Document Details

Docket ID:

CDC-2018-0077 ©

Docket Title:

by The Pregnancy Risk Assessment Monitoring Syste

0920-163O ∗©

Document File:

Docket Phase:

Notice

Phase Sequence:

ļ

Original Document ID:

CDC-2018-0077-DRAFT-0004

Current Document ID:

CDC-2018-0077-0004

Title:

Comment from (Julie Babyar) ©

Number of Attachments:

0

Document Type:

PUBLIC SUBMISSIONS ★⑤

Document Subtype:

Comment on Document ID:

CDC-2018-0077-0001 3

Comment on Document Title: by The Pregnancy Risk Assessment Monitoring Syste 0920-16JO 2018-19014 ©

Status:

Posted ©

Received Date:

10/26/2018 **

Date Posted:

10/29/2018 Q

Posting Restriction:

No restrictions (2)

Submission Type:

Web

Number of Submissions:

Document Optional Details

Submitter Info

Submitter Info

Comment:

CDC-2018-0077 October 26th, 2018 Thank you for the opportunity to comment on the renewal of PRAMS funding. I am grateful for

the effort and science dedicated to new moms and babies through CDC surveillance. 1) I would love to see further action from the data collection, perhaps from state or local public health and perinatal hospital collaborations, perhaps from medical associations. It would be of benefit to know that PRAMS data has been acknowledged on an annual basis at the state and local level, with process improvement on the agenda.

2) PRAMS data covers live births, and some of the collected information requires further data from all pregnancies for any local action to be considered. I believe reconvening with federal and state epidemiology may maximize how and what data should be collected. 3) I believe data collection in the perinatal period can be extremely redundant, especially for those seeking social services. Standardization of data collection is important. PRAMS should actively work with other federal programs and states to identify ways to maximize efficiency for the patients and the programs, 4) As perinatal data is utilized comparatively across countries, and perinatal data drives public health and private philanthropy abroad, I believe federal epidemiology programs should actively partner with global health in data collection and tracking standards. I believe PRAMS would be a wonderful way to forge that partnership and initiate stronger conversations on data. epidemiology and cross country collaboration. Thank you for the consideration, Julie Babyar, RN MPH *©

First Name:

Julie 🔾

Last Name:

Babyar ©

ZIP/Postal Code:

94591

Email Address:

jbabyar@gmail.com

Organization Name:

0

Cover Page:

ma

Document Optional Details

Status Set Date:

10/29/2018

Current Assignee:

NA

Status Set By:

Burroughs-Stokes, Kennya LaTrice (CDC)

Tracking Number:

1k2-9679-lur4 ©

Page Count:

1 0

Total Page Count

Including Attachments:

1

Submitter Info

Submitter Info

Comment:

CDC-2018-0077 October 26th, 2018 Thank you for the opportunity to comment on the renewal of PRAMS funding. I am grateful for the effort and science dedicated to new moms and babies through CDC surveillance. 1) I would love to see further action from the data collection, perhaps from state or local public health and perinatal hospital collaborations, perhaps from medical associations. It would be of benefit to know that PRAMS data has been acknowledged on an annual basis at the state and local level, with process improvement on the agenda.

2) PRAMS data covers live births, and some of the collected

information requires further data from all pregnancies for any local action to be considered. I believe reconvening with federal and state epidemiology may maximize how and what data should be collected. 3) I believe data collection in the perinatal period can be extremely redundant, especially for those seeking social services. Standardization of data collection is important, PRAMS should actively work with other federal programs and states to identify ways to maximize efficiency for the patients and the programs. 4) As perinatal data is utilized comparatively across countries, and perinatal data drives public health and private philanthropy abroad, I believe federal epidemiology programs should actively partner with global health in data collection and tracking standards. I believe PRAMS would be a wonderful way to forge that partnership and initiate stronger conversations on data. epidemiology and cross country collaboration. Thank you for the consideration, Julie Babyar, RN MPH *©

First Name:

Julie 🔘

Last Name:

Babyar 🔾

ZIP/Postal Code:

94591

Email Address:

jbabyar@gmail.com

Organization Name:

0

Cover Page:

L. MITH