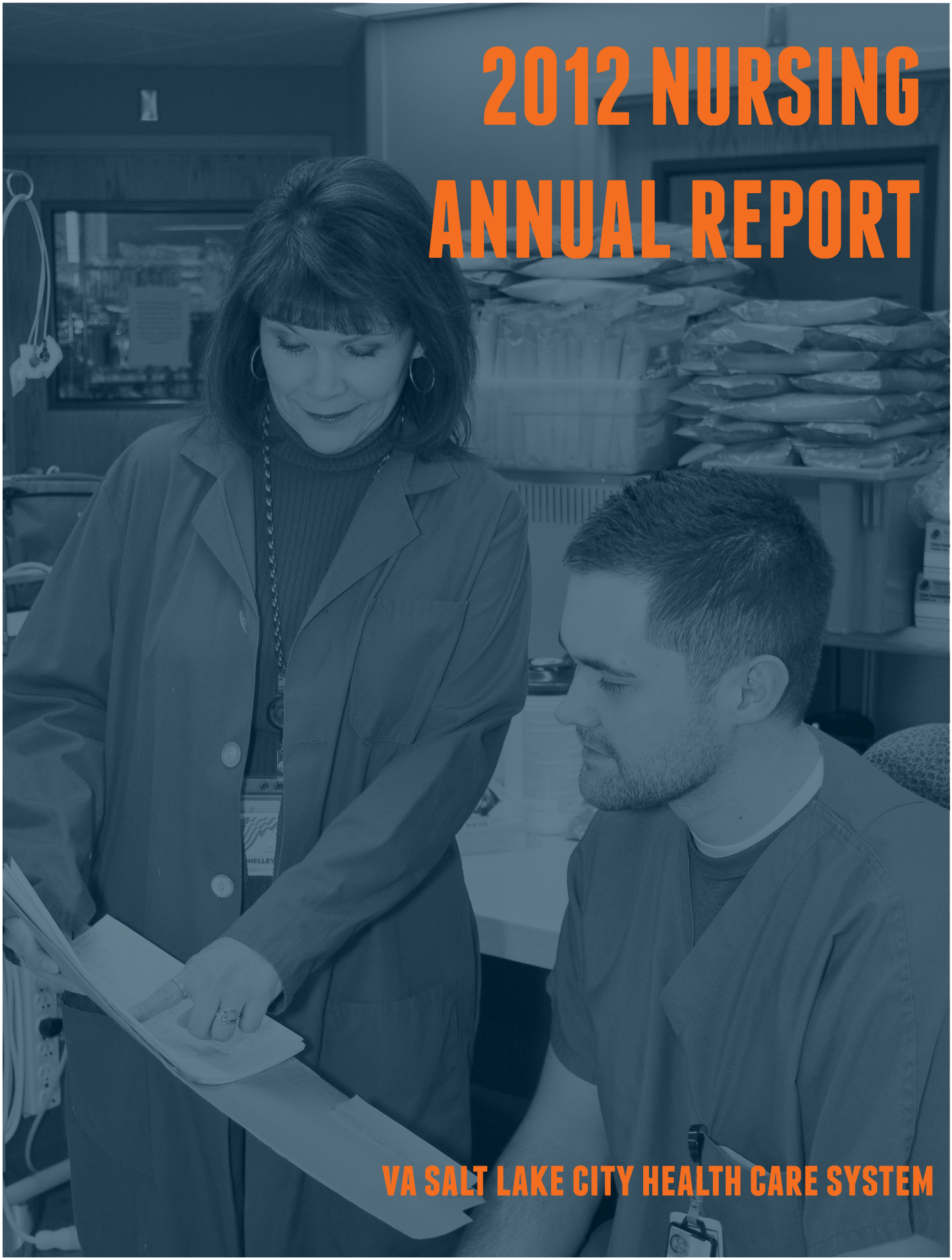
2012 NURSING ANNUAL REPORT



VA SALT LAKE CITY HEALTH CARE SYSTEM

"THE TRAINED NURSE HAS BECOME ONE OF THE GREAT BLESSINGS OF HUMANITY, TAKING A PLACE BESIDE THE PHYSICIAN AND THE PRIEST"

- WILLIAM OSLER

"CARING IS CURING"

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This 2012 nursing annual report is dedicated to you, our nurses, who work tirelessly to strengthen the infrastructure that allows VASLCHCS the opportunity to strive for excellence in the delivery of care. It is the result of your personal and professional contributions that, along with the entire interdisciplinary team, contributed to yet another successful year. Nurses at VASLCHCS have created a positive work environment where professional growth and individuality can develop.

