

NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

Where NURSING, MINISTRY, and CATHOLIC MISSION MEET



ProLife at All Stages... Catholic Nurses walking with Archbishop Cordileone

BY ELLEN GIANOLI, NACN-USA PRESIDENT

Archbishop Cordileone of the Archdiocese of San Francisco is living up to the amazing name that his parents gave him. I do not doubt that they prayed for God's desire in naming their son. Salvatore translates from Italian to mean "Savior". I wonder how, generations ago, the family got the surname of Cordileone. Undoubtedly there were forerunners of men in his family as brave and true as the Archbishop. Cordileone is translated from Italian as "Heart of the Lion". His Coat of Arms as Bishop has a banner near the bottom that says, "In Verbo Tuo", that is "At Your Word" referencing the Gospel of Luke 5:5 where Jesus tells the Apostles in the boat to cast their nets...again. Peter responded, "Master, we toiled all night and took nothing! But AT YOUR WORD I will let down the nets." (Luke 5:5)

Our brave Archbishop has stepped out into the deep and called out the Speaker of the House of Representative of the United States government. Why is NACN-USA interested in this action?



Because we are Pro-Life.

We know, not just believe, but know, that life begins at conception. Life begins when the woman's egg is fertilized by the male sperm, and from thence, the DNA of a new human being is present. This is proven by science, no debate. By Faith, we believe that God infuses the soul into the new human being, at just that moment also (CCC#366). The soul that God creates "does not perish" ever (CCC#33).

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cont... ProLife at All Stages... Catholic Nurses walking with Archbishop Salvatore Cordileone

BY ELLEN GIANOLI, NACN-USA PRESIDENT

The body will die, but the soul does not. That is why we are Pro-Life from the moment of conception until natural death. We do not help death along, in any way, not for any reason. We do not euthanize people to save their suffering, nor our own. We do all we can, to relieve suffering, to love and support people through their agonies, but it is God who creates and God takes away. Blessed be God forever.

We thank Archbishop Cordileone for standing for life, for fighting the good fight, for standing tall and strong. As the forces of evil try to dismantle America's legal support honoring the value of each human life, the lines must be drawn, the evil rolled back, and God's desires be enshrined in law to protect the defenseless. Let us, nurses, renew our commitment to every detail of the Pro-Life stand in our practices, and in our personal lives. Let us renew, also, our commitment to pray for the renewal of laws defending life. Pray for our legislators to follow God's light. Pray for our clergy to be strong and brave in defense of all humanity. Let each of us be beacons to light the way for those around us.

Thank you, God, for holy Catholic Nurses. Amen.

ELLEN GIANOLI BSN PHN MA RN



Our Lady of Mount Carmel
Mount St. Joseph Carmelite Monastery
San Jose,CA

Dear Catholic Nurses, ...Thoughts from Your President

BY ELLEN GIANOLI, NACN-USA PRESIDENT

The past two years have been very intense for all of us. It is promising that Easter has come, Pentecost will be here soon, spring has brought new life to the earth.

Of the four Objectives listed in the ByLaws of NACN-USA, Ethics is at the top of the list. In line with this objective, during the past two years, we established a Task Force of volunteer members to help sort out the numerous voices and issues related to the COVID-19 virus situation. We have an outstanding Ethics and Spirituality Committee already in place, which was already busy with issues, helping us to be involved in the signing of Amicus Briefs in cases going before the courts, and other high level functions. To keep the Committee free to continue with what they were attending to, by having a Task Force to tend to the new situation, it kept the Ethics Team free to continue their endeavors, essential as they are.

Together with the Task Force members, the Board established a focus on Freedom of Conscience as foundational to our response to the “vaccine” mandates. I put “vaccine” into quotes because these injections technically, historically, are not vaccines. Typically, when given a vaccination, one does not expect persons to then, get the disease. The Centers for Disease Control and Prevention has modified the definition of “vaccine” in response to the current situation. The current available injectables for Covid are not as effective as true vaccines should be.

Along with a right to Freedom of Conscience in the taking of the COVID-19 injections, the Board of NACN-USA is opposed to government mandates top-down regarding these still experimental injectables. To explain further, it is very Catholic to promote the Principle of Subsidiarity. Decisions should be made at the lowest possible level. For example, within a family, the parents make the decisions regarding their own family and children. They should only need to go out for help if needed, like to the doctor for assistance. Governmental decisions, also, should be made at the lowest possible level. The county health officer should make decisions about his area of responsibility. Aligned with subsidiarity in our government is States Rights. The Federal Government has its responsibilities like protecting the borders, but it should not interfere with the rights of the States to regulate their own citizens. Therefore, Federal mandates for shutdowns of businesses, injection requirements, mask wearing, are not effective nor appropriate. Each State, or better yet, each County should make decisions according to its local situation.



