



INSIDE THIS ISSUE:

Lazy Days of ... 1

October Se'LADE Meeting 1

Divabetic is Coming to New Orleans 2

Nutritional Supplements 3

Membership Questionnaire 3

Meet Your Board Incoming Officer 4

Trudy Parker Scholarship 4

2009 Nominations 5

Meet Your Board 5

Programs from Previous Meetings 5

Upcoming Issues of our Newsletter 5

Job Openings 5

LSNA Appointment 6

“Addressing and overcoming the emotional stresses of diabetes may be one of the most important steps that can be taken in order to manage it successfully.”

Lazy Days of Summer Belong in a Song....

Or maybe you have to be a certain age to know the Nat King Cole song about the “Lazy, Hazy, Crazy Days of Summer.” Anyway, like we don’t have enough of a challenge motivating our patients to exercise; now it’s potentially dangerous if they go out for a long walk in the ridiculous mix of heat and humidity that passes for normal around here. That said, here are some ideas that might work with some of your patients until fall breezes blow:

- 1 Indoor fitness centers can be affordable and, for our patients who are members of Medicare HMO’s, they can actually be free. Council on Aging senior centers have exercise classes and line dancing – also free. And, although I have not been in a Curves facility, many patients enjoy going and love what they provide.
- 2 Exercise videos can offer an energizing workout in the comfort of one’s own home. Your local Abbott Diabetes Care representative, Greg Altman, has a DVD



called, “Walking Down Your Blood Sugar” and is happy to make this available to you to give to your patients. It is appropriate for all age levels.

- 3 Finally, with healthier, more fit patients, go ahead and suggest exercising outdoors. But if they do advise early in the morning, at sundown or in an area that is mostly shaded. Urge them to drink plenty of fluids before and after and recommend light, comfortable clothing.

4 One word of caution here: every summer I see people outside walking or jogging wearing dark long-sleeved shirts and long pants, which I believe is a throwback to the days of “rubber suits” and the misguided belief that profuse sweating would mean losing weight. This practice overheats the body – or, as I like to say – *cooks* the body, and death is possible. Be sure your patients know this is risky behavior.

Pam Butler, MS CDE
Past President Se'LADE



October Se'LADE Meeting

Dr William Polonsky

Nationally Known Speaker / Writer

Behavior Change

Saturday, October 18, 2008

9:00—1:30 p.m.

Hilton Baton Rouge Capitol Center

Riverside Room

201 Lafayette

Baton Rouge, LA 70801

No Charge for this Program

RSVP: Rosary Chetta

rchetta@cox.net

Or leave a message at (504) 464-8646

This meeting is being sponsored by

Roche Diagnostics

AGENDA

Luncheon Business Meeting with
Committee Reports

Divabetic

*“A gateway to
finding an-
swers,
feeling inspired
and
learning new
ways
to live well
with
diabetes”*

Encourage your patients to: SAVE the DATE for DIVABETIC **DIVABETIC—Makeover Your Diabetes**

Coming to New Orleans
Saturday, October 25, 2008
1:00 – 4:00 p.m.

DIVABETIC-Makeover Your Diabetes is an innovative community outreach program offered FREE of charge and sponsored by Novo Nordisk currently touring the U.S. **On October 25, 2008, DIVABETIC is coming to** the Audubon Tea Room at the Audubon Zoo, 6500 Magazine St, New Orleans, LA.

The Goal: To engage women at risk of, affected by or living with diabetes; to empower them to take control of their diabetes and health and to spark their interest in diabetes care, knowledge and educators. To learn more: www.divabetic.org.

Help us get the word out about DIVABETIC - to people with diabetes, their friends and relatives and encourage people to save the date and plan to attend!

Please use the information below to broadcast the details in your facility, community e-newsletters, hospital newsletters, beauty salons, supermarkets, religious venues or other strategic locations in your community.

Contact Pam Butler, pam.butler@touro.com or 504-897-883 to request post cards with details about the event to provide at your facility or other venues. Learn more about DIVABETIC at www.divabetic.org.

