



## **Defense Health Agency, J-7, Continuing Education Program Office**

### ***Clinical Communities Speaker Series: Emerging Priorities in Women's Health***

**25 February 2021**

**0730-1645 (ET)**

#### **Purpose**

The Defense Health Agency (DHA), J-7, Continuing Education Program Office (CEPO) Clinical Communities Speaker Series (CCSS) events are designed to address the professional practice gaps of our learners in order to improve the care that our health care professionals deliver. These educational series are intended to achieve results that reflect a change in skills, competence, and performance of the health care team, and patient outcomes. Collaboration occurs with the Department of Defense, several government agencies, and academic partners, and other civilian experts for recruitment of academic subject matter experts, clinicians, and researchers to present on current promising, evidence-based research and best practices, thus enhancing the overall educational experience. Participants are expected to apply what they learned in providing patient care individually and collaboratively as a team towards improved patient outcomes.

#### **Target Audience**

This activity is designed to meet the educational needs of Physicians, Nurses, Pharmacists, Pharmacy Technicians, Physician Assistants, Optometrists, Social Workers, Psychologists, Dentists, Dental Hygienists, Dental Lab Technicians, Registered Dietitians, Dietetic Technicians, Case Managers, Certified Counselors, Occupational Therapists, Kinesiotherapists, Healthcare Executives, Audiologists, Speech Language and Hearing Pathologists, and other health care professionals who support/ care for U.S. active-duty service members, reservists, Coast Guard, Public Health Service, National Guardsmen, military veterans and their families.

#### **Program Overview**

The topics covered offer continuing education (CE)/continuing medical education (CME) accredited content to all health care providers and support the full range of military operations in order to sustain the health of all those entrusted to DHA's medical care. The event will:

- Instruct health care providers on successful implementation of relevant evidence-based and best practice strategies for the health care team.
- Demonstrate how learning new skills will improve overall readiness, health outcomes, and possibly reduce unnecessary costs.
- Engage learners in specific training and case vignettes for the application of acquired skills in instilling the importance of applying improvements in the collaborative team approach, which results in positively impacting patient care.

This event highlights current evidence-based practices, policies, and recommendations and initiatives in women's health issues including mental health, intimate partner violence (IPV), cardiovascular disease, human papillomavirus (HPV), and COVID-19 in pregnancy and its ethical considerations in women's health care. The educational content is created by Subject Matter Experts in the ethical, research, academic and medical domains of the military and civilian health care sectors. The primary focus of this event aims to enhance the quality of patient outcomes and population health by providing advanced continuing education opportunities to improve the practice, skills, and knowledge of health care providers across the Military Health System (MHS).

This CE/CME activity is provided through DHA J-7 CEPO and is approved for a maximum total of 7.0 CE/CME credits.

## Program Agenda

Time (ET)	Titles/Speakers	Educational Objectives (If Applicable)
0730-0735	<p><b>Welcome Remarks</b></p> <p><b>Lolita T. O'Donnell, Ph.D., M.S.N., R.N.</b>            Division Chief, Leadership Education Analysis Development Sustainment (LEADS) Division            Academic Superintendent, Continuing Education Program Office (CEPO), J-7, Education and Training (E&amp;T) Directorate, Defense Health Agency (DHA)            Falls Church, Va.</p>	-
0735-0745	<p><b>Opening Remarks</b></p> <p><b>Paul Cordts, M.D.</b>            Deputy Assistant Director            Medical Affairs, DHA            Falls Church, Va.</p>	-
	<p><b>Moderator</b></p> <p><b>U.S. Public Health Service Capt. Anne K. McMillan, D.N.P., M.S.N., F.N.P.-B.C., C.L.N.C.</b>            DHA Program Manager, Women's Health Clinical Management Team (WHCMT)            DHA, Medical Affairs, Falls Church, Va.</p>	-
0745-0845	<p><b>Department of Veterans Affairs (VA)/Department of Defense (DoD) Collaboration in Women's Mental Health: Available Resources for Female Service Members Transitioning from Active Service</b></p> <p><b>Kimberly Lahm, L.M.F.T.</b>            Program Director, Patient Advocacy &amp; Experience, Women's, Child &amp; Family Health Policy, Office of Assistant Secretary of Defense (OASD) of Health Affairs, DHHQ            Falls Church, Va.</p> <p><b>Holly N. O'Reilly, Ph.D.</b>            Acting Section Chief, Implementation Clinical Care, Psychological Health Center of Excellence (PHCoE), J-9 Research and Development, DHA            Silver Spring, Md.</p> <p><b>Jennifer Strauss, Ph.D.</b>            Program Manager, National Women's Mental Health Office of Mental Health and Suicide Prevention            Department of Veterans Affairs (VA)            Durham, N.C.</p>	<ol style="list-style-type: none"> <li>1. Describe two resources that Service members may utilize to mitigate the negative outcomes associated with transition to civilian status.</li> <li>2. Explain the importance of providing support to Service members as they transition from Active Duty status.</li> <li>3. List at least two ways that female Veterans' mental health problems (can differ from those experienced by male Veterans).</li> <li>4. Discuss at least two ways that VA mental health care has been designed to meet women Veterans' treatment needs.</li> <li>5. Identify at least two ways that women Veterans can learn more about accessing VA services.</li> </ol>
0845-0855	<b>Break</b>	
0855-0955	<p><b>Intimate Partner Violence: Effects on Women's Health</b></p> <p><b>Navy Cmdr. Monica A. Lutgendorf, M.D., F.A.C.O.G.</b>            Chair, Women and Infant Clinical Community, DHA            Associate Residency Program Director, Obstetrics and Gynecology (OB/GYN)            Associate Professor, Uniformed Services University (USU)            Division Head, Maternal Fetal Medicine (MFM)            Naval Medical Center San Diego (NMCSD)</p>	<ol style="list-style-type: none"> <li>1. Define intimate partner violence (IPV).</li> <li>2. Recognize intimate partner violence.</li> <li>3. Screen patients for intimate partner violence.</li> <li>4. Support and manage patients experiencing intimate partner violence.</li> <li>5. Explain reporting requirements for intimate partner violence.</li> </ol>

