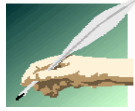




Message from the President



As the National Birth Defects Prevention Network grows and evolves we are embracing new challenges and planning for future opportunities. Since the summer of 2004, NBDPN teams have been working on strategic planning. Teams conducted surveys, gathered information, described our organizational profile, evaluated products and services, consulted with external parties, and hired a management consultant. The consultant worked directly with the NBDPN Strategic Steering Group and Advisory Council, and also interviewed NBDPN members. NBDPN strategy teams gained valuable knowledge about strategic planning and the world of non-profit management from the consultant.

The National Birth Defects Prevention Network's Strategic Plan for 2006-2010 refines the organization's focus areas of birth defects surveillance, prevention and research. The Plan also recognizes the importance of governance, stewardship and sustainability.

The strategic planning process provided NBDPN with the opportunity to articulate a vision: **Birth defects surveillance advances science and its application to birth defects prevention.** This statement supports our mission and allows us to imagine our place in the future. Planning also challenged NBDPN to improve the alignment between mission, membership, products, resources, and relationships.

The Plan contains four goals that address significant areas of importance for NBDPN:

Goal I: Establish and support core program services and products that support the mission of the Network

Goal II: Establish new partnerships and strengthen existing collaborations that increase the effectiveness of the Network.

Goal III: Create and maintain the optimal infrastructure to support the mission of the Network.

Goal IV: Create a diversified funding base to support infrastructure and core program services.

Each goal is supported by several objectives, which in turn are supported by specific activities. Objectives and activities are approached through a variety of strategies, including prioritization of member contributions, capacity building, revenue diversification, outcomes measurements, marketing, government efforts, and opportunities for impact, resources, and measurement strategies.

NBDPN is eagerly embracing the next phase of strategic planning: Moving from development to implementation. Tom Peters, internationally known for his management expertise advises, "If a window of opportunity appears, don't pull down the shade".



NBDPN Strategic Steering Group and Advisory Council: 2005

The Plan challenges us to take action, to think creatively, and to transform vision into reality. NBDPN committees and small teams will have lead roles as we work on implementing areas of the Strategic Plan. I encourage you to become involved in this dynamic and collaborative effort. The Network membership is a wealth of creative energy. I appreciate your ideas, efforts and contributions as we embrace the future together.

Carol Stanton, Denver, Colorado
President, NBDPN

News from the CDC



Centers for Birth Defects Research and Prevention

The Centers for Birth Defects Research and Prevention (CBDRP) have continued to collaborate on the National Birth Defects Prevention Study (NBDPS), which now includes over 23,000 completed maternal interviews and almost 10,500 infant DNA samples. NBDPS data were presented at the NBDPN meeting in a special session. Several working groups have been established to determine research priorities for the NBDPS. This has resulted in a research agenda that prioritizes manuscripts to be completed in 2006 on topics such as obesity and diabetes, nutrition, smoking, alcohol and caffeine, and medications.

Two epidemiologic studies of the combined NBDPS data have been recently accepted for publication:

Reefhuis J, Rasmussen SA, and Friedman JM. Use of Selective Serotonin Reuptake Inhibitors during pregnancy. *NEJM* letter to the editor (in press).

Siega-Riz AM, Olshan AF et al. Maternal dietary fat intake and the risk of gastroschisis. *Birth Defects Research Part A*, (in press).

In addition, several abstracts have been accepted for presentation at national scientific meetings this summer including:

Caton AR et al. Antihypertensive medication use and cardiovascular malformations. *Society for Pediatric and Perinatal Epidemiologic Research*, June 2006, Seattle, WA.

Prakalapakorn SG et al. Risk factors for infantile cataracts, National Birth Defects Prevention Study, 2000-2002. *Society for Pediatric and Perinatal Epidemiologic Research*, June 2006, Seattle, WA.

Rasmussen SA et al. Maternal thyroid disease as a possible risk factor for craniosynostosis, National Birth Defects Prevention Study, 1997-2002. *Teratology Society Meeting*, June 2006, Tucson, AZ.

