

ACNM 60th Annual Meeting & Exhibition – Tuesday, June 30th – Education Sessions

ES300 Challenges and Controversies in Management of Second Stage Labor: Pelvic Floor Changes, recovery and risk of injury?

Tue, June 30

10:00am-11:00am

CEUs: 0.1

Track: Clinical

Presented by: Lisa Kane Low, PhD CNM FACNM

Summary: The use of epidural anesthesia has risen to rates of almost 80% in some settings for women giving birth in the United States. Physiological management of second stage labor is guided by maternal responses to bodily sensations and cues indicating the urge to push, however in the presence of an epidural, the normal physiological cues are absent. As a result, approaches to supporting a woman during second stage labor, particularly in the presence of an epidural, are complicated and the evidence base supporting best practice approaches has recently become more conflicted resulting in changing recommendations for the best approach to care to promote optimal outcomes and to reduce the risk of negative pelvic floor changes as a result of second stage management. The purpose of this session will be to explore the evidence base regarding second stage labor management and will highlight recent findings related to the use of specific strategies such as laboring down, changing time limitations and the use of supportive communication to promote optimal second stage labor outcomes for mothers and babies. Discussion of the issue of risks of pelvic floor muscle changes and potential for injury contrasted with evidence of pelvic floor muscle resilience following vaginal birth under different labor management conditions will be presented to further extend the participants knowledge base about how to address second stage labor management options and choices to promote best outcomes for women.

ES301 Preparing for Your Visit to Capitol Hill

Tue, June 30

6:00am-7:00am

CEUs: 0.1

Track: Midwifery Matters – Public Perception

Presented by: Jesse Bushman, MA, MALA

Summary: During this session we will review issues on which ACNM members will lobby and go over effective techniques for discussing our concerns with members of Congress and their staff.

ES302 Diversity in Family Structure - Midwifery Managed Care and Legal Implications for Women seeking Assistive Reproduction

Tue, June 30

10:00am-11:00am

CEUs: 0.1

Track: Education

Presented by: Lonnie Morris, CNM, ND, FACNM; Joseph W. Booth, J.D., M.Div., FAAML, FIAML

Summary: With an ever increasing number of families experiencing infertility and the number of options available to treat these situations expanding, midwives must go beyond core competencies and broaden their scope of practice to meet the demands of a changing population. Infertility, single parent families, and same sex couples have increased the demand for In Vitro fertilization. Traditional surrogacy, surrogacy with gestational carriers, and adoption have also increased. These changes present a need for increased skill sets and the understanding of the laws pertaining to these situations. This workshop will review the midwife's role in assessment and management options in the care of clients seeking assistance with fertility. This includes: fertility assessment, treatment, referral to an infertility specialist as

necessary; pharmacologic regimens; and preparation for, demonstration of, and post insemination management of midwife performance of artificial insemination, sperm washing and other procedures currently used to increase fertility. Additionally, understanding of the legal implications of infertility procedures, laws governing the creation of alternative families, and the skills to help support these types of families will be included. Midwives engaged in assisting fertility and alternative families must be adept at providing unique skills to support and protect these alternative families. This workshop, presented by a seasoned midwife currently providing these services and an attorney specializing in family law and assisted reproductive technology, will provide a comprehensive overview of emerging clinical methods available, changing laws governing these situations, midwifery skills necessary to serve these clients, and implications to practice this procedure beyond basic midwifery core competency education.

ES303 Ethical Dilemmas in Midwifery: The Hobby Lobby Decision and Ethical Decision-Making between Divergent Views

Tue, June 30

10:00am-11:00am

CEUs: 0.1

Track: Leadership

Presented by: Mary Collins, CNM, JD, LLM, FACNM; Nancy Jo Reedy, RN, CNM, MPH, FACNM; Joyce B Thompson DrPH, RN, CNM, FAAN, FACNM; Kathleen Powderly, CNM, PhD

Summary: The Supreme Court decision in the Hobby lobby case ignited a storm of controversy, raising issues of religious, reproductive and women's rights. The workshop offers an opportunity to understand the legal and ethical issues underpinning the decision and possible implications for midwifery. An interactive session will allow participants to work with ethical models and explore ways to understand and work within divergent view on these subjects.

ES304 Scholar's Colloquium: Biobehavioral, Animal Models, and Translational Approaches to Preterm Birth Research

Tue, June 30

10:00am-11:00am

CEUs: 0.1

Track: Miscellaneous

Presented by: Gwen Latendresse, CNM, PHD, FACNM; Barbara McFarlin CNM PhD FACNM

Summary: This scholar's colloquium provides a view of current approaches to researching preterm birth, including studies that use biobehavioral perspectives, animal models, and translational application. The presenters use examples from their own investigations and research careers as midwives.