One of this year's major accomplishments in nursing service is ending our contract with the nurse staffing agency. After many years of encouragement from our Labor Partner, we have recruited and hired our own nursing staff employees to build a resource "float" pool that we once obtained through the use of the staffing agency. I would like to thank our Labor Partner for their support in achieving this goal.

This year we are joining our Labor Partner to build up civility in the work place. For me, being civil is living in mutual respect and having meaningful connections and conversations across and among groups. These are necessary to building trust in our work environment. It means being able to know what truth is, and being able to speak it, while at the same time listening carefully to the truth of those we do not understand or know. Another noteworthy accomplishment is our progress toward achieving the recommendations of the Institute of Medicine's (IOM) "The Future of Nursing: Leading Change, Advancing Health." Within this issue we publish our progress toward implementation of those recommendations.

The RN satisfaction survey results were comparable to 2011 with overall satisfaction slightly declining by 0.1. Notable areas we can improve are in the areas of response from leadership in addressing employees concerns, perceptions of having enough registered nurses to provide quality care, praise and recognition, adequate support services, online exit survey participation, and reduced RN turnover. Nursing satisfaction is extremely important to me and to the organization. I welcome ideas from you about what we can do to make your work experience more fulfilling.

As you make a difference every day, it is with sincere appreciation that I thank you for choosing to proudly serve our Veterans. I encourage you to reflect on your individual, as well as the organization's, accomplishments. We can all be proud to work in an organization that encourages innovation, shared decision-making, quality and safe patient care, and a culture of providing exceptional patient-centered care to our Veterans.

Shella Stovall

SHELLA STOVALL, MNA, RN, NE-BC
Associate Director/Patient Care Services

"Civility means a great deal more than just being nice to one another. It is complex and encompasses learning how to connect successfully and live well with others, developing thoughtfulness, and fostering effective self-expression and communication. Civility includes courtesy, politeness, mutual respect, fairness, good manners, as well as a matter of good health."
~ Pier Massimo Forni~

Nursing Leadership

Shella Stovall, MNA, RN

Shella graduated with a Diploma in Nursing from Newman Hospital School of Nursing. She received a Bachelor of Science of Nursing (BSN) degree at Westminster College. Later she completed a Master of Nursing Administration (MNA) degree at the University of Phoenix. Currently, Shella is working on a Doctorate of Healthcare Administration. Her clinical experience includes acute medicine, dialysis, and primary care. She left the VA for four years to gain experience and exposure in the business world. However, her passion for nursing and caring for Veterans led her right back to the VA.

Donna Walsh, MSN, RN, NE-BC

Donna came to Utah as an exchange student from New Jersey and completed her Bachelor's Degree in Marketing and Master's Degree in Health Education from the University of Utah. After working in advertising and public relations for several years, she pursued a career in nursing. Donna joined the VA in 1996 as a staff nurse and served as the Nurse Manager of 3-West for seven years before accepting the position of Associate Chief Nurse, Medicine & Surgery. She currently holds certifications as an Adult Nurse Practitioner and Nurse Executive and is a graduate of the Leadership Development Institute.

Eileen Canzonetti, MSN, RN, NE-BC

Competed her nurses training in 1972 at the St. Luke's Hospital School of Nursing , New York, New York. Eileen lived and worked in NY, California and Connecticut before claiming Utah as home. Her nursing background includes many years at the bedside in Medicine, ICU, Oncology, then in Interventional Radiology and Cardiac Cath. In Utah, Eileen completed her BSN at the University of Utah and her MSN at the University of Phoenix. Coming to VASLCHCS in 1995, she managed the Endoscopy Lab for fourteen years. Eileen accepted the position as Associate Chief Nurse for ambulatory Care in 2009.

Rebecca "Reba" Clough, MSN, APRN

Reba graduated with her Bachelor of Science in Nursing from Montana State University in Bozeman. After graduation, she was commissioned as a United States Air Force Nurse Corps officer and served as a flight nurse and mental health nurse during her Air Force nursing career. Reba also holds a Master's of Science in Community Mental Health Nursing from the University of South Alabama and has been licensed and credentialed as an Advanced Practice Psychiatric Nurse since 1997. She has worked in both community mental health and private practice settings in Kansas City as a psychiatric APRN until joining VASLCHCS in 2007 as the Local Recovery Coordinator. Reba accepted the Associate Chief Nurse for Outpatient Mental Health position in February of 2011.

