Thompson
Betty Gerth

Joyce Hawley

Regional Representative to IAET: Jane Younger

Since several candidates are unapposed, nominations from the floor will be encouraged. Please give some thought to additional nominations before the meeting. Joyce Hawley requests that anyone interested in running for office please contact her immediately.

Article V, Section II- Requirements for office: To hold office, a person must be an active member in good standing for at least one year immediately prior to election and have consented in writing to serve as an officer.



UOA SPRING REGIONAL CONFERENCE

I would like to tell you about a very interesting and educational Regional Conference that took place in Detroit, Michigan, April 15, 16, 17, 1977. We had over 500 people in attendance, 20 exhibitors, Yoga and Karate demonstrations applicable to ostomates, youth pool party and social activities and last but not least, T.V. coverage by Detroit's Channel 2 CBS station.

The job of program chairman started out as a joint endeavor, but I soon found I was carrying the ball myself-My co-chairman became too ill to participate. "It always looks darkest before the dawn"- so knowing I have a great group of E.T.'s in and around Detroit that I could call on for help - I scheduled an interesting group of seminars for the program. We covered such topics as; The Urinary Tract and It's Diversions Pediatric Ostomies, Penile Implant, Ileostomy stoma complications, Electrolytes, Spina Bifida, Community Resources, Dates and Mates, Perineal Wound, Colostomy Rehabilitation, Ask Out Youth, and Comparison of Ulcerative Colitis and Crohn's Disease. Very successful E.T. rap sessions were also in the program. Our I.A.E.T. Regional advisor, Dr. Joseph Rinaldo drew record attendance at the seminar he presented on Comparison of Ulcerative Colitis and Crohn's Disease. E.T.'s moderated all sessions.

I was unsuccessful in all my attempts to get Senator Hubert Humphrey to attend the conference as our honored guest. I did receive the following letter from him, which contains a beautiful message that I would like to share with you.....

Rosemarie Van Ingen

(Above mentioned letter enclosed elsewhere in this issue.)

MIDEAST REGION DUES
The dues for the MidEast Region are
\$5.00. Fayments should be sent to:
Sue Hughes, Treasurer
%Stoma Clinic
Jewish Hospital
217 East Chestnut St.
Louisville, KY 40202

Dear Ettie

Dear Ettie.

I have a patient, age 56, with a double barrel flush Ileostomy. Proximal to the Ileostomy she has a small bowel fistula. This portion of the bowel is externalized and the doctors have repeatedly tried to repair this defect. The sutures slough right out.. She absorbs nothing or very little through her gut. Miss W. is on hyperalimenation bottle # 1000+.

I cannot keep a bag on her fistula.

She has deep grooves at either side, which deepen on change of position.

I've tried everything and nothing works. The bags may leak immediately or hold for several hours. Its a constant battle to keep her skin intact.

HELP!!!

Desperate
Angie Lamb of Cincy

Dear"Angie from Cincy",
This poor lady does indeed have
a big problem. As an E.T. you can
do little about her medical problems.
However perhaps you could facilitate
removal of drainage from the area,
either by means of suction or dependent drainage from the bottom of the
collection pouch. Another possibility
is a catheter into her stoma proximal
to the fistula. A Foley (with the
balloon inflated to hold it in place)
connected to a bedside drainage bag
usually works well.

Helen and Trudy

EDITORS

Trudy Blied, R.N. Leila Hospital 300 North Avenue Battle Creek, MI 49016 (616)962-8551 ex.506

Helen Arend, R.N. Bronson Methodist Hospital 252 E. Lovell St. Kalamazoo, MI 49006 (616)383-7654 page

2.

COMMENTS ABOUT OSTOMIES IN GREAT BRITAIN

Stoma care techniques and equipment used from country to country vary more widely than they do by local preference in the United States and Canada. As an example, in Great Britain there is a "platform dressing technique" that is used for the care and treatment of skin excoriation around the ileostomy when it is due to improper appliance fitting. Simply stated, this involves the application of a coat of bland or steroid ointment to the skin which is covered by a square of cotton lint(never guaze) in which a stoma opening has been cut. Overall, but without touching even an edge of the stoma, adhesive strapping (tape) is applied to form a platform to which the appliance faceplate is bonded. They recommend that the skin be cleansed with normal saline prior to this application.

Much emphasis upon proper stoma siting is also made in Great Britain; with strong urging for re-sitings of all unmanageable

ileostomies and urostomies.

There are some differences in ostomy terms; a rubber band in the U.S. often becomes an elastic band in Great Britain. Ostomy odor becomes smell; absorbent cotton as we know it is cotton wool. There are minor spelling differences such as diarrhoea. An opening is designated an aperture; adhesive tape is strapping. An ileal conduit is still often called an ileal bladder in Great Britain. Pronunciation differences are also interesting; the most obvious of which is "eye-lee-ostomy" which we call "ill-ee-ostomy".

There is organisational separation of colostomists from ileostomists in Great Britain. The Colostomy Welfare Group (CWG) is a governmental program directed by Mr. Alan Meyer in London. Its volunteer colostomist visitors see new colostomy patients to offer moral support; no medical advice is offered. However, CWG does not hold meetings or conduct other functions comparable to UOA groups. Its functions are entirely limited to visiting colostomists to offer reassurance and consolation.

The Ileostomy Association of Great Britain and Northern Ireland compares more closely to the United Ostomy Association. Its chapters are called divisions and branches; they are scattered

through four regions on the British Isles.

Much responsibility for successful stoma care is still placed upon the patient in Great Britain. With a developing stomal therapy program, these responsibilities will, hopefully, in time be lifted from the shoulders of the ostomy patient.

Harriett Johnson May, E.T. Lafayette, Indiana

Note: The comments here are drawn from reading MODERN STOMA CARE, Edited by Frank C. Walker, Churchill Livingstone, 1976.

United States Senate

WASHINGTON, D.C. 20510

April 8, 1977

Ms. Rosemarie Van Ingen Enterostomal Therapist, Providence Hospital 16001 West Nine Mile Road Southfield, Michigan 48075

Dear Ms. Van Ingen:

I regret that I cannot be present to personally convey my greetings to those attending the Spring Regional Ostomy Conference in Detroit. Nevertheless, I am delighted to have this opportunity to wish you well.

When I had cancer surgery last October, I observed first-hand how a good mental attitude can aid in an ostomy patient's recovery. Frequently, there is a tendency to believe that you are the only person with this type of medical problem--and the fear of the unknown shakes the confidence of the patient and members of the patient's family.

But when it is possible to share that problem with someone else, particularly someone who has experienced it before, the surgery and adjustment following that surgery become easier to cope with and the concerns are greatly reduced.

I cannot tell you what it meant to me to hear from people, of all age groups, throughout the country who took the time to reassure me that all would be well, that they were living full and active lives following ostomy surgery.

Therefore, it is a pleasure to commend the efforts of the United Ostomy Association to lend a helping and informative hand to those in need--as well as to enlist the support of the public in the effort to eradicate this disease. Be assured of my vigorous support.

With best wishes.

Sincerely.

Hubert H. Humphrey

Message from the President:

Saturday, August 13th from 6:30 to 8:30pm is our Regional Membership Meeting. The agenda for this meeting is as follows:

Opening Remarks

Minutes of last meeting -

-approval or discussion

Committee reports

01d Business

- -responses to February proposals
- -induction ceremony
- -tie tacs
- -other

President's Report

New Business

- -By-Law changes
 - *approval or discussion
- -Nominations
- -Letterhead ·
- -Issues
 - *Statehood/Regions
 - *Enterostomal Therapy: A subdivision of Nursing or Allied Health Profession

-Other

On Tuesday, August 16th, we will reconvene from 3:30 to 5pm for election of our Regional officers. Please watch for postings of designated meeting areas. Please read the minutes of the February Membership Meeting in Louisville and the By-Law changes in this newsletter. We will be open for discussion immediately and if there is none, a vote will be taken for approval. Hopefully this procedure will help the business necessities to move more quickly and smoothly.

The conference program looks exciting and educational. It provides something for everyone at his/her level of involvement and interest. Regarding Continuing Education Units for the program, I have a statement from Phillip Pressel, E.T., of the E.T.Journal Editorial Staff.

"Difficulty being encountered in California receprocity for C.E. credit in other states for IAET Conference. You will need to check with your own State Licensing Board to obtain credit. This conference is co-sponsored by the Mercy Hospital and Medical Center Inservice and Education Department. The California Board of Registered Nurses has approved 14 contact hours for the three education days. The BRN provider number is #00097."

I will be asking one person in each of our five (5) state Region to contact the respective State Nurses' Associations to seek approval for C.E.U.s.

Remember the felt badges in red and black which proudly displayed "E.T. 1"? Dig 'em out and bring them to San Diego. We don't want to be mistaken or overlooked. Mary Lou Walker will arrange to have extras on hand for new members.

Look forward to seeing you all in San Diego for a great meeting and good fun.

Recognizing that the Mid - Eas Dropper is a vehicle for equal opportunity advertising of E.T.news and business, the following are some words from Evonne Fowler R.N., E.T., candidate for IAET President.

Joan

Proposed BY -- LAW CHANGES

Article X (formerlyIX) Elections

Section III Election of Officers

The offices of <u>Regional Trustee</u>, President-Elect, Secretary and Treasurer shall be voted upon singly in the above order....

*Article VII (formerlyVI) Board of Trustees

Section I Membership

The Board of Trustees shall consist of the Elected officers, the immediate past President, the <u>Regional Trustee</u>, and two other elected members.

