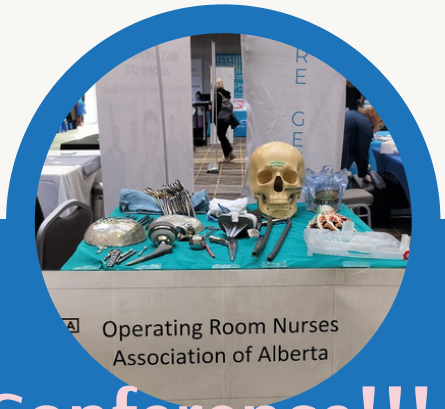
Operating Room Nurses Association of Alberta

Snips and Snaps

Summer 2026



ORNAA at AAN Conference!!!

Thank you to all of our members and to everyone who has supported, joined, or participated in ORNAA education across the province so far this year.

CONTENTS

UPCOMING EVENTS

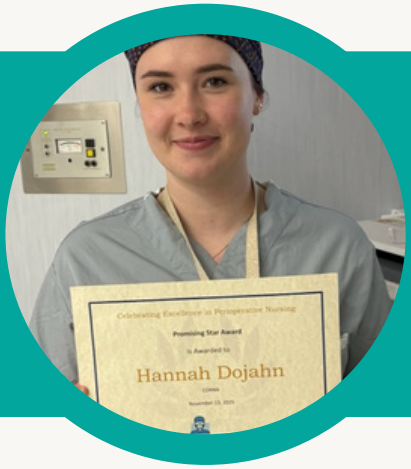
Sim Wars 2: Simulate, Strategize, Save Lives

Location: Red Deer Community Hospital
Date: September 19, 2026
Time: 0900- 1330 potential for second session 1230-1700
Food: Lunch and light refreshments provided
Cost: Members $50 Non-Members $75
Click here to Register

AGM and Education Session: The Perioperative Breastfeeding Patient

Location: Zoom
Date: November 5, 2026
Time: 1800-2010
Click here to Register
(poster to follow)

Hannah Dojahn



CORNA Promising Star

It is with great enthusiasm that I nominate Hannah Dojahn for the ORNAA Promising Star Award. Hannah is a Licensed Practical Nurse-ORT currently working in the surgical suite at Red Deer Regional Hospitas, and she has been in this role for just under two years. In this short time she has already distinguished herself as an exceptional perioperative nurse with a bright future in our field.

From her first day in the operating room Hannah demonstrated a natural aptitude for the fast-paced detail-oriented environment of perioperative care. She quickly adapted to the demands of the surgical suite, showing initiative, critical thinking, and a calm, focused demeanor under pressure. Her ability to anticipate the needs of the surgical team and respond swiftly and accurately has earned her the respect of her colleagues and surgeons alike. One of our orthopedic surgeons complimented her for just how quickly she learns from one case to the next.

According to some of our specialty nurses, what truly sets Hannah apart is her eagerness to learn and grow. She actively seeks feedback, participates in continuing education opportunities, and is always willing to lend a hand to her peers. Her positive attitude and collaborative spirit contribute to a supportive and efficient OR team environment.

Hannah embodies the qualities that the ORNAA Promising Star Award seeks to recognize professionalism, dedication, and a strong potential for leadership in perioperative nursing. Her quiet nature and genuine personality have helped our perioperative staff embrace her as one of their own. I am confident that she will continue to make significant contributions to our profession and inspire others along the way.

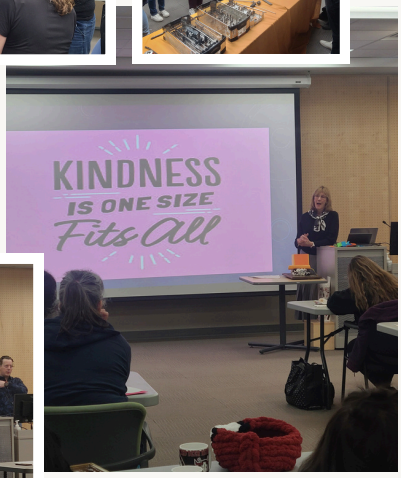
Sincerly
Claudia Huska

ORNAA

CORNA SPRING WORKSHOP

Saturday, April 25, 2026 - 0800 - 1600 – at the Red Deer Regional Hospital.

There were 31 Attendees and 8 Presenters in attendance.



CORNA is grateful to its sponsors – Hologic, Alcon, Stryker and many additional donors for their support.

CORNA made a profit of $1367.49 from the Workshop, which will go to support the ongoing education of nurses in Central Alberta.

Thank you to everyone who attended and to the Speakers and Partners who made this event possible.