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And each individual, regarding Covid injections, should be free to choose to take them or not. There should be no vaccination verification of Covid-19 injection for travel or any other activity.

It is important to keep the situation clear. We are speaking of an illness that has a lower mortality rate than that of the seasonal flu in 2018, probably less than 1.0%, surely under 2 %, if the truth be known. There has been much lying and exaggerating of the numbers. Eboli is 50 to 80%, Polio was 30% mortality in adults, Smallpox was 30% mortality rate.

Another aspect of the evaluation for Catholics has been statements by Pope Francis. Although he has expressed his opinions on the Covid-19 injections, these are his opinions, not statements of terms that are binding on believers. Pope Francis has made no Ex Cathedra pronouncements on any topics. Also, if he did, they would relate to Faith and Morals.

Since more and more injectables to prevent diseases are coming forth, I project that the temporary Task Force will continue in some form. Because vaccines can be manufactured, does not mean that everyone should be forced to get them. An example of one that is a problem currently is Gardasil. Gardasil has had so many serious consequences that the local health officer stopped its use our county. If children and young adults are taught abstinence until marriage, Gardasil is unnecessary. By living Christian lives, we do not have to put our children at risk of bad outcomes from unnecessary vaccination attempts.

At the NACN-USA website, there is a fantastic collection of information put together by your Task Force on Freedom of Conscience and Mandates.

Yours Truly,
ELLEN GIANOLI, BSN PHN MA RN
NACN-USA PRESIDENT
2020-2022



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NACN-USA TEAM AT THE UNITED NATIONS

BY ELLEN GIANOLI, BSN PHN MA RN

The National Association of Catholic Nurses, U.S.A., is a member association of CICIAMS, The International Catholic Committee of Nurses and Medico-Social Assistants - Comité International Catholique des Infirmières et Assistantes Médico-Sociales, is the term used for denoting Nurse Practitioners and Mid-Wives. CICIAMS was begun in France, thus the French name. NACN-USA is hosting CICIAMS 21st World Congress in Doylestown, Pennsylvania August 2, 3, and 4, 2022. The CICIAMS first World Congress was at Lourdes, France, in 1933, and included nurse associations from ten countries.

The Board of Directors of CICIAMS was very active and alert. When the United Nations was Chartered in 1945, CICIAMS obtained a position as an NGO, a non-governmental organization, with a seat at the table of the United Nations (UN). Because of being such an NGO, CICIAMS has the ability and responsibility of speaking at the Human Dignity message regularly at the United Nations in New York City.

Since NACN-USA is geographically present in the vicinity of the United Nations building, currently, it is a team of NACN-USA members who travel in to do presentations, classes, or give statements on various topics. Before the virus shut down in the last year, our NACN team was representing nurses at the UN, at least once per month. They carefully watch their emails, receive the next topics, have a very brief number of days to prepare, then drive into New York City, and give voice to NACN-USA as Catholic nurses, on the world stage.

I have been asked why we give credence to the United Nations by having members go there. I said that Mother Teresa spoke to the general assembly. She was not saying all that the United Nations (UN) does, is good. She spoke pro-life and human dignity. That is exactly what our team does.

Because of the diligence and efforts through all the years since 1945, even to this very month, this voice for Life and Dignity has held its own at the United Nations.



**Our Lady of Lujan
Patroness of Argentina**

As the years pass, it seems that the pressures to disrespect, and even to destroy life, by the promotion of abortion, population reduction, and numerous other threats to diminish humanity are rising more and more. But your voice is heard on this world stage because Catholic Nurses are laying down their lives to be your voice for Truth and Good.

We thank Those who have and are now doing this needed service to defend humanity. Come to the CICIAMS World Congress and meet our team members, as well as the President, Officers, and Board Members of CICIAMS, the international Catholic nurses.

NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

CICIAMS & NACN at UNITED NATIONS



Statement by:
International Catholic Committee of Nurses and Medico-Social Assistants
Comite International Catholique des Infermieres et Assistantes Medico-Sociales (CICIAMS)
Oral Presentation – 3 Minute Limit
48th Session of the Commission on Population and Development
New York, New York April 13-17, 2015

Secretariat of the Commission, distinguished panel members and guests:

Health is foundational to all human endeavors. Nurses provide 90% of healthcare world-wide and in many disparate and remote areas, nurses are frequently the sole healthcare provider. Global nursing will greatly influence 2015 SDG achievements. Our international organization offers the following statements regarding fertility health, child spacing, individual/family health, cultural competency, subsidiarity, human rights, and sustained development.

