Legislative Update
Submitted by Leslie Parker, MSN, NNP, RNC

There is little to report on Florida legislative activity since the House and Senate have not been in session. In the interim, the Florida Nurses Association has made some lofty legislative goals for the upcoming legislative session. These goals include the following:

1) Protect and enhance where appropriate, the Scope of Practice for RNs and ARNPs in Florida.

2) Work to ensure that all consumers of health and nursing services have access to high quality and safe care in all settings.

3) Propose, monitor and support legislation, regulation and policies designed to address current and cyclical nursing shortages.

4) Support health care reform that progresses towards universal coverage for basic health care that includes prevention services, primary care, mental health care, and care for the

See “LEGISLATIVE” on page 8

FANNP Awards Scholarships for 2005
Submitted by Karen Theobald, MS, ARNP, RNC

FANNP remains committed to educational advancement and is happy to be able to award scholarships to nurses and NNPs continuing their educational pursuits in the field of neonatal health care.

At the Annual Business Meeting held October 13, 2005, FANNP awarded ten scholarships. The candidates were all well qualified; they have a strong commitment to neonatal care and will continue to give back to their peers and profession.

Please join FANNP in congratulating:

• Marjorie Rosas, from Bartlett, Tennessee attends the University of Tennessee at Memphis and is planning to graduate with a MSN as an NNP in December 2005.

• Lani Kunishige, from Coconut Creek, Florida, had outstanding recommendations and will graduate from the University of South Alabama in December.

• Christa Smith from Memphis, Tennessee impressed the committee with an excellent essay. She is expecting to graduate from the University of Tennessee at Memphis, December 2005 with a MSN as an NNP.

• Cheryl Robinson, from Gulfport, Mississippi is completing her PhD and is the NNP Coordinator at the University of South Alabama. Cheryl has been a member of FANNP for many years.

• Michelle Beaulieu, from Clearwater, Florida, has been a member of FANNP since 1989, wrote an exceptional essay, is a clinical nursing instructor at St. Petersburg College, works as a NNP in a high risk perinatal center and is working on a DNP from Case Western Reserve University.

• Renee Gray, from Apopka, Florida had excellent references and is attending the University of South Alabama.

• Gayla Kaye from Memphis, Tennessee wrote an excellent essay. She is attending the University of Tennessee at Memphis and

See “SCHOLARSHIP” on page 8
Another great, fun and successful year has past or the FANNP and its members. Thank you for allowing me to serve you on the BOD as your president. It has been a great networking and learning opportunity for me.

We have had several new people come forward to serve on the planning committee for next year’s conference and we have already started working. We hope to continue in the same avenue as in the past…to bring you a great conference every year. A special THANK YOU to the planning committee this year.

We have a new directory coming out to all of the members, we are up to about 280 membership now. Carol Botwinski will be your President for the upcoming term of office. She has been a great asset to the BOD, she has served for many years with us and is an excellent speaker to boot. I wish her much success in her future experiences and hope that serving as President will open avenues to her, as it has to me. I’m sure she will make the most of the experience. Hats off to a wonderful person.

Happy Holidays to everyone, see you next year!

Deborah C. Fulop, President of FANNP

Changes in NCC Core Maintenance Requirements

Starting in 2009 all of the 45 contact hours required to maintain your NNC certification will need to be earned in the certification specialty area. For questions and further information you can contact the NCC website at www.nccnet.org.

Helpful Websites to Learn More About:

- Joining your professional organization
  - FANNP, www.fannp.org
  - NANN, www.nann.org
  - ANN, www.academyonline.org

- How to contact your state board of nursing: National Council of State Boards of Nursing, www.ncsbn.org

- Practice Doctorate as entry into NP Practice and Clinical Nurse Leader: American Association of College of Nursing www.aacn.nche.edu/DNP/pdf/DNP.pdf
Bylaw Changes Passed
Submitted by Carol Botwinski, EdD, ARNP

This past year, in attempts to further the goal and mission of the FANNP, the BOD proposed changes in the current bylaws regarding membership categories. These changes were voted on by the membership and results were announced at the Annual Business Meeting held October 13, 2005. The changes in membership now read:

MEMBERS
☐ Shall be any registered nurse (RN) who has graduated from a nurse practitioner program whose field of interest includes neonatal care at all levels of involvement.
☐ Shall have the right to vote and to hold office in the Association.

