



OUR MISSION: TO BUILD AND SUSTAIN A NATIONAL ASSOCIATION THAT ADVOCATES FOR LACTATION PROFESSIONALS.  
OUR VISION: IBCLCS ARE VALUED RECOGNIZED MEMBERS OF THE HEALTH CARE TEAM.

# USLCA eNEWS

## United States Lactation Consultant Association

July 2010

**Drum Roll  
Please...**

**Announcing:  
*Clinical  
Lactation*  
The Official  
Journal of  
USLCA!**

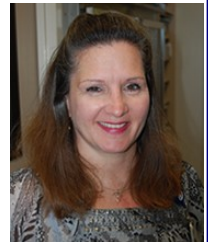
**See page 4 for  
details!**

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### From the President Laurie Beck, RN, MSN, IBCLC, RLC

As President of USLCA I had the privilege of representing USLCA at the Second Annual Breastfeeding Summit hosted by the Academy of Breastfeeding Medicine on June 16-17, 2010, in Washington, DC. The meeting was a success and a great time to network with other organizations.



Several themes kept reoccurring:

- Insurance companies need to begin to reimburse for lactation services and breastfeeding supplies
- All healthcare professionals need to have basic lactation education
- All delivering hospitals should be strongly encouraged to become Baby Friendly
- Hospitals should have IBCLCs on staff
- The United States should endorse the WHO Code of Marketing and regulate the aggressive formula marketing done to the general public at the baby's expense.

The Surgeon General addressed the audience and was a big supporter of breastfeeding as the beginning of optimal nutrition for all babies. She reported that she tries to include breastfeeding in all of her talks!

I do believe our country is in a time of transformation and that the IBCLC profession is making a difference by reaching one mother and baby at a time!

Laurie Beck, RN, MSN, IBCLC, RLC, USLCA President

### Grab Your Cowboy Boots and 10 Gallon Hat and Meet Us in Texas!

The 25th Anniversary ILCA conference is nearly here! We hope to see lots of USLCA members. Please plan on stopping by our booth in Exhibit Hall and say "Howdy!" Also, join us for the following USLCA and ILCA meetings:

#### On THURSDAY, JULY 22, from 6-8pm:

- USLCA Licensure & Reimbursement Committee - Judith Gutowski, BA, IBCLC; Marsha Walker, RN, IBCLC
- USLCA Professional Development Committee - Barbara Robertson, MA, IBCLC
- USLCA Chapter Meeting - Debbie Costello, RN, IBCLC

#### On FRIDAY, JULY 23:

- 9-10am: USLCA Annual General Meeting
- 4:30-5:30pm: ILCA Issues Forum: From Policy to Practicality—the IBCLC as an Agent of Change. (CERP provided)

#### On SATURDAY, July 24:

- 9:30-10:30am: ILCA Annual General Meeting

## BOD NEWS

- **Results of Bylaws and Articles of Incorporation Voting**

It's official—We have a newly revised set of Bylaws and Articles of Incorporation, officially making USLCA a 501(c)3 organization. The final vote: Bylaws—338 yes, 1 no. Articles—336 yes, 1 no

Thanks to all who voted! You can read these important documents on the USLCA website: [Bylaws](#), [Articles](#)

- **Chapters and 501(c)3 vs 501(c)6 Designation**

One of the main reasons USLCA chose to become a 501(c)3 organization instead of 501(c)6 as originally planned was to match the designation of our parent organization (ILCA), which is 501(c)3. Legal counsel helped us understand the necessity for doing this. Among other reasons, a 501(c)3 cannot give money to a 501(c)6.

This also has implications for our USLCA Chapters. If your Chapter chooses to apply for this tax status, 501(c)3 would be the preferable designation to fall in line with USLCA and ILCA. If you have questions about this, please contact Scott Sherwood at [ExecutiveDirector@uslcaonline.org](mailto:ExecutiveDirector@uslcaonline.org).

**NEXT BOARD OF DIRECTORS MEETING: JULY 18-20, AT THE JW MARRIOTT IN SAN ANTONIO, TX.  
MEMBERS WELCOME TO ATTEND!**

## COMMUNICATING WITH THE USLCA BOARD OF DIRECTORS

The USLCA Board of Directors is here to serve you, the members of USLCA. You can help by letting them know what is on your mind. What would help you be a better IBCLC? What ideas do you have that having the backing of this national organization would strengthen and help bring to fruition?