Cultural Competency

Health and healing involve the whole person: body, mind, and spirit. Persons regardless of age, sex, disability, race, ethnicity, origin, religion, and economic status benefit from culturally sensitive care and related accommodations.

Subsidiarity

Involvement of individuals, families, and communities in their own health fosters responsibility and relieves the global community of burden. The family has the greatest motivation to reduce mortality and disease among members due to proximity and relationship among loved ones.

Human Rights

"... all patients have a fundamental right...to consent to or to refuse treatment, and to be informed about relevant risk ..." (WHO n.d.). Especially on the above issues of contraception and abortion. The three elements of informed consent include: patient competency and decision making ability; risk and benefit disclosure; and identification of alternatives. Coercion of young girls, young boys, woman, and men must be forbidden.

Sustained Development

Organizations need to work together to build and to maintain schools of nursing near locations underserved and/or identified as disaster prone to improve and sustain regional resources.

Fertility Health, Child Spacing, and Individual/Family Health

Fertility is an integral part of total self. Understanding the body, fertility and life cycle development from human conception to human adulthood is paramount. It is of concern, that the primary method of fertility suppression is hormonal manipulation via estrogen, which is a Class I carcinogenic, and via progesterone, which are linked to blood clotting that causes stroke and



Our Lady of Guadalupe
Diocese of San Jose

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48th Session of the Commission on Population and Development
New York, New York April 13-17, 2015

Secretariat of the Commission, distinguished panel members and distinguished guest:

Thank you for the opportunity to present an oral statement addressing Population and Development within the context of the 2015 Sustainable Developmental Goals (SDG). Health is foundational to achieving and sustaining all human endeavors. The World Health Organization (WHO, 2012) recognizes that nurses provide 90% of healthcare services world-wide. The WHO affirms that in many disparate and remote areas, nurses are frequently the sole healthcare provider. Thus, the delivery of global nursing will greatly influence the 2015 SDG achievements. Of importance is the need to integrate evidenced based best practices which align with valued population and developmental goals. Having demonstrated a long history of serving humanity in all states of health and suffering the International Catholic Committee of Nurses and Medico-Social Assistants offer the following statements regarding fertility health, child spacing, individual/family health, cultural sensitivity, subsidiarity, human rights, and sustained development.

Fertility Health, Child Spacing, and Individual/Family Health

A woman's fertility is an integral part of her total self. Each woman should understand the basic functions of her body, including her fertility, so she can care and prepare for her health as well as any and all children she may conceive. A man's fertility is equally valued. Each man should understand his body, including his fertility so he may also care for his health and prepare for any and all children he may father from their conception to adulthood. Tragically, over 30 million of those conceived worldwide are aborted each year. Women who turn to abortion risk their future fertility through uterine tissue damage, have an increased risk for breast cancer, and bear increased suffering due to post-traumatic stress in the form of Post-abortion Syndrome among other serious health risks. Presently, the primary method of fertility suppression is hormonal manipulation of the woman's menstrual cycle via estrogen and progesterone therapies. It is now well documented that by introducing either or both of these natural steroids into healthy women increases their risk of blood clotting up to 8 times depending on the mode of delivery. In 2012, WHO acknowledged estrogen as a Class I carcinogenic. The widely distributed contraception Depo Provera in a 2012 study funded by the National Cancer Institute and the US Department of Defense Breast Cancer Research Program found a 3.3 fold increased risk of poor prognosis triple-negative breast cancer associated with DMPA. The stark reality is that in an attempt to suppress the occurrence of pregnancy, agents used are causing serious illness and at times death to mothers. There are several modern and highly effective methods of fertility care recognized by the WHO as 95% effective, such as the Creighton Model that are absent of illness risk and easily taught from mother to daughter and virtually free. Women and men deserve the knowledge of true fertility care and its benefits to child spacing and to individual and family health.

Cultural Competency and Subsidiarity

Nursing emphasizes health and healing of the whole person: body, mind, and spirit. Nurses play a key role in promoting healthier lifestyles and life-long learning to all persons and populations regardless of age, sex, disability, race, ethnicity, origin, religion, and economic status. More culturally sensitive tools and accommodations for language, literacy level, religious beliefs, and cultural values are needed to support positive healthcare outcomes.

Furthermore, vital to the success of improved life, health, and education is the imperative of subsidiarity. Involvement of individuals, families, and communities in their own health solutions fosters responsibility and relieves the global community of burden. Secondly, respect and support of the family is a natural and efficient approach to achieve reduced mortality, reduced disease transmission, and better family health. The family has the greatest motivation for success in all these areas because of their proximity and relationship among loved ones. It is only through respect for all life, the family, the community, and subsidiarity that the 2015 SDG will ultimately serve the true needs of all people in our global society.

