



ICANN NEWS

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Editor: Patti Sorenson

President's Message by Angela Morin

Another year has flown by and already we are in the second month of this new year. It has come so fast! My grandmother once told me that I needed to slow down and enjoy the moment because the older you get the faster time goes by. Of course, I thought that was rubbish, but I am now a believer!

So, this year let's all slow down to enjoy every moment with our family and friends. That being said, I would like to continue that message into our ICANN meetings. Let's change things up a bit and not only attend the meetings this year for our CE's but let's enjoy each other and the social network ICANN has created. We all work so hard toward common goals in our NICU's, let's show how that passion can create meetings that inspire others to get involved and to become a member of ICANN. I know I am looking forward to this years ICANN meetings with our new President Elect - Vivian Bellini, our new Secretary - Andrea Morris, and our Treasurer, Sharon Kemp. These ladies have made a commitment to dedicate their time and energy for the next 10+ months to making ICANN bigger and better. Our goal this year is to appeal to both young and experienced NICU nurses, so our membership will grow and ICANN will continue on for years to come.

I hope that every member will feel the excitement we have for this years meetings and conference and join us at our next meeting in March. We have some great ideas in store for you, so be there and give us your two cents!!!

See you all there,
Angela

Your ICANN Officers for 2011

President: Angela Morin at rcp2rn@gmail.com
President-elect: Vivian Bellini at vbellini1@verizon.net
Secretary: Andrea Morris at amorris@mail.cvhp.org
Treasurer: Sharon Kemp at kemps@armc.sbcounty.gov

ICANN's website: www.icann-online.org

Upcoming ICANN Meetings

Mark your calendars for the third Thursday evening of odd numbered months in 2010 and beyond! The schedule for 2010 is as follows (all meetings are from 6-8:30 p.m.):

March 17, 2011, Arrowhead Regional Medical Center

May 19, 2011, Kaiser Fontana

July 21, 2011, Riverside County Medical Center

September 22, 2011, LLUMC *****Note date change due to conflict with NANN National Conference**

October 20, 2011, ICANN Annual Conference at UC Riverside Extension Center

November 17, 2011, annual holiday dinner and gift exchange, site to be determined

If your facility is interested in hosting any meeting in 2012 please contact President elect Vivian Bellini at vbellini1@verizon.net.

Tuition Scholarships Available for NANN's 27th Educational Conference in Orlando, FL, Sept 14-17, 2011

Plan now to attend NANN's 27th Annual Education Conference entitled **Exploring the Science and Practicing the Art of Neonatal Care** from September 14-17, 2011, at the Caribe Royale Hotel, Orlando, FL. We had wonderful ICANN attendance in 2010 at the NANN conference in Las Vegas—let's try to match that this year in Florida.

For scholarship applications go to www.icann-online.org or pick one up at any ICANN meeting.

ICANN Conference October 20, 2011

The title, speakers and topics are yet to be finalized but the date and location are certain! So mark your calendar for Thursday, October 20, 2011, at the UC Riverside Extension Center. Watch your mailbox and future newsletters for additional information! Want to volunteer? Contact President-elect Vivian Bellini at vbellini1@verizon.net.

ICANN Outing to Angels Game with Potluck and Fireworks

Mark your calendar now to join fellow baseball fans at Angel Stadium Friday, May 20th as the Angels battle the Atlanta Braves. Tickets are \$15.80 each in the upper view section behind home plate. As always, we will meet in the parking lot before the 7 p.m. game for a delicious potluck then enjoy the game and the always-fabulous fireworks display following the game. For more information or to reserve your tickets (we have 25 tickets available), contact Patti Sorenson at pmsorenson@verizon.net.

New NICU e-book

The Vermont Oxford Network has just released an e-Book, *NICQ 2007: Improvement in Action*, the culmination of NICU 2007, a 2-year improvement collaborative involving teams of neonatal professionals and families from 46 hospitals in North America whose goal has always been to provide care that is family-centered, safe, effective, equitable, efficient, timely, and socially and environmentally responsible. The chapters addressing these 7 domains were written by invited experts and illustrated with improvement stories from teams that participated in the collaborative. Vermont-Oxford Network hopes that these stories will guide and inspire other NICU teams to make dramatic improvements for the patients and families they serve.

