

Certified Registered Nurse Anesthetists CRNAs

- Represent nearly 150 years of quality anesthesia
- Safely administer approximately 43 million anesthetics in the US every year
- Represented by 50,000 CRNAs nationwide and over 1300 here in Georgia
- Are the sole anesthesia providers in nearly 100% of rural hospitals throughout the country
- Practice in every type of clinical setting
- Provide high quality, safe, efficient and cost effective anesthesia care

Mission Statement

The Georgia Association of Nurse Anesthetists advances patient safety and CRNA practice through advocacy, education, and member engagement.

Vision Statement

Certified Registered Nurse Anesthetists in Georgia will be autonomous providers recognized for their full scope of practice and quality patient care and are compensated fairly for their services.

Report from the President

Politics Makes Strange Bedfellows

by Barry Cranfill, CRNA, MHS, MBA, FAAPM



In 1611, William Shakespeare wrote a 17th century version of the modern day Sopranos. The play was entitled *The Tempest* and it had all the makings of a good Italian Mafioso story, complete with intrigue, deception, family grudges and the like! There is a scene in the play where one of the characters, "Trinculo" has become shipwrecked during a terrible storm and is seeking shelter. Unfortunately, the only available safe harbor Trinculo can find is with a deformed monster named "Caliban." Trinculo crawls into Caliban's shelter exclaiming, "...misery acquaints a man with strange bedfellows."

For most, politics is misery and that brings us to the current use of Shakespeare's quote in our current vernacular: "Politics makes strange bedfellows." Far more often than not, one will find that mutual gain and shared misery will force the most unlikely of political alliances to form. Nothing brings folks together like a common threat or the hopeful prospect of collective advantage that would be impossible without collaboration amongst unlikely comrades.

I was privileged to be installed as the new GANA President during our Annual Business meeting and I am honored to have the opportunity to serve Georgia CRNAs for the next year. We have much to do and as always, one of our greatest tasks is preparing for our work at the Capitol. As we prepare for the upcoming session of the Georgia General Assembly, the GANA will be developing our Legislative Agenda. As a rule, our legislative topics are pretty simple: Patient Safety, Access to Care, Ensuring Full Scope of Practice, Continued Competence,

Regulatory Issues, Reimbursement, etc. One would think that the GANA would find common ground with the Georgia Society of Anesthesiologists (GSA) on many of these issues, but that is not always the case. Too often we find ourselves on opposite sides of issues at the Capitol.

During the legislative session last year, two bills were introduced that were focused on "surprise billing" for patients. It is my belief that this is an area where the GANA and the GSA can find common ground to work together for our members and the citizens of Georgia. In other words, we may have the opportunity to have some strange bedfellows during this upcoming legislative session.

Georgians, in record numbers, are complaining to their representatives that they are being financially burdened by surprise medical bills. Consider an insured patient that requires some type of surgical intervention. The patient carefully selects a high quality surgeon and facility that are participating, in-network providers with the patient's insurance plan. The surgery is completed successfully and then the bills and Explanation of Benefits (EOB) documents for the facility and surgeon charges to the insurance company appear in the mailbox. The EOBs show the standard charge rate for the provider (the PAR Rate or "sticker price") and it also shows the discounted charge the participating, in-network provider has agreed to accept for the procedure. The EOB shows the amount of the discounted charge that is owed by the patient (patient responsibility) for any co-pay, deductible or co-insurance and it also shows

continued on page 7 >

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www.gana.org



Proud supporter of
Anesthesia Patient
Safety Foundation

Report from the Executive Director

Endings Matter

by Christy A. Dunkelberger, Esq.
Executive Director/Legal Counsel



GANA Elections:

GANA is happy to announce the following individuals have been elected to the GANA 2017-2018 Board: Wally Phillips – President-elect; Eddie Thomas – Treasurer; Sarah Phillips – Secretary; April Culler – Board Member; and Michael Conti – Board Member. The returning Board members include: Barry Cranfill, President; Jo Sineath, Immediate Past President, and Board members Cameron Durden and Reed Halterman. Congratulations to all and thank you for your service.

GAS 2017 and Beyond:

The 2017 GAS is now history. You may have noticed a new face at the meeting. For the first time GANA utilized Association Meeting Planners with Laura Moritz to handle planning and overall meeting operations of the 2017 meeting. Laura did an excellent job and she got great evaluations from attendees. GANA is happy to report that it has retained Laura and her group for the GAS 2018 and 2019 meetings. 2018 GAS will be held from October 5-7, 2018, so mark your calendars and save the dates. The meeting location is under consideration and we are negotiating with our top venue choices. More details about the 2018 meeting will be announced soon by way of GANA Website, Facebook and through the listserv.

Legislative Outlook:

Both chambers of the state legislature have created study committees to evaluate the status of and barriers to healthcare practices in Georgia. Senate Resolution 188 created a committee chaired by Senator Renee Unterman to study barriers to Georgians' access to adequate healthcare. A member of the Georgia Board of Nursing and an APRN are part of the designated membership. The resolution creating this committee acknowledges that Georgia laws and regulations have not kept pace with advanced practice nursing's evolution and therefore, compromises Georgians' access to care; and that Georgia is one of only 12 states with laws restricting the autonomy of APRNs. These recognitions and acknowledgements open the door for potential progress in nursing practice.

House Resolution 240 created a committee chaired by Representative Sharon Cooper. This study committee will look at barriers to access adequate health care. The focus of the Resolution identifies specific diseases in Georgia that are preventable, yet widespread. The four non-legislative members of the committee include one practicing psychiatrist, one practicing respiratory therapist, one practicing infectious disease physician, and one practicing physician. There are no APRNs designated to this committee.

With two committees addressing healthcare access and barriers, it is highly likely that future health care legislation will be introduced. CRNAs need to be a part of this movement. If not, they will be left behind or negatively impacted. The opportunities are on the doorstep – you need to open the door – and join the discussion. It will be an exciting 2018 legislative session. CRNAs need to be involved.