BERKELEY • DAVIS • IRVINE • LOS ANGELES • RIVERSIDE • SAN DIEGO • SAN FRANCISCO



SANTA BARBARA · SANTA CRUZ

DEPARTMENT OF SURGERY

PLEASE REPLY TO: HARBOR GENERAL HOSPITAL 1000 WEST CARSON STREET TORRANCE, CALIFORNIA 90509

During the past five years as a rank and file member, a member of the Board of Trustees and as your Vice President, I have become familiar with the structure, the activities and the goals of the IAET. I have been actively involved at the local, regional and the national level.

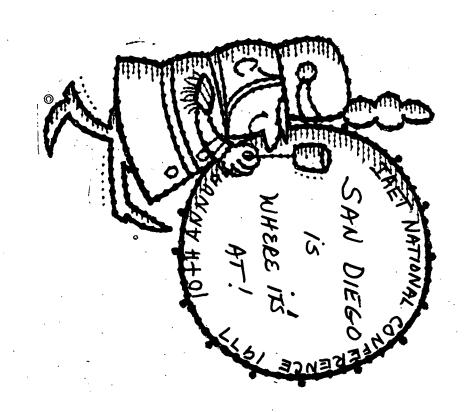
I have served the IAET as a practitioner and educator in the field of Enterostomal Therapy for five years. I have been a coordinator and advisor for the Annual Los Angeles Enterostomal Therapy Symposia. I have been a participant at the regional and national meetings of IAET. I have contributed policy in the areas of salary, insurance and the regional program.

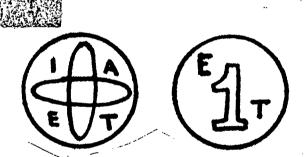
My responsibility as an elected Board of Director is to keep you informed and represent your opinion in formulating IAET policy. I have demonstrated this commitment as editor of the bimonthly Regional Newsline, the media by which the Board of Directors and the Regional organizations communicate.

If elected, I will focus on the financial stability of the IAET, national certification for Enterostomal Therapy and continuing education for IAET membership.

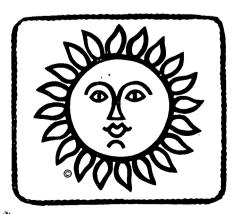
I feel that my work at all levels of the IAET, with the Regional program, with the various committees, my background and experience as a practicing ET and a senior member of the Board along with my committment to the organization will be useful in guiding the new board with continuity and effectiveness. I need your support and vote in obtaining the important office of President of IAET.

Evonne Fowler, R.N., E.T. Vice-President, IAET

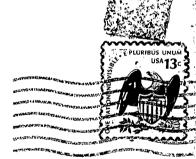




Enterostomal Therapy Department Bronson Methodist Hospital 252 E. Lovell St. Kalamazoo, MI 49006







Harriett May 1424 Warren Place Lafayette, IN 47905

Harriett Johnson May, E. T. 1424 Warren Place Lafayette, Indiana 47905 317-474-9369

VOL. II

OCTOBER 1977

NO. 3

MOVED AGAIN: Your news letter has moved once more. This time from Southwestern Michigan to Southwestern Ohio. Jane Beerck and Joyce Hawley are your new co-editors.

A big thank you for the past efforts of Helen Arend and Trudy Blied and Bette Lowe. Hope to continue along these same lines.

If we don't hear from you out there, we will dish out our own brand. Please, let's have some input from you. You must have a question or two. The most stupid question is the one that never gets asked. We'll crank up "Dear Ettie" and see what comes out.

Don't ASSUME everyone knows that neat trick of yours. Share it with us. You know what you make out of U and ME when you ASSume, don't you?

EDITORS

Joyce Hawley, R.N. Grandwiew Hospital 405 Grand Avenue Dayton, Ohio 45405 (513) 226-3200

Jane Beerck, R.N.
St. Elizabeth Medical Center
601 Miami Blvd. West
Dayton, Ohio 45408
(513) 223-3141 Ex. 561

MIDEAST REGION I.A.E.T.

OFFICERS August 1977-Oct.1978

PRESIDENT—Betty Gerth
PRESIDENT ELECT—Helen Arend
SECRETARY—Sue Hughes
TREASURER—Marquise Kriete
REGIONAL TRUSTEE—Jane Younger
(Jane is our Regional Rep. to
National I.A.E.T.)
TRUSTEES—Sally Thompson

Joyce Hawley Jane Beerck

COMMITTEES

MEMBERSHIP-Marquise Kriete BUDGET AND FINANCE--

Marquise Kriete

EDUCATION--

Ann Ward Phoebe Alphke BY-LAWS--

Sally Thompson
PUBLICATIONS-Joyce Hawley

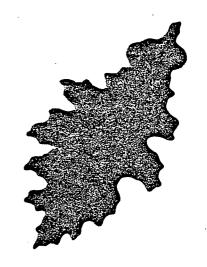
Jane Beerck

HISTORIAN—Harriet J. May PARLIAMENTARIAN—Trudy Blied



MIDEAST REGION DUES

The dues for Mideast Region are now included in payment of National dues. National dues are now \$40.00 per year, and are payable January 1st. This looks like a big increase since we previously paid \$20.00. This increase includes our Regional dues of \$10.00. This amount will be returned to the respective Regions. The growth of our organization necessitated an increase at both the Regional and National levels. Bills will be sent to members from the National organization.



NEW PUBLICATIONS

NURSING 77 September 1977
"The Pouch Ileostomy" Eleanor Hyman,
Frances Ashenmacher

R N MAGAZINE, September 1977
"A New Ball Game for Colostomy Patients"
Charlotte Isler, R.N.

(From the Conference)
"Carbon Urinary Conduits" L.Kobashi, M.D.
Katherine Jeter, E.T., Don Raible, B.S.

National Foundation for Ileitis & Colitis, Inc. 295 Madison Avenue, New York, N.Y. 10017 Write to obtain brochures re: Government benefits for, Diet in, and Pregnancy in Colitis and Ileitis.



REQUEST: REQUEST:

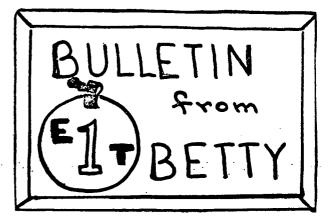
Harriet Johnson May is our Regional Historian. She requests any material of historical significance of the Region to be sent to her:

> Harriet Johnson May St.Elizabeth Hospital & Medical Center 1501 Hartford Street Lafayette, Indiana, 47905



Message From The President:

The Mideast Region is and has been a busy, bustling group. We are now a bit over two years old, growing and going strong. Those of us who attended the I.A.E.T. Conference in San Diego came home much richer in knowledge and friendships. It is truly a pleasure to look back a few years and see how our organization is strengthening and



becoming more professional. I challenge each of you to become an active part of your organization, sharing your talent, or talents, and offering your help and participation as much as possible. We have many jobs and concerns to keep our Mideast and I.A.E.T. growing and going strong.

The minutes of meetings in San Diego, plus board minutes from September 17th in Cincinnati are enclosed. As you will note, there will be a Mideast Regional meeting in Indianapolis on January 7th and 8th. This will be held from Saturday noon to Sunday noon. Saturday will begin with a luncheon, followed by a four hour educational session geared to the E.T. This will not be a workshop open to area nurses, but will provide to Mideast E.T.s alearning experience with C.E.U.'s awarded. Details will follow in the December Nid-Eas Dropper. Be certain to set aside the dates now and plan to be there. There will be no registration fee, only cost of luncheon and continental breakfast on Sunday a.m. Following the breakfast, we shall have our annual Mideast Region-business meeting. We plan to adjourn no later than noon.

Those of you who plan and conduct ostomy workshops in your area, or participate in seminars and workshops throughout the year, please send notice of these to me or Sue Hughes, Secretary. We wish to keep a log of activities going on within the region.

The board of Mideast Region welcomes any suggestions or input you may have to offer for consideration. We shall meet next in Indianapolis following our educational session. If possible, send to me before that time. Please note that any member is welcome to sit in and audit our board meetings and also, the I.A.E.T. boards.

I'm looking forward to serving another term as your president, after Joan Kerr Filled the term between mine. A great big thank you Joan, from each of us in the Mideast. We wish you success and happiness in your educational studies and will look forward to having you back in the clinical field much enriched. Each of us really appreciates your well done job as president this past year. THANKS!

I'll see you all in Indianapolis.

Betty Gerth

DATES TO REMEMBER

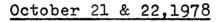
January 7 & 8, 1978



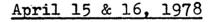
Regional Workshop in Indianapolis. There is no registration fee for this workshop. It will be for members only. The material to be presented is aimed toward updating our patient care. A chance to grow professionally. No title yet, but rumor has it there will be pertinent information on conduit care. Regional meeting at that time, also. (Note to West Va. E.T.s. Louisville E.T.s say if you can make it to Louisville, you will have transportation to Indianapolis.)

April 23-26, 1978

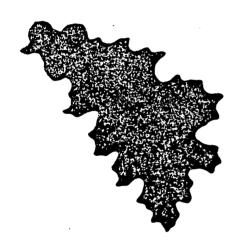
National I.A.E.T. Meeting in Atlanta, Ga. The National meeting is in April, 1978, in Atlanta, Ga. Regional meetings around those Conference dates to be announced. (We'll have to try a "Carter" sandwich that was mentioned in Pittsburgh. If we remember right, it involved peanut butter and balogna.) If planning a budget, a reasonable room will be at least \$32 per night.



