

Advanced Registered Nurse Practitioner Care

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Common Cold May Be Just a Fingertip Away Due To Environmental Contamination

Data presented at Interscience Conference on Antimicrobial Agents and Chemotherapy

PARSIPPANY, N.J., Sept. 29 -- A common cold can be just a fingertip away thanks to the high rate of viral contamination of environmental surfaces that a cold sufferer can leave behind, according to a study in hotel rooms by investigators from the University of Virginia (UVa) and Reckitt-Benckiser (LON: RB), the world's number one household cleaning company (excluding laundry). The study was presented today in an oral session at the annual Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC), in San Francisco, California.

During daily activities, adults infected with the cold virus easily transferred the virus to 35 percent of the surfaces touched, according to the study. Moreover, it was found that the virus was effortlessly and significantly transferred to an uninfected person by fingertips touching the contaminated surfaces, even 18 hours after initial contamination, according to Owen Hendley, MD, lead study investigator and Professor of Pediatrics in the Division of Pediatric Infectious Diseases at the UVa Health System.

After an overnight stay, adults infected with rhinovirus left behind virus on about a third of the objects and surfaces they touched in their daily activities. For example, the most frequently contaminated objects in 15 individually occupied hotel rooms were door handles (seven out of 14 rooms) and pens (six out of 14 rooms), followed by light switches, TV remote controls and faucets (each six out of 15 rooms), and telephones (five out of 15 rooms). Remarkably, the investigators noted that only one out of 10 rooms had a contaminated toilet handle.

Overall, rhinovirus contamination of the sampled surfaces (10 each in of 15 rooms) ranged from 80 percent contaminated test surfaces in three rooms to 30-50 percent in 7 rooms, to 10 percent in 3 rooms and none in two rooms. The average contamination rate was 35 percent.

Rates of acquiring rhinovirus from a contaminated surface during daily life activities, such as phone calls or turning on the light, were significant, averaging 47 percent in the study (28/60 touches, $p=0.07$). However, surfaces contaminated for just one hour yielded a higher rhinovirus transfer rate of 60 percent (18 of 30 touches) than those contaminated for 18 hours, which yielded a transfer rate of 33 percent (10 of 30 touches), ($p=0.07$).

Although transmission of rhinovirus infection by way of surfaces may not be efficient, it may be important be-

cause virus remains available for transfer to fingertip for at least one day. There are no antiviral drugs available to cure the common cold. Therefore prevention is important. The Centers for Disease Control (CDC) advise health educators and consumers about how to prevent infectious diseases through their Ounce of Prevention campaign. Among the low-cost steps to stop infectious diseases, the CDC recommends cleaning hands often and routinely cleaning and disinfecting surfaces. People should regularly wash their hands after shaking hands with anyone with a cold or touching environmental objects likely contaminated with nasal secretions. Commonly touched surfaces, such as those identified in this work, should be disinfected routinely with a disinfectant, such as Lysol® Disinfectant Spray.

Rhinoviruses are responsible for about half of all common colds in both adults and children, tallying approximately 500 million colds annually in the United States. The average child can expect to have four to eight rhinovirus colds per year and adults three to five infections.

Annually, common colds overall cause about 20 million lost workdays in adults and 21 million lost school days in children in the United States, the National Center for Health Statistics estimates. The total economic impact in the United States of the common cold, in direct and indirect costs, approaches \$40 billion annually. Also, the common cold frequently is a major contributor to the development of such illnesses as otitis media (ear infections), sinusitis (sinus infections) and can make both asthma and chronic obstructive pulmonary disease worse.

"Most people know about the need for good hygiene, particularly when interacting with cold sufferers. What they may not be aware of, and the study shows, is the need for good personal and surface hygiene even when an ill person is not present, because germs can survive on surfaces long after a person is gone," said co-author Joe Rubino, MA, Director of Global Surface Care, Research and Development, Support Sciences, Reckitt-Benckiser, Inc. Montvale, NJ, which supported the study.