Endings Matter:

This is my last submission to the *To & Fro* as the GANA Executive Director. I am excited to be starting a new path in life towards retirement. At the

continued on page 18 >

"VA Surgeries Postponed Because There Aren't Enough Anesthesiologists"

by Steve Smith, CRNA, MA



On October 11, 2017 television station KDVR Denver reported that **VA surgeries were postponed** because there aren't enough anesthesiologists. The report indicated that since August, 65-90 surgeries have been cancelled or postponed at the Denver Veterans Affairs Medical Center due to a **lack of anesthesia providers**. As you may recall, last year the Department of Veterans Affairs released a final rule that granted full practice authority to all APRNs in VA facilities **except CRNAs**. The VA cited that the decision did "not stem from the CRNAs' inability to practice to the full extent of their professional competence, but rather from the VA's lack of access problems in the area of anesthesiology." Given the many delays and cancellations of procedures specifically due to a lack of anesthesia services, it is clear **the final rule was incorrect** in its assessment of the need to grant CRNAs full practice authority in the VHA system.

According to the story by KDVR news in Denver, that facility has reportedly been operating with one of the most inefficient anesthesia delivery models with a 1:2 supervision ratio. This care model is utilized, despite the fact that the VA does not require CRNAs to be supervised by anesthesiologists or by any other physicians. Additionally, no state or federal laws require CRNAs to be supervised by anesthesiologists. CRNA supervision leads to increased costs and reduced access to timely care, but does not lead to better healthcare outcomes as confirmed by scientific research data. This demonstrates VA's blatant disregard for

the recommendations of both the Commission on Care's Final Report and the VA Independent Assessment, both of which advised providing full practice authority to CRNAs as a way to improve access to quality care in the VHA system.

In a recent op-ed by AANA President Bruce Weiner he listed 6 things the VA can do to ensure veterans get the anesthesia care they need: (i) acknowledge that the problem is dire; (ii) prohibit 1:1 and 2:1 anesthesia provider ratios; (iii) make full use of the CRNAs and anesthesiologists already working in VHA facilities; (iv) grant full scope of practice to CRNAs in the VA; (v) stop overpaying to outsource anesthesia services; and (vi) pause for a reality check.

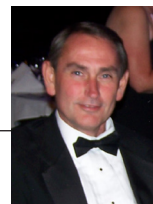
The unfortunate situation at the VA facility in Denver has shown us what we already knew: there is an access to anesthesia care issue in the VHA system. Our veterans deserve better, and this absolutely warrants revisiting the decision by the VA to not include CRNAs in full practice authority.

The unfortunate situation at the VA facility in Denver has shown us what we already knew: there is an access to anesthesia care issue in the VHA system. Our veterans deserve better, and this absolutely warrants revisiting the decision by the VA to not include CRNAs in full practice authority. The AANA is working with our legislative allies, the Colorado Association of Nurse Anesthetists, and the Association of Veterans Affairs Nurse Anesthetists to ensure that policymakers and the public understand that full practice authority for CRNAs would increase access to care for veterans without additional funding.

Please stay tuned for updates and email blasts from the AANA concerning this story. If you have not yet sent your letter to your legislators concerning this issue, visit crna-pac.com and take action now. While you are at this website please consider giving a donation to the AANA CRNA-PAC. These are exactly the kinds of issues your donations go towards, Full Practice Authority! ▲

Augusta University Nursing Anesthesia Report

by James Masiongale, CRNA, DNP
Director and Clinical Coordinator
Nursing Anesthesia Program, Augusta University



As the end of the year approaches so does graduation for the Class of 2017. They are currently completing their last semester of clinicals and preparing for the certification examination. Most, if not all, have jobs lined up and look forward to joining the CRNA working community.

The Class of 2018 has completed 10 weeks of clinical at the time of this writing and the students are starting to feel more comfortable in the OR and anesthesia setting.

We would like to welcome the new program manager Laura Van Tuyl Van Serooskerken to the program. Laura has adapted to the position very quickly and has been a tremendous help running the program.

The Class of 2021, the first cohort of nursing anesthesia DNP students, will begin in January 2018. A couple of changes will occur as a result of the start date moving to January and the addition of 8 months of training. The students will now have 4 semesters of didactic instruction instead of 3; and 5 semesters

of clinical instead of 4. There will also be a semester after the Class of 2018 graduates where there are no students in clinical. This will be our only break in clinical. All clinical rotations will be 4 days per week with the 5th day allotted for DNP classes. Please bear with us as we make the transition.

As always I want to thank all of the clinical instructors. You are the heart and backbone of our program and without you we could not exist. Taking the time to share your knowledge, experience, and skills is one of the greatest gifts you can give back to this wonderful profession. You are true heroes in the eyes of the students and didactic faculty, and we are forever grateful to you.

If you have any questions or comments, please do not hesitate to send me an email or give me a call.

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jmasiong@augusta.edu ▲

SAVE THESE DATES!

The GANA will be celebrating National CRNA Week
at the Capitol on January 23rd, 24th and 25th, 2018

National CRNA Week



National CRNA Week is the AANA's annual celebration of anesthesia patient safety and the nation's 52,000+ Certified Registered Nurse Anesthetists and student registered nurse anesthetists who safely and cost-effectively provide approximately 43 million anesthetics each year. Known as National Nurse Anesthetists Week as recently as 2014, the new name for this popular event helps patients, hospital administrators, healthcare professionals, policymakers, and others become more familiar with the CRNA credential and the exceptional advanced practice registered nurses who have earned it.

Reserve the 2018 dates to Celebrate National CRNA Week:

January 21-27, 2018!

GAS Was A Blast!

Thank you for joining us - Let's do it again

EDUCATE

ENGAGE

Save the Date
October 5 - 7

GAS2018

GEORGIA ANESTHESIA SYMPOSIUM

EMPOWER

LOCATION TO BE ANNOUNCED

Stay Tuned for Details @ www.GANA.org

GANA
Supporting Members • Protecting Patients

Georgia Association
of Nurse Anesthetists

Student Report

by Jessica Galloway, SRNA



The Augusta University Junior Class of 2018 started clinical rotations this past August. Augusta University students are dispersed between 26 different clinical sites throughout Georgia. We may be coming to a clinical site near you! We are very excited to begin putting what we learned in the classroom into practice in the operating room.

