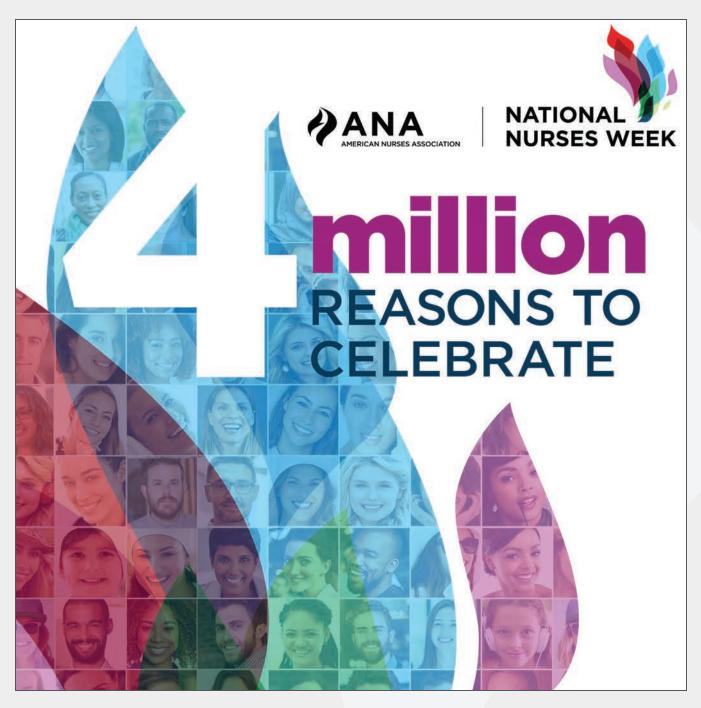


Celebrating National Nurses Week



Time's Up Healthcare Difficult families Heart healthy guidelines

Recognizing nurses who enrich our lives and the world

Ational Nurses Week, celebrated annually from May 6-12 and ending on the birthday of Florence Nightingale, is a time for everyone nurses, employers, other healthcare professionals, community leaders, and the public—to recognize the vast contributions and positive impact of America's 4 million registered nurses. This year we celebrate the inspiring stories of nurses across the nation who have dedicated their lives to serving our communities.

The American Nurses Association's (ANA) theme for National Nurses Week 2019, "4 Million Reasons to Celebrate," highlights the sheer number of RNs and is an open invitation to #ThankaNurse for enriching our lives and the world we live in.

Access everything you need to celebrate National Nurses Week, including the resource toolkit, links to the e-store and webinar registration, and a full library of logos at nationalnursesweek.org. And share your National Nurses Week celebrations on social media using the hashtag #NursesWeek.

National Nurses Week Resource Toolkit

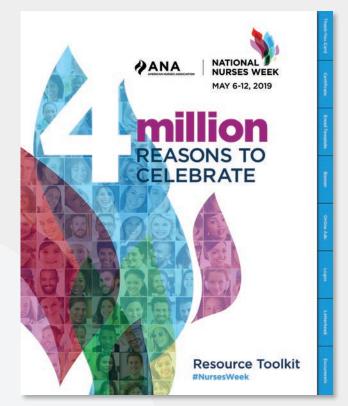
Nurses, hospitals, and other healthcare stakeholders are encouraged to make use of the National Nurses Week Resource Toolkit to help promote this annual observance in local communities and in the media. This year's toolkit contains useful information and resources, including a thank-you card, the official logo library, a large banner, a certificate of appreciation, pertinent articles, and tips for working with the media.

Celebrate with special National Nurses Week items and gifts

The resource page includes links to the ANA National Nurses Week official store, featuring ways to recognize RNs with practical and personal gifts—lunch bags, tote bags, mugs, tumblers, premium apparel, journals, pens, lapel pins, and more. As a special thank you, ANA will donate a portion of the proceeds from every product purchased on the Honor a Nurse section of the e-store catalog to support the American Nurses Foundation's Honor a Nurse program. With each purchase, you'll receive a complimentary keepsake that features a nurse's powerful story.

