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# CANN ACIISN

Canadian Association of Neuroscience Nurses  
Association canadienne des infirmières et infirmiers  
en sciences neurologiques



**September 2004**

**Remembering Jessie Ferne Young (1910-2004)**

*By Diane Duff and Jeanne Evans*

A biography and record of the times and achievements of Jessie Ferne Young, founder of the Canadian Association of Neuroscience Nurses.

**Remembering Jessie Ferne Young (1910-2004)**

*By Jeanne Evans*

A tribute to the life of Jessie Ferne Young, founder and first president of the Canadian Association of Neuroscience Nurses, through personal recollections and anecdotes.

More information on Jessie Young can be found on the C.A.N.N. website under our 'History' section – <http://www.cann.ca/history.html>

**How the brain recognizes and responds to shock**

*By Jessie F. Young*

A 1976 discussion of shock by CANN Founder Jessie Young, reprinted from the journal of the American Association of Neurosurgical Nurses.

**Analysis of nursing assessments in a cohort of patients with ruptured cerebral aneurysms**

*By Kathy Doerksen, Health Sciences Centre, Dr. B.J. Naimark, University of Manitoba, and Dr. R.B. Tate, University of Manitoba*

Patients admitted with subarachnoid hemorrhage are monitored for symptoms of vasospasm. A prospective study was designed to compare two monitoring instruments: a standard neurological tool (SNR) and the National Institutes of Health Stroke Scale (NIHSS). The two assessment tools were compared to evaluate their concordance and to identify areas where efficiency in recording assessments might be improved. We found no statistical difference between the two tools in detecting symptomatic cerebral vasospasm. Substantial discrepancies in the documentation of observations were noted, particularly in the assessment of limb drift. Avoidance of these discrepancies may require further definition in the SNR tool.

A qualitative component consisting of a review of the nurses' notes regarding neurological status in the patients' charts was conducted. It was demonstrated that nurses commonly document information in the progress notes that is already captured in the SNR. Further education of nurses in the use of assessment tools is therefore recommended to avoid redundancies and increase efficiency in recording clinical observations.