The USLCA BOD recently held its first member meeting by webinar to discuss the proposed changes to the Bylaws and Articles of Incorporation. Board members answered questions and discussed the issues with the participants.

For those of you who were unable to attend this webinar and perhaps won't make it to the USLCA Annual General Meeting at the ILCA Conference next week, the Board still wants to hear from you! One of the best ways to do this is by participating on the USLCA Discussion Board. You can post questions to Board members and to other USLCA members as well.

To get to the Discussion Board, go to [www.ilca.org](http://www.ilca.org) and log in with your member number and password and then click on Discussion Boards.

### ***USLCA Benefit:***

## **Professional Liability Insurance for IBCLCs at Discounted Rates!**

As a USLCA member, your benefits include an exclusive offer for professional liability insurance at a discounted rate.

This policy provides coverage for you as an International Board Certified Lactation Consultant, as well as "slips and falls" at your office location.

The CM&F Group, Inc. was established in 1919. They have provided reliable coverage to over 50 classes of healthcare providers including Pas, NPs, CRNAs, and RNs.

Please refer to the rate sheet, policy and application. Visit our website at [www.uslca.org](http://www.uslca.org).

#### **For questions, contact:**

##### **USLCA**

2501 Aerial Center Pkwy, Ste 103  
Morrisville, NC 27560 USA  
(919) 861-4543  
(800) 221-4904

##### **CM&F Group, Inc.**

99 Hudson Street 12th Floor  
New York, NY 10013  
(212) 233-8911  
Fax: (212) 608-4378



## **RECRUITING CHAPTER BOARD MEMBERS: TRUE STORIES! (One More!)**

Stories keep coming in from Chapter members who have chosen to step up and take a Chapter Board position. Here's one from Annette Leary, Florida Lactation Consultant Association President (2008-2010):

I became a board member for our Chapter for several reasons. First, it helped me take on a new challenge. I felt I needed to grow more in my profession, and, most importantly, I wanted to give back to an organization that has given me so much in education, opportunities, networking, and camaraderie in my state.

**How about you—Have you been inspired yet? Your local chapter would love to hear from you!**

Remember the monthly Chapter Conference Calls, usually held the first Sunday of each month at 4:00pm Eastern. If your Chapter is not already represented at this meeting, or perhaps you are a group ready to form a new Chapter, contact Debbie Costello, at [debbiecostonline.org](mailto:debbiecostonline.org) and she'll send you the call information.

**Next Chapter Conference Call: August 8, 2010, at 4:00pm Eastern.**

## **TWO NEW RESOURCES FOR USLCA MEMBERS: REIMBURSEMENT AND STAFFING**

Two new resources will be making their debut at the ILCA conference next week and will soon be available on the USLCA website.

- **Containing Health Care Costs—Help in Plain Sight:** This new 19-page white paper from the Licensure and Reimbursement Committee helps lay out the facts for what IBCLCs have known all along: “Reimbursement of the IBCLC yields a significant return on investment. Why pay more for disease when prevention costs less?” The Executive Summary states:

Healthcare costs are skyrocketing, with the resulting emphasis on disease prevention. By providing immune protection and ideal nutrition, breastfeeding is a cost-effective means of disease prevention with the accompanying reduction in health care spending. Informed women are initiating breastfeeding at an increasing rate, from 26% in 1970 to 74% in 2009. However, many women struggle to maintain breastfeeding for as long as it is medically indicated and fail to achieve the intensity and duration of breastfeeding that they planned. This is due to poor access to effective breastfeeding support within the medical system, false and misleading infant formula marketing, and societal barriers including; lack of paid maternity leave, unsupportive places of employment, and cultural discomfort with breastfeeding. Consequently, health care dollars are spent on treating diseases and conditions that could have been effectively prevented by breastfeeding. In order to appropriately address this preventative health care gap and the excessive costs that result, insurers can:

- ✦ Recognize the International Board Certified Lactation Consultant (IBCLC) credential as the preferred allied healthcare provider to deliver lactation care and services
- ✦ Reimburse skilled breastfeeding support by the IBCLC

The training of International Board Certified Lactation Consultants (IBCLCs) focuses exclusively on the care and support of lactation, resulting in allied health professionals uniquely qualified to address the health care needs of the breastfeeding family.