Attend ANA's National Nurses Week webinar

Mark your calendar for ANA's National Nurses Week webinar, "Nurses4Us: Elevating the profession," scheduled for May 8 at 1 PM ET. ANA President Ernest Grant, PhD, RN, FAAN, and Faith Roberts, MSN, RN, director of Magnet[®], professional practice and parish nursing for the Carle Foundation Hospital and Carle Physician



Group, will discuss ways you can contribute to advancing nursing, what you can do to keep nursing's professional presence in the public arena, and how nurses can improve healthcare.

You'll also hear about Nursing Now, a global campaign to improve health by raising the profile and status of nursing worldwide, which

celebrated its first anniversary in March. Nursing Now USA is scheduled to launch this month.

Nursing now

Advance registration for the webinar is required. Take part in the webinar discussion on May 8 with #NursesWeekLive.

Every nurse has a reason to celebrate

National Nurses Week is an opportunity to celebrate the myriad ways nurses make a difference, from addressing public health challenges to delivering culturally competent care and increasing diversity and inclusion in nursing. It's a time to take note of nurses' groundbreaking work as researchers, executives, educators, and innovators, and nurses' influence in shaping health policy decisions that ensure all Americans have access to high-quality, affordable healthcare coverage.

We applaud nurses, who have been named the most trusted professionals for 17 years straight, and their

advocacy to ensure that individuals, families, groups, communities, and populations receive quality patient care and services. We celebrate nurses' leadership in their organizations, on boards of directors, and as elected officials. We also honor nurses' stories of strength, resilience, and determination while navigating an ever-changing and complex healthcare landscape.

For National Nurses Week, ANA asked nurses why they celebrate being a nurse. Read their comments below, which include Pathway to Excellence[®] nurses at Mariners Hospital & Fishermen's Community Hospital, part of Baptist Health South Florida, among nurses in other roles and settings. Look for more of these stories and share yours during National Nurses Week via ANA's social media feeds on: Twitter, Facebook, and Instagram. Use hashtag #NursesWeek.

Access to care

"I work in a small, critical access hospital in the outpatient oncology infusion center. Our patients are our friends, family, and neighbors. We love our patients and provide a much-needed service in the community. If we did not have this department, patients would have to travel 50 to 100 miles for treatment."

-Jean Santaguida, APRN, oncology

Advocacy

"I kept following up with a patient's cardiologist regarding his heart rhythm changes. The cardiologist disregarded several RN notifications until I finally contacted the patient's primary physician to intervene. The patient's PCP spoke with the cardiologist and the patient ended up having to have stents placed."

-Lauren Price, BSN, RN, cardiac rehabilitation

Certification

"Being certified allows me to care for members of our community, the same people we see in the grocery store and out on the street, with confidence and expertise knowing they are receiving the best possible care."

-Debbie O'Cathey, RN-BC, multi-specialty acute care center

Giving and receiving

"Helping people when they are at their worst, most vulnerable, and facing difficult health issues is the most rewarding and grueling work. But it allows us to share a part of others' lives that is emotional, spiritual, and physical. We can influence, comfort, and care for those in need. It's the most special profession in that we can give so much and receive so much."

-Nicole Rowney, BSN, BS, RN, CMSRN, multi-specialty acute care center, palliative care nurse

Growth

"I am celebrating nurses because of the vital role that we play across the healthcare continuum as patient advocates influencing health policy, leadership, and practice initiatives. I am also celebrating the more than 17,000 ANA Up and Comers Online Community members who are navigating the path of career transitions into education, advanced practice, and management positions, as well as pursuing (or planning to pursue) an advanced degree in nursing."

—Aaron Sebach, DNP, MBA, AGACNP-BC, FNP-BC, CEN, CPEN, FHM, chair and associate professor, doctor of nursing practice program, Wilmington University, New Castle, Delaware

Health

"Following a regular exercise program gives me strength and flexibility to perform my job better and reduces risk for injury."

-Jay Stayouhar, BSN, RN, CPAN, operating room

Patient care

"I'm celebrating nurses because they have a positive impact on patients and families. From patients in the hospital or in their home, to schools or workplaces, nurses are there with the dedication to make a difference in the lives of those in need."

