

# EXHIBIT 17

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

PLANNED PARENTHOOD CENTER FOR  
CHOICE, *et al.*,

Plaintiffs,

v.

GREG ABBOTT, in his official capacity as  
Governor of Texas, *et al.*,

Defendants.

No. 1:20-cv-00323-LY

**DECLARATION OF JUDY LEVISON, M.D., M.P.H., IN SUPPORT OF PLAINTIFFS’  
MOTION FOR A PRELIMINARY INJUNCTION**

I, Judy Levison, M.D., M.P.H., do declare as follows:

1. I am a board-certified obstetrician and gynecologist (“OB/GYN”) and have practiced medicine in the field of obstetrics and gynecology for thirty-eight years. In that time, I have delivered many thousands of babies. I am licensed to practice medicine in the State of Texas and am in good standing with the Texas Medical Board. A copy of my curriculum vitae is attached as Exhibit A.

2. I graduated from Tufts University School of Medicine, obtained a Master’s Degree in Public Health from the University of Texas School of Public Health, and completed my medical residency in obstetrics and gynecology at the University of Washington.

3. I am a member of the American College of Obstetricians and Gynecologists (“ACOG”) and the American Academy of HIV Medicine (“AAHIVM”).

4. I make this declaration based upon my education, training, practical experience, and personal knowledge that I have obtained as an OB/GYN; my attendance at professional conferences; review of relevant medical literature; and conversations with other medical professionals. I am competent to testify thereto.

5. The statements in this declaration are attributable solely to me; I do not speak on behalf of my employer or any institution or organization with which I am affiliated.

6. As a result of my extensive experience in the field of obstetrics and gynecology, as both an academic and a practitioner, I am familiar with the standard of care for both abortion and obstetrics, including prenatal care and labor and delivery. Specifically, I am familiar with the hospital resources and the amount of personal protective equipment (“PPE”) required to provide such care safely. I am also quite familiar with the complications that can arise during pregnancy and childbirth.

7. Based on my experience and knowledge of obstetrics and gynecology practice in Texas, the provision of abortion care will not deplete hospital capacity or PPE needed to fight COVID-19.

**Abortion Care Does Not Deplete Hospital Capacity**

8. Abortion care does not deplete hospital capacity. Pregnant patients need medical care, whether that care is abortion care, prenatal care, or delivery. Each of those things *may* lead to hospitalization, but abortion care is significantly less likely to result in hospitalization than continuing to carry a pregnancy, particularly doing so to term, or experiencing a serious pregnancy-related complication. Some common examples of potentially life-threatening pregnancy-related complications that will result in hospitalization include preeclampsia, placenta previa, and pulmonary embolism.

9. Carrying a pregnancy to term is a significant months-long medical event which, for the vast majority of people, culminates in a multi-day hospitalization. By contrast, abortion almost never requires hospitalization, either to provide abortion safely or to treat the rare complication that arises. Indeed, many complications from abortion can be treated out-patient, at the clinic, and do not require hospitalization.

10. Moreover, even leaving labor and delivery aside, a pregnancy is much more likely to result in a visit to a hospital than an abortion. Based on published literature and my experience, at least twenty percent of pregnant patients will visit a hospital at some point prior to delivery, and some patients will visit the hospital for evaluation or treatment on multiple occasions.<sup>1</sup> By contrast, I rarely see patients hospitalized for abortion complications.

11. Furthermore, if a patient attempts a self-managed abortion using unsafe methods, this may result in hospital care as well. In Texas, abortion is all but banned after twenty-two weeks LMP. Thus, some patients cannot wait three weeks for the Executive Order's stated expiration in order to obtain a legal abortion. While some of those patients will likely try to travel out of state for care (despite the risks of traveling long distances during the COVID-19 pandemic), I fear others may turn to unsafe methods to try and induce their own abortions.

