

2024 AWHONN Convention Sessions NCC Codes

General Sessions				
Presentation Title	Presenters	Description	NCC codes	Learning Outcome
GS1 - Lifting up Maternal Mental Health	Angelina Spicer	The United States is undergoing a mental health crisis and pregnant/postpartum individuals are not excluded. Mental health conditions, including suicide and overdose/poisoning related to Substance Use Disorder (SUD), are currently the cause 23% of maternal death in the United States. Angelina Spicer is a multi-hyphenate powerhouse! A stand-up comedian, writer, producer, actress, mother, and accidental activist. She will share her personal story of postpartum depression through humor-based reality and her journey to draw back the veil of shame with frank discussions and advocacy strategies to uplift maternal mental health.	OB - Postpartum (Code 4) MNN - Postpartum Assessment, Management and Complications (Code 2)	Nurses will learn from my personal lived experience of having undiagnosed postpartum depression and anxiety. They will walk away having laughed, learned, and ready to recognize a mother in need.
GS2 - Human Trafficking and Its Intersection With Healthcare: A Targeted Response	Francine Bono-Neri, Ph.D., RN, APRN, PNP	Human trafficking is one of the fastest growing criminal enterprises sparing no demographic, culture, or geographical location. Studies show that approximately 70% – 90% of survivors of human trafficking came in contact with a healthcare professional while in the “life” and most were never identified (Chisolm-Straker et al., 2016; Lederer & Wetzel, 2014). Gaps in knowledge and assessment skills persist despite years of sounding the alarm. Due to the inconsistency in prelicensure education and formal trainings; lack of implemented protocols and screening practices/tools; and an incomplete understanding of the root causes of supply and demand, this population is seen yet remains invisible. The presentation will raise awareness and describe what human trafficking is and its major intersection in the healthcare sector. The presentation will review vulnerabilities, diverse clinical presentations and red-flag findings, and ways to identify and respond to a potential victim of human trafficking.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Identify the significant intersection of human trafficking in healthcare, as these victims are presenting with diverse acute and chronic physical and mental health concerns. Recognize diverse clinical presentations and red-flag findings for identifying and responding to a victim of human trafficking.
GS3 - Speak Even If Your Voice Shakes: Harnessing the Power of the Nursing Voice	Jen Hamilton, RN, BSN, CEN, RNC-OB	Join us for an impactful and empowering presentation led by Jen Hamilton, a North Carolina Labor & Delivery nurse and influential advocate with a dedicated following of over 3 million. In this compelling talk, Jen explores the profound influence of the nursing voice in the critical mission to prevent birth trauma, obstetrical violence, and perinatal morbidity & mortality.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Understanding Nursing Advocacy in Preventing Perinatal Morbidity & Mortality Understanding nursing advocacy in obstetrical violence Understanding the Impact of Nursing Advocacy on Preventing Birth Trauma

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GS4 - Indigenous Maternal Wellbeing: Historical and Cultural Constructs	Camie Goldhammer, MSW, LICSW, IBCLC Amy Stiffarm, PhD, MPH Nicolle Gonzales, BSN, RN, MSN, CNM	Indigenous maternal wellbeing draws from the strengths of Indigenous culture and communities. This panel will discuss impacts from settler-colonialism and how it negatively affects maternal health for Indigenous birthing people. The panelists will also share the importance of acknowledging the strengths and power within Indigenous cultures and communities and how solutions to maternal health inequities can be found through Indigenous-led initiatives.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) WHNP - Professional Practice (Code 5)	Better understand how settler colonialism continues to impact maternal health. Better understand Indigenous cultural constructs related to pregnancy and birth. Increase recognition of Indigenous cultural strengths in combatting maternal health inequities.
GS5 - Finding Florence: Well-Being throughout Your Career	Tim Cunningham, DrPH, RN, FAAN	We'll step back to step forward in this interactive session. There will be a game or two, some conversation, and hopefully inspired ideas on how to keep checking in with your well-being, here and now, and also for the rest of your career. Tim Cunningham will share stories about experiences working with some of the sickest patients on the planet, while also reflecting on the immeasurable power of teams when they come together, even in the worst circumstances, and can perform to save lives. This session will be a celebration of you, and a challenge for you all to keep supporting the next strong generation of nurses and health professionals.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Audience will examine their individual, team, and organizational ways to sustain and improve well-being. Audience will understand the fluid nature of well-being, that it is not a one-size fits all model, and that it changes over time. Audience will

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Concurrent Sessions				
Presentation Title	Presenters	Description	NCC codes	Learning Outcome
A3 - It's in the Chart! Exploring Stigma in Perinatal Substance Use	Melinda Ramage, MSN, FNP-BC, CDCES, CARN-AP Phil Hughes, MS Sarah Friedman, MPH MA	Addressing substance use disorder stigma during pregnancy is not only a matter of empathy but also a critical step in improving maternal and child health outcomes. This session will focus on defining stigmatizing terminology and negative themed language that can present in report and in the patient chart note. The session will provide an introduction to our research informed, chart note stigma assessment tool with time to practice using the tool.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	1. Explore the concept of stigma within the context of perinatal substance use disorder (PSUD). We will review the existing literature, exploring how stigma influences access to care and impacts outcomes for the mother-baby dyad 2. Introduce and analyze the research informed stigma chart assessment tool and provide practical guidance on how to integrate this tool in your practice setting
A4 - Together We RISE.. Beyond Diversity & Inclusion Initiatives	Clifton J. Kenon, DNP, RN, IBCLC, FAAN	Sick of the polarization that has become to commonly associated with diversity and inclusion initiatives? Join us for "Together WE RISE" a framework for a Respectful, Inclusive and Safe Environment (RISE). A tested model that goes beyond colloquial Diversity and Inclusion, RISE actually empowers every member of the team to work towards collective accountability for creating a work environment where people from every identity are affirmed, embrace, and empowered.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Explore why traditional Diversity and Inclusion initiatives fall short in producing outcomes aligned with goals. Describe the Together we RISE model that utilizes human centered design to co create workplaces that affirm, empower and celebrate everyone. Identify practical strategies to implement the Together we RISE model in nursing environments and create shared unity around accountability.