—Amy Witkoski Stimpfel, PhD, RN, assistant professor, Rory Meyers College of Nursing, New York University

Teamwork

"In the OR we get to work as a team, closely working with the surgeon and anesthesiologist. Everyone is a trusted, important part of that team."

-Sue Austin, RN, operating room

Trust

"Nurses are the most trusted profession because we give selflessly, no matter who the person is or where they come from."

-Bonnie Talsma, BSN, RN, cardiac rehabilitation

Vision

"I celebrate nursing's rich history of devotion, wisdom, and commitment to society. Nursing accomplishments of generating new knowledge, policy, and leadership development over the decades have given us a proud heritage. The future of nursing leadership is full of anticipation and optimism. Nursing is illuminating the path for health and wellness for our communities."

-Marian Shaughnessy, DNP, MSN, RN, board member of the American Nurses Foundation

ANA News

ANA among first to partner with Time's Up Healthcare

n February, Time's Up announced the launch of Time's Up Healthcare, a new affiliate with the purpose of driving new policies and decisions that result in more balanced, diverse, and accountable leadership; address workplace discrimination, harassment, and abuse; and create equitable and safe work cultures throughout healthcare.

Time's Up Healthcare is the newest industry affiliate of Time's Up, joining a coalition of women across industries dedicated to advancing the organization's mission of creating safe, fair, and dignified work for all women. The American Nurses Association (ANA) is one of the first to partner with Time's Up Healthcare. ANA Past President Pamela Cipriano, PhD, RN, NEA-BC, FAAN, represented ANA at the launch event on March 1.

Time's Up Healthcare is made up of women from diverse backgrounds and specialties. Its founders and leaders represent a wide spectrum of healthcare professionals, including nurses, physicians, physician assistants, clinical pharmacists, and more—all steadfast in the shared goal of improving gender equity and decreasing the burden of sexual harassment in healthcare. In recognition that problems of gender

IMD call for nominations for 2019 ANA elections

he Individual Member Division (IMD) of the American Nurses Association (ANA) is soliciting nominations for the following positions with the IMD: Vice Chairperson, Members-at Large/Membership Assembly Representative—seeking a minimum of two (2) individuals. The two individuals with the highest number of votes will be voted for as the Members-at-Large/Membership Assembly Representatives and serve on the IMD Executive Committee.

To review in detail the roles and responsibilities of each position, please access the Individual Member Division Operating Policies and Procedures, under the resources tab at nursingworld.org/ membership/individual-member-division. The terms of office for each position are two years, beginning July 1, 2019, through June 30, 2021.

This is the official notice of election and request for nominations for these two IMD positions. To qualify as a candidate for office, the nominee must be a member of the ANA Individual Member Division (ANA-Only membership category). Emails with information for the nomination process and criteria will be sent starting April 15. If you do not have an email on file with ANA, you will receive print notifications. inequity and sexual harassment affect all healthcare workers, Time's Up Healthcare organizers are committed to unifying professionals across fields and engaging and supporting organizations and individuals at every level of healthcare delivery.

"Healthcare professionals at every level dedicate our lives to protecting others, but we know that we can best serve our patients only when our working conditions are safe and fair. Time's Up Healthcare will ultimately help us all be better stewards of care for patients by providing us the platform and practices to advocate for ourselves," said Tiffany A. Love, PhD, FACHE, regional chief nursing officer, Coastal Healthcare Alliance, founding member of Time's Up Healthcare.

Time's Up Healthcare is an initiative of the Time's Up Foundation, which supports a growing number of industry affiliates driving change. The Time's Up Foundation also supports the Time's Up Legal Defense Fund, which is housed at and administered by the National Women's Law Center Fund. The fund connects those who experience sexual misconduct and related retaliation in the workplace or in trying to advance their careers with legal and public relations assistance.