STUDENT MEMBERS
☐ Shall be any RN enrolled in a neonatal nurse practitioner program, not currently licensed as a nurse practitioner.
☐ Shall have all privileges of Members except the right to vote and the right to hold office in the Association.

Two new categories approved by the Membership are:

ASSOCIATE MEMBERS
☐ Shall be any person in an advance practice role, other than a NNP, interested in fostering the mission and goals of the organization.
☐ Shall have all privileges of Members except the right to vote and the right to hold office in the Association.

The category of associate members allows for others who practice in advance roles but are not NNPs such as nurse educators, clinical nurse specialists, transport nurses to enjoy the benefits of the organization (including the scholarship and research grants) and share their knowledge and expertise. Please, if you know someone who fits this category invite them to become a member!

See “BYLAWS” on page 9

“New” Back to Sleep Recommendations
Submitted by
Ruth Bartleson, ARNP

Since the “Back to Sleep Program” has been initiated in the United States, there has been a significant decrease in Sudden Infant Death Syndrome (SIDS), in the U.S. over the last decade. The American Academy of Pediatrics (AAP) has issued an updated policy statement on “The Changing Concept of Sudden Infant Death Syndrome: Diagnostic Coding Shifts, Controversies Regarding the Sleeping Environment, and New Variables to Consider in Reducing the Risk” addressing several issues that have been identified since their last statement was published in 2000.

They recommend only fully supine sleeping for infants. No longer do they recommend side-lying positioning when infants are sleeping. The AAP feels that side-lying positioning is unstable and increases the chances of the infant rolling onto his/her stomach.

The AAP recommends a separate sleeping environment. Parents may bring the infant

See “SLEEP” on page 10
If you missed this conference, you’ll wish you hadn’t!

16th National FANNP Neonatal Nurse Practitioner Symposium, October 11-15, 2005

This year, two-hundred and sixteen individuals attended the 16th Annual National Symposium presented by FANNP, the only dedicated organization to the professional development and practice of neonatal nurse practitioners (NNP).

This year’s attendance was the largest yet with participants coming from all over the continental United States, Canada and even the Netherlands. Florida had the most attendants at 26, followed by Texas with 17, and Michigan and Maryland both having 13 attendants each. Eighty new members joined FANNP with 37 returning FANNP members (currently 245 members). Our youngest attendant at the Beach Bop was a toddler and our oldest attendant was...well...I can’t say; we all know you are only as old as you feel!

Our theme was, “Go Learn,” “Go Network,” and “Go Relax.” This newsletter I would like to focus on the “Go Learn.” We had twenty-one speakers, presenting on 38 clinical and professional topics from numerous areas. The speakers included Neonatal Nurse Practitioners, Faculty from several University NNP programs, Clinical Nurse Specialists, a Pediatric Cardiology Nurse Practitioner, a Genetic Counselor, a Perinatologist, and several Neonatologists from all over the Continental United States and Canada.

If you missed this conference, you’ll wish you hadn’t!

