Missi Merlino, MHA, RN-BC, CNOR, CSSM
AORN President

Over the past few weeks our world has changed dramatically and for the first time in AORN’s history, we made the difficult decision to cancel the Global Surgical Conference & Expo and now its absence has left many of us with feelings akin to grief and loss.

We are certainly experiencing disappointment at the board level and at headquarters where our staff has worked months and even years in advance of our conference to present an event that reignites the passion our members have for our chosen profession and provides the education we need to perform at our greatest professional potential.

It is worth taking a moment in the shadow of this health care crisis to recognize the resiliency of perioperative nurses and our professional association, AORN. It is because of AORN’s commitment over the last several years to continually invest in digital technology that we are able to present Congress – our House of Delegates meetings and Forum, including open Q & A, and we are able to be together at this time.
As many of you will recall, the theme this year was 20/20 Vision: Creating Our Future. While I did not have a crystal ball at the time, I created the theme, I can tell you with absolute confidence that we share an important and ongoing responsibility to create a future that is safe for our patients and supports our communities and facility needs. This is especially important as we care for ourselves, our loved ones, our colleagues and our patients during this pandemic.

While I am disappointed to not be with you personally, I am also very proud to provide this report to members of our accomplishment during the 2019-2020 term.

During the forum meeting on Saturday, March 28th you heard about the work completed by several of our committees. The work that began last year under President Davis on developing a Fellowship for AORN has advanced to acknowledge the significant contributions to perioperative nursing and enhancing the Association.

The National Committee on Education addressed the staff-to-educator ratio. Their initial findings indicate a 1:75 ratio may be appropriate; however, they are recommending that more research is required.

Facilities across the country struggle with retention and recruitment of perioperative nurses to keep and fill their growing needs. The work of these thought leaders offers tools we can all use in creative ways and their work will continue this year.

The Clinical Nursing Practice Committee completed a robotics orientation tool kit as more facilities, including ambulatory surgery centers embrace this technology – we need to ensure our members have resources at their fingertips to navigate these changing environments.
These tool kits are available now on the AORN website. I would also like to recognize the work of the Guidelines Advisory Board. This year they collaboratively reviewed the following guidelines:

- Surgical Attire
- Prevention of Unplanned Hypothermia
- Sharps Safety
- Selection and Use of Packaging systems for Sterilization
- Autologous Tissue Management
- Environmental Cleaning

There were also three Position Statements that were reviewed, posted for public comment and voted on by the membership at the Town Hall March 2nd. They were:

- The Position Statement on Distractions and Noise in the Perioperative Practice Setting
- Environmental Responsibility
- The Role of Health Care Industry Representatives in the Perioperative/Invasive Procedure Setting

Many of AORN’s successes are the result of countless hours spent by our volunteer leaders, with the support of the Headquarters staff and Board liaisons. This year, we had 145 members volunteer to share their knowledge and passion on committees and task forces; I am extremely thankful for all their contributions.

With a focus on AORN’s core values of communication, innovation, quality and collaboration we will continue to be the leader in perioperative practice resources.
This year the following initiatives provided members additional means to educate and support staff in all areas and practice settings:

➢ Launch of ASC In-Service of the Month – to better support professionals working in the fastest-growing surgical setting.
➢ We launched a new podcast series that includes Q&As with Guidelines for Perioperative Practice nurse authors and discussions with industry thought leaders to interviews with front line OR nurses. Our most recent podcast on March 13 addressed coronavirus and ways to keep your patients and yourselves safe.
➢ We refreshed Fundamentals of Perioperative Nursing and introduced Periop 202 with four modules: Total Hip Arthroplasty, Total Knee Arthroplasty, Spine Procedures and Orthopedic Trauma. These were our fastest growing products in 2019.
➢ Over the course of 2019, the strategy for the Facility Reference Center expanded and, in 2020 we are changing the name of the platform to eGuidelines Plus. The Plus designates the extensive and increasing range of all the other content included: from a comprehensive set of practical Guideline implementation tools and FAQs to a rich library of brief, visual At a Glance content for procedures, positioning, skin prep, anesthesia and medication that will support nurses as they progress from novice to expert competencies.

