

All times are listed in Mountain Daylight (MDT)



SUNDAY, MARCH 17, 2024

ALL TIMES ARE LISTED IN MOUNTAIN DAYLIGHT TIME (MDT)

7:30 am – 6:30 pm	Registration Hours
8:00 am – 12:00 pm	Pre-Conference Session
Level: Intermediate Track: Anatomy	(001) Brain Anatomy With 3D Correlation to Trauma, Stroke, and Other Pathology Linda Littlejohns, MSN RN SCR N CNRN FAAN <i>*This session requires an extra fee to attend.</i> <i>This session will explore the normal structures, blood supply, lobes and deeper nuclei, brainstem, and cerebellum. Discuss cases, explore possible options for management, and demonstrate potential pathology in 3D on dual screens.</i>
1:00 pm – 3:00 pm	Pre-Conference Session
Level: Intermediate Track: Spine	(002) Spine Anatomy and 3D Correlation to Trauma and Degenerative Disease Linda Littlejohns, MSN RN SCR N CNRN FAAN <i>*This session requires an extra fee to attend.</i> <i>This session will discuss traumatic and degenerative findings in the spine and considerations when a critical structure such as the spinal cord is compromised due to age or damage to the spine or blood supply. We'll discuss cases and radiologic findings as we compare normal anatomy to pathology.</i>
ANNUAL CONFERENCE SESSIONS	
1:00 – 2:00 pm	Concurrent Sessions
Level: Intermediate Track: Pediatric	(100) Long Term Outcomes of Endoscopic Craniosynostosis Surgery Cathy Cartwright, DNP RN-BC PCNS FAAN <i>Craniosynostosis is the premature closure of one or more cranial sutures and occurs in approximately 1 out of 2500 live births. This presentation will discuss how to recognize the most common types of craniosynostosis, the history of the minimally invasive endoscopic strip craniectomy, the pathophysiology of skull growth and why the endoscopic strip craniectomy is so effective, long-term outcomes using before and after photographs, and the neuroscience nurse's role in parent education and pre- and postoperative coordination of care.</i>

Level: Intermediate Track: Quality/Safety/Process Improvement	(101) Fast Tracking Critical Neurosurgical Patients: Craniotomy and SEEG ICU Bypass Heather Kennedy, MS APRN PCNS-BC CWOCN CCRN <i>The purpose of this multidisciplinary project was to create a process to Bypass the ICU following certain neurosurgical procedures, thereby decreasing ICU bed days following neurosurgical procedures at a pediatric academic medical center. The majority of patients undergoing craniotomy for brain tumor resection and all patients undergoing stereotactic electroencephalography implanted lead placement were admitted post-operatively to the medical/surgical general intensive care unit. Upon review of the literature and review of these cases at our academic medical center, we identified few immediate post-operative complications with these patients and questioned the necessity of an ICU stay.</i>
2:10 – 3:10 pm	Concurrent Sessions
Level: Beginner Track: Anatomy/Physiology/Neuroassessment	(102) Cerebrospinal Fluid: Function: Physiology, Pathophysiology, and Diversion Patricia Blissitt, PhD ARNP-CNS CCRN CNRN SCR N CCNS CCM ACNS-BC <i>This presentation will focus on the function and physiology of cerebrospinal fluid (CSF), including the production, circulation, dynamics, and absorption. CSF pathophysiology will be discussed, including common abnormalities associated with composition and circulation. Hydrocephalus will be discussed in detail, including etiology, types, diagnostics, clinical presentation, and management. The evidence and lack of evidence supporting and refuting current management trends in CSF diversion will be emphasized. Case examples will be included. At the conclusion of this presentation, the nurse will be able to discuss physiology and pathophysiology associated with CSF; and apply that knowledge in the care of neuroscience patients.</i>
Level: Beginner Track: Pediatric	(103) Navigating the Journey to Epilepsy Surgery: A Multidisciplinary Approach Amy Sullivan, BSN RN CNRN <i>Epilepsy is the most common chronic neurological condition in pediatrics affecting 0.5- 2% of children worldwide. Of those children affected, approximately 1/3 will not respond to anti-seizure medications and develop drug-resistant epilepsy (DRE). Patients with DRE may benefit from alternative treatments such as epilepsy surgery. These patients require an extensive evaluation from a multidisciplinary team to determine surgical candidacy. As a result of this activity, the learner will be able to describe the fundamentals of a comprehensive</i>