The entire book can be downloaded for free or chapters can be downloaded individually. The chapters include the following:

- Advancing Patient- and Family-Centered Newborn Intensive Care
- System Safety in the NICU
- Effectiveness in Healthcare
- Equitable Care in the NICU
- Improving Efficiency
- Timely Care Delivery
- First Do No Harm: Environmental Responsibility in the NICU
- Measure What Matters

Go to www.vtoxford.org/quality/ebook/ebook.aspx

March of Dimes Walk For Babies, 2011

For the 11th year in a row, Patti Sorenson will lead a group of walkers April 30, 2011, from Riverside Community College in a fundraiser for the March of Dimes who does such wonderful work for babies. If you would like to walk or raise funds contact Patti at pmsorenson@verizon.net.

If you are unable to walk but would like to support Patti, you can email her at the address above or go to www.marchforbabies.org/PattiSorenson to make a donation.

Dates/locations for this year's walks in the Inland Empire:

Saturday April 30, 2011, at Riverside Community College and Victorville City Hall
Sunday May 15, 2011, at LLUMC

- See *In the News* for links to the March of Dimes for additional information.

In the News

Number of Preterm Infants Drops to 523,033

By Todd P. Dezen and Elizabeth Lynch at the March of Dimes

WHITE PLAINS, N.Y., Dec. 8, 2010 - More than 23,500 babies were spared the serious health consequences of an early birth in 2008, according to new data released today by the National Center for Health Statistics.

According to the [National Vital Statistics Report](#), Births Final Data 2008, 523,033 infants were born preterm, before 37 weeks of pregnancy, in 2008, down from a high of 546,602 in 2007.

The federal report contains detailed national birth information on a variety of maternal and infant health issues. For the first time, the report provides data on the percentage of newborns that fall into the gray area of "early term." These babies, who are born at 37 and 38 weeks of pregnancy are not preterm, nor do they meet the criteria for full-term because they were born before 39 weeks of pregnancy. However, these early term infants have higher death rates and are more likely to have health problems than full-term infants (39 to 41 weeks of pregnancy). In 2008, about 28 percent of infants fell into this early term category and only about 54 percent of infants were delivered at full-term, according to the report.

"Every week of pregnancy is important to a baby's health and the last weeks are critical because many important organs, including the brain, are not completely developed until then," said Dr. Jennifer L. Howse, president of the March of Dimes. "The fact that 23,500 fewer babies were born preterm is encouraging and we hope it's the start of a trend because there still are more than half a million babies born too soon in the U.S. each year, and premature birth is the leading cause of newborn deaths."

Preterm birth is a serious health problem that costs the United States more than \$26 billion annually, according to the Institute of Medicine. Babies who survive an early birth often face the risk of lifetime health challenges, such as breathing problems, cerebral palsy, intellectual disabilities and others. Even infants born just a few weeks early have higher rates of hospitalization and health problems than full-term infants.

Following three decades of increases, in 2008 the nation saw the first two-year decline in the preterm birth rate, a 4 percent drop from 2006. The 2008 final preterm birth rate dropped to 12.3 percent, from the 2006 final rate of 12.8 percent. There were declines in the preterm birth rates for all racial and ethnic groups, according to the report.

The March of Dimes is the leading nonprofit organization for pregnancy and baby health. With chapters nationwide, the March of Dimes works to improve the health of babies by preventing birth defects, premature birth and infant mortality. For the latest resources and information, visit marchofdimes.com or nacersano.org. For detailed national, state and local perinatal statistics, visit PeriStats at marchofdimes.com/peristats. Find us on [Facebook](#) and follow us on [Twitter](#).

Closely Spaced Pregnancies are Associated with Increased Odds of Autism in California Sibling Births

Pediatrics

A new study suggests that spacing pregnancies closely together may increase risk of autism in the younger child. Researchers collected data on all first- and second-born children born in California between 1992 and 2002, and then determined the time between the birth of the first child and the conception of the second. They found that, among the more than 662,000 sibling pairs studied, children conceived less than 12 months after the birth of their older brother or sister were more than three times as likely to develop autism than those born three or more years after the birth of their sibling. The findings held true even after adjusting for preterm birth, low birth weight and other factors such as parents' age. The authors speculate that the association between close pregnancy spacing and autism could be caused by depletion of nutrients, such as folate, in the mother. Alternatively, they say, parents of children with similar ages may be more attuned to typical development and any delays in the second child. The new finding is particularly important, given trends in birth spacing in the United States. Between 1995 and 2002, the proportion of births occurring within 24 months of a previous birth increased from 11% to 18%. Closely spaced births may occur in part because of unintended pregnancies, but also by choice, as more women delay childbearing.

