1. Surveys of members indicate the most common reason they don’t vote is that they feel that they “don’t know the candidates.” To help the members get to know you better describe something you are passionate about or enjoy doing in your free time.

Ensuring surgical patients have a Registered Nurse Circulator at the bedside during procedures is imperative to guarantee a holistic approach to patient care. Besides my legislative activism to maintain a RN circulator in each OR, I believe providing an education to practice pathway for nursing students to experience perioperative nursing is another way to keep RN’s at the bedside during surgery. Through an academic-practice partnership, I developed and implemented a perioperative elective course in 2017 that includes 90 clinical hours of hands-on care in the OR. This course has led many of these students to choose to complete their 168 hours of capstone clinical experience in the OR, and make the OR their career choice. I am passionate about the future of perioperative nursing and
that RN’s will continue to provide the holistic care all surgical patients deserve.

2. Describe your most meaningful day in the OR, or in the office, and how it has impacted your current practice, or work, as a nurse.

Over the course of my 38-year career, I have numerous meaningful days. One that stands out early in my OR days involved a trauma call that led me to experience a profound moment of patient connection. The patient was involved in a MVA and though seriously injured, she was terrified and begged me to stay with her during surgery. I walked alongside the stretcher, holding her hand, while we transported her to the OR. I made sure to stay in her line of sight as we transferred her to the OR bed. Throughout her induction, I stayed by her side, holding her hand, and speaking calmly while looking her in the eyes. I visited her the next day in ICU. She remembered me – amazingly. I’ve never forgotten this experience. This is why I believe it is imperative we nurses must advocate for our surgical patients when they are most vulnerable.

3. What, in your opinion, are the key responsibilities for a member of the Board of Directors and what experience has prepared you for this role?
I feel a key responsibility of a Board member is to actively listen to AORN members. Serving as liaison to varied AORN committees, task forces, and specialty assembly councils is another route that furthers active listening. This means I will consider what members want of AORN and learn from constructive feedback in order to help develop new approaches for AORN business and/or products.

My sustained activism and leadership experience within AORN has prepared me for the Board of Directors. Since my first Congress in Anaheim (1989), I have been active in AORN with local and state leadership positions. In 1999 I began my national service on numerous committees including the National Committee on Education, the Evidence Rating Task Force, and as Chair of the Recommended Practice Committee, Chair of the Presidential Commission on Patient Safety, the Journal Editorial Board, and most recently, Chair of the National Nursing Research Committee.