	<i>epilepsy center and the importance of having a nurse coordinator.</i>
3:00 – 3:30 pm	Break with Exhibitors & Posters
2:10 – 3:10 pm	Concurrent Sessions
Level: Intermediate Track: Stroke	(104) Pharmacologic Reversal Agents for Acute Hemorrhagic Strokes Doanh Ly, DNP RN CNS CCRN SCR N Pharmacology Hours: 0.7 <i>Neuroscience nurses attending this session will gain knowledge and have the proficiency in the guideline recommendations on the use of pharmacologic reversal agents in order to safely administer of these agents in the critical management of the deteriorating patients.</i>
Level: Beginner Track: Movement Disorders/ Neuromuscular/ Neurodegenerative	(105) Apheresis In The Neurological Patient: What Is It And Why Will Your Patient Need It? Christine Conrad, RN CNRN CCRN <i>Apheresis is a generalized term that denotes separation of whole blood and removal of a blood component. Apheresis is an umbrella term, as there are various apheresis procedures including plasmapheresis, erythrocytapheresis, and depletion procedures. By providing educational content on apheresis in the neurological patient population, it will provide today's novice nurses with procedural education and examples to increase awareness prior to, during, and after an apheresis procedure has been performed. This will provide increased knowledge related to the potential negative side effects associated with the procedure.</i>
4:40 – 5:10 pm	Concurrent Sessions
Level: Intermediate Track: Pharmacology	(106) Implementation of Extended Window IV Thrombolytics in a Large Integrated Healthcare System Patricia A. Zrelak, PhD RN NEA-BC ASC-BC CNRN SCR N CCRN-K FAHA Pharmacology Hours: 0.25 <i>Based on the literature and early results, use of IV thrombolytics in the extended window process appears safe and effective. Nurses will be aware of the evidence-including required imaging and inclusion/exclusion criteria for treating patients with stroke onset beyond 4.5 hours with IV thrombolytics.</i>
Level: Beginner Track: Neuro-Oncology	(107) Let's talk tumor: Brain tumor 101 Julie Pagel, DNP RN CCRN SCR N CNE-cl Ashley Higgins, MSN APRN ACCNS-AG CCRN CNRN SCR N <i>The goal of this presentation is to provide a brief, basic overview of brain tumors to help beginner neuroscience nurses grow more comfortable and competent in caring</i>

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	<i>for our diverse neuroscience population. Attendees of this session will have an increased knowledge of brain tumors including etiology, pathophysiology, symptoms, and management.</i>
5:30-6:00 pm	Newcomers Reception for First Time Attendees
6:00 – 7:30 pm	Opening Reception with Exhibits & Posters
MONDAY, MARCH 18, 2024 ALL TIMES ARE LISTED IN MOUNTAIN DAYLIGHT TIME (MDT)	
6:30 am – 5:00 pm	Registration Hours
6:50 – 7:50 am	Non-CE Breakfast Symposium <i>Sponsored by AbbVie</i>
8:00 – 9:30 am	Welcome, AANN/ABNN/AMWF Awards, & Agnes M. Marshall Keynote Address <i>Train the Brain: Shifting Our Brains to Think Differently About Competency</i> Donna Wright, MS RN NPD-BC <i>Competency assessment is a good thing, right? Let's explore the whys and whats around competency and how it can benefit us or cause problems. Some organizations have created monsters in their approaches to competency assessment—to the point where people dread doing things. Let's explore how to make competency meaningful. Let's leverage it to energize us, motivate us, and keep health care at its highest standards. Join us for a humorous look at competency assessment like you have never heard and seen before.</i>
9:30 – 10:15 am	Breakfast with Exhibitors & Posters
10:15 – 11:15 am	Concurrent Sessions
Level: Intermediate Track: Special Topics	(200) Past President Session: Empowering Minds, Inspiring Change: What Every Neuroscience Nurse Needs to Know Patricia Lane, MBA BSN SCR N FAAN Rachel Malloy, DNP RN CNRN SCR N <i>This session will discuss the importance of neuroscience advocacy and its impact on patient outcomes. This session will explore strategies and interventions developed by AANN, ABNN, and AMWF to use your voice as a neuroscience nurse. Participants will also develop an action networking to advocate for improved access to resources, support, and policies that promote positive change for the neuroscience community.</i>
Level: Intermediate Track: Quality/ Safety/ Process Improvement	(201) Understanding How Medical Device-Related Pressure Injuries Occur in the Neuroscience Patient Population Cynthia Blank-Reid, MSN RN TCRN CEN Diane Wagner, MSN RN CWON <i>Medical device-related pressure injuries (MDRPI) are common yet preventable occurrences. By utilizing select</i>

