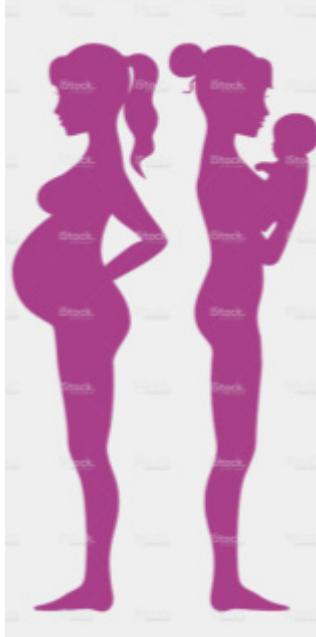


FASD Primer for Healthcare Professionals

Video Storyboards

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	1 / Introduction	
Screen Title	Instructions & Course Objectives	
Screen #	1 / 62	
Video #	1 / 22	
On Screen Content		
Instructions & Course Objectives		
FASD Primer for Healthcare Professionals		
Collaborative for Alcohol-Free Pregnancy: Partnering for Practice Change		
		</td

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	1 / Introduction	
Screen Title	Instructions & Course Objectives	
Screen #	2 / 62	
Video #	1 / 22	
On Screen Content		
Collaborative for Alcohol-Free Pregnancy: Partnering for Practice Change		
Broad foundation of knowledge		
Fetal Alcohol Spectrum Disorders (FASDs)		
Prevent, identify and treat		
<ul style="list-style-type: none"> • Give overview of FASDs • Describe ways to prevent FASDs • Explain methods for identification, referral, and treatment of FASDs • Describe common stigmas associated with FASDs • Identify actions health care providers can implement 		
Audio Script		
<p>The goal of the <i>FASD Primer for Healthcare Professionals</i> course is to provide a broad foundation of knowledge about Fetal Alcohol Spectrum Disorders, also known as FASDs, as well as ways to prevent these conditions by preventing alcohol-exposed pregnancies. In doing so, the CDC and its partners hope to motivate health care professionals to take action to prevent, identify and treat FASDs.</p>		
Specifically, this course will:		
<ul style="list-style-type: none"> • Give an overview of FASDs • Describe ways to prevent FASDs • Explain methods for identification, referral, and treatment of children and adults who may have an FASD • Describe common stigmas associated with FASDs, including those related to women who drink during pregnancy, and finally • Identify some actions health care providers can implement in their own work regarding FASDs. 		
Instructions to Developer		
Animate/work with icons of pregnant woman and woman with baby - http://www.istockphoto.com/vector/pregnancy-and-birth-icons-set-gm521089950-91236101?st=e907ea2		
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Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	1 / Introduction	
Screen Title	Melissa's Story	
Screen #	3 / 62	
Video #	2 / 22	
On Screen Content		
Melissa's Story		
<p>Melissa is a mother whose child has an FASD.</p> <p>"I really wish that my doctor would have had more dialogue or asked me questions about drinking alcohol during pregnancy."</p>		
Audio Script		
<p>Melissa is a mother whose child has an FASD. Melissa drank alcohol at the beginning of her pregnancy; before she found out she was pregnant. Her doctor told her it was okay to continue to drink a glass of wine with dinner during her pregnancy. She was told it would also help her relax and improve her circulation. Besides that one discussion, there wasn't any further conversation about Melissa's drinking.</p> <p>"I really wish that my doctor would have had more dialogue or asked me questions about drinking alcohol during pregnancy." Melissa said.</p> <p>When Melissa's son was born, he appeared normal. But as he got older, Melissa realized things just weren't quite right. He would become agitated when wearing certain clothing. He acted out in school – turning over chairs several time and once throwing his shoes at his teacher. In one instance, he tried to jump out of his mother's car as they were leaving a friend's house.</p>		

Instructions to Developer

Need to show series of stock photos to "illustrate" story, along with on-screen text - maybe make photos B&W

<http://www.istockphoto.com/photo/mother-and-son-holding-hands-gm468468733-17956512?st=0788a62>

<http://www.istockphoto.com/photo/red-wine-gm492626778-76411061>

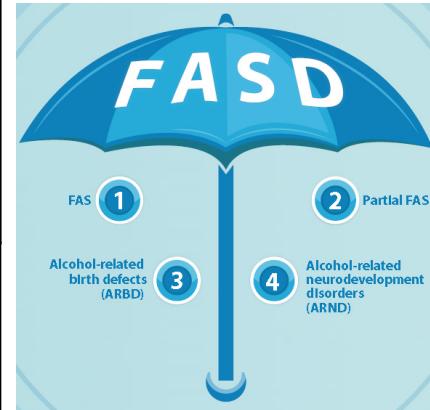
<http://www.istockphoto.com/photo/doctor-writing-on-a-clipboard-gm507676662-84837455>

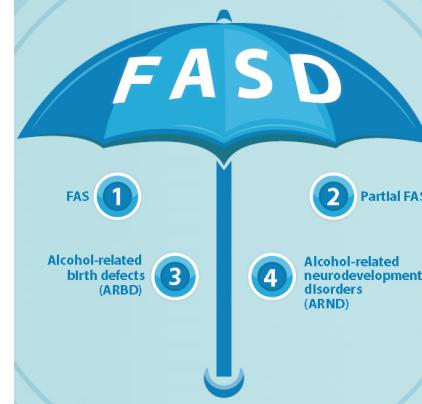
<http://www.istockphoto.com/photo/upset-problem-child-sitting-on-staircase-gm469612008-61677612?st=7568b10>

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	1 / Introduction	
Screen Title	Melissa's Story	
Screen #	4 / 62	
Video #	2 / 22	
On Screen Content		
<p>“When I finally realized what was going on, it was a relief, and it was horrifying, and I felt guilty, and I felt ashamed. But mostly I felt relieved to know what was going on.”</p>		
<p>“If a pregnant woman said to me, ‘I drink a little bit here and there and I was told it was okay,’ I would tell her that she wouldn’t if she had to live just one day with the way that I feel about myself, knowing how my son has been affected by my choices.</p>		
<p>“I am angry that I was given wrong information about drinking during pregnancy. I want to tell as many people as I can about it. You never know how much alcohol during pregnancy is too much, so why take that chance?”</p>		
<p>Story from: National Organization on Fetal Alcohol Syndrome (NOFAS) & National Center on Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention</p>		
Audio Script		
<p>“When I finally realized what was going on, it was a relief, and it was horrifying, and I felt guilty, and I felt ashamed. But mostly I felt relieved to know what was going on.”</p>		
<p>Melissa shares her story to prevent other mothers from making the same choices she did.</p>		
<p>“If a pregnant woman said to me, ‘I drink a little bit here and there and I was told it was okay,’ I would tell her that she wouldn’t if she had to live just one day with the way that I feel about myself, knowing how my son has been affected by my choices.</p>		
<p>“I am angry that I was given wrong information about drinking during pregnancy. I want to tell as many people as I can about it. You never know how much alcohol during pregnancy is too much, so why take that chance?”</p>		
Instructions to Developer		
<p>Need to show series of stock photos to “illustrate” story, along with on-screen text - maybe make photos B&W</p>		
<p>http://www.istockphoto.com/photo/talking-about-failures-gm511917390-86876065 - new</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	What is FASD?	
Screen #	5 / 62	
Video #	3 / 22	
On Screen Content		
What is FASD?		
Fetal Alcohol Spectrum Disorders (FASDs)		
Effects are lifelong		
Lessened through early recognition and diagnosis, appropriate support and interventions		
An individual does not have FASD, but an FASD.		
Audio Script		
Fetal alcohol spectrum disorder is an umbrella term used to describe diagnoses associated with in utero exposure to alcohol.		
Although the effects of in utero exposure to alcohol are lifelong, the impact on a person's life can be lessened through early recognition and diagnosis, followed by appropriate support and interventions.		
FASD is not a clinical diagnosis in the United States; instead it is a descriptive term that encompasses diagnoses attributed to prenatal alcohol exposure. An individual does not have FASD, but rather has an FASD.		
Instructions to Developer		
Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic		
http://www.istockphoto.com/photo/ultrasound-gm508050869-45350036?st=e6a8668		
Family photo - \\oxygen\\groups\\HSC\\Project_Active_files - 2016\\201210853 FASD\\Working Files\\Task 2\\Course 1_FASD101\\Assets\\Photos\\		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	What is FASD?	
Screen #	6 / 62	
Video #	3 / 22	
On Screen Content		
Fetal Alcohol Syndrome (FAS)		
The majority of individuals who experience FASDs do not have FAS.		
1. Fetal alcohol syndrome (FAS)		
2. Partial fetal alcohol syndrome (pFAS)		
3. Alcohol-related neurodevelopmental disorder (ARND)		
4. Alcohol-related birth defects (ARBD)		
5. Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE)		
Audio Script		
Fetal alcohol syndrome, or FAS, is the most widely known diagnosis, but it is only one potential diagnosis on the spectrum of FASDs. The majority of individuals who experience FASDs do not have FAS.		
There are five specific diagnoses included under the FASD umbrella:		
<ul style="list-style-type: none"> • Fetal alcohol syndrome (FAS), 		
<ul style="list-style-type: none"> • Partial fetal alcohol syndrome (pFAS), 		
<ul style="list-style-type: none"> • Alcohol-related neurodevelopmental disorder (ARND), 		
<ul style="list-style-type: none"> • Alcohol-related birth defects (ARBD), and 		
<ul style="list-style-type: none"> • Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE), recently described by the American Psychiatric Association in the 2013 <i>Diagnostic and Statistical Manual of Mental Disorders</i>, or DSM-5. 		
Instructions to Developer		
Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic		
Highlight diagnoses when mentioned on graphic		



Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	What is FASD?	
Screen #	7 / 62	
Video #	3 / 22	
On Screen Content		
Specific criteria	FASD diagnosis	 <p>The graphic features a blue umbrella with the letters 'FASD' in white on the canopy. Below the canopy, four numbered circles (1, 2, 3, 4) are arranged in a diamond pattern. Circle 1 is labeled 'FAS'. Circle 2 is labeled 'Partial FAS'. Circle 3 is labeled 'Alcohol-related birth defects (ARBD)'. Circle 4 is labeled 'Alcohol-related neurodevelopment disorders (ARND)'.</p>
FASD	Complex interaction	
<ul style="list-style-type: none"> Facial features Growth delays Central nervous system problems <p>FASD</p> <ul style="list-style-type: none"> Poor coordination Poor memory Communication difficulties Poor judgment and executive functioning skills Vision or hearing problems Difficulty with attention 	<ul style="list-style-type: none"> Prenatal amount Timing and pattern of exposure Postnatal environmental experiences <ul style="list-style-type: none"> Schooling Home life 	
Audio Script		
<p>Specific criteria must be met for a diagnosis of each FASD. These may include certain facial features, evidence of growth delays, and/or central nervous system abnormalities. The majority of individuals exposed to alcohol in utero will not have the facial features or growth problems required for a diagnosis of FAS; many of these individuals will be diagnosed with another condition on the spectrum. Unlike FAS, the characteristics associated with other disorders along the spectrum may be more subtle and may not be recognized until the child is older, or even into adulthood.</p>		
<p>A person with an FASD may exhibit poor coordination, poor memory, communication difficulties, poor judgment and executive functioning skills (such as problems with planning and organization, self-monitoring, and inhibition), vision or hearing problems, and difficulty with attention, among other challenges.</p>		
<p>It is important to remember that an individual's particular FASD diagnosis, as well as profile strengths and weaknesses, is shaped by a complex interaction of prenatal amount, timing and pattern of exposure, in addition to postnatal environmental experiences such as schooling and home life.</p>		
Instructions to Developer		
<p>Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic</p>		
<p>\oxygengroups\HSC\Project_Active_files - 2016\201210853 FASD\Working Files\Task 2\Course 1_FASD101\Assets\Photos\FASD</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	Alcohol-Exposed Pregnancies (AEPs)	
Screen #	8 / 62	
Video #	4 / 22	
On Screen Content		
Alcohol-Exposed Pregnancies		
Alcohol use during pregnancy		
Many women are not aware of their pregnancy for up to 4 to 6 weeks.		
Not using contraception consistently and consuming alcohol are risk factors		
Non-pregnant women: 18-44 years (in the last 30 days)		
<ul style="list-style-type: none"> • 54% consume alcohol • 18% binge drink 		
Non-pregnant women: 18-20 years		
<ul style="list-style-type: none"> • highest frequency and intensity of binge drinking • highest percentage of unintended pregnancies 		
Audio Script		
<p>Alcohol use during pregnancy is one of the leading known preventable causes of birth defects and developmental disabilities. Alcohol exposure in utero can disrupt fetal development even before a woman knows she is pregnant. Many women are not aware of their pregnancy for up to 4 to 6 weeks. This means that a woman might be drinking and exposing her developing baby to alcohol without knowing it.</p>		
<p>Alcohol use can increase the risk of an unintended pregnancy, as well as an alcohol-exposed pregnancy (or AEP). About half of all pregnancies in the United States are unplanned. The majority of these unintended pregnancies occur for women who are inconsistently using or not using contraception. All women of childbearing age who are not using contraception consistently and who are consuming alcohol are at risk of an unintended alcohol-exposed pregnancy.</p>		
<p>CDC research indicates that among non-pregnant women of childbearing age, which is 18-44 years, approximately 54% report consuming alcohol, and approximately 18% report binge drinking in the last 30 days. Non-pregnant women aged 18-20 years report the highest frequency and intensity of binge drinking; they also report the highest percentage of unintended pregnancies.</p>		
Instructions to Developer		
http://www.istockphoto.com/photo/waiting-for-a-baby-gm534699477-56836826?st=47ba4c3		
http://www.istockphoto.com/photo/women-social-friends-talking-seriously-in-home-kitchen-gm511023844-86488989?st=0b92503		
http://www.istockphoto.com/photo/birth-control-choices-gm182237344-11063525		
http://www.istockphoto.com/photo/line-of-different-coloured-alcohol-cocktails-on-a-open-air-party-gm479786738-68213097?st=7810f51		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	Alcohol-Exposed Pregnancies (AEPs)	
Screen #	9 / 62	
Video #	4 / 22	
On Screen Content		
<p>Pregnant women : 18-44 years (in the last 30 days)</p> <ul style="list-style-type: none"> • 10% consume alcohol • 3% binge drink <p>Pregnant women (unmarried college graduates): 35-44 years</p> <ul style="list-style-type: none"> • Highest prevalence of any alcohol use <p>To prevent FASDs, a woman should not drink alcohol while she is pregnant, or when she might get pregnant.</p> <p>It is never too late to stop consuming alcohol.</p>		
Audio Script		
<p>Among pregnant women, 10% report any alcohol use and 3% report binge drinking in the last 30 days. Among pregnant women, unmarried college graduates aged 35-44 years reported the highest prevalence of any alcohol use.</p> <p>Alcohol-exposed pregnancies occur in every demographic and socio-economic group.</p> <p>To prevent FASDs, a woman should not drink alcohol while she is pregnant, or when she might get pregnant.</p> <p>While most women stop using alcohol once they are aware they are pregnant, many continue to drink. Fetal development continues throughout pregnancy; thus it is important for health professionals to remind pregnant women that it is never too late to stop consuming alcohol.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/grocery-store-liquor-department-gm506018790-84000117?st=29d8ab1 – fade in background and show stats over photo</p> <p>http://www.istockphoto.com/photo/ultrasound-scanning-of-fetal-gm509251116-85679509?st=e6ee1e3</p> <p>http://www.istockphoto.com/photo/mother-and-a-baby-gm500881024-81043053?st=a4c507f</p>		