In addition to ANA, other Time's Up Healthcare partners include the American Medical Women's Association, American College of Physicians, the National Medical Association, Service Employees International Union, and Council of Medical Subspecialties. These organizations have publicly declared their commitment to Time's Up Healthcare's organizational principles: sexual harassment and gender inequity have no place in the healthcare workplace; every employee should have equitable opportunity, support, and compensation; and a problem cannot be addressed until its scope and impact is understood.

Time's Up Healthcare signatories include Alpert Medical School of Brown University, Drexel University College of Medicine, Mayo Clinic, University of Wisconsin School of Medicine and Public Health, UW Health, and Yale Medical School. Each has made an open commitment to these principles as well. Time's Up Healthcare's founding sponsors include: FIGS, Horizon Pharma, InCrowd, and American Medical Women's Association.

The rate of violence against registered nurses and other healthcare workers has reached epidemic proportions. Through its #EndNurseAbuse campaign, ANA works to raise awareness about the abuse that nurses routinely experience on the job and to address workplace cultures that prevent greater reporting of these incidents. ANA is proud to support Time's Up Healthcare's goals to make the workplace safe and respectful for all.

For more details, visit timesuphealthcare.org.

When concerns arise over family involvement in care

To: Ethics Advisory Board

From: Concerned RN

Subject: Difficult families

have a patient whose family frequently interrupts care, argues about medications and the plan of care, and seems to upset the patient. I wonder if they are making the best decisions for the patient because they are now demanding a transfer to another facility. I see myself as a patient advocate but am not sure how to handle this situation.



From: ANA Center for Ethics and Human Rights

Caution must be used when determining if a family is negatively impacting care: Are there differing perceptions about the "right thing to do," or are there misunderstandings that impact how nurses view family dynamics and cultural norms?

Capable adults have the right to make decisions about their medical care. When nurses support patient and family participation in making decisions and planning care, they support patient autonomy. Respect for the inherent dignity and human rights of all individuals is a key principle that underlies all nursing practice, which includes honoring the patient's right to autonomy and the ability to consent to or refuse treatment. Patients have the right to make decisions with family and to be provided all necessary information to make informed decisions. To aid in this, nurses establish trusting relationships to enable care planning that achieves the patient's own goals.

Autonomy to make one's own decisions requires decisional capacity. Capacity can be easy to determine in some cases and more difficult in others. Nurses can determine if a patient has the capacity to participate in care planning discussions and should tailor discussions to the patient's ability to understand. However, patients who lack decisional capacity should have their medical decisions made by surrogate decision makers, who are legally required to use substituted judgment whenever possible to make decisions that patients would make for themselves if they were able. Substituted judgment considers the patient's values, previously expressed wishes, and life choices to inform decisions. When a patient's wishes are unknown, surrogate decision makers use the best interest standard to weigh risks and benefits.

State laws, for example, healthcare decisions acts, and hospital policy help determine who may serve as a surrogate decision maker for patients who lack capacity. As nurses evaluate a patient's decisional capacity and strive to advocate for patient autonomy, they must remain cognizant of the patient's best interest. Because best interest is highly subjective, nurses must include the patient and family in planning care and determining best interest. And nurses must honor the patient's values and desires for care whenever possible. Honest discussions support patient autonomy.

The ANA Code of Ethics for Nurses with Interpretive Statements (nursingworld.org/coe-view-only) reminds us that nurses' primary commitment is to the patient and family. Nurses establish trusting relationships with patients and families that respect cultural values, religious or spiritual beliefs, and patient decisions. Establishing an emotional connection with patients and families builds the trust necessary for nurses to successfully advocate for patients. Asking patients and families about themselves, their likes and dislikes, their values, and what they understand about current care needs can help nurses truly understand their patients' needs and connect emotionally, ensuring a successful nurse/patient relationship.

Many nurses can recall a patient or family with whom they were unable to establish a trusting relationship, whom they perceived as interfering with care and not advocating for the patient's best interests. Nurses must use caution in such determinations and actively seek to build trust and understand the patient's and family's needs.

 Response by Donna Casey, DNP, MA, RN, NE-BC, FABC, chair of the ANA Ethics and Human Rights Advisory Board

Selected references

Kon AA, Davidson JE, Morrison W, Danis M, White DB. Shared decision making in ICUs: An American College of Critical Care Medicine and American Thoracic Society policy statement. *Crit Care Med.* 2016;44(1):188-201.