This will be our "Annual" Regional Meeting, and it will be held in Cincinnati, Ohio. The meeting will include an educational program for interested professionals. It will be hosted by the Cincinnati area E.T.s.



U. O. A. Regional Meeting Imperial House, Belden Vlg. Canton, Ohio



10/21

"It never rains in sunny California,"
I think thats what the song says. Let
me tell you thats a pure fabrication.
When it does rain, it rolls off the surface of the ground, causing floods. A
five hour flight brought us to sunny
(at the time) California. On to the
motel where our reservations await.
Alass, no room here! What of money
sent previously? Rooms await in another
motel - across the highway. This motel..
This motel... Maybe I can explain it
like this:

Every evening, Pedro Schwartz's Tour Bus stopped here for the night. They were all on their way to.?..? The people were either from World War II Japanese American prison camps or else from the area below the border where they didn't speak the language.

This business of the motel (and the rain) was the only fly in the soup. Everything else at the Conference was great. The city itself was something to see. The bus tour took us to cliffs overlooking the Pacific (a little hazy). Restaurants served delicious food. We liked the meal at the "authentic" Mexican restaurant in Old Town, the original settlement.

Tijuana, Mexico was an experience!
"Hey, lady. Wanna buy a ring?" "Hey
young lady. Wanna buy a leather jacket?" (I bought a coat, Joyce bought
a beautiful ring.) All of Mexico could
not be like that city! Its no wonder
they come by the bus load.

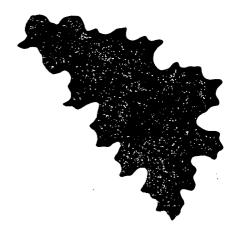
ATTENTION KENTUCKY E.T.s

The E.T.s from Kentucky who attended the Conference in San Diego can apply to their Nurses Association for CEU credits. The form you need is the "Kentucky Nurses Association Continueing Education Unit Approval and Recognition Program Form#4." Obtained from and resubmit to:

Kentucky Nurses Association
Office of Continueing
Education
1400 S. First Street
P. O. Box 8342, Sta. E
Louisville, Kentucky
40208

(This information from Sue Hughes)

For the rest of us who attended, it doesn't look too good. Hold on to some proof of attendance, though. We may still come up with something for CEUs



CONFERENCE 77, OVERVIEW

"It's Educational" "It's Enjoyable" So said the advertisement, and so it was. This was to be the tribute to Dr. Turnbull. The "Father of Enterostomal Therapy" was saluted. His family members and other associates shared some moments with us.

"Complications That Can Occur with an Ileostomy", Dr. Turnbull and Dorothy Rodriguez, E.T. presented the problems and they lead to other discussion. We were cautioned about chemical burns from cement used with a face plate. When to measure for face plate fit? The time suggested - 3 weeks, 6 weeks and 6 months to accommodate stoma changes. The use of belts was discouraged. Patients wear belts too tight, and this can result in stoma cuts and belt ulcers. A Perry Model appliance can be used when skin is so irritated that the regular plate cannot be used. Another slide of complications, this of urinary diversion. Most problems coming from poor hygiene and neglect. Urine should be kept acid with the use of Vitamin C intake, and Pedameth (methionine) taken orally aids in odor control.

"Diagnostic Procedures"
Donald Ritt, M.D.
There are various diagnostic procedures used in assissment for malignancy. History and physical, lab testing and other procedures classified as invasive and non-invasive are used. Dr. Ritt feels the Hemacult slides are the best method to use for cancer screening. The "Scanners" are good non-invasive tools of diagnosis. The air contrast method of barium enema, the best.

"Oncology and Chemotherapy" Karen MacFarlan, R.N. There are four treatment modalities for cancer Surgery, immunotherapy, radiation and chemotherapy. Surgery, curative or paliative. Immunotherapy, where the immune response if increased to better handle the cancer, used as an adjunct. Radiation destroys the cancer and prolongs life. skin that sometimes results from radiation therapy responds to hydrocortone cream. No deoderants or perfume should be allowed on the affected skin. Chemotherapeutic medications are given systemically, regionally and locally. There is a thin line between the therapeutic dose and toxic dose. The dose is determined by height, weight, age, nutritional status, renal function, etc. Drugs are given in cycles, can cure and shrink the tumor mass. Best results when drugs are given in the early stages of disease. Some side effects do occur and treatment may be discontinued. For stomatitis, stay away from spicy foods, do not use mint flavored mouth wash. Use 1 tbsp of MOM for mouth wash. Soda bicarb toothpaste, and a child' toothbrush, should be used. Antiemetics and "Mary Jane" help control the nausea and vomiting. Bromptoms (sp?) mixture is used for pain relief. Given orally, some ingredients-morphine, cocain, ethyl alcohol and cherry flavor. then emphasized the importance of communications and especially to listen to the cancer patient.

"Unproven Methods of Cancer Treatment" Kim Taddie, R.N., E.T. Discussed the cancer quackery available for a price. She included research on Laetril.

"Pain and Biofeedback" David Engstrom, PhD Biofeedback was described as the process of giving the patient information of body processes they usually do not have. Instruments then amplify the body reaction . and the patient can controll the reaction. What ever treatment is given, must be what the patient thinks will work. Biofeedback is one technique of behavior therapy. Each patient has a set of body responses to stress. Biofeedback quiets the "noise" and concentrates on one response which the patient learns to control. Other practical considerations for pain control:1.Fully inform the patient of expected discomforts. 2.Desensitization 3.Deliberate use of suggestion. ex. hypnosis, acupuncture. 4.Distraction, get attention away symptoms (biofeedback). 5. Self control for reduction of symptoms. ex. relaxation techniques. 6. Teach patient to be better able to judge when they need medication and 7. Relearning social rewards.

"New Dimensions in Cancer Research" This was technical. Tumor cells from patients are transplanted to animals in the lab. Here the tumor can be treated with various forms of therapy. They can thus determine the best treatment modality for this tumor.

"Update on the Kock Pouch"
Robert W. Beart, Jr.M.D. Slides
were shown of the statistics re:
problems and successes encountered in this surgery. Of the last
50 patients who had this surgery
performed, 96% were continent.
Pre and post op care very important. There are 180 patients thus
far operated. Of these patients,
92% claim to be happy with the
pouch.

"Care of the Internal Pouch" Arlene Wentworth, R.N., E.T. An ostomy visitor is used preoperatively. Postoperatively, the catheter is left in the pouch. It is connected to lo Gomco suction. The catheter is irrigated every 3 - 4 hours (and prn) with normal saline. There is a ten day to three week hospital stay. Some patients have been known to go home with tube still inserted at six weeks. Patients are intubated every 2 - 4 hours while awake and connected to suction at HS. Intubated while sitting on the edge of the bed at first (some patients faint the first time.) Then into the bathroom, sitting on a stool in front of the john. Dietary precautions seemed the same as that for any ileostomate. A Booklet on the Ileo pouch procedure can be obtained from Mao Clinic, Rochester, Minnesota.

"Carbon Conduit" Luis I. Kobashi, M.D. The carbon conduit has been used on animals with great success. The surgery was shown to us in slide presentation. Since April of this year, two such surgeries have been performed in Huston, and two in Germany.

The mini-workshops were very informative, and the ETs were so great with all their sharing. Some of the things, a refresher; some, totally new. We saw impressions made of the body contour around a fistula, much the same as an impression made for dentures. From this impression they made a face plate - custom fit!

The lady from Canada, Helen Manson demonstrated with slides, a decubitis care regime using 20% Benoxyl lotion. Unfortunately (I found out), we can get just 5% or 10% solution here in the U.S.A. She also showed her slides of Vitamin E on stasis ulcers.

Additional comments: There were over 400 of the 805 ETs at San Diego. The National I.A.E.T. is now fully regionalized with 12 regions.

The Luau was hosted by United with an open bar before the dinner. Because of inclement weather, the Luau was an indoor affair. Even so, the "dress" for the evening was Hawaiian and very colorful. There were two tables overflowing with fresh fruit and polynesian chicken and ribs.

Some nice words for the "Father of Enterostomal Therapy" from our Norma Gill. The U.O.A. and the I.A.E.T. exchanged greetings, as this is the last National meeting that is planned together (U.O.A. meets in Dallas, August, 1978, and I.A.E.T. meets in Atlanta, Ga., April, 1978.) Installation of officers was next, followed by Hawaiian entertainment. A truly Great time:

A big salute to Melba Connors and her California E.T.'s for planning such a fine and varied program.

Many lectures were taped and the tapes offered for sale. Enclosed in this news letter is an order form to obtain the tapes if you desire.



The membership meeting of the Mideast Region of the I.A.E.T. was called to order at 3:15 P.M. in the Squibb Hospitality Suite at the Town and Country Hotel, San Diego, California on August 16, 1977 by president Joan Kerr.

There was a discussion about coming regional meetings. It was suggested we have a wilkend meeting starting Saturday noon and running until Sunday noon. Saturday would be devoted to educational material and Sunday A.M. we would have a business meeting. It was decided to have a meeting this fall, November 19 and 20 in Ind ianapolis. Phoebe Alfke and Anne Ward volunteered to plan and arrange this meeting.

At this point, it was determined that we had a quorum.

Sue Hughes stated that the new dues collection policy would go into effect now. National I.A.E.T. will collect dues and rebate a portion to the regions. Joan urged members to make early payment.

Joan Kerr stated that we now have operational manuals which will define the duties of the officers. Each regional officer will get one.