Module/Course Name	FASD Primer for Healthcare Professionals		
Unit # / Unit Name	2 / FASD Overview		
Screen Title	Impact of FASDs		
Screen #	10 / 62		
Video #	5 / 22		
On Screen Content	<p>Impact of FASDs</p> <p>FASD in the United States</p> <ul style="list-style-type: none"> • 2% - 5% school-age children <p>FAS in the Foster Care System</p> <ul style="list-style-type: none"> • 15 cases per 1,000 children <p>FASD in the Juvenile Justice System</p> <ul style="list-style-type: none"> • 20% of individuals 		
Proposed Graphics/Visuals	<p>Graphics depicting prevalence estimates</p>    		
Audio Script	<p>While it's not certain how many people have FASDs, different approaches have been used to estimate how many persons are living with FASDs in the population. In the United States, the prevalence of FASDs is estimated to be as high as 2-5% of school-age children, a rate similar to that of autism spectrum disorders. In some populations, there is a higher prevalence of FASDs. For example, studies in foster care and some American Indian populations reflect this higher prevalence.</p> <p>Prenatal alcohol exposure appears to affect a significant proportion of children in the foster care system. One study found the FAS prevalence estimate to be 15 cases per 1,000 children. Another study found high rates of missed diagnosis or misdiagnosis of foster and adopted children with FASDs.</p> <p>In addition, the effects of prenatal alcohol exposure on memory, judgment, and other executive functioning may be a contributing factor to a finding that more than 20% of individuals in the juvenile justice system have a condition related to prenatal alcohol exposure.</p>		
Instructions to Developer	<p>1 in 20 Image from Vital Signs Animate prevalence, use icons http://www.istockphoto.com/photo/group-of-happy-elementary-friends-together-gm456101339-31075162 http://www.istockphoto.com/vector/usa-map-on-blue-background-long-shadow-flat-design-gm491670442-75873177?st=ee455d6 http://www.istockphoto.com/vector/building-long-shadow-icons-gm525074259-52052418?st=cfc8f52</p>		

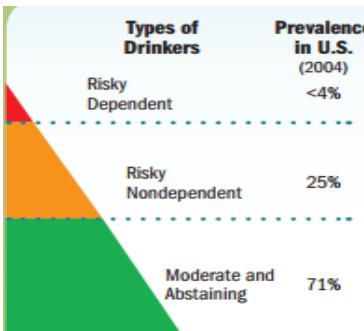
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	<p>Drinking while pregnant costs the US \$5.5 billion (2010). </p>
Screen Title	Impact of FASDs	
Screen #	11 / 62	
Video #	5 / 22	
On Screen Content		
Annual costs associated with drinking while pregnant in the United States		
<ul style="list-style-type: none"> • \$5.5 billion 		<p>People with FASDs can experience a mix of the following problems:</p>
Lifetime cost for an infant with FAS		<p>Physical issues</p> <ul style="list-style-type: none"> • low birth weight and growth • problems with heart, kidneys, and other organs • damage to parts of the brain <p>Behavioral and intellectual disabilities</p> <ul style="list-style-type: none"> • learning disabilities and low IQ • hyperactivity • difficulty with attention • poor ability to communicate in social situations • poor reasoning and judgment skills <p>Lifelong issues with</p> <ul style="list-style-type: none"> • school and social skills • living independently • mental health • substance use • keeping a job • trouble with the law
Increased risk of:		<p>Which leads to...</p> <p>These can lead to...</p>
<ul style="list-style-type: none"> • mental health disorders • disrupted school and employment experiences • legal problems • challenges with living independently • substance abuse disorders. 		

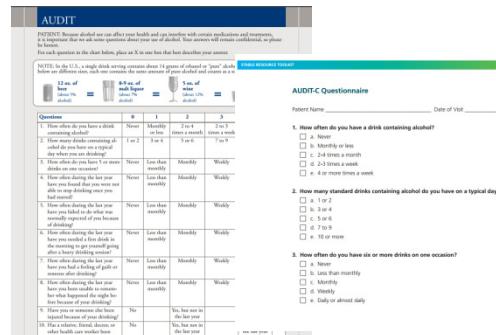
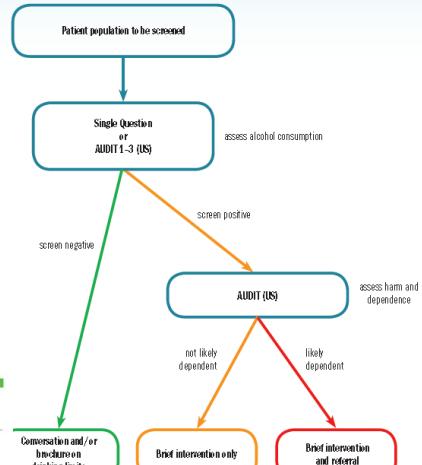
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	
Screen Title	Frances's Story	
Screen #	12 / 62	
Video #	6 / 22	
On Screen Content		
Frances's Story		
<p>"FASD has affected my life in many ways.... As a child, I never knew what it was but it was hard for me to make friends and I found myself feeling afraid of others. School was very hard for me, especially math and English. I couldn't comprehend them. I completed high school and tried college, but it didn't go well."</p> <p>"Working was hard. I didn't know what I wanted to do and I went from job to job. I couldn't hold on to a job. It was hard for me because I developed anxiety, depression and an eating disorder. I still deal with that today. I see a therapist often and take medication. It's still a struggle."</p>		
Audio Script		
<p>Frances is a woman living with FASD. She was born prematurely and into an alcoholic family. Growing up, she struggled in school and with relationships.</p> <p>"FASD has affected my life in many ways.... As a child, I never knew what it was but it was hard for me to make friends and I found myself feeling afraid of others. School was very hard for me, especially math and English. I couldn't comprehend them. I completed high school and tried college, but it didn't go well."</p> <p>Frances eventually found a job, but she still had trouble adjusting.</p> <p>"Working was hard. I didn't know what I wanted to do and I went from job to job. I couldn't hold on to a job. It was hard for me because I developed anxiety, depression and an eating disorder. I still deal with that today. I see a therapist often and take medication. It's still a struggle."</p>		
Instructions to Developer		
<p>Need to show series of stock photos to "illustrate" story, along with on-screen text - maybe make photos B&W</p> <p>http://www.istockphoto.com/photo/little-girl-in-red-dress-sitting-on-boardwalk-hugging-teddybear-gm539235919-53500928?st=ec769a4</p> <p>http://www.istockphoto.com/photo/children-sitting-in-the-park-gm183416469-15475393?st=0667715</p> <p>http://www.istockphoto.com/photo/school-hallway-1-gm92186640-2424978?st=f49eef6</p> <p>http://www.istockphoto.com/photo/crowd-of-people-gm480807292-68931449 - (new)</p>		

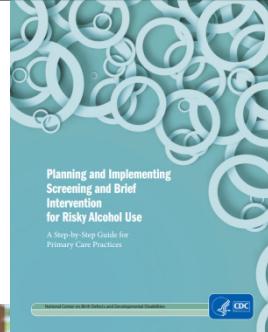
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	2 / FASD Overview	 
Screen Title	Frances's Story	
Screen #	13 / 62	
Video #	6 / 22	
On Screen Content		
<p>“I do a lot of writing to express my feelings. It helps me. I also watch people very carefully to learn how to do certain things. I tend to read everything twice to comprehend what I am reading. For my anxiety, I avoid loud and crowded places. I always surround myself with people that I feel comfortable and safe with.”</p>		
<p>“I got involved with an organization called Al-Anon because I grew up in an alcoholic family. I do share my FASD story at the Al-Anon meetings. I always tell myself if there is one young woman who is thinking about having a child and who is drinking, if I share my story and that one person hears me, it's worth it.”</p> <p>Story from: National Organization on Fetal Alcohol Syndrome (NOFAS) & National Center on Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention</p>		
Audio Script		
<p>Even though Frances may have difficulty with some aspects of everyday life, she has found ways to manage her FASD.</p>		
<p>“I do a lot of writing to express my feelings. It helps me. I also watch people very carefully to learn how to do certain things. I tend to read everything twice to comprehend what I am reading. For my anxiety, I avoid loud and crowded places. I always surround myself with people that I feel comfortable and safe with.”</p>		
<p>“I got involved with an organization called Al-Anon because I grew up in an alcoholic family. I do share my FASD story at the Al-Anon meetings. I always tell myself if there is one young woman who is thinking about having a child and who is drinking, if I share my story and that one person hears me, it's worth it.”</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/female-hand-writing-in-notebook-gm469391908-61565558?st=e72d981 – (new)</p>		
<p>http://www.istockphoto.com/photo/filling-in-form-gm489310748-74628033?st=3401462</p>		
<p>http://www.istockphoto.com/photo/female-hand-against-defocused-group-of-students-gm481711236-69810065?st=d0399a5</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals														
Unit # / Unit Name	3 / Prevention															
Screen Title	Alcohol Limits & Levels															
Screen #	14 / 62															
Video #	7 / 22															
On Screen Content																
Alcohol Limits & Levels	<p>What is a standard drink?</p> <p>14 grams (about 0.6 fluid ounces) of pure alcohol</p> <p>Amount of alcohol varies based on:</p> <ul style="list-style-type: none"> Alcohol content of different brands Type of beverage Size of container/glass holding the drink 	 <table border="1"> <tbody> <tr> <td>12 oz. of beer or cooler</td> <td>8.5 oz. of malt liquor</td> <td>5 oz. of table wine</td> <td>3.5 oz. of fortified wine such as sherry or port</td> <td>2.5 oz.</td> <td>1.5 oz. of brandy a single jigger</td> <td>1.5 oz. of spirits a single jigger of 80-proof gin, vodka, whiskey, etc.</td> </tr> <tr> <td>8.5 oz. shown in a 12-oz. glass that, if full, would hold about 1.5 standard drinks of malt liquor</td> <td>3.5 oz. shown</td> <td>5 oz. shown</td> <td>3.5 oz. shown</td> <td>2.5 oz. shown</td> <td>1.5 oz. shown</td> <td>1.5 oz. shown Shown straight and in a highball glass with ice to show level before adding mixer*</td> </tr> </tbody> </table>	12 oz. of beer or cooler	8.5 oz. of malt liquor	5 oz. of table wine	3.5 oz. of fortified wine such as sherry or port	2.5 oz.	1.5 oz. of brandy a single jigger	1.5 oz. of spirits a single jigger of 80-proof gin, vodka, whiskey, etc.	8.5 oz. shown in a 12-oz. glass that, if full, would hold about 1.5 standard drinks of malt liquor	3.5 oz. shown	5 oz. shown	3.5 oz. shown	2.5 oz. shown	1.5 oz. shown	1.5 oz. shown Shown straight and in a highball glass with ice to show level before adding mixer*
12 oz. of beer or cooler	8.5 oz. of malt liquor	5 oz. of table wine	3.5 oz. of fortified wine such as sherry or port	2.5 oz.	1.5 oz. of brandy a single jigger	1.5 oz. of spirits a single jigger of 80-proof gin, vodka, whiskey, etc.										
8.5 oz. shown in a 12-oz. glass that, if full, would hold about 1.5 standard drinks of malt liquor	3.5 oz. shown	5 oz. shown	3.5 oz. shown	2.5 oz. shown	1.5 oz. shown	1.5 oz. shown Shown straight and in a highball glass with ice to show level before adding mixer*										
Audio Script																
	<p>To accurately assess whether or not a person is consuming alcohol at a risky level, there must be a shared understanding of what constitutes a standard drink. The National Institute on Alcohol Abuse and Alcoholism defines a standard drink as “any drink that contains approximately 14 grams (which is about 0.6 fluid ounces) of pure alcohol.” This is approximately the amount contained in:</p> <ul style="list-style-type: none"> One 12-ounce beer or wine cooler One 8-9-ounce malt liquor One 5-ounce glass of wine, and 1.5 ounces of 80-proof distilled spirits <p>These figures are estimates since the actual amount of alcohol varies based on the brand and type of beverage, as well as the size of the beverage container.</p>															
Instructions to Developer		<p>http://www.istockphoto.com/photo/variety-of-alcholic-drinks-on-reflective-white-background-gm539235691-59757238</p> <p>Motion graphics (to highlight different types of drinks)</p> <p>Graphic depictions of the drinks represented (page 28 of Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use: A Step by Step Guide for Primary Care Providers.)</p>														

