



Three Rivers Chapter Website <http://community.napnap.org/PATHREERIVERS/Home>

## HIGHLIGHTS FROM OUR PRESIDENT

By Terri Bailey, MSN, CRNP, IBCLC

I hope that everyone had a wonderful holiday season spending time with family and friends. These past 1 ½ years serving as president of Three Rivers Chapter of NAPNAP has been a great opportunity for me. I have had the pleasure of working with a group of very knowledgeable, dedicated, exemplary, fun loving nurse practitioners. Following our 18<sup>th</sup> Annual Winter Pharmacology Symposium, that will be held on February 7, 2014, I will be handing the reigns over to our president elect, Kathy Kelly to continue to lead our chapter. I wish to personally send a very warm hearted thank you to those members who have volunteered their time when I requested your help and let you know how truly grateful I am.

As of December 21, 2013, Three Rivers Chapter currently has 99 members. The executive board needs your active involvement to improve our chapter's visibility in our communities and provide fresh ideas for future events. We are looking for members who would like to serve on the executive board as president– elect, secretary and student liaison for the upcoming year. Please consider serving your chapter either as a board member or on a committee. We warmly welcome your name or

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the name of a colleague who you feel would be an asset to our chapter.

Our chapter will be celebrating its **20<sup>th</sup> Anniversary** in 2014. We will kick off our anniversary celebration by providing special gifts to those who attend our winter symposium in February. The executive board is planning a few special activities in 2014 to celebrate our anniversary, so stay tuned for more information.

I hope that you plan to join us for the symposium and other events scheduled in 2014. I look forward to seeing you!

Please do not hesitate to contact us at [3riversnapnap@gmail.com](mailto:3riversnapnap@gmail.com).

## Meningococcal Disease

By Virginia Allison, DNP, CRNP

I recently had the privilege of attending a school nurse dinner meeting and heard a parent, Bob Werner, share about the last days of life of his beautiful daughter Becky who died from a vaccine preventable form of meningococcal Meningitis. There was not a dry eye in the room and it was a wake-up call to me of the importance in getting

preteens and teens vaccinated against this deadly disease. Becky started feeling sick on a Tuesday and died the next day. Death can occur in as little as one day from the time symptoms first appear.

Meningococcal disease can occur as meningitis (inflammation of the lining of the brain

Please see ***Meningococcal Disease*** on page 2

*(Meningococcal Disease* from page 1)

and spinal cord), bacteremia, or pneumonia. This article will focus on meningitis which is the most common of the three.

Meningococcal meningitis (*Neisseria meningitidis*) is a serious bacterial infection

*“Death can occur in as little as one day from the time symptoms first appear.”*

that affects 800 to 1200 Americans every year. Serogroups B, C, and Y cause the majority of cases in the United States. Although it is rare, it is very deadly if not diagnosed and treated in its earliest stages. Two of the most common types of meningitis are viral and bacterial. Viral meningitis is less severe than bacterial meningitis and the immune system can usually fight it off without help. Bacterial meningitis is usually caused by one of three different bacteria (*Haemophilus influenzae* type B, *Pneumococcus*, and *Meningococcus*).

Those who are at greatest risk of developing meningococcal meningitis include infants, adolescents, young adults and those 65 years of age and older. This bacterium is spread through respiratory droplets such as coughing and sneezing as well as direct contact with respiratory secretions (saliva). Some of the activities that put adolescents and young adults at greater risk include: kissing, sharing utensils and water bottles and cigarettes, being in crowded conditions together (school bus, locker rooms), living in close quarters such as dorm rooms and camps, and not getting enough sleep which can weaken the immune system. It typically takes 3 to 7 days (range of 2 to 10 days) after exposure until symptoms of the disease first appear.

In its earliest stages, meningococcal meningitis can be hard to recognize. It can be mistaken for flu or viral illness. It is crucial to make the diagnosis early as death can occur within 24 hours. Common symptoms seen in individuals over 5 years of age include high fever, severe headache, stiff neck (you cannot touch your chin to your chest), confusion, vomiting, lethargy, irritability, sensitivity to light, delirium, and/or rash. Death will occur in 10 to 14% of the approximately 1000 Americans who contract meningococcal meningitis each year. Eleven to 19% of survivors will have permanent disabilities including amputation of arms, legs, fingers, and toes, neurological problems, mental retardation, hearing loss, and kidney damage.