We all got to know Stan, a high-fidelity simulation mannequin, really well over the summer before we began clinical rotations. Many students think it is nice to be able to practice the sequence of induction with Stan so many times before performing an induction on an actual patient. However, it goes without saying, we are discovering intubating Stan is nothing like the real thing!

We have also learned that a 0730 procedure start comes much sooner than expected. We get to our clinical sites particularly early to ensure we have adequately prepared for the day. We try to keep in mind what Dr. Amy Masiongale always says: "Failure to plan is planning to fail". Some of us have made our own set-up checklists to guarantee we are well prepared for the day, and to make the set-up process more efficient. And we thought our 9:00am lectures were early!

We are very appreciative of our generous preceptors. I'm sure it takes patience to guide us through our journey to becoming excellent nurse anesthetists. During the first few weeks of clinicals, I wanted to tell my preceptors everything about our patients from all their past surgeries and current medications to how many siblings they have and what exactly they had for their last meal 10 hours ago. We are improving on finding balance between being thorough while also being efficient. We are making progress on our journey to becoming competent Nurse Anesthetists, but we still have a lot to learn. ▲

Shadow a CRNA

Contact the GANA
office by email at
ganaoffice@bellsouth.net

GANA Calendar 2017-2018

December 15, 2017

Augusta University NAP graduation
Augusta, GA

January 13, 2018

GANA BOD meeting – Telephone

January 21-27, 2018

National CRNA Week

(GANA plans to hold events at the State Capitol
in Atlanta on Tues., Wed. & Thurs., Jan. 23-25)

February 15-17, 2018

AANA Assembly of School Faculty
Scottsdale, AZ

February 24, 2018

GANA Regional Meeting – Atlanta

March 24, 2018

GANA BOD meeting – TBD

April 21-25, 2018

AANA Mid-Year Assembly
Washington, DC

May 19, 2018

GANA BOD meeting – Telephone

June 23, 2018

GANA Regional Meeting – TBD

August 18, 2018

GANA BOD meeting – Emory University Nurse
Anesthesia Program

September 21-25, 2018

AANA Annual Congress in Boston, MA

October 5-7, 2018

Georgia Anesthesia Symposium, TBD

GANA Board Meetings: Conference calls will be at 8:00 pm; in-person meetings will be at 10:00 A.M. unless otherwise announced. Call (770) 487-3900 or email ganaoffice@bellsouth.net if you would like to attend a meeting. All Board meetings are open to GANA members.

To and Fro Publications for 2018
will be May and November

FROM THE COVER

Politics Makes Strange Bedfellows

the amount paid to the provider from the insurance company. The patient has NO surprises. The patient pays the “patient responsibility” portion and all is well. The providers are contractually prohibited to bill the patient for the difference between the PAR Rate, sticker price and the discounted charge. Therefore, there is no billing for this “balance” because the provider is in-network.

But then the EOB related to the anesthesia service arrives and the patient is surprised to learn that the anesthesia provider has chosen to remain out of network with the patient’s insurance plan. The patient did NOT choose their anesthesia provider. The provider was chosen by the facility and/or surgeon. The patient has no way of knowing whether the anesthesia provider is a participating, in-network provider for the patient’s insurance plan. The EOB for this anesthesia charge is formatted the same way, EXCEPT – because the anesthesia provider is “out of network” the patient is SURPRISED by the fact that they are now subject to an entirely separate and extremely large out of network deductible amount (even though the patient already paid the entire in-network deductible) and the charge for the service is NOT discounted. Certainly the insurance company will pay a portion of the bill based on the insurance company’s assumption of “usual and customary” charges. But this payment by the insurance company is woefully insufficient to cover the entire Par Rate, sticker price. And since the anesthesia provider is out of network, the provider is free to “balance bill” the patient for the difference. Unfortunately the patient never saw this obligation coming, and therefore this is a completely unforeseen and surprising balance billing situation that is financially burdening to the patient. In many cases, the patient cost for the out of network provider (as a result of separate deductibles and balance billing) is far greater than the TOTAL patient cost of all the other in-network services combined.

I think we can all agree that patients should never have this type of surprise. A responsible patient selects health insurance based on their specific needs and financial situation. The patient understands the limitations of the plan and works diligently to select in-network providers so that they can best utilize the benefits of their selected insurance plan. But if the patient is NOT MADE AWARE of the fact that some of their care will be provided by out of network providers and they have no control over the selection of those providers, then they have no way of reliably predicting the financial cost of their care. It would be like walking into a car dealership, buying a car on sale and then told AFTER the purchase, that the buyer has a requirement to pay for a maintenance plan that cost more than the car. SURPRISE!

This issue is not as simple as it seems. Patients are absolutely being harmed by undisclosed out of network providers. However, providers also have complaints. Most anesthesia providers in the state work diligently to negotiate acceptable in-network rates and therefore do not subject patients to any surprise billing. However, many providers claim that the insurers do not pay enough for in-network care and that the insurers are taking advantage of providers by paying too little for their services. These providers claim that they have no alternative but to remain out of network and bill the patients for the difference. So, as always, there is more than one side to the story.

Additionally, some out of network providers will attempt to game the system by charging exorbitant rates that are often 4 times higher than the national average. The hope in this scenario is that the provider will present an extremely high out of network bill to the insurance company in anticipation that the insurer will at least pay more than the provider would have been able to collect if the provider was in-network. In some of these cases the out of network provider then decides to not pursue the patient for the out of network patient responsibility. Although this scheme seems to benefit the patient, it is defrauding the insurance companies by submitting falsely elevated charges and is tantamount to a patient inducement to utilize the out of network provider. Routine waiver of patient deductibles and co-insurance is a violation of both state and federal law.