The subject was raised about giving financial support to regional officers attending meetings. The members felt that the Board members should be helped with expenses incurred in attending meetings. The national I.A.E.T. will support the regional representatives in meeting their expense costs.

Election of officers followed.

Joyce Hawley presented the slate of officers:

National trustee--Jane Younger

President--Betty Gerth

President-elect--Helen Arend

Secretary--Sue Hughes

Treasurer--Marcquise Kreite

Regional trustee--Jane Burke

Helen Meyer

Sally Thompson

Joyce Hawley

Nominations were opened for president. Motion was made by Harriet May and seconded by Trudy Bleid to close nominations. Motion passed by majority affirmative vote. Motion made by Trudy Bleid and seconded by RoseMarie Van Ingen to cast a unanimous ballot for Betty Gerth. Motion passed by majority affirmative vote.

Nominations were opened for President-elect. Motion made by K. Wood and seconded by Sue Buffin to close nominations. Motion passed by majority affirmative vote. Motion made by Sue Buffin and seconded by Trudy Bleid to cast a unanimous ballot for Helen Arend. Motion passed by majority affirmative vote.

Nominations opened for secretary. Motion made by K. Wood and seconded by Sally Thompson to close nominations. Motion made by Sue Hughes and seconded by Phoebe Alfke to cast a unanimous ballot for Sue Hughes. Motion passed by majority affirmative vote.

Nominations were opened for treasurer. Motion made by Sue Buffin and seconded by Trudy Bleid that nominations be closed. Motion passed by majority affirmative vote. Motion made by Jane Younger and seconded by Helen Arend that we cast a unanimous ballot for Marquise Kreite. Motion passed by majority affirmative vote.

Nominations were opened for national trustee. Motion made by Helen Arend and seconded by Joyce Hawley that nominations be closed. Motion passed by majority affirmative vote. Motion made by K. Wood and seconded by Sue Buffin that we cast a unanimous ballot for Jane Younger. Motion passed by majority affirmative vote.

Nominations were opened for regional trustee. Motion made by K. Wood and seconded by Sue Buffin that nominations be closed. Ballot voting for regional trustees followed. Phoebe Alfke and Anne Ward were tellers.

During the ballot counting a discussion followed about proxy voting. It was suggested that the region think of starting this procedure on a regional level. Another topic discussed was organization on a state level. This could take place in 5 years. Probably we would still have a regional organization.

The tellers returned with the ballot count. The regional trustees elected were Joyce Hawley and Sally Thompson.

Meeting was adjourned at 4:30 PM.

Respectfully Submitted,

Selen M. Grend

Helen M. Arend, secretary Mideast region, I.A.E.T.

MIDEAST REGION TREASURERS REPORT

08/23/76	Balance Dues Collected I.A.E.T. Reimbursement Mideast Region Symposium TOTAL		\$2,575.17 460.00 32.85 1,000.00 \$4,068.02
08/23/76 08/23/76 09/22/76 10/28/76 11/02/76 11/23/76 01/14/77 01/14/77 01/14/77 02/12/77 03/30/77	Mideast Region Room National Conference Wm. Penn Refreshments for Mideast Region Meeting Savings Account Postage for Newsletter Postcards - Dues Reminder Newsletter Typing Postage for Newsletter Betty Gerth - Postage Jostens - Officers pins Newsletter Typing I.A.E.T. Membership Labels Long Distance Phone Calls Mideast Region Symposium	\$ 308.04 38.72 2,200.00 24.00 9.00 10.00 13.91 1.96 352.64 30.00 15.00 12.00 15.00	·
	Present Balance as of 08/10/77		-3,030.27 \$1,037.27
103 F.T.'s	Savings Account Deposit 09/22/76 Interest 12/31/76 Interest 03/31/76 Deposit 04/8/77 Interest 06/30/77 TOTAL in Mideast Region		\$2,200.00 24.85 27.60 1,226.38 42.45 \$3,521,28
90 Paid M	embers	·	

Sue Hughes - Ineasurer Sue Hughes, Treasurer Minutes
MIDEAST REGION OF I.A.E.T.
BOARD OF DIRECTORS MEETING
September 17, 1977
1:00 p.m. - 5:40 p.m.

Present: Jane Beerck, Helen Arend, Marky Kriete, Sue Hughes, Jane Younger and Betty

Gerth. Guest: Mary Lou Walker

Absent: Sally Thompson, Joyce Hawley, and Trudy Bleid

A quorum was verified.

Item

Transaction

Old Business:

Minutes of Board of Directors Meeting, August 17, 1977, San Diego, California, were read.

In response to minutes, Jane Younger stated that the Mideast Region Membership Meeting was not the only meeting held during the manufacturer's display period. I.A.E.T. Meeting was also in progress. In order to correct this incident, the following suggestion was made: meeting date be extended in order to allow time for much needed business meetings.

It was also suggested that for future conferences the hospitality hours be rearranged in order to allow people to have dinner before socializing at the hospitality suites. This could possibly eliminate many uncomfortable situations.

Membership Committee:

Marky Kirete was appointed Chairman of the Membership Committee. She accepted this appointment.

Treasurer's report was read and approved. (Report Attached)

Newsletter Committee:

Jane Beerck and Joyce Hawley: Jane Beerck stated that she feels they will be able to have the newsletter out by October 1.

Suggestions for newsletter content were:

- 1. Report of San Diego Conference
- 2. President's Message

Post Convention Board
Meeting:

Jane Younger reported that it was an orientation meeting to introduce everyone to their jobs. The next meeting will be the Semi-Annual Board Meeting in January, 1978, in Houston, Texas.

Several suggestions were given to Jane throughout the meeting to bring up as topics of discussion at the next National board meeting. (Letter with suggestions is attached to minutes).

ET Day:

March 17 has again been designated as ET Day. Last year this was recognized in Indiana and Michigan only. The request for ET Day must be submitted each year in order to be redesignated.

Letters will be sent to someone in each state in the Mideast Region to volunteer to write the Governor of their state for this proclamation.

ET Day, Cont'd:

The following people will be notified:

Ohio -- Pat Hurd
Kentucky -- Marjorie Rose
Indiana -- Jane Younger
Michigan -- Natalie Dutch
West Virginia -- Nancy Martin

These proclamations should be sent to Harriet May, our Historian as they are received.

It was also stated that since Harriet May has agreed to be our Historian, that all pertinent pictures, articles, and anything of interest involving the Mideast Region should be sent to her. Betty Gerth showed the recognition certificate welcoming the Mideast Region into affiliation with the I.A.E.T. The day of affiliation being August 21, 1975.

Continuing Education:

The group as a whole was displeased with the manner in which Continuing Education Units were handled for the 9th Annual I.A.E.T. Conference. A certificate of attendance was not distributed, and in order to apply for CEU's, one is required. Jane Younger will channel this concern to the National Board of Directors Meeting, with possible suggestions for a remedy.

Education Committee:

Anne Ward and Phoebe Alfke are together planning a professional education day for ET's in Indianapolis. This will consist of an informative program including a rap session. Also, the Annual Regional Membership Meeting will be planned into the agenda. This meeting was originally planned for November. However, they feel this date is too close to the National Conference in San Diego, and will not allow them adequate planning time. January 7 and 8 were decided upon as alternate dates. Weather was a major factor of consideration in this decision, however, it was felt that a later date would put the meeting too close to the National Conference in April. Sue Hughes was requested to send a letter to Anne and Phoebe to inform them of the date change.

Charging a fee for the Professional Education Day for ET's was discussed. It was decided that the Mideast Region should assume responsibility for providing some continuing education for its members. Therefore, a registration fee will not be charged. However, transportation, lodging and meals will be at the individual's expense.

Possible transportation arrangements for those ET's who would find distance a barrier to their attendance was discussed.

Annual Regional Mtg.:

It was decided that the Mideast Region Annual Membership Meeting would not be scheduled during the National Conference. Helen Arend suggested that specific dates be decided upon in advance for future annual regional membership meetings. Arbitrarily, Friday, October 21 and Saturday, October 22, 1978, were chosen as the dates for the next regional educational meeting.

Annual Regional Mtg. Cont'd:

This would consist of a full day's program for nurses and pharmacists, followed by a Saturday business meeting and professional meeting for ET's. This is intended to be a financially profitable endeavor. Also, a Pre-Board Meeting should be held Friday night.

Finance Committee:

Since our treasury is fairly substantial, it was decided that there is a definite need for a working budget, therefore, constituting the need for a Finance Committee.

Sue Hughes, Jan Joseph, Judy Welch, and Betty Gerth were named members of the Finance Committee with Marky Kriete as the Chairman. The following suggestions were agreed upon:

- The treasurer should definitely be bonded. It was estimated that this would cost approximately \$60 per year.
- 2. The treasurer should be authorized to spend a certain amount at her discretion not to exceed \$300.
- 3. A policy for reimbursement of board members needs to be established.

A motion was made by Jane Younger that the Mideast Region reimburse Board members for expenses incurred to Mideast Region Annual Meeting. This reimbursement would consist of \$.15 per mile or air fare, whichever is less, and double occupancy room rates. The motion was seconded by Mary Lou Walker. Motion was approved and carried.

- 4. All committee chairmen should submit an operational budget to the Finance Committee.
- 5. We also need to use an expense voucher. It was suggested we use the same expense voucher used by the I.A.E.T.

A discussion concerning the best utilization of the funds in our savings account was discussed. A motion was made by Helen Arend that we transfer \$1,000 from our savings account to a certificate of deposit. The certificate will be retained by the treasurer with the suggestion it be kept in her hospital vault. Jane Younger seconded this motion. It was approved and passed.

