

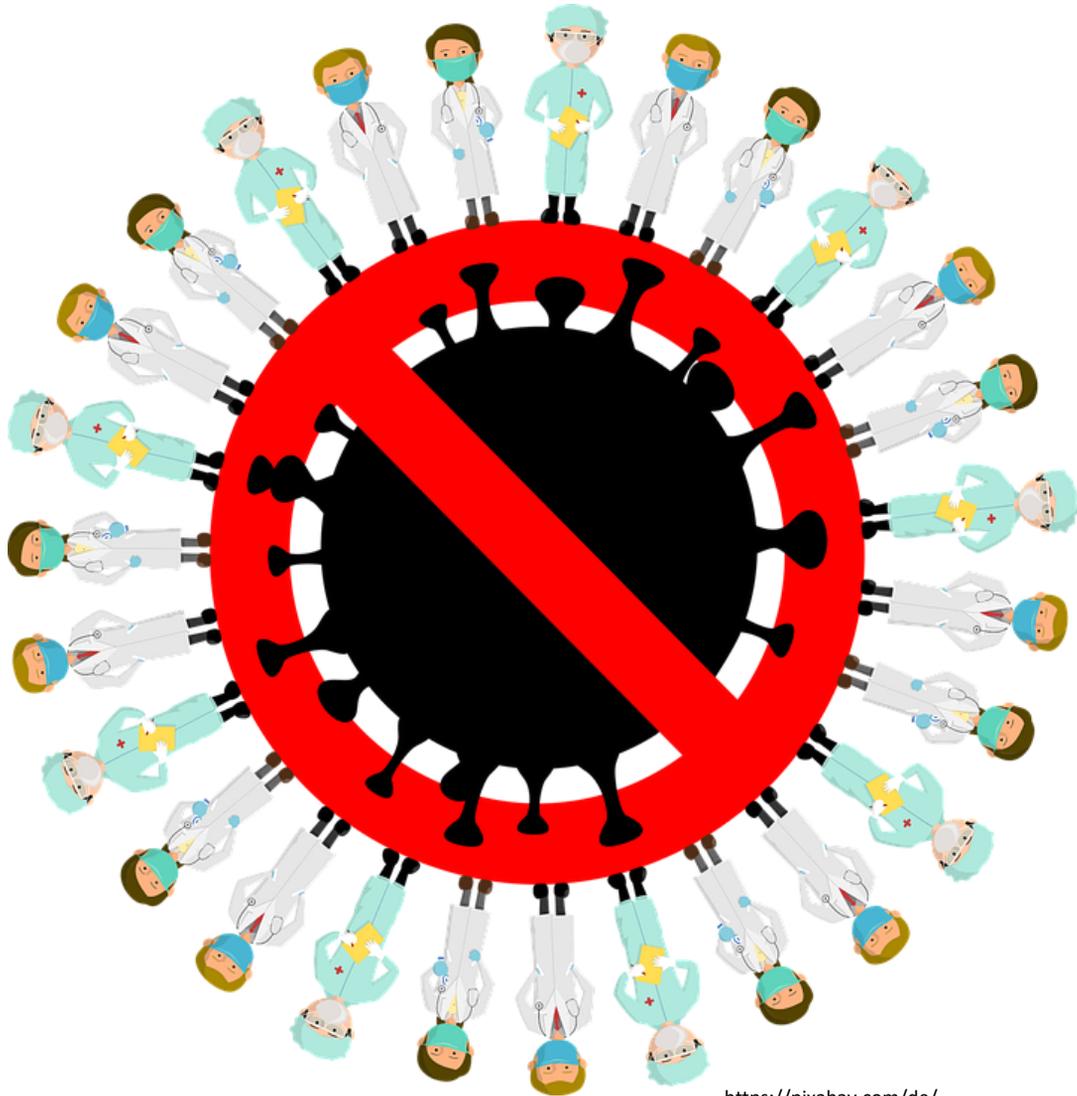
NEWSLETTER



EUSEN

European Society for emergency Nursing

EuSEN e-newsletter, number 3 , 2021



<https://pixabay.com/de/>

ENOUGH IS ENOUGH !!!

www.eusen.org



Dear members,

We hope that this newsletter finds you all well and healthy.

We are a bit tired to recognise that the pandemic is still not over yet. The unknown and what to expect next over winter leaves us not really happy and relaxed.

Many of you and us are tired of the work condition and we hope that at some point in 2022 we can look forward.