DIVABETIC—Makeover Your Diabetes

A Community Outreach Program sponsored by Novo- Nordisk

Divabetic - Makeover Your Diabetes is a gateway to finding answers, feeling inspired and learning new ways to live well with diabetes while enjoying an exciting mix of free beauty and fashion services. By participating, you have the opportunity to talk one-on-one with certified diabetes educators in a festive, fun atmosphere. Come mix and mingle with hundreds of women just like you. Enrich your life! Enliven your spirit!

Who: All people with diabetes, their loved ones, and friends
Where:

**Audubon Tea Room at the Audubon Zoo
6500 Magazine St,
New Orleans, LA**

Date: October 25, 2008

Time: 1pm – 4 pm; Registration (same day) begins at 12:30 pm

To learn more or pre-register: 1-800-634-8888 or www.divabetic.org



Nutritional Supplements

Seven out of ten U.S. adults regularly take vitamins, minerals, herbs, or supplements (Harris Poll 2002). Fourteen percent of the population takes at least one herbal/supplement each week (JAMA 2002); however, only thirty-eight percent tell their healthcare provider. The ADA position on herb and supplement use is NOT advised due to no clear evidence of efficacy and safety. Unlike drugs, dietary supplements do not have to prove safety of efficacy before going to market. Products are unregulated, unmonitored, uncontrolled, and are not uniform.

People with diabetes are 1.6 times more likely to use herbs and supplements than those without diabetes. Reasons cited include difficulties with side-effects from conventional treatments, a need to control one's healthcare, increasing costs of prescriptive medications, and dissatisfaction with traditional health providers.

So, what can diabetes educators do?

- 1 Always ask patients about herbal/supplement use.
- 2 Check a reputable resource such as Natural Medicines Comprehensive Database (Naturaldatabase.com), Council of Responsible Nutrition (www.crmusa.org), or Healthcare Professional's Guide to Evaluating Dietary Supplement www.pharmacist.com/pdf/dietary_supplements.pdf
- 3 Inform patient he is taking it at his own risk due to lack of standardization among producers
- 4 Document in the patient's record what is being taken and notify MD Not only can glucose control be affected, but interactions with other medications.

By Emily Sturgis, LDN, RD
GH Food and Nutrition Services



Membership Questionnaire

Results of a membership questionnaire included offering meetings on Saturdays rather than during the week and to alternate meeting sites between New Orleans and Baton Rouge. We have had a slight increase in attendance with this change. We also moved the start of the meetings from 8:00 a.m. to 9:00 and 9:30 a.m. to allow travel without the need to stay in a hotel the night before the meeting for those traveling long distances.

After Katrina, we lost many of our members who moved out of state. The board tried to think of ways to provide continuing education to those members left in New Orleans, Baton Rouge and surrounding areas. Speakers were kind enough to work with us to provide meetings in both New Orleans and Baton Rouge but as time passed and people began coming home, we felt it best to go back to alternating the meetings between New Orleans and Baton Rouge as it was becoming too expensive for our budget.

We need more member input and participation. Our own members have so much to share with the rest of us; we need that expertise as speakers. There are so many programs yet to present, help us help other educators with your knowledge. Our newsletter is sent to educators throughout the state whether a member of AADE, Se'LADE or and educator that has asked to be on our mailing list. We are happy to send information about programs and hope to gain them as members of Se'LADE.

We started offering our continuing education programs free to Se'LADE members in June with a small fee to non-members, we hope that will encourage educators to pay the \$25 membership fee as it is cheaper and you get CE's at the meetings.

Only half of AADE members belong to a chapter, if we want to keep SeLADE viable and the wonderful resource that it is, our members need to offer suggestions, share your expertise and volunteer to be on a committee or better run for an officer position on the board - or we could will be in the half without a chapter.