Human Rights

The World Health Organization (WHO) acknowledges "... that all patients have a fundamental right...to consent to or to refuse treatment, and to be informed about relevant risk to them of medical procedures" (WHO n.d.). CICIAMS members urge that all patients, including those in countries who have poor access to education and resources, be awarded the right to informed consent. In all cases, the three elements of informed consent (patient competency and decision making ability, risk and benefit disclosure, and identification of alternatives) need to be assured and accommodated. In addition, coercion that may affect choices being made by young girls and woman who feel vulnerable and powerless due to the lack of education and resources offered to them regarding fertility, fertility health, and the well-being of the family be forbidden.

Sustained Development

Encouraging and incentivizing women and men to become registered nurses, and current registered nurses to become advanced nurse practitioners is a practical solution. We urge organizations to work together to build and to maintain schools of nursing near locations where nurses and nurse practitioners are understaffed, poorly deployed, and/or are identified as disaster prone areas. Establishing nursing educational programs near areas of need can improve and sustain regional resources.

Please keep our statements regarding fertility health, child spacing, individual and family health, cultural competency, subsidiarity, human rights, and sustainable development focal to the Commission on Population and Development's contributions to the 2015 SDGs.

I would like to end with a beautiful quote from Blessed Mother Theresa who addressed the United Nations on October 26, 1985. Mother Theresa stated, "I have picked up from the streets hungry people, and by giving them to eat, by giving them a bed to sleep, I have removed the suffering, but for the lonely, the shut-ins, the unwanted, its not so easy. And so you and I must come forward, and share the joy of loving, but we cannot give what we don't have. That's why we need to pray. And prayer will give us a clean heart and will allow us to see God in each other. And as we see God in each other, we will be able to live in peace, and if we live in peace, we will be able to share joy of loving with each other and God will be with us' God Bless you, Mother Theresa

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CICIAMS & NACN at UNITED NATIONS

heart attack in women of childbearing years and cancer. The widely distributed Depo Provera is found to have a 3.3 fold risk of poor prognosis, triple negative breast cancer. However, overlooked are the modern methods of fertility care such as the Creighton Model, that are ninety-five percent effective, natural, easily taught from mother to daughter, and free. Compounding the burden women bear in fertility is that tragically over 43 million pre-born children are aborted yearly. Abortion risks future fertility, breast cancer, and Post-abortion Syndrome.

A closing quote: Mother Theresa, United Nations, October 26, 1985

"...let us make a strong resolution that in our countries,...in our cities, we will not allow a single child to feel unwanted, to feel unloved,...And let us help each other to strengthen, ...that in our countries that terrible law of killing innocents, of destroying life, destroying the presence of God, be removed from our country,...from our people, from our families...as we see God in each other, we will be able to live in peace, and if we live in peace, we will be able to share the joy of loving each other and God will be with us.

We Thank You.

CICIAMS MEMBERS FROM AFRICA, ASIA, CENTRAL AMERICA, EUROPE, NORTH AMERICA, OCEANIA, and SOUTH AMERICA

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MANDATORIES & RIGHT OF CONSCIENCE

Do you know the truth?

**BY MARIA ARVONIO, MA, HCE, RN
NACN-USA ETHICS TASK FORCE LEAD
UNITED NATIONS DELEGATE**

The Covid-19 pandemic caused many nurses to be forced to choose between job security and their beliefs. Some nurses believed they had no choice but to agree to the mandates regardless of their own held religious beliefs because “it was the law.” Others refused the mandates based on their “right of conscience” and were directed to complete a ‘religious exemption’ form for “considered” continual employment. Not all exemptions were granted. Despite the number of people contacting COVID -19 and requiring hospitalization has decreased dramatically, confusion and misinformation continues to flood the media as well as faith communities. How can nurses navigate through all the confusion? Where can Catholic Nurses find the truth/ the best source on “moral and faith”?

NACN-USA members identified concerns of receiving conflicting data from their employers as well as their faith communities. For example, the media reported that Catholics were obligated to accept the mandated vaccine against their individual beliefs because it was for the common good, but their “opinion” was not validated by the Magisterium teaching of the Catholic Church (a confirming source of Catholic faith teachings on moral and faith). According to the Congregation for the Doctrine of Faith (2020), Catholics are not obligated to accept the mandate because, “...vaccination is not, as a rule, a moral obligation and ...therefore, it must be voluntary”.

Hectic schedules, family obligations and limited free time, and conflicting data/media reports, cause more stress and fears regarding locating valid sources to complete mandated exemption forms for continued employment while protecting sincere held religious beliefs. As a result, a core group of NACN-USA nurse members were appointed by Ellen Gianoli, NACN-USA President, to work together as a temporary taskforce focusing on mandates and right of conscience <https://nacn-usa.org/covid-vaccine-taskforce/>.