Study Methods

To test contamination in the study, 15 adults exhibiting symptoms of rhinovirus infection remained awake in a hotel room for at least five hours prior to sleeping overnight, followed by at least two hours of activity in the room before a morning checkout. All were asked to perform normal activities. Participants received food via room service and no other individuals entered the rooms.

At check-in, participants blew their noses with a facial tissue immediately after entering the room and, then, investigators tested participant fingertips for rhinovirus contamination. At check-out, the participants identified objects that they had touched and the frequency. After departure, researchers tested 10 objects for residual virus.

To test viral transfer from surface to fingertips, researchers collected vials of infectious nasal secretions from each participant at the study start. Then, two to four months after their colds ended, five of the same participants individually touched three contaminated surfaces in a hotel room. Participants were exposed to only their own infectious secretion, to which they had acquired immunity during their preceding infection.

Two sets of contaminated sites were used, with one set having spots allowed to dry for one hour and the second, overnight. Before touching any of the sites, participants washed their hands with Ivory® soap and water and then dried them with paper towels. Investigators then tested the participants' clean fingertips for virus. Then participants repeated the hand washing/drying procedure before using their fingertips to touch the three contaminated sites as instructed to simulate natural daily life activities. Following touching, the investigators tested the participants' fingertips for virus.

Throughout the study, investigators used the very sensitive RT-PCR technology to detect the rhinovirus virus, specifically the RNA genetic material. Hendley and Rubino's coauthors were Birgit Winther, M.D., Assistant Professor of Otolaryngology, and Kathleen Ashe, Laboratory and Research Specialist II, both at UVa, and Karen McCue, MS, Manager in Research & Development at Reckitt-Benckiser Inc.

ICACC Presentation information: ICAAC Reference NO.:V-1693 Popular Title: Contamination of Environmental Surfaces During Normal Daily Activities of Hotel Guests with Rhinovirus Colds Technical Title: Environmental Contamination with Rhinovirus and Transfer to Healthy Individuals by Daily Life Activity Day and Time of Presentation: Friday, Sept. 29th from 2:00 pm to 4:30 pm PT

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Porter Novelli

Continuing Education

Future Prospects in the Management of Acute Coronary Syndrome and Thrombosis - 6 Issues

This online continuing education newsletter series is aimed at meeting the educational needs of registered nurses who are involved in the management of patients with acute coronary syndrome. The newslet-

ter series will involve six bimonthly issues (8 pages each) that will provide the latest information on the pathophysiology of acute coronary syndrome and thrombosis. In addition, the series will present the results of recent research on the use of antithrombotic medications in the management of patients with, or at risk for, acute coronary syndrome. This educational activity will be 1.2 credit hours and is provided by the Postgraduate Institute for Medicine. The program is located on the web at www.npcentral.net/ce/hm-list.shtml.

Pacific NW 29th Annual Conference for Advanced Practice in Primary and Acute Care

October 4-7, 2006 • 7.1-25.8 contact hours • Washington State Convention & Trade Center, Seattle, WA

Enhance your clinical competencies • Acquire new assessment and management skills • Examine critical issues at the state and national level and their impact on primary care practice • Foster a strong coalition of primary care providers • Learn about new products, services, and pharmacotherapeutic agents at this highly-acclaimed conference.

For information call CNE, 206.543.1047 or email: cne@u.washington.edu or uwcne.org

10th Annual Pain Management Symposium: Rolling Stones hit the pain pathways

Friday, September 29, 2006 • 7:30 a.m. to 4:00 p.m. • Glaser Auditorium • Swedish Medical Center, 747 Broadway, Seattle, Washington

This symposium will provide pragmatic and practical information based on the latest advances in pain management. Attendees will be equipped with the information needed to provide improved care to their patients with chronic pain, headaches, and spinal pain as well as information regarding complementary therapies, drug interactions and chemical dependency. You will leave with the latest and greatest tools in pain management. Credits: AMA-PRA Category 1 Credits, AAFP Prescribed Credits, and Nurse CE Contact Hours. View the agenda and register online at www.swedish.org/cme.