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A5 - Indefensible: The Continuing Maternal Mortality Crisis	Adam Snyder, JD Alexandria Hill, MD	This presentation will address the rising rate of maternal mortality and morbidity in the United States, common obstetric care problems that are identified in quality review and in litigation. We will discuss implications for nurses and hospitals who may be sued, and clinical strategies to improve outcomes. Perspectives will be shared from a malpractice attorney and a maternal fetal medicine physician using specific case examples.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Understand and be able to identify common issues in maternal death and maternal injury claims. Be able to identify problem areas or skill gaps in maternal care, and know how to seek out information or training to improve care.
A6 -Collaborating on Purpose	Douglas Gilmer, PhD	What is collaboration, what does it look like, and what are its outcomes specifically in the anti-trafficking field? As industry leaders, how can you best facilitate multi-disciplinary collaboration within your organizations to effect positive outcomes in trafficking cases? These questions, plus an overview of what the Department of Homeland Security is doing to foster collaboration in the anti-trafficking space will be discussed.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	1. Be able to define collaboration and shared purpose. 2. Be able to identify the outcomes of effective collaboration. 3. Identify resources available from DHS to help further the anti-trafficking mission for healthcare providers.
B1 - Safe and Compassionate Care of the Morbidly Obese Parturient: A Case Study	Patricia Klassa, MSN, APRN, CNS-C, C-EFM, IBCLC	Since obesity has become more commonplace, it's important for maternal-child health providers to understand the implications/complications during pregnancy, birth and postpartum for the obese parturient. Through this complex case presentation, the importance of interdisciplinary PRE-planning for labor/birth/postpartum and attention to complex details will be presented. This preplanning lead to a positive outcome and a compassionate and memorable birth.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3) MNN - Postpartum Assessment, Management and Complications (Code 2) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Examine both the maternal and neonatal complications related to morbid obesity during the antepartum, intrapartum and postpartum periods. Construct an interdisciplinary, safe and compassionate birth plan for the morbidly obese patient.

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B2 - Perinatal Bereavement Reimagined	Sarah Copple, MSN, RNC-MNN, C-ONQS Jen Hamilton, RN, BSN, CEN, RNC-OB	A family's perinatal loss is difficult for everyone involved. Having a unit that is thoughtfully prepared facilitate patient's needs can make a difference in their grieving process. We will discuss how to reimagine perinatal bereavement care by showcasing strategies for staff education, bereavement resources and support.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Postpartum (Code 4) MNN - Postpartum Assessment, Management and Complications (Code 2) LRN - Assessment and Management of Pathophysiological Conditions and Neonatal Complications (Code 3) NIC - Physiology and Pathophysiology (Code 2) NNP - General Management (Code 3) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Examine strategies to provide individualized support to parents and families experiencing loss in the perinatal period. Strategize ideas to enhance perinatal bereavement care in the hospital setting.
B3 - Hot Topics for Communication in Maternity Care	Rachel Breman, PhD, MPH, RN	Trauma informed-care, respectful maternity care, autonomy, and shared decision-making are frequently discussed in maternity care, but what do they mean for nurses? This presentation will define discuss these important terms through a reproductive justice lens and the implications for nursing practice.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) WHNP - Professional Practice (Code 5)	Define the terms trauma informed-care, respectful maternity care, autonomy and shared decision-making. Discuss the implications of trauma informed-care, respectful maternity care, autonomy and shared decision-making for nursing care.
B4 - Reducing Breastfeeding Disparities: Patient Experience Can Fuel Quality Improvement	Eileen FitzPatrick, DrPH, MPH, RDN	Evaluating patient experience of maternity care practices that support breastfeeding is crucial to eliminating breastfeeding disparities. This research demonstrates that certain maternity care practices are more susceptible to implicit bias or structural racism than others. Establishing quality improvement programs within hospitals to address this is possible and necessary.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) WHNP - Professional Practice (Code 5) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	1. Participants will be able to identify the maternity care practices impacting breastfeeding that are most commonly shown to be to be affected by implicit bias or structural racism. Participants will be able to identify the maternity care practices impacting breastfeeding that are most commonly shown to be to be affected by implicit bias or structural racism. 2. Participants will be able to assess

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				three specific strategies for addressing maternity care disparities through quality improvement. Participants will be able to assess three specific strategies for addressing maternity care disparities.
B5 - Cardiac Disease in Pregnancy - An Overview	Stephanie Martin, DO	In this session we will review risk assessment approaches and discuss the most common complications for pregnant patients with cardiac disease. We will also discuss the evaluation of patients with cardiac symptoms and learn how to discriminate from normal pregnancy symptoms.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3) MNN - Postpartum Assessment, Management and Complications (Code 2) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Review categories of maternal cardiac disease and relevant physiologic changes of pregnancy Review maternal and fetal risks to pregnancy Review how to predict pregnancy risks
B6 - AWHONN's Public Policy Committee - Legislative Updates	Jacquiline Blanco, BSN, RNC Nancy Travis, MS, BSN, RN,BC, CPN, CBC, C-ONQS, FAWHONN Rachel Sheehan, MSN, RN-BC, C-ONQS Ellen Taylor, MSN, RNC-OB, IBCLC, C-EFM	Members of AWHONN's Public Policy Committee will deliver an SBAR presentation on legislative updates and nurse advocacy.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Using a SBAR approach describe ways AWHONN nurses can become involved in advocacy.

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C1 - Improving Lactation Support for Patients Who Experience Severe Maternal Morbidity	Adriane Burgess, PhD, RNC-OB, CCE, CNE, C-ONQS, CPHQ, FAWHONN Diane Spatz, PhD, RN-BC, FAAN	Rates of several maternal morbidity continue to increase. Lactation has significant short and long-term benefits for birthing people. This population of patients often experience barriers to lactation and breastfeeding. This presentation will outline how nurses can create tailored and deliberate lactation support programs designed to overcome the barriers birthing people who experience severe maternal morbidity encounter to meeting their lactation goals.	OB - Postpartum (Code 4) MNN - Postpartum Assessment, Management and Complications (Code 2) LRN - Physical Assessment and General Management (Code 2) NIC - General Assessment and Management (Code 1) NNP - General Management (Code 3) WHNP - Normal Physiology and Wellness Management (Code 1)	Describe the benefits of and barriers to lactation among patients who experience complications during pregnancy. Outline ways healthcare providers can support birthing people who experience severe maternal morbidity and desire to provide their newborn with human milk.
C2 - The Things We Don't Talk about : Ethical Dilemmas in Labor & Delivery	Jennifer Atkisson, MSN, RNC-OB, CNL Jennifer Dunatov, DHCE, MA	A nurse and hospital ethicist share how a strong partnership between the two disciplines can be a critical resource for our patients to avoid and mitigate harm, obstetric violence and get our best outcomes. Every nurse faces ethical dilemmas during their career, but how we navigate them will make the difference for our patients and ourselves. Learn to apply ethical principles to work through real case studies.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Learners will be able to Utilize ethical discernment frameworks to work through common ethical issues in Labor & Delivery Learners will be able to Integrate hospital ethicist or ethical principles as a mitigation strategy of moral injury for patients and providers
C3 - Enhanced Recovery after Surgery for Cesarean Delivery: QI Initiative	Cindy Beckett, PhD, RNC-OB, LCCE, LSS-BB, CHRC, EBP-C Diana Tolles, MSN, RNC-OB, EBP-C	The enhanced recovery after surgery (ERAS) protocol for patients undergoing cesarean delivery (ERAC) is an evidence-based practice care management process designed to optimize post-surgical recovery and lessen the risk of patients developing SSIs. The purpose of this evidence-based quality improvement initiative was to evaluate the implementation and sustainability of the ERAC and provide recommendations for reimplementation and ongoing sustainability.	OB - Postpartum (Code 4) MNN - Postpartum Assessment, Management and Complications (Code 2)	Learners will be able to verbalize the components of the enhanced recovery after surgery (ERAS) protocol for patients undergoing cesarean delivery (ERAC). Learners will be able to identify facilitators and barriers to the implementation and sustainability of ERAC.

