

ACTIVITY HIGHLIGHTS
2025-2026 Committees and Task Forces

Award for Excellence Selection Panel

The Award for Excellence Selection Panel streamlined the application, the scoring rubric was updated, and revisions were applied to the website. Promotions to encourage nominations for the Award for Excellence award were conducted throughout the open nomination timeframe through the same channels as the Individual Achievement Awards. The Award for Excellence and individual award recipients will be recognized at the 2026 AORN Global Surgical Conference and Expo.

Chair Joy Don Baker, PhD, RN, CNOR(E), CNE, FAORN, FAAN

Members:

Paula Graling, DNP, RN, CSN, CNOR, NEA-BC, FAAN

Cassandra Munro, PhD, BS, RN, CNOR, FAORN, FAAN

Joan Spear, MBA, RN, CNOR(E), CRCST

Cynthia Spry, MA, MSN, RN

Doreen Wagner, PhD, RN, CNOR, FAORN, FAAN

Joshua Wymer, DNP, RN, CNOR, CSSM(E), NEA-BC, CHCIO, CDH-E, FACHE, FAAN

Staff Liaisons:

Crystal Fuentes

Renae Battié, MN, RN, CNOR, FAAN

Initiatives:

1. Score the Award for Excellence applications.
2. Review scoring rubric and revise, as needed.

Awards Committee

The Awards Committee reviewed and created verbiage for a new Barba Edwards Innovation Award and continued to refine the online application process for the individual awards. Promotions to encourage individual achievement awards were conducted throughout the open nomination timeframe through social media, the Chapter Leader Bulletin, Periop Today and the AORN website. The committee members reviewed and scored all individual applications based on award categories.

Chair Amy Brunson, MSN, RN, CNOR, NE-BC

Chair-elect Jennifer Davis, DNP, MBA, MSN, MPH, RN, NE-BC, CEN

Members:

Jean Franks, MBA-HM, BSN, RN, CRNFA, CNOR(E)

Charito Mapatac, BSN, RN, CNOR

Barbara Nalley, MSN, RN, ANP-BC, NP-C, CNOR

Peris Speek, MHA, BSN, RN, CNOR

Mariela Torres-Montesino, DNS, MSN-OHN, BSN, RN

Sarah Weir, JM, BSN, RN, CNOR, CRCST

Board Liaison David Reinhart, DNP, MBA, RN, CNOR, FAAN

Staff Liaison:

Crystal Fuentes

Rena Battie, MN, RN, CNOR, FAAN

Initiatives:

1. Review and assess current awards to determine if the categories are still relevant, the online award application process, and the scoring mechanism and provide recommendation for change to the Board, including the dates applications open.
2. Promote Individual Awards Process in Periop Today, Outpatient Surgery Magazine and on AORN Facebook to increase awareness / participation.
3. Promote Chapter Awards Process in coordination with Senior Manager of Chapter & State Relations
4. Score Chapter Award submissions and select recipients.
5. Develop and implement a scoring tool for a new award: The Barba Edwards Innovation Award, to be awarded in 2026.

Clinical Nursing Practice Committee

The Clinical Nursing Practice Committee is charged with reviewing new and existing clinical nursing practice issues and developing strategies to assist perioperative nurses in implementing successful practices. This year the committee updated the Emergency Preparedness toolkit with resources and education related to natural disasters health care facilities and perioperative teams may encounter. The committee also revised the Position Statement on Preventing Wrong-Patient, Wrong-Site, and Wrong-Procedure Events, prepared a poster presentation for the updated toolkit for Expo 2026, and recorded a webinar with details for emergency preparedness strategies and resources now available in the updated toolkit.

Chair Christina Alvarado, BSN, RN, CNOR

Chair-elect Julie Cahn, DNP, RN, ACNS-BC, CNS-CP, NPD-BC, CNOR, FAORN

Members:

Sydney Boyd, MSN, RN, CNOR

Regina Hayford, MSN-ADM, MPH, RN, CNOR

Katey Nguyen, BSN, RN, NPD-BC

Kay Smith, BSN, BA, RN, CNOR

Tanna Smith, MSN, RN, CNOR

Theodore Walker, APRN, A-CNS, CNOR, NPD-BC, CPPS

Board Liaison Nikki Washington, MSN, MBA-HCM, RN, CNOR, CSSM

Staff Liaisons:

Zach Swartz, RN, CNOR

Renae Wright, DNP, RN, CNOR

Purpose:

Review new and existing clinical nursing practice issues and develop strategies to assist perioperative nurses to implement successful practices.