Developing Nurse/Parent Relationships in the NICU Through Negotiated Partnership

JOGNN

Research has shown that the nurse/parent relationship is the factor that most greatly influences parents' satisfaction with their neonatal intensive care unit (NICU) experience. Now, a new study from Canadian researchers sheds light on what nurses do - in the eyes of parents - to facilitate development of strong nurse/parent relationships. In-depth interviews with ten parents whose infants recently spent at least 7 days in the NICU revealed that effective nurses took action in their relationship with the parents that demonstrated the following qualities: perceptive engagement, cautious guidance and subtle presence. Perceptive engagement included granting parents "permission" to care for their baby, encouraging such care and creating an environment where parents felt there was room to learn. Effective nurses appropriately gauged what a parent was ready for and provided encouragement so that parents' confidence increased. Cautious guidance encompassed teaching the parent the theory and skills required to care for his or her infant, while simultaneously facilitating parental independence. Subtle presence involved knowing when to be direct in providing the parent with positive affirmation or constructive correction, and when to remain nearby in case their help was needed, while giving parents privacy and space. The authors conclude that in ideal nurse/parent interactions, the nurse serves as teacher, guardian and facilitator.

Late-Preterm Birth and Its Association With Cognitive and Socioemotional Outcomes at 6 Years of Age

Pediatrics

A new study confirms that babies born late-preterm - at 34-36 weeks of gestation - are at increased risk of cognitive and behavioral problems in later childhood. The findings are among the first to establish this link, separate from birth weight for gestational age, and other factors such as maternal I.Q. and residential setting. Researchers drew upon data from a study of low- and normal-weight births sampled in Michigan between 1983 and 1985, in which the children participated at ages 6 and 7 in cognitive and behavioral assessments using expert-administered testing and teacher-rating instruments, respectively. For the current study, 168 children born late-preterm were matched with a term counterpart of the same sex and similar birth weight. The researchers found that children born late preterm had two to three times the risk of full-scale and performance I.Q. scores below 85, the threshold for borderline cognitive functioning. Late-preterm birth was also associated with higher risk of attention problems and "internalizing" issues, including anxiety and depression, as well as "externalizing" problems such as aggression. The findings did not change after adjusting for maternal I.Q., or environment. The authors point out that, while late-preterm children exhibit more clinically significant cognitive and behavioral problems, most show normal or above-average functioning. Thus, it would be helpful to further explore why some late-preterm children have problems while others do not.

Neonatal Abstinence Syndrome after Methadone or Buprenorphine Exposure

New England Journal of Medicine

Babies born to women addicted to opioids such as heroin fare better when their mothers are treated with buprenorphine, rather than methadone, during pregnancy, suggests a new study. Methadone is the recommended treatment for opioid addiction during pregnancy, but in-utero exposure can cause neonatal abstinence syndrome (NAS), a condition characterized by central nervous system hyperirritability and autonomic nervous system dysfunction, which often require medication and extended hospitalization. The new study found that the group exposed to buprenorphine in utero required, on average, 89% less morphine for the treatment of NAS, had, on average, a significantly shorter hospital stay (10.0 days versus 17.5 days) and had, on average, a significantly shorter duration of treatment for NAS (4.1 days versus 9.9 days). The findings were based on a multicenter, randomized, controlled study that compared neonate outcomes of 131 women addicted to opioids who were treated with buprenorphine (58) versus methadone (73). The superiority of buprenorphine over methadone did not extend to differences in the number of newborns requiring NAS treatment, nor to the condition's peak severity, nor to any maternal outcomes, although both provided similar maternal treatment outcomes. Women who were taking buprenorphine were also more likely to discontinue treatment, compared to those taking methadone (33% versus 18%). The authors note that unlike methadone, buprenorphine's effectiveness reaches a limit at certain dosage levels. Clinicians, they point out, should take these factors into consideration when choosing a course of treatment for pregnant patients.