State Birth Defects Surveillance Cooperative Agreements

A CDC Birth Defects Regional Meeting was held in Baltimore, MD on May 22-23, 2006. Program staff from Alabama, Delaware, District of Columbia, Georgia, Maryland, New Jersey, New York, North Carolina, Pennsylvania, South Carolina, Virginia, and West Virginia participated in the meeting. As with previous regional meetings, topics covered include birth defects surveillance methodology, quality assurance, referral/follow-up to services for affected families, confidentiality, data exchange, program promotion, and prevention issues. CDC is now planning for the next phase of the regional meetings, and welcomes suggestions and comments regarding the format and content of these meetings. Comments can be sent to Cara Mai at cmai@cdc.gov.

Science Ambassador

Science Ambassador, a program in which CDC scientists work with top current and future middle and high school science teachers to educate them about different scientific public health issues, is gearing up for another great year. For 2006, CDC will host two workshops, one in June and the other in July, featuring topics like epidemiology and surveillance, autism, ADD/ADHD, Alzheimer's disease, diabetes, nutrition, skin cancer and more. A total of 17 teachers from around the country will participate including three pre-service teachers from select universities.

The Science Ambassador staff is still busy finalizing the 2005 lesson plans and will add those to previous ones to make available a total of almost 50 lesson plans. All lesson plans meet National Science Education Standards, ensuring that teachers across the nation can use them in their classrooms. Lesson plans developed during the first two years are available to all teachers through NCBDDD's [Web site](http://www.cdc.gov/ncbddd/foliccid/ScienceAmbassador.htm) (<http://www.cdc.gov/ncbddd/foliccid/ScienceAmbassador.htm>).

We urge you to share this information with your state contacts. Also, be sure to check back with us soon for more lesson plans from our 2006 program!

Optimal Nutrition

The Optimal Nutrition Initiative is now in its last phase of implementation planning. The ad concepts and other campaign materials are being finalized currently. The campaign will be launched locally in late September 2006 on 20 of the largest universities across the country, and nationally the campaign will include a website and public relations outreach.

meeting is scheduled for September 11, 2006 at the Global Communications Center at the Centers for Disease Control and Prevention (CDC) in Atlanta, GA. Watch for FANews and check the NCFAs website for the meeting time and agenda. Potential topics to be covered at the meeting include Hispanic outreach, folic acid fortification and obesity.

If you are interested in what folic acid activities and projects other member organizations have developed, watch for the *Member Spotlight* section in FANews each month.

--KAY PEARSON, OKLAHOMA CITY, OK

**News from
NBDPN
Liaisons**



**National Council on Folic Acid (NCFAs)
Update**

NCFAs is planning two folic acid education events for 2007. The first event will be the third National Folic Acid Awareness Week, January 8th through January 14th, 2007. A workgroup is being formed to develop educational materials, novelty items and other campaign materials to assist members in spreading the folic acid message. All items will be made available on the NCFAs website <http://www.folicacidinfo.org>. NCFAs is interested in promoting members' existing low-literacy folic acid educational materials and would like to compile a list of available materials. If your organization has low-literacy materials and would like to offer them as part of National Folic Acid Awareness Week, contact Donna Gentry at dgentry@hmhb.org. A second workgroup is also being formed to plan a Mother's Day campaign in May 2007. Check the NCFAs website and watch for FANews updates on these two opportunities to educate the public, health care professionals and legislators on the benefits of folic acid in preventing birth defects.

Mark your calendars for the NCFAs Annual Meeting. It will be held in conjunction with the 2006 National Health Promotion Conference, September 12-14, 2006 presented by the CDC Coordinating Center for Health Promotion. The NCFAs Annual

**News from
the
March of Dimes**



On January 31, congressional staff from more than 30 offices joined birth defects researchers and program directors from all 50 states for lunch and a briefing on birth defects surveillance, research, and prevention. The briefing, held in the historic U.S. Senate Caucus Room, was sponsored by Senators Kit Bond (R-MO) and Chris Dodd (D-CT), the March of Dimes, and the National Birth Defects Prevention Network. It was held in conjunction with the 2006 National Birth Defects Prevention Network meeting.