Lois M. Brandriet, PhD, APRN, GCNS-BC

Lois holds Associate (1977, College of St. Mary; Omaha), Bachelors (1985, Westminster College), Masters (1988, Brigham Young University), and Doctoral (1993, University of Utah) Degrees in Nursing, and is certified by the American Nurses Credentialing Center as a Gerontological Clinical Nurse Specialist. Her nursing experience includes: clinical/leadership roles in mental health, med-surg, and gerontology; academic nursing (Assistant Professor, Brigham Young University); and entrepreneurial nursing (care management, guardianships, consultation). Lois began employment at VASLCHCS in July, 2009, as the Nurse Manager of IPU (formerly 3A) and has been the Associate Chief Nurse, Inpatient Mental Health, since January, 2011.

Kelli Guericke, MSN, RN, NE-BC

Kelli graduated with a BSN degree from the University of Utah in 1983 and her MSN from University of Phoenix in 2005. She began her career at Cottonwood Hospital working on the Telemetry unit and Emergency Department. Kelli worked in the ED at the University of Maryland and Kaweah Delta District Hospital in Visalia, California before coming to VASLCHCS in 1994. Kelli is currently the Associate Chief Nurse for Critical Care.

Nicolette Estrada, PhD, MAOM, RN, FNP

Nicolette obtained an AD in Nursing from Dickinson State College, a BSN, MS, and FNP from Arizona State University and a PhD from University of AZ. She also was awarded a Master's of Organizational Management from the University of Phoenix. She has worked in a number of roles as a registered nurse including direct patient care on both medical-surgical and intensive care units, home health nursing, health promotion consultant, clinical nursing instructor, family nurse practitioner, research coordinator, and research administrator. She has served as a VA employee since 1989. Nicolette accepted the position of Associate Chief Nurse for Research at VASLCHCS in 2010 where she relocated from Phoenix, AZ. Her current position includes serving as adjunct faculty at the University of Utah. Nicolette has published in peer reviewed journals and presented both locally and nationally.

Karey A. Johnson, DNP, RN

Karey graduated from the University of Missouri-Columbia with a Bachelor's Degree in Nursing in 2001. She subsequently worked for the Phoenix VA Medical Center as a Staff Nurse in Medical/Oncology and ICU. She transferred to the VA Medical Center in Columbia, Missouri in 2006 where she worked in the ICU and as faculty for VA clinical placements with Columbia College. She completed her Master's Degree in Nursing Education from the University of Central Missouri in 2007. Karey transferred to VASLCHCS in May 2008 as the Associate Chief for Nursing Service-Education. She obtained her Doctor of Nursing Practice in Nursing Administration from The University of Alabama-Tuscaloosa in August 2012.

Lisa Jensen, DNP, APRN

Lisa graduated from South Dakota State University with a baccalaureate in nursing; she earned a master's degree in nursing from Texas Woman's University and a clinical doctorate in nursing from the University of Utah. She began her nursing career at McKennan Hospital in Sioux Falls, South Dakota. She worked at the University of Texas Medical Branch in Galveston, Texas. Lisa has been working at VASLCHCS since 1987. She initially worked in the Emergency Department, as a clinical nurse specialist in the Psychiatric Intake & Referral area of the ED. She worked in the Day Hospital as a clinical specialist prior to assuming the role as the Associate Chief of Nursing Service/Mental Health. Since 2009, Lisa has been the Deputy Nurse Executive.

Affect Patient Care One Patient at a Time

Danny Langston

When I was a teenager, I had an experience with a nephew, who at the age of one, had to have an eye surgery. My brother found a specialist connected with a world-famous medical center who recommended surgery. Tragically, my one year old nephew coded in the OR. The way my family found out that he coded was by hearing an ambulance, and then looking out the waiting room window to see the emergency team performing CPR while taking my nephew away to a children's hospital. No one came out to talk to them—they had to figure this out by themselves.

We as health care providers use our own language. To the lay person, we speak in a foreign dialect and all too often expect others to understand. That experience was very powerful and continues to shape how I interact with patients and families to this day. It helped me realize that there was a vast area for improvement which would make a huge difference in patient care. To always treat patients like family and put ourselves in their shoes and to always strive to make every Veteran encounter a personal and positive VA experience are things we should be striving for. It wasn't necessarily a success story; rather, it was a transformative experience borne from a tragedy.

The year before last, my father, a World War II Navy Veteran, was diagnosed with metastatic lung cancer that spread to his liver and brain. He was treated at his local VA Hospital but did not tolerate chemotherapy and deteriorated very fast. The VA has a unit called Patriots Path, which is their inpatient hospice program and my father spent his last days there. My father was a dashing, independent, robust, active man who loved every moment of living. I was reminded of this when my little sister said to him he would soon be able to be with his parents and brother and sisters who had already passed on. My father patted my sister on the arm and simply said that was good and all, but he liked it here just fine.