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	San Diego, Calif.	
0955-1005	<b>Break</b>	
1005-1105	<p><b>Human Papillomavirus: Opportunity to Eradicate Gynecologic Dysplasia and Cancer</b></p> <p><b>Army Maj. Erica R Hope, M.D.</b>  Attending Physician, Gynecologic Oncology  Assistant Professor, Gynecologic Surgery &amp; Obstetrics  F. Edward Hebert School of Medicine, USU  Brooke Army Medical Center (BAMC)  San Antonio, Texas</p>	<ol style="list-style-type: none"> <li>1. Identify human papillomavirus (HPV) as a cause of gynecologic dysplasia and malignancy.</li> <li>2. Summarize the burden of HPV-related dysplasia and cancer on the medical system.</li> <li>3. Evaluate HPV vaccine as a cancer prevention method.</li> <li>4. Assess avenues to increase HPV vaccination rates.</li> </ol>
1105-1115	<b>Break</b>	
1115-1215	<p><b>Women and Cardiovascular Conditions: A Macro and Micro Look</b></p> <p><b>Janine A. Clayton, M.D.</b>  Associate Director, Research on Women’s Health  Director, Office of Research on Women’s Health  National Institutes of Health (NIH)  Bethesda, Md.</p> <p><b>Gina Wei, M.D., M.P.H.</b>  Associate Director, Division of Cardiovascular Sciences  Director, Prevention and Population Sciences Program  National Heart, Lung, and Blood Institute  National Institutes of Health (NIH)  Bethesda, Md.</p>	<ol style="list-style-type: none"> <li>1. Review the origin of the NIH Office of Research on Women’s Health and the principles and strategic priorities that guide women’s health research across the NIH.</li> <li>2. Describe how women are less likely to receive appropriate treatment for cardiovascular disease (CVD) because they manifest CVD differently than men do.</li> <li>3. Discuss the rising rate of maternal mortality in the United States, its disproportionate impact on racial and ethnic minority groups, and CVD as a leading cause of maternal deaths.</li> <li>4. Explain how COVID-19 can affect the cardiovascular system and how the coronavirus disproportionately affects women, people of color, and other vulnerable populations.</li> <li>5. Identify opportunities throughout the life course of women for promoting cardiovascular health, including before, during and after reproductive years.</li> <li>6. Select from a wide range of available resources including toolkits and guidelines to promote cardiovascular health in women.</li> </ol>
1215-1315	<b>Break</b>	
1315-1415	<p><b>Management of COVID-19 in Pregnancy</b></p> <p><b>Navy Lt. Cmdr. Michael Miller, M.D.</b>  Clinical Fellow, Johns Hopkins Hospital  Baltimore, Md.</p> <p><b>Arthur Jason Vaught, M.D.</b>  Assistant Professor, Department of Gynecology and Obstetrics (OB/GYN), Division of Maternal Fetal Medicine (MFM)  Assistant Professor, Department of Surgery, Division of Trauma, Acute Care Surgery, and Surgical Critical Care  The Johns Hopkins University School of Medicine  Baltimore, Md.</p>	<ol style="list-style-type: none"> <li>1. Describe the Centers for Disease Control and Prevention (CDC) recommendations for the use of remdesivir in treating COVID-19.</li> <li>2. Explain the CDC recommendations for the use of dexamethasone in treating COVID-19.</li> <li>3. Comprehend and apply the appropriate escalation of supplemental oxygen in patients with COVID-19.</li> <li>4. Recognize indications for escalation of care to the intensive care unit (ICU) for patients with COVID-19.</li> </ol>
1415-1425	<b>Break</b>	
1425-1525	<p><b>Ethical Challenges in Women’s Health Care During the COVID-19 Pandemic</b></p> <p><b>Megan K. Applewhite M.D., M.A., F.A.C.S.</b></p>	<ol style="list-style-type: none"> <li>1. Identify the ethical challenges for women’s health care that have been highlighted by the COVID-19 pandemic.</li> <li>2. Outline how cessation of nonessential</li> </ol>