Initiatives:

1. Update the Emergency Preparedness Tool Kit.
2. Record a webinar or an introductory video that could be used with the tool kit.
3. Revise the AORN Position Statement on Preventing Wrong-Patient, Wrong-Site, Wrong-Procedure Events.

Continuing Education Approval Committee

The committee collaborated with 15 committee members, >50% were new to the committee and onboarded to the application approval process. The committee collaborated and provided feedback on the design and development of the new Open Water application system that went live on January 1, 2025. This was the first committee to work in the new application system, and they have done amazing work, offering insight into improvements along with our nurse planner applicants. The CEAC team has reviewed ~ 75 applications during their committee year meeting review timelines and applicant expectations.

Chair Leslie Petruzzelli, DNP, MBA, RN, CNOR, NE-BC

Chair-elect Lasandra Brown, PhD, MBA, RN, CNOR, NPD-BC

Members:

Lynn Belsanti, RN, BSN, MST
Jill Cohen, DNP, RN, NEA-BC
Jacqueline Craig, MSN, RN, CNOR
Karen Elliott, MSN, BS, RN, CNOR, CSPDT
Sharon Ford, MSN, RN, CNOR
Greg Jeter, RN, CNOR, CNAMB, CAPA
Linda J. Kirkland, DNP, RN, CNOR
Morgan Knowles, MSN, RN, CNOR
Cindy Myers, MSN-Ed, RN, CNOR, NPD-BC
Jeffrey Oliver, MSN, RN, CCNS, CNOR
Katie Pharr, BSN, RN, CNOR
Magdalena Sayed, MSN, RN-BC, CNOR
Erin Schnautz, MSN, RN, CNOR

Board Liaison Leigh Anne Bartlett, MSN, RN, CNOR

Staff Liaison:

Colleen Becker, PhD, MSN, RN, CCRN-K
Melissa Kneisley

Initiatives:

1. Peer review continuing nursing education applications from constituents and non-constituents using ANCC criteria.
2. Using ANCC criteria, provide feedback to applicants in a timely manner.
3. Provide customer support regarding the approval process.
4. Identify and suggest topics to AORN staff for webinars and to the AORN Journal from topics being requested.
5. Educate membership on the AORN CEU approval process; provide a roadmap to successful submission to encourage more uptake, ideas include (not limited to) webinars, checklist, short videos etc.
6. Conduct a review of the performance improvement activities and make revisions in processes as appropriate.
 - a. Evaluate the effectiveness of the overall approval unit.
 - o Consumers (i.e. applicants)
 - o CEAC Members (aka nurse peer reviewers)-inter rater reliability
 - o Nurses attending an approved activity
 - b. Evaluate user feedback for the online application
 - c. Incorporate changes to the ANCC criteria to the application process, as required.

Fellowship Selection Committee

The Fellowship Selection Committee developed a webinar “Lighting the Pathway to AORN Fellowship” for FAORN sponsors and future candidates which can be viewed on the Fellowship of AORN webpage. The committee updated the FAORN selection policy and application process. AORN fellows will be at the Fellowship Selection Committee Table in the AORN Community area in Lobby A to answer questions. Interest in the fellowship continues to increase and six FAORNs were selected for 2025.

Chair Charlotte Guglielmi, MA, BSN, RN, CNOR, FAORN

Chair-elect Jennifer Fencl, DNP, RN, CNOR, FAORN

Members:

Donna Doyle, DNP, RN, CNOR, NE-BC, FAORN

Holly Ervine, MSN, RN, NEA-BC, NPD-BC, CNOR, FAORN

Katherine Halverson-Carpenter, MBA, BSN, RN, CNOR, FAORN

Kathryn Schroeter, PhD, MA, MS, RN, CNOR, FAORN

Sharon Van Wicklin, PhD, RN, CNOR, CRNFA(E), CPSN-R, FAORN, FAAN

Board Liaison Laura A. Gayton, MHCA, BSN, RN, CNOR, CSSM

Staff Liaisons:

Hannah Campbell

Lisa Spruce, DNP, RN, CNS-CP, CNOR, ACNS, ACNP, FAAN

Initiatives:

1. Develop an education module for website as reference for AORN members and sponsors on the Fellowship process
2. Promote the AORN Fellowship in AORN communication and media channels
3. Monitor and evaluate the selection process for the 2026 FAORN class
4. Make recommendations for modifications to the process, as appropriate
5. Make recommendations to the Board for modifications to the application qualifications.
6. Make recommendations on the website based on feedback and committee insight to include at minimum
 - o Education criteria
 - o License number and state
 - o Resolve character count issues either with changes to website or added clarity to the instructions
7. Propose Expo program regarding the FAORN process.