Our Lady of Fatima

The core group members represent various regions of the United States and have vast nursing experiences including healthcare ethics and theology. Together they developed a document “Conscience and Religious Exemption” <https://nacn-usa.org/wp-content/uploads/NACN-USA-Taskforce-Recommendations-re-Mandates-against-Right-of-Conscience.pdf> compiled of specific Magisterium teachings from the Catholic Church regarding protecting human life from conception to natural death, right of conscience, and informed consent free from coercion. Information was gathered from Vatican documents, the Catechism of the Catholic Church, and the Ethical and Religious Directives (ERD’s) of Catholic Healthcare. This document can be downloaded for free from NACN website and is available for all nurses regardless of membership. The goal of this document is to aid Catholic nurses to locate information regarding magisterium teachings on faith and morals compiled in one location identified in outline format.

MANDATORIES & RIGHT OF CONSCIENCE

Do you know the truth?

**BY MARIA ARVONIO, MA, HCE, RN
NACN-USA ETHICS TASK FORCE LEAD
UNITED NATIONS DELEGATE**

The “Conscience and Religious Exemption” document also serves to help nurses locate valid government sites which identified their rights regarding religious held beliefs and maintaining employment. For example, did you know that the United States Department of Health and Human Services (HHS.gov) on Conscience and Religious Freedom, is supposed to protect all healthcare workers from being mandated to accept and/or offer a therapy which conflicts with their beliefs? Did you also know that the United States Equal Employment Opportunity Commission (EEOC) document Section 12, Title VII “Religious Discrimination”, prohibits employers from discriminating against an employees’ held beliefs? This information is essential knowledge when navigating through confusion of employers “religious exemption” forms and mandates.

In addition to compiling information from valid resources regarding faith and morals on the issue of mandates and Right of Conscience, the NACN-USA Taskforce have monthly free zoom meetings (to resume after the upcoming World Congress in August 2022). The zoom meetings offer platforms for all nurses to connect with other nurses throughout the USA, sharing their experiences, knowledge, prayers and encouragement to stand together united by faith. Special guests are often invited to speak on relevant topics i.e. : an Infection Prevention Nurse and a medical researcher, Pamela Acker, author of “Vaccination: A Catholic Perspective,” a devout Catholic with a master’s degree in Biology with experience research on vaccines discussed concerns regarding various vaccines and how they are produced.



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Nurses are urged to visit the link below for updates on future educational programs and resources. All are thankful for the continual support from Mrs. Ellen Gianoli, President of NACN-USA as well the research.

<https://nacn-usa.org/category/resources/educational-programs/>

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Proof of the Resurrection of Jesus Christ Meets U.S Court Rules of Evidence: Simon Greenleaf, A Founder of Harvard University School of Law

BY PATRICIA SAYERS DNP RN
NACN-USA PRESIDENT ELECT

"A person who rejects Christ may choose to say that I do not accept it, he may not choose to say there is not enough evidence." — Simon Greenleaf

Scholarly works of Simon Greenleaf (1842-1853) have been recognized as authoritative within the U.S. Law of Evidence. Greenleaf, a founder and faculty of the Harvard University School of Law, set out to investigate the Resurrection of Jesus Christ (Greenleaf, 1847). Using U.S. legal criteria for court evidence permissibility and with a willingness to follow facts, Greenleaf began his query. An extensive examination of historic documents and testimonial evidence pertaining to the life, death, and resurrection of Jesus Christ was assembled and legally scrutinized.

Greenleaf's analysis of evidence was published in the text entitled *Testimony of the Evangelists Examined by the Rules of Evidence Administered in Courts of Justice* (Greenleaf, S., 1847). An outline of three of Greenleaf's findings are featured in this brief essay: document authenticity; document reliability; as well as, the character of witnesses. Post investigation, Greenleaf (1847) proclaimed "either the men of Galilee were men of superlative wisdom, and extensive knowledge and experience, and of deeper skill in the arts of deception than any and all others, before them or after them, or they have truly stated astonishing things which they saw and heard." (pp. 46 & 53).

Outline: Three U.S. Federal Rules of Evidence Applied to the Four Gospels, Non-Christian Historian Writings, & Governmental Records

I. Document Authenticity: Proper Repository with No Evidence of Forgery

A. Federal Rule of Evidence (FRE, 901) stipulates the legal criteria for an ancient document to be considered authentic and permissible in a U.S. Court including:

1. Over 30 years of age.

Criteria met

2. Obtained from a proper repository or custodian.

Greenleaf (1847) validated that Christian writings studied were from Christian Churches.