We would wish nothing more than meeting with you our members in person, but are afraid that it will not be possible for quite a while.

All countries have different travel regulations because of which travelling and meeting at a conference is not an option right now.

Therefore we decided that we would like to invite you for a **free of charge virtual webinar** on "Covid 19" and it's side effects. It will take place on October 27th 2021 from 20.00-21.00 (see page 4).

Please enrol your self to participate to click [here](#) .

The next webinar will be on November 24th 2021 from 20.00-21.00 also **free of charge** on "**Trauma**". More information in next newsletter.

In 2022 a EuSEN webinar about "Mass-casualty incidents and Emergency Nursing" will take place on the February 09th 2022 as well from 20.00-21.00.

On May 31st 2022 we have planned to organise a small virtual congress. More information will follow.

Thank you for supporting EuSEN, and foremost, STAY HEALTHY!

EuSEN

Webinar «COVID-19»

October 27th from 20:00 till 21:00 (CET)

PROGRAMME:

Effect of Covid-19 in Pediatric Emergency
Departments: A Dilemma?

Petra Valk-Zwickl (CH)

Boarding of ICU Patients in the ED: Impact on Nursing
Care in COVID-times

Christien van der Linden (NL)

The adaptation of the infrastructure and process of
the ED during the Covid- pandemic

Yves Maule (B)

Presentation 15' and Q&A 5'

Join Zoom Meeting by this [link](#)

Meeting ID: 821 1571 6867

Passcode: 530838

FREE OF CHARGE

EuSEN

General Assembly 2022



<https://pixabay.com/de/>

The next General Assembly will take place virtual.

This 2022 EuSEN General Assembly will be on May 31th.

More information is coming soon.

Effect of COVID-19 on Emergency Department presentations in a general teaching hospital in the Netherlands

M Abbas, M van Loon and MC van der Linden



Emergency Department, Haaglanden Medical Center, The Hague, The Netherlands

Background

Emergency Departments (EDs) worldwide have faced challenges to operate effectively during the COVID-19 pandemic. Personnel treating patients with respiratory problems experienced increased workloads, while staff treating other patient groups saw a decline.^{1,2} We analyzed patient and ED visit characteristics and presenting complaints during the first two COVID-19 waves. The results may provide insight in how available personnel and resources can be deployed more effectively during future COVID-19 waves or similar situations.

Methods

In this retrospective study, data were collected from the electronic hospital system of Haaglanden Medical Center (HMC) in The Netherlands. We defined COVID-19 waves according to the cut-off value determined by the Dutch national institute for public health (RIVM) of ≥ 40 hospital admissions a day due to COVID-19 (Figure 1). The first wave lasted from March 13th to May 11th, 2020 and the second from September 17th, 2020 to June 11th, 2021. Characteristics were compared with those from corresponding calendar dates in 2019.

Results

The number of ED presentations during the first wave decreased with 17.6% from 7637 to 6295, and during the second wave with 7.6%, from 37295 to 34453 (Table 1). During both waves, the median age was significantly higher, rising from 49 to resp. 54 and 55 years. More patients were presented by ambulance during both waves and the number of self-referrals decreased significantly. Also, patients were less often discharged during both waves (from 69.8% to 60.2% and from 67.8% to 57.7% resp.). No significant changes were seen in admission rates to the Intensive Care Unit (ICU) and mortality rates. During both waves we saw a significant increase in dyspnea as presenting complaint and decreases in patients presenting with thoracic pain, palpitations and (near) collapse, as well as ear, nose, throat, and facial complaints and all general complaints in children (Table 2).