Global Relations Committee

The committee selected the education content for the AORN Global Surgical Conference & Expo 2026. To ensure quality presentations, a diverse selection of topics and speakers were suggested from a variety of resources, including abstracts submitted via the online proposal process, global speakers referred by committee members, and professional networks. Presentations were identified which met the needs of the attendees based on a need assessment supported by the Expo 2025 evaluation data. Sessions will explore topics speaking to global practice representing countries including Nigeria, Sweden, Australia, Finland, Canada, and Portugal. Expo 2026 will see Johnson & Johnson host a Chinese nursing delegation including a podium presentation. Additionally, there will be a contingent of nurses from Japan attending Expo supported by Nursing Practice and the committee. The committee will be supporting the recognition of our international attendees at the Expo 2026 opening celebration.

Chair Cassie Scott, BSN, RN

Members:

Kathryn “Katy” Franklin, PhD, RN, CNOR, CSSM
Jaimeson Hatch, MSN, RN, CNOR
Anne Marie Herlehy, DNP, RN, CNOR
Lillian Nicolette, MSN, RN, CNOR
Armi Tuazon, BSN, RN, CNOR

International Members:

Emmanuel Adesina, RN
Cristina Agosto, PhD
Esther Espuñes, RN
Melan Nurhayati, RN
Erna Roos, RN

Board Liaisons:

Darlene Murdock, MSN, BBA, RN, CNOR, CSSM
David Reinhart, DNP, MBA, RN, CNOR

Staff Liaison:

Colleen Becker, PhD, MSN, RN, CCRN-K

Initiatives:

1. Review needs assessments of international participants and members
 - a. Discuss “hot” international topics and feedback from 2025 attendees .
 - b. Recommend speakers for global track who will represent the 2025-26 theme.
 - c. Review proposals submitted by international attendees.
 - d. Ensure two clinical practice areas are addressed, i.e. exploring the use of checklists, cultures of safety, or other important issues.
2. Members attending the conference to serve as hosts and moderators for the global track sessions.
3. Provide any feedback from global attendees through an electronic survey following the AORN Global Surgical Conference & Expo conclude.
4. Encourage members from outside the U.S. who attend Expo to participate in the business of the association by voting for elected leaders, attending the Forums, and voting in the House of Delegates.

Global Surgical Conference Education Committee

The purpose of the Global Surgical Conference Education Committee is to serve in an advisory capacity to the AORN staff when planning education programs for the AORN Global Surgical Conference and Expo for 2026. A needs assessment was performed to identify key categories of desired/requested content from peers at the local level. The committee expanded the anonymous and review process to include all anonymous reviews followed by open discussion of the committee. The team reviewed 295 abstracts with a ~39% acceptance rate. The committee continued to collaborate with Education, Leadership, ASC, Leadership Specialty Assembly, Nursing Research and Legal/Advocacy to review and select topics based on the Expo 25 evaluation feedback. The committee collaborated with marketing to develop a plan to encourage members to submit Research, Concept, Innovation, Clinical Improvement poster abstracts for the 2026 Expo. The committee reviewed 313 poster topics and accepted 312 posters. The number of poster winners will be reviewed for expansion options in Expo 2026.