4th Annual West Coast Colorectal Cancer Symposium: A Case-Based Approach

Friday, November, 3, 2006 • 8:15 a.m. to 4:00 p.m. • Grand Hyatt, 721 Pine St, Seattle, Washington

Sponsored by Swedish Medical Center in collaboration with Oregon Health & Sciences Cancer Institute. Cancer of the colon and rectum is the third leading cause of cancer death in the United States. This symposium consists of a review of therapy for patients with colorectal cancer. The goal of the West Coast Colorectal Cancer Symposium is to update medical oncologists, gastroenterologists, surgeons and the community of clinicians on the recent developments in the use of chemotherapy for the treatment of colorectal cancer, address the screening of colon cancer, issues in the surgical, radiation and medical management colorectal cancer, and the integration of new agents. Credits: AMA-PRA Category 1 Credits and Nurse CE Contact Hours. View the agenda and register online at www.swedish.org/cme.

Diabetes Update

Friday, October 20, 2006 • 8:30 a.m. to 4:30 p.m. • Pacific Lutheran University, Tacoma WA • 7.5 contact hours.

The incidence of diabetes is increasing in the general population. Approximately 7 percent of all hospitalizations involve diabetes as the primary or secondary diagnosis. Patients with diabetes also use outpatient medical care more than the general population and are more likely to be institutionalized in nursing homes. This workshop will offer a review of type 1 and 2 diabetes; information on the latest research findings which determine treatment modalities; pharmacology; including current oral medications and insulins, the use of pumps; current education regarding diet, carbohydrate counting, and exercise; a review of complications and current treatments and interventions which are employed. This course is designed to improve the knowledge of health care providers who work with diabetics in a variety of

settings. For more information call 253-535-7683 or visit www.plu.edu/~ccnl/.

**Chinese Nursing Association (CNA)
Invites NP Delegation for Professional Exchange,**

November 26-December 8, 2006.

First class hotels, professional meetings, cultural visits, internal flights (three cities), meals, guides and interpreters included in \$2995. tuition (pp/dbl occ). International flights may be arranged by Global Reach or individually. For further information, itinerary and registration form, please see www.GlobalReachInstitute.org or call Global Reach Institute at 1.888.727.3224.

Classified Ads

Covington, WA – Heart Center Cardiology ARNP

Wonderful opportunity! We are seeking an ARNP to become an integral member of our MultiCare Heart and Vascular Center team in the Covington Clinic Heart Center. Responsibilities will primarily include treadmill stress testing, EKG reading, patient management for heart failure, risk factor management and chest pain assessment. Position requires previous experience treating cardiology patients and prescriptive authority. Since we are located near Seattle, on the shores of Puget Sound, you'll experience the best of Northwest living, from big city amenities to the pristine beauty and recreational opportunities of the great outdoors. Guaranteed salary, a full array of benefits, and a great location make for an exciting practice opportunity. Please email your CV to MultiCare Health System Provider Services at providerservices@multicare.org or fax your CV to 866.264.2818. Website: www.multicare.org. Please reference Ad # 399-546

"MultiCare Health System is a drug free workplace"

FNP for Puyallup, WA

East Main Family Medicine, part of MultiCare Health System, is seeking a f/t certified nurse practitioner provider with at least two years experience in general family medicine. This position will be responsible for providing comprehensive primary care in all aspects of family medicine, working directly with staff members in providing high-quality patient care. Please email your CV to MultiCare Health System at providerservices@multicare.org or fax your CV to 866-264-2818. Please reference Ad# 395-551

"MultiCare Health System is a drug free workplace"

Clinicians & RNs

You may be eligible for a sign-on bonus!

Ever wonder why Planned Parenthood Western WA runs so many ads for NPs???