Early diagnosis and treatment are crucial. Most people with meningococcal disease are hospitalized. A diagnosis can be made after examining the blood and spinal fluid. If the disease is suspected, antibiotic therapy must be started as soon as possible. Close contacts of a person with the disease (same household, roommates, or in direct contact with the person's oral secretions) should receive prophylactic antibiotics to prevent infection with the meningococcal disease.

Meningococcal meningitis first peaks in infancy and then has a second peak between the ages of 16 and 21 years. Vaccination is the best protection against this deadly disease. The Center for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) recommends routine vaccination of adolescents aged 11 through 18 years with meningococcal conjugate vaccine (MCV4) that protects against serogroups A, C, Y, and W-135. (Note: The Princeton University outbreak involved serogroup B and there is no *licensed* vaccine in the United States for Serogroup B.) A single dose of the vaccine should be administered at age 11 or 12

Please see *Meningococcal Disease* on page 9

## Legislative Updates

By Brenda Cassidy, MSN, CRNP

**State news:** Our current state issue is that SB1063 for nurse practitioner Full Practice Authority has been introduced in the Pa Senate by Senator Vance. This bill will not change scope of practice, however will remove the mandatory requirement for a collaborative agreement signed by 2 physicians to be registered with the state board of nursing. Currently there are 16 cosponsors and the Pa Coalition of Nurse Practitioners has hired a campaign manager, John Denny, to initiate a media campaign to pass this bill by July 2014. The campaign is focusing on "Tell me why" stories which are to be communicated to Pa senators as they are asked to support SB 1063 and sign on as co-sponsors. If you missed the Town Hall meeting in Pittsburgh describing the implications of this bill, you can view it on the coalition's website at [www.pacnp.org](http://www.pacnp.org).

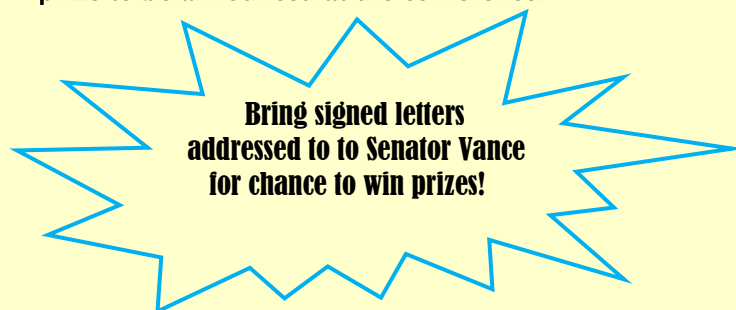
Opposition in Pa to SB 1063 includes the Pa Medical Society, the Pa Association of Family Physicians. The campaign message focuses on patient-centered team-based care and that patient outcomes with teams led by nurse practitioners are as good, if not superior, to physician led teams. Some coalitions, such as AARP, are supportive allies. The campaign is targeting 15 counties with key legislators including Allegheny, Beaver, Lawrence and Mercer counties. John Denny is asking Pa nurse practitioners to:

1. Email him at [jrdenny@dennycivicsolutions.com](mailto:jrdenny@dennycivicsolutions.com) if you have any connections to key coalition groups (list is posted on PCNP website)
2. Get a physician to write a letter to support full practice authority
3. Share your story with Senator Vance and send a letter describing why not having full practice authority has been a barrier to your patients at

[Vance@pasen.gov](mailto:Vance@pasen.gov)

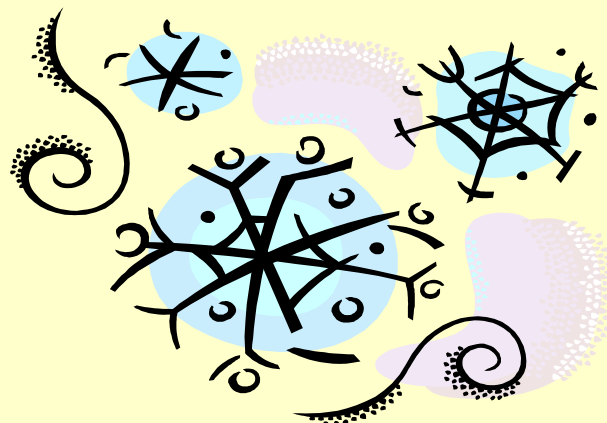
4. Use social media, follow and like PACNP on twitter and facebook.