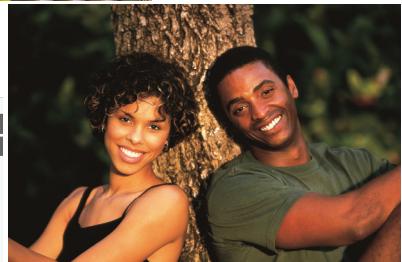
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals	
Unit # / Unit Name	3 / Prevention		
Screen Title	Alcohol Limits & Levels		
Screen #	15 / 62		
Video #	7 / 22		
On Screen Content			
Drinker's Pyramid			
Abstainers			
Moderate:			
<ul style="list-style-type: none"> • Abstain from alcohol when pregnant, might become pregnant, breastfeeding, and driving a motor vehicle or operating heavy machinery 			
Risky nondependent:			
<ul style="list-style-type: none"> • Health consequences of alcohol use • Reducing quantity and frequency of drinking 			
Audio Script			
When talking with women of childbearing age about their alcohol use, it is helpful to understand the different levels of alcohol use as illustrated in the Drinker's Pyramid.			
At the bottom of the pyramid are abstainers and moderate drinkers. Approximately 71% of the U.S. adult population falls into this category. Those who drink moderately should be reminded of drinking levels and encouraged to abstain from alcohol when pregnant, might become pregnant, breastfeeding, and in situations such as driving a motor vehicle or operating heavy machinery.			
Twenty-five percent of the U.S. adult population is classified as a risky, nondependent type of drinker. They drink in ways that put themselves and others at risk of harm. Along with moderate drinkers, risky, nondependent drinkers benefit from conversations with their health care provider about the health consequences of alcohol use and brief interventions to introduce techniques for reducing the quantity and frequency of their drinking.			
Instructions to Developer			
Recreate Drinkers pyramid graphic (page 26 of Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use: A Step by Step Guide for Primary Care Providers.)			
Highlight each section of pyramid as narrated			

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals	
Unit # / Unit Name	3 / Prevention		
Screen Title	Alcohol Limits & Levels		
Screen #	16 / 62		
Video #	7 / 22		
On Screen Content	<p>Risky dependent</p> <ul style="list-style-type: none"> • May have already experienced health or other consequences • Tolerance to alcohol • Loss of control over their drinking • Treatment resources within health care organization or communities <p>Non-pregnant women / Men over age 65</p> <ul style="list-style-type: none"> • No more than three drinks on any one occasion • No more than seven drinks per week <p>Men ages 21-65</p> <ul style="list-style-type: none"> • No more than four drinks on any one occasion • No more than 14 drinks per week 	<p>Graphics depicting Drinking levels</p> 	 <p>Types of Drinkers</p> <p>Risky Dependent</p> <p>Risky Nondependent</p> <p>Moderate and Abstaining</p> <p>Prevalence in U.S. (2004)</p> <p><4%</p> <p>25%</p> <p>71%</p>  <p>1 2 3 4 5</p> <p>6 7 8 9 10 11 12</p> <p>13 14 15 16 17 18 19</p> <p>20 21 22 23 24 25 26</p> <p>27 28 29 30 31</p>
Audio Script	<p>The remaining 4% of the U.S. adult population is drinking at levels that suggest they are risky, dependent drinkers and should be referred to treatment by their health care provider. Risky, dependent drinkers may have already experienced health or other consequences at home, work, school, or through contact with the criminal justice system and continue to drink at risky levels. Most have developed tolerance to alcohol, needing to drink more and more to feel high or “buzzed,” and a loss of control over their drinking, including the inability to stop drinking once they start and spending more time drinking or recovering from drinking episodes than intended. Health care providers can help by connecting risky, dependent drinkers to treatment resources within their health care organization or in their communities.</p> <p>Individuals who have an understanding of risky drinking are more likely to drink below the daily or weekly levels. For non-pregnant women and men over age 65, this means no more than three drinks on any one occasion or no more than seven drinks in a week. For men ages 21-65, this means no more than four drinks on any one occasion or no more than 14 drinks per week. There are other situations when health conditions and activities may warrant limiting drinking to lower limits or not drinking at all, including pregnant women and those who could become pregnant.</p>		
Instructions to Developer	<p>Drinkers pyramid graphic (page 26 of Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use)</p> <p>http://www.istockphoto.com/vector/soulico-icons-vineyard-and-wine-gm477334472-66931969?st=97c9860</p> <p>http://www.istockphoto.com/vector/march-2016-calendar-gm503385830-82495399?st=2245702 – cutout month and year (to make it generic)</p> <p>Animate amounts and highlight one week</p>		

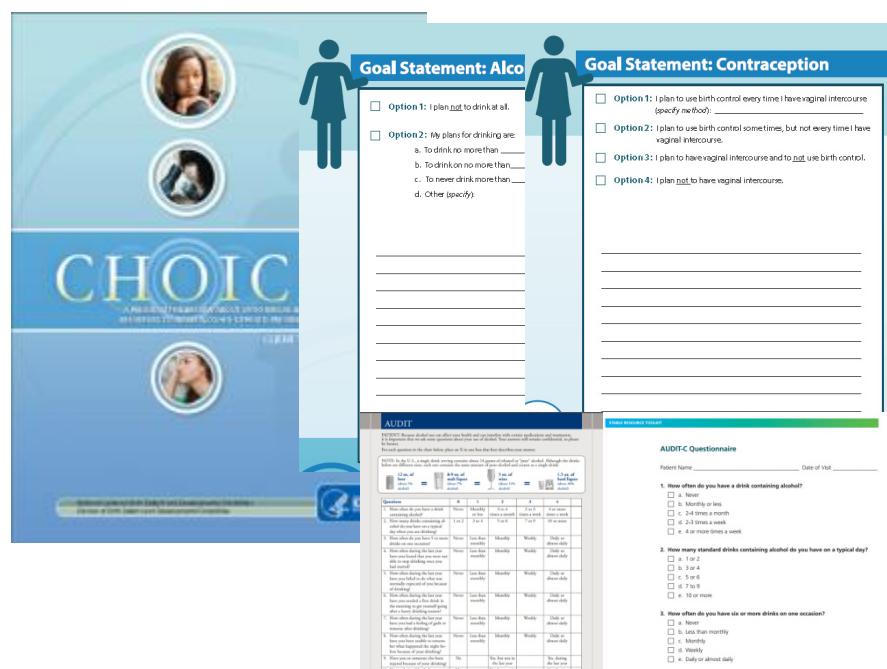
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Alcohol SBI	
Screen #	17 / 62	
Video #	8 / 22	
On Screen Content		
Alcohol SBI	<p>Low intensity, low cost clinical preventive service</p> <p>Reduce alcohol consumption by 25%</p> <p>Validated screening tools</p> <ul style="list-style-type: none"> Administered at least annually <p>Detects</p> <ul style="list-style-type: none"> Drinking too much Alcohol-related problems in the past Reliance on alcohol that needs to be addressed 	 
Audio Script		
	<p>Research indicates that alcohol screening and brief intervention (also known as alcohol SBI) is an effective means of reducing risky alcohol use and preventing alcohol-exposed pregnancies. Alcohol SBI is a low intensity, low cost clinical preventive service to identify and intervene with people who drink too much. Healthcare professionals who discuss alcohol consumption and give brief advice to women and men, who are drinking at risky levels, can help them reduce their alcohol consumption by 25%.</p> <p>Validated screening tools allow for the standardization and tracking of drinking patterns among patients, and they can often be implemented in just minutes. These tools administered at least annually can help detect if a woman or man is drinking too much, has experienced alcohol-related problems in the past, and has a reliance on alcohol that needs to be addressed.</p> <p>Any member of the healthcare team can do the screening, and the healthcare team should agree on protocols for follow-up assessment, interventions, and referrals for anyone who screens positive for risky alcohol consumption.</p>	
Instructions to Developer		
	<p>Recreate flow chart from Planning & SBI Guide – pg 13</p> <p>Example of SBI Tool (Audit) - http://pubs.niaaa.nih.gov/publications/Audit.pdf</p> <p>Example of SBI Tool (Audit C) - http://www.integration.samhsa.gov/images/res/tool_auditc.pdf</p> <p>http://www.istockphoto.com/photo/you-have-to-start-taking-better-care-of-your-health-gm530961389-55156934</p>	

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Alcohol SBI	
Screen #	18 / 62	
Video #	8 / 22	
On Screen Content		
1 in 6 adults		
United States Preventive Services Task Force recommendation		
Endorsed by:		
<ul style="list-style-type: none"> • American Academy of Family Physicians • American Academy of Pediatrics • American Congress of Obstetricians and Gynecologists 		
Failure to screen for risky alcohol use is a missed opportunity		
Audio Script		
<p>Only one in six adults report talking with their health care professional about their drinking behaviors, yet screening and brief intervention for risky alcohol use in primary care settings is a Grade B recommendation of the United States Preventive Services Task Force and is endorsed by most major medical societies including the:</p>		
<ul style="list-style-type: none"> • American Academy of Family Physicians, • American Academy of Pediatrics, and • American Congress of Obstetricians and Gynecologists. 		
For more information on alcohol SBI, please review the CDC's <i>Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use</i> .		
Failure to screen for risky alcohol use is a missed opportunity to discuss alcohol use with women and to help them understand the health risks and consequences of too much drinking as well as the risk for an alcohol-exposed pregnancy.		
Instructions to Developer		
<p>http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/alcohol-misuse-screening-and-behavioral-counseling-interventions-in-primary-care</p>		
<p>http://www.istockphoto.com/photo/serious-woman-during-her-visit-at-the-doctor-gm492675392-76449471?st=f3c153b</p>		
<p>http://www.istockphoto.com/photo/female-patient-having-consultation-with-doctor-in-office-gm489348616-74649083</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Preventing AEPs	
Screen #	19 / 62	
Video #	9 / 22	
On Screen Content		
Preventing AEPs		<p>There is no known safe amount of alcohol to drink while pregnant.</p>
2005 U.S. Surgeon General Advisory		<p>Based on the current, best science available we now know the following:</p>
<ul style="list-style-type: none"> • A woman should not drink any alcohol during pregnancy. • A pregnant woman who has already consumed alcohol during her pregnancy should stop in order to minimize further risk. • A woman who is considering becoming pregnant should abstain from alcohol. 		<ul style="list-style-type: none"> • No amount of alcohol consumption can be considered safe during pregnancy. • Alcohol can damage a fetus at any stage of pregnancy. Damage can occur in the earliest weeks of pregnancy, even before a woman knows that she is pregnant. • The cognitive deficits and behavioral problems resulting from prenatal alcohol exposure are lifelong. • Alcohol-related birth defects are completely preventable.
Risk of an alcohol-exposed pregnancy		<p>Risk of an alcohol-exposed pregnancy</p> <ul style="list-style-type: none"> • Women who are pregnant or might be pregnant and drinking alcohol • Women of childbearing age, who are having vaginal sex with a male, do not use adequate birth control, and drink alcohol
Audio Script		
There is no known safe amount of alcohol to drink while pregnant.		
Based on that, the 2005 U.S. Surgeon General Advisory stressed that:		
<ul style="list-style-type: none"> • A woman should not drink any alcohol during pregnancy. • A pregnant woman who has already consumed alcohol during her pregnancy should stop in order to minimize further risk. • A woman who is considering becoming pregnant should abstain from alcohol. 		
Therefore, those at risk of an alcohol-exposed pregnancy include women who are pregnant or might be pregnant and drinking alcohol, and women of childbearing age, who are having vaginal sex with a male, do not use adequate birth control, and drink alcohol.		
Instructions to Developer		
Show upper half of Surgeon General card - http://www.cdc.gov/ncbddd/fasd/documents/surgeongenbookmark.pdf		
http://www.istockphoto.com/photo/no-alcohol-sign-gm522920381-51664782?st=8c99fe1		
http://www.istockphoto.com/photo/they-ll-take-good-care-of-you-gm531772115-55725022?st=5584aeb		

