



# 2026 AWHONN CONVENTION

June 6-10 • Orlando, FL  
Disney's Coronado Springs Resort



NCC has reviewed and provided the maintenance codes for these AWHONN sessions - DO NOT change the assigned codes when submitting your maintenance application! Submitted codes that differ from their assigned codes will trigger a maintenance audit and will not be accepted.

| Presentation code / Contact hours | NCC Codes  | Title  | Presentation Type          | Description   | Presenters  | LEARNING OUTCOME  |
|-----------------------------------|--|--|----------------------------|---|---|---|
| <b>A1</b><br><br><b>1.25 CNE</b>  | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Evidence in Action: Nursing Research and EBP Committee Outcomes              | Podium Presentation        | This session showcases innovative research and evidence-based practice projects from AWHONN research grant awardees and EBP scholars. Presenters will briefly highlight their clinical questions, methods, key findings, and practice implications, promoting knowledge dissemination, collaboration, and the integration of research and evidence-based practice to improve care for women, pregnant people, and newborns. | Sam Bernstein (presenter), Beth Bufink (co-presenter), Lisa Grisham (co-presenter), Teri Mandrak (co-presenter), Meredith Elischer (co-presenter) | At the end of this educational session, learners will increase their knowledge of current research and evidence-based practice initiatives, including study methods, key findings, and clinical implications to support improved care for women, pregnant people, and newborns.   |
| <b>B1</b><br><br><b>1.0 CNE</b>   | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)   | JOGNN-NWH Joint Session: Writing and Reviewing for Scholarly Publications    | Podium Presentation        | Nurses contribute to innovation and evidence-based practice by being authors and peer reviewers for scholarly journals. But what makes a good article and a good review? How can your work move the needle? What should authors and reviewers know about diversity, equity, and inclusion? Editors from AWHONN's journals will answer these questions and more  | Collins Fantasia, Heidi (Presenter), Edmonds, Joyce (Presenter), Floyd James, Kortney (Presenter)   | At the end of this educational session, learners will increase their knowledge of scholarly publishing and peer review processes, including characteristics of effective manuscripts and reviews, and the integration of diversity, equity, and inclusion principles in nursing scholarship.  |
| <b>B2</b><br><br><b>1.0 CNE</b>   | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)   | AWHONN Public Policy Session: Medicaid's Evolving Role in Perinatal Outcomes | Podium Presentation        | This session will highlight the role Medicaid plays in supporting perinatal care, including specific requirements for Medicaid managed care plans and how policy changes might impact the way care is accessed and delivered.   | Kim Streit (Presenter)  | At the end of this educational session, learners will increase their knowledge of current healthcare policy issues impacting maternal care, including Medicaid and Medicare, maternal mental health, maternity care access, and strategies for advocacy at the individual, state, and national levels.  |
| <b>C1A</b><br><br><b>0.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | From Wristbands to Risk Reduction: Improving Postpartum Safety               | Microlearning Presentation | The ALPQC Postpartum Bracelet Pilot tested a low-cost intervention to improve recognition of postpartum complications. Findings revealed high patient acceptance, strong potential to improve outcomes, and critical gaps in emergency responder awareness. This session highlights nursing-led strategies for implementation, education, and statewide scaling to advance maternal safety.                                 | Ham, Lora (Presenter)   | By the end of this session, participants will be able to:1- Describe the effectiveness of postpartum alert bracelets in improving timely recognition of complications and supporting maternal safety.2- Analyze barriers and facilitators to implementing a postpartum bracelet program across hospital and emergency care settings.3- Apply nursing-led strategies for standardizing protocols and delivering targeted education to patients, ED staff, and EMS personnel. |



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| <p><b>C1B</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-IAP - Maternal and Fetal Physiology and Assessment (Code 1)<br/>RNC-OB - Pregnancy and Obstetric Complications (Code 3)<br/>RNC-LRN - General Management (Code 2)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br/>RNC-NIC - Physiology and Pathophysiology (Code 2)<br/>NNP-BC - General Management (Code 3)<br/>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)</p> | <p>Building Better Beginnings: Addressing Housing Instability and Maternal Mental Health to Improve Breastfeeding Outcomes</p>                              | <p>Microlearning Presentation</p> | <p>The purpose of this presentation is to examine the relationship among housing instability, antenatal depression, and breastfeeding outcomes using the Pregnancy Risk Assessment Monitoring System database. We will discuss housing stability and breastfeeding outcomes and review how depression moderates this relationship. Individual-level interventions and policy recommendations will be discussed.</p> | <p>Koerner, Rebecca (Presenter)</p>    | <p>At the end of this educational session, learners will understand how depression moderates the relationship between housing instability and breastfeeding outcomes.</p>  |
| <p><b>C2A</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>WHNP-BC - Professional Practice (Code 5)</p>  | <p>Reimagining Undergraduate Nursing Education: Building Cue Recognition Skills for Obstetric Emergencies through Competency-Based, Multimodal Learning</p> | <p>Microlearning Presentation</p> | <p>Discover innovative strategies to prepare future nurses for obstetric emergencies through competency-based education. This session explores how adaptive quizzing, virtual escape rooms, and simulation build cue recognition, clinical reasoning, and confidence—aligning with the American Association of Colleges of Nursing (AACN) 2021 Essentials to enhance maternal safety and student readiness.</p>     | <p>Nair, Nisha (Presenter)</p>         | <p>At the end of this educational session, learners will be able to describe how competency-based, multimodal teaching strategies—such as real-time interactive platforms, adaptive quizzing, virtual escape rooms, and simulation—enhance undergraduate nursing students' ability to recognize early cues and respond effectively to obstetric emergencies.</p>   |
| <p><b>C2B</b><br/><br/><b>0.25 CNE</b></p> | <p>C-OBE - Obstetric Emergencies (Code 30)<br/>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)<br/>WHNP-BC - Professional Practice (Code 5)</p>   | <p>Beyond the Bleed: Transforming Obstetric Safety Through Quality Improvement</p>  | <p>Microlearning Presentation</p> | <p>A hospital faced rise in postpartum hemorrhage (PPH) in 2024. In 2025, it launched a multidisciplinary initiative using evidence-based tools, education, and real-time data. By Q3, PPH rates dropped 33%. The program fostered accountability, standardized care, and improved maternal outcomes, supporting broader adoption of similar frameworks.</p>  | <p>Lane, Laura (Presenter)</p>         | <p>Describe the significance of postpartum hemorrhage (PPH) as a leading cause of preventable maternal morbidity and mortality. Identify key contributors to preventable PPH-related deaths, including delays in recognition and treatment. Discuss the multidisciplinary strategies implemented by the care team—including education, protocol updates, real-time feedback, and collaborative communication—that led to a significant reduction in postpartum hemorrhage rates.</p> |
| <p><b>C3A</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)</p>   | <p>Swaddles &amp; Subpoenas: Lessons from a Newborn Mock Deposition</p>   | <p>Microlearning Presentation</p> | <p>This microlearning session will highlight the development and implementation of a simulated mock deposition provided in a hybrid environment focused on neonatal care and documentation. Learner outcomes and lessons learned will be shared.</p>  | <p>Garifo, Laura (Presenter)</p>       | <p>At the end of this educational session, learners will have increased knowledge and skills to develop and implement simulated depositions related to neonatal care and documentation in their own facilities.</p>  |
| <p><b>C3B</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)</p>   | <p>Tips, Tricks...NRP</p>   | <p>Microlearning Presentation</p> | <p>NRP is an essential tool for labor and delivery, NICU, postpartum, and nursery teams—but how do we make it truly memorable? This session dives into creative, sometimes humorous, and always effective strategies that help staff retain key NRP concepts long after training ends. Let's make learning stick.</p>   | <p>Van Sadars, Kaitlyn (Presenter)</p> | <p>At the end of this education session, learners will be able to utilize acronyms and analogies to better understand NRP.</p>   |