Chair Elizabeth Williams, MSN, RN, CNOR

Chair-elect Hannah Shufeldt, DNP, MSHCM, RN, CNOR

Members:

Tanika Johnson, BSN, RN, CNOR

Molly Kucera, MBA, BSN, CNOR, CNAMB(E)

Sheena Maddox, BSN, RN

Johnson Ogundare, DNP, MPH, RN, CNOR

Faye Ong, MSN, RN, CNOR, CNAMB

Mary Owen, MSN, BSN, RN, CNOR

Nicole Polsgrove, BSN, RN

Rodolfo Relano, Jr., MA, RN, CNOR

Ma Barbara Charmaine Ricardo, DNP, MBA-HM, BSN, RN, CNOR, CNAMB

Khaleela Umheni, MSN, RN, CNOR, NE-BC

AST Liaison:

Jessica Elliott, RN, BSN, CST, FAST

Board Liaisons:

Darlene Murdock, MSN, BBA, RN, CNOR, CSSM

David Reinhart, DNP, MBA, RN, CNOR

Staff Liaisons:

Colleen Becker, PhD, MSN, RN, CCRN-K

Initiatives:

1. Evaluate the need to revise and revamp proposal review/evaluation process to streamline the process for committee members, revise as needed.
2. Review education needs assessment and feedback from education sessions held in 2025.
3. Identify key categories of desired/requested content from needs assessment.
4. Achieve goal of 25% of first-time presenters for Expo program (TBD after Expo 2025 evaluation review).
5. Collaborate with marketing to develop a plan to encourage members to submit Research, DEI, Innovation, Clinical & Process Improvement, poster and podium abstracts for the 2026 AORN Global Surgical Conference & Expo.
6. Provide feedback regarding poster abstracts by evaluating their alignment to the AORN Mission, Vision, Values, and “AORN Guidelines for Perioperative Practice”.
7. Utilize the poster evaluation tool to select the Outstanding Clinical, Research, Innovation, Improvement/Innovation, and DEI submitted for the 2026 AORN Global Surgical Conference & Expo.

Guidelines Advisory Board

The members of AORN's Guidelines Advisory Board (GAB) play a vital role in guiding perioperative practice by actively participating in development, review, and approval of AORN's evidence-based Guidelines for Perioperative Practice. The GAB is responsible for final review and approval of each new or revised guideline. Six guidelines were reviewed and updated for the 2026 print edition of the Guidelines for Perioperative Practice. These guidelines were released to e-subscribers to the Guidelines for Perioperative Practice in 2025. The new and updated Guidelines are Transmission Based Precautions; Safe Use of Surgical Energy Devices; Pneumatic Tourniquet Safety; Instrument Cleaning; Autologous Tissue Management; and Local-Only Anesthesia.

Chair Shannon Holley, MSN, RN, CNOR

Chair-elect Sara Angelilli, DNP, MS, RN, CNOR, NPD-BC, NE-BC

Members:

Lisa Berus, MSN, MEd, RN, CAIP, CASSPT, CNAMB

Dave Calubaquib, DNP, MBA, RN, CNOR, CNAMB, CSSM, CPAN, CV-BC

Geraldine Clark-Hall, RN, DNP, MSN, BSN, CNOR, CSSM

Linda Connelly, PhD, DNP, MSH, CNS, ARNP, CNOR

Mary Alice Miner, PhD, RN, CNOR

Debbie Reeves, MS, BSN, RN, CNOR

Public Member Jim Padilla, JD

Association Liaisons:

Frankie Catalfumo, MPH, CIC, CRCST (APIC)

Rebecca Choudhury, MD (SHEA)

Hudson Garrett, Jr, PhD, MSN, MPH, MBA (AHVAP)

Ross Goldberg, MD, FACS (ACS)

Yvette Martin-McGrew, MD, PhD (ASA)

Brett Morgan, DNP, CRNA, FAAN (AANA)

Jon Wood, MBA, CST, CRCST (HSPA)

Alternate Association Liaison:

Brian J. Cammarata, MD (ASA)

Valerie Deloney, MBA (SHEA)

Shayne Hauglum, PhD, APRN, CRNA (AANA)

Tonya Wagner, BSN, RN, CAIP (APIC)

Board Liaison Brenda G. Larkin, MS, RN, ACNS-BC, CNS-CP, CSSM, CNOR, FAORN

Staff Liaisons:

Erin Kyle, DNP, RN, CNOR, NE-BC

Lisa Spruce, DNP, RN, CNS-CP, CNOR, ACNS, ACNP, FAAN

Initiatives:

1. Review and critique draft documents, provide input, review public comments, and arrive at consensus on the following Guidelines:
 - Guideline for Autologous Tissue
 - Guideline for Instrument Cleaning
 - Guideline for Laser Safety
 - Guideline for Care of the Patient Receiving Local-Only Anesthesia
 - Guideline for Electrosurgical Safety
 - Guideline for Environmental Cleaning
 - Guideline for Specimen Management
 - Guideline for Artificial Intelligence in Periop

National Committee on Education

The National Committee on Education (NCE) develops educational material to meet the needs of AORN members. This past year, the NCE committee revised the following two Position Statements: the statement on the *Value of Clinical Learning Activities in the Perioperative Setting in Undergraduate Nursing Curricula*, and the statement on the *Role, Value and Scope of the Perioperative Nurse Educator*. The NCE is finalizing a dynamic new toolkit for perioperative nurses to be agents of change in their operating room facilities. Please be sure to watch AORN's website for this new toolkit.