There was a nurse on the unit named Tammy that took care of my dad. She made certain my father was comfortable at all times. She worked hard to take excellent care of my father. In doing so, she put forth a great example of the VA and, subsequently, made me think that the VA would be a good place to call home for the rest of my professional career.

Each time I care for a Veteran, my goal is to demonstrate a positive change in practice from the tragic and senseless loss of my nephew, and to honor the life of my father. I try to greet every patient just as I would want my father greeted, "Welcome! My name is Danny. I'm a Nurse Practitioner and we're going to take good care of you today". I base my patient care interactions on what I would want for my loved ones.

We are blessed with a tremendous amount of talent in the VA Health System. Every point of contact is an opportunity for a personal and positive VA experience. I'm really proud to bring that approach to my care for Veterans and their families every day, with every encounter. I want every Veteran that leaves here to say, "The employees here love Veterans and their families". We have time and resources many in the private sector do not have, an enhanced ability to provide excellent care, and the drive to do the noble work that we all do. My goal is to see these ideas become ingrained into our national VA culture; a personal and positive experience with every VA encounter. Our patients and families deserve that. It honors the life of my nephew, honors the life of my father, and it honors the life of every Veteran who has sacrificed so much for us all.

Danny Langston, MSN, ANP-BC, CNS, RCP, CAPA, CPAN

Danny began his career in the 1980s as a critical-care Registered Respiratory Therapist. He completed an accelerated ASN program with Regent's College in the 1990s and his BSN with Excelsior College in 2005. He then completed his three-year Master's Degree program at San Diego State University in 2009 as an Adult Nurse Practitioner and Clinical Nurse Specialist. He has worked at the VASLCHCS since February 2011.

VA Nurses Care

VA Salt Lake City Nurses take pride in their commitment to public service. A great number of our nurses go above and beyond the call of duty in and out of work. Many volunteer their time with local and national non-profit organizations, volunteer in the community, and/or are active members of professional organizations. Thank you to all of the dedicated nurses and nursing staff who devote so much time to our Veterans and the community.

Susan O'Connor-Wright, RN, MS, CIC
Member of Association for Professionals in Infection Control and Epidemiology (APIC). Elected Bylaws chair for Utah Chapter APIC for 2013.

Vickie Brown LPN
Volunteer for Community Animal Welfare Society (CAWS), an animal rescue that fosters cats and dogs until they are adopted. Volunteer for a concert promoter called PFC or People for Christ.

Joanne Tuero BSN, MSN, RN
Volunteer for Whittier Elementary.

Shannon Kartchner, BSN RN
Volunteer for the US Naval Sea Cadet program and US Navy League program (ages 10-18), as the Medical Officer.

Jim Rendo, MSN/MHA, RN
Involved with the National Alliance on Mental illness (NAMI). Participated in the NAMI walk and was an instructor for NAMI Davis County Family to Family Class.

Connie Shipley, RN
Member/ Past President of Local Intermountain Oncology Nursing Society. Member of the National Oncology Nursing Society. Member / and project involvement: Office of Nursing service national FAC Committee.

Nena Saunders, RN, MNI
Involved with the Department of Professional Licensing Diversion Program as a Volunteer for over 10 years. Serves on the Medical Provider Review Committee.

Todd Weber, RN
Volunteer for Boy Scouts of America.

Diana Leaptrot
Volunteer at the Utah Food Bank. Reservist at Hill AFB.

Greg Scholes, RN
Boy Scouts of America, Stonecreek district Outdoor coordinator-Winter camp, & Spring camporee 2008-2013. Platelet Donor x 15 triple donations FY 12, American Red Cross. James E. West fellow, Woodbadge Association Memeber of the American Diabetes Educators Association.

Shavetta Clark
Member of the Delta Sigma Theta Sorority, Inc. which provides mentoring to young girls in the community as well as participates in community service projects. Served as the Scholarship chair for the past two years in which we gave high school students $1,000 towards college expenses. Serves on the Utah Department of Health Advisory Council for Healthcare Disparities.

Sammi Gooch
Board of Directors for the local AORN (Association of Peri-Operative Nurses) Chapter 4501.

Shelly Granger
Blood drive coordinator for the American Red Cross. Volunteered at Hillside Middle School.