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|                               | RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)  |  |                            |  |                                       |  |
| <b>C4A</b><br><b>0.25 CNE</b> | RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br>WHNP-BC - Normal Physiology and Wellness Management (Code 1)   | Reducing Repeat Teen Births Through Long-Acting Reversible Contraceptive Access                                  | Microlearning Presentation | Analysis of teen patients provided long-acting reversible contraceptives after birth at an academic medical center shows a positive effect on reducing second and higher-order births across the state. Projections suggest that these LARC placements may avert between 60 and 380 additional pregnancies among teens by the end of 2025. | Allbaugh-Murders, Erin (Presenter)    | By the end of this presentation, learners will be able to evaluate the impact of immediate postpartum (IPP) long-acting reversible contraceptive (LARC) access on reducing repeat teen births and apply this knowledge to inform future maternal health clinical practice and policy recommendations.                        |
| <b>C4B</b><br><b>0.25 CNE</b> | WHNP-BC - Professional Practice (Code 5)   | Implementing a Screening Mammogram Reminder System in a Family Practice Clinic: A Quality Improvement Initiative | Microlearning Presentation | The purpose of this Doctor of Nursing (DNP) evidence-based practice QI initiative was to improve breast cancer screening reminder rates by implementing an electronic and phone-call reminder system for screening mammograms for women aged 40 and older who are patients at a family practice clinic.                                    | Reynolds, Cori (Presenter)            | At the end of this educational session, learners will have increased knowledge of the importance of patient reminders for breast cancer screening and of how this reminder process was implemented in a family practice setting.   |
| <b>C5A</b><br><b>0.25 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Motivation, Morale, and the Power of Social Media in Connecting with our Newest Nurses                           | Microlearning Presentation | This microlearning session will highlight generational differences and challenges in supporting early-career nurses. A survey of successful team-building strategies will be highlighted, along with best practices for making space for humor and fun while respecting privacy and professionalism.                                       | Miller, Freida (Presenter)            | By the end of this session, the learner will identify resources for creative staff engagement projects.  |
| <b>C5B</b><br><b>0.25 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-MNN - Professional Practice (Code 4)<br>WHNP-BC - Professional Practice (Code 5)  | Using the patient experience to evaluate shared decision-making  | Microlearning Presentation | We will discuss the revised measure of the Childbirth Options Information and person-Centered Education (CHOICES). Information on how the measure has been improved and where it is currently being implemented will be shared.  | Breman, Rachel Blankstein (Presenter) | At the end of the session, learners will have knowledge of the revised CHOICES measure and its application to prenatal and intrapartum care. At the end of the session, learners will have knowledge of the value to understanding the patient experience in intrapartum care through a patient reported experience measure. |
| <b>C6A</b><br><b>0.25 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Black Women's Perceptions of Race-concordant Midwifery Care and Homebirth: Liberation in Labor                   | Microlearning Presentation | Racial disparities in perinatal health continue to drive negative outcomes for Black women in the United States, often due to low-quality perinatal care. This study explored Black women's experiences of pregnancy and homebirth with race-concordant certified nurse-midwives and their perceptions of care quality.                    | Navarro, Kimberly (Presenter)         | At the end of this educational session, learners will: (1) understand how Black women define high-quality perinatal care, (2) understand the importance of race-concordant, culturally respectful midwifery care, (3) understand Black women's perceptions of perinatal care quality.  |



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| <p><b>C6B</b></p> <p><b>0.25 CNE</b></p>       | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p> | <p>Southern Maternal Morbidity Disparities</p>   | <p>Microlearning Presentation</p> | <p>This presentation examines maternal mortality disparities affecting women in Southern states compared to other regions. Highlighting differences in mortality rates, poverty, education, mental health, and healthcare access, it underscores the urgent need for region-specific strategies to reduce preventable deaths and promote equity in maternal health outcomes.</p>   | <p>Hale, Vanessa (Presenter)</p>  | <p>Participants will gain an in-depth understanding of the disparities in maternal mortality affecting women in Southern states compared to other U.S. regions, enabling them to identify opportunities for targeted strategies that reduce preventable deaths and promote equity in maternal health outcomes. Learning Objectives: Compare maternal mortality ratios in Southern states with those in lower-risk regions to highlight geographic disparities in women's health outcomes. Examine contributing factors such as poverty, education, mental health, and healthcare system performance that disproportionately affect Southern women. Identify region-specific policy and practice opportunities to reduce maternal mortality and improve equity in maternal health across state lines.</p> |
| <p><b>CE1 (M/T)</b></p> <p><b>1.25 CNE</b></p> | <p>C-OBE - Obstetric Emergencies (Code 30)<br/><br/>RNC-IAP - Obstetric and Medical Complications in Pregnancy (Code 2)<br/>RNC-OB - Pregnancy and Obstetric Complications (Code 3)<br/>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)</p>                                    | <p>Spectrum of Care for Placenta Accreta Spectrum (PAS)</p>                                      | <p>Clinical Excellence</p>        | <p>Placenta Accreta Spectrum (PAS) involves abnormal placental attachment, requiring a multidisciplinary, regionalized care approach. Nurses play a vital role in supporting patients and families. Ongoing simulation and education strengthen team readiness, ensuring safe, coordinated care and improved outcomes for those affected by this complex obstetric condition.</p>  | <p>Fox, Karin (Presenter)</p>   | <p>At the end of this educational session, learners will increase their knowledge of the multidisciplinary management of placenta accreta spectrum, including the nurse's role in coordinated care, patient and family support, and strategies to improve team readiness and patient outcomes.</p>   |
| <p><b>CE2 (M/T)</b></p> <p><b>1.25 CNE</b></p> | <p>C-EFM - Electronic Fetal Monitoring (Code 11)<br/>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>WHNP-BC - Professional Practice (Code 5)</p>  | <p>The NEST: Our Virtual Nursing Center for EFM</p>  | <p>Clinical Excellence</p>        | <p>Explore how the NEST approach revolutionizes virtual electronic fetal monitoring (EFM) interpretation and management. This session addresses development challenges, integration strategies, and core components for establishing a virtual nursing center. Learn how this innovative model enhances collaboration and improves neonatal outcomes through timely, expert-driven EFM oversight.</p>  | <p>Haas, Cristina (Presenter), Hicks, Crystal (Presenter), Miller, Lisa (Presenter)</p> | <p>At the end of this educational session, learners will increase their knowledge of virtual electronic fetal monitoring models, including the NEST approach, implementation strategies, and the role of centralized monitoring in improving collaboration and neonatal outcomes.</p>  |
| <p><b>CE3 (M/T)</b></p> <p><b>1.25 CNE</b></p> | <p>C-ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7)<br/>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)</p>   | <p>High Tech v. Human Tech impact on Teamwork and Team Performance in Neonatal Resuscitation</p> | <p>Clinical Excellence</p>        | <p>The talk explores the interplay between human factors and technological tools in neonatal resuscitation, drawing on research, simulation-based studies, and neonatal resuscitation guidelines. It highlights the importance of teamwork behaviors to enhance resuscitation outcomes. The presentation also examines the impact of team size, decision support tools, and standardized protocols, while addressing challenges such as noncompliance and errors in high-stakes resuscitation scenarios.</p> | <p>Sundgren, Nathan (Presenter)</p>   | <p>At the end of this educational session, learners will increase their knowledge of the role of human factors and technology in neonatal resuscitation, including teamwork behaviors, decision support tools, and strategies to reduce errors and improve outcomes in high-stakes scenarios.</p>  |



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| <b>CE4 (M/T)</b><br><br><b>1.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br>C-RHI - Reproductive Health and Infertility (Code 29)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-MNN - Professional Practice (Code 4)<br>WHNP-BC - Professional Practice (Code 5)   | Reproductive Justice in Nursing: Beyond Health and Rights | Clinical Excellence | Explore the origins and meaning of reproductive justice, distinguishing it from reproductive health and reproductive rights. This session highlights its relevance to nursing practice and calls nurses to action as advocates for equity. Learn how to integrate justice principles into care, education, and policy to advance inclusive, patient-centered reproductive health.   | Crear-Perry, Joia (Presenter)     | At the end of this educational session, learners will increase their knowledge of reproductive justice principles, including the distinction from reproductive health and rights, and their application in nursing practice, advocacy, and equitable, patient-centered care.                                |
| <b>CE5 (M/T)</b><br><br><b>1.25 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)   | People, Policy, & The Power of a Personal Story           | Clinical Excellence | <p>Personal stories have immense power to shape healthcare policy. In this polarizing, rapidly changing policy climate, nurses, with their unique experiences, are in a prime position to leverage this power and influence policy decisions. As the nation's largest healthcare profession, nurses have earned the reputation of being the most trusted profession for over two decades. Nurses have an unparalleled opportunity to use their voice and demonstrate to policymakers how policy affects people.</p> <p>This session will explore the intersection of nursing and policy with a focus on issues affecting patients in rural communities. Participants will examine critical topics such as access to care, emerging trends in telehealth, the implications of changes under HR 1, and practical strategies, rooted in personal storytelling, to close care gaps and improve health outcomes in marginalized and under-resourced communities.</p> | Pendergrass, Danielle (Presenter) | At the end of this educational session, learners will increase their knowledge of the role of nursing in healthcare policy and advocacy, including the use of personal storytelling to influence policy decisions, address rural health disparities, and improve access to care in underserved communities. |
| <b>CE6 (M/T)</b><br><br><b>1.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Measuring the Impact of Change                            | Clinical Excellence | As we navigate constant updates, new technologies, shifting policies and evolving patient needs, CHANGE is constant. How do we measure the value of change initiatives? Come to learn how to determine measurable outcomes appropriate to the planned change. Whether they are patient, employee, organizational and/or economic outcomes, they demonstrate the impact of change.   | Opperman, Cathleen (Presenter)    | At the end of this educational session, learners will increase their knowledge of measuring the impact of change initiatives, including identifying and evaluating patient, employee, organizational, and economic outcomes.  |