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C4 - Postpartum Hemorrhage Escape Rooms...More Than Simulation, More Learning, More Fun!	Karen Clark, MSN, RNC-OB, CEFM	The presentation will describe the postpartum hemorrhage escape room that was used to train OB nurses using adult learning principles. The purpose of the presentation is to demonstrate how nurse educators can create fun, effective learning for staff nurses.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	1.The participants will be able to state the adult learning principles used for educating nurses in an activity such as an escape room. 2. The participants will be able to describe at least two active learning exercises to increase skill and knowledge. 3. The participants will be able to explain the benefits of an escape room compared to simulation.
C5 - Fetal Heart Rate Tracings: Practice Makes Perfect!	Lisa Miller, CNM, JD	This presentation will allow participants to apply the standardized interpretation & management presented in the nursing excellence session earlier in the program. The focus will be on Category 2 tracings.	EFM - Electronic Fetal Monitoring (Code 11) IAP - Maternal and Fetal Physiology and Assessment (Code 1) OB - Fetal Assessment (Code 1) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Apply 2 standardized principles of FHR interpretation to Category 2 tracings. Discuss management of Category 2 tracings with recurrent significant decelerations.
C6 - Update on Treatment of Menopause Symptoms	Heidi Collins Fantasia, PhD, RN, WHNP-BC, FNAP, FAAN Michelle Flanagan, MS, FNP-BC, RN, MSCP	This session will provide an overview and update of the pharmacologic treatment of menopause symptoms. This will include vasomotor symptoms and genitourinary symptoms of menopause. Nonpharmacologic treatment options will also be reviewed.	WHNP - WHNP - Pharmacology (Code 4)	1. The learner will state 2 pharmacologic options for the treatment of vasomotor symptoms of menopause 1. The learner will state 2 pharmacologic options for the treatment of vasomotor symptoms of menopause 2. The learner will identify one treatment option for genitourinary symptoms of menopause.

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D1 - Managing Stress in the NICU: Implications and Creating Solutions for Parents	Tracey Bell, DNP, APRN, NNP-BC Meredith Farmer, DNP, APRN, NNP-BC	The presentation, "Managing Stress in the NICU: Implications and Solutions for Parents, provides an examination of the challenges of stress within the NICU. It explores the impact of stress on parents while offering evidence-based strategies to mitigate its effects. By fostering a deeper understanding of the issue and presenting practical solutions, the presentation aims to improve the well-being of families in the NICU setting.	LRN - Physical Assessment and General Management (Code 2) NIC - Physiology and Pathophysiology (Code 2) NNP - General Management (Code 3) ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7)	Determine demographic and medical factors that contribute to parental stress in the NICU. Analyze the complex dynamics and interrelated effects of stress on infants and families in the NICU. Identify strategies that healthcare providers can implement to mitigate stress in the NICU.
D2 - Improving Communication Using a Birth Preferences Sheet	Amy Brown, BSN, Rachel Breman, PhD, MPH, RN Crystal Trent Paultre, MSN, RN, CBS	Respectful communication during perinatal care is one way to address inequity and improve birth outcomes. Our hospital used a birth preferences sheet to enhance communication during intrapartum care in a university hospital that serves a predominantly Black population. Our outcome measures were respectful maternity care and shared decision-making. We will present the perspectives of patients, nurses, midwives, and physicians.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Describe the value of using a shared decision-making tool, the birth preferences sheet and customizing it to your unit's practice, including the interdisciplinary process. Describe the different evaluation methods used for assessing the provider and pregnant/birthing person's experience and the results from our surveys. Discuss the implementation barriers, facilitators, and ideas for improvement.
D3 - Update on Maternal Fetal Interfacility Transport--an Interprofessional Approach	Beth McIntire, MSN, WHNP-BC, C-EFM John Clark, JD, MBA, NRP, FP-C, CCP-C, CMTE	This interactive session will discuss the importance maternal fetal interfacility transport to improve maternal/neonatal outcomes, present the foundations of a perinatal transport program including team composition and scope of practice, regulatory oversight, safety, and quality. Case studies will be used to illustrate key concepts.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6)	The participant will be able to recognize differences in scope of care (scope of practice) among transport team members. Attendees will be able to identify advantages of maternal fetal transport The participant will be able to discuss transport standards and at least one example of each (team composition, education and competency, quality,

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				safety, medications, and/or equipment).
D4 - The Role of Bedside Evaluation in Improving Diagnosis of Obstetric Sepsis	Christa Sakowski, MSN, RN, C-ONQS, C-EFM, CLE Elliott Main, MD	Obstetric sepsis is the #2 cause of maternal mortality and is driven by poor recognition and delay in diagnosis. Maternal Early Warning Screens for severe infection have high rates of false positives and negatives. We will present a standardized bedside evaluation for perinatal nurses that includes clinical signs and symptoms to determine the next diagnostic and treatment steps. Nurses' immediate presence at the bedside can provide a critical timely evaluation.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3) MNN - Postpartum Assessment, Management and Complications (Code 2)	Recognize signs and symptoms of obstetric sepsis and why screening tools have been inadequate in the diagnostic pathway. Integrate key bedside assessment practices for obstetric sepsis to improve screening, diagnosis, and treatment.
D5 - Maternal Care Doesn't Stop after Delivery: Advocating for Safe Maternal Care in the ED	Yvonne A. Dobbenga-Rhodes, MS, RNC-OB, RNC-NIC, CNS, CNS-BC, CPN	Worsening maternal morbidity and mortality spurred The Joint Commission to recognize how prevention, early recognition, and timely treatment for maternal hemorrhage and severe hypertension/preeclampsia impact outcomes. The impetus to improve maternal mortality rates is no longer focused just on providers in labor and delivery; it has grown to include the entire perinatal period. These EPs are applicable to providers in Emergency Departments as well.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3) MNN - Postpartum Assessment, Management and Complications (Code 2) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Understand the importance of debriefs, case reviews, process measures and outcome measures in quality improvement Learn implementation strategies for best practices to improve maternal morbidity and mortality Develop a workflow for hospital between Emergency Department (ED) and OB teams
D6 - Points of Pivot: Disparities in Gynecologic Cancers and Where We Go from Here	Nalo Hamilton, PhD, MSN, WHNP/ANP-BC	In this session disparities in gynecologic cancers will be discussed and evaluated from view points of age, racial/ethnic demographics, cancer type and the state of the science. Using these as a lens to focus on areas of improvement in clinical practice and women's health research.	WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Understand the impact of breast & gynecologic disparities on women across the life span. Develop plans of care that advocate for women with gynecologic cancers. Implement daily healthcare practices aimed at reducing gynecologic health disparities.