Table 1

**Patient and ED-visit characteristics in the two
COVID-19 waves compared to their control periods**

	COVID-19 Wave 1	Control Period for Wave 1	OR (95% CI) or p-value	COVID-19 Wave 2	Control Period for Wave 2	OR (95% CI) or p-value
Visits N (%)	6295 (100)	7637 (100)	p=0.031	34453 (100)	37295 (100)	p=0.071
Sex N (%)						
Male	3227 (51.3)	4055 (53.1)	0.9 (0.9-1.0)	17538 (50.9)	19275 (51.7)	1.0 (0.9-1.0)
Median age in years (IQR)	54 (31-71)	49 (27-68)	p<0.001	55 (32-72)	49 (28-69)	p<0.001
Age in categories N (%)						
0-18 years	677 (10.8)	1056 (13.8)	0.8 (0.7-0.8)	3956 (11.5)	5072 (13.6)	0.8 (0.8-0.9)
19-55 years	2629 (41.8)	3401 (44.5)	0.9 (0.8-1.0)	13454 (39.1)	16466 (44.2)	0.8 (0.8-0.8)
56-69 years	1213 (19.3)	1427 (18.7)	1.0 (1.0-1.1)	6957 (20.2)	8832 (18.3)	1.1 (1.1-1.2)
70 years and older	1776 (28.2)	1753 (23.0)	1.3 (1.2-1.4)	10081 (29.3)	8924 (23.9)	1.3 (1.3-1.4)
Mode of arrival N (%)						
Ambulance	2222 (35.3)	2459 (32.2)	1.1 (1.0-1.2)	13991 (40.6)	11904 (31.9)	1.5 (1.4-1.5)
Self-presenting	3650 (58.0)	4956 (64.9)	0.7 (0.7-0.8)	19308 (56.0)	24188 (64.9)	0.7 (0.7-0.7)
Unknown	423 (6.7)	222 (2.9)	2.4 (2.0-2.8)	1154 (3.3)	1203 (3.2)	1.0 (1.0-1.1)
Referral status N (%)						
Self-referral	699 (11.1)	2485 (32.5)	0.3 (0.2-0.3)	4052 (11.8)	11456 (30.7)	0.3 (0.3-0.3)
Referred	5592 (88.8)	5132 (67.2)	3.8 (3.5-4.3)	30364 (88.1)	25756 (69.1)	3.3 (3.2-3.5)
Unknown	4 (0.1)	20 (0.3)	0.2 (0.1-0.7)	37 (0.1)	83 (0.2)	0.5 (0.3-0.7)
Disposition N (%)						
Discharge	3790 (60.2)	5333 (69.8)	0.7 (0.6-0.7)	19895 (57.7)	25290 (67.8)	0.6 (0.6-0.7)
Admission hospital ward	1821 (28.9)	1982 (26.0)	1.2 (1.1-1.3)	9433 (27.4)	9123 (24.5)	1.2 (1.1-1.2)
Admission ICU	72 (1.1)	109 (1.4)	0.8 (0.6-1.1)	420 (1.2)	494 (1.3)	0.9 (0.8-1.0)
Transfer	27 (0.4)	24 (0.3)	1.4 (0.8-2.4)	177 (0.5)	138 (0.4)	1.4 (1.1-1.7)
LWBS or LAMA	16 (0.3)	72 (0.9)	0.3 (0.2-0.5)	125 (0.4)	294 (0.8)	0.5 (0.4-0.6)
Deceased	4 (0.1)	11 (0.1)	0.4 (0.1-1.4)	59 (0.2)	41 (0.1)	1.6 (1.0-2.3)
Other/unknown	565 (9.0)	106 (1.4)	7.0 (5.7-8.6)	4344 (12.6)	1915 (5.1)	2.7 (2.5-2.8)

