I would like to report on the activities of the Tennessee Section of AWHONN during the first three months of 2015.

AWHONN supports Born Drug Free Tennessee

Tennessee has one of the highest rates of prescription drug abuse in the nation. This resulted in nearly 1,000 Tennessee infants with documented neonatal abstinence syndrome (NAS) during 2014. The rates for 2015 are on pace to go even higher. A public awareness and education campaign, Born Drug Free Tennessee (BDFTN), was launched by The East Tennessee Regional Neonatal Abstinence Syndrome (NAS) Task Force in early February. In addition to educating the public, BDFTN is conducting educational programs to help health care providers understand the disease process of addiction and to implement an evidence-based screening tool and motivational interviewing technique, SBIRT (Screening, Brief Intervention, Referral to Treatment).

The BDFTN goals of educating the public about the dangers of substance use during pregnancy, connecting women to addiction treatment services, and ultimately driving down the rates of NAS align closely with AWHONN’S mission to improve and promote the health of women and newborns. Because of this shared focus, AWHONN (national) decided to have AWHONN listed as supporting the BDFTN campaign.

New and Revised AWHONN Position Statements

Criminalization of Pregnant Women with Substance Use Disorders

AWHONN supports universal screening for substance use during pregnancy to facilitate early identification and treatment of substance use. The position also opposes laws or other reporting requirements that result in incarceration or other punitive legal actions against women because of a substance abuse disorder in pregnancy. Please use this LINK to read the position statement in its entirety.
Breastfeeding
The revised position statement on breastfeeding affirms the benefits of breastfeeding to mothers, infants, and society. Please use this LINK to read the position statement in its entirety.

Role of the Registered Nurse in the Care of the Pregnant Woman Receiving Analgesia and Anesthesia by Catheter Techniques
The revised position statement affirms that the role of the registered nurse is to monitor pregnant women who are receiving epidural analgesia or anesthesia, but not manage the infusion. Please use this LINK to read the position statement in its entirety.

SAVE THE DATE FOR 2015
June 13-17, 2015
Long Beach Convention Center
Long Beach, CA

Click HERE for more information.

Welcome
New TN AWHONN Leaders
Angel Collier, MSN, RNC
Chattanooga Chapter Coordinator

Cindy Bass MSN, RNC, LCCE
TN Section Membership Coordinator

Sharon Davis, DNP, APRN, WHNP-BC
TN Section Legislative Chair
East Tennessee Launches Born Drug Free Tennessee Campaign

Karen Pershing, MPH, CPS II
Executive Director, Metropolitan Drug Commission

On February 9, 2015, The East Tennessee Regional Neonatal Abstinence Syndrome (NAS) Task Force launched a new public awareness and educational campaign to reduce the number of babies who are born exposed, to opiates. Tennessee has one of the highest rates of prescription drug abuse in the nation and the Eastern part of the state is being impacted particularly hard. In 2013, 921 cases of NAS were reported to the Tennessee Department of Health (first year of the registry). In 2014, that number increased to 973 with East Tennessee accounting for almost 40 percent of those cases. Most of the women delivering newborns exhibiting signs of drug withdrawal were on either replacement therapies or under supervision of a medical provider. Unfortunately, even though the mothers are doing everything possible to deliver a healthy newborn, current ACOG recommendations don’t recommend weaning a woman from opiates during pregnancy. As a result, women who are on medication replacement therapy for the treatment of drug addiction are still delivering babies who require detoxification, using morphine to ease painful withdrawal symptoms.

Recognizing that NAS is 100 percent preventable, the Born Drug Free Tennessee campaign was developed and launched. This campaign was created with the support of the Florida Department of Family and Children’s Services who developed a similar campaign, “Born Drug Free Florida.” The components of the initiative include: a website (BornDrugFreeTN.com), posters (3 different designs/messaging), billboards, radio and television public service announcements, patient education brochures, an educational piece for medical providers and Screening Brief Intervention and Referral to Treatment (SBIRT) for Obstetrical and gynecological providers. The campaign creates an umbrella to capture all the various community efforts to prevent NAS and deliver consistent messaging and information. Tennessee “Red Line”, which is a 24/7 referral line for mental health and substance abuse resources available in the state, is on all the printed materials and prominently displayed on the website. Our goal is to drive women struggling with addiction to seek both alcohol and drug treatment and prenatal care as early in the pregnancy as possible.

Although NAS is an epidemic in East Tennessee, the printed patient and provider education materials include other substances that can also have a negative outcome on maternal and fetal health such as: tobacco, alcohol, marijuana, stimulants and benzodiazepines. With almost 20 percent of pregnant women smoking and 1 in 100 babies born with Fetal Alcohol Spectrum Disorders, we can’t forget that these substances continue to contribute to adverse events.

On February 10th, the first SBIRT training was held for OB/GYN providers to assist them in understanding the disease process of addiction, the economic and health costs of substance abuse, how to implement screening tools identifying early signs of addiction and how to provide a brief intervention using motivational interviewing techniques to reduce patient risk. Providers attending received three continuing education units. By implementing evidence-based screening tools in medical providers’ offices, we have the ability to normalize the questions and intercept risky behaviors before becoming a lifelong, relapsing, chronic health condition.

Also under development are two additional components which include: educating incarcerated women on drug use and pregnancy as well as pregnancy prevention. Women attending the session will be offered free long acting reversible forms of birth control through the health department family planning clinics. The second component is providing family planning education to women of childbearing age who are receiving long-term opiate therapy through pain management clinics. Also included in the curriculum will be information on other preventative health services that women should be accessing, such as pap smears, mammograms, immunizations and annual physicals. Through a comprehensive, coordinated approach, we will be able to improve the health of both women and newborns in East Tennessee.