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| <p><b>D1</b><br/><br/><b>1.0 CNE</b></p> | <p>C-OBE - Obstetric Emergencies (Code 30)<br/><br/>RNC-OB - Postpartum (Code 4)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)</p>   | <p>Bridging the Gap: Applying Trauma Resuscitation Principles to Postpartum Hemorrhage</p>        | <p>Podium Presentation</p> | <p>This session explores trauma resuscitation principles, including massive transfusion protocol (MTP) and balanced blood replacement, to severe postpartum hemorrhage care. Learn how trauma-based strategies for rapid assessment, MTP activation, team coordination, and blood product management could improve outcomes and strengthen obstetric emergency response for severe postpartum hemorrhage.</p> | <p>Rankin, Jamin (Presenter), Rankin, Carly (Co-Presenter)</p>    | <p>At the end of this educational session, learners will be able to apply evidence-based trauma resuscitation principles, including massive transfusion protocol, calcium replacement, active temperature management, and other advanced hemorrhage control strategies such as REBOA, to improve the recognition, response, and management of severe postpartum hemorrhage in obstetric settings.</p> |
| <p><b>D2</b><br/><br/><b>1.0 CNE</b></p> | <p>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)<br/>WHNP-BC - Professional Practice (Code 5)</p>  | <p>Improving Postpartum Follow-up with Home Phone Calls</p>                                       | <p>Podium Presentation</p> | <p>Describe implementation of postpartum home phone calls to improve knowledge of the post-birth warning signs, compliance with wearing an I GAVE BIRTH bracelet and improving attendance at postpartum office visits. Share quantitative data about attendance at postpartum appointments and qualitative examples of the success of the project.</p>  | <p>Blessman, Andrea (Presenter), Mayhew, Sara (Presenter)</p>     | <p>The participants will be able to describe the important components of postpartum home phone calls to improve patient awareness of post-birth complications and attendance at postpartum visits.</p>  |
| <p><b>D3</b><br/><br/><b>1.0 CNE</b></p> | <p>C-ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7)<br/><br/>RNC-NIC - General Assessment and Management (Code 1) [for CCA's taken <b>before</b> Jan 1, 2025]<br/>RNC-NIC - Physiology and Pathophysiology (Code 2) [for CCA's taken <b>on/after</b> Jan 1, 2025]<br/>NNP-BC - Embryology, Physiology, Pathophysiology, and Systems Management (Code 2)</p> | <p>A Pathogen Pursuit: Catching Signs of Sepsis in the Neonate</p>                                | <p>Podium Presentation</p> | <p>This engaging presentation takes the learner on a detective hunt, with a goal of learning about the third leading cause of neonatal death, neonatal sepsis. There will be discussions about signs/symptoms, pathophysiology, tools to detect and treatment plans for sepsis.</p>   | <p>Herman, Melissa (Presenter), Davis, Nichole (Co-Presenter)</p> | <p>The aim of this presentation is for the learner to increase their knowledge on neonatal sepsis and to improve earlier detection rates among the medical care team.</p>   |
| <p><b>D4</b><br/><br/><b>1.0 CNE</b></p> | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)<br/>WHNP-BC - Professional Practice (Code 5)</p>   | <p>Could She Have Lived? Addressing the Cost of Gender Disparities in Women's Health</p>          | <p>Podium Presentation</p> | <p>Gender disparities in healthcare result in delayed diagnoses, substandard care, and increased mortality for women. This systematic review highlights systemic bias across specialties and calls nurses to lead reform, center women's voices, and advance structural change that makes equity the norm, not the exception.</p>   | <p>Dougherty, Emily (Presenter), Nelson, Adrienne (Presenter)</p> | <p>By the end of this presentation, participants will be able to recognize how systemic gender bias contributes to disparities in women's healthcare and increase their awareness of the role nurses play in identifying, addressing, and challenging these inequities in clinical practice.</p>  |
| <p><b>D5</b><br/><br/><b>1.0 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)<br/>WHNP-BC - Professional Practice (Code 5)</p>   | <p>I'm Not "just a nurse," I'm a Disruptor: Leading Countercultural Change Without Permission</p> | <p>Podium Presentation</p> | <p>Ready to stop waiting for permission to change perinatal care? Join us as we collectively confront our discomfort and leverage each of our unique nurse avatar personas. You'll develop a personal countercultural blueprint to harness your own strengths, overcome common systemic barriers, and step into your role as an advocate.</p>   | <p>Irby, Mandy (Co-Presenter), Runyon, Maggie (Co-Presenter)</p>  | <p>Upon completion of this session, participants will be able to build their individual capacity to lead a counterculture and thereby embody Respectful Maternity Care.</p>   |



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| <p><b>D6</b><br/><b>1.0 CNE</b></p> | <p>C-OBE - Obstetric Emergencies (Code 30)<br/>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)</p>  | <p>Strength in Collaboration: How RN–MD Co-Leadership Transformed Obstetric Safety Through Simulation</p> | <p>Podium Presentation</p> | <p>This presentation highlights how a collaborative Nurse–Physician simulation leadership model improved postpartum hemorrhage response, strengthened interdisciplinary teamwork, and achieved measurable reductions in blood transfusions and hysterectomies within one year.</p>  | <p>Lawani, Phyllis (Presenter), Morales, Cheniqua (Presenter)</p>     | <p>At the end of this session, participants will be able to: Demonstrate increased understanding of how interdisciplinary simulation enhances teamwork, communication, and readiness for obstetric emergencies. Describe how an RN–MD co-leadership model fosters psychological safety and sustained engagement in simulation-based learning.</p> |
| <p><b>E1</b><br/><b>1.0 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-MNN - Professional Practice (Code 4)<br/>WHNP-BC - Professional Practice (Code 5)</p>   | <p>A Mother's Safety Net: The ED-L&amp;D Hypertension Alliance</p>  | <p>Podium Presentation</p> | <p>When a mother's blood pressure is in the severe range, there's no room for error. We replaced complex charts with a simple red-yellow-green system for immediate treatment protocols. Discover how this visual tool and hands-on drills empower the ED and create a vital safety link with L&amp;D.</p>  | <p>Lance, Stephanie (Presenter), Colabella, Nicole (Co-Presenter)</p> | <p>At the end of this educational session, learners will be able to identify the essential steps for developing and implementing a collaborative ED-L&amp;D protocol, including a visual algorithm and simulation drills, to improve outcomes for maternal hypertensive emergencies.</p>  |
| <p><b>E2</b><br/><b>1.0 CNE</b></p> | <p>C-RHI - Reproductive Health and Infertility (Code 29)<br/>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p> | <p>Beyond the Checklist: Empowering Nurses in Perinatal Bereavement Care</p>                              | <p>Podium Presentation</p> | <p>This session will empower nursing professional development practitioners and obstetrical leaders with practice strategies to design and sustain an immersive, supportive approach to bereavement education and care in the clinical setting. Participants will explore tools to strengthen nurse comfort, confidence, and communication skills while promoting compassionate, patient-centered care for grieving</p> | <p>Burdsall, Taylor (Presenter), Kalka, Megan (Presenter)</p>         | <p>At the end of this educational session, learners will: Collaboratively design and implement methods that support nurses' confidence and skill, while providing compassionate, safe care for patients facing obstetrical loss.</p>  |
| <p><b>E3</b><br/><b>1.0 CNE</b></p> | <p>C-ELBW - Care of the Extremely Low Birth Weight Neonate (Code 7)<br/>C-NNIC – Neonatal Neuro-Intensive Care (Code 20)</p> <p>RNC-OB - Newborn (Code 5)<br/>RNC-LRN - General Management (Code 2)<br/>RNC-MNN - Newborn Assessment, Management and Complications (Code 3)<br/>RNC-NIC - General Assessment and Management (Code 1)<br/>NNP-BC - General/Physical Assessment (Code 1)</p>  | <p>Two Hours and Ten Tiny Toes</p>  | <p>Podium Presentation</p> | <p>An exploration of the remarkable physiological transformations newborns experience as they transition from womb to world, emphasizing the critical first two hours. This overview highlights both typical adaptations and the identification of complex or maladaptive responses that may signal early challenges in neonatal health and development.</p>  | <p>Van Saders, Kaitlyn (Presenter), Day, Caroline (Co-Presenter)</p>  | <p>Learners will be able to describe the key physiological adaptations that occur as a newborn transition from intrauterine to extrauterine life, and critically assess signs of complex or maladaptive responses within the first two hours post-birth.</p>  |
| <p><b>E4</b></p>                    | <p>WHNP-BC - Professional Practice (Code 5)</p>   | <p>Improving Human Papillomavirus Vaccine Rates</p>   | <p>Podium Presentation</p> | <p>Human Papillomavirus (HPV) is the leading cause of cervical cancer, and the most common sexually transmitted infection affecting up to 80% of women in their lifetime. The goal is to bridge gaps in care and</p>  | <p>DeLeon, Laura (Presenter), Hill, Andrea</p>                        | <p>The goal of this quality improvement project is to bridge gaps in care and promote healthcare provider knowledge, resulting in</p>   |