Table 2

**Presenting complaints in the Emergency Department during COVID-19
waves compared to control periods**

	COVID-19 Wave 1	Control Period for Wave 1	OR (95% CI)	COVID-19 Wave 2	Control Period for Wave 2	OR (95% CI)
Extremity complaints N (%)	909 (14.4)	1160 (15.2)	0.9 (0.9-1.0)	4332 (12.6)	5610 (15.0)	0.8 (0.8-0.8)
Dyspnoea N (%)	719 (11.4)	738 (9.7)	1.2 (1.1-1.3)	3159 (9.2)	3205 (8.6)	1.1 (1.0-1.1)
GI complaints N (%)	713 (11.3)	980 (12.8)	0.9 (0.8-1.0)	4310 (12.5)	4572 (12.3)	1.0 (1.0-1.1)
Trauma N (%)	653 (10.4)	722 (9.5)	1.1 (1.0-1.2)	3309 (9.6)	3625 (9.7)	1.0 (1.0-1.0)
Thoracic pain, palpitations and (near) collapse N (%)	524 (8.3)	913 (12.2)	0.7 (0.6-0.7)	1783 (5.2)	3554 (9.5)	0.5 (0.5-0.6)
General malaise in adults N (%)	488 (7.8)	575 (7.5)	1.0 (0.9-1.2)	2768 (8.0)	2992 (8.0)	1.0 (0.9-1.1)
Wounds and skin complaints N (%)	410 (6.5)	522 (6.8)	1.0 (0.8-1.1)	2157 (6.3)	2608 (7.0)	0.9 (0.8-0.9)
Headache N (%)	251 (4.0)	387 (5.1)	0.8 (0.7-0.9)	1532 (4.4)	1682 (4.5)	1.0 (1.0-1.1)
Psychiatry and intoxications N (%)	207 (3.3)	263 (3.4)	1.0 (0.8-1.1)	1158 (3.4)	1235 (3.3)	1.0 (0.9-1.1)
UTI and genital complaints N (%)	148 (2.4)	161 (2.1)	1.1 (0.9-1.4)	830 (2.4)	819 (2.2)	1.1 (1.0-1.2)
Pediatric complaints N (%)	145 (2.3)	314 (4.1)	0.6 (0.5-0.7)	872 (2.5)	1637 (4.4)	0.6 (0.5-0.6)
Eye, nose, throat and facial complaints N (%)	84 (1.3)	172 (2.3)	0.6 (0.5-0.8)	518 (1.5)	843 (2.3)	0.7 (0.6-0.7)
Seizure N (%)	64 (1.0)	57 (0.7)	1.4 (1.0-2.0)	310 (0.9)	327 (0.9)	1.0 (0.9-1.2)
Pregnancy and vaginal bleeding N (%)	58 (0.9)	83 (1.1)	0.8 (0.6-1.2)	388 (1.1)	480 (1.3)	0.9 (0.8-1.0)
Other N (%)	185 (2.9)	322 (4.2)	0.7 (0.6-0.8)	1168 (3.4)	1548 (4.2)	0.8 (0.8-0.9)
Unknown N (%)	737 (11.7)	250 (3.3)	3.9 (3.4-4.5)	5859 (17.0)	2558 (6.9)	2.8 (2.6-2.9)

Discussion and limitations

The observed changes in patient and ED visit characteristics may indicate that ED patients were sicker during the COVID-19 waves compared to the control periods. The unchanged ICU admission rates may reflect a decrease in patients presenting with other indications for ICU admission.^{3,4} The changes in presenting complaints may be a result of patients' fear of contracting COVID-19.⁵

Closure of another ED location of HMC in July 2019 resulted in redistribution of the ED population to nearby facilities, which may explain the higher median age during the COVID-waves at the remaining ED. During the control periods, triage was performed by ED personnel. During the COVID-19 waves, the Primary Care Cooperative took over triage, which may have contributed to a decrease in self-referrals at the ED.

Conclusion

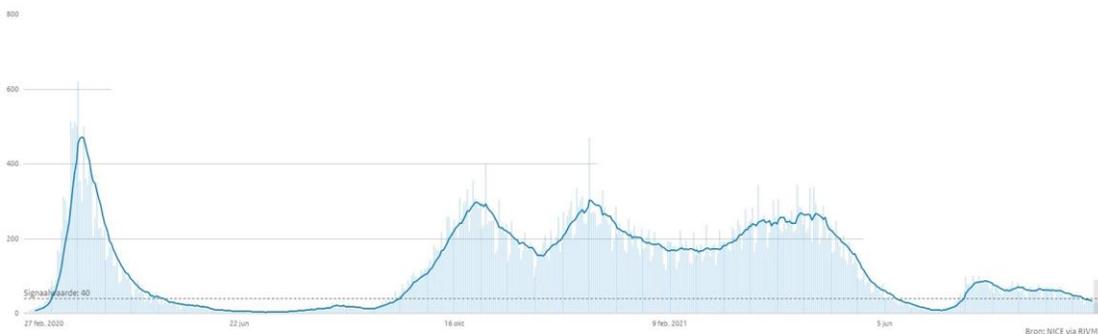
The results of this study suggest that during the COVID-19 waves, ED patients were older, sicker and less likely to be discharged home than during the control periods. Personnel caring for patient groups who present less often to the ED might be deployed to assist staff with a higher workload. Moreover, hospital beds that are not occupied by these patients may become available for COVID-19 patients.