TUESDAY

Marion Kay, a Management Consultant, began the Symposium on Tuesday with the opening General Session, “Getting the Mess Out of the Message.” This was a highly interactive program that gave attendants great tips to be used professionally as well as personally. The remainder of the first day was divided into two tracks: the Basic Track designed to prepare the novice neonatal nurse practitioner or student for the National Certification Corporation (NCC) Neonatal Nursing Specialties examination and the Advanced Track offering advanced level topics for the seasoned NNP. Karen Theobald, NNP from All Children’s Hospital, presented two of the hottest topics for the Basic Track: “Test Taking and Study Tips” which offered tips for preparing for NCC Certification; followed by the even more popular “Is That Your Final Answer?” a fun, interactive ‘Game Show’ format of questions and answers based on previous NCC test questions. This presentation came complete with “Answer Fairies,” Ruth Bartleson and Mary Kraus. Other topics for the Basic Track included “Neonatal Hematology Review” and “Review of Neonatal Sepsis” both presented by Dr. Darlene Calhoun, a Neonatologist, researcher and recognized author of numerous hematology articles. Dr. Calhoun is a frequently requested speaker who is a remarkable teacher; she presents a lot of information in a very organized and concise manner.

The Advanced Track offered many interesting clinical topics, starting with an interesting Case Study of Fetus in Feto by Natalie Mercy, an NNP from Alberta Canada. Natalie had phenomenal pictures of this unusual diagnosis. Dr. Calhoun presented “Persistent and Severe Thrombocytopenia” which included possible etiologies and diagnostic

Dr. Darlene Calhoun – speaker for Advanced and Basic tracks
evaluation and management of thrombocytopenia. Dr Prieto, a Perinatologist, discussed the fetal/neonatal implications in infants of diabetic mothers. Completing the day for the Advanced Track, Patricia Mullen, a Pediatric Cardiology Nurse Practitioner and Neonatal Nurse Practitioner reviewed neonatal cardiomyopathy.

WEDNESDAY

Wednesday, the second day of the symposium, offered six review sessions for the Basic Track covering Metabolic/Endocrine, Neurology, Renal, Respiratory disease and Blood Gas/Ventilator management topics. Leslie Parker, a NNP from Shands in Gainesville (and a past Kim Nolan Recipient) was back by popular demand to present everything you need to know about Metabolic and Endocrine disorders in two hours — Leslie is energetic and gave great clinical pearls for the attendants. Carol Botwinski and Dianne Charsha, yearly requested NNPS, continued to provide exceptional reviews in an organized and concise manner — many participants comments have included wishing they had just a portion of the knowledge of either of them. Cheryl Robinson, despite losing her home to Hurricane Katrina, showed her students and other attendants just how resilient NNPs are — she gave an awesome overview of Neurology that followed the embryological origins of the various neurological defects and disorders. The Advanced track had both Professional and Clinical topics including: Pain Management/Sedation, Developmental Care, Neonatal Immunological disorders, Neonatal Abstinence Syndrome, Neuro Protection, and Conflict Resolution. (I’m sure none of you have ever had to deal with this?) Dr. Rajan Wadhawan, Neonatologist, involved in Neuro Protection research stepped in with less than a week’s notice, due to scheduling conflicts with the original presenter — he was such a knowledgeable expert that you would have thought he prepared for month — what a treat!

THURSDAY

The third day of the conference offered even more professional and clinical topics for the Advanced Track. Dr. David Burchfield, Neonatologist, facilitated a journal club on “Two Recent Articles that Should Change Your Practice.” This topic was so well received, we had to make attendants leave and when they did their comments were, “We want more!” Cheryl Robinson, Clinical Assistant Professor at University of South Alabama College of Nursing (Mobile), had all the attendants ‘fired up’ and ‘politically energized’ after her presentation, “Political Advocacy — Doing Nothing is Expensive.” Dianne Charsha and Carol Botwinski, continued to challenge the seasoned NNPs as they looked at SIRS and NEC. The Basic track offered reviews on Nutrition, Genetics, Surgical Issues and Radiology Review. Attendants attending the Radiology review had a series of X-rays in the lobby to review for the past two days with questions pertaining to each to privately test their knowledge base — what a phenomenal, non-threatening way to learn — you could spend as little or as much time as you wanted, and you could even pick them up (I think the answer came by osmosis from your hand to our brain on the challenging ones that you picked up and turned this way and then that way). The evening ended with an optional Round Table Dinner Discussion. Terri Marin, NNP and Clinical Faculty at University of Alabama, Birmingham, led the discussion on Difficult Parental Encounters, generating a lot of discussion that carried over after the session was completed. Dianne Charsha, NNP and Director of Neonatal Services at St. John’s Medical Center, led the popular topic that affects all of us both young and old, “Role Transition.” It is remarkable to participate as the challenges and stress of career changes affect all of us at one time or another in
FRIDAY