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	Associate Professor, Surgery Chair, John A. Balint M.D. Medical Ethics Director, Alden March Bioethics Institute Albany Medical College, Albany, N.Y. Consultant Bioethicist, DoD Medical Ethics Center, USU Bethesda, Md.	procedures was deleterious to the reproductive rights of women. 3. Explain the theoretical risks of categorizing abortions to as “elective” procedures.
1525-1535	<b>Break</b>	
1535-1635	<p><b>Updates on Select DHA Women and Infants Clinical Community Initiatives</b></p> <p><b>Army Lt. Col. Kelly Beeken, M.D., F.A.C.O.G.</b>            Co-lead, WICC Levels of Maternal Care Working Group, DHA            Assistant Department Chief, OB/GYN            Madigan Army Medical Center (MAMC)            Joint Base Lewis-McChord, Wash.</p> <p><b>Army Lt. Col. Erin Keyser, M.D., F.A.C.O.G.</b>            Army Representative, DHA WICC            Residency Program Director, OB/GYN            Associate Professor, USU            BAMC, San Antonio, Texas</p> <p><b>Navy Cmdr. Shannon Lamb, M.D.</b>            Lead, WICC Walk-In Contraception, DHA            Navy OB/GYN Specialty Leader            Staff Urogynecologist, WRNMMC            Bethesda, Md.</p> <p><b>Navy Cmdr. Monica A. Lutgendorf, M.D., F.A.C.O.G.</b>            Chair, Women and Infant Clinical Community, DHA            Associate Residency Program Director, OB/GYN            Associate Professor, USU            Division Head, MFM, Naval Medical Center San Diego            San Diego, Calif.</p> <p><b>Air Force Lt. Col. Krista Mehlhaff, D.O., F.A.C.O.G.</b>            Co-lead, WICC Severe Maternal Morbidity and Mortality Working Group (SMMM WG), DHA            Physician, MFM, Perinatal Assessment Center            Walter Reed National Military Medical Center (WRNMMC)            Bethesda, Md.</p> <p><b>Air Force Lt. Col. Larissa Weir, M.D., F.A.C.O.G.</b>            Air Force Representative, WICC, DHA            Air Force Surgeon General Chief Women's Health Consultant            Associate Professor, USU            Air Force Medical Readiness Agency            Falls Church, Va.</p> <p><b>Air Force Maj. Heather Hubbard, D.N.P., A.P.R.N., W.H.N.P.-B.C., C.N.E.</b>            Co-lead, WICC SMMM WG, DHA            Flight Commander, Family Care, 9th Medical Group            Beale Air Force Base, Calif.</p> <p><b>Theresa Hart, M.S., R.N., N.C.C.-E.</b>            Program Manager, WICC            Senior Nurse Consultant, Special Medical Programs            Medical Affairs, DHA</p>	<ol style="list-style-type: none"> <li>1. Explain the importance of process standardization with decreased non-beneficial clinical variation.</li> <li>2. List examples of improved obstetrical/gynecological outcomes with clinical process standardization.</li> <li>3. Identify at least one opportunity for improvement in their own clinic or facility from the projects presented.</li> </ol>

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	Arlington, Va.	
1635-1645	<b>Closing Remarks</b> <b>Air Force Brig. Gen. Anita Fligge, D.N.P., R.N., N.E.A.-B.C.</b> Deputy Assistant Director (DAD), J-7 E&T Directorate Chief Nursing Officer Defense Health Agency (DHA) Falls Church, Va.	-

This agenda is subject to change.

**Continuing Education**

This CE/CME activity is provided through the DHA J-7 CEPO and is approved for a total of 7.0 CE/CMEs.

**Commercial Support:**

No commercial support was provided for this activity.

**Participation Costs:**

There is no cost to participate in this activity.

**CE/CME Inquiries:**

For all CE/CME related inquiries, please contact us at: [dha.ncr.j7.mbx.continuing-education-office@mail.mil](mailto:dha.ncr.j7.mbx.continuing-education-office@mail.mil).