The GANA and GSA have an opportunity to help develop the proper solution. The key component of any legislation must include disclosure to all patients as to the insurance network status of every provider and entity that will be involved in a patient’s care. The patient deserves to know. However, it must be made absolutely clear to patients that they will remain 100% responsible for paying for their care as long as proper disclosure regarding network status is provided. Additionally, it is important to remind patients (and legislators) that when they choose an insurance plan, the plan almost universally includes the requirement that the patient pay for a portion of their care through applicable deductibles, co-pays and co-insurance. If a patient selects a network plan that has a \$3,000 deductible and pays 80% of acceptable charges (20% co-insurance), then that patient has agreed to pay that portion of their bills to the providers. This required payment is NOT A SURPRISE and is NOT BALANCE BILLING. The patient purchased this level of coverage and agreed that the first \$3,000 of charges and 20% of all charges were their responsibility. If the patient has selected an in-network provider, then they are only required to pay this amount on the discounted, in-network charges. However, if the patient receives care from an undisclosed out of network provider, the patient is usually responsible for an entirely new deductible and will receive

continued on page 11 >

LOOKING BACK ...

American Red Cross Blood Drive at Cumberland Mall • May 20, 2017
Sponsored by GANA



Jem and Nikki



*Sarah Phillips with a
Red Cross worker*



SRNA Xavier Tolliver



SRNA Jessica Galloway



SRNAs Eric Cicchino, Lisa Catudal and Tim Hall

Georgia CRNAs Amina Isom and Lydia Reid participated in 2nd District US Georgia Representative Sanford Bishop's 20th Annual Golf Classic that was held August 21st at the Green Island Country Club in Columbus, Georgia. The GANA would like to thank Amina and Lydia for their participation and to the AANA for their sponsorship. Congressman Bishop has been a friend of CRNAs in Georgia.



*Former NFL player from the
Oakland Raiders Otis Sistrunk,
Amina Isom, Lydia Reid &
former Georgia Congressman
Phil Gingrey*



*CRNA Amina Isom and
Georgia 2nd District
US Congressman
Sanford Bishop*



*Lydia Reid, Ohio Representative Marcia
Fudge, CRNA Amina Isom and
Georgia Representative Calvin Smyre*

AANA Update

by Angela Mund, DNP, CRNA



I had a great time at the GANA Fall Meeting last month and look forward to continuing to support the members of GANA. You have great leadership who are actively engaged and committed to advancing the practice of nurse anesthesia in Georgia. We have a lot going on so I wanted to provide you with a brief update on a few topics.

- Our initiative to achieve full practice authority for Veteran's Affairs APRNs has gained some new momentum with the recent article regarding the Denver VA and the long waiting lists due to lack of anesthesia providers. Removing the archaic and unnecessary supervision ratios will allow the VA to almost double its capability in providing timely anesthesia care to our nation's veterans. The AANA Board and our DC staff are working hard to ensure that this message gets to legislators and to Secretary Shulkin. Please continue to watch your email for Advocacy Alerts and respond quickly!
- The CEO Succession Planning Taskforce has been hard at work over the last two months and will be reporting out during the Fall Leadership Assembly (FLA).
- Planning for the AANA Organizational Culture Review is underway. Follow the conversation on AANACONnect or you can contact Dr. Weiner directly. We will be providing an update on the progress next week at FLA.
- We are continuing to try and improve our digital footprint by updating the website and working on new mobile apps. Stay tuned!
- I will be holding a leadership retreat in January for Region 2 Boards of Directors to brush up on their leadership skills and to learn some new ones. The AANA is only as strong as our states. In recognition of this, the AANA Board of Directors is working on a process of taking "Leadership on the Road" to regional meetings.
- There has been continued interest in ketamine clinics in several states so we are looking into providing information for members.

Thank you for all you do for our practice, our profession, and our patients! I hope to see you at the Fall Leadership Assembly November 3rd – 5th in Chicago.

Please contact me with any questions or concerns.
amund@aanabod.com ▲

Kathy Mann Named Recipient of the 2017 Rosalie McDonald Award

Kathy Mann, CRNA has been an advocate of our profession for nearly forty years. Following graduation from the Georgia Baptist School of Anesthesia for Nurses, she accepted a position at West Paces Ferry Hospital. After a brief time, she moved to the Greenville S.C. area so that her husband, Darrell, could attend graduate school at nearby Clemson University. There, she did locums work for the Greenville Hospital Authority.

In 1980, Kathy, Darrell and their two small children moved to Blue Ridge, Georgia where Kathy worked at several rural hospitals. For over twenty years Kathy was the sole anesthesia provider at Fannin General Hospital in Blue Ridge. She handled it all... OB, OR, and perioperative services. In 2002, Kathy added an additional CRNA to her practice, and later, a third.

Kathy is a well-respected, involved member of her local community, as well as the medical community in the state. She served on the Georgia Board of Nursing for five years where her knowledge, quiet self-confidence and keen analytical skills added value to the Board and respect for CRNAs. As a personal friend of the Georgia Speaker of the House, Kathy was tireless in her support and instrumental in the passage of SB 106 last session.

Kathy and Darrell are active in local civic groups, frequently opening their home to groups such as the youth from their church and the Boy Scouts.

Kathy has created and runs a highly respected business based on skillful and compassionate care provided by CRNAs. On behalf of the GANA I would like to congratulate Kathy Mann as the **2017 recipient of the Rosalie McDonald Award**. This prestigious award is to honor an outstanding practitioner in Georgia and to a GANA member who has made a contribution of excellence to the practice of nurse anesthesia and sustained support for CRNAs.

– Jo Sineath, CRNA

Protecting Your Most Valuable Asset

by Larry B. Welder, Financial Consultant & Contributor



We all understand the importance of insuring our home, cars, health, life and even our identity, but possibly, the most overlooked asset for protecting, is our **most valuable, our income**. The Bureau of Labor Statistics, March 2015 reports that only about 44% of full time workers have long term disability coverage. As a medical professional, you may well be the main breadwinner, if not the only breadwinner for your family. If you were to become disabled from illness or accident, how would your family be affected?