Rorate Easter Vigil Mass

3. There is to be no evidence of forgery (FRE 901).
 - Multiple documents demonstrated only slight content variations.
 - Legally, an opponent of document authenticity has the burden of proving document falsity
 - Opposition to the authenticity of documents studied was lacking.
- B. Existence of documents reviewed were considered a public fact.
 1. Non-Christian historic writings originated near the time and location of the recorded events.
 2. Non-Christian regional historic writings described societal events consistent with the Christian writings in question.
 - 3.. Government records near the time and regions in question existed and described regional events consistently with the Christian writings in question (Greenleaf, 1847).

cont... Proof of the Resurrection of Jesus Christ Meets U.S Court Rules of Evidence: Simon Greenleaf, A Founder of Harvard University School of Law

BY PATRICIA SAYERS DNP RN

Therefore, the documents reviewed by Greenleaf were considered authentic per the U.S. Law of Evidence (Greenleaf, 1847).

II. Document. Reliability: Time Between Event & Documentation of Event & Number of

Document Copies

A. The proximity between the date of an event and date of historical records documenting the event are legally significant. From the legal perspective, the shorter the time between the event and the date of the historic document(s), the higher the reliability of the documented event (Bruce., 1943).

B. The larger the number of copies of historic documents with manuscript consistency, the greater the document reliability (Edwards, R.R., n.d.).

The time proximity between authentic documents describing the Resurrection of Jesus Christ and dated documents describing the Resurrection of Jesus Christ is much closer than many well accepted historic events. In addition, the number of timely ancient documents describing the Resurrection of Jesus Christ far exceed the number of ancient documents supporting other accepted historic events. From the legal perspective, due to documents time proximity and number of relevant ancient documents, the documented evidence of Resurrection of Jesus Christ was considered reliable.

III. Event Witnesses: Character, Conformity of Testimonies, & Collateral Circumstances

A. After reading the Gospels, the authors of the New Testament were perceived by Greenleaf as “eminently holy and of tender consciences” (Greenleaf, 1874, p.30).

B. Witness testimony conformity and collateral circumstance congruency was evaluated by Greenleaf as “high” (Greenleaf, 1874).

C. It is unlikely that “ bad men should invent falsehoods to promote the religion of the God of truth” Greenleaf, 1874, p.31).

After completing his rigorous historical research. Greenleaf (18740 espoused that the legal evidence of the Resurrection of Jesus Christ was “the best supported event in all of history.”



Rorate Easter Vigil Mass

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White Mass for Nurses 2020 & 2022

BY MAVIC MAGNO, RN BSN, MBA

Through the kindness of our Most Reverend, Bishop Oscar Cantu of the Diocese of San Jose, a private White Mass for Nurses has been offered for 2 years in Santa Clara, California. He offered the first White Mass for Nurses in December 6, 2020, hosted by Fr. Brian Dinkel, IVE at Our Lady of Peace Church & Shrine. In the midst of restrictions, a solemn Holy Mass was held in the outdoor courtyard gardens. It meant a lot to nurses and their families to be able to come to a Mass by His Grace, Bishop Cantu, who gave us hope through his homily, prayers and Bishop's blessing.

Ellen Gianoli, our NACN-USA President provided words of encouragement and inspiration for hundreds of Catholic nurses and their families.



ELLEN GIANOLI, NACN-USA



BISHOP OSCAR CANTU, DIOCESE OF SAN JOSE

NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

White Mass for Nurses 2020

BY MAVIC MAGNO, RN BSN, MBA

After His Grace, Bishop Oscar Cantù's blessing for the nurses, we picked our blessed roses and took them to Our Lady of Peace Shrine and placed it at her feet with our prayers.



Ellen Gianoli meets Archbishop Salvatore Cordileone

BY MAVIC MAGNO, RN BSN, MBA

Our active President, Ellen Gianoli had the honor of meeting His Excellency, Archbishop Cordileone at St. Patrick's Seminary in Menlo Park. His Grace has been supportive of nurses. We attended a solemn Holy Mass he offered within the vintage chapel of St. Patrick's, which has been around for more than 100 years.