- **International Board Certified Lactation Consultant Staffing Recommendations for the Inpatient Setting:** Here's another new USLCA white paper that explains recommendations for IBCLC staffing positions at hospitals with various levels of maternity care.

Both of these reflect hours of work in researching and drafting powerful new documents to help you do your day to day work as an IBCLC! Look for them at our Exhibit Hall booth and then later on our website!

## ANNOUNCING! *CLINICAL LACTATION*: The Official Journal of USLCA!

USLCA is proud and pleased to announce the birth of a new professional journal: *Clinical Lactation*. This journal will take up where the *Journal of Human Lactation* leaves off by providing clinical help for the IBCLC. We're excited and pleased to announce that the Editor-in-Chief is Kathleen Kendall-Tackett, PhD, IBCLC.

*Clinical Lactation* will be published four times a year by Hale Publishing, and will be a member benefit for USLCA members. It will be available in both print and online format. Non-members may subscribe as well, for \$60 a year. The inaugural issue is scheduled for fall of 2010.

Here's Kathleen's welcome letter:

Dear Colleague:

I'm pleased to introduce you to the new USLCA journal, *Clinical Lactation*. We're excited about this new venture and hope you will be too. It is a membership benefit of the USLCA.

*Clinical Lactation* is designed with you in mind: a busy clinician who doesn't have time to sort through lengthy research articles to find the useful bits that you can use in your work. Our aim--for every issue--is to provide you with information you can use today, presented in a format that will help you sort through it quickly and put it directly into use.

We will accomplish our goal by publishing concise articles by leaders in our field, with the clinical implications highlighted. We will publish each issue in print and electronic formats, allowing us to include hyperlinks for additional content, treatment care plans, video clips, and other useful information. We will also have a Facebook page and website where you can contact us, offer suggestions for topics, and provide feedback.

Come join us on this journey. It's an exciting time to be involved in human lactation. There are many new findings and we want to share them with you.

I'm looking forward to hearing from you.

With warmest regards,  
Kathleen Kendall-Tackett, Ph.D., IBCLC  
Editor-in-Chief, *Clinical Lactation*  
Department of Pediatrics,  
Texas Tech University School of Medicine, Amarillo

Kathleen has an impressive group of Associate Editors and Editorial Review Board members to help her out:

### Associate Editors

Catherine Watson Genna, BS, IBCLC  
Angela Love-Zaranka, BA, IBCLC  
Barbara Robertson, BA, MA, IBCLC  
Karen Querna, RN, BSN, IBCLC

### Editorial Review Board

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Jan Ellen Brown, BS, IBCLC  
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Nancy Franklin, LCSW, LMFT  
Lawrence Gartner, MD, FAAP  
Karen Kerkhoff Gromada, MSN, RN, IBCLC  
Thomas Hale, Ph.D.  
Shera Jackson, Ph.D.(cand), IBCLC  
Jarold (Tom) Johnston, MSN, CNM, IBCLC  
Makeda Kamara, CNM, MPH, Med.  
Miriam Labbok, MD, IBCLC  
Judith Lauwers, BA, IBCLC  
Lisa Marasco, MA, IBCLC  
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Molly Pessl, BSN, IBCLC  
Linda Smith, BSE, FACCE, IBCLC  
Jeanne Tate Schneider, RN, IBCLC  
Marsha Walker, RN, IBCLC  
Diana West, BA, IBCLC  
Nancy Williams, LMFT, IBCLC  
Barbara Wilson-Clay, BSEd, IBCLC  
Marilee Woodworth, BS, IBCLC



## CALL FOR PAPERS

*Clinical Lactation* is a peer-reviewed journal summarizing recent advances in clinical care in the field of human lactation, and is the official journal of the United States Lactation Consultant Association. The aim of the journal is to advance clinical practice for lactation specialists who work in a variety of settings: hospital, private practice, WIC, and mother-to-mother-support organizations. The articles being solicited for *Clinical Lactation* are concise, readable reports that summarize issues related to clinical care, treatment innovations and applications. All articles should contain specific implications and suggestions for clinical practice. Suitable topics for submission include, but are not restricted to:

- Treatment innovation
- Treatment dilemmas
- Case presentations
- Implementation of specific programs
- Outcomes of policies or programs

Papers should be consistent with the current evidence base (if applicable), and should constitute a substantive contribution to the professional literature on clinical lactation. All articles can be hyperlinked to videos, websites, PowerPoint slides, or other ancillary sources of information.

