Babies in Intensive Care Gain Guardian ANGEL Eye

It’s not easy for a mother to leave her newborn, premature baby at the hospital while she returns home, even though she knows that the baby is getting exactly the care that is needed. Her instincts and strongest desires tell her she should stay with this beautiful, fragile child.

Leaving the hospital while an infant is in intensive care, for whatever reason, is a difficult choice for parents to make, but one often dictated by family and professional obligations, as well as finances. At the University of Arkansas for Medical Sciences (UAMS), the new ANGEL Eye program will go a long way toward easing parental anxiety under such circumstances.

ANGEL Eye is an innovative program that uplinks specialized cameras to the Internet, allowing parents to view their infants over the Web. The program went live on Valentine’s Day (Feb. 14) 2006. Curtis Lowery, M.D., a professor in the UAMS College of Medicine’s Department of Obstetrics and Gynecology and director of the Division of Maternal-Fetal Medicine, created the program. He said the program will eventually become part of a research project on bonding. “We believe the ability of a mother to see her infant, even from a computer screen 100 miles away, will help her bond with her baby,” he said.

There are currently five cameras in the UAMS Medical Center’s Neonatal Intensive Care Unit (NICU), which are attached to movable IV poles and stationed at individual isolettes. NICU has as many as 10 babies on any given day, and the program plans to expand to accommodate all of them.

Once a camera is assigned to an individual infant, the parents are given a password that allows them to access the camera through the ANGELS Web site. Using the ANGEL Eye program, parents can zoom in and take snapshots of their infant and e-mail them to friends and family. This Web site also provides general educational information about premature babies and NICU, as well as a “Frequently Asked Questions” section about the technology used by ANGEL Eye.

However, parents are not able to simply get online at any time to view their infant, even with a password. To assure privacy and conform to HIPAA regulations, infants will be on camera for 15 minutes twice a day, seven days a week. An Internet connection may also be made directly by the infant’s doctor so that the baby will be on camera during a telephone conversation with the parents.

ANGEL Eye is a part of ANGELS (Antenatal and Neonatal Guidelines, Education and Learning System), a nationally recognized telemedicine program.
ANGELS Holds 22nd Annual UAMS Conference on Perinatal Care

More than 300 participants from across Arkansas received the latest word on obstetrical and neonatal topics during the 22nd Annual UAMS Conference on Perinatal Care, held April 13-14 in Little Rock.

Judith McGhee, M.D., medical director for Arkansas Medicaid, was awarded the prestigious ANGELS Hawks-Workman Award in Perinatal Care. ANGELS presented its first-ever nursing awards during the conference. Aurian Zoldessy, R.N., the patient care director at the Department of Health and Human Services, was recognized for outstanding service in obstetrical nursing. Tandy Miller, R.N., who is a specialty nurse in the Neonatal Intensive Care Unit at Arkansas Children’s Hospital, was recognized for her dedicated service in neonatal nursing.

Another of the conference’s many highlights was a panel between Arkansas’ gubernatorial candidates Asa Hutchinson and Mike Beebe, who discussed their visions for improved health care in Arkansas. Both candidates emphasized the need for rural health improvements, but each proposed different methods in achieving progress. Hutchinson discussed his proposed task force on health information technology, and Beebe stressed Arkansas’ need to expand the use of telemedicine and other technologies to reach rural residents across the state.

Twenty-seven speakers presented at the two-day conference. Among the participants were ANGELS staff Mandi Dixon, Shannon Barringer and Lynne Parker, who demonstrated a genetic counseling appointment with targeted ultrasound through telemedicine. Other topics included oxygenation in the fetus and neonate, helping patients cope with perinatal loss and thermoregulation in the neonate.

The 22nd Annual Perinatal Conference was considered by all who attended to be a real success and even more impressive than years past, and ANGELS is already anticipating a bigger and better conference next year!

Judith McGhee, M.D., medical director for Arkansas Medicaid, receives the prestigious ANGELS Hawks-Workman Award in Perinatal Care from E. Albert Reece, M.D., Ph.D., M.B.A., dean of the UAMS College of Medicine, during the 22nd Annual UAMS Conference on Perinatal Care.

ANGELS is a Candidate for Ash Institute Award

The ANGELS program has been named as a top contender for the Ash Institute’s Innovations in American Government Awards and currently stands among the top 5 percent of applicants for the award.

As a “Top 50” finalist, ANGELS will receive a two-day on-site evaluation by Innovations representatives in early spring. In addition, delegates from ANGELS will present at the Innovations Finalist Events in May, when 18 finalists will be identified. The Innovations National Selection Committee will then choose seven award winners. Each winner will receive extensive press coverage and will serve as a national model for replication. Each of the seven winners will also be eligible for a $100,000 grant, to be used for the development of a replication plan in cooperation with Innovations staff.

The Innovations in American Government Program* recognizes and promotes excellence in the government programs aimed at the public sector that demonstrate outstanding examples of creative problem solving. By highlighting exemplary models of government’s innovative performance, the program serves as a catalyst for continued progress in addressing the nation’s most pressing public concerns.

All units of government – federal, state, local, tribal and territorial – within the United States of America are eligible for recognition and awards under the following guidelines:

- Programs must be administered under the authority of one or more governmental entities.
- Programs must have been implemented 12 months prior to the date of submission.
- Programs must be currently in operation.
- Applications must be submitted by the governmental entity responsible for the innovation.

The Innovations in American Government Program is a part of the Roy and Lila Ash Institute for Democratic Governance and Innovation, John F. Kennedy School of Government, at Harvard University.