By-Laws Committee:

Sally Thompson, By-Laws Chairman, was unable to attend this meeting, however, she sent copies of the By-Laws brought up to date with all changes up to and including San Diego. The entire By-Law booklet was reviewed at this meeting and proposed amendments will be sent to the entire regional membership 30 days before the Annual Regional Membership Meeting for voting.

Speakers Review Board:

There seems to be some confusion as to the intended function of this board. This will need some clarification and discussion at our annual meeting.

There being no further business, the meeting adjourned at 5:40 p.m.

Respectfully submitted,

Sue Hughes, Secretary



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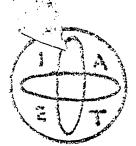
INTERNATIONAL ASSOCIATION FOR ENTEROSTOMAL THERAPY 1977 CONFERENCE

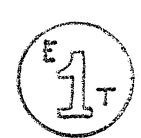
August 14 thru 17, 1977 - San Diego, California

- Tribute to Dr. Turnbull Melba Connors, R.N., E.T.
- "Complications That Can Occur With an Ileostomy", Rupert Turnbull, M.D. Dorothy Rodriques, R.N., E.T.
- "Diagnostic Procedures", Donald Ritt, M.D. 3.
- "Oncology and Chemotherapy", Karen MacFarlane, R.N. 4.
- "Pain and Biofeedback", David Engstrom, Ph.D. 5.
- 6. "Unproven Methods of Cancer Treatment", Kim Taddie, R.N., E.T.
- "New Dimensions in Cancer Research", Lola Reid, Ph.D. 7.
- "Update on the Koch Pouch", Robert Baert, Jr., M.D. 8.
- "Care of the Internal Pouch Patient", Arlene Wentworth, R.N., E.T. 9.
- "The Carbon Conduit", Luis I. Kobashi, M.D. 10.
- "Colostomy Care", Fran Sonies, R.N., E.T. 11.
- 12. "Colostomy Care", Gerry Cameron, R.N., E.T.
- "Ileostomy Care", Karin Gallagher, E.T. 13.
- 14. "Ileostomy Care", Margot Julian, R.N., E.T.
- "Urinary Care", Katherine Jeter, E.T. 15.
- 16. "Urinary Care", Ted Smith, E.T.
- 17. "Pediatrics", Lois Corti, R.N., E.T.
- 18. "Pediatrics", Lana McKinley, LVN, E.T.
- 19. "Sex and the Handicapped", Patti Rosen, R.N.
- 20. "Fistulae and Draining Wounds", Rosemary Watt, R.N., E.T.
- 21. "Fistulae and Draining Wounds", Evonne Fowler, R.N., E.T.
- 22. "Decubitus Care", Karen Burke, E.T.
- 23. "Decubitus Care", Helen Manson, R.N., E.T.
- "Death and Dying", June Lowenberg, R.N.

 Total Tapes		Name & Address:
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 (50¢ each-\$5 max.)		
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Jane Beerck - Ins. Ed. Dept. St. Elizabeth Medical Center 601 Miami Blvd. West Dayton, Ohio 45405

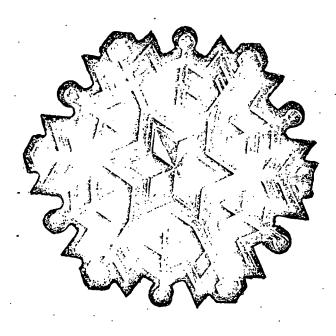
Harriett May 1424 Warren Place Lafayette, IN 47905

Mi-CB RORES

VOL. III

DECEMBER 1977

NO.



EDITORS

Joyce Hawley, R.N. Grandwiew Hospital 405 Grand Avenue Dayton, Ohio 45405 (513) 226-3200

Jane Beerck, R.N.
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Dayton, Ohio 45408
(513) 223-3141 Ex. 561

MIDEAST REGION I.A.E.T.

OFFICERS August 1977-Oct.1978

PRESIDENT—Betty Gerth
PRESIDENT ELECT—Helen Arend
SECRETARY—Sue Hughes
TREASURER—Marquise Kriete
REGIONAL TRUSTEE—Jane Younger
(Jane is our Regional Rep. to
National I.A.E.T.)
TRUSTEES—Sally Thompson
Joyce Hawley
Jane Beerck

COMMITTEES

MEMBERSHIP-Marquise Kriete BUDGET AND FINANCE--

Marquise Kriete

EDUCATION-Ann Ward
Phoebe Alphke
BY-LAWS--

Sally Thompson
PUBLICATIONS-Joyce Hawley
Jane Beerck

HISTORIAN-Harriet J. May PARLIAMENTARIAN-Trudy Blied



MIDEAST REGION DUES

The dues for the Mideast Region are now included in payment of National dues. National dues are now \$40.00 per year. The latest on our dues paying is that we will be able to pay \$20.00 in Jan. and another \$20.00 in June.

NEW PUBLICATIONS

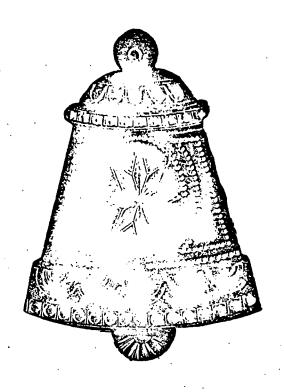
NURSING 77 November, 1977
"Six Patients with Bladder Cancer"
Patricia L. Gault, R.N., BSN, MEd.

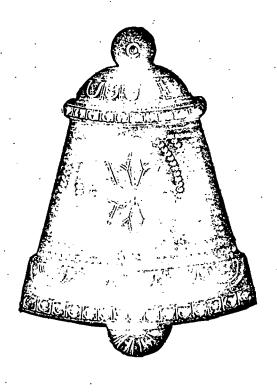
AJN November, 1977
"Stress Response in Critically III
Patients" Carol A. Stephenson, R.N., M.S.N.

AJN November, 1977
"Stress in the Surgical Patient"
Margaret Boyle Marcinek, R.N., M.S.

AJN October, 1977
"Helping Families Face the Crises
of Cancer" Barbara Giacquinta, R.N., PH.D.

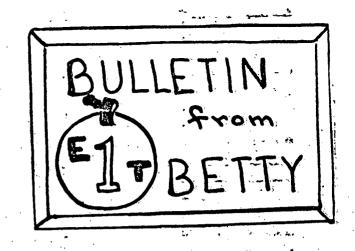
"Dial Access System"
This is a toll free service where
you can dial and listen to requested tapes about all aspects of
cancer care. There is a tape on
stoma care included. This catalogue
of tapes is available through your
local American Cancer Society. The
tapes were made by the University of
Texas, System Cancer Center,
M.D. Anderson Hospital and Tumor
Institute, Houston, Texas.





Message From The President

Greetings to all the Mideast Region. Where does the time go? The Holiday Season is here and I wish each of you and your families the very happiest ever.



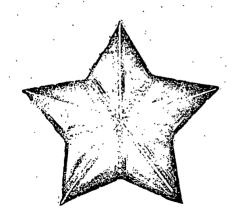
Soon we'll be ringing in the New Year and then comes January 7th with our Mideast Regional in Indianapolis. Be sure and make your reservations at the Holiday Inn S.E. Ann Ward and Phoebe Alfke have planned a really great educational afternoon for us on Saturday.

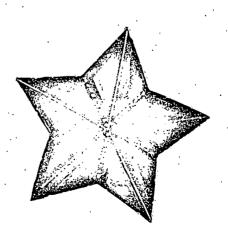
Sunday a.m. following brunch, we shall get our business meeting underway. We have a lot to accomplish, as by-lays, etc. So look them over and bring your input to improve ourselves. Again, meeting time is noon to noon.

To each of you who are new to our organization, or attending for the first time, welcome - come and get acquainted.

Also, set aside April for the I.A.E.T. Annual meeting. Beginning in 1978, our Annual will be each Spring, and Regional each Fall. The Fall Regional will be held in Cincinnati the weekend of October21st. Mark your calendars for the year and we'll see you in January.

Betty Gerth, R.N., E.T. President, Mideast Region





1874 Wateroak Drive W.

Clearwater, FL 33516

September 23, 1977

To: All Regional Presidents

Dear President:

I am sure at this time you have not thought about our next Convention which will be in April, but since the term is short, we must address ourselves to the offices which will become vacant at our next Convention. We need from each Region thought and consideration regarding the offices of Treasurer and Secretary of I.A.E.T. Of course, all Regions will be responsible for electing their own Trustee.

The qualifications are as follows:

Any regular member in good standing shall be eligible for nomination and election to any elective office of this corporation, providing he shall have served at least one year as a member of the Board of Trustees at any time prior to an elective term of office.

Persons nominated shall give consent and acknowledge the responsibility for the position nominated for.

If you have a nominee who meets the requirements, do send their letter of acceptance and their resume to me at the address above, or to the other members of the Nominating Committee:

'Karen Davis, R.N., E.T.
Southern California Permanente Medical Group
1526 Edgemont Street
Los Angeles, CA 90027

or

Ann Lee, R.N., E.T. 2922 Southland Blvd. San Angelo, TX 76901

Would you please give this matter your immediate attention. Thank you in advance for your cooperation.

Sincerely,

Mrs. Anita Kotheimer, E.T.
Chairman, Nominating Committee

NEW ADDRESSES

Bonnie Bollinger, L.P.N., E.T. 470 Fairwood Ave., Apt. 153 Clearwater, Fla. 33519

Harriet Johnson May, E.T. 1424 Warren Place Lafayette, Indiana 47905 (Regional Historian, requests material of historical significance of the Region be sent to her.)