ES305 Recognizing the Signs of Domestic Minor Sex Trafficking in your Clinical Practice

Tue, June 30

1:00pm-2:00pm

CEUs: 0.1

Track: Clinical

Presented by: Susan Willson, RN, BS, MSN, CNM

Summary: It is currently estimated that over 300,000 American children are being used or sold as commodities in the commercial sex trade. The average age at which they are first exploited through prostitution is 13 years old. As nurse midwives working for Planned Parenthood, with clinical populations, or even in upscale private practices, we often see these girls for care, yet do not recognize what we are seeing and miss opportunities to help. This presentation will define the scope of the commercial sex industry, show how recruitment is carried out and help the care provider discern girls who might be at risk or currently trafficked, so that we can provide them with appropriate help or counseling. Resources will be identified and assessment tools provided to assist the CNM to recognize signs of trafficking, report

appropriately and/or connect clients with restoration resources. A brief overview of recent legislative action will also be provided as well as resources for further education and advocacy.

ES306 You are What your [Grand]Mother Ate

Tue, June 30

1:00pm-2:00pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Mary Barger, CNM, PhD, MPH, FACNM; Terry Jo Bichell, CNM, MPH, PhD(c)

Summary: It is now clearer than ever that what women eat in pregnancy can alter gene expression in the baby through epigenetics. Epigenetic changes from the mother's and even grandmother's lifestyles and paternal lifestyles can affect the baby's body and brain from infancy through old age. This workshop will review the powerful effect of insulin on hormone production, how the maternal intrauterine environment affects gene expression including the role of paternal diet and exposures, discuss the latest evidence related to nutrition and perinatal outcomes and provide practical strategies for the busy midwife to incorporate nutrition advice into their practice.

ES307 Polycystic Ovary Syndrome Simplified

Tue, June 30

1:00pm-2:00pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Jan Shepherd, MD, FACOG

Summary: Polycystic Ovary Syndrome, a complex endocrinopathy, is increasingly common in our society. This session will begin with an examination of current theories on the pathophysiology of the condition, a basic understanding of which can simplify both diagnosis and management. Multiple treatment options for the gynecologic consequences - irregular menses, hirsutism and infertility - will then be explored. The importance of evaluation for metabolic effects of the syndrome will also be discussed, along with alternatives for management of this aspect of the condition.

ES308 Managing Inflammatory Bowel Disease in Pregnancy and Lactation

Tue, June 30

1:00pm-2:00pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Barbara Camune, CNM, WHNP-BC, DrPH, FACNM

Summary: This session will present the latest information on the care of pregnant and lactating women with inflammatory bowel disease. Causal connections with genetics, viruses and the environment will be discussed. The pathophysiology of both ulcerative colitis and crohn's disease will be compared. Symptom management, pregnancy surveillance, nutrition and drug safety will be presented for both ulcerative colitis and crohn's disease. The role of the midwife in providing prenatal, perinatal and postpartum care and support will be highlighted.

ES309 Improving Maternal-Newborn Outcomes among Women with Increased Psychosocial Risk

Tue, June 30

1:00pm-2:00pm

CEUs: 0.1

Track: Clinical

Presented by: Gwen Latendresse, CNM, PhD, FACNM; Jane Dyer, CNM, FNP, MBA, PhD, FACNM; Barbara Wilson, PhD, RNC-OB

Summary: In this presentation we discuss the psychosocial contributors to adverse maternal and newborn outcomes, including results from our own research. We also present current evidence on promising approaches to reducing the

negative impact of maternal stress, depression and abuse, and how midwives and women's healthcare providers can be a valuable resource to at-risk women.

ES310 - ICM Format (*This new format clusters similar presentations together within the usual 60 minute time frame. The time will be divided between 2-3 presentations with a 10 minute Q&A period at the end. A moderator will be assigned to each cluster to help ensure that each presentation is afforded the appropriate time.*)

Tue, June 30

2:15pm-3:15pm

CEUs: 0.1

Track: Global Midwifery

Building and Supporting our Midwifery Workforce: A Global Update

Presented by: Peter Johnson, CNM, PhD; Catherine Carr, CNM, DrPH; Joyce Thompson, CNM, DrPH; Judith Fullerton, CNM, PhD; Maureen Kelley, CNM, PhD; Suzanne Stalls, MS, CNM

Summary: This presentation builds upon and provides an essential update to panel presentations from the same group of global health experts in previous years. The Panel of experts will provide perspectives from ACNM, Jhpiego, CDC and independent global consultations to ICM, WHO and UN agencies. Together, they will analyze the major issues affecting our ability to educate, deploy and retain a midwifery workforce that gains and maintains the essential competences and leadership skills needed to promote maternal health and reduce maternal mortality. Discussion will be framed around The State of the World's Midwifery Report released in 2014, the Lancet series on midwifery, global standards and competencies and other relevant supporting evidence. The session will use a previously successful "game show" format that promotes active participant interaction with the panel.