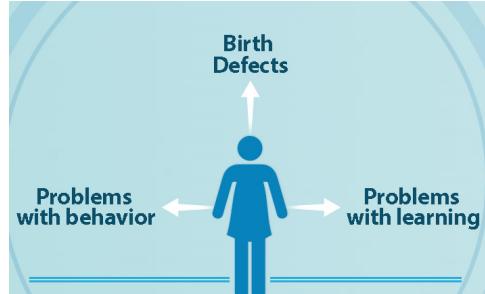
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Preventing AEPs	
Screen #	20 / 62	
Video #	9 / 22	
On Screen Content		
<p>Ways to reduce AEPs</p> <ol style="list-style-type: none"> 1. Reduce or eliminate risky drinking in women 2. Prevent unplanned pregnancy through effective use of contraception 		
<p>Often choose to address both</p>		
<p>Alcohol should not be consumed during pregnancy or when trying to become pregnant.</p>		
<p>All women of childbearing age are the focus of prevention</p>		
Audio Script		
<p>There are two primary ways to reduce alcohol-exposed pregnancies:</p>		
<ol style="list-style-type: none"> 1. Reduce or eliminate risky drinking in women. 2. Prevent unplanned pregnancy through effective use of contraception. 		
<p>Women who are counseled by healthcare professionals on these prevention measures often choose to address both. Doctors, nurses, and other health professionals should counsel women of childbearing age that alcohol of any kind should not be consumed at any time during pregnancy or when trying to become pregnant.</p>		
<p>To reduce alcohol-exposed pregnancies, all women of childbearing age are the focus of prevention. However, despite the data regarding alcohol consumption among women of childbearing age, the rate of unintended pregnancies, and the prevalence of FASDs, screening for alcohol use among women of childbearing age is not yet a universal standard of care.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/vector/martini-cocktail-vector-icon-gm468190274-61128632?st=67d6907</p>		
<p>http://www.istockphoto.com/photo/birth-control-pills-on-calendar-gm469431716-61590990?st=c11defd</p>		
<p>Women of childbearing age - http://www.istockphoto.com/vector/women-silhouettes-gm500048596-80569321?st=37a8b27</p>		
<p>\\oxygen\\groups\\HSC\\Project_Active_files - 2016\\201210853 FASD\\Working Files\\Task 2\\Course 1_FASD101\\Assets\\Photos</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	 
Screen Title	Preventing AEPs	
Screen #	21 / 62	
Video #	9 / 22	
On Screen Content		
<p>Prevention</p> <p>Shared responsibility of medical, allied health, and social service professionals</p> <p>Interdisciplinary team</p> <p>Preconception care</p> <ul style="list-style-type: none"> • Current and future plans for pregnancy • Optimizing health behaviors 		
Audio Script		
<p>Prevention to decrease the incidence of alcohol-exposed pregnancies is the shared responsibility of medical, allied health, and social service professionals. Through routine screening, health professionals play a crucial role in identifying women at risk for an alcohol-exposed pregnancy.</p> <p>Healthcare facilities can utilize an interdisciplinary team to ensure that all women of childbearing age are screened and those who indicate risky drinking behaviors are provided either a brief intervention and/or referral to treatment.</p> <p>Another opportunity for reducing alcohol-exposed pregnancies focuses on increasing preconception care. Healthcare professionals should ask all women of childbearing age about their current and future plans for pregnancy, and help women to manage their fertility to achieve desired goals for pregnancy. For women planning pregnancy, healthcare professionals should discuss health-enhancing behaviors prior to active attempts to conceive, and ask about medications and substance use.</p>		
Instructions to Developer		
<p>Medical professionals - http://www.istockphoto.com/photo/group-of-doctors-having-a-meeting-in-the-hospital-gm496852270-78795059?st=fe397ff</p> <p>Screening - http://www.istockphoto.com/photo/cheering-patient-gm479267802-67841461?st=9c3bf19</p> <p>Interdisciplinary team - http://www.istockphoto.com/photo/hospital-medical-team-meeting-gm525696291-52991558</p> <p>Preconception care - \\oxygen\\groups\\HSC\\Project_Active_files - 2016\\201210853 FASD\\Working Files\\Task 2\\Course 1_FASD101\\Assets\\Photos</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Preventing AEPs	
Screen #	22 / 62	
Video #	9 / 22	
On Screen Content	<p>CHOICES</p> <ul style="list-style-type: none"> targets women aged 18-44 years at risk of an AEP available at no cost targets both alcohol use and contraception behavior provides education explores ambivalence provides tools <p>Interdisciplinary team</p>	 <p>The image shows the CHOICES Client Workbook. The cover features the CHOICES logo and a woman's face. The sample pages include: <ul style="list-style-type: none"> Goal Statement: Alcohol: <ul style="list-style-type: none"> <input type="checkbox"/> Option 1: I plan <u>not</u> to drink at all. <input type="checkbox"/> Option 2: My plan for drinking are: <ul style="list-style-type: none"> a. To drink no more than _____ b. To drink on no more than _____ c. To never drink more than _____ d. Other (specify) _____ Goal Statement: Contraception: <ul style="list-style-type: none"> <input type="checkbox"/> Option 1: I plan to use birth control every time I have vaginal intercourse (specify method) _____ <input type="checkbox"/> Option 2: I plan to use birth control sometimes, but not every time I have vaginal intercourse. <input type="checkbox"/> Option 3: I plan to have vaginal intercourse and to <u>not</u> use birth control. <input type="checkbox"/> Option 4: I plan <u>not</u> to have vaginal intercourse. AUDIT: A chart showing alcohol consumption levels (0-100g) for men and women across different days of the week. AUDIT-C Questionnaire: A series of questions about alcohol use frequency and quantity. </p>
Audio Script	<p>An evidence-based intervention that targets women aged 18-44 years who are at risk of an alcohol-exposed pregnancy is CHOICES. CHOICES is available at no cost and is dual-focused, targeting both alcohol use and contraception behavior, with the woman choosing which focus fits best with her current life goals, or she may choose to change both behaviors.</p> <p>Aimed at non-pregnant women who are sexually active (specifically, having vaginal sex with a man), drinking above recommended levels, and not using effective contraception, this two to four-session intervention provides education, explores ambivalence, and provides tools to help individuals make healthy choices.</p> <p>Both Alcohol SBI and CHOICES are examples of interventions that can be implemented by an interdisciplinary team that may include medical assistants, licensed counselors, patient navigators, nurses, and other health care providers.</p> <p>Preventing alcohol-exposed pregnancies is key to preventing FASDs.</p>	
Instructions to Developer	<p>Pull images from new CHOICES content – Client Workbook</p> <p>Alcohol SBI –</p> <p>Example of SBI Tool (Audit) - http://pubs.niaaa.nih.gov/publications/Audit.pdf</p> <p>Example of SBI Tool (Audit C) - http://www.integration.samhsa.gov/images/res/tool_auditc.pdf</p>	

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Lashaunda's Story	
Screen #	23 / 62	
Video #	10 / 22	
On Screen Content		
Lashaunda's Story		
Lashaunda is birth mother.		
Recovery		
"Today, me and [my] daughter have an awesome relationship; I just love her, she just loves me. We spend tons of time together. She's about to graduate. She struggles with some things. She has this huge level of denial about her disabilities and that's ok. That's ok because I was there too and I guess my role is just to make sure that I'm there for her when her eyes are ready to be opened and when she is ready to deal with some of the things that I've had to learn to deal with throughout my recovery."		
Audio Script		
Lashaunda is birth mother. She's been in recovery for more than 20 years for alcohol and drugs. She gave birth to her children when she was a teenager and an alcoholic. They were eventually taken by Child Protective Services. About two years after that she got into recovery.		
Over time, she was able to develop a relationship with her children again and learned of some of the impairments that they faced.		
"Today, me and [my] daughter have an awesome relationship; I just love her, she just loves me. We spend tons of time together. She's about to graduate. She struggles with some things. She has this huge level of denial about her disabilities and that's ok. That's ok because I was there too and I guess my role is just to make sure that I'm there for her when her eyes are ready to be opened and when she is ready to deal with some of the things that I've had to learn to deal with throughout my recovery."		
Instructions to Developer		
Need to show series of stock photos to "illustrate" story, along with on-screen text - maybe make photos B&W		
http://www.istockphoto.com/photo/belly-of-married-pregnant-woman-gm523872764-92087369?st=d31ea38		
http://www.istockphoto.com/photo/looking-out-a-window-gm181074779-25239381		
http://www.istockphoto.com/photo/holding-hands-gm152940837-16128584?st=56687e4		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	3 / Prevention	
Screen Title	Lashaunda's Story	
Screen #	24 / 62	
Video #	10 / 22	
On Screen Content		
<p>Parent-Child Assistance Program</p> <p>Connect Educate Mentor</p> <p>“Being a part of PCAP and the birth mother's network, I get to give back to that 19-year-old girl that I once was by helping other moms, educating them, and reaching out to be the support system for them. Trying to just give back in educating other moms and I want other moms to know that you can remove that shame, you can remove that guilt, and you can empower yourself to educate that next mom.”</p> <p>Story from: National Organization on Fetal Alcohol Syndrome (NOFAS)</p>		
Audio Script		
<p>Lashaunda works for PCAP, the Parent-Child Assistance Program. She started off as an advocate and case manager, working with a caseload of 15 to 16 moms. She would connect them with necessary services and educate them about the dangers of drug and alcohol use during pregnancy. She eventually moved up to be the clinical supervisor.</p>		
<p>Lashaunda feels strongly that if she had had support or a mentor as a young mother, she would have been able to reconnect with her children and help them sooner. Now, she's passionate about helping other mothers.</p>		
<p>“Being a part of PCAP and the birth mother's network, I get to give back to that 19-year-old girl that I once was by helping other moms, educating them, and reaching out to be the support system for them. Trying to just give back in educating other moms and I want other moms to know that you can remove that shame, you can remove that guilt, and you can empower yourself to educate that next mom.”</p>		
Instructions to Developer		
http://www.istockphoto.com/photo/teenage-girl-visits-doctor-s-office-suffering-with-depression-gm177761232-24019634?st=3fea060		
http://www.istockphoto.com/photo/young-women-sitting-on-a-bench-with-a-child-gm510853972-86420125?st=e86a936		

Module/Course Name	FASD Primer for Healthcare Professionals		
Unit # / Unit Name	4 / Identification, Referral, Treatment		
Screen Title	Importance of Early Identification		
Screen #	25 / 62		
Video #	11 / 22		
On Screen Content	<p>Importance of Early Identification</p> <p>Mild to Severe</p> <ul style="list-style-type: none"> Physical Mental Behavioral Learning <p>Amount of prenatal alcohol exposure</p> <p>Timing of exposure</p> <p>Pattern of exposure</p> <p>Postnatal experiences</p> <p>Support and services</p> <ul style="list-style-type: none"> Counseling Medical specialty care Peer and community programs <p>Opportunity to talk to a woman about preventing subsequent alcohol-exposed pregnancies</p>		
Proposed Graphics/Visuals	<p>Custom graphics for signs and symptoms</p>   		
Audio Script	<p>Signs and symptoms of FASDs range from mild to severe and include a combination of physical, mental, behavioral, and learning problems. The variability in the presentation of signs and symptoms needs to be considered when an individual is being evaluated for an FASD since multiple factors come into play including, the amount of prenatal alcohol exposure, timing of exposure, pattern of exposure such as chronic or binge drinking and postnatal experiences, such as parenting style, educational opportunities, and poverty.</p> <p>Although FASDs are lifelong conditions, early identification, particularly before six years of age, takes advantage of early interventions, and helps reduce risk of later life issues such as problems in school or maintaining employment, mental health or substance use problems, inappropriate or risky sex behaviors, and legal problems including jail time as well as being a victim of a crime. Early diagnosis works by helping families affected by FASDs to get the support and services they need which can include counseling, medical specialty care, and peer and community programs. However, identification and diagnosis at any age is beneficial. In addition, diagnosis of a child provides an opportunity to talk to a woman about preventing subsequent alcohol-exposed pregnancies.</p>		
Instructions to Developer	<p>Custom graphics for signs and symptoms – something similar to CHOICES graphic, but matching new style</p> <p>http://www.istockphoto.com/photo/everything-will-be-ok-i-promise-gm493084514-76720071?st=254b9d1</p> <p>\\oxygen\\groups\\HSC\\Project_Active_files - 2016\\201210853 FASD\\Working Files\\Task 2\\Course 1_FASD101\\Assets\\Photos\\FASD</p>		

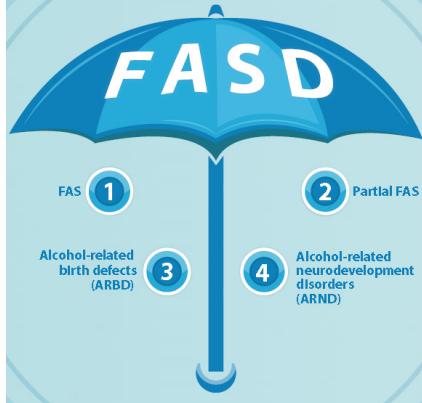
Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Importance of Early Identification	
Screen #	26 / 62	
Video #	11 / 22	
On Screen Content		
<ol style="list-style-type: none"> 1. Developmental or behavioral issues 2. Dysmorphic facial features 3. Growth deficiency at or below 10th percentile 4. History of confirmed or suspected PAE 5. Self-reported or family concern 6. A sibling with an FASD <p>Co-occurring or secondary conditions</p> <ul style="list-style-type: none"> • Psychiatric • Emotional • Behavioral 	<p>Children and adolescents with FASD have a 95% chance of experiencing mental health issues.</p>	<div style="border: 1px solid black; padding: 10px; text-align: center;"> <p>Custom graphics for list and co-occurring</p> </div> <div style="display: flex; justify-content: space-around; align-items: center;">  <div style="text-align: center;">  <p>Photo from iStock</p> </div> <div style="text-align: center;">  <p>Photo from iStock</p> </div> </div>
Audio Script		
<p>Concerns that could bring an individual to a healthcare professional's attention and lead to an assessment for an FASD include:</p>		
<ol style="list-style-type: none"> 1. Developmental or behavioral issues, 2. Dysmorphic facial features associated with prenatal alcohol exposure (or PAE), 3. Growth deficiency at or below 10th percentile for head circumference, height, or weight at any time, including prenatally, 4. History of confirmed or suspected PAE, 5. Self-reported or family concern about possible FASD, and/or 6. A sibling with an FASD. <p>A person with an FASD is more likely to also have co-occurring psychiatric, emotional, and behavioral problems, which are called secondary conditions. Children and adolescents with an FASD have a 95% chance of experiencing mental health issues at some point in their life.</p>		
Instructions to Developer		
<p>\\oxygen\\groups\\HSC\\Project_Active\\files - 2016\\201210853 FASD\\Working Files\\Task 2\\Course 1_FASD101\\Assets\\Photos\\FASD</p> <p>http://www.istockphoto.com/vector/mobico-icons-offspring-gm165941740-22312340?st=b990c91</p> <p>http://www.istockphoto.com/photo/depressed-teenager-sitting-on-the-stairs-gm500451706-80770273?st=0a22ffe</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Importance of Early Identification	
Screen #	27 / 62	
Video #	11 / 22	
On Screen Content		
<p>Independent living skills</p> <ul style="list-style-type: none"> • Communicating wants and needs • Making/keeping healthy relationships with friends and family • Maintaining stability 		<div data-bbox="1161 522 1657 856">  </div>
<p>If an individual has characteristics that are not typical of an FASD, other diagnoses should be ruled out before assigning a diagnosis of an FASD or included as a comorbid diagnosis.</p>		<div data-bbox="1795 408 2006 603">  </div>
Audio Script		
<p>These additional problems often get in the way of a person with an FASD learning independent living skills such as:</p> <ul style="list-style-type: none"> • How to appropriately communicate wants and needs, • Making and keeping healthy relationships with friends and family, and • Maintaining stability. 		
<p>Having an FASD does not prevent an individual from having other behavioral and genetic conditions, which can overlap with an FASD in various ways. In general, if an individual has characteristics that are not typical of an FASD, other diagnoses should be ruled out before assigning a diagnosis of an FASD or included as a comorbid diagnosis.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/vector/communication-long-shadow-icons-gm531387355-55232050?st=ff61b36</p>		
<p>http://www.istockphoto.com/vector/family-long-shadow-icons-gm467737218-60794902?st=6cdb863</p>		
<p>http://www.istockphoto.com/photo/pediatrician-with-baby-and-her-mother-gm466654976-60602424</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Diagnosis	
Screen #	28 / 62	
Video #	12 / 22	
On Screen Content		
Diagnosis FASD is not a clinical diagnosis		 <p>The graphic features a blue umbrella with the letters 'FASD' in white on the canopy. Below the canopy, four numbered circles point downwards to text labels: 1. FAS, 2. Partial FAS, 3. Alcohol-related birth defects (ARBD), and 4. Alcohol-related neurodevelopment disorders (ARND). Below the text is a photograph of a woman in a blue jacket talking to a man in a blue medical scrub top.</p>
Confirmed history of prenatal exposure Obtained from the mother during pregnancy or afterwards Adoption records, birth records or other sources		
Amount of alcohol used, when during pregnancy a woman drank and whether she engaged in any binge drinking		
Audio Script		
<p>As mentioned previously, FASD is not a clinical diagnosis, rather an umbrella term encompassing several more specific diagnoses. This overview is not intended to be a tutorial for making specific diagnoses, but rather a broad description of the characteristics that get evaluated to make the diagnosis.</p> <p>For all FASD diagnoses, a confirmed history of prenatal exposure to alcohol is best. Such information can be obtained from the mother during pregnancy or afterwards. If the mother is not available, information may be available in adoption records, birth records or other sources. When asking about alcohol use during pregnancy it's best to use non-judgmental language and demeanor. Asking about general use of alcohol in the household often is a good lead in to the conversation. Also, asking about the amount of alcohol used, when during pregnancy a woman drank and whether she engaged in any binge drinking may be helpful.</p>		
Instructions to Developer		
Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic		
Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e		
http://www.istockphoto.com/photo/woman-talking-to-doctor-gm535114867-57286802?st=018c636		