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E1 - Stigmatizing Language in Obstetric Care: Research and Recommendations for Change	Veronica Barcelona, PhD, MSN, RN, PHNA-BC Rose Horton, MSM, RNC-OB, NEA-BC, FAAN	Stigmatizing language has been associated with poorer quality of care, especially for people racialized as Black or Latinx. We will present our completed research identifying stigmatizing language in the electronic health records of birthing people. We will also provide a model for conceptualizing how stigmatizing language is used, describe clinical implications, and recommendations for change.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	At the end of this presentation and discussion, learners will be able to: 1) Define stigmatizing language and describe how it may result in harm to marginalized people in healthcare settings Define stigmatizing language and describe how it may result in harm to marginalized people in healthcare settings Discuss qualitative research results and clinical implications Discuss qualitative research results and clinical implications Evaluate how to apply the conceptual model to care provided in your clinical setting, and ways to address changing potentially harmful words, policies, and practices Evaluate how to apply the conceptual model to care provided in your clinical setting, and ways to address changing potentially harmful words, policies, and practices
E2 - Nursing Education: Innovative Strategies for Strengthening Orientation	Nanette Vogel, MS, RNC-OB, C-EFM, NPD-BC Rhianna Britton, MSN, RNC-OB, C-EFM, NPD-BC	The educator is responsible for applying principles, theories & best practices of teaching & learning in the development of perinatal nurses throughout orientation, ongoing education, and competency development. Evidence-based practices in education can improve health care and impact patient outcomes. This session will describe innovative strategies to strengthen perinatal nurse orientation.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5)	Identify innovative teaching modalities to enhance learner engagement, improve knowledge retention, and strengthen best practices in nursing education. Incorporate strategies to support birth equity and respectful obstetric care during perinatal nursing orientation.

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E3 - Initial Obstetric Evaluation Clinical Pathway: A Multi-Facility System Playbook	Jill Hughes, MSN,RN, RNC-OB Denese Campbell, MSN, RN C-EFM Janae Baldwin, BSN, RN, C-EFM	After an increase in events highlighting opportunities in OB Triage and initial assessment of the pregnant patient, a multifacility hospital system developed a task force to create a standardized evidence-based care (EBC) clinical pathway. This presentation will share discoveries and implemented solutions including OB EMTALA requirements, validation of nurse competency to EBC, and approach to new graduate and new to OB RN's.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Examine a multifacility hospital systems discovery when evaluating current practice in the outpatient/triage obstetric departments related to an increase in harm events. Discuss practices implemented through an established clinical pathway to support safe patient care in the outpatient/triage obstetric departments, including guidelines for RN competency and tenure requirements.
E4 - Facilitating Culturally Safe Conversations Around Substance Use and Contraception	Faith Green, Masters in Public Health (health education and health communication), plain language communication certified, BA Medical Anthropology Lily Bastian, CNM	Conversations with patients about alcohol/substance use and contraception choices can be challenging. Creating an environment of cultural safety is imperative to establish trust. With evidence-based skill training, nurses can integrate cultural safety principles into patient-centered communication and strengthen their skills and confidence to effectively address sensitive topics to improve outcomes.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Normal Physiology and Wellness Management (Code 1) ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7)	Discuss the principles of culturally safe care and patient-centered communication in accordance with the model of AWHONN's Respectful Maternity Care Guidelines. Build skills to integrate cultural safety and patient-centeredness in communication with patients regarding topics of alcohol and substance use as well as contraceptive care.
E5 - Amniotic Fluid Embolism: Recognition, Management, and Patient Centered Care	Suzanne Baird, DNP, RN Jamie Agunsday, MA, MSN, RNC-OB Miranda Klassen, BS, Biology	A comprehensive discussion of amniotic fluid embolism including general understanding, recognition, management, and the importance of simulation. Followed by a patient's perspective, the effects of vicarious trauma on clinicians, current research opportunities, and how to access available tools and resources	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3)	1. Outline the immediate response to a suspected AFE 2. Recall AFE support and research resources available

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E6 - Born Too Soon: Clinical Updates and Future Directions in Preterm Labor and Birth	Rebecca Cypher, MSN, PNNP	The high incidence of preterm labor and birth remains relatively unchanged despite intensive research efforts and advances in obstetric care. Nurses play a significant role in identifying, supporting, and managing patients in an antepartum and intrapartum setting. This session will highlight clinical strategies, current science supporting contemporary guidelines, fetal monitoring, and nursing responsibilities in caring for this high-risk population.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3)	Identify potential risk factors for preterm labor and birth Recall prediction and prevention measures for preterm birth. Examine management strategies for preterm labor
F1 - The C.H.O.R.I.O Project	Lulette Infante, MSN, RN, AMB-BC, CPON, CPHQ Lori Saari, BSN, RN, C-EFM	Chorioamnionitis (or "chorio"), a common intrauterine infection in labor and delivery (L&D), significantly impacts both mother and newborn. A multidisciplinary approach led to a chorio prevention bundle, incorporating evidence-based practices and infection prevention strategies, in a Northern California L&D unit. The result: a remarkable 50% reduction in chorio cases, dropping from 10.5% (Jan-Dec 2021) to 5.3% year-to-date (Jan-Sept 2023).	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	1. Gain an understanding of chorioamnionitis by defining the condition, recognizing its signs and symptoms, exploring preventative measures, and identifying associated risk factors, potential maternal and newborn complications, and implications of poorly managed or untreated infection. 2. Discuss and summarize the role of evidenced-based practices and key guideline elements of a comprehensive, multidisciplinary chorioamnionitis prevention bundle in lowering chorioamnionitis rate by outlining infection control and hygiene practices that can mitigate the risk in the clinical setting.
F2 - The Power of Navigation in OB Deserts	Julie Teeter, MSN, RN Holly Weaver, BSN, RNC-OB	The Power of Navigation: Discover how nurses in an OB desert designed a maternal-infant navigation program that positively impacted their rural community. With a focus on social determinants of health and community partnerships, navigators increased access to prenatal and postnatal care, improving patient compliance and health literacy.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	The learner will understand the challenges affecting rural communities in an OB desert. The learner will identify how assessing social determinants of health and building interprofessional and community relationships positively impacts patient care.