A distinguished panel presented information about the leading causes of infant mortality. Panelists also spoke about current promising research and successful prevention activities at the federal and state levels. Speakers at the briefing were:

- Marcia Feldkamp, P.A., M.S.P.H., Immediate Past President, National Birth Defects Prevention Network, Utah
- Peggy Honein, Ph.D., Senior Epidemiologist, National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention, Georgia
- Thomas Sadler, Ph.D., Visiting Professor, University of Miami, Miller School of Medicine, Florida

- Heather Trammell, parent of a child with Down syndrome, Virginia

The goal of the educational briefing was to increase awareness among members of congress of the importance of funding federal birth defects programs. This will be especially valuable as the fiscal year 2007 Budget and Appropriations process gets underway. The FY2007 President's Budget, released February 7, proposed severe cuts to many public health programs, including \$14 million in cuts to the National Center on Birth Defects and Developmental Disabilities at CDC.

In a continuingly tough fiscal climate, the March of Dimes encourages you to take advantage of every possible opportunity to inform members of congress about the importance of birth defects surveillance, research and prevention. Some possible avenues to improve congressional awareness of the importance of these programs are: (1) sending a letter; (2) attending and speaking at a district meeting; (3) scheduling a personal meeting; and (4) calling your representative and/or senator's office to advise them of your interest in federal support for birth defects surveillance, research and prevention.

-- EMIL WIGODE, WASHINGTON, DC

Committee News



SURVEILLANCE GUIDELINES AND STANDARDS COMMITTEE (SGSC)

The SGSC was very involved in multiple sessions at the Annual Meeting. All sessions were well attended and well received including: Limb Defects, Guide to Guidelines, The Abstractor's Toolbox, Improving Quality & Comprehensive of Birth Defect Registries, and the Guidelines Focus Group. Thanks to all who worked on these sessions!

The first two sets of Coding Questions & Answers from the Coding Workgroup were sent to the listserve and will be put on the NBDPN website. The web survey evaluating the Guidelines pro-

duced useful results and will help guide activities. The new chapter on Presenting Birth Defects Data is well on its way. Another chapter workgroup on Prenatal Diagnosis Surveillance will get up and running in the near future. Lists with a variety of abstractor or coder resources have been pulled together by the Technical Tools workgroup and will be put on the website.

The SGSC has been examining the NBDPN Strategic Plan to determine what activities it will need to take on. Goal 1 "Establish and support core program services and products that help the Network carry out its mission" is an area the SGSC will heavily involved in and, fortunately, several plan items were already in the works. Some Strategic Plan Activities:

- *1-1.5 Maintain and update the Guidelines for Conducting Birth Defects Surveillance to improve surveillance program's uniformity and data quality across the U.S.
- *1-2.1 Define the core standards (e.g. timeliness, type of defects) and activities (e.g. rapid surveillance capacity, NTD prevention, data to action, referrals) of surveillance programs
- *I-1.9 Develop and disseminate through the website a document outlining minimum standards and activities of a surveillance program,
- *I-2.3 Develop course content, regional workshop opportunities, and skills testing to certify abstractors
- *I-1.8 Develop technical resources and/or a state mentoring system for members to increase skills and knowledge of recommended practices
- *I-2.2 Provide a structure to evaluate interested state based programs through a SWOT analysis, a scoring tool, and application and communication of data.

Check out the current Guidelines at <http://www.nbdpn.org/current/resources/bdsurveillance.html>.

If you would like to be part of a very dynamic and creative process, contact me at ann.phelps@dshs.state.tx.us.

--ANN PHELPS, AUSTIN, TX

EDUCATION AND OUTREACH COMMITTEE

The committee members assembled in Arlington Va. at the Annual Meeting in January. Many new members were welcomed by co-chair Amy Nance as well as those who have been part of such a productive group. A new co-chair, Mary Knapp, was welcomed by the members. The committee would like to thank Jane Simmermon, the former co-chair, for her contributions to the work of this committee. The primary task of this committee has been to develop a Birth Defects Prevention Month (BDPM) packet. Due to the success of last year's packet and the relevance of the subject, the topic of the packet for 2007 will again be issues related to preconceptional health. This packet will be distributed to state birth defect program contacts, Fetal Alcohol Syndrome state directors, and Children with Special Health Care Needs state directors. Distribution of the packet is planned for the fall of 2006. Current packet materials are available online at <http://nbdpn.org/NBDPN/bdpm2006.html>. If you would be interested in promoting birth defect prevention strategies, additional members are always welcomed. Information about the committees activities can be obtained from co-chairs Amy Nance (UT) aenance@utah.gov or Mary Knapp (NJ) mary.knapp@doh.state.nj.us.

