



# 2026 NIFLA Leadership Summit

*National Institute of Family and Life Advocates (NIFLA)*  
**May 4-7, 2026**  
**Williamsburg, VA**



## **Accreditation**

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Christian Medical & Dental Associations and National Institute of Family and Life Advocates (NIFLA). The Christian Medical & Dental Associations is accredited by the ACCME to provide continuing medical education for physicians.

The Christian Medical & Dental Associations designates this live activity for a maximum of 9.0 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

## **Nursing**

This activity has been submitted to Georgia Nurses Association for approval to award contact hours. Georgia Nurses Association is an accredited approver of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

**Determination of credit is pending.**

## **Physician Assistant**

AAPA accepts certificates of participation for educational activities certified for *AMA PRA Category 1 Credits™* by an organization accredited by the ACCME or a recognized state medical society. Physician assistants may receive up to 9.0 credits for completing this activity.

## **Nurse Practitioner**

The American Academy of Nurse Practitioners Certification Program (AANPCP) accepts *AMA PRA Category 1 Credits™* from organizations accredited by the ACCME. Individuals are responsible for checking with the AANPCP for further guidelines. Nurse practitioners may receive up to 9.0 credits for completing this activity.

## **American Registry for Diagnostic Medical Sonography (ADRMS)**

ADRMS accepts *AMA PRA Category 1 Credits™*

## **American Midwifery Certification Board**

American Midwifery Certification Board (AMCB) accepts *AMA PRA Category 1 Credits™* from organizations accredited by the ACCME. Individuals are responsible for checking with the AMCB for further guidelines.

## **Activity Director**

### **Thomas Glessner, JD**

President / National Institute of Family and Life Advocates (NIFLA)  
Fredericksburg, VA

## **Planning Committee**

### **Byron Calhoun, MD**

Medical Director / National Institute of Family and Life Advocates (NIFLA)  
Fredericksburg, VA

### **Nasia Hinton**

Summit Coordinator / National Institute of Family and Life Advocates (NIFLA)  
Fredericksburg, VA

## **Faculty**

### **Anne Catherine Belanger**

Founder and CEO / Fertility Business Initiatives Institute

### **Joel Brind, PhD**

Emeritus Professor, Human Biology and Endocrinology / Baruch College, City University of New York

### **Byron Calhoun, MD**

Medical Director / National Institute of Family and Life Advocates (NIFLA)  
Fredericksburg, VA

### **Sandy Christiansen, MD**

National Medical Director / CareNet

### **Paige Coulter, RN**

Director of Medical Services / The Crisis Pregnancy Center of Tidewater

### **Susan Null**

Executive Director / AVA Care of Harrisonburg, VA

### **Eva Ortiz, RDMS**

Instructor / National Institute of Family and Life Advocates (NIFLA)

### **Matt Philips, MD**

Medical Director / ICU Mobile

### **Malena Wilson, RDMS**

Adjunct Professor / Virginia Commonwealth University  
Ultrasound Instructor / National Institute of Family and Life Advocates (NIFLA)

## **Disclosures**

Disclosures for all those in control of the content of this activity. The names of the ineligible companies (within the last 24 months) and the nature of the financial relationship(s). There is no minimum financial threshold. Disclosure of all financial relationships with ineligible companies regardless of the potential relevance of each relationship to the education.

### **Activity Planners, Faculty, and CMDA CE Review Committee**

No relevant financial relationships were identified for any individual with the ability to control the content of this activity.

**ALL RELEVANT FINANCIAL RELATIONSHIPS WERE MITIGATED.**

## Agenda

TIME	TOPIC TITLE	FACULTY NAME	# OF CREDITS
<b>Day 1</b>			
2pm - 3pm	<b>An Argument for Progesterone Reversal of Mifepristone Medical Elective Abortions</b>	Byron Calhoun, MD	1
3pm - 4 pm	<b>Medical Intensive Building a Medically Sound and Compassionate APR Protocol</b>	Matthew Phillips, MD	1
<b>Day 2</b>			
10:30am - 11:30am	<b>Uncommon Findings in Ultrasound</b>	Eva Ortiz, RDMS	1
2pm - 3pm	<b>Abortion and Breast Cancer</b>	Joel Brind, MD	1
3:30 - 4:30pm	<b>Achieving Competency in Ultrasound</b>	Malena Wilson, RDMS	1
<b>Day 3</b>			
10:30am - 11:30am	<b>Weary in Well Doing: Burnout &amp; the Pregnancy Medical Clinic Nurse</b>	Sandy Christiansen, MD	1
2pm - 3pm	<b>The Essential Nurse Manager</b>	Paige Coulter, RN	1
3:30 - 4:30pm	<b>Fertility at its Finest</b>	Anne-Cathryn Belanger	1
<b>Day 4</b>			
9 am – 10 am	<b>Implementing a Comprehensive STI Testing and Treatment Program</b>	Susan Null	1
		<b>TOTAL</b>	<b>9.0</b>