#### **Abortion Care Does Not Deplete PPE Needed to Fight the COVID-19 Pandemic**

12. More PPE is used in prenatal and intrapartum care than in abortion care, whether medication abortion or procedural abortion. As noted, pregnant people need medical care, whether

<sup>1</sup> See, e.g., Shayna D. Cunningham et al., *Association Between Maternal Comorbidities and Emergency Department Use Among a National Sample of Commercially Insured Pregnant Women*, 24 Acad. Emergency Med. 940, 942 (2017); Kimberly A. Kilfoyle et al., *Non-Urgent and Urgent Emergency Department Use During Pregnancy: An Observational Study*, 216 Am. J. Obstetrics & Gynecology 181.e1 (2017); Urania Magriples et al., *Prenatal Health Care Beyond the Obstetrics Service: Utilization and Predictors of Unscheduled Care*, 198 Am. J. of Obstetrics & Gynecology 75.e1 (2008).

in the form of abortion care, prenatal care, or delivery. Abortion care uses less PPE than prenatal care, let alone care for a pregnancy complication or for labor and delivery.

13. Prenatal care generally involves multiple visits, which may include physical examinations (including pelvic exams), ultrasounds, and blood draws for genetic testing—each of which requires the use of, at the very least, one pair of disposable gloves per clinician seen.

14. Some pregnant patients require more, or different, prenatal care, which may involve more PPE, such as when there is a complication with the pregnancy or when the patient has other risk factors. Some conditions require substantially more blood draws, such as pregnant patients with HIV or preeclampsia. Each of those blood draws requires a set of disposable gloves.

15. If the Executive Order is extended beyond its current expiration date, it will result in even greater use of PPE. Labor and delivery requires substantial PPE, particularly given the number of medical staff involved in even uncomplicated deliveries. For a vaginal delivery, the patient will be assisted by, at the very least, a physician (or midwife) and a nurse, though frequently it will be four or more individuals. The primary personnel must wear PPE, including a gown, gloves, shoe covers, and often surgical masks. After an uncomplicated vaginal delivery, the patient and her baby typically remain in the hospital for about forty-eight hours.

16. Delivery by cesarean section (“C-section”), which is common, requires substantially more staff and more PPE than vaginal delivery, as a C-section is an abdominal surgery with an inpatient recovery period of two to four days. For a C-section, personnel involved will generally include an OB/GYN, an assistant, a scrub tech, a circulating nurse, an anesthesiologist, and very possibly a neonatal team. Each of these personnel generally wear PPE, including a surgical mask and gloves, with some wearing gowns and shoe covers as well.

17. For deliveries for patients with confirmed or suspected COVID-19 infection, all personnel wear full PPE, including masks, gloves, gowns, shoe covers, and face shields.

**Preventing People from Obtaining Abortion Care Does Not Make Sense from a Public Health Perspective**

18. I understand the need to conserve PPE and to reduce hospitalizations during this public health crisis. Like medical practitioners around the country, I am doing my part in my own practice. As required by the Executive Order, I am cancelling routine visits and procedures that can be delayed, based on my best medical judgment. However, pregnancy-related medical care is urgent and time-sensitive by its very nature. While some care can be provided remotely by telehealth, much prenatal and postpartum care cannot, nor can it wait. Thus, most prenatal and postpartum care is continuing, though measures are being taken to reduce the risk of transmission, including by spacing out appointments to ensure that waiting rooms are not crowded.

19. Typically, the full course of prenatal care may involve between ten and fourteen prenatal visits, but given the COVID-19 pandemic, my colleagues and I have attempted to reduce that number of visits where possible. Some visits we can conduct by telehealth, such as follow-up consultations, chart checks, or lab result reviews. Because obstetric care requires blood draws and ultrasounds, as well as other in-person diagnostics, it is not possible to conduct most prenatal appointments via telehealth.

20. In my opinion, preventing people from obtaining abortion care does not make sense from a public health perspective.

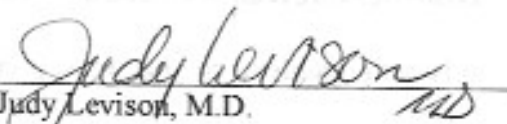
21. As described above, requiring people to continue unwanted pregnancies utilizes more PPE and more hospital resources than abortion care—particularly, but certainly not only, in the circumstance where people are required to carry those pregnancies to term. Indeed, even if

patients can ultimately obtain an abortion after the Executive Order expires, many will be so far along that they may require a two-day procedure, meaning that twice as much PPE will be used.