	<i>neuro case studies, the participant will learn about common MDRPI, vulnerable neuro patient populations and prevention measures.</i>
Level: Expert Track: Neurocritical Care	(202) The Good, the Bad and the Uncertain: Nursing implications in Caring for Adult Chimeric Antigen Receptor T-Cell (CAR-T) Therapy Patients with Glioblastoma Multiforme Amy Cheung-Taylor, BSN RN CCRN CNRN SCR Anastasia Tsiantoulas, BSN RN CNRN SCR Kelly Ann Wong, BSN RN CCRN SCR Nicolette Simpson, BSN RN SCR Maria Clarissa Manez, BSN RN CCRN SCR <i>The purpose of this presentation is to share nursing experiences, gained knowledge, innovative intracranial pressure (ICP) management techniques and identified gaps from navigating the unpaved path of early phase clinical trial using Chimeric Antigen Receptor T-cell (CAR-T) therapy for adult patients with Glioblastoma Multiforme (GBM).</i>
11:25am – 11:55 am	Concurrent Sessions
Level: Intermediate Track: Pediatric	(203) Neurological Assessment of the Hospitalized Child Cathy Cartwright, DNP RN-BC PCNS FAAN Sarah Szego, MN-NP BSc RN Kentlee Battick, MSN RN CCRN CNL <i>This session will describe how nurses could utilize the white paper in their practice and discuss ways to incorporate the white paper in their organizations.</i>
Level: Beginner Track: Stroke	(204) ¡que qué!: Increasing Cultural Inclusion and Scoring Accuracy through Successful Hospital-Wide Implementation of the Spanish NIHSS Tool Nicole Burnham, MSN RN CCRN CNRN SCR Natalie Hsueh, MSN RN SCR Samantha Nguyen, BSN RN PCCN SCR Caritas Nurse Stacy Serber, PhD RN CNS SCR <i>The purpose of this project was to successfully implement the Spanish NIHSS tool in our institution, while simultaneously identifying and addressing barriers and impact from a staff perspective.</i>
Level: Intermediate Track: Special Topics	(205) Nurturing New Neuroscience Brains: Navigating a Preceptor Shortage with Innovation Erin Tucker, BSN RN CNRN <i>This pilot was designed to navigate staffing challenges, promote collaboration between Neuro Telemetry Units, and maximize the use of experienced neuroscience preceptors. This novel approach to orientation allowed these units to provide 20 Nurse Residents a robust, neuroscience specific orientation with experienced preceptors that could not have been sustained otherwise.</i>

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11:55 am – 1:00 pm	Lunch with Exhibitors & Posters
12:00 -1:00 pm	Non-CE Lunch Symposium <i>Sponsored by Jazz Pharmaceuticals</i>
1:00 – 1:30 pm	Concurrent Session
Level: Advanced Track: Neurocritical Care	(206) Bedside Clinical Neuro Assessment Practice Among Neuro Critical Care Professionals: A Triangulation Method (Research Proposal) Della Mathew, PhD MSN RN <i>Attendees of this session will understand the background, and significance of bedside clinical neuro assessment practice among Neuro Critical Care Professionals: A Triangulation Method. The convergence approach of triangulation (Morgan, 2019). on the quantitative method with a survey about the practice of neuro assessment with questionnaire completions and qualitative exploratory components based on semi-structured in-depth interviews will be employed. Data analysis of the quantitative descriptive and inferential statistics and qualitative content analysis (Creswell, 2013) from the three disciplines will be converged to integrate triangulation and interpret the findings.</i>
Level: Intermediate Track: Pediatrics	(207) Hydrocephalus Association Session: Hydrocephalus Across the Lifespan Cathy Cartwright, DNP RN-BC PCNS FAAN Paula Peterson <i>This session will discuss the pathophysiology, causes, and surgical treatments for hydrocephalus.</i>
Level: Intermediate Track: Stroke	(208) Improving Emergent Treatment for Patients with Central Retinal Artery Occlusion Patricia Zrelak, PhD RN NEA-BC ASC-BC CNRN SCR N CCRN-K FAHA Pharmacology Hours: 0.3 <i>Central retinal artery occlusion (CRAO) is a rare type of ischemic stroke. To improve the care of patients with CRAO, our integrated medical system of 21 hospitals implemented a performance improvement program as part of the stroke alert process that targeted improved recognition, diagnosis, and treatment.</i>
1:40 – 2:40 pm	Concurrent Sessions
Level: Intermediate Track: Special Topics	(209) YOU Should Be a JNN Peer-Reviewer DaiWai Olson, PhD RN <i>This session will discuss the potential benefits to authors and reviewers, review the steps in the peer review process, and provide direction and resources for new and experienced reviewer who want to improve their peer-review skills.</i>