Mrs. Phoebe Alfke, E.T. Long Hospital #260 1100 West Michigan St. Indianapolis, Indiana 46202

Rita (Highsmith) Wray 1504 Northcrest Avenue Columbus, Ohio 43220

Barbara Howe 1708 Hiawatha S.E. Grand Rapids, Mich. 49506

NEW E.T.'S

The following nurses have recently completed their E.T. training:

Nancy Atwell, R.N., E.T. 2720 University, A pt. 10 Morgantown, West Va., 26505 (West Virginia University Hosp.)

Mrs. Janet L. Bryant, R.N., E.T. 1388 Lietz Ave. Akron, Ohio 44301 (Akron General Medical Center)

Agnes Yost, R.N., E.T. 686 Glenhurst Road Willowick, Ohio 44094 (Cleveland Clinic Hospital)

RECENT HAPPENINGS

Five Cincinnati area E.T.'s conducted an all day seminar for 115 nurses at Brown County Hosp., Georgetown, Ohio, Nov.1st.
Attendance and evaluations were "excellent." We were really pleased to have such a positive response and feel it was a worth-while endeavor to carry information of basic ostomy and drainage care to this area. A total of eight counties were reached. Attending were nursing staff from area community hospitals, visiting and public health nurses, and nursing homes.

Those participating were:

- 1. Mary Angela Lamb, R.N., E.T. Good Samaritan Hosp. Cincinnati, Ohio
- 2. Jackie Kunkle, R.N., E.T. Jewish Hospital Cincinnati, Ohio
- 3. Margie Dreffer, R.N., E.T.
 Bethesda Hospital Oak
 Cincinnati, Ohio
 - 4. Nancy Terry Cohen, R.N.E.T. Fort Hamilton Hughes Hosp. Hamilton, Ohio
 - 5. Betty Gerth, R.N., E.T. Bethesda Hosp. North Cincinnati, Ohio
 - 6. Dr. Ronald Fegelman, Gen. Surg. Department of Surgery Jewish Hosp., Cincinnati, O.
 - 7. Dr. V. Quiambo, Urology
 Department of Urology
 Bethesda Hospitals, Cincinnati.

This was co-sponsored by ACS and Brown County Hospital

RECENT HAPPENINGS CONT D

"Nursing Care of the Surgical Patient: Ostomies" Nov. 15th and 16th Miami University-Hamilton Campus Instructor: Nancy Terry Cohen, R.N., E.T. The program involved "Stomal and Skin Care and Practice Session."

Joyce Hawley, R.N., E.T. spoke to members of the Dayton Ostomy Chapter, October 26 "Bringing You San Diego" (Yes, folks she has recovered from her recent surgery and is back in the swing again) Joyce spoke of the National I.A.E.T and National U.O.A. Meetings in San Diego.

In case you may know of someone interested in obtaining a subscription to our E T Journal, we are enclosing an application. Interested persons could be your Medical library or your local U.O.A. chapter.

Please Check One:

DATES TO REMEMBER

January 7 & 8, 1978 Regional Workshop in Indianapolis. For members only. Updating our patient care.

April 23-26, 1978 National I.A.E.T. Meeting in Atlanta, Ga. Regional meetings around the Conference dates to be announced.

July, 1978 The first IAET/UOA Youth Ostomy Conference to be held at the University of Colorado, Boulder.

October 21 & 22, 1978 This will be our "Annual" Regional Meeting, Cincinnati, Ohio. Will include an educational program for interested professionals.

(Please Note: For those of you who might be attending the National meeting for the first time, the business meeting has previouly started on Sunday at 8 a.m. Also, the banquett and installation of officers will be Wednesday night. So plan your time accordingly so as not to miss anything.

Subscription Extension

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New Subscription



Dear Mideast Region Members,

As your elected Trustee to I.A.E.T., I would like to convey my personal thanks to all of you for the vote of confidence and pledge of your support. The pin which you have given me is appreciated and will be a reminder of the job which I have undertaken.

The future promises to be a busy and, I hope, a productive time. {
Please keep me informed of your progress as well as problems that occur.
Information can be channeled through one of the Mideast Region Officers or sent directly to me. Looking forward to working with and hearing from you in the coming year.

Sincerely,

Jane Younger, R.N., E.T. Mideast Region Trustee to

Jane Trunger

I.A.E.T.

CRIXILINE TIPS:

When using 8 x 8 sheets, and the pouch does not cover the needed Crixiline, use powder (Sween, cornstarch, etc.) to keep from sticking to linens.

To remove Crixiline from patients skin, KY jelly on a cotton swab and gently work beneath the square to remove.

It is sometimes difficult to remove Crixiline from a face plate when using as a double faced adhesive barrier. Use a cotton swab and Isopropyl Alcohol to remove it from the faceplate (not the skin.)

Prior to cutting openings in Crixiline, lubricate your scissors with KY jelly.

A narrow strip of Crixiline spiraled around the penis with an external catheter on top of same, helps secure the Texas cath.

Dear Ettie

Dear Ettie,

Some of my patients with fistulas have very thick and copious drainage. The nurses can't keep the pouch emptied fast enough and the drainage is too thick to go through the drainage tubing into a bedside bag. Can you help?

Too full, too fast

Dear T.F., T.F.

The best solution to your problem is to look for very large bore tubing of some kind. If chest tube tubing is too small, try using the inhalation therapy department tubing. Fasten the end of the drainage pouch to one end and have the other end go into a drainage bottle on the floor. if odor is a problem, seal the bottle connection with a rubber cap or gloving.

Dear "Ettie".

My problem c oncerns charging for E.T. services. I am employed by a hospital under the Nursing Service Department. There has never been a charge for any of my services——inpatient, outpatient, lecturing to local Community College R.N. and L.P.N. students, etc.

With the spiraling increases in hospital costs I feel that this hospital will have to institute these charges sooner or later and would like some guidelines on how to impliment charges to the patient, what to charge for various services and how to bill third party payers. My investigations so far show that this is a sort of "grey" area. Everyone seems to do it differently and some do receive payment without question while others are refused. I'm confused and would like some ideas on the best way to charge a fee and receive payment.

Red Tape Ruby

Dear Red,

To say this a "grey" area is the understatement of the year. Third party payment is getting the big push nationally right now and most E.T.'s apparently do not get payment in this manner.

Charges are indeed many and varied. Some E.T.'s charge as little as \$5 and as much as \$15 for an Out-patient Clinic visit. Some E.T.'s grant two follow-up visits, included in patients "in-house" hospitalization.

For hospitalized patients with a new stoma, a flat \$40.00 was charged by some. If the patient has an old stoma, the charge is \$25. This covered the entire stay.

We couldn't find Charging being done for the Community Colleges.

These are just a few examples we found by asking "around," and we would like very much to hear about a few more.

Ettie



Dear Ettie:

I have a permanent sigmoid colostomy. As part of my regular annual check-up, my doctor orders colon x-ray, which means a barium enema through my colostomy. The first one was a disaster! Barium and you-know-what was all over me and the x-ray table as soon as the balloon of the Foley catheter was deflated! -- Then a trail of more of the same between table and toilet. Isn't there a better way?

Barium-Shy

Dear Shy:

This is one way to manage your situation. A "Kit for Barium Enema per Colostomy" is ready in Radiology's Special Procedures Room. It contains the following supplies:

- 1. Cone tip -- United 2046
- 2. Irrigating sleeve -- Hollister #7724
- 3. Large Karaya gum washer -- Marsan #328-L
- 4. Hollister bag clamp
- 5. Hollister belt
- 6. Micropore tape and lubricant

Method:

- 1. Wash, dry peristomal area.
- 2. Prepare irrigating sleeve: close lower end with clamp, attach moistened, tacky karaya washer to plastic gasket, fasten one end of belt to gasket.
- 3. Adhere washer (which is now on gasket) to peristomal area.
- 4. Fasten other end of belt in place.
- 5. Reinforce around gasket with micropore tape.
- 6. Lubricate cone tip, insert into stoma via open top of irrigating sleeve. (This tip has been previously attached to tube of barium bag.)
- 7. Ask patient to hold cone in position firmly enough to prevent backflow of barium.

Cone is held in this position throughout barium instillation and until all preevac films are completed and checked. When cone is removed, patient can walk to toilet, expel colon contents, rinse sleeve, get back onto table for post-evac films, then often wears this same sleeve home as security. He can even use the sleeve for cleansing irrigation which should follow. His clothing remains clean.

Comments from the radiologist -- clean, clear films! From the radiology clean-up crew -- no sweat!

The early years

When a need was recognized to develop and establish regional divisions of the International Association for Enterostomal Therapy, a Policy Statement was developed by Rosemary Watt (dated August 7, 1974), and an IAET Regionalization Committee was organized. This committee was chaired by Evonne Fowler and included six other IAET members from Canada and various American geographic locations. Bonnic Bolinger of Dayton, Ohio represented the midwestern United States.

The first Mideast Regionalization meeting was held February 22-23, 1975 in Pittsburgh at the time of the United Ostomy Association's Great Lakes Region Presidents' meet-IAET members who were attending the UOA Great Lakes Regional Conference on April 5-6, 1975 held another organizational meeting at the Airport Hilton Hotel in Indianapolis. 35 or the 41 IAET members from this region attended the Indianapolis meeting. States included in the UOA Great Lakes Region were listed as Delaware, Indiana, Kentucky, Maryland, Michigan, Ohio, Virginia, and West Virginia. Another organizational meeting was held when several ETs from the UOA Great Lakes Region met at the Park Plaza Hotel in Cleveland, Ohio on April 27, 1975.