President-Elect: Terry Compton, RN, MS, CDE

When I have been asked how I got involved in diabetes education many years ago, I respond by saying I volunteered as a camp nurse for the diabetes camp at Whispering Pines in Independence, LA. That was in 1985. I met the diabetes educator from Tulane who recruited me to come volunteer at camp and I fell in love with the experience of working with children. At that time, I was a nursing faculty at LSU in the Baccalaureate Program and saw an opportunity for nursing students to learn about diabetes as well. For the next 6 years, I brought nursing students to diabetes camp at Whispering Pines as well as in Leesville, LA. From my camping experiences, I met many other educators and made life long friendships with other camp staff. In 1990, Children's Hospital was in the beginning stages of developing a diabetes program and I was offered the position as the Diabetes Nurse Coordinator. Throughout the 16 years that I worked at Children's Hospital, I have had the opportunity to be involved with many families as they struggle with the initial diagnosis of diabetes and support them as their children grow. As coordinator of the program, my responsibilities included both inpatient and outpatient education, community outreach, staff education and clinical research. I had the privilege to work with outstanding endocrinologists, diabetes educators, nutritionists, social workers and psychologists. This team approach was the foundation to the program. During my tenure at Children's, I developed an Adolescent Peer Support Program which then developed into the Whole Family Outing for Adolescents. This weekend venture was held at Fountainsbleau State Park and endured for 8 years. I also provided a Day Camp for Preschoolers with Diabetes for two summers and developed a continuing education/training program for day care workers to take care of preschoolers with diabetes. Following Hurricane Katrina, I continued to work at Children's for another year. But due to family circumstances and having relocated to the northshore following the storm, I accepted a nursing faculty position in the Baccalaureate program at Southeastern Louisiana University. I continue to provide diabetes education as a certified pump trainer. Throughout my involvement with Se'LADE, I have served as president twice. I have also organized many educational offerings for Se'LADE throughout my tenure. I have also served on the Professional Research and Education Committee and on the Annual Program Committee for AADE for two years and was the RN Provider Unit Coordinator. I currently serve on the Professional Practice Committee for AADE and continue to serve as a continuing education reviewer as well. I look forward to serving our organization as your incoming president and welcome ideas to meet the needs of our membership. I can truly say that my involvement in Se'LADE has provided me with many learning opportunities but more importantly, many lifelong friendships with my colleagues.

Trudy Parker Scholarship

The Trudy Parker Scholarship is in memory of our first Se'LADE president and is to honor her contributions to diabetes education and to our organization. Trudy was one of the charter members for Se'LADE and started the first diabetes education program at Tulane University and Hospital where she worked for over 20 years. She was active with the American Diabetes Association and served as President of the New Orleans Chapter for several terms. She was active with diabetes camp in its formative years and participated in clinical research with the Clinical Research Center associated with LSU and Tulane Universities. She continued to work after being diagnosed with colon cancer and was an inspiration to everyone for her determination to provide diabetes services to her patients. This scholarship is to honor her and set the standard for others to follow.

The Trudy Parker Award is a \$500 stipend to be applied to attending the AADE Convention. Submission of confirmation of registration to the AADE meeting will be a component of the application process. This is a short turn around time but well worth it for those who wish to apply.

Application is attached. The .pdf is typewriter enabled, you can type directly on it using the typewriter button at the top of the page, Send as an email attachment to Pam Butler at pambutler@touro.com



LSNA Names

Peggy Bourgeois, APRN, MN, CNS, CDE
President

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Elaina O. Chabert, MPH, LDN, RD, CDE
Secretary

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Pam Butler, MS, CDE;

Past President, Chair, Bylaws;
Chair, Nominating Committee

E-mail: pambjimf@aol.com or pam.butler@touro.com
(504) 897-8813 (Work)

2009 Nominations

Officer nominations will occur in October. Please think about whether you would like to be a candidate for a Se'LADE officer. Applications will be on the Se'LADE web site. We will have additional information with each newsletter.

Contact Pam Butler, MS, CDE

pam.butler@touro.com

or 504-897-8813

Programs from Previous Meetings

We have bound/printed handouts for the April and June Se'LADE programs. Send check for \$10 made payable to Se'LADE to:

Peggy Bourgeois
7575 Jefferson Hwy, Suite 128
Baton Rouge, LA 70806



Upcoming Issues of our Newsletter

In our upcoming Newsletter we will add a Legislative Update; Feature News from Educators—What's Happening? Job Promotions/changes/transitions from educators throughout the state; Let's get to know one another; New CDE's; Job Openings; Ta Da's and accomplishments, appointments, etc. Send an article or news to peggyboo1@cox.net

Job Openings

Clinical Support / Insulin Pump Specialist

Full-Time position working for one of the manufacturers.