The committee is appreciative to all who contributed to the development and distribution of the 2006 packet.

--AMY NANCE, SALT LAKE CITY, UT
--MARY KNAPP, TRENTON, NJ

STATE DATA COMMITTEE

The biggest change with the data committee has been the departure of Sam Viner-Brown as the committee Chair. Sam had served in this role for a number of years, and her leadership and vision have been invaluable in building the initiatives and products that have emerged from the data committee. Fortunately, Sam promises to remain an active member of the committee. The new committee co-chairs are David Law, from Tennessee, and Craig Mason, from Maine.

Currently, members of the data committee are involved in a number of projects—foremost being preparation for the 2006 Annual Report. Other current activities include:

- Preparation of a manuscript examining birth defects based on data from 13 states.
- An ongoing collaborative project on Gastrochisis/Ventral Wall Defects that is nearing completion. Work from this collaboration has been presented at the Annual MCH Epidemiology Conference, as well as the Canadian Congenital Anomalies Meeting.
- Production of a draft manuscript of national prevalence estimates based on data from 11 states with active case finding.
- In partnership with the Ethical, Legal, and Social Issues committee, the presentation of a poster on inter-state data exchange at the NBDPN National Conference.
- Development of a draft survey assessing ascertainment criteria being used by birth defects programs. The draft version is currently under review and may be implemented on-line.
- An on-going collaboration with the Data Committee and Surveillance Guidelines and Standards Committee aimed at developing a new chapter in the Surveillance Guidelines and Standards Manual that would address presentation of birth defects data across a range of formats and settings.
- In addition, members of the committee have begun exploring the possibility of establishing a formal, readily accessible, historical archive of papers, reports, and other products that have resulted from data committee activities.

As this suggests, membership in the data committee provides many opportunities to participate in a variety of different projects and activities. Please feel free to contact David (David.Law@state.tn.us) or Craig (craig.mason@umit.maine.edu) if you have questions or would like to get involved.

-- CRAIG MASON, ORONO, ME
--DAVID LAW, NASHVILLE, TN

**PUBLICATIONS AND COMMUNICATIONS
COMMITTEE**

The P&C committee is busy aligning this year’s activities with the NBDPN Strategic Plan. In particular we are hoping to focus on a long-term plan for keeping the NBDPN web site maintained with current and timely information. We are also discussing efforts to enhance the NBDPN website. A membership renewal process will soon be available on the site. We have received a lot of great input on what should be included in and what should be the function of a *member’s only section*. This committee will prioritize this information and present it to the Executive Committee for approval. We are always interested in your input as to what would be most useful to you on the web site so please keep in touch and feel free to send correspondence or better yet become involved with the committee and help out with the ongoing design process.

Among our regular ongoing activities, the newsletter, annual report and list of potential articles of interest remain on schedule. We appreciate the contributions of all the NBDPN members without whose contributions these would not be possible.

Further information about this committee’s activities can be obtained from Russel.Rickard@state.co.us

-- RUSSEL RICKARD, DENVER, CO

ANNUAL MEETING COMMITTEE

The annual meeting committee is busily planning our 10th annual conference. The specific dates and location will be determined soon. We are looking at hotels in San Antonio or Austin, Texas, during the weeks of January 29th or February 5, 2007. The program will be constructed around topics identified from the 2006 conference evaluation forms, a survey of committee chairs, and strategic plan goals for NBDPN. More information will be forthcoming shortly, so watch the listserv and NBDPN's website.