Karey Johnson
President of First Friends Federal Child Care Center Board of Directors. Grace Lutheran Church and School Community Garden Committee Member. Member of Nurses Organization of Veterans Affairs. Member of Sigma Theta Tau and Phi Kappa Phi. Member of the American College of Healthcare Executives.

Susan Trevithick
Retained my certification as NE-BC and certified in Compliance as CHC. Involved with the American Heart Association as an Instructor for both the BLS and ACLS programs.

Jana Pace RN, CEN
Member of the Emergency Nurses Association (ENA) and teach first aid and friends and family CPR in Bountiful to community, church and scout groups as part of the Bountiful City emergency preparedness program.

Deborah Valentine BSN, CDE
Member of the ANA and the AADE (American association of Diabetic Educators).

Maria Fruin
Volunteer for the Red Butte Garden and the Sundance Film Festival. Board member for the Bonneville Cycling Club.

Eileen Canzonetti
Board President for the Mountain West Society of Gastroenterology Nurses and Associates 2009-2013.

Margene Luke
Senator Hatch's Senior Conference planning committee member. University of Utah Belle Spafford roundtable member. President of the Utah Coalition for Caregiver Support 2011-2012.

Laura Swain
Volunteer work for the Valor House and the VASLCHCS Women's Clinic.

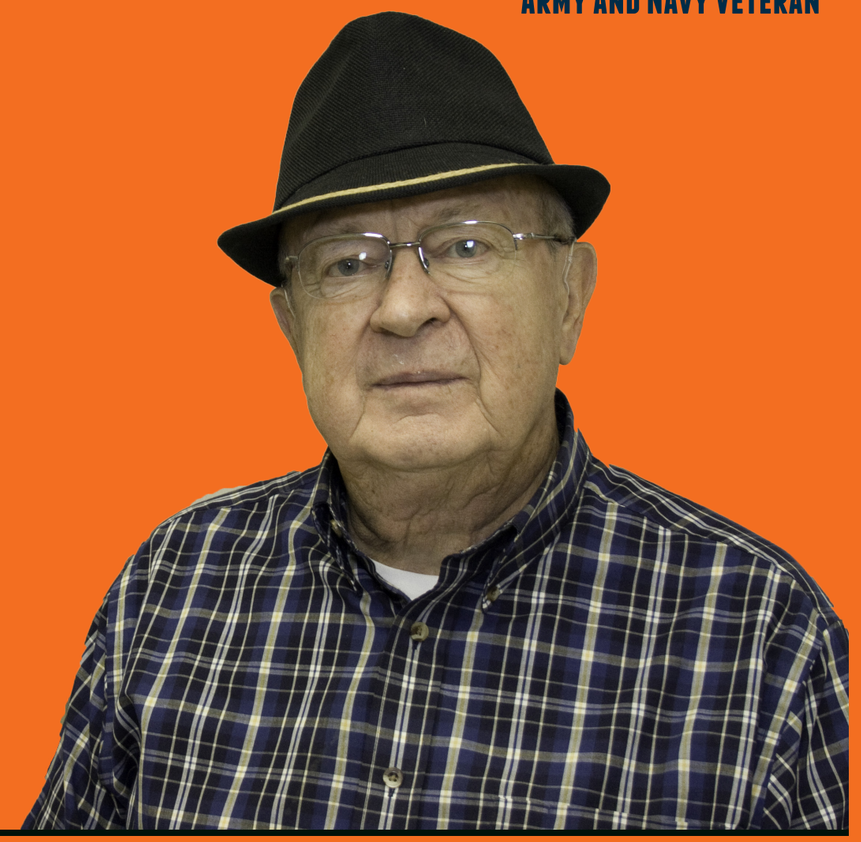
Carolyn Yela
Serves on the United Way Board of Directors for Upper Valley of Southeast Idaho. Member of the Idaho Nurses Association. and the American Nurses Association

Kathy Moore
Member of the American Diabetes Educators Association. Volunteered at the Diabetes Expo.

Why VA?

"If I were to meet a Veteran, I would tell him it would be foolish not to get into the system and go to the Veterans Hospital. I mean that very sincerely based on my own experiences. I honestly can't say enough good things about the VA Hospital and the way I have been treated."

- Karl Lund
Army and Navy Veteran



VA Salt Lake City RN Residency Program

VA Salt Lake City Health Care System is one of five VA Medical Centers approved and funded for a new Residency Program

The Nurse Residency Program is a 12-month program which provides an extended orientation to new nurses. This includes both didactic and clinical components centered on increasing the resident's knowledge of VA and the special needs of our Veteran population. They also participate in an evidence-based practice approach to nursing problems and are required to complete an evidence-based project for graduation. Each resident is assigned a home unit on which they work: one on telemetry, three on acute medicine, and two on acute surgical. Each resident is rotated through areas of the medical center to learn and develop a broader understanding of each unit's procedures and operations.