Duties: Responsible for in-servicing of products to patients and health care professionals. Responsible for certifying other CDE's to become CPT's. Supporting sales rep as needed.

Location: This territory covers all of Louisiana & Southern Mississippi. Flexible as to where this person lives. MUST be willing to travel 50% of the time.

Requirements: MUST be an RN or RD CDE. Certified Pump Trainer (CPT) strongly preferred. Ideal candidate will have managed patients from start to finish on an insulin pump. Must be willing to travel.

Salary: Competitive base salary, bonus, stock options, automobile allowance and benefits package.

For More Information: Please call Teri Perretta at 1-800-875-3336 or email resume and Cover Letter in MS WORD format to tlpmrslc@twcny.rr.com or fax 315-393-9466.

Slidell Memorial Hospital

PRN RD interested in working only ICU and Nutrition Support, 15 hours/week, and every 4th weekend. Work with the Nutrition Support team who manages ALL aspects of TPN, including electrolyte riders and sliding scale insulins according to physician protocols. Hourly rate is competitive. Contact Paula Brown, RD 985-607-1554.



LSNA Names Representative to LANPAC Pelican News June/July/August 2008

Peggy B. Bourgeois, APRN, MN, CNS, CDE has been appointed by the Louisiana State Nurses Association Board of Directors to represent the Association on the Louisiana Nurses Political Action Committee (LANPAC) Board of Directors. She was actively involved in LANPAC since its inception, and has continued to maintain her membership. Her role includes acting as liaison between the two organizations, as well as serving on the LANPAC By-laws Committee.

Ms. Bourgeois is currently serving as Chair of the LSNA Nominations Committee and represents LSNA on the Louisiana Dietetics and Nutrition Board of Examiners. Peggy is a member of the Health Care Centers in School Board of Directors, serves on the Louisiana Diabetes Council and is Secretary, Juvenile Diabetes Research Foundation Board of Directors.

Peggy currently serves as President of the Se'LADE Chapter of AADE and is the state Legislative Liaison to AADE where she also served on the Advocacy Committee. She has been presented with the AADE Distinguished Service Award, LSUHSC Graduate Nursing Entrepreneurial Award, Louisiana State Nurses Nightingale Hall of Fame and the LSUHSC School of Nursing Alumni of the Year Awards. Peggy served two terms on the AADE Board of Directors and a term on the AADE Education and Research Foundation Board of Trustees.

Following transition (retirement?) from the Baton Rouge General Medical Centers Director, Diabetes Center she formed her own company PBB Associates, LLC, where she is a Clinical Consultant for professional and patient diabetes education programs, conducts clinical research studies around the state and lectures/consults on diabetes reimbursement issues across the country.



Have a safe and fun 4th of July!!

Washington Notes

June, 2008

House Approves Medicare Physician Pay Bill, Senate Fails to Follow

Doctors' face a 10 percent cut in Medicare Fee-for-Service payments next week. The Senate failed to follow the House and pass legislation to increase Medicare reimbursement to physicians. On June 24 the House passed H.R. 6331 that would cancel a 10 percent Medicare pay cut for physicians scheduled to take effect July 1. The proposal did not contain the CDE language of H.R. 4218. The vote was more than the two-thirds needed to pass a House bill under a suspension of the rules, the fast-track procedure by which the bill was considered. Procedural moves by Senate Republicans blocked efforts by Democrats to have the Senate consider and vote on the H.R. 6331. Congress has left Washington for the Fourth of July holiday. When they return, they could increase the doctors' payments retroactively.