References

1. Panovska-Griffiths J, Ross J, Elkhodair S et al. *Exploring overcrowding trends in an inner city emergency department in the UK before and during COVID-19 epidemic.* BMC Emerg Med. 2021 Apr 6;21(1):43.
2. Wartelle A, Mourad-Chehade F, Yalaoui F et al. *Effect of the COVID-19 pandemic lockdown on non-COVID-19 emergency department visits in Eastern France: Reduced risk or avoidance behavior?* Public Health Pract (Oxf). 2021 Nov;2:100109.
3. Ojetti V, Covino M, Brigida M et al. *Non-COVID Diseases during the Pandemic: Where Have All Other Emergencies Gone?* Medicina (Kaunas). 2020 Oct 1;56(10):512.
4. Ullah A, Fraser DGW, Fath-Ordoubadi F et al. *Decrease in cardiac catheterization and MI during COVID pandemic.* Am Heart J Plus. 2021 Jan;1:100001.
5. Davis AL, Sunderji A, Mamani SR et al. *Caregiver-reported delay in presentation to pediatric emergency departments for fear of contracting COVID-19: a multi-national cross-sectional study.* CJEM. 2021 Aug 16:1–9.

Figure 1

Hospital admissions due to COVID-19 in The Netherlands



Follow-up survey on the recognition of child maltreatment in the emergency department (ED)

There is a need for improving the recognition of child maltreatment in the emergency department (ED). Recently, we published a study showing that only 25.6% (34/133) of the emergency departments (EDs) in Europe conform to most of the NICE guideline recommendations on child abuse & neglect (<https://doi.org/10.1371/journal.pone.0246361>).

This study was distributed through the EUSEM congress 2018 and the EUSEM, REPEM and EuSEN networks and we would like to thank all distributors and respondents for their valuable contribution. As a follow-up, we have developed a questionnaire to study barriers and facilitators for the implementation of a child maltreatment toolkit, consisting of a screening checklist, training and a strategy for adequate hospital policy, at EDs in Europe.

We kindly ask your cooperation to distribute the questionnaire among hospitals (nurses, doctors and other professionals) in your country.

What we ask from you:

- Forward the email text with the survey link (<https://erasmuscsurvey.erasmusmc.nl/bfai toolkit/ls/index.php/4?newtest=Y>) to 5-10 hospitals (1 responsible contact person per hospital) in your country
- In order to get an impression of the response, please inform us (childmaltreatment.toolkit@erasmusmc.nl) on the following:
 - The number of hospitals you send the questionnaire to
 - The names of the hospitals
- An email for respondents is drafted below

We thank you in advance for your time and effort!



EUSEM, REPEM and EuSEN and Augeo Foundation and Erasmus MC-Sophia Children Hospital from the Netherlands have joined forces to work together on improving the knowledge about child maltreatment and the implementation of tools in order to detect more victims of family maltreatment at the EDs in Europe.

For more information or questions, please contact Erasmus Medical Center in The Netherlands

E-mail: Childmaltreatment.toolkit@erasmusmc.nl

ENA University Takes Emergency Nursing Education to Next Level

Kiley Sanders
International business development
Emergency Nurses Association

Kiley.Sanders@ena.org

Joop Breuer
Director
Emergency Nurses Association
member of EUSEN /NVSHV

joop.breuer@ena.org



Long recognized as the leading provider of high-quality emergency nursing education, the Emergency Nurses Association raised the bar to new heights with the launch of the dynamic new ENA University on August 24th

ENA University brings together in one place online the association's extensive portfolio of education courses and resources with new skill and career development opportunities. This new center for excellence also features the Industry Learning Lab presented by ENA's strategic partners, enhanced mentoring and peer engagement and a design that allows emergency nurses of all experience levels to tailor their continuing education to their needs. It will offer emergency nurses from all across the globe access to great education resources

The launch sets the stage for two key upcoming milestones: the debut of two career pathway programs in October and the introduction of an 18-week residency program in 2022. ED nurses will be able to find it all on a newly created, mobile-friendly website and on a dedicated ENA University app scheduled for release later this year.

ENA University's pathways support a nurse's growth and professional development that resonate across the span of their career continuum. These are learning tracks with educational courses tailored for a nurse's level of experience.

Learners can expect more new programming through ENA University from leading industry partners and the Industry Learning Lab. This skilled training is provided by experienced nurses on key skill development topics.

In 2022, ENA University will debut an 18-week residency program focused on clinical judgement and decision-making skills with the goal of improving retention and reducing burnout. Available in 2022.