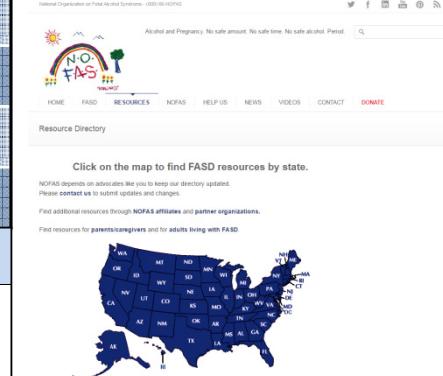
Module/Course Name	FASD Primer for Healthcare Professionals					
Unit # / Unit Name	4 / Identification, Referral, Treatment					
Screen Title	Diagnosis					
Screen #	29 / 62					
Video #	12 / 22					
On Screen Content						
<p>Fetal alcohol syndrome (FAS)</p> <p>Physical features</p> <ul style="list-style-type: none"> • Growth problems • Dysmorphic facial characteristics <ul style="list-style-type: none"> • Small eye openings • Thin upper lip • Smooth ridge under the nose <p>FAS is the only diagnosis that can be made without a confirmed history of exposure.</p>	<p>Growth issues can be in height, weight, or both.</p> <p>Occur before birth</p> <p>Infant is born small for his or her gestational age</p> <p>Grow at a very slow rate.</p> <p>Smaller or lighter than 90% of the children their age</p> <p>Qualify for a diagnosis of FAS</p>					
Audio Script						
<p>Fetal alcohol syndrome, or FAS, is the most widely known diagnosis associated with prenatal alcohol exposure. It also is the most involved with both physical and central nervous system abnormalities. Physical features include growth problems and dysmorphic facial characteristics indicative of prenatal brain damage. The cardinal features for an FAS diagnosis include small eye openings, a thin upper lip and very smooth ridge under the nose. Because these features are so highly associated with prenatal alcohol exposure, FAS is the only diagnosis that can be made without a confirmed history of exposure.</p> <p>Growth issues for individuals with FAS can be in height, weight, or both. For some, growth problems occur before birth and the infant is born small for his or her gestational age. Others have a normal birth weight and length but then grow at a very slow rate. Children who are smaller or lighter than 90% of the children their age are considered to have a growth impairment significant enough to qualify for a diagnosis of FAS.</p>						
Instructions to Developer						
<p>Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic</p> <p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>						

Module/Course Name	FASD Primer for Healthcare Professionals		Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment		
Screen Title	Diagnosis		
Screen #	30 / 62		
Video #	12 / 22		
On Screen Content			
Central nervous system abnormalities <ul style="list-style-type: none"> • Malformed brain structures • Neurological issues • Functional impairments Structural abnormalities <ul style="list-style-type: none"> • Abnormally small brain size • Brain structures that were malformed Neurological abnormalities <ul style="list-style-type: none"> • Seizures • Poor balance control • Sensory hearing loss 	<p>Functional impairments</p> <ul style="list-style-type: none"> • Learning or memory • Attention issues • Impulsivity • Poor social skills • Organization or planning <p>Partial fetal alcohol syndrome (pFAS)</p> <ul style="list-style-type: none"> • Some characteristics of FAS • At least one dysmorphic facial feature 		
<p>The graphic features a large blue umbrella with the letters 'FASD' in white inside the canopy. Below the umbrella, four numbered circles point to specific outcomes: 1. FAS (Functional Impairments), 2. Partial FAS (Partial fetal alcohol syndrome), 3. Alcohol-related birth defects, and 4. Alcohol-related neurodevelopment disorders (RND). A clipboard with a blank sheet of paper is positioned in front of the umbrella.</p> <p>A photograph of a baby with visible facial dysmorphisms, likely FASD.</p>			
Audio Script			
<p>Central nervous system abnormalities that can indicate a FAS diagnosis may be malformed brain structures, neurological issues or functional impairments. Structural abnormalities may include an abnormally small brain size or specific brain structures that were malformed during gestation. Neurological abnormalities might be seizures, poor balance control, or sensory hearing loss. Most individuals with FAS will demonstrate functional central nervous system abnormalities.</p> <p>Functional impairments could be in learning or memory, attentional issues including attention deficit disorder, impulsivity, poor social skills especially with non-literal aspects of communicating, and extreme problems with organization or planning. Because the strengths and weakness of any particular person with FAS are determined by many factors such as amount of alcohol they were exposed to and when, there is wide variation in the central nervous system abnormalities across people with FAS.</p> <p>For individuals who have some of the characteristics of FAS but not all, a diagnosis of partial fetal alcohol syndrome, or pFAS, is given. However, at least one dysmorphic facial feature must be present.</p>			
Instructions to Developer			
<p>Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic</p> <p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>			

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Diagnosis	
Screen #	31 / 62	
Video #	12 / 22	
On Screen Content		
Alcohol-Related Neurodevelopmental Disorder (ARND)		
<ul style="list-style-type: none"> • No abnormal physical features • Central nervous system abnormalities • Prenatal exposure alcohol is confirmed • May apply to a wide range of people 		 <p>The graphic features a blue umbrella with the letters 'FASD' in white at the top. Below the umbrella, four categories are represented by circles: 1. FAS (top left), 2. Partial FAS (top right), 3. Alcohol-related birth defects (ARBD) (bottom left), and 4. Alcohol-related neurodevelopment disorders (ARND) (bottom right).</p>
Neurobehavioral Disorder Associated with Prenatal Alcohol Exposure (ND-PAE)		
<ul style="list-style-type: none"> • Impaired neurocognitive functioning • Impaired self-regulatory abilities • Impaired life skills 		
Audio Script		
<p>When there are no abnormal physical features, but central nervous system abnormalities are demonstrated and prenatal exposure alcohol is confirmed, a diagnosis of Alcohol-Related Neurodevelopmental Disorder, or ARND, may be given. ARND is a fairly non-specific diagnosis that may apply to a wide range of people with confirmed prenatal exposure to alcohol and functional problems of the central nervous system.</p>		
<p>In 2013, the American Psychiatric Association introduced the diagnosis of Neurobehavioral Disorder Associated with Prenatal Alcohol Exposure (or ND-PAE) to more clearly capture the mental health concerns of persons with prenatal alcohol exposure. This diagnosis is given when an individual demonstrate problems in three behavioral areas:</p>		
<ol style="list-style-type: none"> 1. Impaired neurocognitive functioning, 2. Impaired self-regulatory abilities, and 3. Impaired life skills known as adaptive functioning. 		
Instructions to Developer		
<p>Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic</p>		
<p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals																																																															
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On Screen Content																																																																	
<p>ND-PAE can be diagnosis by itself or in addition to other FASDs with physical features such as FAS.</p> <p>Alcohol-Related Birth Defects (ARBD)</p> <ul style="list-style-type: none"> Major organ structural malformations resulting from prenatal alcohol exposure Rarely used diagnosis May be used in addition to any of the other FASD diagnoses <p>Physical features - exposure very early in pregnancy</p> <p>Specific central nervous system impairments - depending on amount and timing</p>		<p>FETAL DEVELOPMENT CHART</p> <p>This chart shows vulnerability of the fetus (indicates the highest 30 weeks of pregnancy) - & highest occurrence rate of birth defects.</p> <table border="1"> <thead> <tr> <th>PERIOD OF GROWTH</th> <th>PERIOD OF THE EMBRYO</th> <th>PERIOD OF THE FETUS</th> </tr> </thead> <tbody> <tr> <td>Week 1</td> <td>Week 1</td> <td>Week 1</td> </tr> <tr> <td>Week 2</td> <td>Week 2</td> <td>Week 2</td> </tr> <tr> <td>Week 3</td> <td>Week 3</td> <td>Week 3</td> </tr> <tr> <td>Week 4</td> <td>Week 4</td> <td>Week 4</td> </tr> <tr> <td>Week 5</td> <td>Week 5</td> <td>Week 5</td> </tr> <tr> <td>Week 6</td> <td>Week 6</td> <td>Week 6</td> </tr> <tr> <td>Week 7</td> <td>Week 7</td> <td>Week 7</td> </tr> <tr> <td>Week 8</td> <td>Week 8</td> <td>Week 8</td> </tr> <tr> <td>Week 9</td> <td>Week 9</td> <td>Week 9</td> </tr> <tr> <td>Week 10</td> <td>Week 10</td> <td>Week 10</td> </tr> <tr> <td>Week 11</td> <td>Week 11</td> <td>Week 11</td> </tr> <tr> <td>Week 12</td> <td>Week 12</td> <td>Week 12</td> </tr> <tr> <td>Week 13</td> <td>Week 13</td> <td>Week 13</td> </tr> <tr> <td>Week 14</td> <td>Week 14</td> <td>Week 14</td> </tr> <tr> <td>Week 15</td> <td>Week 15</td> <td>Week 15</td> </tr> <tr> <td>Week 16</td> <td>Week 16</td> <td>Week 16</td> </tr> <tr> <td>Week 17</td> <td>Week 17</td> <td>Week 17</td> </tr> <tr> <td>Week 18</td> <td>Week 18</td> <td>Week 18</td> </tr> <tr> <td>Week 19</td> <td>Week 19</td> <td>Week 19</td> </tr> <tr> <td>Week 20</td> <td>Week 20</td> <td>Week 20</td> </tr> </tbody> </table> <p>Critical Hematosystem (CNS)-Brain and Spinal Cord</p> <p>Period 1 (Weeks 1-4)</p> <p>Period 2 (Weeks 5-8)</p> <p>Period 3 (Weeks 9-12)</p> <p>Period 4 (Weeks 13-16)</p> <p>Period 5 (Weeks 17-20)</p> <p>Period 6 (Weeks 21-24)</p> <p>Period 7 (Weeks 25-28)</p> <p>Period 8 (Weeks 29-32)</p> <p>Period 9 (Weeks 33-36)</p> <p>Period 10 (Weeks 37-40)</p>	PERIOD OF GROWTH	PERIOD OF THE EMBRYO	PERIOD OF THE FETUS	Week 1	Week 1	Week 1	Week 2	Week 2	Week 2	Week 3	Week 3	Week 3	Week 4	Week 4	Week 4	Week 5	Week 5	Week 5	Week 6	Week 6	Week 6	Week 7	Week 7	Week 7	Week 8	Week 8	Week 8	Week 9	Week 9	Week 9	Week 10	Week 10	Week 10	Week 11	Week 11	Week 11	Week 12	Week 12	Week 12	Week 13	Week 13	Week 13	Week 14	Week 14	Week 14	Week 15	Week 15	Week 15	Week 16	Week 16	Week 16	Week 17	Week 17	Week 17	Week 18	Week 18	Week 18	Week 19	Week 19	Week 19	Week 20	Week 20	Week 20
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<p>ND-PAE can be diagnosis by itself or in addition to other FASDs with physical features such as FAS. A fuller description of ND-PAE criteria for each of these areas is provided in the American Psychiatric Association's <i>DSM-5</i>.</p> <p>For individuals with major organ structural malformations resulting from prenatal alcohol exposure, such as the kidney or heart, a diagnosis of Alcohol-Related Birth Defects, or ARBD, is used. This is a rarely used diagnosis and may be used in addition to any of the other FASD diagnoses.</p> <p>Across the categorical diagnoses included under the FASD umbrella one can see a very diverse spectrum of presentation. The particular combination of abnormalities and impairments a person exhibits results from a complex interaction of exposure amount and most importantly timing of that exposure. Physical features are more closely associated with exposure very early in pregnancy. Because the brain develops throughout pregnancy, specific central nervous system impairments will vary depending on amount and timing. All of these factors interplay to determine a particular individual's most appropriate diagnosis or diagnoses.</p>																																																																	
Instructions to Developer																																																																	
<p>Update FASD Umbrella graphic to match style of course (CHOICES graphic is shown) - Add #5: Neurobehavioral disorder associated with prenatal alcohol exposure (ND-PAE) to the Umbrella graphic</p> <p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>																																																																	
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Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Diagnosis	
Screen #	33 / 60	
Video #	12 / 22	
On Screen Content		
Characteristics that uniquely define an FASD		
Not all diagnoses are equally likely to occur.		
Based on physical features "Hidden disorders"		
Early and appropriate diagnosis of FASDs is important for children, youth, and adults to reach their full potential.		
		<p>FAS Fetal Alcohol Syndrome</p> <p>PFAS Partial Fetal Alcohol Syndrome</p> <p>ARND Alcohol Related Neuro-Developmental Disorder</p> <p>ARBD Alcohol related Birth Defects</p>
Audio Script		
<p>Because of this variation and the fact that all of the physical and central nervous system criteria overlap with other genetic and behavioral diagnoses, it is important to consider these alternatives and pay attention to the complete collection of characteristics that uniquely define an FASD.</p> <p>Not all diagnoses are equally likely to occur. Of the FASDs, FAS and pFAS are a subset that can be more easily diagnosed based on physical features. Much like an iceberg, these can be seen above the water line. Other problems and behaviors associated with FASDs are often "under the surface" but become more recognizable with age and time. ARND and ND-PAE have no physical features and are often referred to as "hidden disorders." Persons with these diagnoses often have good language skills and early learning capabilities, but then encounter problems with the high-order learning and social skills that typically emerge during the school-aged years. Diagnostic criteria for all FASDs are an evolving and rapidly changing field. However, early and appropriate diagnosis of FASDs is important for children, youth, and adults to reach their full potential.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/stethoscope-gm512336530-87115713</p> <p>Re-do/animate FASD Iceberg image</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Referral & Treatment	
Screen #	34 / 62	
Video #	13 / 22	
On Screen Content		
<p>Referral & Treatment</p> <p>Multidisciplinary clinic</p> <p>NOFAS</p> <p>Interdisciplinary team</p> <ul style="list-style-type: none"> Pediatric care providers Psychologists Social workers Speech-language pathologists Occupational therapists Education specialists 		
<p>Audio Script</p> <p>Anyone suspected of having an FASD should be referred to a multidisciplinary clinic, preferably one with a history of assessing for these diagnoses. The National Organization on Fetal Alcohol Syndrome (or NOFAS) has a Resource Directory available on its website for diagnostic services help in identifying a clinic. If such a clinic is not available, working with a primary care pediatrician to coordinate individual assessments is an option.</p> <p>FASD clinics provide their patients with comprehensive physical, neurological, and developmental or psychological evaluations. Such clinics are staffed by an interdisciplinary team made up of pediatric care providers, psychologists, social workers, speech-language pathologists, occupational therapists, and education specialists.</p>		
<p>Instructions to Developer</p> <p>NOFAS site – http://www.nofas.org/resource-directory/</p> <p>http://www.istockphoto.com/photo/portrait-of-medical-team-gm155598481-20521677?st=b7fec89</p> <p>Animate spokes of doctor icons coming into hospital icon - http://www.istockphoto.com/vector/medical-long-shadow-icons-gm521936841-50624184?st=88e4151</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Referral & Treatment	
Screen #	35 / 62	
Video #	13 / 22	
On Screen Content		
Diagnosis of an FASD can be considered an intervention.		<div style="border: 1px solid black; padding: 10px; text-align: center;"> Custom graphics for lists </div> <div style="text-align: center;">  </div>
Role of the pediatric medical home provider	<ul style="list-style-type: none"> • Care coordination • Monitoring developmental and medical changes • Providing resources 	
Audio Script		
Diagnosis of an FASD can be considered an intervention itself as it can point individuals in the right direction for the supports and services they need. Receiving an appropriate diagnosis is often a relief to a family since it explains the brain damage basis for many concerning behaviors and issues.		
Once the diagnosis is made, the role of the pediatric medical home provider becomes:	<ul style="list-style-type: none"> • Care coordination (such as referral to subspecialists and developmental/educational services as needed), • Monitoring developmental and medical changes that need to be addressed, and • Providing resources to the family. 	
Instructions to Developer		
Show clipboard from before (to demonstrate diagnosis)		
Diagnosis - http://www.istockphoto.com/photo/stethoscope-gm512336530-87115713		
Medical home - http://www.istockphoto.com/vector/medical-long-shadow-icons-gm521936841-50624184?st=88e4151		
		http://www.istockphoto.com/photo/female-doctor-gives-good-tricks-for-staying-healthy-gm493086690-76722451