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| <b>1.0 CNE</b>              |  | in Women's Health Utilizing an Evidence-Based Protocol  |                     | promote healthcare provider knowledge, resulting in the increased administration of the HPV vaccine   | (Co-Presenter)   | the increased administration of the HPV vaccine and decreased cervical cancer risk, which is the desired outcome   |
| <b>E5</b><br><b>1.0 CNE</b> | C-OBE - Obstetric Emergencies (Code 30)<br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)                      | Substance Use During Pregnancy & Mandatory Reporting: The History and the Science             | Podium Presentation | In just two years, over 400 pregnant people were charged with crimes related to their pregnancy, pregnancy loss, or birth. The vast majority of these charges were related to substance use during pregnancy. How can nurses best support pregnant patients who use substances while fighting back against their criminalization?   | Paulk, Lauren (Presenter), McLemore, Monica (Co-Presenter) | At the end of this session, learners will: 1. Increase knowledge on how the history of how mandatory reporting came to be 2. Explain the current science around substance use during pregnancy and how nurses can engage with that science 3. Identify current racial and class bias in mandatory reporting 4. Explain what might happen to a family after a report is made 5. Increase knowledge around how to find the law in their state around testing and reporting 6. Discuss methods health care providers can use to best support patients who are pregnant or parenting while using substances. |
| <b>E6</b><br><b>1.0 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Checklist Use in Perinatal Care: Enhance Equity & Reduce Morbidity and Mortality              | Podium Presentation | This presentation explores the history and use of checklists in perinatal care, examines biases against their use, and highlights how consistent, evidence-based checklist implementation improves equity and reduces maternal and neonatal morbidity and mortality. Will also provide an overview of implementation, provide a sample template & support roll-out.                             | Carmody, Justine (Presenter)                               | Identify how checklist use enhances patient safety & reduce maternal morbidity & mortality List three perinatal clinical situations that benefit from checklist use Identify how checklist use in perinatal care support teamwork and a shared mental model Discuss how equity is enhanced with reliable checklist implementation  |
| <b>F1</b><br><b>1.0 CNE</b> | C-EFM - Electronic Fetal Monitoring (Code 11)<br>RNC-OB - Fetal Assessment (Code 1)<br>RNC-IAP - Maternal and Fetal Physiology and Assessment (Code 1)   | Stop Interrupting Me!   | Podium Presentation | This interactive session explores the fetal oxygen pathway and its role in fetal monitoring interpretation. Through case studies and real-time audience engagement, participants will identify oxygenation disruptions, apply targeted interventions, and examine outcomes—enhancing clinical decision-making and promoting equitable, evidence-based care during labor.                        | Rodriguez, Allison (Presenter)                             | Participants will be able to identify potential interruptions in the fetal oxygen pathway, interpret fetal heart rate tracings in context, and apply appropriate clinical interventions to improve fetal oxygenation during labor.   |
| <b>F2</b><br><b>1.0 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br>RNC-OB - Professional Practice (Code 6)<br>WHNP-BC - Professional Practice (Code 5)  | Bridging Gaps in Rural Maternal Safety: OB-ED Simulation Training Results and Lessons Learned | Podium Presentation | This session showcases an innovative OB-ED simulation program designed for rural hospitals without obstetric services. Using a custom curriculum and team-based scenarios, the program improved provider confidence, teamwork, and emergency readiness. Participants will explore results, curriculum design, and strategies to replicate this quality improvement model in their own settings. | Alvarado, Jacquelyn (Presenter)                            | At the end of this educational session, participants will be able to apply evidence-based simulation strategies to improve emergency department preparedness and interprofessional collaboration for obstetric emergencies in rural settings.  |



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| <p><b>F3</b><br/><br/><b>1.0 CNE</b></p>   | <p>C-NNIC – Neonatal Neuro-Intensive Care (Code 20)<br/>C-NPT - Neonatal Pediatric Transport (Code 27)<br/><br/>RNC-LRN - Assessment and Management of Pathophysiological Conditions (Code 3)<br/>RNC-NIC - Physiology and Pathophysiology (Code 2)<br/>NNP-BC - Embryology, Physiology, Pathophysiology and Systems Management (Code 2)</p>         | <p>From Delivery to Recovery: Updates to Nursing Practice for Hypoxic Ischemic Encephalopathy</p>        | <p>Podium Presentation</p>        | <p>This session explores nursing strategies in HIE care—from recognizing perinatal risk factors to implementing therapeutic hypothermia, seizure monitoring, and family-centered support. Attendees will gain evidence-based updates, practical assessment tools, and interprofessional approaches to optimize outcomes for affected infants while addressing the profound clinical and societal impacts of HIE.</p>            | <p>Miller, Deidre (Presenter)</p>                                  | <p>Identify perinatal risk factors, clinical signs, and neuro-assessment findings that indicate hypoxic ischemic encephalopathy (HIE) and explain the rationale for initiating therapeutic hypothermia. Apply evidence-based nursing interventions—including seizure recognition, family-centered support, and structured handoff communication—to improve outcomes and continuity of care for infants with HIE.</p> |
| <p><b>F4</b><br/><br/><b>1.0 CNE</b></p>   | <p>C-OBE - Obstetric Emergencies (Code 30)<br/><br/>RNC-OB - Postpartum (Code 4)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br/>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)</p>   | <p>Postpartum Hypertension: Uncovering the Gaps in Recognition, Management, and Maternal Outcomes</p>    | <p>Podium Presentation</p>        | <p>This session addresses critical gaps in postpartum hypertension care and its connection to long-term cardiovascular risk. Highlighting the presenter's work in cardiometabolic risk assessment and postpartum cardiovascular management, nurses will engage in case-based and problem-solving activities to apply best practices, strengthen discharge planning, and improve outcomes for high-risk postpartum patients.</p> | <p>McCoy, Sharmaine M. (Presenter)</p>                             | <p>Participants will be able to identify key gaps in postpartum hypertension management, recognize early warning signs in high-risk patients, and apply evidence-based nursing interventions to improve cardiovascular outcomes during the postpartum period.</p>  |
| <p><b>F5</b><br/><br/><b>1.0 CNE</b></p>   | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p>                          | <p>Red Flags &amp; Green Flags: Research Literacy for the Bedside Nurse</p>                              | <p>Podium Presentation</p>        | <p>Not all research is created equal. Learn to spot red and green flags, identify bias, and decide whether findings truly apply to your patients. This session simplifies research literacy so bedside nurses can read studies with confidence, discern quality evidence from shaky evidence and strengthen their voice in clinical decision-making.</p>  | <p>Atkisson, Jen (Presenter), Floyd James, Kortney (Presenter)</p> | <p>At the end of this educational session, learners will have an increase in knowledge and confidence in recognizing red and green flags in research, interpreting study quality, and applicability of evidence to bedside nursing practice.</p>   |
| <p><b>F6</b><br/><br/><b>1.0 CNE</b></p>   | <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p>                          | <p>Mentorship in Nursing: Strategies and Toolkits for a Successful Unit Implementation</p>               | <p>Podium Presentation</p>        | <p>Mentorship is broadly recognized as a valuable approach to support new and transitioning staff into the workplace. The post-pandemic healthcare arena is now more than ever before challenged by the availability and retention of staff. Learn about the strategies and toolkits available to support a successful mentorship program implementation at your worksite.</p>  | <p>Breslin, Theresa (Presenter), Copple, Sarah (Co-Presenter)</p>  | <p>At the end of this presentation learners will be equipped with the passion, knowledge and expertise to initiate and sustain a successful nurse mentorship at their worksite.</p>  |
| <p><b>G1A</b><br/><br/><b>0.25 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)</p> | <p>One Enterprise, One Standard: Building Unified Perinatal Practices Across a Multi-Hospital System</p> | <p>Microlearning Presentation</p> | <p>This microlearning session explores how perinatal nurse leaders unified practices across a multi-hospital system through shared leadership, collaboration, and data-driven standardization. Participants will gain practical insights on aligning policies, workflows, and education to improve safety, reduce variation, and strengthen systemwide performance within a “One Enterprise, One Standard” framework.</p>       | <p>Barwick, Laurel (Presenter), Alami, Ida (Co-Presenter)</p>      | <p>Participants will be able to describe strategies for implementing systemwide standardization of perinatal practices, identify methods to align policies and workflows across multiple hospitals, and apply collaborative leadership principles to improve safety, quality, and equity in perinatal care.</p>  |



