



**Southern California Association of
Pediatric Hematology/Oncology Nurses**

THE KATHY RUCCIONE AWARD FOR EXCELLENCE IN PEDIATRIC HEMATOLOGY /ONCOLOGY NURSING

In 1995, the SCAPON Board of Directors established and presented the Founder's Award for Excellence in Pediatric Oncology Nursing to Kathy Ruccione, the driving force behind the establishment of our local chapter. Each subsequent year, the SCAPON Board presents the Kathy Ruccione Award for Excellence in Pediatric Oncology Nursing to a member of our local chapter who exemplifies excellence in pediatric oncology nursing. This year, with the change from SCAPON to SCAPHON, we are excited to open up the application process to include nurses specializing in Hematology. *We need our members to nominate candidates to be considered for this award.*

AWARD DESCRIPTION

The winner will receive a \$500 honorarium and a personalized certificate. The award will be presented during SCAPHON's annual conference.

AWARD CRITERIA

- ✧ A Registered Nurse with a minimum of two years professional experience in pediatric hematology/oncology nursing
- ✧ A member of the Association of Pediatric Hematology/Oncology Nurses (APHON) and a resident of Southern California
- ✧ A Registered Nurse whose practice is consistent with the concepts found in the APHON Scope of Practice and Outcome Standards for Pediatric Hematology/Oncology Nursing
- ✧ A Registered Nurse who demonstrates excellence in the provision of nursing care to pediatric hematology/oncology patients and their families

TO NOMINATE SOMEONE FOR THIS AWARD, PLEASE COMPLETE THE FOLLOWING:

- Nomination Form
- Letter of recommendation from the nominator
- Letter of recommendation from a colleague

Please include specific examples of patient care situations or other nursing activities that demonstrate the nominee's outstanding nursing practice and/or positive influence on patients, families, staff and/or colleagues.

DEADLINE FOR NOMINATIONS: April 15



Southern California Association of
Pediatric Hematology/Oncology Nurses

**THE KATHY RUCCIONE AWARD
FOR
EXCELLENCE IN PEDIATRIC HEMATOLOGY/ONCOLOGY NURSING**

Nomination Form

Information about the Nominator:

Name/Title: _____

Address: _____

Home Phone Number: _____ Work Phone Number: _____

Email: _____

Information about the Nominee:

Name/Title: _____

Employer: _____

Work Address: _____

Home Phone Number: _____ Work Phone Number: _____

Email: _____

Current Position: _____

Certifications/accreditation, publications/presentations, professional memberships: _____

Return completed nomination form and letters of recommendation to:

**Patricia Lorenz MSN CPON
10970 Ivy Hill Drive Unit 2
San Diego CA 92131**

DEADLINE FOR NOMINATIONS: April 15