Chair Cherie Crumpler, MSN, RN, CNOR, NPD-BC

Chair-elect Jan Patrick Arrieta, MAN, RN, DRDM, CNOR, CNAMB, CNE, NPD-BC, NE-BC

Members:

Marissa Holden, MSN, RN, CNOR

Karona Oliver, MHA, BSN, RN, CNOR

Danielle Quintana, PhD, MSN-Ed, RN, CNOR(E)

Alicia Tabiri, MSN, BSN, RN, CNOR

Katelynn Vaughan, BSN, RN, CNOR

Board Liaison Daphny Peneza, MSN, RN, CNOR, CSSM, FAORN

Staff Liaison:

Kristyn Seeman, MLS, BSN, RN, CNOR

Purpose:

Develop educational materials to meet the needs of AORN members.

Initiatives:

1. Develop a Toolkit on the Introduction to Being a Change Agent.
2. Revise the AORN Position Statement on Value of Clinical Learning Activities in the Perioperative Setting in Undergraduate Nursing Curricula.
3. Revise the AORN Position Statement on Value of Perioperative Nurse Educator

National Legislative Forum

The National Legislative Forum (NLF) is open to all members and works with the AORN Government Affairs staff to advance AORN's policy agenda at the state and federal levels. Forum members serve as resources for each other and a sounding board for AORN Government Affairs staff as they review over 100 bills and regulations impacting perioperative registered nurses, including surgical smoke evacuation, surgical technologist and central supply technician certification and education requirements, funding for nursing education, safe staffing, and safe pain control after surgery. Success in 2025 includes Delaware and North Carolina enacting surgical smoke evacuation legislation while a dozen other states have worked on similar initiatives in 2025 and 2026.

Staff Liaison Jennifer Pennock

Initiatives:

1. **Health Equity:** Improving surgical outcomes requires promoting equitable frameworks for care delivery and institutional investment in the safety and well-being of all patients. AORN urges extraordinary action to curb and eliminate all disparities in health care delivery and ensure appropriate health care for all, including transition-related care and unrestricted access to reproductive health care.
2. **Public Health:** AORN encourages funding and support for public health initiatives including viral testing, vaccine mandates, PPE availability, and public health precautions and investment related to communicable disease and the mental health of all health care providers. AORN supports improved access to mental health services and meaningful legislation and regulatory efforts to address the public health crisis caused by gun violence.
3. **Surgical Smoke Evacuation:** AORN leads efforts to enact laws requiring facilities to adopt and implement policies addressing evacuation of surgical smoke for all smoke-generating procedures to prevent ongoing exposure to the hazardous carcinogenic and mutagenic cells contained in surgical smoke and to ensure the health and safety of all surgical team members.
4. **Perioperative Safety and Practice Support:** AORN advises and collaborates with regulatory and standard setting bodies to ensure access to essential PPE, public health readiness, and adequate mental health support and compensation for nursing services. AORN encourages legislative and regulatory efforts to establish an accountable, trusting patient safety culture in the perioperative setting, including robust whistleblower protections for health care providers and mandatory reporting of safety incidences, such as surgical site infections and wrong site surgery. In addition to surgical smoke-free operating rooms, perioperative nurses deserve fatigue prevention resources, strong workplace violence protections, safe patient handling programs focused on injury prevention, and protections from prosecution for medication errors.
5. **Perioperative Practice Issues**

RN Circulator. AORN works to ensure every surgical patient has a dedicated perioperative registered nurse circulator for the duration of each operative and invasive procedure. Our team also actively promotes laws and regulations to ensure the supervisory presence of the perioperative RN in the perioperative setting.