Task Shifting Midwifery Skills: An effective use of resources to decrease maternal and infant mortality

Presented by: Nadene Brunk, CNM, MSN; Angela Wilson-Liverman, MSN, CNM, FACNM; Leilani Mason, MSN, CNM

Summary: Task shifting is one method of addressing the shortage of obstetricians and university-trained midwives in developing countries. It involves short-term training in specific skills most needed to reduce maternal mortality. The cadres of workers that have been trained in EmOC (Emergency Obstetric Care) skills and the settings task shifting has been tried will be reviewed. The programs that have experienced the most long-term success have several factors in common that will be described. The implications for the midwifery profession should be positive if trainees are extending the reach of a limited workforce with EmOC skills. Should limited resources for training obstetric personnel be used in this way?

ES311 Hemorrhagic Disease of the Newborn: A Case Study in Effective Inter-disciplinary Response to the Resurgence of a Preventable Disease

Tue, June 30

2:15pm-3:15pm

CEUs: 0.1

Track: Clinical

Presented by: Sharon Holley, DNP, CNM; Julia Phillippi, PhD, CNM; Anna Morad, MD, FAAP

Summary: A cluster of 7 cases of hemorrhagic disease of the newborn over a period of 8 months in middle Tennessee in 2013 attracted national attention. Four of the 7 infants had intracranial bleeding and neurological damage. Central to the problem were parents declining Vitamin K at birth, a recommended and routine medication. Parents of the affected newborns cited inadequate education and information about the risks and benefits of Vitamin K injections. An interdisciplinary response involving midwives and pediatricians to reach out to patients, doulas and childbirth educators resulted in improved patient and community education, a marked decrease in Vit K declinations, and no new cases of hemorrhagic disease of the newborn to date.

ES312 The Impact of The Lancet Series on Midwifery Practice, Policy, & Research

Tue, June 30

2:15pm-3:15pm

CEUs: 0.1

Track: Global Midwifery

Presented by: Holly Kennedy, PhD, CNM

Summary: In June 2014 The Lancet published a remarkable series devoted to midwifery. If the evidence presented in the series were applied globally, 80% of maternal and newborn deaths could be averted. The evidence on midwifery evaluated was based on a set of values and philosophy that includes respect, communication, community knowledge and understanding, care tailored to a woman's circumstances and needs, and promotion of normal physiologic processes. The findings in the series support a "system-level shift from maternal and newborn care focused on identification and treatment of pathology for the minority to skilled care for all." This presentation, by a series author, will describe the subsequent global and United States impact of the series and implications for midwifery practice, policy, and future research. The communication strategies developed by the series authors for disseminating the robust evidence supporting improved outcomes when midwifery is systematically applied and scaled up globally, will be presented. Finally, two additional papers of the series will also be discussed, including the impact of respect and abuse in midwifery, and identification of the top 10 priorities for future research in collaboration with the World Health Organization.

ES313 Sleeping for Two: Sleep Disturbance and Disorders in Pregnancy

Tue, June 30

2:15pm-3:15pm

CEUs: 0.1

Track: Clinical

Presented by: Janet Beardsley, MSN, CNM, ANP-C

Summary: "I am snoring and I started sleeping in the recliner." Could this be a precursor of preeclampsia or gestational diabetes? Yes, it could be! Sleep disturbances are a common complaint in pregnancy and can have a number of causes. When pregnancy occurs, the risk of developing sleep disordered breathing increases, with potentially serious consequences for both mother and fetus. Unfortunately, screening for sleep disorders and sleep disordered breathing is not on the radar for most prenatal care providers and pregnancy is not on the radar for most sleep specialists. Sleep disorders like untreated obstructive sleep apnea and sleep deprivation are associated with significant perinatal morbidity and even mortality, including preeclampsia and gestational diabetes. Most midwives and obstetrical providers are not taught to assess and screen for sleep disorders in their daily practice and sleep providers are frequently untrained on the special needs of the pregnant patient. This session will review the recent literature on sleep disorders and sleep apnea in pregnancy. Appropriate screening methods for prenatal evaluation will be discussed. We will look at treatment options and the challenges of facilitating screening and treatment during the brief, yet important, window of the second and third trimesters. We will also discuss how to reach out to your colleagues in the Sleep Medicine Department and provide effective collaborative care during this important time.