For most of us, becoming unable to perform the duties of our occupation is not a worry, because we believe **“that won’t happen to us.”** According to the U.S. Social Security Administration, October 2015, 1 in 4 of today’s 20 year olds will become disabled before the age of 67. For those that do find themselves unable to perform the duties of their occupation, 90% of those disabilities were caused by sickness, not accidents, according to the Council for Disability Awareness, 2013.

You might feel unconcerned, because if you do become disabled, you will simply, collect on Social Security. The maximum Social Security benefit available in 2016 is \$2639 per month with, \$1,166 being the average monthly benefit. For every 10 applications that were submitted, approximately 3 were approved for benefits. (www.ssa.gov)

Group Plan vs Personal Plan

Many CRNAs understand the importance of having some type of **long term income replacement insurance**, but many, if not most, do not really understand the benefits that their employer furnished or even private plans provide. Does the policy provide, *“own occupation and working”* or *“own occupation and not working”*? There is a big difference, both in benefit and cost. Does the policy provide a partial benefit, if you can only work part-time, due to an illness or injury? Does the policy pay an extra benefit if you suffer from a catastrophic disability? Is the monthly benefit of the policy reduced, if you are approved for a Social Security benefit?

Group income replacement insurance is often provided at no cost to the employee, so it is very important to understand the benefits of this free policy. The question you need to consider, “is this policy adequate for my needs and the needs of my family?” Since the employer is paying the premium of the policy, if you become disabled, the

monthly benefits will be taxed as income. Also, group policies are possibly not portable, i.e. they cannot go with you to the next job. This can be a big problem, especially, if you have developed a condition that may preclude you from obtaining future coverage or which may exempt the condition from future coverage.

Determining Need

Personal policies are portable and can supplement group policies or act as stand-alone full policies. Monthly benefits from a personal policy paid for by the employee are typically, not taxable as income. When deciding on a personal policy, the most common question asked, How much will a policy cost? The question that should be asked is, How much coverage do I need and can I afford to be without it? To determine your monthly benefit amount, simply calculate your monthly spending, to include the basics of living, savings for retirement and children’s college, along with possibly higher medical care costs.

**For most of us,
becoming unable to
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Once a monthly spending amount is determined, you would need to decide what sources are available for income, i.e. spouse's income, Social Security benefit, Group insurance benefit, unearned income, child or spousal support or any other income. Once the monthly income amount is calculated, subtract the monthly spending amount and the answer will determine the amount of income replacement insurance needed.

For example, if you have \$4,000 per month of income and your monthly spending is \$6,000, then $\$4,000 - \$6,000 = (\$2,000)$. Therefore, you would need a policy that provides an additional \$2,000 per month.

Policy Design

Lastly, when considering an income replacement insurance policy, there are many components that make up your policy. You will need to decide on a monthly benefit amount, a duration that the benefit will be paid, when you want the benefit to begin and do you want the benefit paid even, if you can work at another occupation. In addition, many

riders are also available. These include, residual income, catastrophic disability coverage, cost of living allowance, future purchase options and many more. It is important to create the policy with riders that meet yours and your family's very specific needs.

Providing for your family, when you can work, can be tiring, not being able to provide for your family, because you can't work, can be disastrous. Please carefully consider reviewing your income replacement plan, **because having no plan is not a good plan.** ▲

Larry B. Welder, Financial Consultant and Owner of GFS Financial Solutions, LLC.

Information in this article is general in nature and not necessarily applicable to each individual. Please consult your financial advisor and tax consultant prior to making financial decisions. Please direct comments or questions regarding this article to lwelder@gfsinvest.com.

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on saving lives.**
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FROM PAGE 7

Politics Makes Strange Bedfellows

a surprise balance bill for the difference between what the insurer paid and what the provider has charged.

As our lawmakers work to answer the call of their constituents regarding these surprise balance bills, there will be many different interests lobbying at the Capitol. Insurers, facilities, healthcare providers, consumer advocates, etc. will all be working to protect the interests of their various stakeholders. Balance Billing/Surprise Billing will be a complex, contentious and divisive issue this session. The storm is brewing as lobbyists and interest groups prepare for the tempest. It is my hope that the GANA and the GSA can prepare and weather the storm together and find common ground that will ensure the protection of patients/consumers without unduly burdening our respective members.

It will be an exciting year and I look forward to the challenges that await. The membership has elected an outstanding set of Board members to lead and represent the GANA for the coming year. As always, please feel free to contact the GANA at any time. ▲

Emory Nurse Anesthesia DNP Program Earns Accreditation

By Michael Conti, PhD, CRNA, Assistant Program Director

The Nell Hodgson Woodruff School of Nursing at Emory University earned initial accreditation from the Council on Accreditation of Nurse Anesthesia Education Programs (COA) for its Doctor of Nursing Practice (DNP) Nurse Anesthesia program. The program is a 36-month full time curriculum aimed at preparing advanced practice nurses in the specialty of anesthesia at the highest professional level of nursing practice, scholarship and leadership. Clinical partnerships with Emory Healthcare, area Atlanta hospitals and clinical practices throughout Georgia will provide exceptional experiences for student learning, including multiple CRNA only sites and a specialty regional rotation where learners will have the opportunity to administer a wide range of regional anesthetics.

Program Director, Kelly L. Wiltse Nicely, PhD, CRNA, and Assistant Program Director Michael Conti, PhD, CRNA lead the program. Dr. Nicely joined the School of Nursing in December 2016 from the University of Pennsylvania, where she served as the program director for the

university's Nurse Anesthesia program and led its transition from a master's to a doctoral degree program. Dr. Conti previously served as the assistant program director at the Center for Nurse Anesthesiology at Albany Medical College and joined the faculty in June 2017. Mrs. Emalee Aparo, Program Coordinator, who transitioned to the School of Nursing in April 2017 from the School of Medicine, provides administrative support for the program.