- We are the LARGEST employer of NPs in Washington State
- Our practice is built on NPs
- In the last 5 years, we have added 7 new clinics & expanded service in all 24
- We have promoted our most expd NPs to help train those we've just hired

Come be part of an organization that respects the role of NPs in providing the highest quality care to patients in Western Washington! We are currently hiring for:

- per diem
- PT: Federal Way, Tacoma, University Place, Longview, Lynnwood, PT Longview (.2), & Floats
- FT: Everett, Puyallup & Floats

Candidates must have a WA State ARNP/FNP/WHNP/CNM or expd PA-C w/presc authority, current cert Spanish skills a +.

To apply, submit your cover ltr/resume to Email jobs@ppww.org; Fax 206.328.6818; or Mail to PPWW/HR, 2001 E Madison, Seattle, WA,

98122. PPWW offers a solid benefit pkg. . EOE.& CPR card. Prior womens h/c exp a + Bilingual

Nurse ARNP for Richland, WA family practice office.

Part-time/Full-Time with flexible hours. Looking for a knowledgeable, skilled individual to join a health care team. We strive to make a difference. Please submit resumes to:

Jennifer Morris
Family Practice
846 Stevens Drive
Richland, WA 99352
Fax: 509.946.5326
email: drwhitson@cwhealth.net

Family Nurse Practitioner

Part time or full time position available for experienced Family Nurse Practitioner at the 10 Minute Walk-In Clinics located in Marysville and Arlington, Washington. Work consists of seeing easy-to-care-for patients 18 months and older. Pay is \$44/hour. Contact Chelsea Johnson 360.658.0233 or e-mail: rypwork@hotmail.com.

Psychiatric Nurse Specialist (ARNP)

Provide Medication Management Services to Mental Health consumers of all ages. Complete assessments and prescribe psychotropic medications, as appropriate. Conduct screenings/intake evaluations; establish diagnosis; develop treatment plans. Minimum requirements: Licensed ARNP and RN, have WA prescriptive authority. 2 years ARNP experience working with children/youth strongly preferred. Starting salary based on qualifications and experience (annual entry level salary \$67,706.83). Additional information & application see www.co.stevens.wa.us

Healthy Humor

Riddle Me This...

If you Don't feel well, what do you most likely have?

A pair of gloves on your hands!

How was the blind carpenter able to see?

He picked up his hammer and saw!

What did the surgeon say to the patient after the operation?

That's enough out of you!

Things You Don't Want To Hear During Surgery

"Someone get me the janitor... We're going to need a mop!"

"Wait a minute... If this is his spleen, then what's this?"

"Don't worry, I think it's sharp enough."

"Fire! Fire! Everyone get out of here!"

"Anyone see where I left that scalpel?"

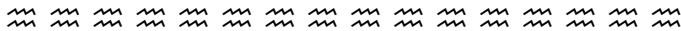
"Can you stop that from beating? Its throwing my concentration off!"

"There go the lights again!"

...And last but not least... "OOPS!"

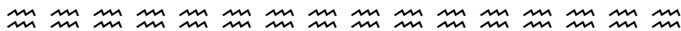
Ad Information

Copy deadline is the second Tuesday of the month prior to publication. Ads may be accepted later than this on a space-available basis. Position Available Ads of less than 66 words are \$45, of 66 to 130 words are \$75, and greater than 130 words are \$105. Position Available Ads are priced per insertion. Continuing Education Announcements of less than 65 words are \$70, of 66 to 130 words are \$105, or 131 words or greater are \$130. Continuing Education Announcements are per offering for up to three (3) consecutive insertions. New Product Announcements per product for one insertion of 130 words or less are \$75. Ad Inserts are \$550 for one issue. All ads are subject to space limitations and editing. Call for detailed rate information. Mail copy to ARNP Care, 10024 SE 240th St, #102, Kent, WA 98031. Phone 253.852.9042. Fax 253.852.7725. Email care@nurse.net.



Please mark your calendars. .

2007 Washington Nurse Legislative Day
Monday, February 5, 2007
in Olympia!



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