We’re over the half way point, but Friday continued to not even show signs of slowing down. The morning opened with a general session offering an excellent evidence-based approach on “Can we prevent prematurity” by Dr. Burchfield. The remainder of the morning broke out into the two tracks. The Basic Track included Congenital Heart Disease by Dianne Charsha who makes CHD so easy to understand. Carol Botwinski finished up with Fluid & Electrolyte Management with terrific case study presentations that related to clinical situations. One attendant remarked, “She did a phenomenal job teaching a subject that can be very confusing if taught by the wrong person” — Carol couldn’t go wrong because she had help from Yoda (Star Wars). The Advanced Track also had an exciting morning with Dr. Thomas Wiswell, Neonatologist, who discussed the “Evolution of Mechanical Ventilation,” followed by “Evidence Based Neonatal Care.” If you thought you were practicing evidence-based medicine, you left his presentation scratching your head, asking yourself, why we do some of the things we do?!

SATURDAY

The last day of the conference offered only one break out session with the Basic Track wrapping up with a Pharmacology Review by Cheryl Carlson, NNP at Medical University of South Carolina (Charleston). The Advanced Track ended with Dr. Niki Kosmetatos, Assistant Professor of Pediatrics and Neonatologist in the Emory University system, presenting a comprehensive overview of Hyperbilirubinemia including a consensus protocol they developed based on AAP guidelines and current literature — what a wonderful tool for your own institution if you do not have a standardized approach in your practice. The Symposium ended with a
Enroll in an Online Neonatal Nurse Practitioner (NNP) Program and Complete Clinical Requirements in Your Home Community!

The University of Alabama School of Nursing offers an online NNP program that allows students to remain in their home towns for their clinical experiences and take courses online at times that are most convenient. Completion of the MSN program prepares graduates to take the national NNP certification exam. The purpose of the online program is to prepare NNPs who are culturally competent and prepared to provide care for high risk infants and families through the first two years of the infant’s life.

Students will complete all didactic coursework online with the exception of an onsite experience at the beginning of the program. Clinical practicum and residency hours may be arranged with preceptors in their home communities.

For more information, please contact:
Mary Beth Bodin, MSN, CRNP, NNP Project Coordinator
The University of Alabama School of Nursing
1530 Third Ave. South
Birmingham, AL 35294-1210
1-866-656-4509
bodinm@uab.edu
Visit our web site at:
http://www.uab.edu/son/nnp/
EEOC

The FANNP would like to thank the following companies for their generous support of its 16th National NNP Symposium!

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Children’s Mercy Hospitals & Clinics

Convention Recordings will continue to offer CDs, tapes and MP3, from their website for several months. If you missed a lecture that you wanted to hear — or need to study by audio — go directly to:
Steve Martin Convention recordings: Convrec@aol.com or phone 727-345-8288 or fax 727-345-8494
Ask for the specific lectures or the whole conference.

Sneak preview of ‘things to come’ next year for NRP. Dr. Wiswell presented excellent research based evidence on proposed changes and if you were at the Symposium, you can say you saw it here first!

Wow — 27 contact hours covering topics for the new or seasoned NNP, both clinical and professional topics, speakers from many diverse areas of Neonatal Medicine and all at less than $13 per contact hour! If you were unable to come and are interested in any of these topics, visit the FANNP website at www.FANNP.org and click on the link to order tapes of sessions you wished you had not missed. Also watch the website for pictures from the conference. Don’t forget to mark your calendar so you don’t miss out next year for the 17th National Symposium being held on October 17-21, 2006.