ENA University also delivers several other new and improved features for every learner including:

- A more dynamic user experience with a mobile-friendly website and dedicated app that provides immediate access to purchased courses; better tracking of completed courses, transcripts and certificates; and a TNCC/ENPC course finder.
- ENA's complete library of practice resources – position statements, toolkits, infographics and more – all in one repository for easy searching and accessibility.
- Pathway mentoring program that matches learners and mentors based on experience level using a revamped onboarding process. With every pathway purchase, the learner receives one-year of access to the ENA mentoring program.
- The ENA Learning Studio offers small, in-person training events at ENA Headquarters that focuses on hands-on learning opportunities. "ENA University is a landmark initiative that emphatically continues ENA's decades-long commitment to educating emergency nurses," said ENA President Ron Kraus, MSN, RN, EMT, CEN, ACNS-BC, TCRN. "

ENA also announced its only two-time president, Patti Kunz Howard, PhD, RN, CEN, CPEN, TCRN, NE-BC, FAEN, FAAN, will serve as ENA University's first provost. Using her decades of clinical experience and passion for education, Howard will provide strategic consultation for ENA University's future development.

"Education is extremely important to me. Emergency nurses need the knowledge that gives them the confidence to care and advocate for their patients at the highest levels possible. ENA University puts everything ENA has to offer right at their fingertips," Howard said. "It's very exciting to be a part of the launch and to think about all of the possibilities for ENA University's growth."

ENA is looking to expand its partnerships with other professional organizations for Emergency Nurses from across the globe, like EUSEN, and hopes this new education platform will also be part of this partnership.

For more information on ENA University, visit ena.org/ENAU.

About the Emergency Nurses Association

The Emergency Nurses Association is the premier professional nursing association dedicated to defining the future of emergency nursing through advocacy, education, research, innovation, and leadership. Founded in 1970, ENA has proven to be an indispensable resource to the global emergency nursing community. With more than 50,000 members worldwide, ENA advocates for patient safety, develops industry-leading practice standards and guidelines, and guides emergency healthcare public policy. ENA members have expertise in triage, patient care, disaster preparedness, and all aspects of emergency care. Additional information is available at www.ena.org.

ENA Media Contact:

Dan Campana

Director of Communications

847.460.4017

dan.campana@ena.org



Nursing sessions at the European Emergency Medicine Congress

The European Emergency Medicine Congress is a truly multiprofessional meeting bringing together all stakeholders involved in emergency medicine. This congress aims to educate and share best practice to provide better care to patients.

The scientific committee have put together sessions that interprofessional as well as being specific to nursing. These sessions give nurses the opportunity to discuss important issues related to their practice with their peers. Please view the sessions here:

Track A: 29 October 2021	
Sessions: Soft factors, hard facts and new concepts in resuscitation	
09:10 - 10:40	Track A - Auditorium 1
Moderator: Wilhelm Behringer	
Moderator: Clemens Kill	
09:15	Vasopressors in haemorrhagic shock - The AVERT Shock Trial Zaffer Qasim, USA
09:35	Zero point survey - the survey before abcde Simon Carley, UK
09:55	Nurse lead resuscitation Damir Vazanic, HR
10:15	Update ECPR - ARREST Trial Demetris Yannopoulos, USA

Track A: 29 October 2021	
Sessions: Wellbeing in Emergency Medicine - How to avoid becoming the patient	
11:10 - 12:40	Track A - Auditorium 1

Moderator: Basak Yilmaz

Moderator: Senad Tabakovic



11:15	Emergency Physicians at risk - How to identify and help a colleague in need Nicole Battaglioli, USA
11:35	Are 10 minutes enough? Wellbeing strategies for people with no time Sara Gray, CA
11:55	Low threshold video-counselling for healthcare professionals during COVID-19 pandemic in Finland Eeva Tuunainen, FI
12:15	Wellbeing the nurses perspective Lisa Wolf, USA

Track A: 29 October 2021

Sessions: Pain management in the Emergency Department - Little secrets of big masters

14:10 - 15:40

Track A - Auditorium 1

Moderator: Jim Ducharme

Moderator: Said Idrissi

14:15	The "Ouchless" ED: How to reduce everybody's anxiety level when treating children Bernard Dannenberg, USA
14:35	How accurately do we treat pain in the nonverbal patient? Jim Ducharme, CA
14:55	Analgesie in the ED - The nurses perspective TBD
15:15	PSA in very sick patients Christian Heringhaus, NL

Track C: 29 October 2021

Sessions: Nursing Research

**All you need to know when you want to conduct research as a nurse.
A 'must' for all nurses with interest in research**

16:10 - 17:40

Track C - Auditorium 8



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16:35	Teaching nurses to use clinical data TBA,
16:55	Emergency nursing research 2020 Jochen Bergs, SWE
17:15	Taking care of the older people in the emergency department during the COVID-pandemic: an Icelandic perspective Ingibjörg Sigursórsdóttir, IS