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F3 - Safe Use of Intermittent Auscultation to Expand Freedom of Movement in Labor	Debra Bingham, DrPH, RN, FAAN Renee Byfield, MS, RN, FNP, C-EFM	Evidence supports use of intermittent auscultation (IA) instead of continuous electronic fetal monitoring in low-risk labor. IA supports freedom of movement and may help reduce the risk of cesarean or operative vaginal birth. Education and opportunities to practice IA skills are necessary to ensure IA is performed reliably, safely, and consistently.	EFM - Electronic Fetal Monitoring (Code 11) IAP - Maternal and Fetal Physiology and Assessment (Code 1) OB - Fetal Assessment (Code 1) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	1. Learners will be able to describe why to perform intermittent auscultation instead of continuous fetal monitoring. 2. Learners will be able to discuss how to perform IA safely.
F4 - Eat, Sleep, Console: Is It Possible? Is It Sustainable?	Aubrey Williams, DNP, RN, C-ONQS, NPD-BC, RNC-NIC, MATS	Eat, Sleep, Console is a hot topic, but can it be fully integrated throughout a delivering facility and is it sustainable? This presentation discusses the journey of how bedside nurses and nursing leadership worked together to fully implement ESC in NICU, Mother-Baby, and Pediatrics, the challenges along the way, and results after 5 years of ESC integration.	MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Learners will be able to discuss benefits of Eat, Sleep, Console implementation. Learners will be able to identify practice changes for Eat, Sleep, Console implementation.
F5 - Holistic Black Birth: A Nurse Navigator to Support & Empower Black Birthing People	Leticia Rios, PhD(C), RN, NPD-BC, IBCLC, RNC-NIC Aviva Kleinman, BSN, BSc, RN, C-MNN, C-EFM, IBCLC, CPLC	Responding to inequities for Black birthing people, we developed a culturally concordant nurse-navigator program. Participants met with an OB nurse throughout pregnancy and post-partum to address health concerns, prepare for labor, assess SDoH, and improve access to care and resources. The program hosted Holistic Black Birth workshops and support groups. Outcomes, including cesarean delivery rates, were improved for participating families.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4)	Describe nurse-driven evidence-based strategies to improve care practices and hospital outcomes for Black birthing people. Describe nurse-driven evidence-based strategies to improve care practices and hospital outcomes for Black birthing people.
F6 - Is There Cause for Concern? How We Educate Non-English Speaking Birthing People	Trish Suplee, PhD, RNC-OB, FAAN	Pregnancy-related deaths for Hispanic birthing people are on the rise. Due to language discordance, women who speak Spanish may not be receiving or comprehending education provided by nurses prior to discharge after giving birth. This presentation will examine the results of a quantitative study that included 85 postpartum nurses focusing on equitable care, barriers to using translation services, miming, and self-efficacy.	OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4)	By the end of the presentation, participants will be able to: 1. Examine how nurses use translation services, miming, and language-concordant educational tools when educating non-English speaking birthing people prior to discharge. 2. Summarize the comprehensive role of the nurse when caring for non-English speaking birthing people in order to provide equitable care.

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G1 - Clinical Integration of a Birth Doula Team: Learning to Listen As a Nurse Leader	Beth Quinn, MSN, RN Melissa Young, MSN, RNC-OB	Doula support during pregnancy has been shown to improve clinical outcomes for pregnant persons. It has been identified as an intervention to address disparities in health outcomes for women of color during pregnancy. Integrating support to a clinical program allows for focus in patient experience, satisfaction and improved outcomes as well as building a workforce pipeline.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6)	<p>1. Learners will be able to analyze their local leadership and assess appetite for expansion or building of a clinically integrated birth doula program.</p> <p>2. Learners will be able to discuss tools used to operationalize and successfully manage a diverse patient population and workforce development.</p>
G2 - Hats Off for Full-Term Healthy Newborns	Jessica Lazzeri, MSN, RN, NEA-BC Marilyn Stringer, PhD, WHNP, FAAN	Historically, hats have been placed on newborns after birth to prevent hypothermia. This quality improvement project eliminated hat use in full term newborns in the setting of modeling safe sleep behaviors in the hospital. There were no significant differences in temperatures between infants with and without hats.	OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5)	<p>Explain the evidence associated with infant hat use and thermoregulation</p> <p>Describe a practice change of eliminating the use of infant hats to promote safe sleep role modeling using a PDSA model</p>
G3 - Revive: Using Trauma-Informed Care to Fight Bias and Improve Women's Health Outcomes	Katherine Endres, DNP, FNP-BC, RNC-OB, C-EFM	Maternal and neonatal outcomes are impacted by implicit bias in healthcare during labor and delivery and postpartum periods. This presentation will present a new model of care applying trauma-informed principles to the maternity setting. Participants will learn the REVIVE model of care that outlines steps to redistribute power, promote shared decision-making, and empower patients, nurses, and providers at the bedside.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5)	<p>Identify types of trauma and how trauma affects physical, social, and emotional development and well-being.</p> <p>Summarize why a universal trauma-informed approach is necessary in maternity units. Learn the six-step REVIVE™ model of care for patient interactions that applies trauma-informed principles to maternity settings.</p> <p>ummarize why a universal trauma-informed approach is necessary in maternity units. Learn the six-step REVIVE™ model of care for patient interactions that applies trauma-informed principles to maternity settings.</p>