*Information describing the Innovations in American Government Program and its award process was obtained from the program’s Web site at www.ashinstitute.harvard.edu/Ash/awards.htm.

Evidence-Based Guidelines Now Available on CD!

Beginning in June, all new ANGELS guidelines will be distributed to physicians biannually on compact disks.

For more information, please call (501) 526-7425 or toll-free (866) 273-3835.
Focus On . . .
Stephanie Wyatt, A.P.N., M.N.Sc.

A doctor's life can be pretty hectic, but the schedule of at least one advanced-practice nurse may very well equal that of the busiest doctor.

Stephanie Wyatt, A.P.N., M.N.Sc., was hired specifically so that the lives of three doctors, all maternal-fetal medicine specialists at the University of Arkansas for Medical Sciences (UAMS), wouldn’t be quite so frenetic. Wyatt and these doctors – Helen Kay, M.D., Curtis Lowery, M.D., and Paul Wendel, M.D. – all see patients at the University Women’s Health Center in Little Rock.

“I fill a different role with each one of the doctors, but the common denominator is that I’m there to help them help the patients,” Wyatt said.

Wyatt, who works at the clinic three and a half days a week, is licensed to prescribe medications and treat patients much as a doctor would. “If I’m not sure of a diagnosis, I’ll run it by one of them,” she said. “The patients are fine with that. Many of the patients appreciate being able to see one person instead of seeing a different doctor each time they come in. In addition, I often have more time to spend with them than the physicians.”

Wyatt said patients can reach her at almost any time, including evenings and weekends. “I’m available to them on call for emergencies or questions,” she explained. “Sometimes, I can handle the calls over the phone, so the patient doesn’t have to go into the hospital. And, patients love the fact that I already know their medical history.”

As a member of the ANGELS team, Wyatt deals with far more than patient care. She supervises three other A.P.N.s and also writes educational material for patients about high-risk pregnancies. In addition, she leads organization and planning efforts for the Department of Obstetrics and Gynecology’s annual Conference on Perinatal Care.

As a part of the ANGELS grant-writing team, she has helped to write and submit four grants since January, including one on which she is the principal investigator. This grant, which is her first, is a $5,000 Novice Researcher grant supported by the Association of Women’s Health, Obstetrics and Neonatal Nurses (AWHONN). “If I’m awarded the grant, I’ll use it to research how patients feel when they receive bad news about a baby or pregnancy over telemedicine, as opposed to learning it face to face from a doctor,” she said. “There’s really nothing in the literature that indicates that anyone else has looked at this.”

Wyatt has been involved with AWHONN for seven years and currently chairs the organization’s Arkansas section. AWHONN is the nursing equivalent of the American College of Obstetrics and Gynecology.

ANGELS Announces
New Fetal Anomaly Teleconference

ANGELS and the UAMS Department of Obstetrics and Gynecology are developing “Fetal Anomaly Interdisciplinary Management” (FAIM), a new multidisciplinary teleconference series that will review fetal anomaly cases seen in the Arkansas Reproductive Genetics Program clinics at UAMS. Each conference will discuss a fetal anomaly specific to a different medical or surgical pediatric subspecialty. Each case will be reviewed from diagnosis through care of the infant after delivery.

Goals of FAIM are to:

• Review normal and abnormal prenatal ultrasound/MRI findings
• Refine diagnoses
• Establish better management plans
• Discuss recurrence risks, prognosis and/or prevention

Interactive Education Offered for Nursery Nurses

The following continuing education courses are available via interactive video to nursery nurses. The sessions are sponsored by the UAMS Rural Hospital Program and will be held from 3–4 p.m. on the third Tuesday of each month.

For more information, call Shannon Barringer, M.S., at (501) 686-6179 or barringer Shannon@uams.edu, or contact Shannon Lewis, R.N., at (501) 526-7819 or lewiss hannond@uams.edu.
Obstetric Guidelines:
- Shoulder Dystocia
- Management of Morbid Obesity in Pregnancy
- Management of Eating Disorders in Pregnancy
- Preconceptional Care
- Immunizations During Pregnancy
- Exercise During Pregnancy and the Postpartum Period
- Nutrition During Pregnancy
- Ovarian Masses During Pregnancy
- Non-Rh Isoimmunization
- Management of Cystic Fibrosis and Other Ethnic-Based Carrier Screening
- Management of Missed Abortion and Intrauterine Fetal Demise

Neonatal Guidelines:
- Necrotizing Enterocolitis
- Intraventricular Hemorrhage Prevention Strategies
- Perinatal Varicella Exposure
- Respiratory Distress Syndrome
- HIV and the Neonate
- Herpes and the Neonate
- Hepatitis B and the Neonate
- Use of Antibiotics in the Nursery (Group B Strep, E Coli, MRSA)
- HIE Management
- Seizure Management

It’s Time for a Change!

To better accommodate our providers, ANGELS has changed the time it will hold its monthly Neonatal Teleconferences.

As of April 20, the Neonatal Teleconference is being held via interactive video from 12:30 p.m. to 1:30 p.m. on the third Thursday of each month.

For more information, please contact the ANGELS Call Center at (501) 526-7425 or toll-free at (866) 273-3835.

Thanks to the review and participation by obstetrical and neonatal providers around Arkansas, ANGELS has defined best practices for more than 70 high-risk pregnancy conditions and 17 neonatal conditions. We welcome your participation in review of best practices and case conferences and invite you to attend these monthly teleconferences.

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