ES315 Estrogen and the Brain

Tue, June 30

3:30pm-4:30pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Jan Shepherd, MD, FACOG

Summary: The female brain is profoundly influenced by the hormone estrogen. Major hormonal shifts, particularly those that occur postpartum and in the perimenopause, can affect both mood and cognition. This session will explore

these effects and the evidence for and against hormone therapy as a means to treat depression, maintain mental acuity, and perhaps reduce the long-term risk of dementia.

ES316 Call When Your Contractions are 5 Minutes Apart'- Clinical Strategies to Facilitate Physiologic Birth with Active Labor Admission

Tue, June 30

3:30pm-4:30pm

CEUs: 0.1

Track: Clinical

Presented by: Ellen Tilden, RN MS CNM

Summary: Thirty years of research demonstrates that medically low-risk women admitted to the hospital during latent labor (vs. active labor) are at higher risk of numerous medical interventions, including primary cesarean section. In this session, we will summarize the evidence regarding latent labor admission outcomes and explore clinically pragmatic antepartum and intrapartum strategies to maximize active labor hospital admission for our healthy patients.

Implications regarding timing hospital admission to support physiologic birth will be highlighted.

ES317 Gestational Weight Gain in Obese Women Stratified by Class of Obesity and Outcomes of Pregnancy: A systematic review

Tue, June 30

3:30pm-4:30pm

CEUs: 0.1

Track: Clinical

Presented by: Mary Ann Faucher, CNM, MPH, PhD, FACNM; ; Mary Barger, PhD, MPH, CNM, FACNM

Summary: This presentation will describe findings from a systematic review of the literature through April 2014. The purpose of the review was to identify and analyze previous research that gave sufficient information to be compared to the current 2009 IOM recommendations for obese women stratified by class of obesity by varying amounts of gestational weight gain or gestational weight loss. The outcomes described are large for gestational age (LGA), small for gestational age (SGA) and cesarean birth. Findings suggest that the current IOM recommendations for gestational weight gain in pregnancy do not optimize outcomes for all obese women.

ES318 2nd Annual March of Dimes Symposium: Journey to Baby Friendly Designation: Arizona's first hospital

Tue, June 30

3:30pm-4:30pm

CEUs: 0.1

Track: Leadership

Presented by: CAPT Kimberly A. Couch, DNP, CNM, FNP-BC

Summary: Phoenix Indian Medical Center's journey to Baby Friendly designation. How an organization, leadership, and staff overcame resistance and changed the hospital culture to improve breast feeding rates for Native American and Alaska Native babies in Arizona.

ES319 Preventive primary care for women over 50: creating a "midwifery home"

Tue, June 30

3:30pm-4:30pm

CEUs: 0.1

Track: Clinical

Presented by: Carol Hayes, CNM, MN, MPH

Summary: This presentation will address evidenced based preventive services for women over 50 years of age. Data will be discussed on the recommendations for screening for colorectal cancer, breast cancer, ovarian cancer, and osteoporosis. Vaccines recommended for adult women will be discussed.

ES320-ICM Format (*This new format clusters similar presentations together within the usual 60 minute time frame. The time will be divided between 2-3 presentations with a 10 minute Q&A period at the end. A moderator will be assigned to each cluster to help ensure that each presentation is afforded the appropriate time.*)

Tue, June 30

4:45pm-5:45pm

CEUs: 0.1

Track: Clinical

The Sacred Hour and Beyond: The Midwife's Role in Helping the First Moments of Life to Create Patterns for a Lifetime

Presented by: Mairi Rothman, CNM, MSN; Erin E. Fulham, CNM

Summary: The baby goes from the gloved hands of the birth attendant, to the mother's chest, separated from her by a cotton receiving blanket, and resting under the warm blanket, eyes closed, adjusting to this new environment. After a few moments, the baby hears the father's voice saying, "Mom! I'm a dad!" and the baby's eyes open to finally fix on the face that goes with that familiar voice, but the new dad is on the phone, and misses that magic moment. From there begins a flurry of moments--drying, cord clamping, vital signs, bracelets, eye ointment, vitamin K, weighing and measuring... and finally, after all these bizarre rituals are completed, the baby is reunited with its mother, to try to breastfeed while wrapped like a burrito with hands restrained. When the baby fails to latch on in the first few minutes, the mother is told, "he's probably just sleepy--let's let him rest and we can try again in a little while." How do we rewind, start over, and try a different way, where we skip the social media, the rough drying, the cord clamping, and all the other routine newborn procedures which, in fact, can wait, and we watch the miracle of that first sacred hour unfold without interference. What connections would be made automatically, what complications could we avoid, and what magic would we witness? Strategies for bringing the sacred hour into every setting will be discussed, and evidence presented that midwives can take to their institutions to transform the beginning of life from medical to magical while lowering risks for newborn complications. Presented by two midwives who have practiced in every setting and know how to bring the sacred hour "home" wherever babies are born.