22. Moreover, it is my understanding that pregnant people with any upper respiratory infection may be more likely to experience serious symptoms from the disease than a non-pregnant patient, which in turn makes her more likely to need hospital care than someone who is not pregnant, and more likely to die.

23. Finally, if patients cannot obtain abortions in Texas, that will not stop most of them from seeking to terminate their pregnancies. Some will travel long distances during the pandemic to try and obtain care elsewhere. Some, I fear, will turn to unsafe means to induce their own abortions. Neither is a positive public health outcome.

24. I declare under penalty of perjury that the foregoing is true and correct.

  
Judy Levison, M.D.

Executed April 1, 2020



# EXHIBIT A

**Judy Levison, MD, MPH**  
Baylor College of Medicine  
Northwest Community Health Center  
1100 West 34<sup>th</sup> St.  
Houston, TX 77018  
[REDACTED]  
[jlevison@bcm.edu](mailto:jlevison@bcm.edu)

## **I. GENERAL BIOGRAPHICAL INFORMATION**

### **A. Personal**

1. *Name*: Judy Levison, M.D., M.P.H.
2. [REDACTED] citizenship: U.S.

### **B. Education**

#### **1. Undergraduate education**

1968-1972 Tufts University

Medford, Massachusetts

#### **2. Medical education**

1972-1976 Tufts University School of Medicine  
Boston, Massachusetts

#### **3. Postgraduate training**

1977-1978 Internship, Internal Medicine  
St. Elizabeth's Hospital (Tufts University affiliated hospital)  
Brighton, Massachusetts

1978-1981 Residency, Obstetrics and Gynecology  
University of Washington  
Seattle, Washington

2005-2010 Masters in Public Health  
University of Texas School of Public Health  
Houston, Texas

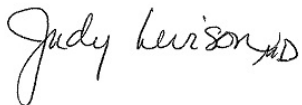
### **C. Academic appointments**

#### **1. Faculty positions at BCM**

2015-present

Professor, Baylor College of Medicine, primary appointment to the Department of Obstetrics and Gynecology and secondary appointment to the Department of Family and Community Medicine

1-14-20



2007-2015

Associate professor, Baylor College of Medicine, primary appointment to the Department of Obstetrics and Gynecology and secondary appointment to the Department of Family and Community Medicine

2000-2007

Assistant professor, Baylor College of Medicine, Department of Family and Community Medicine with joint appointment to the Department of Obstetrics and Gynecology

**2. *Previous faculty positions at other institutions***

1996-1999

Assistant professor, Department of Obstetrics and Gynecology, Santa Clara Valley Medical Center, San Jose, California and Stanford University Medical Center, Stanford, California

**3. *Faculty appointments at other institutions while at BCM***

2014-present

Consultant to University of California San Francisco (UCSF) Clinical Care Center Perinatal Hotline

**D. Other advanced training/experience**

1. *Formal sabbatical leave*: none

2. *Other specialized training following academic appointment*

2005-2010 Masters in Public Health

University of Texas School of Public Health

Houston, Texas

**E. Other information**

1. *Honors or awards*

a. 2004 BCM Department of Obstetrics and Gynecology Teaching award

b. 2005 Council on Resident Education in Obstetrics and Gynecology (CREOG) Excellent Resident Education Award

c. 2005 BCM Department of Obstetrics and Gynecology Teaching Award

d. 2006 BCM Department of Obstetrics and Gynecology Excellence in Resident Teaching Award

e. 2006 Bradley Scott Award for Excellence in HIV Care, Houston

f. 2010 American College of Obstetricians and Gynecologists (ACOG)