Presentations/Sessions:

- AC joint Repair – Dr. Keith Wolstenholme
- Surgical Treatment of Breast Cancer – Dr. Matthew Connell
- CORNA/ORNAA/ORNAC Presentation – Jill Clark – ORNAA President
- Entropy Monitoring – Dr. Farries
- Hands-on Learning Sessions: Alcon, Hologic, Stryker
- Wellness Goal Setting Session

GLP-1 DRUGS AND THE OR: UNDERSTANDING PERIOPERATIVE RISKS AND PATIENT SAFETY

By Barbara Mushayandebvu

This short article explores why it is important for perioperative teams to understand the risks faced by a patient taking GLP-1 (glucagon-like peptide-1) receptor agonists when presenting for surgery.
My interest in GLP-1 medications was first piqued when semaglutide appeared at my hospital labelled as a known hazardous medication, later downgraded to potentially hazardous. Semaglutide was initially added to the Hazardous Medication List in November 2021 due to evidence of carcinogenicity in animals at sub-therapeutic doses. Hazardous medications are placed on this list when there is evidence of carcinogenicity at low exposure levels, and semaglutide met this criterion based on animal data.

Information shared by our educators indicated this classification was related to a very small potential risk of thyroid cancer. As a result, staff were instructed to wear N95 masks in addition to routine droplet and contact precautions when handling these medications. This understandably led to significant concern and confusion among OR practitioners — particularly when patients, staff, and visitors taking semaglutide were moving throughout the hospital without similar precautions. The inconsistency did not make sense to many of us, myself included, and prompted me to look deeper into the issue.
This curiosity ultimately led to the development of this brief informational article.

What became increasingly clear through my research was that the primary perioperative concern with GLP-1 medications is not occupational exposure, but delayed gastric emptying. GLP-1 receptor agonists (such as Ozempic and Wegovy) slow gastric emptying, leading to prolonged feelings of fullness. In the perioperative setting, this creates an increased risk of aspiration during induction of anaesthesia, making it critically important for the OR team to know whether a patient is taking these medications.

This connection suddenly made complete sense to me as a perioperative nurse. Oprea et al. (2025) acknowledged in their Society for Perioperative Assessment and Quality Improvement (SPAQI) multidisciplinary consensus statement that perioperative management of patients on GLP-1 receptor agonists remains an area of debate. Despite ongoing discussion, the authors emphasize that patient safety must remain the guiding principle. Their work resulted in the following key recommendations:

Summary of SPAQI Recommendations

- Continue GLP-1 receptor agonists perioperatively in patients without significant gastrointestinal symptoms.
- Extend fasting for solids to 24 hours prior to anaesthesia.
- Adjust fasting times for clear liquids based on carbohydrate content.
- Refer patients with significant gastrointestinal symptoms (e.g., severe nausea, vomiting, inability to tolerate oral intake) back to the prescribing provider prior to elective surgery.
- Resume GLP-1 receptor agonists once patients return to their usual diet, both inpatient and outpatient.

Some organizations (my hospital included) have also developed policies related to GLP-1 medications based on their classification as potentially hazardous drugs, with a focus on occupational exposure risk. These recommendations are largely driven by concerns about handling, aerosolization, and prolonged elimination half-life, which has led to extended precautionary periods in some settings.
After further review in 2023, my hospital confirmed that semaglutide should remain classified as a known hazardous medication, with an extended precautionary period of 14 days. This decision was based on the medication's elimination half-life of approximately 7 days, meaning it takes about 14 days for the drug concentration to significantly decrease in the body.

In practice, however, perioperative teams appear to place greater emphasis on the effects of GLP-1 receptor agonists on gastric emptying and aspiration risk. In discussions with several anesthesiologists, occupational exposure was consistently viewed as a lesser concern compared with airway management and patient safety during induction of anaesthesia. In my workplace, however, the recommendations most consistently followed are those related to delayed gastric emptying and aspiration risk, rather than occupational exposure concerns.

Understanding whether a patient is taking a GLP-1 medication — and recognizing its impact on gastric emptying — is critical for perioperative planning, communication, and patient safety.

What OR Nurses Need to Know

- GLP-1 medications can significantly delay gastric emptying, even when patients report following NPO instructions
- Medication history matters — document GLP-1 use clearly during pre-op assessment
- Communicate GLP-1 use to anesthesia early, especially if patients report nausea, vomiting, or early satiety
- Be alert to extended fasting requirements and advocate for patient safety when concerns arise
- Understanding GLP-1 risks supports informed advocacy and safer perioperative care

I hope this article encourages perioperative teams to reflect on two vital questions: What is happening in your workplace, and are you aware of the risks GLP-1 drugs pose to surgical patients?