RNFA. AORN supports the expanded role of the RNFA by actively working to achieve reimbursement parity for RNFAs. RNFAs work in collaboration with the entire surgical team to achieve optimal patient outcomes nationwide and yet private payer reimbursement is only guaranteed in 17 states.

Professional Practice. AORN protects the perioperative registered nurse's scope of practice and patient safety by engaging in legislative, regulatory, agency, and other stakeholder approaches to RN education, certification, supervision, roles, competencies, and duties.

Nursing Research Committee

The Nursing Research Committee planned and held a live virtual perioperative nursing research symposium in January 2026 that included research, evidence-based practice, and quality improvement presentations. Top presentations were included in an Expo session highlighting perioperative research and innovation. The committee reviewed and scored research and evidence-based poster abstracts for Expo 2026. The committee Chair and Chair-Elect prepared a podium presentation for Expo 2026 providing insight into the AORN Nursing Research Committee's role in empowering evidence in perioperative nursing.

Chair Cassandra Munro, PhD, BS, RN, CNOR, FAORN, FAAN

Chair-elect Richard Dorritie, PhD, RN, CNE, CNOR

Members:

Pamayla Darbyshire, DHA, MSN/CNS

Heather Kookier, DNP, MSN, RN, CNL, CNOR, CRNFA, CNMAP

Joy Lanfranchi, MSN, RN, CNOR

Curissa Moore, MSN, RN, CNOR

Selina Oriekhoe, PhD(c), MSN, RN, CNOR

Ray-an Talatala, DNP, RN, CNOR, NPD-BC, FAORN

Board Liaison Charlie Lin, MSN, APRN, NP-C, CRNFA, CNOR-PEDS, CNAMB

Staff Liaisons:

Emily H. Jones, PhD, RN, CNOR, EBP-C

Lisa Spruce, DNP, RN, CNS-CP, CNOR, ACNS, ACNP, FAAN

Initiatives:

1. Plan and execute an annual virtual research program focused on perioperative nursing.
 - a. Including presentations, posters and other methods to disseminate research and quality improvement projects.
2. Review:
 - a. And accept individual Research and Evidence Based abstracts for poster session at 2026 Expo.
 - b. and judge and determine “winners” for Research and Evidence Based posters at Expo 2026
3. Provide feedback regarding the 2025 AORN Global Surgical Conference & Expo research poster abstracts by evaluating their alignment to the AORN Mission, Vision, Values, and “AORN Guidelines for Perioperative Practice”.
4. Propose a research abstract for EXPO on a topic of their choosing to highlight perioperative research.

Scholarship Committee

In 2025, the Scholarship Committee reviewed over 1,000 applications for the AORN Foundation's Expo grant, professional certification, and academic scholarship programs, supporting the Foundation's efforts in providing over 600 awards to nurses. This work continues to allow the AORN Foundation to conduct a comprehensive, external process for anonymously reviewing applications. The Committee also completed an initiative to update the application scoring criteria for all three grant and scholarship programs. Members participated in committee meetings to discuss emerging topics in grant application evaluation and volunteered at the Foundation booth at Expo.

Chair Ashley Bartholomew, BSN, RN, CNOR, ONC

Chair-elect Wendy Paszek, CNOR, RN

Members:

Mary-Kate Derby, BSN, RN, CNOR

Kharen Lantin, RN, CNOR

Oluponle Olubajo, MSN, RN, CNOR, CNML

Evangela Rice, MSN-Ed, RN, CNOR, CST

Leanne Ruffner, BSN, RN, CNOR

Latisha Washington, MSN, RN, BS, NE-BC, CNOR

Board Liaison Debra Callendar, DNP, RN, CNOR, CSSM

Staff Liaison:

Wendy Sinnema

Initiatives:

1. Review and score academic scholarship applications consistent with evaluation criteria matrix.
2. Review and score applications for Professional Development Grants, including:
 - a. CNOR/CSSM/CNAMB grants
 - b. Expo grants
3. Highlight current and past scholarship/grant recipients and their accomplishments (i.e., Periop Today, Outpatient Surgery Magazine, AORN Global Surgical Conference & Expo, etc.)

Diversity, Equity and Inclusion

The Diversity, Equity, and Inclusion Committees supported AORN's DEI initiatives by advancing education and awareness. Ongoing member feedback throughout the year helped guide Headquarters staff in setting strategic priorities aligned with facility and member needs.

