

News of The Academy of Neonatal Nursing

—
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Editor

National Nurses Week

Since 1974, nurses around the nation have celebrated National Nurses Week from May 6–12 in honor of England's Florence Nightingale, who was born on May 12, 1820, in Florence, Italy. This year, the American Nurses Association's (ANA) theme for Nurses Week is "Nurses: Trusted to Care." The ANA has some cool nursing themed gear and gifts on their web site. Check it out at <https://www.jimcolemantd.com/ana/>.

As we have done for the past two years, ANN is participating with ANA and specialty nursing organizations around the United States to publish a themed editorial. The topic for this year's editorial is the Future of Nursing. Check out our contribution at the front of the journal.

For more information: The Future of Nursing Initiative has a dedicated website. Background and updates on the initiative are available at <http://thefutureofnursing.org/>.

Edge Runners: An Example of Nursing Innovation

Sponsored by the American Academy of Nursing, the Edge Runners program highlights nursing projects that have brought new thinking and new methods to a wide range of health care challenges. "Edge Runners have developed care models and interventions that demonstrate significant clinical and financial outcomes. Many of the stories underscore the courage and fighting spirit of nurse leaders who have persevered despite institutional inertia or resistance." See Raise the Voice at <http://www.aannet.org/custom/edgeRunner/index.cfm?viewAll=1>.

What's Ahead for the Future of Nursing Report?

Led by the ANA, a campaign for action to implement the Future of Nursing report is underway. Five states (California, New Jersey, New York, Michigan, and Mississippi) have been selected for pilot programs, and regional action coalitions have been set up to move the recommendations forward. Your state nurses association and specialty organization have a vital role in the implementation of the Future of Nursing recommendations in your state and localities. To view the full report of the Institute of Medicine visit <http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>.

Liquid Gold: Human Breast Milk

The preferred food for all babies is their mother's own breast milk, which is rich in protective antibiotics, enzymes, and growth factors critical to health and development. Because some mothers are not able to provide their own breast milk, nonprofit breast milk "banks" are selling this liquid gold for a cost of about \$100 a day for a full-term infant. This market has emerged on the Internet where breast milk is traded on such sites as Facebook (Facebook's Group: Human Breast Milk Donation and Breast Feeding).

Donors are typically women who have more milk than they need, have had babies who died, or are surrogate mothers. The FDA does not regulate donor breast milk, however, the agency recently held its first meeting to explore overseeing the sale of breast milk. For example, Prolacta sells products made from donated breast milk to NICUs. According to research by



Brenda Goodman of the Boston Globe, ProLacta's pasteurized breast milk, such as Premielact and Neo20, costs between \$26 and \$29 an ounce, about six to ten times what nonprofit milk banks charge for a similar amount (bkdgoodman@gmail.com).

The Human Milk Banking Association of North America (HMBANA) sets standards for nonprofit milk banks in North America. Currently, there are 10 HMBANA milk banks in the U.S. and Canada. In 2009, HMBANA reported to the FDA that they processed more than 1.5 million ounces of milk. For more information, see <http://www.fda.gov/downloads/AdvisoryCommittees/CommitteesMeetingMaterials/PediatricAdvisoryCommittee/UCM235619.pdf>.

U.S. Breastfeeding Committee: Give Nursing Mothers a Break!

"The United States Breastfeeding Committee is an independent, nonprofit coalition of more than 40 nationally influential professional, educational, and governmental organizations, that share a common mission to improve the Nation's health by working collaboratively to protect, promote, and support breastfeeding." Last year, the "Reasonable Break Time for Nursing Mothers" provision became law. This law provides women who are breastfeeding the right to unpaid time and a place to pump breast milk at work. Recently, the U.S. Department of Labor solicited public comments on issues pertaining to the amount of time needed for the break and space requirements for privacy. Meanwhile, the U.S. Breastfeeding Committee (USBC) is asking the public to sign their petition, "Support Breastfeeding: A Vision for the Future." Take a moment to read USBC's Nine Point Vision for breastfeeding and consider signing the petition. As of this publication, there were 4,488 signatures, one-third of their goal of 15,000. More information can be found at www.usbreastfeeding.org/ and click on "Action" to view the petition.

The 11th National Neonatal Nurses Conference A Monumental Meeting in Washington, DC! September 7–10, 2011 Celebrating and Advancing Neonatal Nursing Practice

Specialists from some of the best research hospitals in the country including Children's National Medical Center of Washington, DC; the Children's Hospital of Dartmouth; University of Maryland Medical Center; Columbia University of New York; Children's Hospital and Research Center of Oakland, California; and University of Virginia School of Medicine will be presenting clinically current information on the technical, medical, and nursing aspects of neonatal care as well as the legal and ethical implications related to that care.

