

Research Paper and Poster Presentation Information: AWHONN 2010 Convention, “Sharing Science, Finding Solutions”

Research paper and poster presentations are **original** and pertain to completed research or evidence-based practice projects related to women’s health, obstetric and/or neonatal practice, education or administration. **Submissions are reviewed blindly.**

Researchers can indicate a preference to present orally in a paper session, or as a poster. All applicants interested in presenting orally are encouraged to indicate a willingness to display a poster if not selected for oral presentation. There are a limited number of slots available for oral presentation plus our poster room is extremely well attended. Arguably more attendees are exposed to your work there than in an oral presentation which competes with 9 other sessions.

Criteria for Selection (Research)

- Research study complements the convention theme, goal and objectives
- Relevant problem statement/research hypothesis, clearly and succinctly written
- Literature and conceptual framework provides basis for study
- Design procedure appropriate
- Sample/subjects appropriate
- Measurement/data gathering strategies defined
- Data analysis/reduction appropriate and related to the problem
- Discussion/interpretation/evaluation clear
- Content free of commercial bias
- Application/implications for women’s health, obstetric or neonatal nursing practice, education or future research included.

Criteria for Selection (Evidence-Based Practice Project)

- Project complements the convention theme, goal and objectives
- Explanation of current practice and proposed change succinctly written
- Guidelines used are evidence-based, clearly described
- Design/procedures appropriate for EBG selection
- Clearly delineated implementation strategies
- Sample/subjects appropriate
- Data analysis of outcomes is appropriate and related to the problem
- Discussion/interpretation/evaluation clear
- Content free of commercial bias
- Application/implications for women’s health, obstetric or neonatal nursing practice, education or research.

Theme, Goal and Objectives

The theme of the AWHONN 2010 Convention is *Sharing Science, Finding Solutions*. The goal of the 2010 AWHONN Convention is to share science and find solutions promoting excellence in the care of women and newborns.

Participants will:

- Identify strategies for optimizing communication among health care stakeholders.
- Explore innovations to measure and improve outcomes.
- Translate research to implement evidence into practice.

Submission Process

To expedite the submission process, gather required components before entering the Speaker Management System. You will be asked to provide the following:

- **Title:** Should be catchy, yet still clearly reflect the content. Sample titles: *An Animal Assisted Therapy Intervention for High Risk Antepartum Women;* *Changing Nursing Practice to Incorporate Evidence Based Practice: Skin-to-Skin Care.*
- **Submitter's email:** If there is more than one submitter, list the email address of the primary contact.
- **Presentation format:** You will be asked to indicate your preference to present as a paper, a 30 minute oral presentation, or as a poster. If you select paper, you will also be asked if you are willing to present as a poster if your abstract is not selected as a paper.
- **Brief description:** This is 2-3 sentences, no more than 75 words, intended for posting on the convention website or other program materials to let attendees know what the session is about. You want them to attend your session, this should capture their interest. Sample descriptions:
 - *Research has supported the benefits of animal assisted therapy (AAT) in a variety of populations. The literature suggests that the high risk antepartum population is at an increased risk for boredom and anxiety. This poster explores the effects of AAT on boredom and anxiety in pregnant women in the hospital who are at high risk for early labor.*
 - *National and professional organization policies and recommendations are calling for skin-to-skin care beginning immediately after an infant's birth and continuing until after the first feeding is complete, but implementing this recommendation is a dramatic change to current practice. Maternity nurses at a Midwestern hospital addressed the challenge through a translation research project: documenting current practices, delineating the barriers, developing bench marks to monitor outcomes, providing staff education. Successes and outcomes of the project will be presented.*
- **Three behavioral objectives** This is what the learner should be able to do on completing your session. Sample objectives:
 - *Identify patterns of intrapartum maternal fluid intake in relation to delivery type.*
 - *Describe the implementation sequence of a research study with maternal-newborn dyads.*
 - *Describe the relationship of maternal intrapartum fluid intake to newborn weight loss, urine and stool output.*
- **Teaching delivery methods** You will be asked to select from a list of delivery methods; the methods you choose should be appropriate for the content and objectives.
- **Pharmacology content** You will be asked to estimate how many minutes you will spend discussing medications during your presentation.

Pharmacology content is defined broadly as any reference to the origin, nature, chemistry, effects and uses of drugs. It includes pharmacognosy, pharmacokinetics, pharmacodynamics, pharmacotherapeutics and toxicology.