See you there!
Jacqui Hoffman, 2005 Symposium Chair.
SCHOLARSHIP continued from page 1

and is expecting to graduate in December as an NNP.

- Lisa Glantz has been a member of FANNP and was president of the Iowa Association of Nursing Students. She received her MSN/NNP from Rush University and is working in Des Moines, Iowa.
- Jessica Meneses from Lutz, Florida wrote an excellent essay and has worked with the March of Dimes. She is attending the University of Florida at Gainesville.
- Elizabeth Wise, from Tampa, Florida, a current NNP, completed her MBA in Health Care Administration at the University of Phoenix.

FANNP scholarship applications are available for 2006, through the website at conference@fannp.org or by contacting Karen Theobald, FANNP Treasurer, PO Box 14572, St. Petersburg, FL 33733-4572.

Qualifications for the 2006 scholarship award include the following:

1. You must be a FANNP member.
   a. All members, associate members and student members are eligible.
   b. Priority for scholarship awards will be given to members, student members, then associate members.
   c. Priority for scholarship awards will be based on length of membership and service to FANNP.

2. You must be a licensed RN, ARNP, NNP or equivalent.
   a. Preference will be given to currently licensed NNPs working towards a NNP degree.

3. You must attend an educational program leading to a degree related to the health care field during the application period.
   a. The application period is September 15th to September 15th of each year (i.e. To be eligible for a 2006 FANNP Scholarship you must have attended classes sometime between September 15, 2005 and September 15, 2006.)
   b. An applicant may receive a maximum of two scholarship awards for each degree sought.
   c. Preference will be given to those working towards a degree in neonatal health care.

4. If awarded a scholarship, recipients must agree to submit a short article for the newsletter within the next year.

5. The completed scholarship application must be postmarked by September 15th of each year.

LEGISLATIVE continued from page 1

developmentally or physically disabled throughout the life cycle.

5) Propose and support legislation or regulations designed to improve the practice environment for RNs.

In order to address the continuing nursing shortage in Florida, 10 million dollars for the SUCCEED, Fl. nursing grants were funded during the budget appropriations process following the legislative session. Grants, ranging from $218,025 to $427,500 for individual school grants and from $1,194,378 to $1,282,500 for grants representing 2 or more collaborating programs were awarded for proposals that would either increase the supply of new graduates or prepare registered nurses for nursing faculty positions.

For the past several years Florida has been one of the few states which did not require certification for its nurse practitioners. As of July 2006, The Florida Board of Nursing will require that in order to obtain an Advance Practice Nursing license all new graduates must be certified by a nationally credentialing organization.

On a national level, the ANA continues to adamantly oppose the proposed Medicaid reform bill which would cut at least 10 billion dollars in the Medicaid budget over the next five years. Especially in light of the tens of thousands of Americans affected by hurricane Katrina who will require ongoing medical and mental services, the ANA feels that this bill would be detrimental to millions of Americans.

ANA has signed on in support of
RETIRED MEMBERS
☐ Shall be neonatal nurse practitioners who have held membership in the FANNP but have retired from practice.
☐ Shall have all privileges of Members except the right to vote and the right to hold office in the Association.
☐ Retired membership fee will be one half of the Member fee.

Bylaws continued from page 3

More News on the By-Laws Front
Submitted by Carol Botwinski, EdD, ARNP

Every two years a call for nominations and vote is held to fill these positions with interested and qualified candidates. Results of this year’s elections were announced at the Annual Business Meeting held on October 13th.

New BOD as of January, 2006 will be:
President: Carol Botwinski
President-elect: Jacqui Hoffman
Past President: Debra Fulop
Secretary: Kim Irvine
Treasurer: vacant position
Members-at-large:
1. Terri Marin
2. Leslie Parker
3. vacant position
4. vacant position

As presented to the membership, at the annual business meeting this year we have had difficulty filling these positions, with the position of Treasurer and two member-at-large positions left vacant.