--RUSS KIRBY, BIRMINGHAM, AL
-- KIM HAUSER, TAMPA, FL

MEMBERSHIP AND ELECTIONS

The M&E committee compiles the list of organizations with which the NBDPN, to a greater or lesser extent, interacts. It will be valuable in the future for the Network to coordinate and collaborate activities. The following table identifies the evolving list of organizations with common interests in birth defects prevention.

Organization
Association of Maternal and Child Health Programs (AMCHP)
Association of State and Territorial Health Officials (ASTHO)
Canadian Congenital Anomalies Surveillance Network (CCASN)
Council of State and Territorial Epidemiologists (CSTE)
External Partner Group (EPG)
HuGeNet
National Assoc of County Health Officers (NACCHO)
National Healthy Mothers, Healthy Babies Coalition (HMHB)
Organization of Teratology Information Services (OTIS)
Spina Bifida Association of American (SBAA)
Teratology Society (TS)
Trust for America’s Health (TFAH)

We encourage NBDPN members and our committees to consider how interactions with these organizations will advance our Network’s mission.

Our Member-at-Large, Glenn Copeland, recently welcomed via email all new members. In case you missed his email, he encouraged all new members to participate in at least one committee. To prepare for the next year’s group of new members, the M&E committee is looking for a couple of members to help plan for the welcoming session in 2007. If you would enjoy arranging for this fun social event, please contact the M&E committee

--TIM FLOOD, PHOENIX, AZ

ETHICAL, LEGAL, AND SOCIAL ISSUES (ELSI)

The ELSI Committee will be involved with several projects this year related to the NBDPN strategic plan. Some of the policies and projects we are developing include: 1) a financial sponsorship policy that would address issues such as taking and receiving donations, fund raising, and dispersing of funds for travel and partnerships; 2) a protocol/checklist for letters of support (e.g. grant applications for states); and 3) a flow chart (decision tree) using the network's mission statement as guidance to address issues such as financial support and letters of support for grants, network name being used as a sponsor, and letters of support for state legislation. The committee will look at issues related to newborn screenings and put together a fact sheet and/or frequently asked questions document specific to birth defects. In addition, the ELSI Committee will be working with the Communications & Education Committee on developing a policy regarding copywriting NBDPN fact sheets and other publications.

Cynthia has graciously agreed to stay on as co-chair of the ELSI Committee. Thank you! She is a great asset to the committee and organization. If you have suggestions for future projects or would like to join the ELSI committee, please let us know at debra.musa@omr.state.ny.us or Cynthia.cassell@nccmail.net.

-- CYNTHIA CASSELL, RALEIGH, NC
-- DEBRA MUSA, SCHENECTADY, NY

NTD SURVEILLANCE AND FOLIC ACID EDUCATION

Thanks to those of you that attended the committee meeting at the NBDPN Annual Meeting and have joined us on subsequent calls. We have had some excellent discussions that have generated good ideas for new and existing projects.

This committee is currently involved in several projects at various stages, including:

- Post-Partum Educational Pamphlet - English and Spanish versions of a pamphlet advo-

cating the continued use of folic acid and healthy habits for mothers after childbirth have been completed. This working group is awaiting approval from both the CDC and NBDPN before it can print and distribute the pamphlets.

- NTD Recurrence Prevention Survey A working group is trying to define the characteristics of a feasible program for neural tube defect recurrence prevention. Results from a survey that was sent out to state contacts are currently being analyzed. This information will be developed into a manuscript and presented at the National Health Promotion Conference in September.
- NTD Ascertainment Project Trend Analysis - A working group has been formed to analyze rapid ascertainment data to see if spina bifida and anencephaly rates have declined or leveled off since fortification.
- FA Education in Medical School Curricula - This working group is trying to learn what information on folic acid is provided to medical students, retained, and passed along to patients.
- Two new projects have been proposed. Requests for data are being created for these projects and will be sent out soon. The first project will try to determine why data from hospitals/birth certificates shows a 20% decrease in NTDs when complete ascertainment shows a 40% decrease. The other project will use spline regression to analyze and compare decreases in NTD rates before and after fortification.

We enthusiastically welcome new members, and encourage you to join us if you find any of these projects appealing or if you have ideas for new projects. Please contact Julianne Collins at julianne@ggc.org for more information.