Three Rivers NAPNAP challenges our members to respond to this call for letters by bringing letters addressed to Senator Vance to the Winter Symposium in February 2014. Lorraine Bock, president of PACNP, is speaking at the conference and we would like to deliver 100 letters from local nurse practitioners and physicians to her at the conference. **For every letter that you bring to the conference, you will receive a raffle ticket and a winner will be chosen at lunchtime, prize to be announced at the conference.**



Another issue included a bill that restricted nurse practitioners from hospital medical staff committees; this bill was tabled. An attempt was made to change language in the statute and when it was re-introduced physician only language was eliminated but hospital discretion was not included so it was included in SB 1063.

Representative Murt introduced a wrestling bill that currently requires a physician to be in attendance at matches and the bill will remove physician-only language to include nurse practitioners, however the Pa Medical Society is opposing the bill, despite a lack of available physicians.



**Federal news:** Current federal issues include monitoring the congressional resolution to reduce spending and ensure that funding continues to be directed toward nursing education and nurse managed clinics. Other issues at hand include support for any efforts at reducing barriers to practice such as current CMS

regulations that restrict nurse practitioner ordered DME and use of non-discriminatory provider language in any CMS revisions. The nurse practitioner community is actively seeking support for nurse practitioners to be included in pilot testing models of care such as the medical home.

## NAPNAP Strategic Plan Goals for 2013 – 2015

The mission of NAPNAP is to empower pediatric nurse practitioners (PNPs) and their healthcare partners to enhance child and family health through practice, leadership, advocacy, education and research. Strategic plan goals for 2013 – 2015 include the following:

**Goal 1:** NAPNAP will advocate for comprehensive, high-quality, evidence-based, equitable, and family centered healthcare for children provided by advanced practice registered nurses (APRNs).

**Goal 2:** NAPNAP members will be recognized for their pediatric health care expertise and contributions to the health and well-being of children by policy makers, health care leaders, consumers, and other stakeholders.

**Goal 3:** PNPs and their healthcare partners will have the information, resources, and professional acumen needed to ensure quality health care to children and their families.

**Goal 4:** NAPNAP will have the resources, capacity and strategic position necessary to fulfill its mission and achieve its goals.

For additional information about NAPNAP and current strategic goals visit [www.napnap.org/aboutUs/ourBusiness/StrategicPlan.aspx](http://www.napnap.org/aboutUs/ourBusiness/StrategicPlan.aspx)

## 20 Year Celebration for Three Rivers Chapter NAPNAP

By Kathy Kelly, CRNP

It was May 1994 when a small group of Pediatric Nurse Practitioners met for the first time. Ten signatures were needed to sign the official charter to become a chapter with NAPNAP. That small group has grown to include over a hundred

practitioners working in primary care offices, schools, universities, community clinics and hospitals. It is with great excitement that our Three Rivers Chapter will begin a yearlong celebration of our chapter's twenty years of growing and many accomplishments.

We will begin the festivities at our annual symposium where we will celebrate with reviewing our history, memorial gifts for all and time to network with both new and old members and friends. Call your friends, email others and encourage all to come enjoy this time to look back on where we started and how far we have travelled. How amazing it has been to watch our chapter grow and contribute to the promoting the role of the Nurse Practitioner both in the three rivers area and nationally.



## UPCOMING EVENTS

### Next Three Rivers Board Meeting

Date: Wednesday April 3<sup>rd</sup> 2014  
 Time: 6:30pm. All are welcome  
 Location: Kathy Kelly's Office  
 Pittsburgh Pediatrics  
 4923 Center Avenue, Pgh 15213

### Three Rivers NAPNAP Annual Winter Pharmacology Symposium

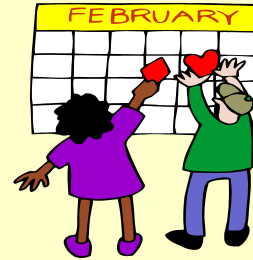
Date: Friday February 7, 2014  
 Location: Robert Morris University  
 Sewell Center

<http://community.napnap.org/PATHREERIVERS/calendar>

### 35<sup>th</sup> Annual NAPNAP Conference on Pediatric Health Care

Date: March 11<sup>th</sup> - 14<sup>th</sup> 2014  
 Location: Boston, MA

<http://www.napnap.org/Events/AnnualConference.aspx>



## MEMBERSHIP

By Terri Bailey, MSN, CRNP, IBCLC

Three Rivers Chapter of NAPNAP is **NINETY-NINE MEMBERS STRONG!!!** We have 51 fellow members, 27 active members, 6 new graduate members, 9 students, 3 retirees and 3 doctorate members.