There are current members of the BOD who are willing to continue to volunteer their time and expertise to the FANNP. However, the bylaws as currently written would prevent this. The bylaws state that no officer (President, President Elect, Secretary, and Treasurer) shall hold the same elected office for more than two consecutive terms and no member of the BOD to more than three consecutive terms.

A special election vote to change the bylaws to abolish term limits for the offices of the Secretary, Treasurer and members-at-large is currently in process. (The term limits of the President and President Elect would remain unchanged). Members eligible to vote should have received their ballot in November with deadline to vote December 15th. Results of this special election will be announced in the next newsletter.

The Secretary of Health and Human Services has announced a number of proposed regulations supporting the adoption of e-prescribing and electronic health records. These proposals support President Bush’s goal of widespread adoption of electronic health records. Electronic prescribing allows the practitioner to electronically transmit a prescription electronically to a pharmacy. This will dramatically decrease prescription errors caused by hard-to-read handwriting and automate the process of checking for drug interactions and allergies.

ANA is endorsing a proposal to support health care coverage for hurricane victims. The Emergency Health Care Relief Act of 2005 (S. 1716) has wide support in the Senate Finance Committee but faces opposition from conservatives in Congress. The Bush Administration has voiced concerns about the cost of the bill.

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into their bed for nursing, feeding, or comforting, but should then return their baby back to its separate crib or bassinet. There is also growing evidence that sharing the same room, but in a separate crib, is associated with a reduced risk of SIDS.

A recent article, “Do Pacifiers Reduce the Risk of Sudden Infant Death Syndrome? A Meta-analysis” in Pediatrics, November 2005, indicates an association between pacifier use and a reduced risk of SIDS. The AAP now recommends pacifier use at nap time and bedtime throughout the first year of life. They do recommend that pacifier introduction for breastfed infants is delayed until one month of age allowing for full establishment of breastfeeding.

For the full statement and policy recommendations, you may go to the AAP’s website at www.aap.org.
Antenatal Hydronephrosis

1. Antenatal Hydronephrosis — before birth, fluid filled enlargement of the kidneys can be detected in the fetus on ultrasound. In most instances this diagnosis will not change obstetric care. Close monitoring throughout pregnancy is required.

2. Etiology
   a. Blockage — may occur at the kidney in the ureteropelvic junction, at the bladder in the ureterovesical junction, or the urethra termed posterior urethral valves.
   b. Reflux — vesicoureteral reflux occurs when the valve between the kidney and the bladder does not function properly, resulting in a back flow of urine up to the kidney as the bladder fills and empties.
   c. Duplication — two collecting tubes from a kidney, some duplications have a ureterocele which is a balloon-like obstruction at the end of the duplex tubes. Can be detected on ultrasound.
   d. Multicystic kidney — a nonfunctional cystic kidney.
   e. No significant abnormality — many of these dilated kidneys prove to be normal after delivery.

3. Antenatal Management — during pregnancy frequent ultrasounds and monitoring growth of fetus and condition of kidneys. A routine delivery is expected. In rare instances a fetus with severe obstruction of both kidneys and insufficient amniotic fluid may need surgery to drain the kidneys or bladder. Normal kidney function is often abnormal regardless of treatment.

4. Management in the Newborn Period
   a. Ultrasound of renal system
   b. Voiding Cystourethrogram — to exclude vesicoureteral reflux
   c. Diuretic Renal Scan — evaluate kidney function

5. Prognosis
   a. Vesicoureteral Reflux — managed with antibiotic and periodic ultrasounds and VCUG.
   b. Obstruction or Blockage — may require surgery
   c. Multicystic kidney — treatment controversial. Some urologists recommend removal while others do not remove the dysplastic kidney unless its large size causes problems.
Happy Holidays

Wishing you all the best this Holiday Season and throughout the New Year!

The information contained reflects the opinions of the authors and not necessarily those of the FANNP. While every effort is made to validate the information presented, FANNP makes no absolute guarantees as to the accuracy of the information within.

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