Below are some pictures:



NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

YOU ARE A NURSE

BY EILEEN D'ALMARIO

YOU ARE A NURSE
MAYBE YOU PLANNED THIS AS A CHILD
MAYBE YOU ADMIRING A RELATIVE
LATER INSPIRATION AND EDUCATION LED YOU
AND NOW AND ALWAYS YOU ARE A NURSE

TO YOUR PATIENTS YOU SPEAK AS A LOVING AND REASSURING PARENT
YOU HOLD THE CUP FOR SWALLOWING MEDS THAT SUSTAIN THEM
YOU APPLY A CUFF TO AN ARM THAT ALERTS YOU TO DANGER
YOU REPOSITION THEM FOR BED COMFORT WITH THE SAME
ROUTINE TREATMENT SOMETIMES FOR WEEKS, AND NOTHING CHANGES

YOU ARE TRAINED TO ALWAYS SHARE YOUR COMPASSIONATE HEART
EVEN WHEN YOUR FACE RESTRAINS FEAR, DREAD, AND DISBELIEF
YOU CAN'T SHARE YOUR OBSERVATIONS WITH THESE NEW STRANGERS
WHO ARE
NOT RELATIVES OR OLD FRIENDS, BUT NAMES PRINTED ON A PLASTIC
BRACELET

SOMETIMES YOU STRUGGLE TO CONTINUE KEEPING COMPOSURE, AND AT
TIMES
YOU WONDER HOW YOU GOT HERE IN A WAR WHERE YOU WERE NOT
DRAFTED
AND YOU DID NOT ENLIST, YET AS A WARRIOR YOU KNOW YOU MUST
DEFEAT THE ENEMY, A MICROSCOPIC VILLAIN, POWERFUL OVER SO MANY
NOT ONLY OVER THE SICK, BUT ALSO OVER THOSE IN SCRUBS AND GOGGLES

YOU KEEP FIGHTING AND ASK YOUR PATIENTS TO DO THE SAME WHILE
MONITORING ALL THE BLINKING LIGHTS, MECHANICAL SOUNDS, AND
CODE
SIRENS THAT INDICATE CRITICAL NUMBERS ARE CHANGING, AND THEN
YOU BEGIN TALKING TO JESUS FOR HELP, AND UNDER YOUR WATERPROOF
MASK WHICH BECOMES A SHIELD FOR HOLDING BACK YOUR TEARS, YOU
CRY

THESE VICTIM TEARS MIMIC THE QUIET SLOW DRIP OF INTRAVENOUS, AND
THE PATIENT'S PULSE IS YOUR OWN RAPID HEARTBEAT OF ANXIETY AND
FRUSTRATION
SOMETIMES EVEN ANGER AND DISAPPOINTMENT, BUT THE GEAR YOU WEAR
AS FRONT LINE TROOPS TO KEEP YOU SAFE FROM INJURY CANNOT PROTECT
OR SPARE YOU FROM THE PAIN IN YOUR HEAD
BECAUSE THIS APPARATUS WILL NOT GUARD YOU FROM THE SIGHTS AND
SOUNDS YOU COMPETE WITH HOUR BY HOUR

FINALLY YOUR SHIFT IS ENDING, AND YOU LEAVE THE BATTLEGROUND
EXHAUSTED
YOU WALK THE CORRIDOR TO THE ELEVATOR AND STAIRS WITH EMOTIONS
OF
BOTH FAILURE AND SUCCESS, AND THEN YOU DRIVE HOME, AND THERE
YOU STRIP OFF THE FATIGUE UNIFORM, AND YOUR LOVED ONES TRY TO
CONSOLE AND ENCOURAGE YOU WITH THE SAME LOVE YOU DELIVERED AT
WORK TODAY

THERE IS NO REFUGE EVEN AFTER LEAVING THE PANDEMIC WAR BUILDING
BECAUSE
THE WAR REFUSES TO LEAVE YOU, AND AS YOU DOZE OFF AND TRY TO SLEEP
THOSE TORMENTING AND HAUNTING MOVIE IMAGES KEEP STREAMING
WEEKS AGO THESE STRANGERS WHO NEEDED YOUR SKILLS AND
NURTURING WERE NEW TO YOU, BUT YOU HAVE BECOME THEIR
REPLACEMENT IMMEDIATE FAMILY



YOU WITNESSED LIFE, LOVE, DEATH, AND SHARED IN VICTORY
OVER VIRUS WITH
CHEERING CELEBRATIONS IN THE HALLS AND STREETS WHEN
THERE WAS A MIRACLE
BUT SADLY YOU ARE ALSO THE HANDHOLDING NURSE, THE
LAST ONE
TO BE WITH THEM AS YOU LOVINGLY ESCORT THEM TO MEET
THEIR MAKER

WHAT PERSEVERANCE, WHAT GRACE, WHAT GLORY TO DO THIS
WORK
YOU HAVE BEEN EMPLOYED BY GOD AND HIS HOLY MOTHER,
AND THE GRATITUDE
AND LOVE YOU DESERVE ARE NOT MEASURED BY SCIENCE OR
MEDICAL INSTRUMENTS
BUT REMAIN IN THE HEARTS OF ALL WHO HAVE WITNESSED
YOUR HEART AND SOUL

GIVING YOUR BEST ON A BATTLEFIELD WITH A RELENTLESS
DEMON THAT YOU
CHALLENGED SO BEAUTIFULLY, AND YOU WILL BE FOREVER
REMEMBERED AND ENROLLED
CLOSE TO THE LORD IN HEAVEN'S HALL OF FAME AS HOSPITAL
ANGELS

GOD BLESS YOU! YOU ARE A NURSE! YOU ARE A NURSE! YOU ARE
A NURSE!