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Referral & Treatment	
Screen #	36 / 62	
Video #	13 / 22	
On Screen Content		
<p>School-based services Individuals with Disabilities Education Act (DEA) Other Health Impaired</p> <p>Other services Support groups Evidence-based interventions Improve outcomes and prevent secondary disabilities</p>		
Audio Script		
<p>Children with an FASD are not explicitly designated to receive special education services in the Individuals with Disabilities Education Act (also known as IDEA). However, affected children may receive services through the “Other Health Impaired” category. Prenatal alcohol exposure is not specifically listed in this category, but does qualify a child as “at risk” and eligible for early intervention services (found in Part C). Developmental and behavior difficulties in young children with FASDs qualify for special education services (included in Part C and Part B). Since children spend the majority of their time in school, receiving eligible services is important for the management and quality of their lives.</p> <p>Other services that are available include support groups for affected individuals and their families. In addition, there are several interventions that have been found to be effective for children with FASDs. They provide evidence that targeted interventions improve outcomes and can prevent secondary disabilities.</p>		
Instructions to Developer		
<p>IDEA website - http://idea.ed.gov/ Highlight Part B and Part C as mentioned</p> <p>Support Group - http://www.istockphoto.com/photo/mother-and-daughter-talking-with-counselor-during-family-counseling-session-gm469869149-34813364?st=4459682</p> <p>Intervention - http://www.istockphoto.com/photo/he-takes-an-active-role-in-his-son-s-education-gm491726214-75904109</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Interdisciplinary Team Approach	
Screen #	37 / 62	
Video #	14 / 22	
On Screen Content		
Interdisciplinary Team Approach		
Primary care medical home		
<ul style="list-style-type: none"> Ask questions about prenatal alcohol exposure Be knowledgeable about FASDs Suspect and screen for FASDs Assess for physical and neurobehavioral features Document findings in record Refer patients for diagnostic assessment, comprehensive neurodevelopmental, and behavioral assessment 		 
Audio Script		
The primary care medical home plays an important role in the initial identification of a suspected FASD.		
Providers should do the following:		
<ul style="list-style-type: none"> Ask questions about prenatal alcohol exposure for all patients, ideally at the first visit or during well child checks, and especially when there are concerns about a child's behavior and/or development. Suggested questions are included in the most recent version of the American Association of Pediatrics' <i>Bright Futures</i>. Be knowledgeable about FASDs in order to guide prevention, early diagnosis and intervention, Suspect and screen for FASDs, Assess individuals with a possible FASD for the physical and neurobehavioral features, Document findings in a record (this may be a cumulative process), and Refer patients for diagnostic assessment if needed, and for comprehensive neurodevelopmental and behavioral assessment. 		
Instructions to Developer		
<p>Medical Home - http://www.istockphoto.com/vector/medical-long-shadow-icons-gm521936841-50624184?st=88e4151 http://www.istockphoto.com/photo/worried-mature-couple-with-female-doctor-gm538930215-58672950</p>		
Animate list		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Interdisciplinary Team Approach	
Screen #	38 / 62	
Video #	14 / 22	
On Screen Content		
<p>Adolescent care</p> <ul style="list-style-type: none"> • Provide consistent patient and family education • Provide anticipatory guidance about alcohol use risks • Screen for alcohol use and addiction • Conduct interventions • Refer patients to treatment • Screen for sexual activity and use of effective contraception <p>FASD Team/Referrals</p>		 <div style="border: 1px solid black; padding: 10px; width: fit-content; margin: 20px auto; text-align: center;"> <p>Custom graphics for lists</p> </div>
Audio Script		
<p>For adolescent care:</p> <ul style="list-style-type: none"> • Provide consistent patient and family education, • Provide anticipatory guidance about alcohol use risks, • Screen for alcohol use and addiction, • Conduct interventions to address use and refer patients to treatment as needed, and • Screen for sexual activity and use of effective contraception, and refer as needed for contraceptive services. <p>The following are common examples of specialty professionals who might serve on an FASD team or may be appropriate referrals in the diagnostic or treatment planning phases.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/doctor-explaining-something-to-a-latin-child-gm157507258-10965856</p> <p>Animate list</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Interdisciplinary Team Approach	
Screen #	39 / 62	
Video #	14 / 22	
On Screen Content		
<p>Initial and Ongoing Care Pediatric medical home / Primary care pediatrician</p> <ul style="list-style-type: none"> • Lead the medical home for children with FASDs • Provide feedback about the evaluation and ensure appropriate referrals • Review all physical, social, and environmental aspects • Provide ongoing medication monitoring 		
Audio Script		
<p>Initial and Ongoing Care <i>Pediatric medical home / Primary care pediatrician</i></p> <p>These clinicians often lead the medical home for children with FASDs by integrating their history and physical and neurologic examinations with the clinical reports from other disciplines. They provide feedback to the family about the evaluation and ensure appropriate referrals to medical, educational, and developmental specialists. Frequently, these clinicians are the only ones who review all of the child's physical, social, and environmental aspects. These clinicians may also provide ongoing medication monitoring.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/african-american-female-doctor-holding-files-gm468098378-61514944?st=f0936df</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Interdisciplinary Team Approach	
Screen #	40 / 62	
Video #	14 / 22	
On Screen Content		
Basic Diagnostic Specialist	Psychologist / Neuropsychologist / Developmental Pediatrician	
Geneticist / Developmental Pediatrician	<ul style="list-style-type: none"> • Trained in assessing dysmorphia • Completes a physical examination <ul style="list-style-type: none"> - Differential dysmorphic etiologies - Comorbid conditions 	<ul style="list-style-type: none"> • Trained in behavioral assessment • Conducts neurocognitive /psychological evaluation <ul style="list-style-type: none"> - cognition - executive function - socio-emotional function - adaptive skills - academic achievement - self-regulation • Diagnose / provide treatment for affective disorders
Audio Script		
<p>Basic Diagnostic Specialist</p> <p><i>Geneticist or Developmental Pediatrician</i></p> <p>These specialists are trained in assessing dysmorphia, and can complete a physical examination, with particular emphasis on differential dysmorphic etiologies as well as possible comorbid conditions. This examination may be conducted by telemedicine with appropriately equipped clinics.</p>		
<p><i>Psychologist, Neuropsychologist, or Developmental Pediatrician</i></p> <p>Trained in behavioral assessment, these health care professionals conduct neurocognitive/psychological evaluations that may involve the evaluation of cognition, executive function, socio-emotional function, adaptive skills, academic achievement, and self-regulation within the context of the child's family and community. Psychologists may also diagnose and provide treatment for affective disorders secondary to an FASD diagnosis, including depression and/or anxiety disorders.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/male-indian-gp-doctor-wearing-shirt-and-tie-gm178144933-25018475?st=784a845</p> <p>http://www.istockphoto.com/photo/happy-female-doctor-in-hospital-gm503532118-82578263?st=5987f21</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Interdisciplinary Team Approach	
Screen #	41 / 62	
Video #	14 / 22	
On Screen Content		
<p>Desirable</p> <ul style="list-style-type: none"> • Psychiatrist • Neurologist • Social Worker • Early intervention services • Educational specialist and/or school function evaluator • Family therapist • Occupational therapist • Speech-language pathologist • Child protective services (CPS) 		
Audio Script		
<p>Other health care providers that are desirable if available include:</p> <ul style="list-style-type: none"> • Psychiatrist, • Neurologist, • Social worker, • Early intervention services, • Educational specialist and/or school function evaluator, • Family therapist, • Occupational therapist, • Speech-language pathologist, and • Child protective services. 		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/portrait-of-hospital-medical-team-gm502605229-44022368?st=b581f2b</p>		

Module/Course Name	FASD 101	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Taylor's Story	
Screen #	42 / 62	
Video #	15 / 22	
On Screen Content	<p>Taylor's Story</p> <p>misdiagnosed</p> <p>Disconnected</p> <p>Frustrated</p> <p>Gap between action, reaction, and consequences</p> <p>Taylor was finally diagnosed with an FASD</p> <p>National Organization on Fetal Alcohol Syndrome</p> <p>Kennedy Krieger Institute</p>	 
Audio Script	<p>Taylor is a young man with an FASD. As a child, he struggled and was misdiagnosed with attention-deficit/hyperactivity disorder. He lied, took things in school that did not belong to him, and recalls being disconnected and very frustrated. In the 8th grade, Taylor took a pocketknife to school and was suspended. Since it was a weapon, he had to go through the First Offender's Program and seek counseling. The counselor noticed a gap between action, reaction, and consequences, and had Taylor tested. Taylor was finally diagnosed with an FASD.</p> <p>When Taylor was born, his birth mother had disclosed to the doctor that she was dealing with alcohol dependence and drank alcohol while pregnant with Taylor. This information from Taylor's parents was helpful to finally diagnose him with an FASD. After Taylor's diagnosis, the family connected with the National Organization on Fetal Alcohol Syndrome and the Kennedy Krieger Institute to get help.</p>	
Instructions to Developer	<p>Need to show series of stock photos to "illustrate" story, along with on-screen text - maybe make photos B&W</p> <p>http://www.istockphoto.com/photo/angry-boy-gm509860804-86005447</p> <p>http://www.istockphoto.com/photo/high-school-corridor-with-lockers-gm522471195-51305160?st=4e5d523</p> <p>http://www.istockphoto.com/photo/teenager-counseling-gm183862739-16013930?st=9c67c06</p> <p>http://www.istockphoto.com/photo/red-wine-gm492626778-76411061</p>	