Bipartisan House Bill Introduced to Delay Competitive Bidding for Medical Equipment

A bipartisan bill (H.R. 6252) that would delay the Medicare competitive bidding program for durable medical equipment and diabetes supplies for 18 months and make other changes to the controversial program was introduced June 12 by the House Ways and Means Health Subcommittee Chairman Fortney Pete Stark (D-CA). The Medicare DMEPOS Competitive Acquisition Reform Act of 2008 was introduced to "delay the DME competitive bidding program because the Bush Administration designed this program with blinders on to the needs of beneficiaries and the small companies that make up most of the DME industry," said in a statement.

HHS Announces 12 Demonstration Sites for Electronic Health Record Incentives

Department of Health and Human Services Secretary Michael O. Leavitt announced the 12 sites that will participate in a Medicare demonstration project offering incentives to physicians for using electronic health records to improve patient care. The 12 sites—Alabama, Delaware, Jacksonville, Fla., Georgia, Maine, Louisiana, the Maryland/D.C. area, Oklahoma, Pittsburgh, South Dakota, Virginia, and Madison, Wis.—will participate in the five-year national CMS Electronic Health Record Demonstration Project that provides incentive payments to physicians using certified electronic health records to improve the quality of care of their patients.

More information on the demonstration project is available at

http://www.cms.hhs.gov/DemoProjectsEvalRpts/downloads/2008_Electronic_Health_Records_Demonstration.pdf

Democrats Say Private Fee-for-Service Medicare Plans Overpaid, Inefficient

House Democrats have stepped up their attacks on Medicare private fee-for-service plans, saying the plans are given preferential treatment under federal regulations over other managed care plans, often pay providers incorrectly or late, have high cost-sharing for members, and are the most overpaid of Medicare managed care plans.

Expansion of Health Insurance Could Help Reduce Health Care Disparities

Proposals to expand health insurance to all U.S. residents could help reduce, but would not eliminate, health care disparities, lawmakers and health care experts said on at a recent House Ways and Means Health Subcommittee hearing.

According to recent studies, women and racial and ethnic minorities have less access to care, receive a lower quality of care and have more negative health outcomes than other groups, and some groups have a higher prevalence of certain diseases. Lawmakers and experts attributed the disparities to a number of socioeconomic factors, such as income, education, environment, geography, language barriers and health insurance status.

Health and Wellness Initiatives in Work Place Increasing

A Center for Studying Health System Change study funded by the Robert Wood Johnson Foundation, found that health plan initiatives designed to promote health and wellness among workers have become commonplace, even though there is a lack of evidence that the programs save businesses money. According to the study, "Health and Wellness Initiatives: The Shift from Managing Illness to Promoting Health," the increase in health and wellness initiatives is a result of large employers looking for long-term strategies to address rising costs and to support their plan to give employees more responsibility for health care decisions and costs.

California Legislature Takes Up Multiple Health Care Bills

More than a dozen health bills are advancing through the California Legislature, some of which contain elements of a health care overhaul plan backed by Gov. Arnold Schwarzenegger (R) that passed the state Assembly but was rejected in the Senate earlier this year. Support for the bills among Republicans who opposed Schwarzenegger's plan is seen as a sign that a desire for piecemeal health care changes is strong this election year, Schwarzenegger's health care proposal in large part was rejected because it would have cost \$14.9 billion at a time when the state faced a large deficit, but the bills gaining initial approval in the Legislature now put most of their costs on the health care industry.

Colorado Governor Signs 11 Health Care Bills

Colorado Gov. Bill Ritter (D) signed into law 11 health care bills, including measures to expand coverage requirements and increase children's access to care. One of the measures SB 160 will expand eligibility for Child Health Plan Plus, the state's version of SCHIP, to include children in families with incomes up to 225% of the federal poverty level. The bill also will expand mental health benefits for children enrolled in the program. A companion bill, SB 161 also signed into law, will remove administrative barriers to applying for Medicaid and Child's Health Plan Plus. The legislation will qualify an additional 50,000 uninsured children for the programs. SB 194, which will direct the Colorado Department of Public Health and Environment to develop a public health improvement plan for the state; SB 217, which will direct two state agencies to develop a "Centennial Care Choices" plan that could provide many state residents with basic health coverage; and HB 1100, which will restore funds to the Colorado Responds to Children with Special Needs Program.