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|                               | WHNP-BC - Professional Practice (Code 5)   |  |                            |  |                                |   |
| <b>G1B</b><br><b>0.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)  | The Value of the OB Nurse Navigator  | Microlearning Presentation | This microlearning will focus on the role of the OB nurse navigator as the new age Perinatal Case Manager. It will emphasize the role's contribution to bundle compliance for MI AIM as well as the successful completion of Maternal Levels of Care for all three DMC birthing hospitals.   | Ladouceur, Madonna (Presenter) | At the end of this session, learners will have a greater understanding of the role of the OB Nurse Navigator, the contributions the role has to bundle compliance, and the value the position brings to quality improvement in the area of Perinatal Health.  |
| <b>G2A</b><br><b>0.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5) | Enhancing Communication in Obstetrics: Developing a Multidisciplinary OB TeamSTEPPS Program        | Microlearning Presentation | This presentation will focus on learning strategies and engagement activities to enhance communication. A multidisciplinary audience required creative strategies to engage each learner's needs.  | Stricklin, Melaney (Presenter) | At the end of this education session, learners will have an increased knowledge of how to develop a communication course for a multidisciplinary team.  |
| <b>G2B</b><br><b>0.25 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)   | When Words Matter: The AFE Communication Framework in Severe Maternal Events                       | Microlearning Presentation | This mini session introduces the AFE Communication Framework, a survivor-informed, trauma-sensitive model for communicating during and after severe maternal events. Grounded in lived experience and nursing best practice, the session provides quick, actionable tools to improve clarity, compassion, and consistency in communication with patients, families, and interdisciplinary teams. | Summers, Kayleigh (Presenter)  | Participants will be able to apply the AFE Communication Framework to enhance trauma-informed, patient- and family-centered communication during and after severe maternal events.  |
| <b>G3A</b><br><b>0.25 CNE</b> | RNC-OB - Newborn (Code 5)<br>RNC-LRN - General Management (Code 2)<br>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br>RNC-NIC - General Assessment and Management (Code 1)<br>NNP-BC - General Management (Code 3)   | Feeding with Confidence: A Hospital-Based Initiative to Extend Donor Milk Support Beyond Discharge | Microlearning Presentation | The Donor Milk to Go program provides pasteurized donor milk at hospital discharge to support exclusive breastfeeding. Implemented in a postpartum setting, it led to an 11% increase in exclusive breast milk feeding and reduced formula use. Families reported high satisfaction and greater confidence in their feeding plans.   | Pavsic, Joy (Presenter)        | At the end of this educational session, learners will be able to Explain the structure and workflow of the Donor Milk To Go Program, including eligibility, distribution, and safety protocols. Identify the benefits of donor milk use in supporting early feeding goal efforts and reducing formula exposure in the immediate postnatal period. Evaluate the impact of the program on parental satisfaction, exclusive human milk feeding outcomes, and discharge planning efficiency. Discuss strategies for implementing donor milk supplementation programs in other well newborn care settings. |



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| <p><b>G3B</b><br/><br/><b>0.25 CNE</b></p> | <p>C-NNIC – Neonatal Neuro-Intensive Care (Code 20)<br/>C-NPT - Neonatal Pediatric Transport (Code 27)<br/><br/>RNC-LRN - Assessment and Management of Pathophysiological Conditions (Code 3)<br/>RNC-NIC - Physiology and Pathophysiology (Code 2)<br/>NNP-BC - Embryology, Physiology, Pathophysiology and Systems Management (Code 2)</p> | <p>Total Body Cooling: Let's Chip Away this Iceberg</p>   | <p>Microlearning Presentation</p> | <p>This presentation will discuss the timing of therapeutic hypothermia related to better outcomes, and a dive into the pathophysiology of neonatal Hypoxic-Ischemic Encephalopathy (HIE.)<br/>Look into the acute and long-term outcomes of total body cooling treatment. Discuss the importance of timing for total body cooling.</p>  | <p>Herman, Melissa (Presenter)</p>                                  | <p>At the end of this educational event, learners will increase their knowledge about the timing of therapeutic hypothermia related to better outcomes. Learners will also, gain a better understanding of the pathophysiology of neonatal Hypoxic-Ischemic Encephalopathy (HIE.)</p>   |
| <p><b>G4A</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-IAP - Maternal and Fetal Physiology and Assessment (Code 1)<br/>RNC-OB - Pregnancy and Obstetric Complications (Code 3)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br/>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)</p>                               | <p>Beyond the Standard: A Collaborative Care Model for Perinatal Women to Reduce Morbidity and Establish a Mental Health Safety Net</p> | <p>Microlearning Presentation</p> | <p>This project proposes a systemic evaluation of routine, universal mental health screening integrated with a collaborative care model against standard OB practice. The goal is to measure improved detection, treatment initiation, and a significant reduction in maternal morbidity for perinatal women.</p>  | <p>Wintersteen, Ashley (Presenter)</p>                              | <p>The learning outcome of this project is to prove that implementing routine universal mental health screening with integrated collaborative care is more effective than standard obstetric care at improving the health journey for perinatal women experiencing mood disorders.</p>  |
| <p><b>G4B</b><br/><br/><b>0.25 CNE</b></p> | <p>RNC-OB - Postpartum (Code 4)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br/>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)</p>  | <p>Bridging the Gap: Trust and Empathy as Catalysts for Accurate Postpartum Depression Screening</p>                                    | <p>Microlearning Presentation</p> | <p>This mixed-methods study explored how trust and empathy influenced maternal disclosure of postpartum depression symptoms during EPDS screening. Findings revealed changes in EPDS scores, key language patterns, and provider practices, offering actionable strategies to improve screening accuracy, reduce stigma, and support equitable perinatal mental health care.</p> | <p>Castellano, Christina (Presenter), Swain, Ashley (Presenter)</p> | <p>At the end of this educational session, learners will be able to explain how trust and empathy influence maternal disclosure of postpartum depressive symptoms and apply evidence-based strategies to improve EPDS screening accuracy, reduce stigma, and support timely mental health interventions in perinatal care settings.</p>   |
| <p><b>G5A</b><br/><br/><b>0.25 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br/><br/>RNC-OB - Professional Practice (Code 6)</p>   | <p>Decreasing Primary Cesarean Section Rates within a Labor and Delivery Unit</p>   | <p>Microlearning Presentation</p> | <p>This quality improvement project aimed to reduce Nulliparous, Term, Singleton, Vertex (NTSV) cesarean rates from 29.8% to below the Healthy People 2030 California goal of 25.1%. Through evidence-based interventions, provider feedback, case reviews, laborist support, and nursing education, rates declined to 20.8%, improving maternal safety and outcomes.</p>        | <p>Ringo, Nicole (Presenter)</p>                                    | <p>At the end of this educational session, learners will: Define the NTSV (Nulliparous, Term, Singleton, Vertex) cesarean birth measure and explain its significance in maternal-child health quality improvement. Describe the evidence-based rationale behind reducing primary cesarean rates and its alignment with the goals of CMQCC, the Joint Commission, and Healthy People 2030. Describe key strategies implemented at USC Arcadia Hospital to reduce NTSV cesarean rates, including provider-specific feedback, fetal heart tracing reviews, laborist model utilization, and targeted nursing education. Interpret the</p> |