--JULLIANNE COLLINS, GREENWOOD, SC



Surveillance Spotlight

The United States Department of Defense Birth and Infant Health Registry

The United States Department of Defense (DoD) is challenged with monitoring and protecting the health of all of its service members and their families. The growing number of women on active duty and the diverse hazardous exposures associated with military service make reproductive health issues a special concern for the DoD. In response to this concern, the US Senate recommended the establishment of a birth defects registry for military families to better understand the reproductive health effects of military service.

Each year nearly 100,000 babies are born to US military families around the world. All live births in the US military health system, including births at military and civilian facilities, are captured in the DoD Birth and Infant Health Registry. Among these live births, birth defects and outcomes are defined by International Classification of Diseases Ninth Version, Clinical Modification (ICD-9-CM) coding of inpatient and outpatient encounters in the first year of life. The ICD-9-CM code range for birth defects is consistent with state birth defects surveillance programs, such that the prevalence of birth defects in all major malformation categories may be calculated. To assess the potential under-reporting, over-reporting, or miscoding of diagnoses, active case validation is performed through record review from births at military and civilian medical facilities worldwide.

Infants born to military families are identified through detailed surveillance of all inpatient and outpatient healthcare utilization in the first year of life. The DoD Birth and Infant Health Registry also includes data on associated medical conditions, geographic location, and demographics of the military sponsor. When linked to other standard military databases, important information can be

captured on occupational and environmental exposures that may be associated with birth defects.

The DoD Birth and Infant Health Registry responds to the needs of young military families in addressing their reproductive health concerns with strong science and surveillance. Data captured in the DoD Birth and Infant Health Registry are strictly confidential. The registry does not report or share information that includes any identifiers. The DoD Birth and Infant Health Registry reports birth defects surveillance data annually in DoD reports, as well as to the National Birth Defects Prevention Network.

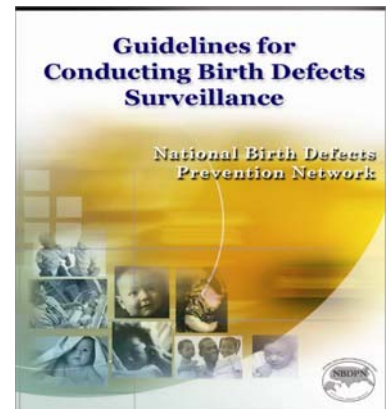
A wealth of helpful information including research products, and contact information can be found at: <http://www.nhrc.navy.mil/rsch/code25/projects/birthdefects.htm>.

The text for this article was obtained with permission from the following website: <http://www.nhrc.navy.mil/rsch/code25/projects/birthdefects.htm>

Surveillance Question Corner

Q1: In the last newsletter, there was an announcement about a web survey to collect opinions on the NBDPN's Guidelines for Conducting Birth Defect Surveillance. How do I find out the results of that survey?

A1: We received a lot of good information from people who took the survey and participated in the focus group at the annual meeting in Arlington, VA. The results are posted on the NBDPN web site under the section for the Surveillance Guidelines and Standards Committee. Point your browser to:



<http://www.nbdpn.org/current/committee/surveillance.htm>

Thank you to all the people who shared their thoughts with us!

Q2: How do you address missing test results (that has been ordered-evidence in the chart) in a medical record and address this matter with the facility's HIM staff/department?

A2: Dealing with this issue will need to be handled using the best avenue, which can best be determined by previous experiences with this particular HIM Department and the relationship established with the staff. Keep in mind your objective, use non-punitive language, and always conduct yourself as a professional when working with the HIM Department.

Here are some tips:

*Make one final review of the medical record by checking for an indication of the Unit Clerk's acknowledgement of the physician's order. In most hospitals, Unit Clerks usually coordinate physician's orders and requests for testing with the Ancillary Department. Check for nurse notes that mention either results or assessments.

*Determine how the diagnostic test results flow to the medical record in this HIM Department

*Inquire about possible delays in the filing of loose lab and test results into medical records. If the hospital is transitioning from paper to electronic patient record, know the storage and flow of test results

*Most test results can be traced to their original source (x-rays to radiology; chromosomes to lab). If allowed, contact individual Ancillary Departments.