Ortiz J, Casey DM. Dead wrong! The ethics of culturally competent care. *Medsurg Nurs.* 2017;26(4):279-82

Ozaras G, Abaan S. Investigation of the trust status of the nurse-patient relationship. *Nurs Ethics.* 2018;25(5):628-39.

PATIENT CARE

Cardiovascular nurses encourage use of updated guidelines for management of blood cholesterol and physical activity

By Kim Newlin, RN, CNS, ANP-C, FPCNA, FAHA, and Kathy Berra, MSN, NP-BC, FAANP, FPCNA, FAHA, FAAN

The Preventive Cardiovascular Nurses Association believes that all nurses should integrate the recently updated 2018 American College of Cardiology (ACC)/American Heart Association (AHA)/multi-society cholesterol guideline and the U.S. Department of Health and Human Services' physical activity guidelines into their clinical practice and personal lifestyle. Given nurses' education and expertise, they are well positioned to address both primary and secondary prevention of atherosclerotic cardiovascular disease (ASCVD)—the major cause of death and disability worldwide.

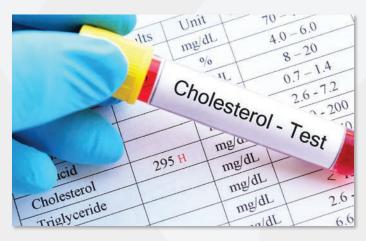
Cholesterol guideline

The 2018 cholesterol guideline emphasizes the importance of an intensive, team-based approach to identify, risk stratify, and treat elevated cholesterol in individuals across the lifespan. Thus, nurses will need to play an integral role in managing the millions of individuals with high cholesterol. A first step is to use the ASCVD risk predictor tool to determine risk status and guide therapies.

Addressing lifestyle is the fundamental approach to the management of cholesterol across all age groups, genders, ethnicities, and risk levels. Lifestyle affects all CVD risk factors and is the primary approach to managing metabolic syndrome. Here are some key points for specific patient populations and refer to the guidelines for more detailed recommendations.

For patients with:

• known ASCVD, elevated low-density lipoprotein cholesterol (LDL-C) should be reduced by 50% or more with the use of high-intensity statin therapy or a maximally tolerated statin. Explain to the patient that a greater reduction in LDL-C further reduces risk.



- very high risk of ASCVD, the addition of the nonstatin therapies, ezetimibe and PCSK9 inhibitors, is reasonable if LDL-C remains > 70 mg/dL. But keep in mind that, at the time of publication, the long-term safety (> 3 years) and cost-effectiveness of PCSK9 inhibitors was uncertain.
- LDL-C > 190 mg/dL, initiation of high-intensity statin therapy is recommended.
- diabetes (40 to 75 years of age) and an LDL-C of > 70 mg/dL, moderate-intensity statins are indicated without needing to calculate the ASCVD risk score.

For patients without diabetes, who are 40 to 75 years of age and with a:

- 10-year ASCVD risk score of 5% to 7.5% (borderline risk) and risk factors, statin therapy may be considered.
- 10-year ASCVD risk of >7.5%, LDL-C of > 70 mg/ dL, and additional risk factors, moderate-intensity statin therapy should be considered. If risk status is uncertain, using a coronary artery calcium (CAC) score* to improve the clinical decision can be considered.
- 10-year ASCVD risk score of 7.6% to 19.9% (intermediate risk) and risk factors favors the use of statin therapy.
- 10-year ASCVD risk score of 7.6% to 19.9% and LDL-C of 71 to 189 mg/dL, use of CAC score can help with decision making.

*A CAC score of 1-99 favors statin therapy (for those >55 years old). For all patients, a CAC score of >100 supports statin therapy unless contraindicated.