The Emory School of Nursing welcomed its first cohort of nurse anesthesia students in August 2017. Any inquiries regarding the program can be directed to: crnaquestions@emory.edu. To stay up to date on the daily activities of Emory's Nurse Anesthesia DNP Program, follow the program on Facebook, Twitter and Instagram:

Facebook: <https://www.facebook.com/EmoryCRNA/>

Twitter: <https://twitter.com/EmoryCRNA>

Instagram: [Instagram.com/emorycrna](https://www.instagram.com/emorycrna) ▲



First class to start at Emory University NAP DNP Program

Front Row: Margie Schneider, Kelly Winter; Back Row: Kelly Wiltse Nicely, Lindsay Dixon, Taylor Courtner, Noelle Shaw, Shawn Biddle, Kaitlyn Ogden, Brandon Smercansky, Abby Walker, Sarah Green;

Not pictured: Michael Conti

The 2018 Legislative Session

by Kay Argroves



The Government Relations Committee is preparing for the Georgia state 2018 legislative session. We are in the second year of a two year legislative session cycle. Many of our legislative leaders are running for re-election or a higher office in 2018. For the 40 days that the Georgia legislative session convenes, from the second week in January until the end of April, our elected officials are unable to fundraise for re-election. Many of these politicians will be motivated to make this a short session in order get through early to raise funds for their re-election campaigns.

Governor Deal is serving his last year as Governor of the state of Georgia. The governor may only serve for two terms, and his second term of office will end in 2018. We have been grateful to him for his support. Lt. Governor Casey Cagle is running for the governor's position and he is known to be a friend of nurse anesthetists and other advanced practice nurses. Brian Kemp, who is our present Secretary of State, is running for the governor's position as well. The Secretary of State position is now open and many have thrown their name into the race for this open seat. Please take time to learn about the new and incumbent politicians running for office and their legislative platforms in regards to present or previous relationships with APRN's. It is important to understand their positions on issues that affect APRN's in our state, in particular, full scope of practice for APRNS. We continue to meet and network with other nursing groups on various legislative issues as well as other groups interested in public health.

Senate Resolution 188 has created a Senate Health and Human Services study committee on Barriers to Healthcare Practice. This committee has been meeting when the legislature is not in session. It is chaired by Senator Renee Unterman. The October 16, 2017 meeting was held at Augusta University. It will meet again on November 6th. Interestingly, at the October 16th meeting, it was pointed out that the state of Georgia ranks first in the

most restrictive state APRN practice legislative regulations in the country. Further, 10% of the APRNs living in Georgia currently practice outside our borders. If this continues, I predict, we will see more APRNs leave our state, especially new graduates, for more favorable practice settings. The state of Georgia cannot afford to lose APRNs as we are facing a shortage of healthcare providers especially with the many healthcare "deserts" in our state and rural hospital closures. Committee meeting notices for the Senate may be found at: <http://calendar.legis.ga.gov/Calendar/?Chamber=Senate>. Please check this before you leave home as meetings may shift location or times.

House Resolution 240 of Georgian's Barriers to Access to Adequate Healthcare Study Committee meetings, chaired by Rep. Sharon Cooper, also has been meeting to discuss healthcare issues. This is also open to the public. Committee meeting notices for the House may be found at: <http://calendar.legis.ga.gov/Calendar/?Chamber=House>.

Our presence is needed to attend committee meetings. Please call and double check the schedule before you deploy as they are subject to change.

We recently finished our GANA fall meeting in Atlanta. For the first time, a student from Eisenhower Army Medical Center Anesthesia School, Phase 2 site, Fort Gordon, GA participated in the Dan Ebal memorial lecture series. CPT. Brent Heber, SRNA was one of the presenters. The Augusta University student, Bilal Alaj, SRNA, was also a presenter. Both students did a terrific job! If you have not attended a Georgia Anesthesia Symposium (GAS), I encourage you to do so next year. In 2018, GANA will be celebrating their 80th anniversary of existence. You won't want to miss it!

Additionally, the Future of Nursing Campaign for Action sponsored by the Robert Wood Johnson Foundation, AARP Foundation, AARP and the

continued on page 18 >

... it was pointed out that the state of Georgia ranks first in the most restrictive state APRN practice legislative regulations in the country ...

2018 Regional Events

by Sarah Phillips, CRNA, MSN



I'd like to welcome our new Board and Committee members to GANA! On behalf of GANA, we are so excited to have you and are looking forward to a marvelous year with you. Our PR Committee this year is comprised of myself and Co Chair Alison Herren, CRNA, Kelly Wiltse Nicely, CRNA, PhD, Mike Conti, CRNA, PhD, April Culler, CRNA, and Sarah Green, SRNA in Emory's Nurse Anesthesia Program. Kelly and Mike both join us from Emory's DNP Nurse Anesthesia Program as Program Director and Assistant Program Director, respectively. We are lucky to have such a well-rounded group!

We are planning to have two regional meetings in 2018. The first will take place in Atlanta on February 24th. The second meeting will occur on June 23rd at a location TBD. We will continue to offer GANA updates at each meeting, as well as meals and CEUs. We are also looking into hosting a family event for members and their families near Atlanta in the spring. The Emory Nurse Anesthesia Program will be participating in CRNA Week in January and we are pleased to help them promote CRNA awareness and appreciation within our community.

As always, if you are interested in becoming involved with GANA, please do not hesitate to reach out! We have plenty of opportunities available, big and small. We love new faces. I welcome any questions or comments. If you are interested in any of these events, please email me at sarah8888@hotmail.com, or the GANA Office at ganaoffice@bellsouth.net. ▲



SRNA Jessica Galloway, CRNA Taushera Westbrook and SRNAs Girah Caraballo and Krizel Roque exhibited at the Georgia Association of Nursing Students Convention on October 13 in Columbus, Georgia. They presented an outstanding focus session for the students on "So You Think You Want to Be a Nurse Anesthetist."



Some of the CRNAs in attendance at the GANA regional meeting in Sparks, Georgia. It was held on Saturday, July 8th at the Horse Creek Winery, with special lecturer Reed Halterman, who presented "An In-Depth Look at Sugammadex"



Girah Caraballo, winner of the 2017 AANA Foundation's GANA Scholarship. Girah received her scholarship at the NAAC in Seattle and was presented it at a formal luncheon with GANA President Jo Sineath in attendance. On behalf of the GANA, congratulations, Girah! A well deserved scholarship!