Look for "Group Discounts" in the conference brochure. This is sure to be a monumental experience, so organize three of your colleagues and register together. Register four and only pay for three!

Meet the Speakers

Kristine A. Karlsen, PhD, NNP-BC, S.T.A.B.L.E. Program author and founder, and recipient of the 2010 National Association of Neonatal Nurse Practitioners NNP Excellence Award, has been involved in neonatal care in a variety of settings including transport, education, and patient care for 30 years. Dr. Karlsen serves as the National Program Director for S.T.A.B.L.E. and continues her clinical work in the Intermountain Healthcare System in Utah. Her dissertation research, in completion of a PhD in Nursing at the University of Utah, was entitled, "A National Survey to Describe the Workforce of Neonatal Transport in the U.S." This dissertation won the American Academy of Pediatrics Section on Transport Medicine "Best-Training-Paper" Award. Her research interests include methods to improve neonatal outcomes and the educational process. She serves on the Utah Perinatal Mortality Committee and is the recipient of the AWHONN/Johnson & Johnson 2003 Childbirth Nursing Award, the March of Dimes 2004 Leadership in Healthcare Nurse Award, and the University of Utah College of Nursing 2005 Outstanding Doctoral Student Award. Dr. Karlsen lectures frequently at conferences both nationally and internationally and will be presenting three sessions: "Introduction to Simulation Methodology, Part I and II" on Thursday, September 8, and "What's New in S.T.A.B.L.E.?" on Friday, September 9, where Dr. Karlsen will discuss how to incorporate simulation into the S.T.A.B.L.E. program.

In addition to our professional speaker line-up, special guest speaker, NICU parent, Master Sergeant Kevin Buckles, USMC, will present an informative and interesting perspective of his family's experience with separation surgery for his daughters who were conjoined twins. This is sure to be a popular workshop on Friday, September 9. See the complete brochure in this issue.

Call for Poster and Podium Abstracts

Share your research, programs, and innovative ideas at the 11th National Neonatal Nurses Conference! ANN is seeking podium presentation speakers to complement the conference program. Presentations are divided into three categories: Innovative Programs, Research, and Case Studies and are limited to 20 minutes. If selected, you will be assigned to speak either Thursday, September 8, between 1:30 and 2:30 PM or 3:15 and 4:15 PM. All podium presenters will receive a 50 percent discount on full conference tuition.

In the event your presentation is not chosen for a podium presentation, please indicate when submitting your abstract if you would like to present your paper as a poster. Poster abstracts should be no longer than 200 words, with all coauthors and credentials included on a separate page. If the abstract is accepted, poster presenters will be eligible for \$75 off the full conference tuition. The submission form and guidelines for Poster and Podium presentations is available at academyonline.org and the closing date for submissions is July 1, 2011.

Hurry! ANN Scholarship Applications Due in June

ANN members who are pursuing academic advancement may qualify for the **Academy Conference Scholarship or ANN Academic Scholarship Award**. The award application is available on our website, academyonline.org. The closing date is June 1, 2011.

Each year, ANN recognizes the accomplishments of a neonatal nurse who has demonstrated a strong commitment to his or her patients, shows creativity, intelligence, perseverance, and an unbending will to be the best. Does this describe a colleague or yourself? Check out the details for the **Excellence in Neonatal Nursing Practice Award** on our web site. The closing date for nominations is July 1, 2011.

Check Out the New ANN Logo Merchandise

Shirts, mugs, baby bibs, and iPod covers are just a few of the cool ANN logo items now available through Café Press. Check it out at <http://cafepress.com/academyonline>.

Virtual Hospital

Imagine a simulated hospital complete with a 14-bed ICU, 18-bed medical/surgical floor, 8-bed neonatal/pediatric ICU, 20-bed ER, and 2 operating suites all equipped in a 55,000-square foot "virtual" setting. Banner Health in Mesa, Arizona, has such a facility where every newly hired nurse is required to complete simulation orientation, regardless of his or her experience level. Each unit is complete with a full complement of simulated medical gases, computer charting stations, and 71 patient simulators. After each nurse completes the skills assessments, simulation scenarios are introduced to assess accuracy and foster improvement. The center "mimics the real environment in complexity and leads to richer learning. Its ultimate goal is to produce more confident and competent health care providers and thereby reduce medical errors, improve patient safety care, and enhance the entire patient experience." For more information, please go to www.bannerhealth.com/Innovations/Simulation+Education/_Simulation+Education.htm.