Bringing the Mountain to Muhammad: Bedside Resuscitation with an Intact Cord - An Idea Whose Time Has Come

Presented by: Mayri Leslie, CNM, MSN, EdD; Whitney Ann Pinger, CNM, MSN, FACNM

Summary: The evidence base in support of delayed cord clamping (DCC) for both preterm and term infants continues to grow. Currently, the primary contraindication to DCC is the need to remove the infant from the mother for evaluation or resuscitation. Unfortunately this occurs in those infants who are most likely benefit from the hemodynamic stabilization and hematological benefits conferred by maintaining placental perfusion during resuscitation. Solving this simple dilemma calls for a transition in practice to bedside resuscitation for challenged infants, giving their mothers, for the first time, the opportunity to see and be part of their baby's first minutes of life. This presentation will present current evidence supporting the practice of bedside resuscitation with intact cord, new evidence on feasibility, and the presenters will discuss a practice change underway at George Washington University Hospital where bedside resuscitation is being incorporated.

ES321 Caring for pregnant and postpartum women with opioid use disorders

Tue, June 30

4:45pm-5:45pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Daisy Goodman Goodman, CNM, WHNP, DNP, MPH

Summary: Current knowledge about the physiology and impact of opioid use disorders during pregnancy will be reviewed. Evidence supporting the use of methadone or buprenorphine-based treatment strategies during pregnancy will be reviewed. The pharmacology of these medications and their implications for midwifery care of pregnant and postpartum women and their infants will be discussed. The importance of a multidisciplinary, collaborative model of care will be highlighted.

ES322 Protecting infants from pertussis: Vaccinating women during every pregnancy with tetanus-reduced diphtheria-acellular pertussis (Tdap)

Tue, June 30

4:45pm-5:45pm

CEUs: 0.1 Rx: 1

Track: Clinical

Presented by: Jennifer Liang, DVM, MPVM

Summary: Infants aged <1 year have the highest rates of pertussis and increased morbidity and mortality. Vaccination of women during every pregnancy with a dose of tetanus-reduced diphtheria-acellular pertussis (Tdap) vaccine is expected to help protect infants from pertussis until they are old enough to be vaccinated. This presentation will review data and rationale for the Advisory Committee on Immunization Practices (ACIP) recommendation to vaccinate pregnant women with a dose of Tdap during every pregnancy.

ES323 Promoting Safe Health Care for Every Woman through Safety Bundles

Tue, June 30

4:45pm-5:45pm

CEUs: 0.1

Track: Clinical

Presented by: Deborah Walker, CNM, DNSc, FACNM, FAAN; Tina Johnson, CNM, MS; Sharon Holley, CNM, DNP; Deborah Brandt Karsnitz, CNM, DNP, FACNM; Lisa Kane Low, CNM, PhD, FACNM; Amy S Nacht, CNM, MSN; Joan Slager, CNM, DNP, FACNM

Summary: In 2011, ACOG formed the Council on Patient Safety in Women's Health Care to improve patient safety in women's health care through multidisciplinary collaboration that drives culture change. ACNM members were included on the Council and six multidisciplinary work groups that examined key priority areas and developed core and supplemental patient safety bundles on the following topics: 1) obstetric hemorrhage, 2) hypertension in pregnancy, 3) venous thromboembolism, 4) protocols/resources to support patients, family and staff; 5) standardized review process for cases of severe maternal morbidity, and 6) maternal early warning criteria. An overview of the Council and descriptions of each group's work will be presented along with future directions.

ES324 Get Connected: The Basic Tools Every Midwife Should Have to Navigate Social Media Today

Tue, June 30

4:45pm-5:45pm

CEUs: 0.1

Track: Midwifery Matters - Public Perception

Presented by: Damaris Hay, BA, MPS

Summary: Do you find yourself feeling overwhelmed in the digital space? Are you unsure of where to start in order to promote yourself and/or your practice over the numerous social media channels? This session will provide you with the essential tools you need to feel successful online.