Track D : 29 October 2021

Sessions: Disaster Medicine

16:10 - 17:40

Track D - Room 5A+B

Moderator: Carmen Diana Cimpoesu

Moderator: Luca Ragazzoni

16:15	Prepare to be suprised Eric Revue, FR
16:35	Unexpected but unavoidable: the importance of stockpiling Efstratios (Steve) Photiou, IT
16:55	Can one do without the other? Civilian - Military cooperation in disasters Luc J M Mortelmans, BE
17:15	Hospital Disaster Preparedness: the viewpoint of a Critical Care nurse and Hospital Disaster coordinator Christel Hendrickx, BE

Track C : 30th October 2021

Sessions: Emergency Medicine and COVID - What about us?

09:10 - 10:40

Track C - Auditorium 8

Moderator: Patrick Plaisance

Moderator: Roberta Petrino



EUSEM

LISBON 2021
27-31 OCTOBER



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09:15	Impact of COVID pandemic on the role and the work of EM nurses TBA
09:35	What happened to the non-COVID patients? Mikkel Brabrand, DK
09:55	Training and preparing our teams for COVID Raed Arafat, RO
10:15	Stay strong under pressure - experience during COVID Roberto Cosentini, IT

Sessions: Emergency nursing - The international perspective

Great opportunity to obtain some insight about emergencies that can occur in the air while transporting and accompanying the patient in the plane on a long distance trip. A valuable perspective about emergency nursing in the 3rd world, how it has developed so far and what we can learn from our colleagues in Africa.

11:10 - 12:40 Track B - Auditorium 2

11:10	In-flight medical emergencies Victoria Ball, USA
11:10	In-flight medical emergencies Sorayah Bourenane, USA
11:40	Development of emergency nursing in Africa Emmanuel Acheampong, GH
12:10	Promoting relational practice with families in emergency departments in KwaZulu-Natal, South Africa Emmamally Waheedha, ZA

Track A: 30 October 2021

Sessions: Education and Simulation - The only way to become better and get a standard!

16:10 - 17:40 Track A - Auditorium 1

Moderator: Piere Luigi Ingressia

Moderator: Vitor Manuel Lopes Fernandes Almeida



16:15	Instead of virtual simulation - train the trainer! Marcus Rall, DE
16:35	How to implement paediatric simulation-based team trainings in your ED Ruth Mari Löllgen, SE
16:55	Simulating the war zone Nelson Olim, PT
17:15	'Breakfast Club' - Nurse led simulation: Educating nurses or nurses educating? Fay Mills, UK

[To view other sessions please go to the online programme](#)

Registration

Nurses can benefit to reduced fee registration as EUSEM members. See registration fees below:

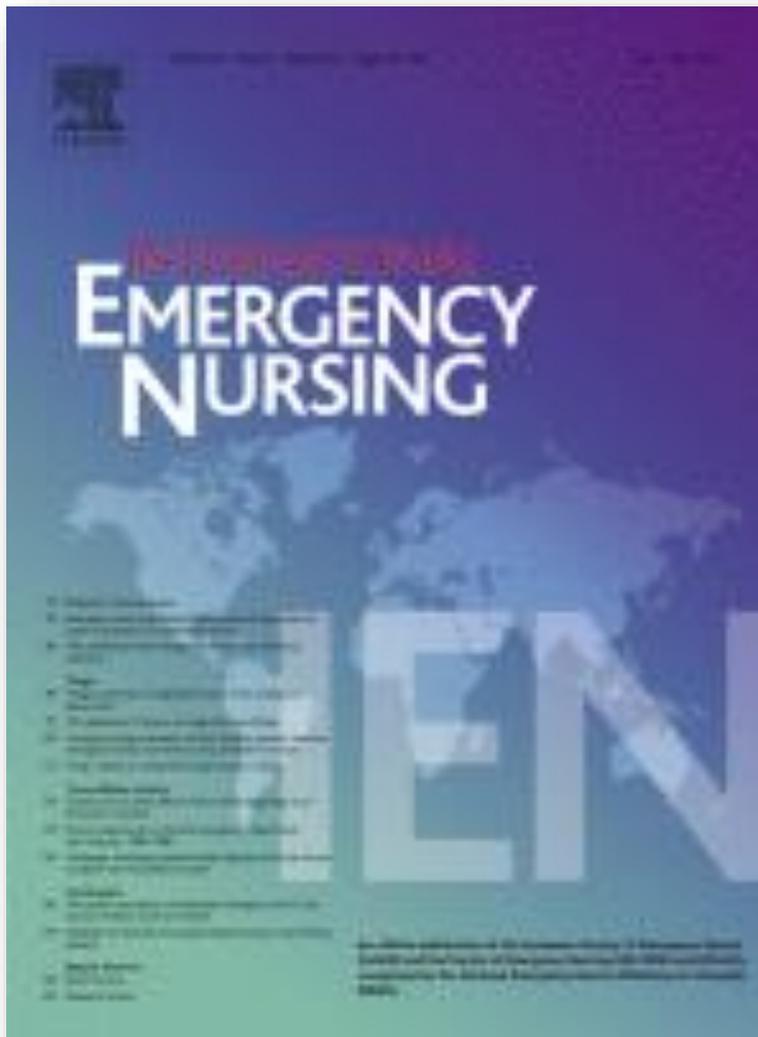
STANDARD REGISTRATION FEES From 1 September & onsite	Non-Reduced Fee Countries		Reduced Fee Countries	
	Nurses	Students	Nurses	Students
Member: EUSEM, INEM or SPMUE	€340	€170	€210	€105
Non-Member	€410	€205	€250	€125
Affiliate	€385		€240	
One-day registration	€180	€90	€120	€60