### ACTIVE MEMBERS

- ❖ Are Pediatric Nurse Practitioners (PNP/ARNP), School Nurse Practitioners (SNP), Family Nurse Practitioners (FNP), Neonatal Nurse Practitioners (NNP), or Clinical Nurse Specialist (CNS) who are eligible for certification or have been certified by the Pediatric Nursing Certification Board, the American Nurses' Credentialing Center or the National Certification Corporation
- ❖ Include Registered Nursing Faculty members who prepare PNP's, SNP's, FNP's, NNP's, and CNS's
- ❖ Are graduates of a PNP Certificate Program prior to 1982
- ❖ Have the privilege of voting, serving on committees and holding office

### ASSOCIATE MEMBERS

- ❖ Are persons who are interested in fostering the objectives of NAPNAP
- ❖ May not vote or hold office, but may serve on committees and participate in Special Interest Groups according to their policies

### FELLOWS

- ❖ Are active members who have been certified by the Pediatric Nursing Board or the American Nurses Credentialing Center

### STUDENTS

- ❖ Are registered nurses currently enrolled in their first Nurse Practitioner/Clinical Nurse Specialist approved program
- ❖ Are only able to have this type of membership for **three consecutive years**
- ❖ Are eligible to become one of the above active members
- ❖ Do not have the privilege of voting, but are eligible for all other benefits
- ❖ **Are eligible for reduced dues**

**(Membership** from page 5)**DOCTORAL STUDENTS**

- ❖ Are professional nurse practitioners who are currently enrolled in a doctoral program
- ❖ Are eligible for active membership
- ❖ Do not have the privilege of voting, but are eligible for all other benefits
- ❖ Are not able to have this type of membership for two consecutive years
- ❖ Are eligible for reduced dues

**NEW GRADUATES**

- ❖ Are eligible for active membership at a reduced rate for the first year following completion of their nurse practitioner or clinical nurse specialist program
- ❖ Are eligible for all membership benefits

**RETIREES**

- ❖ Have retired from PNP/CNS employment or practice
- ❖ Are eligible for membership at half the regular annual dues
- ❖ Must be 62 years of age or older



**\*\*NEW DUES EFFECTIVE JANUARY 1, 2014\*\***  
 ACTIVE, FELLOW and ASSOCIATE MEMBERS –\$195  
 STUDENTS and DOCTORAL STUDENTS –\$105  
 RETIREEES –\$85  
 SIG MEMBERS –\$30

## Pathways.org: National Non-Profit Offering Free and Innovative Resources on Child Development

[Pathways.org](http://Pathways.org) is a national not-for-profit educational foundation that is dedicated to providing free resources and information for parents and health professionals on children's sensory, motor, and communication development. By sharing these free educational resources, Pathways.org hopes to increase knowledge of the importance of early detection and early intervention.

The [Assure Baby's Physical Development](#) free brochure offers a clear and concise chart to plot out development for the first year of life.

Endorsed by the American Academy of Pediatrics, the American College of Osteopathic Pediatricians, the National Association of Pediatric Nurse Practitioners, and the Pediatric Section of the American Physical Therapy Association, the brochure is a great tool that parents can use to track a child's developmental milestones and discuss any concerns with a health professional. This brochure is offered in 15 languages and can be downloaded, copied,

Please see [Pathways.org](#) page 7

([Pathways.org](http://Pathways.org) from page 6)

and shared for free.

The extensive Pathways.org [video library](#) contains 40+ free videos, available in multiple languages covering topics such as: early motor development, tummy time, sensory integration, the importance of pediatric therapy, and more. Most of the videos have accompanying handouts that provide an outline to help individuals follow along with the video and offer talking points for discussion.

For health educators, Pathways.org offers the free "[2, 4, 6 Month Motor – Course to Go](#)", an educational



tool distributed to help teach others about typical/atypical infant development and the importance of tummy time. The course is loaded on a silicone USB flash drive and contains an entire educational presentation including Power Points, scripts, outlines, handouts, and videos on topics key to identifying early motor delays. The course covers: an introduction to Pathways.org, the importance of early detection and Early Intervention, parent/doctor communication, and resources for referring children for a developmental screening. The most impressive feature of the course is the video comparisons of typical and atypical motor development between children at 2, 4, and 6 months of age. Anyone willing to teach the material to others and provide feedback can receive the course for free.