Level: Intermediate Track: Epilepsy	(210) Epilepsy Foundation Session: Seizure Recognition & First Aid Certification Training Anna Nielsen Margo Thurman <i>The Epilepsy Foundation's Seizure First Aid Training is the only certification training program that ensures the general public may learn how to assist and supports the more than 3.4 million people living with epilepsy in the US. By offering Seizure First Aid Training to certified health education specialists, the Epilepsy Foundation will make certain the public health and health education workforce is better prepared to assure a Seizure Safe Nation.</i>
Level: Intermediate Track: Movement Disorders	(211) A Patient's Journey with Rare Peripheral Neuropathy: Learning About Guillain-Barre Syndrome and CIDP from Patients Themselves
Level: Advanced Track: Special Topics	(212) Demystifying HINTS (Head Impulse, Nystagmus and Testing Skew deviation) with Education, Research and Technology. Cynthia Guede, MSN APRN CNRN <i>A patient presenting with sudden onset of vertigo, dizziness, nausea, vomiting, and imbalance can be difficult to differentiate central vs. peripheral etiology. Using clinical assessment including the HINTS protocol (Head Impulse Test, Nystagmus, and Testing Skew deviation) can aide in proper diagnosis and management.</i>
2:40 – 3:10 pm 3:00 pm	Break with Exhibitors & Posters Passport Program Prize Drawing
3:10 – 3:40 pm	Concurrent Sessions
Level: Intermediate Track: Special Topics	(213) AANN Delphi Study: Expert Consensus on the Components of a Neuro Orientation Mary Guanci, MSN RN CNRN SCR N FNCS Lori Rhudy, PhD RN ACNS-BC CNRN Marianne Beare Vyas, PhD RN ANP-BC CNRN <i>This session will describe the Delphi technique for expert consensus on neuroscience orientation, list the essential components of a general neuroscience orientation over 6-12 weeks, and identify ways to utilize the knowledge gained by expert consensus.</i>
Level: Expert Track: Neurocritical Care	(214) Out of Bed Mobility with an External Ventricular Drain: A Descriptive Correlational Study Megan Moyer, PhD ACNP-BC CNRN <i>The objective of this study was to investigate whether a nurse-initiated early mobilization program for patients with external ventriculostomy drains (EVDs) accounts for differences in select patient outcomes including the following: rates of venous thromboembolism (VTE), catheter-associated urinary tract infections (CAUTI), catheter-associated blood stream infections (CLABSI),</i>

	ventilator-associated pneumonia (VAP), ventriculostomy related infection (VRI), and intensive care unit (ICU) length of stay (LOS).
Level: Intermediate Track: Special Topics	(215) It's All Abstract to Me: How You Can Turn Your Ideas into Quality Abstract Submissions Holly Wirth, MSN, RN, SCRNP, NE-BC <i>From selecting a topic to writing a catchy title to drafting the narrative, each component of the abstract submission can be tackled to create an attention-grabbing submission. Learners will gain skills and confidence in the abstract writing and submission process. Tips and tricks from an experienced presenter will be shared to further the leap from "just an idea" to a successful AANN abstract submission.</i>
3:50 – 4:50 pm	Concurrent Sessions
Level: Intermediate Track: Special Topics	(216) Nurses in the Media: It's Our Time Rachel Malloy, DNP RN CNRN SCRNP <i>This session will discuss the uses and benefits of nurses in the media, review necessary media skills, and guide development of messaging for media engagement.</i>
Level: Advanced Practice Track: Special Topics	(217) Is This a Migraine? A Case Study Approach for Differentiating Migraine with Other Headaches and Review of Migraine Treatments Amy Larson, APRN CNP Pharmacology Hours: 0.4 <i>This presentation will examine diagnostic characteristics of migraine headache, tension type headache, cluster headache, temporal arteritis and secondary headache and discuss key components of the history and physical exam. Case studies will be utilized to analyze the approach to diagnosis and differentiation of these headache types. Additionally, current treatment options for migraine headache will be reviewed.</i>
Level: Intermediate Track: Anatomy/Physiology/Neuroassessment	(218) Paint Your Vision: A Guide to the Visual Pathway Denelle Hebert, BSN RN SCRNP DaiWai Olson, PhD RN <i>The purpose of the presentation is to provide education about the visual pathway. The content of the presentation will include the neuroanatomy and physiology of the visual pathway. We will utilize a unique teaching method by providing the audience with a 3D printed model of the visual pathway.</i>
5:00 – 5:30 pm	Concurrent Sessions
Level: Intermediate Track: Pediatric	(219) Reversing Blindness: Optic Neuritis and Myelin Oligodendrocyte Glycoprotein Antibody Disease Jenifer Sant, MS CPNP CNRN Pharmacology Hours: 0.3