The Nurse Residency Program is funded through the Veterans Affairs Office of Academic Affiliation. Twelve medical centers submitted proposals, five were selected and each medical center received funding for six residents at $55,000 per year. The RN residency program is funded for three years and will then become the responsibility of the medical center to maintain. With the increasing national push for residency programs both in the VA and private sector, the program will continue to grow.

The goals of the residency program are to:

· Decrease turnover rate among new graduate RN's

· Ensure adequate skill competencies of new graduate RNs

· Develop interdisciplinary communication and collaboration among various clinical professionals providing care to Veterans

· Develop skills of new graduate RNs to implement evidence-based practice philosophy into their practice

The residency curriculum objectives are designed to accomplish the following outcomes:

· Development of effective decision-making skills

· Provision of clinical nursing leadership at the point of care

· Strengthened commitment to nursing as a professional career choice

· Formulation of an Individual Development Plan

Studies have shown new graduate nurses quit their job during their first year of nursing at an alarming rate. First year training can cost anywhere from $67,000 to $80,000. The RN Residency Programs help retain nurses and promote growth in and out of the Veterans Health Administration.

The VASLCHCS post-baccalaureate Nurse Residency Program will prepare recent graduates for successful nursing careers. The program comes in response to the critical need to expand upon the training of graduates and to retain them in active practice. Each resident will benefit from the program in a unique way, but in an overall context, they will receive one year of additional education and clinical experience. At the end of this program each resident may choose to stay or go with no obligation.

Nursing Informatics at VA Salt Lake City Health Care System

Nursing Informatics is an up-and-coming specialty in Nursing. It integrates nursing, computer science, and information technology so that data and information can be managed and communicated to improve the nursing process and patient care. A nurse informaticist is a nurse and supports nursing work processes using technology. Nurse informaticists analyze clinical and financial data to enable cost savings and productivity goals. They work closely with nurse managers and nurses to enhance continuity of care.

The Office of Nursing Services-Informatics (ONSI) is part of the organizational structure of the Department of Veterans Affairs. One of the products of ONSI is the VA Nursing Outcomes Database (VANOD). The goal of VANOD is to "create a national database of clinically relevant, nursing-sensitive quality indicators to identify trends and areas for improvement". The VANOD Coordinator is accountable and responsible for posessing the knowledge and skills to analyze and interpret data from various databases, but primarily utilizes data from the VSSC (VHA Service Support Center). The Coordinator collects and validates data to conduct service performance assessments, generate reports, and make recommendations concerning nursing practice and management.

VA Salt Lake City Health Care System implemented PEV (PAID enhancement for VANOD) in December 2012. This software captures and reports granular data about nurse staffing. This helps with local and national efforts for optimal nurse staffing. The Informatics Nurse is also known as the PEV Coordinator and is responsible for managing the VistA package. This includes: implementation, setup, ongoing updating of package, and evolving POC (Point of Care) personnel. She/he facilitates training and menus for users and validates and extracts data for VANOD. The Coordinator reviews and communicates reports and works closely with staff to manage the nursing files. She works closely with timekeepers and Nurse Managers to manage mismatches in PEV.

The Informatics Nurse is a professional nurse with broad-based clinical knowledge, patient experience, and skills necessary for working with clinical applications related to nursing outcomes. She/he works collaboratively with nursing leadership, nursing staff, and other disciplines within VASLCHCS in an effort to achieve project objectives and improve nursing service and organizational performance.

Kathy Naifeh received her MSN in Nursing Informatics from Vanderbilt University in August 2012. She started working at the Prescott, AZ VA in 2001 and transferred to VASLCHCS in October 2012. Her background in nursing is in Telehealth and Med/Surg. Kathy is a US Army Veteran with the 82nd Airborne Division. She is a member of HIMSS (Healthcare Information and Management Systems Society), ANIA (American Nursing Informatics Association), Sigma Theta Tau International Honor Society of Nursing, and Phi Theta Kappa Community College Honor Society.

We Hear You Loud and Clear

Our annual nurse satisfaction survey allows us to examine the current state of our nursing units and helps us identify areas that may need attention. We pride ourselves in providing exceptional care to Veterans. In order to do so, we must ensure our nurses are also taken care of as well. Here is what you had to say in 2012.