The Board of Directors once again stretched themselves to reach as many chapters and members as possible. Each year, we budget for 10 Board Chapter visits, and I am proud to say that collectively we visited a total of 16 chapters officially, in addition to a few spontaneous visits. We also attended many of the Beyond the Essentials Workshops and Nurse Leadership Seminars across the country and had the opportunity to learn and interact with you.

In my role as President, I also have had the honor of representing AORN internationally. In May, I attended the European Operating Room Nurses Association at The Hague, Netherlands, followed by the Chinese Operating Room Nurses meeting in Dongguan, China.
While in China, I had the amazing opportunity to visit and tour the Guangdong General Hospital and hear about their results from the Enhanced Recovery After Surgery program, see their ORs, and even visit with a patient.

In August, I traveled to the University of York, United Kingdom to participate as a member of the International Federation of Perioperative Nurses Board of Directors meeting and attend the Association for Perioperative Practice Residential Conference. The collaboration of the 16 nations within IFPN is a testament to the commitment to improve perioperative nursing practice globally.

2020 has been designated by the World Health Organization as the Year of the Nurse and Midwife which represents a unique opportunity to promote and strengthen AORN’s presence within the nursing community. The board of the IFPN has taken on the Nightingale Challenge by providing mentoring opportunities to perioperative nurses looking to expand their leadership potential.

It is with great pride that I announce all three of our submissions were accepted and the following individuals are part of this cohort:

➢ Cassandra Eilers, Chapter 0701, Connecticut 1
➢ Melanie Ferder, Chapter 3801, Columbia, Oregon
➢ Ashley Shaw, Chapter 2601, Kansas City, Kansas

Congratulations and I can’t wait to hear about your experiences over the next year.

My appreciation for the respect and recognition provided to AORN internationally has grown exponentially through these experiences. Attending other associations’ conferences and meetings this year continues to strengthen my view of the power and respect AORN has among the surgical services and nursing networks. The collaboration with surgeons, anesthesia providers, surgical technologists, and especially our perianesthesia nursing colleagues demonstrates that we are all in this together to provide the best care for our patients.
The strategic planning process for AORN continues to evolve as the Association expands its portfolio of products and services to members and industry partners.

In July 2019, under the leadership of President-elect David Wyatt, the focus shifted to a three-year plan to continue to position AORN’s future growth. This will allow AORN to better forecast the direction needed to respond to our changing environment. The top focus is growing the AORN member community by providing the resources that members value. We will continue to make digital and technology enhancements to service all who interact with AORN to support perioperative practice.

2019 proved the effect that nurses’ voices can have when we unite for a cause. The grassroots efforts of our members to advance the policy agenda related to healthy work environments with the evacuation of surgical plume is a testament to our power. Thank you to the nurses engaged in legislative efforts who spend countless hours to make the surgical environment safer for patients and all members of the health care team.

All the work to support AORN members would not be possible without the exceptional Headquarters staff members under the leadership of AORN CEO/Executive Director, Linda Groah.

I want to thank Linda for her guidance and support throughout my tenure on the Board, especially this past year. Her contributions to perioperative nursing are far reaching, and I wish all members had the opportunity to witness the immense respect others have for her within the broader nursing community.

This truly has been an amazing year that I will cherish forever. I am reminded that as nurses, we are never alone, and together we lift each other through support, encouragement, and love for our profession; that is our common bond.
I am confident the future of our profession and AORN will flourish under the leadership of President-elect David Wyatt and his Board. His vision and tenacity will continue to strengthen AORN’s position within the perioperative community, and I look forward to seeing what the future holds for our Association and profession.

Thank you to all who have mentored me throughout my career and were willing to share your knowledge and passion, and even give me a little nudge when needed. In the words of an esteemed colleague, Nursing is not what we do, but who we are.

Thank you.