Visit Pathways.org to check out the site's many offerings. If you have any questions or concerns please email [friends@pathways.org](mailto:friends@pathways.org).

## Jeremiah's Place

By Kathy Kelly CRNP

Three River chapter of NAPNAP has another exciting opportunity to support Jeremiah's Place. Jeremiah's Place is a non-profit relief nursery being organized to provide 24/7 temporary childcare to children six and under. Jeremiah's Place provides a therapeutic refuge of rest, health, safety and psychosocial renewal for children and their families during times of crisis. We have previously given a donation from the chapter and 8 members participated in a three mile walk/run this summer.

The twentieth anniversary of our chapter is a great time to continue our community involvement. We will have a representative from Jeremiah's Place at the conference to familiarize all with the program. This will also give us a chance to hold a "baby

shower" for the children and families who will benefit from Jeremiah's Place. Please consider participating by bringing a donation to the symposium. There are a variety of ways to determine what is needed. [Target.com/babyregistry](http://Target.com/babyregistry) has a listing of those things identified by the organization that will be needed. To find out more go to registry First name Jeremiah last name Place. The list includes Aveeno baby products, bottles, sippy cups, newborn and toddler clothes, products needed in the kitchen. If you enjoy donating books on the Jeremiah's Place website there is a wish list for books they would like to have in their center. When in doubt they can

Please see *Jeremiah's Place* page 8

*(Jeremiah's Place* from page 7)

always use diapers all sizes and pull-ups.

We will have a new toy box the chapter has purchased so please plan on helping us fill the toy box for all those infants, children and families. Any questions please feel free to contact Kathy Kelly.



## Flu Vaccine and Children: Current CDC Recommendations

By Mary Z. Kish, DNP, CRNP

According to the Centers for Disease Control (CDC) influenza or “the flu” in children is more dangerous than the common cold and can result in death. Each year an average of 20,000 children under the age of 5 are hospitalized because of complications of the flu. During the 2012–2013 influenza season, the CDC reported more than 165 flu-related pediatric deaths, with severe influenza complications most common in children younger than 2 years old. Children with chronic health

**“EACH YEAR, MANY CHILDREN  
GET SICK WITH SEASONAL INFLUENZA;  
SOME OF THOSE ILLNESSES RESULT  
IN DEATH.”**

problems like asthma, diabetes and disorders of the brain or nervous system are also at especially high risk of developing serious flu complications according to CDC experts. Therefore, the best way to protect children from the flu is to get them vaccinated each year.

The seasonal flu vaccine protects against the influenza viruses that research indicates will be most common during the upcoming season. Traditional flu vaccines (called trivalent vaccines) are made to protect against three flu

viruses; influenza A (H1N1) virus, an influenza A (H3N2) virus, and an influenza B virus. In addition there are flu vaccines made to protect against four flu viruses (called “quadrivalent” vaccines) available the 2013 – 2014 season. These vaccines protect against the same three viruses as the trivalent vaccine and an additional B virus.

There are special instructions for vaccinating children ages 6 months through 8 years of age as some of these children require two doses of the vaccine. If a child in this age is getting vaccinated for the first time two doses are recommended. The first dose should be given as soon as the vaccine is available. The second dose should be given at least 28 days after the first dose. The first dose is said to “prime” the immune system while the second dose provides immune protection.

Children younger than 6 months of age are too young to be vaccinated. Therefore the best way to protect them is to make sure people around them are vaccinated. For more information visit:

[www.cdc.gov/flu/protect/children](http://www.cdc.gov/flu/protect/children)



**20th Anniversary  
Kickoff Celebration**



**Hors d'oeuvres  
and  
Cash Bar**

The 18<sup>th</sup> Annual Three Rivers Chapter of NAPNAP  
Winter Pharmacology Symposium

**February 7, 2014**

Robert Morris University  
Sewall Center  
Conference Level  
119 Campus Drive  
Moon, Pa. 15108

**SPECIAL gifts!**

**PRIZES!**

**Topics:**

**What's New in Adolescent Contraception**

**Precocious Puberty**

**Update on Current Youth Drug Trends**

**Legislative Update**

**Follow-up Care of the Premature Infant**

**Infant Skin Development: New Understandings and Clinical Implications**

**Simple Procedures in a Primary Care Office**

**Members - \$100**

**Nonmembers - \$120**

**Students - \$50**

**Vendors - \$300**

\* 6.5 NAPNAP CE contact hours of which  
5.5 contain pharmacology (Rx) content

Go to the **Three Rivers NAPNAP** site now to register!