	<i>The purpose of this presentation is to discuss recent advances in neuroimmunology, specifically autoimmune antibody mediated disorders. This case study discusses a child who presented to our hospital with sudden vision loss and eye pain. Her MRI was consistent with optic neuritis and she was ultimately diagnosed with MOGAD. Initial treatment was started within hours with almost full vision recovery.</i>
Level: Intermediate Track: Stroke	(220) Time to Change the Tune: Developing a Music Therapy Protocol for Stroke Patients Brandon Hostler, BSN RN CNRN <i>While the evidence for using music therapy for stroke patients is strong, the application in the clinical setting is not common. This presentation attempts to address the barriers to music therapy by providing a simple, easy, and effective way of providing music therapy to stroke patients in the acute care setting. Using a randomized controlled study, we will evaluate this music therapy treatment model for effectiveness in improving mood, patient satisfaction, engagement in therapy, and overall patient outcomes.</i>
Level: Intermediate Track: Quality/Safety/Process Improvement	(221) Laying the Foundation for Neuro Nursing Excellence: Improving Novice Neuroscience Nurses' Knowledge through a Fundamentals of Neuroscience Nursing Curriculum Salome Loera, DNP ACCNS-AG PCCN CCRN-CMC SCR Fadia Feghali, MS RN NE-BC Katherine Brown, RN SCR Danielle Coffindaffer, BSN RN PCCN SCR Dawnielle Feucht, BSN RN-BC SCR <i>The purpose of this presentation is to demonstrate a quality improvement (QI) initiative aimed at improving novice neuroscience nurses' knowledge through a hybrid curriculum consisting of in-person and online courses focused on fundamentals of neuroscience nursing.</i>
Level: Intermediate Track: Seizure/Epilepsy	(222) Seizure Semiology: What Your Patient is Telling You Eugena Bergvall, DNP APRN ACNP-BC CCNS-BC ACCNS-AG CCRN CNRN <i>Seizure semiology is the subjective and objective manifestations reported by the patient. This presentation will review the current literature on terminology and localization, case studies with video examples, and a clinical strategy for improving semiology recognition through The First Six Epilepsy Monitoring Unit (EMU) bedside assessment tool utilized within an EMU in a research hospital.</i>
7:00 -9:30 pm	AMWF Event <i>Join us for the Agnes Marshall Walker Foundation (AMWF) Event on Monday, March 18th for desserts and dancing while supporting the foundation. It is sure to be a shamrockin' good time. Dress in your favorite green or</i>