Participation - Overall 2.7
- Career development/clinical ladder opportunity....2.6
- Opportunity for staff nurses to participate in policy decisions....2.6
- A chief nursing officer who is highly visible and accessible to staff....2.6
- A chief nurse officer equal in power and authority to other top-level hospital executives....3.0
- Opportunities for advancement....2.5
- Administration that listens and responds to employee concerns....2.4
- Staff nurses are involved in the internal governance of the hospital (e.g., practice and policy committees.)....2.8
- Staff nurses have the opportunity to serve on hospital and nursing committees....3.1
- Nursing administrators consult with staff on daily problems and procedures....2.5

Quality of Care - Overall 2.9
- Active staff development or continuing education programs for nurses....3.0
- High standards of nursing care are expected by the administration....3.2
- A clear philosophy of nursing that pervades the patient care environment....2.8
- Working with nurses who are clinically competent....3.2
- An active quality assurance program....3.0
- A preceptor program for newly hired RNs....3.1
- Nursing care is based on a nursing, rather than a medical, model....2.8
- Written, up-to-date nursing care plans for all patients....2.6
- Patient care assignments that foster continuity of care, e.g., same RN cares for the patient one day to the next 2.9
- Use of nursing diagnoses....2.5

RN Manager - Overall 2.9
- A supervisory staff that is supportive of the nurses....2.9
- Supervisors use mistakes as learning opportunities, not criticism....2.9
- A nurse manager who is a good manager and leader....3.1
- Praise and recognition for a job well done....2.7
- A nurse manager who backs up the nursing staff in decision making, even if the conflict is with a physician....3.0

Staffing - Overall 2.6
- Adequate support services allow me to spend time with my patients....2.7
- Enough time and opportunity to discuss patient care problems with other nurses....2.8
- Enough registered nurses to provide quality patient care....2.5
- Enough staff to get the work done....2.5

RN/MD Relations - Overall 3.0
- Physicians and nurses have good working relationships....3.1
- A lot of team work between nurses and physicians....3.0
- Collaboration (joint practice) between nurses and physicians....2.9

IT Support - Overall 3.0
- Access to computerized patient care information at the point of care....3.3
- Information technology systems that are up-and-running when I need them....2.8
- A computerized healthcare record system that supports nursing practice....3.1
- Effective training on new technology....2.8
- I am able to provide better care to my patients because of the information systems available to me....3.1

Overall Satisfaction
- Compared to what you think it should be what is your current overall level of satisfaction with your job?....3.8

*RN Satisfaction Survey Scale 0 to 5.0

2012 AT A GLANCE

499
NURSES AND NURSING STAFF

49,973
UNIQUE PATIENTS

29,120
BED DAYS OF CARE

666,874
OUTPATIENT VISITS

10
COMMUNITY OUTPATIENT CLINICS

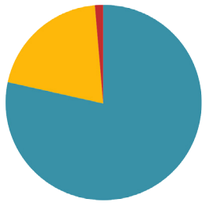
121
TOTAL BEDS

6,106
ADMISSIONS

93
AVERAGE DAILY CENSUS

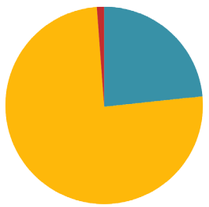
$384,999,882
TOTAL OPERATIONS BUDGET

Demographics



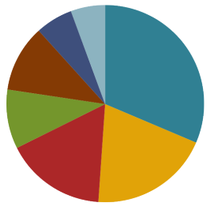
Full-Time Part-Time Breakdown

- Full-Time
- Part-Time
- Intermittent



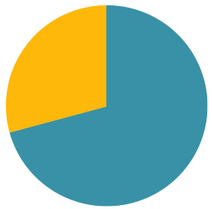
Retirement Eligibility

- Eligible
- Non-Eligible
- Not Assigned



RN Years of Service

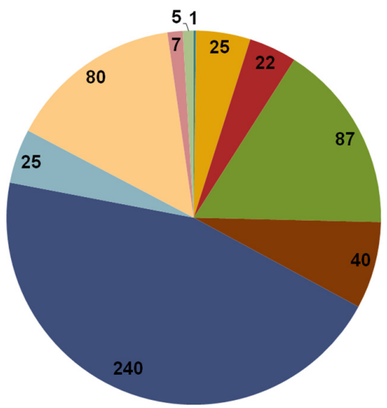
- 1~4
- 5~9
- 10~14
- 15~19
- 20~24
- 25~29
- 30+