For example a 60 minute session on implications of the Women's Health Initiative, a study examining the health risks and benefits of hormone use, would likely contain 60 minutes of pharmacology content. Although the presenter is not talking about doses, mechanisms of action or absorption rates, she is spending 60 minutes discussing the effects and uses of hormones and pharmacotherapeutic implications. Similarly a session on outreach programs for HIV positive pregnant women is likely to include mention of protocols for treatment and access to medication which would make the session eligible for pharmacology credit.

- **Bibliography** Reviewers want to see the scientific or academic basis for your presentation, the sources for your assertions. You will be asked to provide at least 5 references, preferably from peer reviewed journals. At least 3 of them must be current as of the last 5 years. A sample bib:

Burkman, R., Grimes, D., Mishell, D., & Westhoff, C. (2006). Benefits to contraception to women's health: An evidence-based perspective. *University of Southern California: Dialogues in Contraception*, 10(3).

Center for Disease Control. (2008). Estimated pregnancy rates by outcome for the United States, 1990-2004. *National Vital Statistics Reports*, 56(15).

Center for Disease Control. (2005). Fertility, family planning and reproductive health of US women: Data from the 2002 National Survey of Family Growth. *Vital and Health Statistics*, 23(25).

Corbett, P., Mitchell, C., Taylor, J., & Kempainen, J. (2006). Emergency contraception: Knowledge and perceptions in a university population. *American Academy of Nurse Practitioners*, 18,161-168.

Finer, L. & Henshaw, S. (2006). Disparities in rates of unintended pregnancy in the United States, 1994 and 2001. *Perspectives on Sexual and Reproductive Health*, 38(2), 90-96.

- **Content Outline** To determine if the content is congruent with your description, title and objectives, you will be asked to provide the outline for your presentation. If you have indicated you prefer making an oral presentation, you must indicate how many minutes you will spend on each component of the outline. Make sure that the time allotted for each component totals 30 minutes. If you have specified that you will discuss medications, please detail in your outline. Sample objectives with appropriate outline:
 - *Identify the research intervention implemented in this study.*
 - *Discuss the impact of the study intervention on mothers' breastfeeding for night feedings.*
 - *Identify the impact of the study intervention on breastfeeding babies being fed in the nursery at night.*

I. Purpose of Study (5 minutes)

II. *Background (5 minutes)*

- A. *Healthy People 2010 Breastfeeding goals*
- B. *Current hospital breastfeeding rates*
- C. *Potential factors impacting breastfeeding*

III. *Research Methods (10 minutes)*

- A. *Recruitment of study participants*
- B. *Survey methods*
- C. *Analysis of data*

IV. *Research Results (5 minutes)*

- A. *Maternity patient satisfaction with the breastfeeding experience*
- B. *Percentage of mothers breastfeeding at night time feedings*
- C. *Percentage of breastfeeding mothers having the baby fed in the nursery at night.*

V. *Conclusions (5 minutes)*

- A. *Study limitations*
- B. *Implications for future research*
- C. *Summary*

- **Disciplines** You will be asked to check off the focus area or areas covered in your presentation.
- **Expert Level** Please indicate if you think your content is targeted toward nurses who have some expertise in the area.
- **Publication** Please indicate if at a later date you are interested in publishing your presentation in our journals.
- **Author Information** You will be asked to provide contact information, credentials and affiliations for all presenters. In addition you must include a short biosketch (limited to 200 words) which will be read to introduce you to attendees. Focus of the biosketch should be what makes you qualified to present the topic. This is a biosketch for a research presentation on intrapartum maternal fluids and neonatal weight loss and output:

Jane Lamp is an experienced clinician and educator. She is ANCC certified as a Perinatal Nurse and an AWHONN member. She has held positions as university clinical nursing faculty, staff nurse, and staff development specialist prior to her current role as CNS. She has served as team leader for several evidence-based Women's Health Department process improvements such as Smoking Cessation, Skin-to-Skin Mother-Baby Care, and the Late Preterm Infant initiatives. Jane led a nursing research study as a co-PI.

- **CV/Resume** All presenting authors must upload a current CV or resume.
- **CNE Disclosure** All presenting authors must disclose any relevant financial interests. In addition, you must also indicate whether you will include discussion of off label drug or device use. These disclosures will be shared with learners prior to the start of your session, typically as a slide.
- **Abstract Text** You will be asked to submit a narrative summary of your talk, limited to 500 words. This isn't shared with attendees but used by reviewers to assess your approach to the topic, your grasp of the current state of practice and

science, and the level of sophistication of the presentation. You can create this in Word first and then cut and paste into the Speaker Management System. A sample abstract on a study looking at animal assisted therapy in high risk antepartum populations.