Community Service Award, ACOG 58<sup>th</sup> Annual Clinical Meeting, San Francisco

g. 2011 BCM Obstetrics and Gynecology Residency Class of 2011 Humanitarian Award

h. 2012 BCM Family Medicine Residency Teaching Award

i. 2013 Houston Woman Magazine "Wise Woman" Award

j. 2014 BCM Fulbright and Jaworski Teaching Award

k. 2014 BCM Institute for Clinical and Translational Research (ICTR) Clinical Investigator Award

l. 2019 Inaugural Department of Obstetrics and Gynecology Professionalism Award

**2. *Board eligibility/certification***

1984 Board certified (lifetime), American Board of Obstetrics and Gynecology

1997 Voluntary recertification, American Board of Obstetrics and Gynecology

2006 Voluntary recertification, American Board of Obstetrics and Gynecology

2007 Voluntary recertification, American Board of Obstetrics and Gynecology

2008 Voluntary recertification, American Board of Obstetrics and Gynecology

2010 Voluntary recertification, American Board of Obstetrics and Gynecology

2013 Voluntary recertification, American Board of Obstetrics and Gynecology

2016 Voluntary recertification, American Board of Obstetrics and Gynecology

2018 Voluntary recertification, American Board of Obstetrics and Gynecology

2002-present Certification as HIV specialist, American Academy of HIV Medicine

**3. *Other non academic positions***

1981 – 1982

Attending physician

Group Health Cooperative

Seattle, Washington

1983 – 1995

Private Practice

Everett, Washington

Private practice with special interest in high risk obstetrics and gynecologic surgery

2004 Consultant to Secure the Future (prevention of mother to child transmission of HIV (PMTCT) projects):

Mbabane, Swaziland, March 2004 (three weeks)

Katima Mulilo, Namibia, November 2004 (four weeks)

2006 Consultant to American International Health Alliance (AIHA):

Krivy Rih, Ukraine (one week)

**II. RESEARCH INFORMATION**

**A. Research support**

**1. *Trichomonas* and HIV**

a. ***Title***: *Trichomonas* recurrence among HIV-positive women

b. ***Funding agency***: National Institutes of Health

c. ***Investigator relationship***: Co-principal investigator (site PI); principal investigators David Martin PI/Patty Kissinger –Project 4 PI

d. ***Dates of funding***: 01/01/07 through 08/31/09

e. ***Annual total direct cost*** \$86,500

f. **NIH grant** to Tulane University/Louisiana State University (LSU) with subcontract from Tulane to BCM. Gulf South STI/Topical Microbicide Cooperative Research Center—Project 4/Project number 1 U19 AI61972-01

## **2. Prevention of Perinatal HIV Transmission**

- a. **Title:** Texas Rapid-testing Implementation At Delivery (TRIAD) project—program originally developed to introduce rapid testing to Houston hospitals for patients who present with no prenatal care; now centered on education of clinicians in Texas about prevention of perinatal HIV transmission. Current focus: development of FIMR (Fetal and Infant Mortality Review) adapted for HIV—to analyze root causes of perinatal HIV transmission in Texas and direct findings to institutions that can effect change
- b. **Funding agency:** Centers for Disease Control (CDC) via Texas Department of Social and Health Services (DSHS)
- c. **Investigator relationship:** Principal investigator
- d. **Dates of funding:** 01/01/07 through present
- e. **Annual total direct cost** \$120,000-140,000
- g. **Grant** from CDC to Texas Division of HIV/STD with contract to Harris Health System. Contract number 2007-021777-001

## **3. Education on HIV Perinatal Transmission Prevention**

- a. **Title:** HIV Perinatal Transmission Prevention--development of five online interactive modules (2 hours of CME/CNE) to educate Texas obstetric providers and nurses about standard of care prenatal HIV and syphilis testing. Working in conjunction with Microassist to produce interactive videos  
<http://www.microassist.com/>
- b. **Funding agency:** Centers for Disease Control (CDC) via Texas Department of Social and Health Services (DSHS)
- c. **Investigator relationship:** Principal investigator
- d. **Dates of funding:** 09/01/10-12/31/10
- e. **Annual total direct cost** \$55,824
- f. **Grant** from CDC to Texas Division of HIV/STD with contract to Harris County Hospital District. **Supplement** to contract number 2007-021777-001

## **B. National scientific participation**

### **1. Journal editorial boards**

2012-present: Have reviewed manuscripts for Journal for Acquired Deficiency Syndromes (JAIDS), American Journal of Obstetrics and Gynecology (AJOG), PLoS ONE, HIV/AIDS Research and Palliative Care, Lancet ID, Journal of Perinatology, Pediatrics, Sexually Transmitted Infections, Clinical Infectious Diseases, Journal of the International AIDS Society, Law and Ethics