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G4 - When Your Stable Patient Becomes Unstable: Managing Clinical Deterioration on L&D	Vibha Mahendra, MD, Board Certified Anesthesiologist, Obstetric Anesthesiologist	Recognizing clinical deterioration and intervening early is of the utmost importance on labor & delivery. This course will simplify the evidence-based practices that surround our ability to anticipate, recognize, and stabilize patients on L&D with escalating clinical needs. Learn how to OB anesthesiologists integrate national guidelines and safety standards into case-specific actions for each patient.	OB - Labor and Birth (Code 2) IAP - Obstetric and Medical Complications in Pregnancy (Code 2)	<p>- To elevate the learner's ability to recognize clinical deterioration in commonly encountered L&D conditions, such as obstetric sepsis, postpartum hemorrhage and preeclampsia.</p> <p>- To demonstrate how nurses can integrate principles of maternal physiology to support and optimize the care of their L&D and peripartum patients.</p>
G5 - Disrupting Power Paradigms: Intersectionality at the Bedside	Joshua Womack, MSN, CNS, RNC-OB Kris Lindeman, MSN, RN, PNP-AC Elena Jenkins, BSN, RN Jacquiline Blanco, BSN, RNC	DEI work is integral to health equity; but in the absence of intersectionality, DEI spaces can perpetuate the structural oppression they seek to dismantle. Intersectionality acknowledges lived experience and helps us understand how systemic violence reinforces itself. Join four nurses for a heartfelt, evidence-based deep dive into power, privilege and compassion; walk away ready to disrupt the status quo by bringing an intersectional practice to the bedside.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5)	<p>Foundational understanding of intersectionality as a nuanced and critical evolution of the diversity, equity and inclusion framework.</p> <p>Identify key steps to operationalize and apply intersectionality to clinical practice.</p>
G6 - An Update on Reproductive Health, Rights and Justice in the Era of Dobbs	Monica McLemore, RN, MPH, PhD	The purpose of this session is to update AWHONN members on significant changes to reproductive health, rights, and justice in the context of the Supreme Court of the United States Dobbs Decision. Information about ethical issues surrounding practice, research, and education will be covered as well as review of the American Nurses Association Code of Ethics and Interpretive Statements.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) WHNP - Professional Practice (Code 5)	<p>1. Accurately describe the differences between reproductive health, rights, and justice.</p> <p>2. Articulate their responsibilities as nurses for care provision in the era of Dobbs as described within the American Nurses Association Code of Ethics and Interpretive Statements.</p>

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				3. Recognize the role of the profession and discipline of Nursing in the field of reproductive health, rights, and justice.
H1 - Rupture Versus Reality: Dispelling Myths about Uterine Rupture	Adriane Burgess, PhD, RNC-OB, CCE, CNE, C-ONQS, CPHQ, FAWHONN Julia Wheeling, MBA, RNC-ONQS, C-EFM Jay Bringman, MD, MBA	Uterine rupture is a rare but potentially life-threatening event for both mother and fetus. Although many nurses are familiar with the risk of uterine rupture among patients undergoing a trial of labor after cesarean, other risks are often underappreciated which could lead to a lack of recognition and delays in care. This presentation will describe current data on uterine rupture, and outline preventative strategies, risk factors, signs and symptoms.	IAP - Obstetric and Medical Complications in Pregnancy (Code 2) OB - Pregnancy and Obstetric Complications (Code 3)	Describe risk factors for and signs and symptoms of uterine rupture. Analyze cases of uterine rupture to improve recognition of and time to treatment to decrease maternal and fetal morbidity and mortality.
H2 - Implementing Team Retreats to Promote Staff Engagement in High-Risk Perinatal Care	Leah Matteson, DNP, RN Tracy Quamme, MSN, RN	The Leadership team with Unit Council piloted team retreats to evaluate impact on staff engagement. PICOT Question: How can implementing team member retreats impact engagement in the Center for Perinatal care? Are there improvements in engagement in the following domains of the staff engagement survey following implementation of retreats: "I can be myself at work", "All Team members are treated fairly", "My team has a climate where diverse perspectives are valued".	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5)	Identify leadership behaviors and actions that contribute to highly engaged teams in perinatal care. Assess impact of team retreats on team member engagement and team member confidence in leadership that supports a just culture of diversity, equity, inclusion.
H3 - Forgotten Partners: Integration of EMS in Maternal Mortality Reduction	Heather K. Scruton, MBA, MSN, RNC-OB	Often overlooked by multidisciplinary teams focused on improving maternal outcomes, front-line EMS clinicians may be the first, or last, healthcare workers vulnerable pregnant patients encounter. Postnatal complications are rarely included in annual mandatory obstetric education hours for EMTs and paramedics. This program describes the challenges and successes of statewide EMS outreach in this missed specialty.	Important but N/A for our certifications	Evaluate emerging data from statewide Maternal Mortality Review Committees in regard to EMS involvement in care. Describe three strategies to engage local EMS agencies in maternal mortality reduction efforts
H4 - Perinatal Depression Screening in Federally Qualified Health Centers (FQHCs)	Sandi Tenfelde, PhD, RN, WHNP-BC Lindsey Garfield, PhD, RN, APRN	Guidelines for perinatal depression screening are ambiguous and many FQHC patients are not screened in the prenatal or postpartum period. This presentation will review current guidelines, best practices, and current screening results from US FQHCs of 50,000 birthing persons from the first prenatal visit through the first year post birth.	IAP - Maternal and Fetal Physiology and Assessment (Code 1) OB - Postpartum (Code 4) MNN - Postpartum Assessment, Management and Complications (Code 2)	1) Participants will define current guidelines for perinatal depression screening 2) Participants will describe 2 challenges with perinatal depression screening in FQHCs

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			WHNP - Normal Physiology and Wellness Management (Code 1)	
H5 - Improving Care of Refugee Families – Learning from Sustainable Global Health Projects	Dehlia Gonzalez, MSN-Ed, RNC-OB Dawn Morales, BSN, RN Nancy Huhta Comello, DNP, CNM, RNC-OB/MNN/ONQS, C-EFM, FAWHONN	Nurses who have direct involvement in low-resource global settings often learn strategies to improve care to refugee families in the United States. Undocumented pregnant patients are a vulnerable group because their legal status limits access to prenatal and obstetrical services. Our international experience has helped us think critically about disparities, poverty, and justice, and has given us tools to effectively engage with these patients.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	1) Participants will be able to identify what makes an international project ethical and sustainable as well as assess applicability to domestic projects in the United States. 2) Participants will be able to recognize challenges unique to refugee families and identify nursing interventions that demonstrate cultural humility.
H6 - Syphilis: An Old Disease Returns	Helen Hurst, DNP, RNC-OB, APRN-CNM	With an 80% increase in syphilis cases since 2018, it is vital for nurses to be knowledgeable about this reemerging STI. This presentation will provide an overview of syphilis, current populations affected, resulting health problems, and ways to help prevent the spread.	IAP- Maternal and Fetal Physiology and Assessment (Code 1) OB - Pregnancy and Obstetric Complications (Code 3) LRN - Mother/Fetus (Code 1) MNN - Pregnancy, Birth Risk Factors and Complications (Code 1) NIC - General Assessment and Management (Code 1) NIC - General Assessment and Management (Code 1) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	Discuss the history, epidemiology and emerging trends of syphilis Review health problems associated with the disease Discuss tips and strategies for providing education and preventing further spread.