Before the first of these organizational meetings was held, Bonnie Bolinger had sought input from retional ETs for issues to be discussed during region organizational meetings. When Bonnie consented to fill Katherine Jeter's vacated position as Corresponding Secretary, Betty Gerth consented to serve as the Mideast Region's representative to IAET until organization was completed and officers were elected.

Articles of Conference of Great Lakes Conference for Enterostomal Therapy were drawn. These were based upon the IAET's Articles of Association. Subsequently these were revised and retitled Articles of Association of Mideast Region, A Division of IAET, Inc. These were presented by Joan Kerr at the April 27. 1975 regional organization meeting in Cleveland. Although the IAET division was designated the Mideast Region, the member states remained the same as those of UOA's Great Lakes Region.

A regionalization proposal was submitted to the IAET Board of Trustees entitled, "Regionalization of International Association of Enterostomal Therapists - 1975" by the IAET Regionalization Committee. This proposal was accepted by the Board of Trustees March 1, 1975.

One of the first contributions that ETs from the Mideast Region made to IAET was a proposed Job Description which was written by Harriett May. The work was based upon the several job descriptions that were furnished to her by ETs from the Mideast Region. Although this work was submitted before the Mideast Region was formally organized, it was the joint effort of Mideast ETs that later was amended and approved by IAET.

The Mideast Region of IAET has distinguished itself by many firsts. An amended constitution dated July 1975 and the application for the organization of the Mideast Region of IAET was approved by the IAET Board of Trustees on August 20, 1975 at the 7th Annual IAET Conference at the Royal York Hotel in Toronto.

At the first Regional Meeting in Toronte, it was noted that Washington, D.C. had been inadvertently omitted from the Mideast Region; this error

The following offiwas corrected. cers and trustees were elected by the 37 members present in Toronto: Betty Gerth - President, Joan Kerr - President Elect, Jane Younger - Treasurer, Sally Thompson - Secretary, and Sue Buffin, Louise Young, and Bette Lowe-Trustees. The following doctors consented to serve as medical advisors to the Mideast Region: Dr. Ananias C. Diokno of University Hospital in Ann Arbor, Dr. Victor Fazio of the Cleveland Clinic, Dr. W. Patrick Mazier of Ferguson Clinic in Grand Rapids, and Dr. Joseph Rinaldo of Providence Hospital in Southfield, Michigan. Annual regional dues were set at \$5.00.

The Mideast Region presented its first symposium on Colostomy, Ileostomy, Urinary Diversion, and Skin Care for Nurses and Allied Health Professionals on February 20, 1976 at the Holiday Inn of Englewood, 0. to 346 participants. The symposium was followed by the semi-annual Mideast Regional meeting on February 21-22, 1976 in conjunction with the UOA Leadership meeting.

A Mideast membership list was compiled and distributed to the membership. Mideast Regional Newsletter-Vol. 1, No. 1 was dated April, 1976. Bette Lowe was its first editor. Newsletter offered informative news of interest to Mideast ETs. An attached scientific article demonstrated Issue", the value of the Newsletter as an educational vehicle within the region. The second issue, Vol. 1, No. 2 dated June 1976 included the slate of officers proposed for the Mideast Region election to be held at the 8th Annual IAET Conference at the William Penn Hotel in Pittsburgh in August, 1976, in addition to informative news and scientific papers. curriculum vitae for each candidate was included.

Officers and trustees elected in Pittsburgh were Joan Kerr- President, Jane Younger- President-Elect, Helen Arend- Secretary, Sue Hughes- Treasurer, and Gertrude Blied, Juanita Jenkins, and Sally Thompson- Trustees. Delaware, Maryland, Virginia, and Washington, D.C. seceded from the Mideast Region to form the Mid-Atlantic states region for better geographic advantage.

Recommended by-law changes were presented and approved at the Regional Meeting in Pittsburgh. The Mid-eas Dropper was chosen for the name of the regional newsletter; a name suggested by Mary Lou Castillo of Springfield, Ohio. Red, white, and black felt badges proclaiming the Mideast Region as No. 1 were worn by members at the Pittsburgh IAET Conference. These badges were made by Mary Lou Walker's children. Our region was first again with a conference banner designed by Betty Gerth and executed in red, white, and black felt by Margie Dreffer of Cincinnati. Betty Gerth also wrote a song for ETs which was sung by Mideast ETs following the installation of IAET officers in Pittsburgh. decided that the Mideast Region would have a die cast to make tie-tacs for presentation to IAET officers.

Helen Arend and Trudy Blied became coeditors of the Mid-eas Dropper. Vol. 1, No. 3, designated "The Conference Issue", Autumn (1976) offered an overview of the IAET Conference in Pittsburgh, included the minutes of the Mideast Region meetings, as well as other news of interest. A current membership list was distributed in January, 1977.

A question and answer column, "Dear Ettie" was added to the Mid-eas Dropper.

The IAET Mideast Region cooperated with the Division of Nursing, University

of Louisville, in presenting a symposium on Care of the Ostomate to 360 participants on February 11, 1977 in the Executive Inn of Louisville, Kentucky. This seminar was followed by the semi-annual regional meeting on February 12th with 29 ETs present. Minutes and news reports of this meeting were included in the Spring 1977 issue, Vol. 2, No. 1 of the Mid-eas Dropper.

The Mideast Region of IAET again met at the 9th Annual Conference of IAET at the Town and Country Hotel in San Diego in August, 1977. To comply with the new structure of the IAET Board of Trustees, Jane Younger was elected the Mideast Region's first IAET trustee.

Harriett Johnson May, E.T. Mideast Region Historian

October, 1977







International Association for Enterostomal Therapy, Inc.

1701 Lake Avenue, Glenview, Illinois 60025 312/724-1910



November 16, 1977

ARTHUR W. ENGLE, C.A.M.

Executive Director

MEMCRANDUM

TO: The Board of Directors

FROM: Arthur W. Engle, C.A.M.

Executive Director

SUBJECT: Office Report

It has been the past practice of this office to present periodic reports of general activities and observations. It seems like only yesterday we were all together in wonderful, warm, rainy San Diego (Chicago temperature was in the 20s the other day).

Here are a few activities that will interest you:

Annual Audit - Mr. Ronald Kruskol, CPA, Roselle, Illinois, was appointed to process the 1977 fiscal year audit. He reports the proceedings to be about 85% completed now. He has applied for an extension date for taxes due on unrelated income which for IAET encompasses the ET Journal operation. We will discuss this in more detail at the mid-year Board meeting and Sheryl will have a full report at that time. Copies of this Audit will be supplied to each Board member.

Membership Records - There are 829 members now--19 new members since September 1, 1977. Committee Chairman Marie Burroughs will meet on November 18 with our Membership Staff Director, Kay Warskow, and me. The committee objectives will be discussed and plans for project implementation will be designed. 1978 dues billing, attracting qualified new members, various membership categories and other similar items will be reviewed during this session.

ET Journal Subscriptions - About 290 libraries, ostomy product salesmen, nurses, and others are currently paying \$10.00 per year for 4 issues of the Journal. The Publications Committee is, hoping for more new subscriptions during the year. In December we will be invoicing the current subscribers for the 1978 volume.

ET Journal Advertising - About one year ago, we made a general solicitation to ostomy product manufacturers and distributors to participate in the new ET Journal. We experienced a steady level of support in each issue of the Journal by seeking an annual commitment. Plans are being formulated now to seek renewal and to expand the advertising base for 1978. If you have a specific contact in mind, please submit the information to the office.

1978 Conference - Atlanta, April 23-26. The committee is very busy with details. At the printers is a brochure to go to the manufacturers, solicting their participation in this annual activity. This is the year for change--change from the UOA and IAET routine--change from the usual exhibit hall activity. Especially designed to inject variety in the meeting program and to attempt to conserve expenses for the manufacturers is the new suite display and hospitality program. Instead of exhibit hall, suites will be used during the normal exhibit hours. Registrants will be allowed sufficient time to meet in each suite to see product displays and discuss procedures, etc. There will be more on the Atlanta meeting at the mid-year Board meeting.

<u>Special Requests</u> - As the result of various articles that appear from time to time in nursing journals and other similar publications, our office, which is usually listed as the permanent address of the Association, receives requests for additional information and materials. In the last few months, we have responded to 61 requests. Fortunately, many of these are requests seeking training and information which might lead to future members and continued growth for the Association.

<u>IAET Member Liability Insurance Program</u> - September 30 records for Maginnis and Associates show that 121 members have applied for this coverage.

Computer Conversion for Regional Billing is progressing along almost on schedule. Region codes have been assigned to all members. The program revision to print the regional lists in alphabetical order is near completion. I had hoped for it by this date but perhaps in the next ten days it will be ready for testing. As soon thereafter as possible, lists will be forwarded to each Regional President with a copy to each respective Board member.

Annual Dues Billing will be discussed during the membership committee meeting here on the 18th. The notices will go to members early in December, for those members whose dues are due January 1. While most members' renewals are due on this date, there are some who have joined during the year and will be billed on the anniversary of their joining. You will recall that when the Association went on the computer, anniversary billing went into effect. Also, a plus this year for the regions is the national billing service. Dues Invoices will be \$40.00 per member per year. \$10.00 per member per year will be turned over to the member's respective region. Regional funds will be processed in batches. The first release to the regions will be late February, and then monthly thereafter. The check and the names of paid members will be sent to the Regional Treasurer, with an advice copy to the President.