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AANA Fall Leadership Academy

November 4, 2017 • Chicago, Illinois



Steve Smith, AANA CEO Randy Moore and Wesley Karcher



Steve Smith, Wally Phillips, Vito Crispo, Eddie Thomas, Reed Halterman, Wesley Karcher, April Culler, Barry Cranfill and Kay Argroves. Not pictured: Rose Synsmir, Jeanine DeRaney and Leslie Jeter



Leslie Jeter was a guest speaker for the infection control presentation

AANA Congress

September 8-12, 2017 • Seattle, Washington



AANA President Bruce Weiner, Rose Synsmir and Wally Phillips



Girah Caraballo, Past President Cheryl Nimmo and Wally Phillips



Jo Sineath, Noleen Afolabi-Brown and Leslie Jeter



Noleen Afolabi-Brown, Rose Synsmir and Valentina Casimir



Jack from KY, Lisa Phillips, Wally Phillips, Rose Synsmir, Jo Sineath, Michael Conti, Leslie Jeter and Rich, and Noleen Afolabi-Brown



Noleen Afolabi-Brown, Claire Yang and Tim Teddy

2017 Georgia Anesthesia Symposium (GAS2017)

September 29 – October 1 • Atlanta, Georgia

The 2017 Georgia Anesthesia Symposium (GAS) was a huge success! A big thanks to Janice Izlar, Leslie Jeter and Rose Synsmir of the program committee for the organization of a fantastic meeting.



Janice Izlar, Leslie Jeter, Christy Dunkelberger and Jo Sineath

We had a wonderful formal send-off of our Executive Director and Legal Counsel, Christy Dunkelberger, who has been with the GANA for 22 years. She will be retiring from the ED position on January 31, 2018, and staying on as our legal counsel.



2017 GANA Outstanding Student of the Year Award went to Xavier Tolliver (R), pictured with GANA board member Cameron Durden (L)

Congratulations to Kathy Mann, the 2017 GANA Rosalie McDonald Award recipient. This is to honor her as the outstanding practitioner in Georgia and to the contributions of excellence Kathy has made to the practice of anesthesia and sustained support for CRNAs.



Kathy Mann with Jo Sineath, GANA Immediate Past President.



SRNAs Whitney Huftingham, Emily Fuller and Krizel Roque



Niki Samsuddin, Marquetta Butler, Mary Clare, Carmen Simmons, Rose Synsmir and Liliana Rascon



2017-2018 GANA Board of Directors: Michael Conti, ED Christy Dunkelberger, Reed Halterman, Immediate Past President Jo Sineath, President Barry Cranfill, Secretary Sarah Phillips, President-Elect Wally Phillips, April Culler and Cameron Durden. Not pictured – Treasurer Eddie Thomas

2017 GANA Outstanding Student Nurse Anesthetist Award Winner

Xavier Tolliver is this year's winner of the GANA Outstanding SRNA award. He was presented this award by the GANA and Cameron Durden at this year's Georgia Anesthesia Symposium. The award is based on excellence in academics and clinical practice, leadership capability, potential for future contribution to the profession and to the GANA.

"Xavier is one of those people you meet, and they make a lasting impression. I first met him as an undergraduate nursing student when he would spend hours of his time shadowing me in the operating room. Xavier was at the top of his class in nursing school and has excelled as an SRNA. His extensive knowledge base and superior clinical skills have been recognized by many in the anesthesia community, and he is again at the top of his class at Augusta University. Xavier is honest, dependable, caring, hardworking and humble. He is a natural leader who will advance our great profession and be an asset to any anesthesia department." – *Cameron Durden CRNA, MS*

From the desk of Steve Smith Communications Committee Chair

If you have not yet taken a look at the new and improved GANA website, please do so at www.gana.org. While there, sign up at the Members Center. We are working on getting information including meeting minutes on that site for members only. The committee this year is Steve Smith, Sarah Phillips, Alison Herren, April Culler and SRNA Bilal Hussein. The committee is currently working on plans to redo the GANA brochure and the GANA display that we use at events and meetings. The committee is responsible for the *To and Fro* delivered to your door twice annually in November and May, the website, GANA facebook, Georgia CRNAs/ SRNAs, Instagram and Twitter. We always welcome comments and suggestions.



Go to www.gana.org,
scroll down and click on the
"Social Media" button and then
"Like Us" on Facebook!



A record 14 GANA Past Presidents were in attendance for this year's 2017 Georgia Anesthesia Symposium (GAS) in Atlanta

FROM PAGE 13

The 2018 Legislative Session

Center to Champion Nursing in America, and the American Association of Nurse Practitioners will be sponsoring a workshop in Atlanta on January 26 and 27th, 2018 for attendees from Alabama, Florida, Georgia, Missouri, North Carolina and South Carolina. Check this out on the GANA members website.

Lastly, we have a larger GRC committee this year than in past years and are excited to have many new and seasoned members returning. They are: Wally Phillips Co-chair, Brady Banares, Michael Conti, Victor Crespo, Holly Dilworth, Cameron Durden, Ryan Ford, Wesley Karcher, Erica Moore, Steve Smith, Eddie Thomas and Taushera Westbrook.

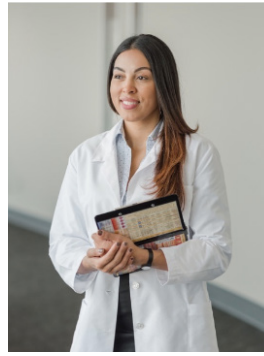
All CRNAs are encouraged to attend APRN of the Day for 2018 at the capitol building during the legislative session sponsored by the Consortium of Advanced Practice Nurses (CAPRN). You can register to attend on their website @ CAPRN.org. They will assist you in meeting your legislators and networking with other APRNs for several hours. If interested, just give me a call or send me a text and I will get you in contact or meet you myself. This promises to be a busy and intense legislative year with many opportunities for all to participate.