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Nursing Excellence Sessions				
Presentation Title	Presenters	Description	NCC codes	Learning Outcome
NE1 - It's Not Rocket Science, It's Just Fetal Monitoring!	Lisa Miller, CNM, JD	Einstein once said "if you can't explain it simply, you don't understand it well enough". This session will take that quote to heart. We will review common concerns in electronic fetal monitoring and intermittent auscultation and provide instructor level insights into everyday situations such as pitocin use and Category 2 management. From legal issues in fetal monitoring, to the keys to creating and establishing shared mental models, and a discussion of common misconceptions, you will leave with the insights and tools needed to take your teaching and your practice to the next level. Bring your questions, too, as the session will include time for discussion.	EFM - Electronic Fetal Monitoring (Code 11) IAP - Maternal and Fetal Physiology and Assessment (Code 1) OB - Fetal Assessment (Code 1) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2)	<ol style="list-style-type: none"> 1. Explain common concerns and misconceptions in electronic fetal monitoring and intermittent auscultation, including management strategies for Pitocin use and Category II tracings. 2. Demonstrate instructor-level strategies for teaching fetal monitoring concepts, incorporating legal considerations and shared mental models to enhance clinical practice and team communication.
NE2 - Post Resuscitation Care of the Depressed Neonate	Jay Goldsmith, MD	This lecture will review an evidence-based approach to the post-resuscitation care of the depressed newborn. There is a broad differential for neonatal encephalopathy, including hypoxic ischemic encephalopathy (HIE). Standard protocols are used to identify encephalopathic newborns that have HIE and qualify for its time sensitive treatment, therapeutic hypothermia. In order for therapeutic hypothermia to be effective, it should be initiated within 6 hours of birth. Due to this time constraint, it is vital for the practicing medical team to have a standard approach to the diagnosis and stabilization of the depressed newborn after resuscitation. We will discuss the role of umbilical cord blood gas analysis in the evaluation of the fetal state prior to delivery, and how it can serve to guide management. Alternative laboratory evaluations to be considered if umbilical cord gases are not available will also be discussed. The physical exam of the depressed newborn, an essential component of the diagnosis of encephalopathy, will also be reviewed.	LRN - Assessment and Management of Pathophysiological Conditions and Neonatal Complications (Code 3) NIC - Physiology and Pathophysiology (Code 2) NNP - Embryology, Physiology, Pathophysiology and Systems Management (Code 2) ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7) NNIC - Neonatal Neuro-Intensive Care (Code 20)	<ol style="list-style-type: none"> 1. Apply a standardized, evidence-based approach to the diagnosis and stabilization of the depressed newborn following resuscitation, including timely identification of candidates for therapeutic hypothermia. 2. Evaluate the role of umbilical cord blood gas analysis and alternative laboratory assessments in diagnosing neonatal encephalopathy, and integrate physical exam findings into clinical decision-making.

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NE3 - Saving Lives: The Value of Maternal Mortality Review in the US	Jamie Agunday, MA, MSN, RNC-OB Julie Zaharatos, MPH Deborah Burch, DNP, RN Brianna Henderson, PFP	After attending this session, you will leave with increased knowledge and renewed confidence to positively impact pregnancy related death rates in your practice environment. You will gain an understanding of the role and focus of Maternal Mortality Review Committees (MMRC) and how MMRCs drive changes in practice with clinical recommendations and interventions aimed at eliminating maternal mortality. Included in this presentation will be several compelling personal stories that highlight the importance of this work and how every member of the healthcare team can contribute to save lives.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	The learner will describe the role of maternal mortality review committees in the US.
NE4 - Reproductive Justice: A Framework and Movement for Us All	Miriam Yeung, MPA Ebony Marcelle, DNP CNM FACNM	This is an interactive workshop open to all who long for a different, better world. Learn about the fundamentals of reproductive justice - what it is and what it is not; why it's important; engage deeply in a case study of reproductive justice in action; and discover how to use reproductive justice in your practice. This session is presented by Miriam Yeung, long-time reproductive justice activist and Ebony Marcelle, Midwife and Black Maternal Health Consultant.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Participants will have definition and understanding of RJ Participants will know why reproductive justice is important to their work and how to use it in their work
Pre-Convention Sessions				
PC1: Critical Care Obstetrics: Optimizing Collaborative Care	Sarah Rae Easter, MD	This four-hour session will approach clinical challenges at the intersection of pregnancy and critical illness. We will use a case-based interactive approach to review contemporary management strategies for critical illness ranging from the common to the nonroutine. We will identify opportunities to improve care for the critically ill pregnant person through the lens of quality improvement and implement systems to optimize teamwork in these high-acuity, low-frequency events.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6)	<ol style="list-style-type: none"> 1. Apply contemporary management strategies to clinical cases involving critically ill pregnant patients, using a case-based, interactive approach. 2. Identify and implement systems-level improvements, including quality improvement and teamwork optimization, for managing high-acuity, low-frequency events in obstetric critical care.

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PC2 - Maternal Mental Health: Addressing the Most Common Complication of Pregnancy	Adrienne Griffen, MPP Jamie Belsito, Mara Child, MPH Aminat Balogun, MPH	Mental health conditions -- including anxiety, depression, obsessive-compulsive disorder, post-traumatic stress disorder, psychosis, bipolar illness, and substance use disorder -- are the MOST COMMON complications of pregnancy and childbirth, impacting at least 1 in 5 individuals during pregnancy or the first year postpartum. Although maternal mental health conditions are highly identifiable and treatable, the vast majority (up to 75%) of those impacted by these illnesses remain untreated, increasing the risk of long-term negative impacts on mother, baby, family, and society. At the end of this workshop, participants will have the knowledge, skills, and resources to effectively engage pregnant and postpartum people on their mental health.	IAP - Maternal and Fetal Physiology and Assessment (Code 1) OB - Pregnancy and Obstetric Complications (Code 3) MNN - Pregnancy, Birth Risk Factors and Complications (Code 1) WHNP - Gynecology Disorders, Obstetrical Complications and Primary Care Management (Code 2) LRN - Mother/Fetus (Code 1)	<p>At the conclusion of this workshop, participants will be able to discuss barriers to patient education, screening, and treatment for maternal mental health conditions.</p> <p>At the conclusion of this workshop, participants will demonstrate increased ability to discuss, screen, and identify treatment options for maternal mental health conditions.</p> <p>Objective #1: At the conclusion of this workshop, participants will be able to describe the range of maternal mental health conditions.</p>
PC3 - Beyond the Bedside: Strategies & Skill Building for Today's Nurse Leader	Lori Gunther, MS, CPXP Bobbie Smith, MSN Cyndy Krening, MS, CNS, RNC-OB, C-EFM, FAWHONN	Knowing how to effectively manage staff and staffing, engage an interdisciplinary team, implement effective quality and safety improvements while appreciating budget responsibilities, are essential skills needed by today's successful nurse leaders. In this pre-conference, we will delve into tactics and strategies relating to nurse leader professional development, employee and physician engagement, clinical quality, safety and operational outcomes, regulatory compliance, fiscal management, which can help you to better manage your business and develop the case for resource support. Case studies, breakout discussions and role play activities will hone your skills as a formal or informal nurse leader.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5) ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	<ul style="list-style-type: none"> • Outline how to design the processes and framework for establishing an effective quality improvement project. • Prescribe the use of data in QI and operational decision making to drive clinical and operational improvements. • Determine at least three benefits to multidisciplinary teamwork related to cross training and floating.