DEI Nursing Committee

Members:

Andrea Dyer, MSN, RN, CNOR
Joanne D. Muyco, DNP, RN, NE-BC, CNOR
Courtney Speziale, DNP, RN, CNOR

Staff Liaison:

Mary Anna McOwen

Initiative:

1. Create education products, tool kits, policies, etc. that will have an impact addressing racism and discrimination towards perioperative nurses.

DEI Patient Committee

Members:

Allison Hayley DiGiacinto, BSN, RN, CNOR
Brian Patton, BSN, RN, CNOR, CST

Staff Liaison:

Beni Vega

Initiative:

1. The DEI Patient Committee initiatives are to create repurpose, products, tool kits, etc. for perioperative nurses, that will have an impact addressing disparity of care for patients of color and LGBTQ+ patients.

ESG Committee

Members:

Laura Jensen, BSN, RN, CNOR
William "Paul" McMillen, RN, CNOR

Staff Liaison:

Jess Bohn

Initiative:

1. Devise an ESG Roadmap or guide to reduce paper use at facilities and chapter events. The ESG Roadmap may also include ways to volunteer or be involved in the community.

Artificial Intelligence Task Force

The Artificial Intelligence Task Force was convened for the explicit purpose of developing an organizational position statement on the use of artificial intelligence (AI) in the perioperative environment. Over the past year, the task force examined emerging AI applications in health care with focused attention on ethics, patient safety, professional accountability, workforce preparedness, and the role of perioperative nurses in AI governance. The AORN Position Statement on Artificial Intelligence in Perioperative Nursing affirms that AI is intended to support, not replace, the perioperative registered nurse, underscores the essential role of human judgment and accountability, and outlines key principles related to ethical and equitable AI integration, transparency, data privacy and security, and risk mitigation.

Co-Chairs:

Natalie Jones, DHA, MBA, BHSA, BSN, RN, CNOR

Joshua Wymer, DNP, RN, CNOR, CSSM(E), NEA-BC, CHCIO, CDH-E, FACHE, FAAN

Members:

Richard G. Kenny, MMCI, RN

M. Tracey Penaloza, MSN, RN, CNOR

Christopher Stuckey, PhD, RN, CNOR, CSSM, CNAMB, NEA-BC, FAORN

Doreen Wagner, PhD, RN, CNOR, FAORN, FAAN

Board Liaison Rebecca Vortman, DNP, RN, CNOR, NEA-BC

Staff Liaisons:

Renaë Battié, MN, RN, CNOR, FAAN

Luke Jobman, MS, RN, NI-BC, CNOR

Initiative:

1. Develop a position statement on using artificial intelligence in the perioperative environment.
2. Write and submit a peer-review article on the use of artificial intelligence in the perioperative environment.

Chapter Engagement Task Force

The purpose of this task force was to explore new ways members can participate in networking, education, and other engagement activities to strengthen perioperative nursing. The group also examined and proposed alternative models, such as regional or state-based chapter structures. The task force ultimately recommended that AORN continue to support the chapter model, with the addition of more consistent training for new chapter leaders. Additional recommendations to enhance member engagement included initiatives such as the “Who Is AORN?” video, a Journal Club Kit, and an increased social media presence.

Co-Chairs:

Holly Ervine, MSN, RN, NEA-BC, NPD-BC, CNOR, FAORN
Lisa Bailey, BSN, BS, RN, CNOR

Members:

Jay Bowers, BSN, RN, CNOR, TNCC
Vangie Dennis, MSN, RN, CNOR, CMLSO, FAORN
Brittany Folse, BSN, RN
Leah Goldberg, MSNe, RN, CNOR
Andrey Ibragimov, MSN, RN, CNOR
Ashlee Saunders, BSN, RN, CNOR
Johnny Torres, RN, CNOR

Board Liaison JD Buchert, MSN, M.Ed., MS, RN, CNOR, CPHQ

Staff Liaison:

Kerilyn Johnson
Mary Anna McOwen

Initiatives:

1. Explore new ways our members can participate in networking, education, and other engagement activities to expand perioperative nursing.
2. Discuss and suggest new models such as regional or state-based groups for initiative #1.
3. Recommend to the Board of Directors, by November 1, 2025, a new chapter model and ways for AORN to engage members.