Module/Course Name	FASD 101	Proposed Graphics/Visuals
Unit # / Unit Name	4 / Identification, Referral, Treatment	
Screen Title	Taylor's Story	
Screen #	43 / 62	
Video #	15 / 22	
On Screen Content		
<p>Difficulty maintaining attention; Inability to plan and manage time poor problem solving skills,; inability to learn from consequences social awkwardness, anxiety, depression</p> <p>“...NOFAS has empowered me. Several times a year they give me the podium to speak and tell my story. Getting up in front of a crowd to speak about FASD takes away the control that this disability had over me. I didn't know why I did a lot of things I used to do. But with this, I do know why I am doing it.”</p> <p>“I want to thank NOFAS for letting us be a small part of everything they do. We are going to keep talking, keep listening, and keep educating until everyone in the world knows that you cannot drink during pregnancy.”</p> <p>Story from: National Organization on Fetal Alcohol Syndrome (NOFAS) & National Center on Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention</p>		 
Audio Script		
<p>Some of the behaviors Taylor has struggled with include difficulty maintaining attention, inability to plan and manage time, poor problem solving skills, inability to learn from consequences, social awkwardness, anxiety, and depression. After a great deal of struggle and perseverance from Taylor and his family, Taylor earned his associate's degree in electronics from a trade school. Taylor is currently employed and he hopes to further his education and he is working toward living independently. Taylor and his parents have been honored by NOFAS for their work with the FASD community.</p> <p>“...NOFAS has empowered me. Several times a year they give me the podium to speak and tell my story. Getting up in front of a crowd to speak about FASD takes away the control that this disability had over me. I didn't know why I did a lot of things I used to do. But with this, I do know why I am doing it.”</p> <p>“I want to thank NOFAS for letting us be a small part of everything they do. We are going to keep talking, keep listening, and keep educating until everyone in the world knows that you cannot drink during pregnancy.”</p>		
Instructions to Developer		
<p>Need to show series of stock photos to “illustrate” story, along with on-screen text - maybe make photos B&W</p> <p>http://www.istockphoto.com/photo/sad-young-man-gm488977053-37522424?st=8ba5d2d</p> <p>http://www.istockphoto.com/photo/portrait-young-handsome-man-urban-background-looking-away-gm537701468-95458139?st=e899fa3</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	 
Screen Title	What is Stigma?	
Screen #	44 / 62	
Video #	16 / 22	
On Screen Content		
What is Stigma?		
<p>The discrediting, devaluing or excluding of a person or group of people based on a real or perceived difference.</p>		
<p>Stigma, stereotyping, and bias</p>		
<p>Harms the individual and creates barriers that hinder FASD prevention and care.</p>		
<p>Patterns of behaving, thinking, and feeling about human differences</p>		
<p>Labelling, social exclusion, prejudice, differential treatment and discrimination</p>		
Audio Script		
<p>Stigma is a powerful, complex social and cognitive process that leads to the discrediting, devaluing or excluding of a person or group of people based on a real or perceived difference. Stigma, stereotyping, and bias related to alcohol use by women who are pregnant and those affected by FASDs, harms the individual and creates barriers that hinder FASD prevention and care.</p>		
<p>Stigma arises from patterns of behaving, thinking, and feeling about human differences; be it physical appearance, cultural or social identity, health condition, disability, age, or gender. These differences become negatively shaped by harmful cultural or personal beliefs, attitudes and stereotypes. Stigma is enacted through labeling, social exclusion, prejudice, differential treatment and discrimination against the stigmatized individual or group.</p>		
Instructions to Developer		
http://www.istockphoto.com/vector/soulico-icons-vineyard-and-wine-gm477334472-66931969?st=97c9860		
http://www.istockphoto.com/vector/soulico-icons-charity-and-relief-work-gm513140057-47699540?st=eb11817		
http://www.istockphoto.com/photo/crowed-of-diversity-people-friendship-happiness-concept-gm475733404-65515853?st=8306196		
http://www.istockphoto.com/photo/blurred-patient-waiting-for-see-doctor-abstract-background-gm473683074-64151689		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What is Stigma?	
Screen #	45 / 62	
Video #	16 / 22	
On Screen Content		
<p>Alcohol use disorders and substance use disorders are among the most stigmatized of medical conditions.</p> <p>Alcohol use by women and alcohol use disorders in women are viewed more unfavorably than alcohol use by men.</p> <p>Alcohol dependence, mixed health messages, and disruptive social conditions</p>		
Audio Script		
<p>The impact of stigma in health care is well documented and shown to be far reaching, contributing to health disparities through its negative effect on individual health status and as a barrier to access and delivery of quality health care services. Stigma is often associated with health conditions. Alcohol use disorders and substance use disorders are among the most stigmatized of medical conditions.</p> <p>In regards to drinking, alcohol use by women, and alcohol use disorders in women are often viewed more unfavorably than that of men. Many societies hold negative attitudes or public stigma towards women who drink alcohol, especially women that engage in heavy drinking. Stigma associated with drinking during pregnancy is common, yet the reasons that women may drink while pregnant – including alcohol dependence, mixed health messages, and disruptive social conditions – are not widely recognized or understood. Understanding these reasons can help combat stigma and stereotyping.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/young-people-drinking-beer-gm157502121-10548173</p>		
<p>http://www.istockphoto.com/photo/bottles-and-glasses-of-assorted-alcoholic-beverages-gm475586312-65422207?st=9d72225</p>		
<p>http://www.istockphoto.com/photo/doctor-listening-to-his-patient-talking-about-her-illness-gm497635413-41887620?st=e1c17e5</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What is Stigma?	
Screen #	46 / 62	
Video #	16 / 22	
On Screen Content		
2012 NOFAS survey of Circle of Hope birth mothers		
<ul style="list-style-type: none"> • Misinformation: "I thought using alcohol was safe. My doctor never told me I should not be drinking." • Unaware: "I didn't know I was pregnant. I stopped as soon as I found out." • Addiction: "I am an alcoholic. I couldn't stop, and was ashamed to look for treatment." • Fear or Shame: "I was afraid to look for help. I was afraid I would be arrested and I would lose my children." <p>self-stigma, embarrassment, and perception of being devalued or judged</p>		
Audio Script		
According to a 2012 NOFAS survey of Circle of Hope birth mothers, some of the reasons women drank while pregnant include:		
<ul style="list-style-type: none"> • Misinformation: "I thought using alcohol was safe. My doctor never told me I should not be drinking." • Unaware: "I didn't know I was pregnant. I stopped as soon as I found out." • Addiction: "I am an alcoholic. I couldn't stop, and was ashamed to look for treatment." • Fear or Shame: "I was afraid to look for help. I was afraid I would be arrested and I would lose my children." 		
For women who are struggling with their alcohol use or have an alcohol use disorder, the self-stigma, embarrassment, and perception of being devalued or judged by their family, colleagues, or health care professionals can serve as a barrier to accessing treatment and to achieving and sustaining recovery. The fear of judgment or perception of being devalued is one of the reasons that women may not disclose to healthcare professionals or others that they drank, or are drinking, during their pregnancy.		
Instructions to Developer		
http://www.istockphoto.com/photo/woman-drinking-white-wine-silhouette-gm96758916-10824223?st=00fa6aa		
http://www.istockphoto.com/photo/dedicated-to-the-health-of-his-patients-gm489527140-74716293		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & FASD	
Screen #	47 / 62	
Video #	17 / 22	
On Screen Content	<p>Stigma & FASD</p> <p>Stigma affects several groups of people who are touched by FASDs.</p> <p>Women Who Drink / Birth Mothers</p> <ul style="list-style-type: none"> • Cycle of fear, blame, and shame <p>Far-reaching impact on FASD prevention, diagnosis, and treatment</p>	
Audio Script	<p>Stigma affects several groups of people who are touched by FASDs, including women who drink, birth mothers of children with FASDs, and children and adults with an FASD. Even adoptive and foster parents of children with an FASD face stigma.</p> <p>Women Who Drink / Birth Mothers</p> <p>Negative public attitudes and social beliefs towards women who drank during a pregnancy that resulted in a child with an FASD fosters a cycle of fear, blame, and shame that has far-reaching impact on FASD prevention, diagnosis, and treatment across the lifespan.</p>	
Instructions to Developer	<p>http://www.istockphoto.com/photo/female-hand-pouring-wine-into-glass-gm529383991-54026102?st=0e38158</p> <p>http://www.istockphoto.com/photo/frustrated-mother-suffering-from-post-natal-depression-gm520537543-49517688?st=c9ad20f</p>	

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & FASD	
Screen #	48 / 62	
Video #	17 / 22	
On Screen Content		
<ul style="list-style-type: none"> • Fear of judgment or perception of being devalued • Feel tremendous guilt, shame, and embarrassment • Delay or avoid seeking help or accessing appropriate services <p>“Alcoholics” or “Addicts”</p> <ul style="list-style-type: none"> • Damaged relationships • Loss of social support • Depression • Increased alcohol consumption • Other negative outcomes 		
Audio Script	<p>Birth mothers of children with FASDs face an overwhelming stigma, even within the FASD community. Women who used alcohol, and possibly other drugs, while pregnant often feel tremendous guilt, shame, and embarrassment from knowing that prenatal alcohol exposure caused lifelong problems to their own children. This may lead them to delay or avoid seeking help or accessing appropriate services for themselves, their children or families.</p> <p>Further, women who are labeled as “alcoholics” or “addicts” may become secretive about their use to avoid uncomfortable social interactions. This can lead to damaged relationships, loss of social support, depression, increased alcohol consumption, and other negative outcomes that cause further harm. Some people mistakenly believe that women purposely tried to harm their child by drinking or using other substances during pregnancy.</p>	
Instructions to Developer	<p>http://www.istockphoto.com/photo/woman-in-depressed-mood-sits-on-the-window-gm476137504-65767469?st=cb95af0</p>	

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & FASD	
Screen #	49 / 62	
Video #	17 / 22	
On Screen Content		
<p>Children and Adults with an FASD</p> <ul style="list-style-type: none"> • Labeling • Low expectations • Unrealistic or unfounded assumptions • “Children with an FASD can’t learn.” <p>FASD impacts behavior.</p> <p>“Stupid”, “weird” or “bad”</p> <ul style="list-style-type: none"> • Impairments to learning and cognitive abilities, social skills, judgment, planning <p>“Different”</p> <ul style="list-style-type: none"> • Protect their parent from blame and shame. 		
Audio Script		
<p>Children & Adults with an FASD</p> <p>Products of stigma such as labeling, low expectations, and unrealistic or unfounded assumptions, affect individuals with an FASD across their lifespan. Some communities and schools will write off students with an FASD, believing that “children with an FASD can’t learn.”</p> <p>Children with any disability often struggle with feeling stigmatized, and this is especially true for children with an FASD. Much of the stigma is the result of the way FASD impacts behavior. These children often feel and may be labeled as “stupid”, “weird” or willfully “bad” because of how their FASD impairments manifest for their learning, cognitive abilities, social skills, judgment, and planning abilities. Just being seen as “different” can be terribly stigmatizing for any child.</p> <p>Children can also struggle with the stigma placed on their birth mother. Children with an FASD, especially those that know or live with their birth families, deal with issues of trying to protect their parent from blame and shame.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/troubled-teenager-gm520785835-50028274?st=9c61787</p> <p>http://www.istockphoto.com/photo/sad-schoolboy-gm104314555-7790448?st=e7831e0</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & FASD	
Screen #	50 / 62	
Video #	17 / 22	
On Screen Content		
<p>Adults with an FASD</p> <ul style="list-style-type: none"> • Expected to behave appropriately • Face harsh penalties when they fail to do so • Face criminal charges while still having the emotional and cognitive development of a child <p>Adults with an FASD are overrepresented in the criminal justice system.</p>		
Audio Script		
<p>Adults with an FASD deal with the same sort of stigma that children do, but with the added challenges of higher expectations of them coupled with very limited adult support services.</p>		
<p>Adults often face harsh penalties when they fail to behave as expected. Most people assume that an adult who is behaving inappropriately is being rude, difficult, or selfish and don't consider that they may have organic brain damage that impairs certain behavioral abilities.</p>		
<p>People with an FASD may face serious criminal charges while still having the emotional and cognitive development of a child. As a result, adults with an FASD are overrepresented in the criminal justice system.</p>		
Instructions to Developer		
http://www.istockphoto.com/photo/serious-woman-real-people-gm532667339-56139548		
http://www.istockphoto.com/photo/police-car-gm171557397-21653295?st=240aa85		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & Healthcare Services	
Screen #	51 / 62	
Video #	18 / 22	
On Screen Content		
<p>Stigma & Healthcare Services</p> <p>Attitudes and beliefs of health care professionals</p> <p>Approach, communicate, and interact</p> <p>May prevent physicians from asking women about their alcohol use.</p> <p>Appear “judgmental”</p> <p>Woman is “bad”</p> <p>“Self-stigma”</p> <p>Hinder accurate self-disclosure about alcohol use</p>		
Audio Script		
<p>While stigma can significantly inhibit individual help-seeking behaviors, the attitudes and beliefs of health care professionals similarly can influence the ways in which professionals approach, communicate, and interact with women who use alcohol as well as individuals and families affected by FASD. NOFAS has stated that assumptions and unconscious bias about who may or may not be at risk of having an alcohol-exposed pregnancy or general discomfort on the topic of drinking and the social norms surrounding drinking may prevent physicians from asking women about their alcohol use.</p>		
<p>Healthcare professionals may hesitate to ask women about their alcohol consumption because they do not want to be perceived as “judgmental” or imply that the woman is “bad.” At the same time, women who do struggle with alcohol may experience forms of “self-stigma” such as shame and low self-esteem. These can hinder accurate self-disclosure about alcohol use, particularly during initial screenings.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/nurse-showing-patient-test-results-on-digital-tablet-gm502219067-43889214</p>		
<p>http://www.istockphoto.com/photo/woman-alone-and-depressed-gm500230894-80659815?st=9fd6662</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & Healthcare Services	
Screen #	52 / 62	
Video #	18 / 22	
On Screen Content		
<ul style="list-style-type: none"> Health care professionals do not have the knowledge, skills, or self-confidence Negative attitudes held by physicians, nurses, and other health professionals towards substance-using patients can threaten their “therapeutic commitment” Hesitant to discuss, diagnose or make a referral due to discomfort with or fear of FASD labeling or thinking a diagnosis does not help the child. <p>“Some doctors have reported that they won’t diagnose a child with an FASD, even when they believe that it is an accurate diagnosis. They say that it is less complicated to diagnose the symptoms of FASD, such as ADHD or bi-polar disorder. They don’t want to stigmatize the birth mother, her family, or her child.”</p>		
Audio Script		
<p>Further, health care professionals may feel that they or their staff do not have the knowledge, skills or self-confidence to work with individuals who are identified as having a substance use issue. Several research studies over the last decade have found that negative attitudes held by physicians, nurses, and other health professionals towards substance-using patients can threaten their “therapeutic commitment” as well as their motivation and satisfaction in working with these patients. For children who might be candidates for evaluation or services, healthcare professionals may be hesitant to discuss, diagnose or make a referral due to discomfort with or fear of FASD labeling or thinking a diagnosis does not help the child.</p> <p>One NOFAS position statements reads “Some doctors have reported that they won’t diagnose a child with an FASD, even when they believe that it is an accurate diagnosis. They say that it is less complicated to diagnose the symptoms of FASD, such as ADHD, or self-regulation problems such as bi-polar disorder. They don’t want to stigmatize the birth mother, her family, or her child.”</p>		
Instructions to Developer		
http://www.istockphoto.com/photo/discussing-possible-tretments-gm476613158-66702775?st=6b4f437 http://www.istockphoto.com/photo/doctor-talking-with-little-patient-gm171318294-21580977?st=13fa8ec		
show quote alone on screen		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What Healthcare Professionals Can Do	
Screen #	53 / 62	
Video #	19 / 22	
On Screen Content		
What Healthcare Professionals Can Do		
Risk of an alcohol-exposed pregnancy is a concern for all women who consume alcohol and are or might be pregnant.		
Avoid assumptions and biases		
Healthcare professionals can:		
<ol style="list-style-type: none"> 1) Becoming educated and informed about alcohol use disorders 2) Being aware of the language used and practice appropriate language around alcohol consumption during pregnancy and risks of FASDs 		
<div style="border: 1px solid black; padding: 10px; display: inline-block;"> Custom graphic for list </div>		