### Objectives:

- Define the basic physiological process of the reproductive organs through the science of the billings ovulation method and their responsibilities in the processes of ovulation and menstruation, and where that intersects with fertility.
- Review how the billings ovulation method evolved in 1953 as the inspired alternative to the research first conducted in the development of the oral contraceptive pill, and how it operates in harmony with every woman's body.
- Illustrate conception effectiveness with a cohort study from New Zealand.
- Describe how the billings ovulation method can be employed as the first line of approach toward infertility in the field of IVF technologies, as its strategies toward conception have proven to be highly effective with subfertile women and couples.
- Examine how the billings ovulation method has been able to successfully assist women and couples in achieving the desired sex of their baby, with a review of a study on pre-sex selection.
- Assess and summarize the medical literature re: the reality and importance of the abortion-breast cancer link, to enable appropriate counseling re: the abortion choice.
- Identify mechanism of action of mifepristone.
- Describe how progesterone may be used to reverse mifepristone.
- Recognize the success rates of progesterone therapy.
- Recognize no evidence of birth defects with progesterone therapy.
- Define the safety of progesterone therapy.
- Comprehend the current debate and the data for the use of "progesterone" in medical elective abortions.
- Define compassion fatigue and burnout within the healthcare environment and distinguish between the two conditions.
- Recognize common signs, symptoms, and risk factors associated with compassion fatigue and burnout among healthcare professionals.
- Identify evidence-based prevention and management strategies to reduce burnout and promote provider well-being.
- Identify the essential responsibilities of the nurse manager role within pregnancy centers, including clinical governance, staff supervision, and patient safety oversight.
- Describe practical strategies for establishing effective clinical governance structures that support regulatory compliance and high-quality, patient-centered care.
- Apply supervisory frameworks for onboarding, evaluating, and staff in a respectful, constructive, and accountable manner.
- Demonstrate increased confidence in their leadership role by integrating practical tools and an encouraging leadership mindset into daily management practices.
- Assess local epidemiologic STI data and clinic-specific patient risk profiles to determine the need for expanded STI services within a limited-scope pregnancy center.

- Differentiate scope-of-practice responsibilities among RNs, NPs, and supervising physicians when implementing STI screening and treatment services.
- Design standardized STI screening and treatment protocols consistent with current CDC guidelines while remaining compliant with state nursing and medical regulations.
- Evaluate regulatory requirements including CLIA-waiver compliance, documentation standards, standing orders, prescribing authority, and mandatory public health reporting.
- Implement measurable quality improvement indicators to monitor screening rates, treatment timeliness, follow-up compliance, and documentation accuracy.
- Analyze leadership and medical director responsibilities in maintaining regulatory oversight, clinical quality assurance, and risk mitigation within pregnancy medical centers.
- Identify sonographic criteria for early pregnancy failure based on current evidence-based guidelines.
- Differentiate true gestational sacs from pseudo-gestational sacs in cases of pregnancy of unknown location.
- Evaluate abnormal yolk sac and embryonic findings and correlate them with clinical management considerations.
- Apply standardized documentation practices to reduce variability and support safe patient triage and referral.
- Assess when sonographic findings warrant urgent referral for possible ectopic pregnancy or other complications.
- Identify the science behind Abortion Pill Reversal.
- Describe how to best implement APR in one's community.
- Evaluate pregnancy medical centers to stay compliant with local rules and regulations related to providing APR.
- Prepare pregnancy centers across the country to step into this important frontline in the battle for life.
- Explain the role of ultrasound competency in improving diagnostic accuracy, patient counseling, and risk reduction in pregnancy center settings.
- Identify key components of standardized ultrasound protocols, documentation practices, and quality assurance systems.
- Evaluate current training and competency processes within their organization to identify gaps or risks.
- Apply practical strategies to strengthen clinical proficiency, oversight, and regulatory alignment in limited-scope environments.
- Develop an action plan to implement or enhance a sustainable ultrasound competency framework within their practice setting.

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