References:

- Perioperative management of long-acting glucagon-like peptide-1 receptor agonists: concerns for delayed gastric emptying and pulmonary aspiration. PubMed. 2023.
- GLP-1 Agonist Delayed Gastric Emptying: Clinical Implications and Management. Fella Health. 2025.
- Society for Perioperative Assessment and Quality Improvement (SPAQI) multidisciplinary consensus statement: Perioperative management of patients taking GLP-1 receptor agonists. PMC. 2025.
- American Society of Anesthesiologists Consensus-Based Guidance on Preoperative Management of Patients on GLP-1 Receptor Agonists. ASA. 2023.
- Multi-society clinical practice guidance for safe perioperative use of GLP-1 receptor agonists. Surgical Endoscopy. 2025.
- Perioperative management of patients on GLP-1 receptor agonists: Risks, recommendations, and future directions — narrative review. PubMed. 2025.
- Association between GLP-1 RA use and perioperative residual gastric contents/aspiration: systematic review & meta-analysis. PubMed. 2025.
- Perioperative management of GLP-1 receptor agonists: Clinical implications and best practices. PubMed. 2025.
- GLP-1 and dual GIP/GLP-1 receptor agonists: potential risk of pulmonary aspiration during general anaesthesia or deep sedation. GOV.UK drug safety update. 2025.

NOMINATIONS NOW OPEN

We are currently accepting nominations for this year's awards. If you would like to learn more about the awards or submit a nomination see the brief description and link below

Link to ORNAA Award nomination page with links to nomination forms.

This award is to be presented to an Alberta Operating Room Registered Nurse who is currently working in a surgical suite and who has less then two years experience in this role. The nominee exceeds the expectations of their employers and/or colleagues and shows promise as an exceptional member of the Perioperative Registered Nursing profession.

The "Muriel Shewchuk Excellence in Leadership Award" is to be presented to an Alberta Operating Room Nurse who has demonstrated outstanding and consistent commitment to the specialty and the nursing staff of the operating room(s) through leadership roles in the area of clinical excellence, supervision and /or education as a role model and mentor. The award is presented to honor Muriel Shewchuk who spent over 42 years dedicated to Perioperative Service in Alberta.

These awards are designed to recognize contributions of original scholarly papers (researched and referenced) to Snips and Snaps. Submissions of original scholarly papers will be awarded as follows:

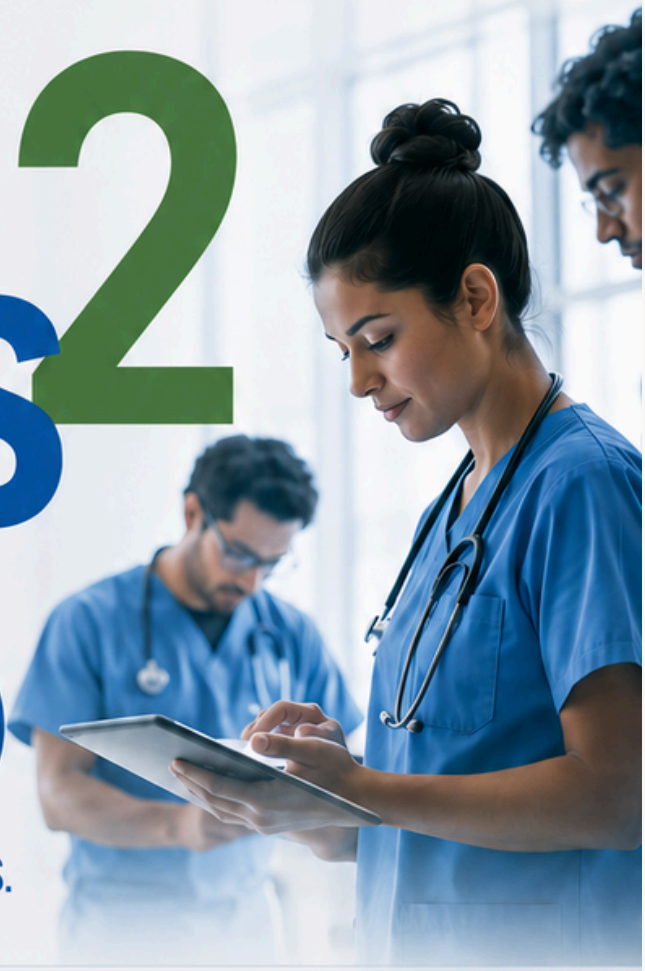
- First place paper - $500
- Five additional papers awarded - $250/each
- One award for special article (poem, personal reflection) - $250

ORNAA

OPERATING ROOM NURSES ALBERTA ASSOCIATION

PRESENTS

SIM WARS 2



SIMULATE. | STRATEGIZE. | SAVE LIVES.

DATE
SEPTEMBER 19, 2026

START TIME
0900

VENUE
RED DEER HOSPITAL

VENDOR HALL AVAILABLE

LUNCH
PROVIDED AS PART OF REGISTRATION

COST
$50 MEMBERS
$75 NON-MEMBERS

KEEP THE WIN. | GLORY. | MAKE IMPACT. | BE THE CHANGE.

REGISTER NOW:

https://docs.google.com/forms/d/e/1FAIpQLSehB_rxvOahQdnOhJ8ksiyTWDr-JuqHZZjcciYGy7eQhWwnWYig/viewform?usp=publish-editor

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