### Types of Contributions

**Articles on Clinical Practice.** These articles include process and program descriptions, clinical audit and outcome studies, and the presentation and description of original clinical practice ideas. These articles should generally not exceed 1,500 words (approximately 6 pages of double-spaced text), including references, and should be written in a readable, user-friendly style.

**Brief Reports of Research Findings.** Brief reports of research findings are concise reports of new research. These articles are limited to 2,000 words including references and must have direct clinical relevance. These reports can be hyperlinked to other documents or websites with additional information.

**Brief Literature Reviews.** Brief literature reviews are concise articles on a highly specific topic related to clinical practice, ending with applications for practice. These manuscripts are also limited to 1,500 words (6 pages of double-spaced text).

**Case Reports.** Case reports offer clinicians a forum to share an interesting case, with the implications for broader clinical practice. These reports will typically range from 3-5 manuscript pages (750-1250 words).

**Letters to the Editor.** Letters and responses pertaining to articles published in *Clinical Lactation* or on issues relevant to the field, brief and to the point, should be prepared in the same style as other manuscripts (250-300 words).

**Submission Requirements.** All manuscripts submitted should adhere to the format delineated in the Publication Manual of the American Psychological Association, 5th Edition. Go to [ClinicalLactation.org](http://ClinicalLactation.org) for submission instructions. Please also contact the editor if you have questions about a possible submission ([kkendallt@aol.com](mailto:kkendallt@aol.com)).

***Clinical Lactation*—The Official Journal of  
the United States Lactation Consultant Association  
Just one more way USLCA is working for YOU!**

## TIPS: TECHNOLOGY IN PRACTICE

- **Health Literacy Universal Precautions Toolkit:** Here's an interesting toolkit, though not on the subject of "universal precautions" as we typically think of. This toolkit includes ideas for improving the way we deliver health care messages to the clients—in our case, mothers—we work with. There are assessment tools to gauge how well you are already doing, and specific tools to help teach skills such as "Tips for Communicating Clearly" and "The Teach Back Method," to make sure the message you thought you delivered was the one that the mother really understood. From the website ([www.nchealthliteracy.org/toolkit/](http://www.nchealthliteracy.org/toolkit/)):  
Medical care is complicated and many people struggle with understanding their medication, instructions, and follow-up plans. This [6 minute video](#) shows just how little, patients can understand. The way you organize your practice and communicate with patients can help to minimize confusion and lead to better health outcomes. This toolkit can help you assess your practice, raise awareness and work on specific areas to ensure that your patients can succeed in the health care environment.
- **HHS National Action Plan to Improve Health Literacy:** Here's another health literacy resource, a report on making health information and services easier to understand and use. [Click here](#) to read this report.
- **Health Literacy Online: A Guide to Writing and Designing Easy-to-Use Health Web:** Here's one more health literacy resource. Does your lactation practice or worksite have a website? How clear and user-friendly is it? Check out this [online guide](#) from the Office of Disease Prevention and Health Promotion (ODPHP).
- **Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2010 Meeting on July 26, 2010:** Here's the next meeting concerning the Healthy People 2010 objectives. The online meeting is open to the public, but there will be no opportunity for oral public comment. You must [preregister](#) for this meeting by 9am July 26. Registration is limited.
- **Two Newly Revised Clinical Protocols from the Academy of Breastfeeding Medicine:** Both are available on the [ABM website](#) with the other helpful protocols.
  - ABM Clinical Protocol #7: Model Breastfeeding Policy (Revision 2010).
  - ABM clinical protocol #8: human milk storage information for home use for full-term infants (original protocol March 2004; revision #1 March 2010).
- **Hold Your Prem—A Workbook on Skin-to-Skin Contact for Parents of Premature Babies:** Here's a resource for those of you who work with premature infants and their mothers, written by Jill Bergman with Dr. Nils Bergman. Jill describes important concepts from neuroscience research to encourage skin-to-skin care for parents of preterms. [Click here](#) for more information.
- **Survey of Domperidone and Metoclopramide Use in Breastfeeding Mothers:**  
Thomas Hale & Kathleen Kendall-Tackett, co-investigators

We are pleased to announce our new online research study, a survey of women's experience with the drugs metoclopramide and domperidone, which can be used to stimulate milk production. We would like to collect side effect information on both drugs from as many mothers as possible worldwide.