Newsline, the bi-monthly publication mailed to Regional officers, newsletter editors and IAET Board members, is edited by the Publications Committee, published and distributed through this office. A request for an update on Regional officers has produced very little response to date. The next Newsline will be out December 1st.

IAET Operational Manual - Our records indicate that each region now possesses at least four manuals, one for each elected officer. Each IAET Board member has one also. The manual is a reference tool for various IAET operations, contains suggestions for certain regional procedures, and can be very useful as a resource guide in your Association work.

IAET Bylaws are in the printing stage now. They will be shipped in bulk to each Region for distribution by the Region to the members. The Bylaw revisions voted on in August this year are incorporated into this printing, so each member will have a current document, once they have been distributed in the Region area.

The ET Exhibit Booth (Squibb) - Was scheduled for the Family Practice meeting in Las Vegas; however, apparently became lost in transit. A tracer is now in process. Since it is out of date, maybe someone should undertake the development of a new one. There may be a little insurance money to use also. The P. R. Committee is aware and working in this area. Others may want to funnel in ideas. Our suggestion is keep it simple, light and transportable via UPS (they deliver!).

Association Officers, Directors and Staff Liability Insurance has been reapplied for. An application submitted several months ago was turned down. We have had additional discussions with the agent, and at his recommendation, a new application has been submitted.

1981 Conference Committee - Several hotels have been visited within the last few weeks by members of the Committee and me. A site decision is expected in December.

Well, if I keep writing, this will never get in the mail! We hope to generate six to eight reports of this nature during the year. We hope this is helpful and informative.

Best wishes to each of you for a most enjoyable Thanksgiving.

Jane and I never cease to be surprised when we open our mail.

We find we are involved as Regional Liason Subcommittee Members. We are including the information for all of you in the Newsletter. This letter from Debra Broadwell with the form she devised should be studied by you

If you choose to follow this format we'll discuss it further in Indianapolis. In the meantime if you are involved in any programs please inform Jane or me

August 29, 1977

The Southeast Ragion of IAET is interested in promoting effective symposiums and workshops throughout the region. Many of our members have requested a mechanism by which programs can be registered to prevent several programs in one area being presented in a limited period of time, which may result in poor attendance at an excellent program.

Since programs are scheduled in advance, the Education Committee of the South-east region would like to request that you contact the committee by sending in the following form. If there is a program scheduled within a few months of your proposed date, the educational committee will contact you and you may continue as you have planned or change the date to prevent an overflodding of programs in one area.

Your cooperation in starting this procedure is needed. If you are now in the process of offering a workshop in your area, please fill in the enclosed form and send to:

Debbie Broadwell, R.N., E.T. Chairperson, Education Committee Southeast Region, IAET 993 Williams Mill Road, N.E. Atlanta, Georgia 30306.

Once we have the initial information on programs, we will be better able to serve the region. Thank you in advance for your cooperation.

Sincerely,

Debra C. Broadwell, R.N., E.T. Education Committee Southeast Region, IAET

DCB:bh Enclosure

SOUTHEAST REGION IAETEducation Committee

NAME:	· · · · · · · · · · · · · · · · · · ·	
ADDRESS:	·	
City:	State:_	Zip:
PROPOSED SITE OF PROGRAM:		
PROPOSED DATES:		
PROPOSED AUDIENCE: R.N	L.P.N	S.N
Pharmacists_	Others	(Please Specify):
TYPE OF PROGRAMS OFFERED:		
		A STEWARTS AND
APPLYING FOR C.E.U.: Yes	No	Number of Hours:
APPLYING FOR IAET ENDORSEMENT:	Yes:	No:
IS THE PROGRAM INTENDED TO DRAW	PARTICIPANTS FROM:	
Institution Only:		City
Statewide	Regional	National

To: Regional liason subcommittee members
From: Glenda Motta, chairperson, continuing education committee

The designated Regional liasons to the continuing education committee compose a subcommittee to which I have delegated the following tasks:

- 1. Submit information to me on all educational events held within your Region. These include any endeavors involving ETs, not just the IAET approved seminars. One aim I have is to determine areas lacking continuing educational programs, as well as areas in need of ETs.
- 2. Develop a simple certificate of attendance card for distribution at IAET approved seminars. Certificates being incorrectly worded or misinterpreted has become a problem. Give me your ideas (what your Region has used previously, whether you feel this is necessary, etc.). I favor a simple card (3x5) which states the individual attended an IAET sponsored program, length of program and the date. I've seen similar cards used by some state nurses' associations.
- 3. Give me your ideas of the need for continuing education for the enterostomal therapist. Our educational efforts are geared toward nurses who are not ETs. What are our own needs? What is being done in your area in this regard?

Since I am not aware of how educational programs are coordinated in each region, I am enclosing a copy of what the Southeast Region is doing. Debbie's form is an excellent way of keeping tabs on all programs held within the Region so as to prevent duplication and poor attendance. This is a working copy only for your consideration in your own area. If you have developed anything similar, please send me a copy.

As chairperson of continuing education, one of my responsibilities is to serve as IAET's liason to the Hollister Outreach Program. For those of you unfamiliar with this program, a series of workshops on ostomy management will be sponsored by Hollister with all profits going to IAET. The purpose of the program is to expose nurses who are not ETs to aspects of ostomy care. Areas lacking in resource people and a high concentration of ETs are prime targets. Five areas have tentatively been chosen for the next year, but some conflicts have arisen. If you identify any areas of need in your Region and would be interested in presenting such a seminar, let me know soon. Most of the work is done by Hollister's coordinator—physical arrangements, speakers, etc.

I have also enclosed a list of committee objectives for this year and a list of subcommittee members. Some Regions have not yet designated a liason, but I will supply you with these names as they come in.

As the next annual conference will be in April, the work year is really only 6 months. Whatever we accomplish will be well worth the effort.

Expect to hear from all of you soon!

Sincerely,

Glenda Motta, R.N, E.T.

Glenda Motte

Objectives -- Continuing Education Committee 1977-78

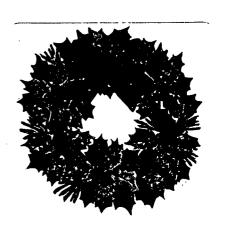
- 1. To establish specific guidelines for obtaining IAET approval for Regional seminars.
- 2. To develop ideas, criteria and plans for workshops of an advanced nature for the enterostomal therapist.
- 3. To develop a simple certificate of attendance card for distribution at IAET approved seminars and the annual conference.
- 4. To explore the possibility of IAET becoming a provider for CEU's through ANA
- 5. To establish a Regional continuing education liason subcommittee to poll Regions on all current educational events; to develop the certificate of attendance; and identify areas of need for continuing education programs.
- 6. To serve as liason to the Hollister Outreach program.
- 7. To evaluate and possibly revise the seminar summary form currently in use.
- 8. To provide input to the annual conference planning chairperson re. the nature of the workshops and programs planned.
- 9. To maintain a log of current educational offerings being coordinated by IAET Regions and School Directors.





Merry Christmas





*PREVIEW CHARGE: \$15.00 for film or video, \$25.00 if pro (fully credited against any purchase)

Super 8mm projector.

I will also need

Super 8mm

Check format desired:





By featuring actual Ostomates, this sensitive film presentation provides a positive orientation and understanding of what it's like to have a Colostomy or Ileostomy





The film deals primarily with the psychological aspects of having an Ostomy as experienced by actual Ostomates. Through animation, it then describes how food passes through the digestive system concentrating on its final elimination as waste. The film provides a very positive understanding of the problem and ends with reasurances from the Ostomates portrayed in the film.

Running time: Approximately 9 minutes Color Sound

Medical Consultant: Marcin Schuster, M.D., Chief of Gastroenterology, Baltimore City Hospital, Professor of Medicine, The Johns Hopkins School of Medicine.





Tid	Add City
1 Yes I would	like to preview*

pecialty

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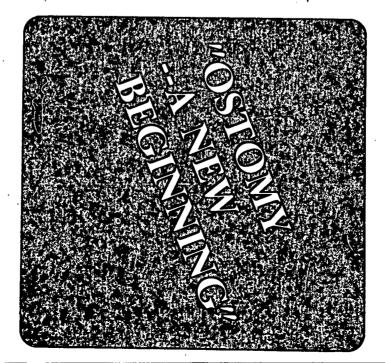
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D PD-2 0 PD-1 OSTOMY-A NEW BEGINNING JANAGING SECRETIONS IN VHAT IS ARTHRITIS
HEUMATOID ARTHRITIS ARY MANAGEMENT

CENERATIVE JOINT DISEASE THE DISEASE AND BLEEDING



AND BIRTH DEFECTS

MID-EAST INTERNATIONAL ASSOCIATION OF ENTEROSTOMAL THERAPIST January 7 & 8, 1978

I will not attend

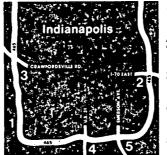
Please mail to:	Mrs. Anne Ward 8742B LeMode Court Indianapolis, Indiana 46268	·	
	Phone 317-291-5282		•

I will attend

Each person will be responsible for making own motel reservation. The attached card may be used or mail the copy below to: Holiday Inn Southeast, 5120 Victory Drive, Beech Grove, Indiana 46203. Phone: 317-783-7751

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CITY -: ×		BARI	
TYPE OF ROOM	DATE OF AR	RIVAL DA	TIME
DESK CLERK STEDITURE		DATE	

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