Gender

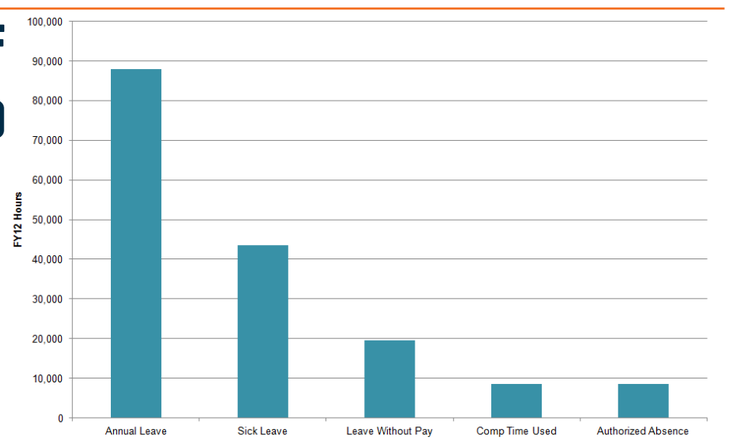
- Female
- Male

RN Education Breakdown FY12



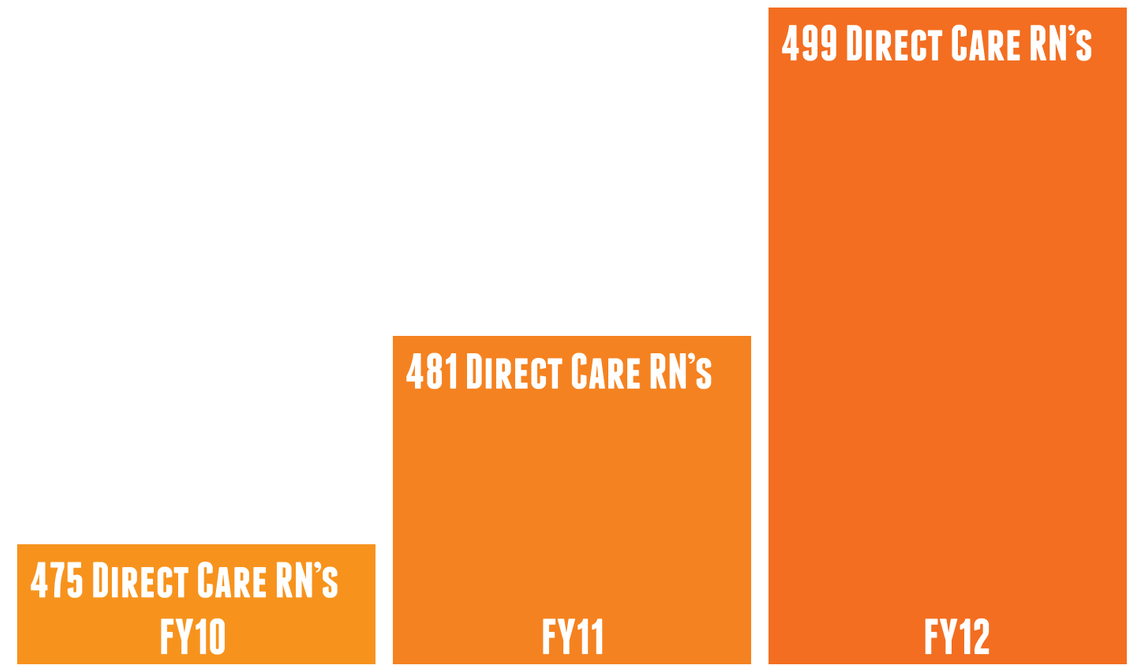
<HS Grad	1
HS Grad/Some College	25
Nursing Diploma	22
Associate Degree	87
Bachelors - Non Nrsg	40
Bachelors - Nursing	240
Masters - Non Nrsg	25
Masters - Nursing	80
Doctorate - Non Nrsg	7
Doctorate - Nursing	5

FY12 Type of Leave Used



Direct Care Nursing Staff Resources

Taking care of Veteans means providing top-notch health care. In order for VA to provide the best care anywhere, ensuring we have adequate resources is crucial. As the number of unique Veteran patients increases, we must increase our staffing resources to meet the growing demand.



Registered Nurse Turnover Rate	8.7%	RN Overtime Reduction	8.6%
Practical Nurse Turnover Rate	9.4%	Direct Care RN FTEE Increase	3.7%
Health Aid and Tech Turnover Rate	21.4%	Unique Patient Increase	4.6%

2012 VASLCHCS ANNUAL REPORT

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