Audio Script
<p>It is important for healthcare professionals to remember that the risk of an alcohol-exposed pregnancy is a concern for all women who consume alcohol and are, or might be, pregnant. Avoid assumptions and biases about who may or may not be a candidate for alcohol screening to prevent an FASD.</p>
<p>Healthcare professionals can lessen the negative impact of stigma, reduce barriers to help-seeking, and increase their comfort level with alcohol screening and brief intervention several ways.</p>
<p>First, by becoming educated and informed about alcohol use disorders. Healthcare professionals can practice how to effectively discuss alcohol use and abuse with patients. Also, by being aware of the language used and practice appropriate use of language around alcohol consumption during pregnancy and the risks of FASDs.</p>
Instructions to Developer
<p>http://www.istockphoto.com/photo/four-woman-with-different-derivation-gm495244044-77888953?st=68130e5</p> <p>http://www.istockphoto.com/photo/her-compassion-is-just-what-the-doctor-ordered-gm475780616-66177099?st=770413a</p>

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What Healthcare Professionals Can Do	
Screen #	54 / 62	
Video #	19 / 22	
On Screen Content		
Non-judgmental tone, with empathy and concern		
Support		
Asking every visit, or annually, and explaining that it is asked of every patient		
Screening and Brief Interventions – routinely incorporated into office visits		
Audio Script		
<p>Healthcare professionals can ask women about their alcohol use in a non-judgmental tone, with empathy and concern. Women need support to stop their alcohol or other substance use. Asking women about alcohol use at every visit, or at least annually, and explaining that it is asked of every patient can normalize discussions about alcohol for both the healthcare professional and their patients. Routine alcohol screening provides women who may not initially disclose their drinking habits with a safer environment to do so.</p>		
<p>Alcohol Screening and Brief Interventions can routinely be incorporated into office visits, when appropriate, as an effective way to address problem-drinking issues as they arise.</p>		
Instructions to Developer		
http://www.istockphoto.com/photo/female-doctor-treating-patient-suffering-with-depression-gm489563314-74729657		
http://www.istockphoto.com/photo/doctor-discussing-test-results-with-his-patient-gm490184042-75075541		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What Healthcare Professionals Can Do	
Screen #	55 / 62	
Video #	19 / 22	
On Screen Content		
Use language that is less blaming towards the mother		
<p>“The range of effects that occur when a developing baby is prenatally exposed to alcohol” vs. “FASD is what happens when a mother drinks alcohol while she’s pregnant.”</p> <p>“Prenatal alcohol exposure” vs. “mother’s alcohol use”</p> <p>Emphasize strengths and capacities, as opposed to disability</p>		<div data-bbox="1537 719 1945 861" style="border: 1px solid black; padding: 10px; text-align: center;"> Custom graphic for quotes </div>
Audio Script		
<p>Healthcare professionals can be sensitive to the use of language when discussing or writing about FASDs.</p> <p>Use language that is less blaming towards the mother. For example, defining FASD as “the range of effects that occur when a developing baby is prenatally exposed to alcohol” carries much less stigma than a definition like “FASD is what happens when a mother drinks alcohol while she’s pregnant.” The term “prenatal alcohol exposure” carries less stigma than a “mother’s alcohol use.” When talking about an individual who has an FASD, emphasize the person’s individual strengths and capacities, as opposed to their disability.</p>		
Instructions to Developer		
<p>http://www.istockphoto.com/photo/female-nurse-listening-to-patient-gm475880516-66190783</p>		
Animate quotes – showing one is greater than the other		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	What Healthcare Professionals Can Do	
Screen #	56 / 62	
Video #	19 / 22	
On Screen Content		
Personal stories		
Healthcare professionals can:		
3) Establish an effective referral process for appropriate services and support		
4) Having up-to-date, culturally sensitive and non-stigmatizing FASD prevention materials		
Audio Script		
Healthcare professionals can have several personal “stories” to share that relate to their patient population and helps to explain what happens when an ordinary young woman just like them drinks before she knew she was pregnant or during pregnancy.		
Healthcare professionals can establish an effective referral process for appropriate services and support for individuals and families that receive an FASD diagnosis. Also, having up-to-date, culturally sensitive FASD prevention materials like brochures and posters can be shared with patients. Make sure to critically review materials to ensure language and visuals do not perpetuate stigma.		
Instructions to Developer		
List continued from earlier in the video		
http://www.istockphoto.com/photo/doctor-talking-to-a-patient-gm187032309-27782605		
http://www.istockphoto.com/photo/doctor-giving-a-prescription-to-his-patient-gm484611386-71509197?st=3f2f2ec		
Materials are from CDC FASD site - http://www.cdc.gov/nccbdd/fasd/freematerials.html		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & the Interdisciplinary Team	
Screen #	57 / 62	
Video #	20 / 22	
On Screen Content		
Stigma & the Interdisciplinary Team		
Responsibility of ALL members of the healthcare team		
Preventing, diagnosing, and treating FASDs		
Prevention Doctors, nurses, social workers, behavioral health specialists, medical assistants along with other health professionals		
Diagnosis and Treatment Pediatricians, family practice physicians, ob/gyn , nurses, medical assistants, psychologists, schools, behavioral health specialists and social workers		
Audio Script		
Knowing how to talk effectively with women about their alcohol use to prevent alcohol-exposed pregnancy and the risks of FASDs, as well as understanding and managing the negative impact of FASD stigma, is a responsibility of ALL members of the healthcare team.		
As noted previously, preventing, diagnosing, and treating FASDs involves multiple healthcare disciplines and interdisciplinary engagement. Doctors, nurses, social workers, behavioral health specialists, medical assistants along with other health professionals can work together to implement, facilitate, and deliver routine alcohol screening and counseling to prevent FASDs.		
Evaluation, diagnosis, treatment and the provision of FASD support services for those affected by an FASD typically involves an interdisciplinary team that may include pediatricians, family practice physicians, ob/gyn as well as nurses, medical assistants, psychologists, schools, behavioral health specialists and social workers.		
Instructions to Developer		
Show list of different team members – can be text or stick figures		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Stigma & the Interdisciplinary Team	
Screen #	58 / 62	
Video #	20 / 22	
On Screen Content		
<p>All members of the interdisciplinary team are critical across the lifespan</p> <p>positive and supportive relationships</p> <p>Individuals with an FASD can thrive and lead productive lives.</p> <p>Diagnosis is first step</p>		<p>Custom animation showing of the trajectory is changed</p> 
Audio Script		
<p>All members of the interdisciplinary team are critical to the development, coordination and implementation of integrated, appropriate, and responsive FASD-related services across the lifespan. For example, early diagnosis and appropriate interventions and supports can significantly improve the trajectory of FASDs and secondary disabilities such as compounding mental health concerns. For individuals and families affected by FASD, having positive and supportive relationships within their community and care providers are key to their resilience, health, and outcomes.</p> <p>It is important that healthcare professionals readily communicate to families that when provided with structure and daily support, individuals with an FASD can thrive and lead productive lives.</p> <p>For many individuals and families affected by FASD, the diagnosis is a positive first step towards improving long-term outcomes and achieving potential realistically matched to an individual's gifts and strengths.</p>		
Instructions to Developer		
<p>Animate trajectory being changed due to early diagnosis and interventions</p> <p>http://www.istockphoto.com/photo/girl-using-sensory-station-gm157473433-9789933</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	5 / Stigma	
Screen Title	Sasha's Story	
Screen #	59 / 62	
Video #	21 / 22	
On Screen Content		
<p>Sasha's Story</p> <p>Sasha faced numerous difficulties being with his fellow students was "no fun" diagnosed with multiple disabilities</p> <p>Knowing he was exposed to alcohol before birth is what helped his family and doctors best understand his challenges.</p> <p>his family made behavior modifications at home</p> <p>Story from: National Center on Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention</p>		
Audio Script		
<p>As a child and young teen, Sasha faced numerous difficulties including learning problems, struggles with social relationships such as interacting with classmates, difficulty with team sports since rules were too abstract, and trouble handling everyday things in life. He still remembers that being with his fellow students was "no fun."</p> <p>Sasha had many evaluations and was diagnosed with multiple disabilities. Knowing he was exposed to alcohol before birth is what helped his family and doctors best understand his challenges. Typical milestones that other children reached and took for granted seemed out of reach for Sasha.</p> <p>Following being diagnosed with an FASD, his family made behavior modifications at home to create a safe, structured, organized, and under-stimulated environment appropriate to his needs. Sasha has since completed high school and is employed. An active member of the community, he understands his disability and helps bring support to others who are affected by an FASD.</p>		
Instructions to Developer		
<p>Need to show series of stock photos to "illustrate" story, along with on-screen text - maybe make photos B&W</p> <p>http://www.istockphoto.com/photo/rear-view-of-group-of-school-children-attending-a-class-gm481094842-69281027</p> <p>http://www.istockphoto.com/photo/young-boy-watching-a-kids-soccer-match-gm485792506-68198467</p> <p>http://www.istockphoto.com/photo/high-school-teen-student-gm177343572-20604410?st=0d1ad63</p> <p>http://www.istockphoto.com/photo/multi-ethnic-group-of-people-in-counseling-session-with-therapist-gm507867054-84938087</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	6 / Next Steps	 
Screen Title	What Should I Do Next?	
Screen #	60 / 62	
Video #	22 / 22	
On Screen Content		
What Should I Do Next?		
<p>Prevention, identification, and treatment Education cdc.gov/fasd</p> <ul style="list-style-type: none"> • Screen adult patients for alcohol use • Advise women not to drink at all if they could be pregnant • Counsel, refer, and follow up with patients who need more help • Build interdisciplinary team 		
Audio Script		
<p>The first step to FASD prevention, identification, and treatment is education. The CDC, along with FASD Practice and Implementation Centers and National Partners, are continually working to provide education, training, and tools for those who care for women at risk for an alcohol-exposed pregnancy and those who work with individuals living with FASDs. Visit cdc.gov/fasd for additional trainings and resources and encourage other staff members to learn more about this issue.</p> <p>Other steps healthcare professionals can implement to help women avoid an alcohol-exposed pregnancies are to:</p> <ul style="list-style-type: none"> • Screen all adult patients for alcohol use at least yearly, • Advise women to not drink at all if there is any chance they could be pregnant, • Counsel, refer, and follow up with patients who need more help, and • Build an interdisciplinary team. 		
Instructions to Developer		
<p>Logo isn't approved yet – may need to use just text Show image of CDC website – cdc.gov/fasd</p> <p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	6 / Next Steps	
Screen Title	What Should I Do Next?	
Screen #	61 / 62	
Video #	22 / 22	
On Screen Content		
<p>Pediatric settings</p> <ul style="list-style-type: none"> • Obtain prenatal alcohol exposure history • Know the behavioral and physical criteria for FASDs • Monitor for behavioral and physical features related to prenatal alcohol exposure • Have referral information readily available • Follow AAP guidelines for care of individuals with an FASD 		
		
Audio Script		
<p>Healthcare professionals in pediatric settings can do the following to identify individuals with an FASD and refer them for treatment and services:</p> <ul style="list-style-type: none"> • Obtain prenatal alcohol exposure history, • Know the behavioral and physical criteria for FASDs, • Monitor for behavioral and physical features related to prenatal alcohol exposure, • Have referral information readily available, and • Follow AAP guidelines for care of individuals with an FASD. 		
Instructions to Developer		
<p>Animate list on clipboard - http://www.istockphoto.com/photo/blank-clipboard-gm174083232-21368714?st=664a57e</p>		

Module/Course Name	FASD Primer for Healthcare Professionals	Proposed Graphics/Visuals
Unit # / Unit Name	6 / Next Steps	
Screen Title	What Should I Do Next?	
Screen #	62 / 62	
Video #	22 / 22	
On Screen Content		
<ul style="list-style-type: none"> • Give overview of FASDs • Describe ways to prevent FASDs • Explain methods for identification, referral, and treatment of FASDS • Describe common stigmas associated with FASDs • Identify actions health care providers can implement <p>FASD Primer for Healthcare Professionals</p> <p>Collaborative for Alcohol-Free Pregnancy: Partnering for Practice Change</p>		
Audio Script		
<p>You should now be able to:</p> <ul style="list-style-type: none"> • Give an overview of FASDs, • Describe ways to prevent FASDs, • Explain methods for identification, referral, and treatment of FASDS, • Describe common stigmas associated with FASDs, and • Identify some next steps and actions health care providers can implement in their own work. <p>Thank you for taking the <i>FASD Primer for Healthcare Professionals</i> course.</p>		
Instructions to Developer		
<p>Show text</p>		