After all, a baby’s life shouldn’t begin with detox.

Check out the AWHONN TN Section website.

It’s updated with the most current section information.
Legislative Update
Sharon K. Davis, Legislative Chair

The 109th Tennessee General Assembly started off in an unusual way with Governor Haslam calling a special session for legislators to hear his answer to Medicaid expansion called Insure Tennessee. This legislation would have helped cover the 280,000 Tennesseans caught in the gap without coverage. Seven members of the Senate Health Committee voted down the Governor’s proposal, thus stopping any progression. Governor Haslam stated that he would not pursue any other measures at this time.

Possible bills of interest to AWHENN members include:

**SB615/HB674** Information required in pamphlet for newborn testing. This bill requires information disseminated by the department of health about the confidentiality of the birth defects registry to participating perinatal centers that will be made available to the families shall be made in a pamphlet. Provides that a newborn screening specimen taken for testing shall be kept for one year for the physicians to request additional testing.

**SB44/HB33** Testing for lysosomal disorders in newborns. This bill would add lysosomal disorders including Krabbe, Fabry, Gaucher, Pompe, Hurler Syndrome and Niemann-Pick, to the list of disorders that must be tested for newborns.

**SB680/HB456** Advanced practice registered nurses. Changes the title of advanced practice nurses to advanced practice registered nurses and changes references to their credentials from certificates to licenses; revises other provisions governing the practice of advanced practice nursing.

**SB775/HB2** Required ultrasound prior to abortion. Requires an ultrasound be performed not more than 72 hours and not less than 24 hours before the performance of an abortion. Requires the healthcare practitioner to verbally offer the pregnant woman an opportunity to view the ultrasound image and receive a printed copy. If the woman declines, the healthcare practitioner must provide: 1) a verbal explanation of the results, 2) a copy of the ultrasound image to the woman, and 3) an audible real-time heart beat for the woman to hear. Prohibits a provider from accepting any form of payment, deposit, or exchange or make any financial agreement for an abortion or abortion related services other than for payment of the ultrasound. Creates an exception for the ultrasound requirement where there is a medical emergency.

Please note that this is not an all-inclusive list of bills of which you may have an interest.

It is extremely important for Tennessee nurses to get involved with the legislative process as it is just one of the ways we advocate for our patients. Introduce yourself to your legislators. Let them get to know you. Many legislators comment that people do not get in touch with them until they want something. If a legislator takes a stand for something you believe in – let them know. Many legislators do not have a healthcare background and rely on us to educate them. Make the legislators aware of how you feel about your bills of interest. Do not feel intimidated – these people are just like us. I have met legislators who are pastors, small business owners, insurance salesmen and mothers. Get acquainted with the Tennessee General Assembly website at [www.capitol.tn.gov](http://www.capitol.tn.gov). If you do not know your legislators, you can click on “Find my legislator” and find out personal information, the committees on which they serve and their community involvement.

Contact your legislators – make a difference!

**Chattanooga Chapter**
Angel Collier, MSN RNC

The Chattanooga chapter of AWHENN is in a revitalization process. We are increasing public visibility by placing AWHENN flyers in the OB units of area hospitals. Also, the importance of AWHENN membership has been an agenda item at certain staff meetings and educational offerings. As a result of these efforts, membership is increasing.

Our Chattanooga area AWHENN meeting for 2015 is April 28th at 1:00 at Erlanger East hospital in Classroom A & B. We are going to treat the OB nurses with “Chocolate Therapy”. Our topic of discussion will include administration of Nitrous Oxide as pain management during labor. The speaker will discuss nursing implication for administration during labor, management of the postpartum and care of the newborn.
Middle TN Chapter
Melanie H. Morris and Barbara Padovich, Chairs

Hopefully our first quarter newsletter finds you well after a very persistent winter.

While the snow and weather is great for an unexpected day off, it also cramps one’s style, doesn’t it?

Due to inclement weather, January’s Wine and Webinar/First Quarter meeting was cancelled, as was the Nurses for Newborns fundraising event scheduled for February. However TIPQC’s February Conference was held as scheduled, presenting information on a variety of topics of interest across disciplines.

Nurses for Newborns fundraising evening has been rescheduled for Tuesday, April 28, 2015 from 5:30 – 9:00 pm. Tickets available through Nurses for Newborns.

Looking forward to the spring, let’s think about upcoming events.

The March of Dimes annual “Walk for Babies” is taking place in Nashville on Saturday, April 18th. Please email Barb Padovich at Barbara.padovich@belmont.edu if you would like to walk with the Middle Tennessee Chapter in Nashville. Or, you can check the MOD website to find a date and location in your area. We want to encourage you to walk for this amazing organization, which strives endlessly to increase optimal birth outcomes. On March 23rd representatives from the makers of Diclegis are hosting dinner and a brief presentation on this new medication available for management of nausea in pregnant women. Space is limited, so if you are interested in attending, you may RSVP at http://sf.oootoweb.com/treatnvp-dd140611 or by calling Kassia Ford at 615-944-3243.

Finally, do set aside the evening of Monday, May 18th for our Second Quarter meeting and webinars. We will offer the two offerings, scheduled for January on breastfeeding and NCCHD screening. We hope to see you then.

Welcome 12 New AWHONN TN Members!
December 2014-March 2015

Rebecca Colwell, BSN,RNC
Lawanda Darnell, AD, RN
Theresa Geissler, BSN,RN
Julie Denise Hubbard, AD,BSN
Kathleen E. Jacobs, BSN
Jamie Rena Kent, BSN,RN
Laura Kerr, BSN,MSN,RN
Elisha Largent, NP
Lora Diane Nylund, BSN,RN
Geneva Marie Record, RN
Diane Ridgway
Nancy Wilfong, BSN,RN