Comparing Hospitals:

Leapfrog, Hospital Compare, and HealthGrades

The Leapfrog Hospital Survey compares the performance of approximately 1,300 hospitals performance on national standards of safety, quality, and efficiency and publishes the results on their web site (leapfroggroup.org). Hospitals become "members" of Leapfrog and best performing hospitals are given incentives and rewards.

The U.S. Department of Health and Human Services offers Hospital Compare, a tool that compares the quality of care from all U.S. hospitals through 44 quality-of-care measures. Hospital Compare also uses the Hospital Consumer Assessment of Healthcare Providers and Systems survey, which asks patients about their experiences during a recent hospital stay. For more information go to <http://www.healthcare.gov/compare/index.html>.

HealthGrades (healthgrades.com) rates 5,000 hospitals by compiling outcomes data from independent public and private sources and uses statistical techniques to process a large volume of patient data. Hospital ratings use data from current three-year data sets from the Center for Medicare and Medicaid Services and individual states.

ANN Executive Committee Member Update

Joan Smith, APN, RN, NNP-BC, of St. Louis Children's Hospital Newborn Intensive Services was a featured speaker this March at the 2011 Women's & Infants Conference, "Cutting-Edge Care for Women & Infants" at the Barnes-Jewish Hospital in St. Louis, where she discussed NICU Family-Centered Care.

Dr. Jobeth Pilcher published "Creative Learning Ideas from Around the U.S." in the January/February 2011 issue of *Neonatal Network: The Journal of Neonatal Nursing*, Vol. 30, No. 1, pages 66-70. The article emphasized "engaging learners, and taking steps to make learning fun."

Dr. Patricia J. Johnson also contributed to the January/February 2011 issue of *Neonatal Network*. "Neonatal Pharmacology—Pharmacokinetics," was the title of the Pointers in Practical Pharmacology column, which discussed the interactions between drugs and the human body.

Dr. Patricia J. Johnson and ANN member Dr. Ellen Tappero recently published "Laboratory Evaluation of Neonatal Sepsis," in *Newborn and Infant Nursing Reviews*, Vol. 10, No. 4, Pages 209-217. The article "examines the tests in current use and some of the more recent diagnostic markers used alone or in combination to improve sensitivity and specificity for early detection of sepsis."

Annette Carley, MS, RN, NNP-BC, PNP-BC, has a featured editorial in *Advance for Nurses*, "Beyond the NICU—Can At-Risk Infant Patients be Better Served?" In the column, Annette states, "An infant's well-being is interdependent on their family; therefore, it is essential to identify strengths and risks in the family system that may impact the infant once discharged. The successful discharge plan must consider family values and acknowledge characteristics such as cultural and ethnic heritage, language, safety, and competence" (<http://nursing.advanceweb.com/article/beyond-the-nicu-2.aspx?CP=2>).

Online Journal Access Update

You can now access *Neonatal Network: The Journal of Neonatal Nursing* directly from your ANN member profile! Just follow the instructions below to access the online edition.

- Go to www.academyonline.org
- Click the member log-in button at the top of the page
- Log-in OR create a user account
- Click Member Tools
- Click the link to the journal

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Academy News Briefs

- Even if fetal pulmonary maturity can be documented as recommended, elective delivery before 39 weeks places infants at a significantly elevated risk of morbidity, a 12-year retrospective cohort study found. (Fang, et al., "Elective delivery with known fetal lung maturity prior to 39 weeks is still associated with increased neonatal morbidity" *American Journal of Obstetrics and Gynecology* 2011; Abstract 58.) This study was presented at the 31st Annual Society for Maternal-Fetal Medicine in February, 2011 in San Francisco. Morbidities found in study infants included respiratory distress, transient tachypnea, need for mechanical ventilation, and hypoglycemia.
- This February, the FDA approved Makena (hydroxyprogesterone caproate) to reduce the risk of preterm delivery before 37 weeks for pregnant women with a history of at least one spontaneous preterm birth. The drug is not approved for use in women with a multiple pregnancy and treatment should begin at 16 weeks and no later than 21 weeks of pregnancy.
- A study from the *British Medical Journal* found a blood test combined with second-generation genetic analysis can potentially rule out Down syndrome in women with high-risk pregnancies. "Massively parallel sequencing DNA from the mother's blood could markedly reduce the need for invasive testing with amniocentesis or chorionic villi sampling" (<http://www.bmj.com/content/342/bmj.c7401.full>).

CALL FOR EDITORIAL CONSULTANTS

Neonatal Network is seeking nurses at all levels of expertise and experience to review articles for publication. This is a volunteer position. Editorial consultants are asked to peer review approximately two to four articles per year.

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