### **2. Review panels**

2011-present: Elimination of Mother to Child Transmission of HIV Panel, sponsored by CDC

2013-present: Scientific Advisory Council to the Ryan White Planning Council and Community Planning Group, Houston, Texas

2013 and 2014: National Institutes of Health (NIH) Office of Aids Research: review of the women and girls section of the proposed FY 2015 Trans-NIH Plan for HIV Research

2013 and 2014: Invited judge, National Undergraduate Global Health Technologies Design Competition, Rice University, Houston, Texas

2013-present: Invited member, The DHHS Panel on Treatment of HIV-Infected Pregnant Women and Prevention of Perinatal Transmission/Working Group of the Office of AIDS Research Advisory Council (OARAC)—reviews and updates national perinatal HIV guidelines

**3. Professional societies**

American Congress of Obstetricians and Gynecology

American Academy of HIV Medicine

**4. Invited lectures/presentations** (those marked with \* are refereed)

**National**

\***Levison, J.**, Peters, M., Hansen, I., Lewis, S. Mistakes We Made/Lessons We Learned. Poster and oral presentation at Elements of Success/International Conference on Adherence to Antiretroviral Therapy, Dallas, Texas, December 5, 2003.

\***Levison, J.** and McFarlane, J. Houston, First to Implement Labor and Delivery Rapid HIV Testing in Texas. Poster presented at CDC Perinatal Conference on Promising Practices, Atlanta, Georgia, June 15-16, 2005.

\***Levison, J.**, Peters, Y., and Moore, A. The HIV-Specific Ob-Checklist: Management and Communication Tool. Poster presented at Treatment & Management of HIV Infection in the United States Conference, Atlanta, Georgia, September 15-18, 2005.

\***Levison, J.**, Peters, Y., and Trimble, D. A Model for Prenatal Care of the HIV-Positive Woman. Poster presented at Treatment & Management of HIV Infection in the United States Conference, Atlanta, Georgia, September 15-18, 2005.

\*Doyle, N., **Levison, J.**, and Gardner, M. Rapid HIV vs. ELISA Screening in a Low Risk Mexican American Population Presenting in Labor: A Cost-Effectiveness Analysis. Poster presented by Dr. Doyle at the 2005 Society for Maternal-Fetal Medicine annual meeting, Reno, Nevada, February 7-12, 2005.

Tung, C., Sangi-Haghpeykar, H. and **Levison, J.** A comparison of prenatal rapid HIV testing to HIV ELISA testing in a low socioeconomic population (submitted for publication). Presented at

Ob/Gyn Resident Research Day (by Dr. Tung), May 2006 (first place among 12 Baylor Ob/Gyn resident projects)

Harris County Hospital District Quality Assurance Committee (by Dr. Levison), June 2006

\*Texas Association of Obstetricians and Gynecologists Resident Research Day (by Dr. Tung), May 2007 (second place in the state of Texas)

Beasley, A., Sangi-Haghpeykar, H., Giordano, T. and **Levison, J.** HIV Perinatal Data Base. Presented at Ob/Gyn Resident Research Day, May 2007

Beard, L., **Levison, J.**, Ramin, S. and Berens, P. Assessment of provider knowledge regarding HIV and pregnancy , prior to and following initiation of rapid HIV testing hospital protocol. Presented (by Dr. Beard) June 23, 2007 at University of Texas Ob/Gyn Resident Research Day.

Mendiola, M., Aziz, N., Sokoloff, A., Cohan, D., and **Levison, J.** Days to viral load suppression in naïve and experienced pregnant HIV patients treated with highly active antiretroviral therapy. Presented at Ob/Gyn Resident Research Day, May 2009 (third place out of 12 Baylor Ob/Gyn residents)

\*Texas Association of Obstetricians and Gynecologists Resident Research Day (by Dr. Mendiola), May 2010 (second place in the state of Texas).

Coleman, A., **Levison, J.**, Sangi-Haghpeykar, H., and Ankobea, F. Knowledge, attitudes, and practices regarding human papilloma virus vaccination in Ghana, West Africa. Presented at Ob/Gyn Resident Research Day, May 2010 (tied for third place among 12 Baylor Ob/Gyn residents).