Featured Conference for June, 2011 in Washington, DC

From June 1-4, 2011, in Washington, DC, at the OMNI Shoreham Hotel, Children's Hospital at Dartmouth is presenting *Caring for Any Baby, Any Time, Anywhere: A Program for Practicing Clinicians, Clinical Nurse Specialists, Outreach Educators and Academic Faculty*.

Patti Sorenson is a member of the conference committee and reports that this conference is excellent for NICU nurses, particularly for those interested in advanced practice, world NICU nursing, and just increasing their knowledge base about the latest in NICU nursing. Highlighted topics for this year's conference include:

- Simulation USA—Developing Successful Simulations that Cross Academic and Clinical Boundaries
- Substance Exposed Newborns: Beyond the Basics
- Point-Counterpoint Debate: Sucrose Use in the NICU
- Show Me the Evidence: Integrating and Implementing the New NRP Recommendations
- Helping Babies Breathe Master Trainer Workshop

To view the brochure, get more information, or register go to www.chadkids.org/apn forum or ask Patti Sorenson on Barbara Mordue for their recommendations.

Local NICU Certification Exam Preparation Course

The Annual NICU Review Course sponsored by Citrus Valley Medical Center, Huntington Memorial Hospital and UCI is being held April 28th and 29th at UCI Medical Center in Orange, CA.

The course is designed as a preparatory review for nurses preparing for either the National Certification Corporation (resulting in RNC) or the American Association of Critical Care Nurses (resulting in CCRN) certification exam. It may also be helpful as a general review for the experienced nurse.

For more information contact ICANN members Andrea Morris at amorris@mail.cvhp.org or Sandy Beauman at cnsconsulting@ca.rr.com

Out and About: Upcoming Conferences

AWHONN California Section Conference February 24-26 in Berkeley, CA, through AWHONN. For more information contact Kristi Babel at gabelkt@sutterhealth.org or go to www.awhonn.org/awhonn/section.by.state.do?state=California

NEO: The Conference for Neonatology February 24-27, in Orlando, FL, through Pediatrix Medical Group. For more information go to www.neoconference.com

Current Topics and Controversies in Perinatal and Neonatal Medicine March 4-6, 2011, in San Diego, CA, through CAN/AAP District IX Section on Perinatal Pediatrics. For more information go to www.cme.ucl.edu or www.canneo.org

11th Annual Conference for Health Professions March 7-8, 2011, in Irvine, CA, through March of Dimes California Chapter. For more information call (415) 217-6380 or go to www.marchofdimes.com/ca

The National Conference of Obstetric and Neonatal Nursing: Challenges and Controversies March 8-12, 2011, in Las Vegas includes Advanced Neonatal Pathophysiology Pre-conference. For more information go to www.contemporaryforums.com

4th International Conference on Neonatal and Childhood Pulmonary Vascular Disease March 11-12, 2011, in San Francisco through UCSF. For more information go to www.cme.ucsf.edu

2011 National Nursing Ethics Conference "Advocacy-Making a Difference for Patients" March 24 and 25 in Los Angeles through the American Nurses Association. For more information go to www.ethics2011.cisterns.net/Public/registration_home.php

5th Annual Neonatal Conference March 24th through Children's Hospital Los Angeles. For more information contact Lillian Hernandez at (323) 361-5962.

21st Annual Perinatal Symposium April 27th in Ontario, CA, through Pomona Valley Hospital. For more information call (909) 865-9858.

9th Annual Neonatal and Pediatric Transport Conference, May 4-6 in Austin, Texas. For more information go to www.int-bio.com/conference.php

Evidence Based Neonatology—Today and Tomorrow June 2-4 in Stockholm, Sweden. For more information go to www.ebneo.org/wp/

Neonatal Pharmacology June 16-18, 2011, in San Francisco, CA, through Contemporary Forums. For more information go to www.contemporaryforums.com

35th Annual Conference on Neonatal/Perinatal Medicine July 14-17, 2011, in Portland, Oregon, through AAP District VIII. For more information call (541) 953-1739 or go to info@d8neonatalconference.org

Miami Neonatology 2011 35th Annual International Conference October 27-29, 2011, in Miami, Florida, through the University of Miami Miller School of Medicine. For more information go to <http://neonatology.med.miami.edu/conference>