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PC4 - Legal Issues in Perinatal Nursing: A Mock Trial	Adam Snyder, JD Suzanne McMurtry Baird, DNP, RN Lisa Miller, CNM, JD Stephanie Martin, DO Jennifer Suttle, JD Jay Goldsmith, MD Alexandria Hill, MD Dennis Ruth,	The perinatal nurse faces high risk for involvement in a malpractice suit. The number of cases alleging malpractice in obstetrics may be the result of a number of factors. · Childbirth is an intense, emotional experience and parents have high expectations for a “perfect” birth and newborn. Poor outcomes are not usually anticipated. · Parents may be well-informed consumers of health care. · Obstetrics is a high-pressure, rapidly changing specialty. Accidents, errors in judgment, and negligence do occur. · Potential preventability of maternal injury or death. · Autonomy in perinatal nursing practice. · Increased accountability. The mock trial will provide an interprofessional perspective on general areas of perinatal nursing liability, demonstrate the components of malpractice, and discuss strategies to avoid malpractice claims.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6)	Discuss communication regarding change in maternal or fetal status. Outline current legal issues in OB care. Determine signs and symptoms of maternal and/or fetal compromise.
PC5 - Accelerating Safety through Simulation: Solutions and Roadmaps	Stacie Wood, MSN, BSN, RN Monique Brown Schoenhage, M.D., M.B.A., F.A.C.O.G Wendy McCracken, RGN, RM, BA (Hons) Ed, PGCE, CMS Instructor Debra Derck, BSN, RNC-OB,C-EFM Kristen Wilt, MSN, RN	Today’s healthcare professionals need sustainable solutions to solve complex problems in an evolving world. This engaging workshop will focus on improving patient safety through simulation-based training solutions. We will bridge novice and expert learners. Lightening rounds and small group discussions will allow for inclusivity, innovation, and inspiration. With a mission to improve patient safety and clinical performance, we will analyze and apply state of the art methodologies. Examine hot topics, engage in design solutions, and collaboratively problem solve. We will listen, support, educate, empower, and impact. You will leave with a roadmap and toolkit to operationalize and DELIVER results-oriented outcomes.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - N/A ONQS - Obstetric and Neonatal Quality and Safety (Code 28)	Develop expertise in healthcare quality improvement and simulation education as applied to patient safety. Discuss performance improvement methodologies as applied to improving patient safety.

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PC7 - Documentation Domination: How to Chart to Improve Patient Outcomes, Prevent Harm and Avoid Lawsuits	Jennifer Atkisson, MSN, RNC-OB, CNL	Do you want a framework for documenting according to the standard of care that you can apply to any situation? Do you want to chart in a way that improves patient outcomes, nurse satisfaction and helps prevent birth-related trauma? To stop worrying or second-guessing yourself about charting the “right” or “wrong” thing according to something you heard on TikTok? Join me for this 4 hour workshop to understand the nursing standard of care, the many purposes of documentation, how documentation does and DOES NOT affect lawsuits, and how documentation can actually help you keep patients safe and prevent birth-related trauma. Instead of being every nurses least favorite part of the shift that takes up too much time, we’ll see how to use it as a powerful nursing tool.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Participants will be able to apply a framework for documenting according to the standard of care to any inpatient situation Participants will be able to evaluate how the timing of can improve patient safety Participants will be able to connect documentation style to birth trauma prevention for patients
PC8 - Patients Who are Neurodivergent: Advocacy and Care Across the Lifespan	Lily Bastian, CNM Yasmin Senturias, MD Samuel Bauer, MD, FACOG Jennifer Wisdahl, Regina (Gina) Schumaker, NA Jeffrey Quinlan, MD, FAAFP	People who experience neurodiverse conditions have a wide range of strengths, needs, and challenges, especially in accessing health care. For many neurodivergent people, especially those who experience a fetal alcohol spectrum disorder (FASD), these needs and challenges may go unrecognized and unsupported because their neurodiversity is also unrecognized and unsupported, especially as they transition from childhood to adulthood and through other life milestones. During this four-hour workshop, representatives from FASD United, the American Academy of Pediatrics (AAP), the American College of Obstetrician-Gynecologists (ACOG), and the American Association of Family Physicians (AAFP) will host a panel presentation on working empathetically and effectively with people who experience neurodiverse conditions such as fetal alcohol spectrum disorders, how the presentation of FASDs changes across the lifespan, and best practices to support patient self-advocacy. Such conditions may affect their ability to advocate for themselves and their healthcare needs, to fully understand and follow the advice and counseling being provided by their healthcare provider, and to participate in their care. This panel presentation will be followed by an interactive, small-group review of case studies led by experts from each organization so that participants can identify and practice ways to support neurodiverse patients as they transition across points of care and ways to facilitate communication between points of care for people across the lifespan.	IAP - Professional Practice (Code 4) OB - Professional Practice (Code 6) MNN - Professional Practice (Code 4) LRN - Professional Practice (Code 5) NIC - Professional Practice (Code 4) NNP - Professional Practice (Code 5) WHNP - Professional Practice (Code 5)	Define fetal alcohol spectrum disorders and discuss effective strategies for preventing alcohol-exposed pregnancies and fetal alcohol spectrum disorders. Describe how FASDs can manifest in individuals in childhood, adolescence, or adulthood. Discuss effect strategies for supporting people with an FASD as they transition in care across the lifespan.