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|                               |  |   |                            |  |                              | outcomes of the project, including the reduction in NTSV cesarean rates and progress toward surpassing state and national benchmarks. Evaluate the impact of data transparency, structured case reviews, and interprofessional collaboration on promoting safe vaginal birth practices.  |
| <b>G5B</b><br><b>0.25 CNE</b> | RNC-IAP - Obstetric and Medical Complications in Pregnancy (Code 2)<br>RNC-OB - Labor and Birth (Code 2)<br>RNC-MNN - Pregnancy, Birth Risk Factors and Complications (Code 1)   | Utilizing specific positions to help reduce NTSV cesarean section rate  | Microlearning Presentation | A retrospective study was done reviewing positions utilized post epidural placement, specifically side-lying release, Froggy Walcher’s, and flying cowgirl positions. Authors review results of the study, risk factors, and discuss physiological positioning that can help decrease the risk of dystocia due to failure to dilate.                               | McLain, Sharon (Presenter)   | At the end of this session, learners will be able to identify risks factors for cesarean section in the NTSV population and identify how physiological positioning can help decrease risk of failure to dilate.  |
| <b>G6A</b><br><b>0.25 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)  | The Birth Bridge Project: Outreach, Education, and Simulation Linking Community Midwives with Hospitals   | Microlearning Presentation | What happens when a tertiary hospital bridges the gap with community midwives? Discover how one perinatal outreach team turned rising out-of-hospital complications into collaboration—through creative “Midwife Mingles,” simulation drills, and a simple SBAR “Bridge Process” that transformed trust, communication, and outcomes across birth settings.        | Lasiter, Marci (Presenter)   | At the end of this educational session, learners will have increased knowledge and confidence in implementing collaborative outreach strategies—including communication tools, education, and simulation—to strengthen partnerships between hospitals and community midwives, promote earlier recognition of complications, and improve the safety and timeliness of maternal transfers. |
| <b>G6B</b><br><b>0.25 CNE</b> | RNC-IAP - Obstetric and Medical Complications in Pregnancy (Code 2)<br>RNC-OB - Pregnancy and Obstetric Complications (Code 3)<br>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2) | The impact of language barriers, social determinates of health, and implicit bias in making the diagnosis of Wernicke’s encephalopathy in pregnancy | Microlearning Presentation | Language and socioeconomic differences, and implicit bias may delay a diagnosis for a patient. This describes the care of a pregnant Haitian immigrant with nausea and vomiting presumed to have cholecystitis. After an extended delay, she was diagnosed with severe hyperemesis gravidarum leading to Wernicke’s encephalopathy related to thiamine deficiency. | Schmitt, Maureen (Presenter) | At the end of this educational session, learners will understand the risk of thiamine deficiency resulting from untreated hyperemesis gravidarum, which can lead to Wernicke’s encephalopathy, with the potential for Korsakoff syndrome, a chronic neurologic condition.  |



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| <p><b>H1</b></p> <p><b>0.25 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-OB - Professional Practice (Code 6)</p>  | <p>The Delivery Room Gets a Download: OB Skills Day Reimagined</p>   | <p>Microlearning Presentation</p> | <p>This presentation showcases a flipped classroom model in a high-fidelity simulation center, led by unit staff nurses and obstetricians. Through prework and realistic, continuous maternity care scenarios, learners engage in immersive, interdisciplinary training that strengthens clinical readiness, communication, and continuity of care in complex obstetrical emergencies.</p> | <p>Dempsey, Rebecca (Presenter), Lowry, Jacqueline (Presenter)</p> | <p>By the end of this session, participants will be able to: 1. Explain how the flipped classroom model enhances realism, engagement, and interdisciplinary collaboration in simulation-based maternity care training. 2. Describe the use of artificial intelligence (AI) to generate realistic, continuous patient scenarios and streamline simulation schedule development. 3. Apply prework strategies—including policy review, video instruction, and procedural checklists—to improve clinical decision-making and team communication during simulation. 4. Demonstrate how simulation scenarios can reflect the full continuum of obstetrical care, from labor and delivery through emergent operating room interventions. 5. Evaluate simulation program outcomes using participant feedback, performance metrics, and scenario fidelity to inform future training improvements.</p> |
| <p><b>H2</b></p> <p><b>0.25 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p> | <p>Progress through Play: A Gamified Approach to Implicit Bias Training in Nursing Orientation</p>               | <p>Microlearning Presentation</p> | <p>This project describes gamified implicit bias training which is delivered to nurses during specialty orientation. Identifying, addressing, and dismantling bias mitigates its pervasive impact in maternal health outcomes in Washington, DC. Participants enter perinatal nursing practice with empathy and strategies to improve care for diverse patient populations.</p>            | <p>Knapp, Kayla (Presenter), Grund, Amy (Co-Presenter)</p>         | <p>By attending this learning session, conference attendees will be able to discuss how gamification strategies can be utilized to teach implicit bias concepts, apply these strategies to their own institution's nursing orientation programs, and explain the relevance of this interactive training approach in reducing maternal health disparities in Washington, DC.</p>  |
| <p><b>H3</b></p> <p><b>0.25 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-OB - Newborn (Code 5)<br/>RNC-LRN - General Management (Code 2)<br/>RNC-NIC - General Assessment and Management (Code 1)<br/>NNP-BC - General Management (Code 3)</p>  | <p>The Neonatal Cardiac Conundrum: Explore the Usefulness of Escape Rooms in Education and Learn How to DIY!</p> | <p>Microlearning Presentation</p> | <p>We will discuss the usefulness of escape rooms to teach complex neonatal cardiac diagnoses and care. We will explore the complexities of infants with cardiac lesions and identify post-resuscitative assessment findings and anticipated nursing interventions. Attendees will be guided through the process of making their own escape room!</p>                                      | <p>Kroes, Kate (Presenter)</p>                                     | <p>At the end of this presentation, learners will have increased knowledge of the wide application of escape rooms as an educational methodology, in addition to understanding post-resuscitative assessment findings and potential interventions needed for infants with cardiac conditions.</p>  |
| <p><b>H4</b></p>                        | <p>RNC-OB - Postpartum (Code 4)<br/>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)</p>  | <p>Describing the Indescribable - Using Music to describe the</p>  | <p>Microlearning Presentation</p> | <p>Expanding the language used to describe dysphoric milk ejection reflex (D-MER) enhances understanding of the emotional experience mothers face, promoting more empathetic and effective care.</p>   | <p>Harewood, Meredith (Presenter)</p>                              | <p>Participants of this micro-learning segment will be able to identify and articulate the emotional characteristics of D-MER,</p>   |