\*Pratts, M., Sangi-Haghpeykar, H., Parkerson, G.R., and **Levison, J.** Single-visit “See-and-Treat” cervical cancer screening project in rural Honduras. Poster for ACOG District Meeting, October 18, 2010, Maui, Hawaii.

\*Siddiqui, R., **Levison, J.**, Sangi-Haghpeykar, H., and Bell, T. Predictive factors for loss to postpartum follow-up in HIV-positive women in Harris Country Hospital District. Poster for 2012 CFAR (Center for AIDS Research) Joint Symposium on HIV Research in Women, September 19, 2012, Providence, Rhode Island.

\***Levison, J.**, Nanthuru, D., Chiudzu, G., Kazembe, P., Phiri, H., and Aagaard, K. Utility of qualitative research for assessment of attitudes and knowledge on preterm birth in a low resource setting. Poster at Society for Maternal Fetal Medicine, February 14-16, 2013, San Francisco, California.

\*Rahangdale, L., Cohen, S., Stewart, R., **Levison, J.**, Lazenby, G., Baddell, M. et al. Predictors of unplanned pregnancies among women living with HIV in the United States. Poster at 20<sup>th</sup> Conference on HIV and Opportunistic Infections (CROI), March 3-6, 2013, Atlanta, Georgia.

\*Adamski, A., Clark, R.A., Mena, L., Henderson, H., **Levison, J.**, Schmidt, N., Martin, D.H., and Kissinger, P. The influence of ART on the treatment of *Trichomonas vaginalis* among HIV-infected women. Poster presentation at the Society for Pediatric and Perinatal Epidemiologic Research, June 17-18, 2013, Boston, Massachusetts.

\*Acacia Cognata, MD, MSPH, Rebecca Hoban, MD, MPH, Maame Aba Coleman, MD, **Judy Levison, MD, MPH**, Kjersti Aagaard, MD., Ph.D., Alina Saldarriaga, MD and Elizabeth Montgomery, MD, MPH. Knowledge, Skills, and Use of Neonatal Resuscitation in Malawi, Before and After Participation in a Helping Babies Breathe Train the Trainer Program. Poster at American Academy of Pediatrics, October 26-29, 2013.

\*Acacia Cognata, MD, MSPH, Rebecca Hoban, MD, MPH, Jennifer Ann Werdenberg, MD, Alina Saldarriaga, MD, Asad Moten, BS, Kjersti Aagaard, MD., Ph.D., Maame Aba Coleman, MD, **Judy Levison, MD, MPH**, Nicole Salazar-Austin, MD, Norma Perez, DO, Sarah Perry, MD, Lineo Thahane, MD, MPH, Marape Marape, MD, Gabriel Anabwani, MB.Ch.B., Edith Mohapi, MBBS, FAAP and Elizabeth Montgomery, MD, MPH Knowledge and Skill Acquisition After "Helping Babies Breathe" Training in Sub-Saharan Africa: A 4 Country Experience. Poster at American Academy of Pediatrics, October 26-29, 2013.

\*Elizabeth Montgomery Collins, Acacia Cognata, Rebecca Hoban, Asad Moten, Sarah Perry, Nicole Salazar-Austin, Alina Saldarriaga, Norma Perez, Marape Marape, Mogomotsi Matshaba, Lineo Thahane, Edith Mohapi, Peter Kazembe, Jennifer Werdenberg, Linda Malilo, Hailu N Sarero, Dipesalema Joel, Grace Karugaba, **Judy Levison**, Kjersti Aagaard, Aba Coleman, Gabriel Anabwani. Neonatal Resuscitation Knowledge & Skill Acquisition, Retention, & Use in Botswana, Lesotho, Malawi, & Swaziland Before & After Participation In a Helping Babies Breathe Train-the-Trainer Program. AAP National Conference & Exhibition, Section on International Child Health, Global Child Health Abstract Symposium, October 28, 2013, Orlando, FL.

\*Williams, N., Peters, Y., Green, M., Deverson, C., and **Levison, J.** Postpartum Retention in Care Among Women with HIV. Poster at 2014 Texas HIV-STD Conference, August 19-21, Austin, TX.