Refer to the guideline for specific hypertriglyceridemia recommendations. For persistently elevated triglycerides, a very low-fat diet, reduction of alcohol and refined carbohydrates, increased consumption of omega-3 fatty acids, and potential use of fenofibrate to prevent acute pancreatitis are indicated. Fenofibrate is recommended over gemfibrozil due to reduced severe myopathy risk.

For all patients on statin therapy, regular lab follow-up for adherence and LDL-C response to therapy is advised. After initiating or titrating therapy, recheck labs in 4 to 12 weeks and repeat labs every 3 to 12 months, as needed.

The cholesterol guideline strongly emphasizes three points that support successful initiation and ongoing management of ASCVD risk factors:

• Education regarding personal risk factors with an individualized care plan is critical. Intensive lifestyle counseling is recommended throughout the lifespan.

- Shared decision-making is the recommended approach to lifestyle change and medical management for cholesterol.
- A multidisciplinary approach to care is required for successful outcomes.

Physical activity guidelines

The 2018 Physical Activity Guidelines Advisory Committee Scientific Report demonstrates that physical activity has advantages that go beyond disease prevention, including helping individuals sleep better, feel better, and perform daily tasks more easily. And the knowledge gained over the past 10 years shows that benefits are obtained even when taking a flexible approach to how individuals fulfill activity recommendations.

Here are examples of light, moderate, and vigorous intensity activity:

- light: walking at a slow pace (2 mph) or cooking
- moderate: walking briskly (3-4 mph), raking a yard, or moderate housework
- vigorous: walking very fast or running (4.5+ mph), participating in aerobics, or mowing the lawn with a hand-mower

Instead of medication for sleep issues, anxiety, or depression, recommend moderate physical activity, which can help with all of these conditions. Not only can moderate physical activity reduce the time it takes to go to sleep and the amount of time individuals are awake in the middle of the night, it also can increase the time in a deep sleep and reduce daytime sleepiness. Other benefits include improved cognition, memory, attention and academic performance, and reduced risk or symptoms of depression and anxiety. The benefit starts with regular physical activity in children as young as 3 years old and throughout life, so it is never too early and rarely too late to emphasize its importance.

The adage, "some is better than none" is supported in these guidelines. The target remains 150 to 300 minutes of moderate to vigorous physical activity per week, but research in the last decade shows tremendous value in reducing inactivity even with light-intensity physical activity. And for those exercising within the recommended range, there are more benefits to doing even more moderate to vigorous physical activity. New to the guideline is that any individual bout of physical activity can be included in the daily accumulated total volume of physical activity the minimum is no longer 10 minutes.

Evidence in the guidelines indicates that individual interventions and school or community programs, along with policy changes to improve access to places where people are safe during activity, can increase physical activity levels. Encourage patients to use



wearable devices and smartphone apps to enable selfmonitoring, deliver messages, and provide support.

The more this information is shared and applied, the more healthy the overall population will be, and what better profession than nursing to share the key findings from these guidelines?

— Kim Newlin is the nursing director of cardiovascular services and a nurse practitioner at Sutter Roseville Medical Center in Roseville, California. Kathy Berra is co-director of the LifeCare Company and nurse practitioner at Cardiovascular Medicineand Coronary Interventions in Redwood City, California, Stanford Prevention Research Center, Stanford University School of Medicine (ret).

Selected references

ASCVD risk estimator plus. American College of Cardiology. tools.acc.org/ASCVD-Risk-Estimator-Plus/#!/calculate/estimate

Benjamin EJ, Virani SS, Callaway CW, et al. Heart disease and stroke statistics—2018 update: A report from the American Heart Association. *Circulation*. 2018;137(12):e67-492.