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| <b>0.25 CNE</b>             | WHNP-BC - Normal Physiology and Wellness Management (Code 1)  | experience of Dysphoric Milk Ejection Reflex (D-MER)                                    |                     | Improved vocabulary empowers providers to recognize and validate this condition, reducing stigma and improving support during the postpartum period.   |   | recognize its impact on lactating mothers, and apply enhanced language strategies to improve clinical support and reduce stigma.  |
| <b>I1</b><br><b>1.0 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)<br>WHNP-BC - Professional Practice (Code 5)  | Journey Through Birth: A Case Study Adventure from Prenatal to NICU                     | Podium Presentation | An interactive case study following the perinatal continuum, from prenatal through recovery. Using a case study to demonstrate how individual clinical decisions impact patient outcomes. Make critical choices, see real-world effects, and gain insights that bridge theory with practice. Don't just learn about evidence-based care—apply it.                              | Atkisson, Jen (Presenter),<br>Nielsen, Heidi (Presenter)      | At the end of this educational session, learners will be able to describe the integration of prenatal, intrapartum, and neonatal care processes to identify points of coordination and potential gaps in nurse decision-making that affect outcomes.  |
| <b>I2</b><br><b>1.0 CNE</b> | C-EFM - Electronic Fetal Monitoring (Code 11)<br><br>RNC-IAP - Obstetric and Medical Complications in Pregnancy (Code 2)<br>RNC-OB - Pregnancy and Obstetric Complications (Code 3)<br>RNC-LRN - General Assessment (previously Mother/Fetus) (Code 1)<br>RNC-MNN - Pregnancy, Birth Risk Factors and Complications (Code 1)<br>RNC-NIC - General Assessment and Management (Code 1)<br>NNP-BC - General/Physical Assessment (Code 1)<br>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2) | Two Lives, One Crisis: Diabetic Ketoacidosis in the Pregnant Patient                    | Podium Presentation | Diabetic Ketoacidosis (DKA) is a life-threatening crisis that any pregnant patient can develop. This presentation will discuss DKA assessment findings, diagnostic criteria, management principles for both mother and fetus, and a case study. Early recognition and treatment will be reinforced.  | Phelps, Emily (Presenter)                                     | Upon completion of this presentation, learners will have an increase in knowledge regarding the significant risk of diabetic ketoacidosis in pregnant patients, along with recognition of signs and symptoms, management principles, neonatal implications, prevention strategies, and resolution.  |
| <b>I3</b><br><b>1.0 CNE</b> | RNC-LRN - Professional Practice (Code 5)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)   | Neonatal Telemedicine: Reducing Transfers & Improving Equity                            | Podium Presentation | Learn about the inception and evolution of one of the first Neonatal Nurse Practitioner (NNP)-led neonatal telemedicine programs, aptly named 'Telebaby.' Through real case scenarios and lessons learned, see how NNPs support low-volume, community and rural hospital staff as they deliver high-level newborn care to improve newborn outcomes.                            | Miller, Deidre (Presenter),<br>Johnson, Stephanie (Presenter) | The learner will realize the impact of a neonatal telemedicine program in improving neonatal outcomes, enhancing parent-infant bonding and reducing unnecessary transfers. The learner will understand the importance of integrating nursing leadership, engaging bedside staff and utilizing ongoing outreach education into a successful neonatal telemedicine program. |
| <b>I4</b><br><b>1.0 CNE</b> | RNC-OB - Postpartum (Code 4)<br>RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br>WHNP-BC - Gynecology Disorders, Obstetric Complications and Primary Care Management (Code 2)  | Beyond Birth: Interventions to Support Perinatal Mental Health and Address Birth Trauma | Podium Presentation | Beyond Birth is a program aimed to support perinatal mental health through peer support groups and individual therapy. Conditions such as depression, anxiety, and birth-trauma are addressed. Outcomes include improved maternal confidence, resilience, and emotional well-being. Beyond Birth offers a model for integrated mental health care during the perinatal period. | Cohen, Sara (Presenter),<br>Quigley, Elizabeth (Presenter)    | Participants will be able to describe the structure and key components of the Beyond Birth program, explain its integrated approach to perinatal mental health care—including peer support and specialized PMHNP-led therapy—and analyze program outcomes and implementation strategies to  |



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|                             |   |   |                     |   |   | inform best practices for holistic perinatal mental health services.   |
| <b>I5</b><br><b>1.0 CNE</b> | RNC-IAP - Pharmacology (Code 3)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-MNN - Professional Practice (Code 4)<br>WHNP-BC - Pharmacology (Code 4) | Tylenol, Vaccines, and Abortion, oh my! Combating misinformation and meeting patients where they're at                                  | Podium Presentation | Recent pronouncements on the safety of vaccines, Tylenol, and mifepristone may leave pregnant patients feeling confusion, fear, and shame. This session will help elucidate a nurse's ethical responsibility to help combat misinformation while ensuring informed consent and meeting patients where they are.   | McLemore, Monica (Presenter), Anderson, Jace (Presenter)      | 1. Explain the science behind Tylenol during pregnancy, vaccines during pregnancy, and medication abortion. 2. Discuss methods nurses can utilize to best support pregnant patients who are considering or who have considered taking Tylenol, getting a vaccine, or having an abortion, and how to combat misinformation about these topics. 3. Identify the ethical principles in the ANA code of ethics that are pertinent to caring for a patient while foregrounding their right to bodily autonomy.  |
| <b>I6</b><br><b>1.0 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-MNN - Professional Practice (Code 4)                           | Who Cares About the Caregiver? Implementing a Peer Support Model for Obstetrical Staff to Mitigate Burnout, Moral Distress, and Trauma. | Podium Presentation | Obstetric staff frequently face burnout, moral distress, and trauma resulting from emotionally challenging scenarios beyond their control. This presentation shares a reproducible program implemented by nurse leaders, utilizing trained peers to administer emotional first aid to affected staff after traumatic and distressing events.  | Fields, Alexandra (Presenter), Harbuck, Elizabeth (Presenter) | At the end of this presentation, learners will demonstrate their understanding of moral distress, injury, and burnout related to healthcare as well as implementation of a staff peer support program for obstetrical healthcare staff.  |
| <b>J1</b><br><b>1.0 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-MNN - Professional Practice (Code 4)                           | Ahh Push It! Development and Expansion of a Hospital-Based Doula Program  | Podium Presentation | This presentation highlights the development, implementation, and expansion of a hospital-based birth doula program. It explores how the program has improved maternal and infant health outcomes with financial sustainability. Participants will gain insight into the program's structure, services, collaborative care model, and its role in advancing equitable care.   | Young, Melissa (Co-Presenter)                                 | Describe the structure and key components of a hospital-based birth doula program, including its integration into obstetric services. Identify measurable maternal and infant health outcomes associated with doula support, such as increased breastfeeding rates and reduced preterm births. Recognize the operational strategies that support program sustainability, including Medicaid reimbursement and collaborative care models. Apply insights from the program to advocate for equitable maternal health initiatives in other healthcare settings. |
| <b>J2</b><br><b>1.0 CNE</b> | RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)   | Pushing for Progress: Reducing NTSV Cesareans Through Collaboration   | Podium Presentation | Inova Fair Oaks Hospital reduced and sustained its NTSV cesarean rate through standardized labor management, team education, and interdisciplinary collaboration. Using evidence-based tools, enhanced communication, and continuous case review, the initiative achieved and maintained a 23.1% rate through 2025—advancing safe, equitable, and patient-centered maternity care aligned with national benchmarks. | Batres, Bethany (Presenter), Chromey, Katherine (Presenter)   | Participants will be able to describe evidence-based strategies and interdisciplinary approaches used to reduce and sustain lower NTSV cesarean rates, apply standardized labor management practices, and promote collaborative, patient-centered care that improves   |