2005 NBDPN Annual Award Recipients

The Godfrey P. Oakley, Jr. Award

honoring an individual who has made significant contributions to the field of birth defects

Presented to

Gary M. Shaw, DrPH



The President's Award

honoring an NBDPN member who has made significant contributions important to the mission and goals of the National Birth Defects Prevention Network, Inc.

Presented to

Russell S. Kirby, PhD,MS,FACE



THE STATE LEADERSHIP AWARD

honoring the outstanding contribution or leadership by a state program in the development or expansion of birth defects surveillance, or its use in the promotion of prevention services.

Presented to
John A. Harris, MD, MPH and the California Birth Defects Monitoring Program

Birth Defects Education and Prevention Award

honoring the outstanding activities of an agency to promote public awareness of birth defects through innovative and collaborative education and prevention efforts.

Presented to
Western North Carolina Folic Acid Campaign

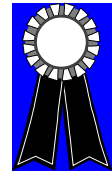


A special tribute:

Presented to
Marcia Feldkamp, PA MSPH

In appreciation of your dedication and leadership as President of the National Birth Defects Prevention Network, Inc. during the year 2005

2006 NBDPN Annual Meeting Poster Winners



Category 1: Case Ascertainment

First Place Awards:

Title: Registry Development of a Web-based System for Case Reporting, Data Management and Communication for the Birth Defects Registry in New York State

Program: New York State Congenital Malformations Registry

Authors: Philip K. Cross, Ying Wang, Patricia M. Steen, Charlotte M. Druschel, Jennifer L. Cukrovany, Zhen Tao, David R. Marion

Category 2: Birth Defects Risk Factors/Birth Defects Rates and Trends

First Place Award:

Title: Alcohol Consumption by Women Before and During Pregnancy

Program: Texas Birth Defects Registry

Authors: Mary K. Ethen (TX), Tunu Ramadhani (TX), Angela Scheuerle (TX), Mark Canfield(TX), Diego Wyszynski (MA), Charlotte Druschel (NY), Paul Romitti (IA)

Second Place Award:

Title: Association between Maternal Tobacco Smoke and Alcohol Exposure and the Occurrence of Anorectal Atresia/Rectal Stenosis

Program: National Center on Birth Defects and Developmental Disabilities

Authors: Susan E. Manning, Sonja A. Rasmussen, Jennita Reefhuis, Margaret A. Honein

Category 3: Birth Defects Rates and Trends

First Place Award:

Title: National Prevalence Estimates for Selected Birth Defects in the U.S., 1999-2001

Program: National Birth Defects Prevention Network

Authors: Mark A. Canfield (TX), Nataliya Yuskiv (March of Dimes), Margaret Honein (CDC), Cara T. Mai (CDC), Owen Devine (CDC), Larry Edmonds (CDC), Charlotte Hobbs (AR), Russell Kirby (AL), Tunu Ramadhani (TX), Mi-

chael Davidoff (March of Dimes), Joann Petrini (March of Dimes), Jian Xing (March of Dimes), Sam Viner Brown (RI), Julianne Collins (SC), Paul Romitti (IA), Bill Budelier (IA), Brad McDowell (IA), and Gary Shaw (CA)

Second Place Award:

Title: Epidemiologic Features & Clinical Subgroups of Anotia/Microtia in Texas
Program: Texas Birth Defects Epidemiology and Surveillance

Authors: Ly Nguyen, Peter Langlois, Angela Scheuerle, Mark Canfield, Amy Case

Third Place Award:

Title: Exploring Analyses Available using Newly Geocoded Birth Defect Data

Program: Illinois Adverse Pregnancy Outcome Reporting System

Authors: Jane E. Fornoff, Trish Egler

Category 4: Prevention, Intervention, and Public Policy

First Place Award:

Title: Survey of Dietetic and Nursing Professionals in Michigan Reveals a Need for Continuing Education on the Role of Folic Acid in Preventing Neural Tube Defects