Suggested reading: Physicians Look to Disrupt Longtime Regulatory Tradition for APRNs, Journal of Nursing Regulation. [http://www.journalofnursingregulation.com/article/S2155-8256\(17\)30161-8/fulltext](http://www.journalofnursingregulation.com/article/S2155-8256(17)30161-8/fulltext) ▲

FROM PAGE 2

Endings Matter

same time, I am less than excited to be separating from GANA and all of the wonderful people I have connected with over the last 20 + years. I have been associated with GANA since 1995, so this departure brings mixed emotions for me. GANA and I are ending a relationship and for that I am sad. However, we are both moving on to new beginnings, and for that I am happy. I am going to spend more time engaging in my avocations that have taken a backseat to my career. GANA will be continuing its business operations with the help of a well-known ally. GANA has entered into an agreement for a two (2) year State Association Management Services Pilot Program with the AANA. This Pilot Program will allocate dedicated AANA staff and expertise to the management of GANA. GANA will be receiving a wealth of resources that promise new development and growth for GANA. AANA's role includes leadership development and strategic planning. Now, more than ever is the time for GANA members to be engaged and to take part in the upcoming changes and new beginnings about to occur with GANA. Endings do matter, but beginnings matter more. I hope you all take an active part in this new beginning for GANA. Thank you all for allowing me to be part of your past. ▲



AANA/GANA Foundation Scholarship Recipient for 2017 – Girah Caraballo

Girah Caraballo, a senior SRNA in the Augusta University Nursing Anesthesia Program in Augusta, Georgia, was the recipient of the AANA/GANA Scholarship 2017. She will graduate this December. During her last two years as the student representative from Augusta University to the GANA Board, she attended and participated in multiple GANA and AANA events. Girah attended the following GANA events; Capitol Day, Georgia Anesthesia Symposium, GANA Board Retreats, GANA Board Meetings, Regional Meetings, GPB-TV telethon, Georgia Association of Nursing Students Convention. Further, she wrote numerous articles for the *To and Fro*. At the national level, she has attended the AANA Mid-Year Assembly and Nurse Anesthesia Annual Congress. Needless to say, Ms. Caraballo's attendance and participation in these events has been exemplary.

Girah earned her BSN from the University of West Florida on a 4-year Army Reserve Officers Training Corps scholarship. She received her commission as a second lieutenant Army Nurse Corps Officer in May 2007. Girah spent eight years on active duty as an open-heart recovery critical care nurse in several Army medical centers within the continental United States. She also deployed twice, to include an assignment as a flight nurse, overseas. In July 2015, Girah separated from active duty service to pursue a career in nurse anesthesia full time. Girah describes her tenure serving as the Class of 2017 GANA student representative as an invaluable experience in terms of professional development and building a network of CRNAs. Girah would like to extend a sincere thank you to GANA and the AANA Foundation for the opportunity to grow as a scholar and leader. To Girah, GANA was and will continue to be the group of mentors she sought to emulate and propel her forward in her career. Lastly, Girah is grateful for her friends' and her mother's encouragement and support in helping her accomplish her goals. Girah will graduate this December with a MSN and plans to pursue a PhD in public health in the near future. Girah will begin her civilian career at Massachusetts General Hospital in Boston, Massachusetts and continue her military career as a CRNA in the U.S. Army Reserves.

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Enjoy the Ride

by Martha Kral, CRNA



Monty Veazey was presented an award for his outstanding lobbying skills which led to the successful passage of SB 106.



Kay Argroves and Steve Smith had the honor of presenting an appreciation award to the Georgia Speaker of the House David Ralston and his chief of staff, Spiro Amburn, for their unwavering support to get our pain management bill, SB106, passed this past legislative session.



Senator Greg Kirk was presented with the 2017 GANA Legislative Award in appreciation for his active support of CRNAs. During the last legislative session, Senator Kirk introduced SB 106 and worked tirelessly to get it passed. SB 106 removed the restriction to CRNAs' scope of practice in pain management clinics. President Jo Sineath and ED Christy Dunkelberger presented the award (a Frabel eagle sculpture) to Senator Kirk at the Mi Lady Bakery in Tifton, Georgia.

Fall is in the air. It's a great time of year to slow down and enjoy the ride. As we've heard so many times, life is not about the destination, but rather about the ride. We might assume that the destination is going to be the best thing ever, but sometimes the actual destination is not better than the ride. For example, I used to drive the 2 hours to my Mom's house with so much anticipation and excitement to hurry and get there. There would be happy family and the best food ever, and the drive was just something to be endured to get to the destination. Times are different now. My Mom is dying with lung cancer. I drive to her house to see her as often as I can and we are happy to see each other, but she no longer cooks or carries on lively conversation. It's not like the old days. So the drive, in some ways, has become more enjoyable than the actual destination. I look at the tall trees on the sides of the country highway. I see the old man in his yard playing fetch with his golden retriever-looking dog. There's another man fishing with his cane pole off the small bridge. The car window is open and the swishing noise of the air rushing through sounds constant and soothing, like white noise. The temperature is a perfect 72 degrees. The little blue sign on the road just passed says "Deliverance Road." Another road, called River Road, goes through the swamp and it is completely covered by a canopy of trees, tall and mossy. The warm sunlight slashes in on my face when there is a break in the trees. The last road to the house is a winding, dirt road with a soybean field on the left by the curve. At last, it will be so good to see Mom again. But I sure did enjoy this ride.

Life should be enjoyable. The physical, spiritual, and mental realms should ideally work in harmony to achieve a balance where you can be content. We only have this one life on earth, so let yourself be free to enjoy what you can. Accept change when necessary. Your goals, when reached are something to be treasured, but also allow yourself to enjoy the journey there.



*Hollie White, Martha Kral, Donna Sieber and Sarah Phillips
The GANA would like to thank Martha and Hollie for their annual exhibit of the Health and Wellness booth at GAS.*

To&Fro

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Please clip and send to: **Allison Suggs, GANA-PAC Treasurer, P.O. Box 887, Tifton, GA 31793**

Forms available at www.gana.org

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