Nurses with Global Impact

BY ELLEN GIANOLI

Our own NACN-USA member, Lisa Fuchs of Alabama, has been honored with a Nurses with Global Impact Award at the Seventh Annual Awards Luncheon May 13, 2022.

Lisa is a very active member of NACN-USA. Although a Rural Nurse, she enters the global arena when the need arises by connecting those in need with resources to fill the need. She has done this on numerous occasions such as Haiti after the earthquake. She works in Women's Health. Her family teaches farming and life skills to Cenacolo Residents, a Catholic drug and alcohol rehabilitation program.

We congratulate Lisa Fuchs on receiving this well deserved award!



Our Lady of Fatima



NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

White Mass for Nurses 2022

BY MAVIC MAGNO, RN BSN, MBA

Our Most Reverend, Bishop Cantu of the Diocese of San Jose just offered the White Mass of the year just this February 11, 2022, hosted by Fr. Jeff Fernandez, Pastor at [Queen of the Apostles Church and Parish](#).

Bishop Cantu blessed the roses and gave them to each nurse. Ellen Gianoli, NACN President also came to provide words of support and encouragement.



NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

NACN, Bay Area Movie Night for Nurses Month 2021

BY MAVIC MAGNO, RN BSN, MBA

Our humble nurse members in the Bay Area, Northern California hosted a movie night in collaboration with a Catholic movie producer, Sam Sorich who produced 8 Beats, an Anthology series comprising of 8 short films inspired by the Beatitudes. Our NACN members even handmade gift bags to give away for the guests! Here are the NACN members who assisted in this project: Kim Verzosa, Gwen Nguyen, Marouh Barol and myself.



NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA
IN CALIFORNIA CELEBRATES NURSES!
HAPPY NURSES MONTH 2021 !

**You're invited to
a Private Film Screening
8Beats Anthology**

Welcome Remarks by our Sponsor
ira-a.org

May 11 & 12, 2021 • 8:15 pm

CINEMARK SANTANA ROW
RSVP Code Required : text 408-466-8614

NATIONAL ASSOCIATION OF CATHOLIC NURSES-USA

NACN nurses mans the First Aid Station at Bishop Oscar Cantu's Soccer Games!

BY MAVIC MAGNO, RN BSN, MBA

Our benevolent supporter, Most Reverend Bishop Oscar Cantu invited our nurses to man the first aid station for his Soccer Match: Diocese of San Jose (DSJ) against their Seminarians! Guess who won?! Verna Senido, NACN member and her brother, a paramedic from Brunei helped us out. We also enlisted the assistance of Royal Ambulance EMTs on standby with us. Special thanks to Steve Grau, Royal Ambulance CEO for the support!



NACN-USA MISSION



The National Association of Catholic Nurses, U.S.A gives nurses of different backgrounds, but with the same Roman Catholic values, the opportunity to promote moral principles within the Catholic context in nursing and stimulate desire for professional development. This approach to Roman Catholic doctrine focuses on educational programs, spiritual nourishment, patient advocacy, and integration of faith and health. As we continue to share our faith and values with each other, and with other healthcare providers, we simultaneously reach outward to the larger Church and also our communities, as we offer support to those in need.

Objectives

- To promote education in Catholic nursing ethics
- To nurture spiritual growth
- To provide guidance, support and networking for Catholic nurses and nursing students, as well as other healthcare professionals and non-healthcare professionals who support the mission and objectives of the NACN-USA
- To advocate for those in need through efforts which integrate faith and health

NACN-USA.ORG



@CatholicNurses



NEWSLETTER

Send your articles to
mblurose@icloud.com

SPRING BEFORE FEB 15
SUMMER BEFORE MAY 15
FALL BEFORE AUG 15
WINTER BEFORE NOV 15

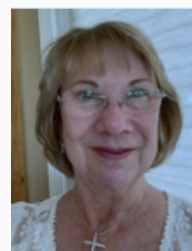
MAVIC MAGNO, RN BSN MBA

NEWSLETTER EDITOR

MEMBERSHIP

Membership dues
\$50/yr paid on NACN-
USA website

INVITE A FRIEND TO JOIN!



SUZANNE GULLOTA, RN MHS, FNP-BC

MEMBERSHIP CHAIR