Program: Michigan Department of Community Health - Birth Defects Prevention Program

Authors: Nelda Mercer, Jane Simmermon, Janice Bach, Srimathi Kannan



Birth Defects on the Internet



CDC Issues Preconception Health Care Recommendations

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5506a1.htm>

Learn more about oral health and pregnancy at:

<http://www.hmhb.org/>

Hot Summer? Try getting some Northern Exposure at:

<http://www.phac-aspc.gc.ca/ccasn-rcsac/index.html>

Mark Your Calendars



Jun 25-28

Title: National Environmental Health Association Annual Educational Conference & Exhibition

City: San Antonio, Texas

Location: Hyatt Regency San Antonio

Contact: Cindy Dimmitt

Phone: 303-756-9090, ext. 343

Email: cdimmitt@neha.org

Website: www.neha.org

Jul 25-29

Title: 2nd Annual University of Illinois Public Health Summer Institute

City: Zion, IL

Location: Illinois Beach Resort

Contact: Rani Mishra

Phone: 312-996-7919

Email: rmishra@uic.edu

August 7-11

Title: 2005 Joint Statistical Meetings (Sponsored by ASA, ENAR, WNAR, IMS and SSC)

City: Minneapolis, Minnesota

Email: meetings@amstat.org

Aug 10-13

Title: National Association of Local Boards Health 13th Annual Conference
City: Nashville, Tennessee
Location: Hilton Nashville Downtown
Contact: Debbie Fallon
Phone: 419-353-7714
Email: nalboh@nalboh.org

Aug 10-13

Title: Local Boards of Health: Responding to Our Community's Needs
City: Nashville, TN
Location: Hilton Suites Downtown
Contact: Jennifer O'Brien
Phone: 419-353-7714
Email: jennifer@nalboh.org
Website: www.nalboh.org

Aug 21

Title: 15th Annual Summer Institute for Public Health Practice
City: Seattle, WA
Location: Northwest Center for Public Health Practice, School of Public Health and Community Medicine, University of Washington
Contact: Nedra Floyd Pautler
Phone: 206.685.1130
Email: sanjose@u.washington.edu
Website:
<http://healthlinks.washington.edu/nwcp/edu/si/>

Aug 22-26

Title: Summer Institute for Public Health Practice 2005
City: Seattle, WA
Location: Gates Hall, University of Washington
Contact: Nedra Floyd Pautler
Phone: 206-616-9245
Email: pautler@u.washington.edu

Sep 25-27

Title: 4th Annual Public Health Information Network Conference
City: Atlanta, Ga
Location: Hyatt Regency, Atlanta
Contact: Barb Nichols
Phone: 404 639-7600
Email: phin2006@cdc.gov
Website: www.cdc.gov/phin

Oct 24-27

Title: 2005 Newborn Screening and Genetic Testing Symposium
City: Portland, OR
Location: Hilton Portland and Executive Tower
Contact: Terry Reamer
Phone: 202.822.5227 x220
Email: treamer@aphl.org

November 5-9

Title: American Public Health Association 133rd Annual Meeting
City: New Orleans, Louisiana
Location: Ernest N. Morial Convention Center
Contact: www.apha.org

December 6-8

Title: 12th Annual Maternal and Child Health Epidemiology (MCH EPI)
City: Atlanta, GA
Location: OMNI Hotel at CNN Center
Website:
<http://www.cdc.gov/reproductivehealth/MCHEpi/2006/AboutConference.htm>

NATIONAL BIRTH DEFECTS PREVENTION NETWORK

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For membership information contact:
 Cara Mai at (404) 498-3918 or email: cmai@cdc.gov

NBDPN Newsletter Editorial Board: Russel Rickard -Chair, Kimberlea Hauser, Russ Kirby, Julianne Collins, Cara Mai, and Neetu Bali.

The National Birth Defects Prevention Network (NBDPN) is a group of individuals involved in birth defects surveillance, research, and prevention.

This newsletter is published twice a year.

The newsletter and additional information are also available on the internet at <http://www.nbpdn.org>.

Please send comments or questions about this newsletter to Russel Rickard at russel.rickard@state.co.us.