*(Meningococcal Disease* from page 2)

and a booster dose should be given at age 16. MCV4 was first recommended for adolescents in 2005. It was thought to provide 10 years of protection but current data suggests that it only protects for 5 years, thus the need for a booster dose at age 16. Pennsylvania law requires that student's who enter grade 7 must have one dose of meningococcal conjugate vaccine. At the present time in Pennsylvania, there is no law requiring a booster dose at age 16. Pennsylvania law does require that all college/university students who live in dorms have one dose of meningococcal conjugate vaccine or the student must sign a waiver (if he/she is a minor, the parent must sign the waiver). Not

all states make this a requirement. As Health Care Professionals, we must educate parents about the importance of getting preteens and teens vaccinated against this deadly disease. We must not miss any opportunities to vaccinate this population.

Take home message: We must remain ever vigilant in getting preteens and teens vaccinated against this deadly disease!

#### References

<http://nasn.org/ToolsResources/Immunizations/VoicesofMeningitisGetInTheGame>  
<http://www.cdc.gov/vaccines/schedules/easy-to-read/preteen-teen.html>  
<http://www.cdc.gov/meningococcal/>  
[http://www.state.nj.us/health/cd/meningo/documents/meningococcal\\_faq.pdf](http://www.state.nj.us/health/cd/meningo/documents/meningococcal_faq.pdf)  
<http://www.immunizationinfo.org/vaccines/state-requirements/pennsylvania>

'14

## 2014 CONFERENCE ON PEDIATRIC HEALTH CARE STRENGTH IN CHILDREN'S HEALTH

35<sup>TH</sup> ANNUAL CONFERENCE

Hynes Convention Center • Boston, MA • March 11 - 14, 2014



### Join NAPNAP in Boston!

The 2014 Annual Conference has Educational Programs that Meet the Needs of Practicing NPs and Students

SAVE THE DATE!

35th Annual Conference

March 11–14, 2014, Boston, MA

NAPNAP invites you to experience the 35th annual conference on pediatric health care - Strength in Children's Health. Join your colleagues from across the nation in historic Boston, where you'll explore a wide range of clinical topics and learn about the latest evidence-based practice guidelines.

## Social Media

**Website Address** for Three Rivers NAPNAP:  
<http://community.napnap.org/PATHREERIVERS/Home> Please send any information that you would like posted to the email address on the website

**Facebook** : Please like us on the Three Rivers Facebook page. Please send any information that you would like posted to the email address on our website.

## Three Rivers NAPNAP Board and Committee Members

*BOARD MEMBERS 2013 - 2014*

President	Terri Bailey	<a href="mailto:terri.bailey57@gmail.com">terri.bailey57@gmail.com</a>
President Elect	Kathy Kelly	<a href="mailto:kkwvu@aol.com">kkwvu@aol.com</a>
Past President	Bev Curtis	<a href="mailto:curtis.beverly@gmail.com">curtis.beverly@gmail.com</a>
Treasurer	Lori Wilkerson	<a href="mailto:lwilk7@aol.com">lwilk7@aol.com</a>
Secretary	Jessica Devido	<a href="mailto:jac40@pitt.edu">jac40@pitt.edu</a>
Membership	Kathy Kelly	<a href="mailto:kkwvu@aol.com">kkwvu@aol.com</a>
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Constitution and Bylaws	Jessica Devido	<a href="mailto:jac40@pitt.edu">jac40@pitt.edu</a>
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Newsletter Chair	Mary Kish	<a href="mailto:mkish@upmc.edu">mkish@upmc.edu</a>
Website Chair	Terri Bailey	<a href="mailto:terri.bailey57@gmail.com">terri.bailey57@gmail.com</a>
Website Chair	Bridgetta Devlin	<a href="mailto:mbridgetta@aol.com">mbridgetta@aol.com</a>
Communications/Public Relations Chair	Bridgetta Devlin	<a href="mailto:mbridgetta@aol.com">mbridgetta@aol.com</a>
Symposium Chair	Terri Bailey	<a href="mailto:terri.bailey57@gmail.com">terri.bailey57@gmail.com</a>
School Nurse Liaison	Ginny Allison	<a href="mailto:ginniemillie@aol.com">ginniemillie@aol.com</a>
Student Liaison	Vacant	
Facebook Chair	Bev Curtis	<a href="mailto:curtisbeverly@gmail.com">curtisbeverly@gmail.com</a>