The survey link is: <http://surveys.ttuhsc.edu/wsb.dll/s/60g759>. For more information about the study, contact Dr. Kendall-Tackett at: [kkendallt@aol.com](mailto:kkendallt@aol.com)

Please let mothers know about our study. The more women we can get to participate, the more valid our findings. Thanks for your help.

The survey takes 20-30 minutes to complete and is confidential. It has been approved by the Institutional Review Board at Texas Tech University Health Sciences Center, Amarillo, TX.

Note that Domperidone is not approved for any use by the FDA in the United States. Despite this, many mothers have been able to obtain the drug and use it to stimulate milk production. This survey might help the FDA change its mind about allowing this drug to be used in this country.

## YOU ASKED, WE FIND THE ANSWERS!

Recently, a USLCA member asked about the usage of “RLC” as a credential for the IBCLC:

Dear USLCA,

I just received the June e-mail newsletter and I find myself with a confusing question.

I see that several board members are identified as IBCLC, RLC. My understanding of these were that they could be used interchangeably, but not necessarily concurrently. I thought that RLC stood for Registered Lactation Consultant and was recognized as a similar title as IBCLC.

I had also heard from another IBCLC that RLC was to be used for those who had re-certified by exam at the 10 year mark and that it stood for Re-certified Lactation Consultant.

Could you clarify this for me? Or direct me to a resource that would be helpful to clarify?

Thank you!

USLCA Member

The USLCA Board responded:

Thank you for your question to USLCA. The USLCA Board of Directors asked IBLCE this question in 2008 and Anna Utter, IBLCE Regional Director, IBLCE in the Americas, answered. According to IBLCE the proper use of the credentials is IBCLC, RLC. Anna explained that you can use IBCLC alone or IBCLC, RLC. You cannot use RLC without IBCLC. In the United States there are Certification, Registration, and Licensing. Our profession presently is certified and registered in the United States. A goal for USLCA is to obtain licensure for IBCLCs in the United States so as to help with reimbursement for our services.

Trademark laws differ in various parts of the world but in the USA, IBLCE holds Certification Marks on the following terms:

- “IBCLC”
- “International Board Certified Lactation Consultant”
- “RLC”
- “Registered Lactation Consultant”

The use of RLC can only be used in conjunction with IBCLC, not alone. It is not a designation only used for those who have recertified.

**Do you have a question for the USLCA Board of Directors? Send it to Scott Sherwood at [ExecutiveDirector@uslcaonline.org](mailto:ExecutiveDirector@uslcaonline.org) and he'll pass it along to the Board for response.**

### Got your IBCLC Patch Yet?

You can order one from the ILCA bookstore.

Tell the world you are an

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### USLCA CLIPBOARD—Stay organized and show your support for USLCA.

USLCA clipboard comes with:

Calculator Educational sheets Inserts Conversion chart

Members: \$22 for one 2 for \$40.00. + SH; Non-members 25.00 +SH

For more information contact Scott Sherwood at

[ExecutiveDirector@uslcaonline.org](mailto:ExecutiveDirector@uslcaonline.org)

Great gift idea for other Lactation Consultants—Available in the  
[ILCA bookstore](#)



### WHAT'S ON YOUR MIND?

The USLCA eNews is YOUR newsletter. If you have comments, ideas for articles, links to helpful resources, or maybe you'd like to write an article about the work you do, contact me at [EnewsEditor@uslcaonline.org](mailto:EnewsEditor@uslcaonline.org). Please keep in mind that the focus of our organization—and therefore the eNews—is promoting the IBCLC, as opposed to promoting breastfeeding per se. Let me hear from you!

Melissa Clark Vickers, MEd, IBCLC, RLC—eNews Editor