**Perioperative Explications for the ANA Code of Ethics for Nurses with Interpretive Statements
Task Force**

This team was charged with updating the 2015 Perioperative Explications for the ANA Code of Ethics to be in line with the 2025 ANA Code of Ethics Revision. This is to ensure it remains relevant and reflective of the ethical tenets that guide the nursing profession with a specific focus on Perioperative Nursing. This task force completed this review and revision, which will be posted on the AORN website. This is a foundational ethical guide for perioperative nurses at all levels of practice and provides guidance to effectively and ethically carry out the responsibilities of the perioperative nursing profession.

Chair Kathryn Schroeter, PhD, MA, MS, RN, CNOR, FAORN

Members:

Crystal Bricker, MSN, RN, CNOR

Stacey Godbout, BSN, CNOR

Beverly Kirchner, MSN, CNOR, CNAMB

Ruth Shumaker, MS, BSN, RN, CNOR

Board Liaison Jamie Ridout, MSN, MBA, RN, CNOR, CASC, NEA-BC

Staff Liaison:

Renae Battié, MN, RN, CNOR, FAAN

Initiatives:

1. Revise the current Perioperative Explications to be consistent with ANA's Code of Ethics for Nurses with Interpretive Statements.

RN First Assistant Task Force

The RN First Assistant Task Force was charged with reviewing and updating the RNFA Position Statement. The Task Force updated the position statement to allow CNORs who later became CRNFAs to elect not to maintain their CNOR (as long as they maintain their CRNFA). The Task Force also recommended updates to the AORN Standards for RN First Assistant Education Programs Admissions Requirements to accept either CNOR or an international equivalent as determined by the educational institution. The board approved this recommendation, and the AORN Standards for RN First Assistant Programs was updated and published in August 2025.

Co-Chairs:

Karen Knapp, BSN, RN, CRNFA, CNOR
Bob Salsameda, MPA, MSN, RN, NP-C, CNOR, CRNFA

Members:

Nadine Cottle, BSN, RN, CNOR
Ruth MacGregor, MBA, MSN, AGPCNP-BC, CNOR
Heidi Nanavati, MSN, CRNP, CNOR
Elizabeth Williams, MSN, RN, CNOR

Board Liaison Laura A. Gayton, MHCA, BSN, RN, CNOR, CSSM

Staff Liaison:

Tammy Hanks, DNP, APRN, PCNS-BC, NEA-BC, CNOR

Initiatives:

1. Review AORN position statements and guidance on education and qualifications for RNFA practice in light of the current education and practice landscape. Make a recommendation to the board on whether AORN should:
 - b. Update its *Position Statement on RN First Assistant* to allow CNORs who later became CRNFAs to discontinue maintaining their CNOR by changing the qualification to practice from “CNOR” to “CNOR and/or CRNFA”; and/or
 - c. Update the *AORN Standards for RN First Assistant Education Programs Admissions Requirement* to accept either CNOR “or international equivalent as determined by the educational institution” in order to allow perioperative nurses from abroad to qualify for RNFA education programs in the U.S.

Chapter Evolution Workgroup

This workgroup was charged with summarizing previous member and leader feedback to identify why and how to evolve the chapter engagement model to remain relevant, accessible and sustainable. A key theme was that members are not rejecting connection; they are struggling with outdated structures. The work forward is not a retreat from chapters, but an evolution towards a system that meets the workforce where they are. The recommendation is to have a member engagement network, while modernizing delivery and ensuring access by building a multi-path engagement ecosystem that also includes regional, specialty or virtual communities.

Chair Nakeisha Tolliver, DNP, MBA, RN, NE-BC, CNOR, CSSM

Members:

Kristy Wheeler, MSN, RN, CNOR

Stella Yau, MSN, RN, CNOR

Jean Santiago, MSN, RN, CCRN, RCIS

Alphonzo Baker, DNP, MSN, RN, CAPA, FASPAN

Board Liaison Laura A. Gayton, MHC, BSN, RN, CNOR, CSSM

Staff Liaison:

Renaë Battié

Mary Anna McOwen

Initiatives

1. Review and analyze the findings from the Chapter Engagement Task Force over the past three years (2022-2025).
2. Assess and analyze the results of the 2025-chapter engagement survey to highlight key findings for the 2026 House of Delegates.
3. By February 3, 2026, recommend at least two new chapter model options to the Board of Directors based on analysis of the Chapter Engagement Task Force three-year findings and the 2025-chapter engagement survey results.