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	gold attire. The fee to attend this event is \$50 (not included in the Annual Conference registration fee).
TUESDAY, MARCH 19, 2024 ALL TIMES ARE LISTED IN MOUNTAIN DAYLIGHT TIME (MDT)	
7:30 am – 11:00 am	Registration Hours
8:00 – 8:30 am	AANN/ABNN/AMWF Update <i>Hear an update on the accomplishments of AANN, ABNN, and AMWF over the past year. Learn more about AANN membership, CNRN and SCRNP certification, and AMWF grants.</i>
8:30 -9:30 am	Networking
9:30 – 10:30 am	Concurrent Sessions
Level: Intermediate Track: Professional Development	(300) Clinical Practice Guidelines Board 2024 Update: Evaluating the Literature & Spine CPG Joan Censullo, PhD RN Lauren Franker, DNP APRN ACNP-BC Angela Starkweather, PhD RN ANCP-BC CNRN FAAN Andrea Strayer, PhD, AGPCNP-BC ARNP CNRN
Level: Advanced Track: Stroke	(301) Clinical Localization and Neuroimaging in Stroke Management Fnu Alfandy, DNP APRN AGACNP-BC ANP-BC CNRN SCRNP Pharmacology hours: 0.25 <i>The session will include lecture on neurovascular anatomy and various neuroimaging modalities (CT, MR, DSA, and other advanced imaging) in the form on case studies. Stroke nurses attending this session will be more empowered to be an integral part of clinical team by having the clinical knowledge of localization and neuroimaging</i>
Level: Expert Track: Special Topics	(302) Conquering the Complexities of Post-Operative Care in Pituitary Adenoma Patients Alexandra Schaber, MSN APRN FNP-C Pharmacology hours: 0.1 <i>As a result of this activity, the learner will be able to state the prevalence of pituitary adenomas and their most common presenting symptoms. Learners will also be able to describe the diagnostic imaging, assessment, and laboratory findings needed in working up a patient with pituitary adenoma.</i>
Level: Intermediate Track: Special Topics	(303) Race to the Thalamus Linda Littlejohns, MSN RN SCRNP CNRN FAAN <i>*This is a 2-hour session that will run from 9:30 -11:30 am</i> <i>Assessing pathology in our patients can be challenging. Have you ever wondered how information enters and is processed in the brain? How does pathology interrupt pathways and cause deficits? The thalamus is a major</i>

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	processor of information in the brain and this session will provide insight into the role of the thalamus. Let's race to the thalamus and explore the connections that provide normal function in our patients.
10:30 – 11:00 am	Break with Posters
11:00 – 11:30 am	Concurrent Sessions
Level: Expert Track: Special Topics	(304) Meaningful Mentorship: Growing and Sustaining leadership across the multigenerational neuroscience workforce. Julieanne George, MSN MBA RN CNML NE-BC <i>Millennials nurses in the workforce desire leaders who align with their purpose of nursing. They seek “meaningful mentoring” which encompasses authenticity, compassion, and psychological safety. The purpose of this presentation is to highlight the value of mentoring to existing leaders in order to engage and foster neuroscience nurses desire to become a formal leader.</i>
Level: Intermediate Track: Neurotrauma	(305) Navigating the New Spinal Cord Injury Guidelines! Charlotte Davis CCRN, BSN, RN <i>This session's purpose is to explore the new American College of Surgeons (ACS) Spinal Cord Injury (SCI) Guidelines and discuss clinical application strategies. This session will explore spinal cord injury, types, prevalence, risk factors, pathophysiology, complications, and you treatment strategies.</i>
Level: Beginner Track: Movement Disorders/ Neuromuscular/ Neurodegenerative	(306) Don't Forget to Remember Me: Vascular Dementia Alyssa Broadwater, BSN RN <i>Vascular dementia, which is one form of dementia, refers to changes to memory, thinking, and behavior resulting from conditions that affect the blood vessels in the brain. It is crucial to improve the awareness in the research and healthcare community on the risk factors and the different types of dementia.</i>
11:40 am – 12:10 pm	Concurrent Sessions
Level: Intermediate Track: Special Topics	(307) The Brain Donation Project Tish Hevel, BA <i>This session will discuss why there is a critical need for brain donation, as well as dispel myths and explain the process of brain donation.</i>
Level: Beginner Track: Special Topics	(308) Read My Lips: Enhancing Communication in the Deaf and Hearing-Impaired Neuroscience Population Dawnielle Feucht, BSN RN-BC SCR N <i>Deaf and hearing-impaired individuals are at risk for ineffective communication with health professionals. Emergent neurological events, including stroke, may further impair the patient's ability to use their preferred</i>

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	<i>communication methods. Impaired communication creates barriers to accurately assess and intervene in the acute stroke window. Participants will be able to define the barriers in healthcare among the deaf and hearing-impaired.</i>
Level: Intermediate Track: Seizure/Epilepsy	(309) Development of a Novel Nursing Simulation Program for an Epilepsy Monitoring Unit in a Community Hospital Karen L. Secore, MS APRN Crystal C. Ledbetter, BSN RN SCRNP Morgan Cadena, BSN RN CNRN Kathryn Loster, MSN RN NPD-BC CMSRN Jennifer Granger Brown, MSN RN <i>To prepare nursing staff for caring for patients in a new epilepsy monitoring unit (EMU) situated on a neuroscience unit in a large community hospital, an educational simulation scenario was designed and implemented in a community hospital setting.</i>