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|                               |  |  |                        |  |   | maternal and neonatal outcomes while aligning with national quality benchmarks.   |
| <b>J3</b><br><b>1.0 CNE</b>   | RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5)   | Wrapped in Yellow: A Quality Bundle for Late Preterm Infants | Podium Presentation    | Late preterm (LPT) infants face increased risks for complications and NICU transfers. This presentation highlights a quality improvement project that reintroduced a “yellow care bundle” of identifiers, preventative initiatives, and revitalized resources to improve LPT infant outcomes, increase interdepartmental teamwork, and reduce admissions to the NICU.  | Brumit, Courtney (Presenter), Newman, Makiya (Co-Presenter)         | At the conclusion of this session, learners will be able to describe evidence-based strategies to improve outcomes for late preterm infants through enhanced identification, targeted education, and systematic nursing interventions.  |
| <b>J4</b><br><b>1.0 CNE</b>   | RNC-MNN - Postpartum Assessment, Management and Complications (Code 2)<br>WHNP-BC - Normal Physiology and Wellness Management (Code 1)   | Birth Control Planning After Pregnancy and Beyond            | Podium Presentation    | Providing an in-depth approach to contraception planning post-pregnancy and beyond. Will discuss standard methods for contraception that are evidence-based and safe for the patient's situation.  | DeLeon, Laura (Presenter), Hill, Andrea (Co-Presenter)              | At the end of this educational session, learners will have an increase in knowledge on proper contraception methods for post-pregnancy, as well as safe contraception methods that meet guidelines for patients and options that are available.   |
| <b>J5</b><br><b>1.0 CNE</b>   | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5) | Game On- Using Gamification to Enhance Learning Outcomes     | Podium Presentation    | This dynamic presentation allows participants to learn about various high-risk obstetric topics, including hemorrhage, preeclampsia, cardiac disease, and neonatal resuscitation, using gamification. Learners will be empowered to not only participate but create their own versions of gamification for their health care facilities and birthing centers.  | Jaynes, Angela (Presenter), Van Saders, Kaitlyn (Co-Presenter)      | At the end of this presentation, learners will report increased knowledge and confidence related to the use of gamification to enhance learning outcomes. Learners will engage in gamification, stating how gamification could be implemented in their work environments.   |
| <b>PC1</b><br><b>3.75 CNE</b> | WHNP-BC - Pharmacology (Code 4)  | Current Topics in Women's Health Pharmacology                | Pre-Convention Session | This session provides an in-depth review of pharmacological management strategies for two areas that affect women across the lifespan. We will discuss management of perinatal mental health conditions, with a specific focus on depression and anxiety and symptomatic patients in the menopause transition. Participants will explore evidence-based approaches to the treatment of perinatal mental health conditions, including during preconception, pregnancy, postpartum and lactation. Implications for maternal and fetal outcomes will be reviewed. Evidence-based approaches to menopausal care will include non-hormonal treatments, hormone therapy, and adjunct therapies for managing bothersome symptoms such as vasomotor symptoms, genitourinary syndrome of menopause, sleep concerns, irregular menses and mood changes. Emphasis will be placed on individualizing patient care with shared decision making and counseling on risks and benefits. This session will help build confidence in using evidence-based practice in managing women's health during the childbearing and midlife years. | Collins Fantasia, Heidi (Presenter), Flanagan, Michelle (Presenter) | At the end of this educational session, learners will increase their knowledge of evidence-based pharmacological management strategies for perinatal mental health conditions and menopausal symptoms, including individualized treatment approaches, risks and benefits, and implications for maternal and fetal outcomes across the lifespan. |



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| <p><b>PC2</b></p> <p><b>3.75 CNE</b></p> | <p>C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)</p> <p>RNC-IAP - Professional Practice (Code 4)<br/>RNC-OB - Professional Practice (Code 6)<br/>RNC-LRN - Professional Practice (Code 5)<br/>RNC-MNN - Professional Practice (Code 4)<br/>RNC-NIC - Professional Practice (Code 4)<br/>NNP-BC - Professional Practice (Code 5)<br/>WHNP-BC - Professional Practice (Code 5)</p> | <p>Impact and Sustainability:<br/>Doing Change RIGHT</p> | <p>Pre-Convention Session</p> | <p>How do you know the results of the change are worth the effort? Maintaining competence and developing your clinical team takes resources. In this workshop, you will explore inquiry paths to ensure that the change is best practice; examine an implementation checklist as a guide to sustainable change; and practice identifying measurable outcomes of change initiatives. Whether you are in professional development, an educator, or leader of clinical teams, this workshop will give you the “how to” for doing change right.</p>   | <p>Opperman, Cathleen (Presenter)</p>   | <p>At the end of this educational session, learners will increase their knowledge of evaluating and implementing practice changes, including identifying best practices, using implementation checklists, and measuring outcomes to support sustainable clinical team development.</p>  |
| <p><b>PC3</b></p> <p><b>3.75 CNE</b></p> | <p>C-EFM - Electronic Fetal Monitoring (Code 11)</p> <p>RNC-OB - Fetal Assessment (Code 1)<br/>RNC-IAP - Maternal and Fetal Physiology and Assessment (Code 1)<br/>WHNP-BC - Normal Physiology and Wellness Management (Code 1)</p>   | <p>In Our Category II Era: The Management Version</p>    | <p>Pre-Convention Session</p> | <p>The management of category II fetal heart rate tracings often prompts challenging conversations among clinicians in intrapartum settings. This interactive session uses case studies and group discussion to support standardized, evidence-based interpretation, collaborative decision-making, and effective communication strategies. Participants will explore how to create and reinforce a shared mental model in Category 2 interpretation &amp; management, create individualized plans of care based on context, and utilize an interdisciplinary safety-focused approach. The session includes an FHR tracings practicum as well as risk reduction and risk mitigation approaches, including documentation strategies and conflict resolution.</p> | <p>Miller, Lisa (Presenter),<br/>Rodriguez, Allison (Presenter)</p>   | <p>At the end of this educational session, learners will increase their knowledge of evidence-based interpretation and management of Category II fetal heart rate tracings, including collaborative decision-making, communication strategies, individualized care planning, and risk reduction approaches in intrapartum settings.</p> |
| <p><b>PC4</b></p> <p><b>3.75 CNE</b></p> | <p>RNC-OB - Labor and Birth (Code 2)</p>  | <p>Moving Our Mamas (MOMs) Hands on Labor Support</p>    | <p>Pre-Convention Session</p> | <p>The purpose of this program is to provide education about the different forms of support during pregnancy &amp; childbirth, including hands-on techniques, alternative therapies, coping strategies, and respectful maternity care.</p>  | <p>Bellamy, Cheryl (Presenter),<br/>Klassa, Patricia (Presenter)</p>  | <p>At the end of this educational session, learners will increase their knowledge of various forms of evidence-based, physiological labor support techniques during labor and birth, including hands-on techniques, alternative therapies, coping strategies, and principles of respectful maternity care.</p>                          |
| <p><b>PC5</b></p> <p><b>3.75 CNE</b></p> | <p>C-EFM - Electronic Fetal Monitoring (Code 11)<br/>RNC-OB - Professional Practice (Code 6)</p>  | <p>Tales from the Witness Chair</p>                      | <p>Pre-Convention Session</p> | <p>This dynamic half-day educational program brings together leading voices from medicine, nursing, midwifery, and law to explore the intersection of obstetric practice and malpractice litigation. Through an engaging combination of live deposition demonstrations, real-world case studies, and interdisciplinary discussion, participants will gain a deeper understanding of how clinical decisions, fetal monitoring interpretation, and documentation translate into legal scrutiny — and how to strengthen both patient outcomes and professional testimony.</p>  | <p>Bockelman, Shannon (Presenter),<br/>Martin, Stephanie (Presenter),<br/>McMurtry Baird, Suzanne (Presenter),<br/>Miller, Lisa (Presenter),<br/>Snyder, Adam (Presenter)</p> | <p>At the end of this educational session, learners will increase their knowledge of the relationship between obstetric clinical practice and malpractice litigation, including the impact of clinical decision-making, fetal monitoring interpretation, and documentation on legal outcomes and professional accountability.</p>       |



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| <b>PC6</b><br><br><b>3.75 CNE</b> | C-ONQS – Obstetric and Neonatal Quality and Safety (Code 28)<br><br>RNC-IAP - Professional Practice (Code 4)<br>RNC-OB - Professional Practice (Code 6)<br>RNC-LRN - Professional Practice (Code 5)<br>RNC-MNN - Professional Practice (Code 4)<br>RNC-NIC - Professional Practice (Code 4)<br>NNP-BC - Professional Practice (Code 5) | Obstetric and Neonatal Quality and Safety – A Review | Pre-Convention Session | Prepare for the Obstetric and Neonatal Quality and Safety (C-ONQS) certification with an instructor-led review designed to sharpen your clinical judgment and clinical safety skills in perinatal care. This focused session blends high-yield review of the NCC exam domains to reinforce evidence-based protocols for maternal and neonatal safety. Interactive discussions and actionable test-taking strategies ensure participants leave confident in core topics such as risk reduction, quality improvement, team communication, and emergency response. Ideal for nurses, midwives, and perinatal clinicians seeking a concise, practical boost before sitting the national certification exam. | Salera, Jean (Presenter), Swinton, Toni (Presenter) | At the end of this educational session, learners will increase their knowledge of core concepts for obstetric and neonatal quality and safety certification, including evidence-based protocols, risk reduction, quality improvement, team communication, emergency response, and test-taking strategies to ensure success on C-ONQS Certification Exam. |
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