Grundy SM, Stone NJ, Bailey AL, et al. 2018 AHA/ACC/ AACVPR/AAPA/ABC/ACPM/ADA/AGS/APhA/ASPC/NLA/ PCNA guideline on the management of blood cholesterol: A report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol. 2018. [Epub ahead of print]

Grundy SM, Stone NJ, Bailey AL, et al. 2018 AHA/ACC/ AACVPR/AAPA/ABC/ACPM/ADA/AGS/APhA/ASPC/NLA/ PCNA guideline on the management of blood cholesterol: executive summary: a report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol. 2018. healthmetrics.heart.org/wp-content/uploads/2018/11/2018-Guidelineon-the-Management-of-Blood-Cholesterol-Executive-Summary.pdf

Triple impact: How developing nursing will improve health, promote gender equality and support economic growth. All-Party Parliamentary Group on Global Health. 2016. who. int/hrh/com-heeg/digital-APPG_triple-impact. pdf?ua=1&ua=1

2018 physical activity guidelines advisory committee scientific report. U.S. Department of Health and Human Services. health.gov/paguidelines/second-edition/report/pdf/PAG_ Advisory_Committee_Report.pdf

Foundation names 2018 Nurse of the Year

ears of happiness reinventing myself." That's how Corinne Schlom, RN, sums up her nursing career—and how it has enriched her life.

Schlom was named the American Nurses Foundation's Honor a Nurse 2018 Nurse of the Year, which recognizes extraordinary nurses while giving back to the profession. And at age 92, recently retired from her parttime position at a rehabilitation center in Glenview, Illinois, Schlom has certainly earned that title.

Her son Charles Schlom, a retired lieutenant colonel, donated to the Foundation in honor of his mother last year; he then presented the Honor a Nurse certificate at her birthday party. It was a fitting tribute for Corinne, who said that it was "always an honor to be a nurse, providing care for others."

A first-generation American born to Italian immigrants, Schlom entered the Cadet Nursing Program in 1944, as part of the Bolton Act that called up nurses for national service during World War II, and attended St. Mary's Nursing School in La Salle, Illinois. The war ended while she was still in training, but in 1947 Schlom was assigned to serve at the Veterans Administration Hospital in Minneapolis, Minnesota, taking care of the wounded and helping to rehabilitate many of the young soldiers who were permanently disabled.

Schlom then entered civilian nursing as a surgical nurse, working for neurosurgeon Loyal Edward Davis, MD, at Northwestern Medical. That's where she realized her love for surgery and went on to work for another neurosurgeon for more than 12 years until his retirement.

After taking several years to stay home to care for her young children, Schlom returned to work on weekends; she recognized the need for quality long-term care and felt that she could add value. "The satisfaction of getting people through the day is fulfilling,"



Charles Schlom presented the Honor a Nurse Certificate to his mother, Corinne.



Corinne Schlom (pictured right), providing care to a wounded soldier.

Schlom said. Proud of his mother, Charles was inspired by her choice to work at a time when most of his high school friends' mothers did not work outside of the home. Besides, having a mother who was a nurse made getting sick easier! Nursing runs in the family. Corinne's niece and daughter-in-law are also RNs.

A true lifelong learner, Schlom went back to school for her bachelor's degree from the University of St. Francis, graduating in 1987. And when computers began to be used in healthcare, she quickly learned how to use the new technology to develop psychotropic drug plans in her facility.

Schlom's dedication to the military continued throughout her life. She rolled bandages in the 1960s to send to Vietnam. When Charles was stationed in Afghanistan, she coordinated a jeep-load of medical supplies to be shipped over to her son's base. When the United States Cadet Nurse Corp Equity Act of 2011 formally pronounced his mother a WW II veteran, Charles promptly brought her to visit the local VA. "She was greeted like a rock star," Charles said.

"The staff and board of the American Nurses Foundation are thrilled to recognize Corinne Schlom. We are so pleased to highlight Corinne and her devotion to nursing," said American Nurses Foundation Chair Tim Porter-O'Grady, DM, EdD, APRN, FAAN. "We are truly inspired by her life story."

The Foundation's Honor a Nurse program recognizes nurses' extraordinary contributions to healthcare. The program enables colleagues, friends, family, and others to honor a nurse or a group of nurses who have made a positive difference, while supporting the profession philanthropically. The funds raised support nursing research, scholarships, and programs to improve nurses' lives and the nursing profession. Nurses who have been honored qualify for the Honor a Nurse - Nurse of the Year award. To honor a nurse, visit givetonursing.org/honoranurse. Celebrate National Nurses Week (May 6-12) by recognizing the nurses you know.