Problem Statement/Hypothesis: Research has supported the benefits of animal assisted therapy (AAT) in a variety of populations. The documented benefits of AAT include reducing loneliness, improving communication, fostering trust, reducing the need for medication, improving cognitive functioning, enhancing the quality of life, improving physical functioning, decreasing stress and anxiety, improving vital signs, and motivating patients.

Literature Review: The literature suggests the high risk antepartum population is at increased risk to experience boredom and anxiety. However, there is a gap in the literature addressing the use of AAT in this population. The purpose of this pilot study was to explore the effects of AAT on boredom and anxiety in pregnant women in the hospital who are at high risk for preterm delivery.

Sample: The sample for the study was a convenience sample of 43 women with high-risk pregnancies who were admitted for prescribed bedrest on a high risk antenatal nursing unit.

Methodology: The study design was an equivalent groups pretest-posttest design. Subjects were randomly assigned to one of two treatment groups (AAT or usual care [no AAT]). The AAT group received a 30 minute animal visit. The independent variable was the treatment (AAT or usual care) and the dependent variables were boredom and anxiety. The following data collection tools were utilized: Boredom Proneness Scale, State Trait Anxiety Inventory, Pre/Post Boredom Visual Analog Scale, and Demographic Information Sheet.

Data Analysis & Interpretation: Repeated measures models testing for main effects revealed a significant group by time interaction [$F(1, 39) = 16.80, p = .0002$] for boredom response. Boredom Visual Analogue values decreased by 8.89 for the control group from 70.37 pre to 61.47 post ($p = .10$), compared to a 38.45 decrease from 61.00 (pre) to 22.55 (post) for the AAT group ($p < .0001$).

A significant group by time interaction for state anxiety response scores [$F(1, 39) = 14.72, p = .0004$] was also found. In the AAT group, there was a significant ($p < .0001$) decrease in pre to post state anxiety scores. A smaller, yet significant decrease ($p = .0132$) in scores in the non-AAT group was found as well. Pre state anxiety scores were 58.58 and post state anxiety scores were 54.32 for the control group compared to 58.05 (pre) and 45.18 (post) for the AAT group.

Adjustments for baseline trait anxiety, baseline boredom score and time in hospital did not lead to any changes in the results for boredom. Likewise, adjustments for the baseline trait anxiety, baseline boredom score and time in hospital did not lead to significant changes in state anxiety.

Implications for Nursing Practice: Prescribed bed rest can increase the risk of anxiety and boredom in hospitalized antepartum women at high risk for preterm labor.

Nurses must anticipate adverse effects on both the pregnant woman and the fetus and plan nursing care accordingly. The literature indicates that visits by family/friends, television, and roommates can help reduce anxiety and boredom.

Results of this study support the use of AAT as another way to affect emotional outcomes in this population.

Tips and Timeline

You do not have to complete the submission in one sitting. You can click save and

continue at the end of a page and get back to the submission by using your log-in number. If the system will not let you save the content because you have not completed the entire page, you can simply fill in a place holder such as “to be determined”, and come back to that field at another time.

All abstracts submissions must be completed by August 17, 2009; you will be notified of the Program Committee’s decision in October, 2009.

If Your Abstract is Selected for Presentation

All accepted submissions will be eligible for the prestigious *Best Research Program Award* presented at a designated time during convention.

Paper presenters will be provided an LCD projector, computer, screen and lectern with microphone. No other audio/visual equipment will be provided or may be used. Each paper session will be limited to **30 minutes**, which should include time at the end for questions and answers. A **maximum of two people** can present a paper. *AWHONN does not permit use of flipcharts, overheads, slides or videocassettes during paper presentations.*

Posters are put on display in a room or foyer adjacent to the Exhibit Hall. Because we offer contact hours for poster review, posters cannot share space with exhibitors. Presenters are expected to be at their posters and available for questions during specified times. Attendees can earn a maximum of 5.0 contact hours by viewing posters. Selected poster presenters will be provided with a 4ft. X 8ft. corkboard and chair. Electrical outlets will not be available. A **maximum of two people may present a poster.**

Presenters will be responsible for their own travel and all expenses related to their presentation. All presenters are required to register to attend the convention and will be eligible for a \$75 discount off of full convention registration fees.

Questions or Concerns

If you should have any questions or concerns, please do not hesitate to contact Claudia Reid Ravin by phone at 202-261-2416 or by email at cravin@awhonn.org or Debra Livramento by phone at 202-261-2428 or by email at dlivramento@awhonn.org.