VIRTUAL ACCESS REGISTRATION FEES	Non-Reduced Fee Countries		Reduced Fee Countries	
	Nurses	Students	Nurses	Students
Member: EUSEM, INEM or SPMUE	€150	€85	€100	€50
Non-Member	€200	€100	€150	€65

Register [here](#)

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Nathalie.Lhorset-Poulain@springer.com



EUSEN

European Society for emergency Nursing

Are you interested in Emergency Nursing?
Then join the European Society for Emergency Nursing NOW!

The society's aim is to promote nursing activities in the field of emergency care

The Society's purpose is:

- *to promote science and art of nursing in emergency care
- *to promote contacts, exchange and cooperation between European emergency nursing associations
- *to represent emergency nurses within and outside of Europe
- *to draft and promote standards for training, implementation of the profession and management in the field of emergency nursing
- *to harmonize the training of emergency nursing across Europe
- *to promote cooperation with all healthcare professionals, institutions and organizations with a professional interest in emergency care
- *to promote basic knowledge about emergencies throughout the population.

EuSEN is a NON-Profit association. To be a member with EuSEN you need to be a member of a local or national emergency nurse association. The association needs to have local standards and official statutes.

Do you want to learn more about the EuSEN Please contact :

The President of EuSEN

Door Lauwaert

Post address: UZ Brussel, Emerg. Dpt, Laarbeeklaan 101, 1090 Brussels, Belgium

Or door.lauwaert@uzbrussel.be

To join us - Fill in the admission form on the next page.



EUSEN
European Society for emergency Nursing

Application form EuSEN

Name of the Association

.....

Country.....
URL Website.....

Number of members.....

Does the association follow official statutes Yes No

The associations main purpose in emergency care

.....
.....
.....

Name of the President.....

Contact address, E-Mail and phone number

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Second contact person of the association (if not the President is the contact person)

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Contact address, E-Mail and phone number

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Send the application form and relevant documents presenting your organization to:

The President of EuSEN Door Lauwaert

Post address: UZ Brussel, Emerg. Dpt, Laarbeeklaan 101, 1090 Brussels, Belgium
Or door.lauwaert@uzbrussel.be

www.eusen.org

Individual membership EuSEN

Dear future member,

If you want to support us developing EuSEN, you can become an individual EuSEN Member.

Membership fee for individual member had been fixed to **15€/year** by the EuSEN Board . This money help us to promote the association throughout Europe.

As an Individual Member, you'll be informed of any evenemential action of EuSEN and every publication, you'll also have member price for Congress supported by EuSEN and any promotional action held by EuSEN.

Individual Membership don't give the right to vote at the General Meeting Assembly (Only for the Association) and membership of EuSEN don't mean that you are member of all the European nurses associations.

WE NEED YOU, if you want to help us by becoming a individual member, fill the form (see website EuSEN) and the treasurer will contact you as soon as possible to give you information about the procedure to pay the annual fee.

- NEW !!! To avoid high transaction fee, you can now pay by PayPal

www.eusen.org



EUSEN
European Society for emergency Nursing



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