\*Fastring, D., Amedee, A., Gatski, M., Clark, R.A., Mena, L., **Levison, J.**, Schmidt, N., Gustat, J., Hassig, S., and Kissinger, P. Heavy Alcohol Consumption and Vaginal Shedding of HIV. Poster at American Public Health Association, November 15-19, 2014, New Orleans, LA.



**Levison, J.**, Smith, H., and Eppes, C. Innovations in Retention in Care after Delivery: CenteringPregnancy. Presented at the Elimination of Mother to Child Transmission Stakeholders annual meeting (sponsored by CDC and ACOG), July 27, 2016, Washington, DC.

\*Stewart, K., Allen, S., Chesnokova, A., Syed, F., and **Levison, J.** Prevalence of Abnormal Cervical and Vaginal Cytology in HIV-Infected Women over the Age of 65. Poster at Annual Clinical Meeting, American College of Obstetricians and Gynecologists, April 27-10 2018, Austin, TX.

\*Bowden, E., Dorland, J., Hawkins, J., Hickerson, L., and **Levison, J.** Outcomes of Breastfeeding Among HIV-Exposed Infants in Houston, Texas. Poster at Annual Meeting of American College of Obstetricians and Gynecologists Districts IV, VII, and XI, September 27-29 2019, New Orleans, LA.

***International:***

\***Levison, J.** Perinatal transmission of HIV and vaginal delivery: the Houston experience. Lecture to German Austrian AIDS Congress, Frankfurt, Germany. Presented June 30, 2007.

\*Kissinger, P., Mena, L., **Levison, J.**, Clark, R.A., Henderson, H., Rosenthal, S., Schmidt, N., Reilly, K., Gatski, M., Barnes, T., Thomas, A., and Martin, D. Adherence to patient delivered partner treatment by HIV-infected women with Trichomonas vaginalis. Poster presented at the 18<sup>th</sup> International Society for Sexually Transmitted Diseases Research, June 28-30, 2009, London, England.

\*Williams, N., Peters, Y., Green, M., Deverson, C., and **Levison, J.** Postpartum Retention in Care Among Women with HIV. Poster at the Ninth InternationalConference on HIV and Prevention, June 8-10, 2014, Miami, FL.

\*

## **B. Publications**

### **1. *Full papers***

#### **a. published in peer review journals**

1) Doyle, N., **Levison, J.**, and Gardner, M. Rapid HIV versus enzyme-linked immunosorbent assay screening in a low-risk Mexican American population presenting in labor: A cost-effectiveness analysis. American Journal of Obstetrics and Gynecology (2005), 193:1280-5.

2) **Levison, J.** The ostrich syndrome: Obstetrician-gynecologists and human immunodeficiency virus exposure. Obstetrics and Gynecology (2008), 111(1):183-186.

3) Arya, M., **Levison, J.**, and Giordano, T.P. Ongoing barriers to HIV testing during pregnancy: A need for media campaigns addressing low knowledge about

perinatal HIV transmission among women in the United States. Letter to the editor, *AIDS Patient Care and STDs* (2010), 25(2):71-2.

4) Tung, C., Sangi-Haghpeykar, H. and **Levison, J.** A comparison of prenatal rapid HIV testing to HIV ELISA testing in a low socioeconomic population. *Journal of Perinatology* (2010), 30:30-32.

**5) Levison, J.**, Williams, L., Moore, A., McFarlane, J., and Davila, J. Increasing Use of Rapid HIV Testing in Labor and Delivery Among Women with No Prenatal Care: A Local Initiative. *Maternal and Child Health Journal* (2010), 16(9):1748-1753.

6) Kissinger, P., Mena, L., **Levison, J.**, Clark, R. A., Gatski, M., Henderson, H., Schmidt, N., Rosenthal, S., Myers, L., and Martin, D. A randomized treatment trial: Single versus 7 day dose of metronidazole for the treatment of *Trichomonas vaginalis* among HIV-infected women. *Journal of Acquired Immune Deficiency Syndromes* (2010), 55(5):565-571.

7) Gatski, M., Mena, L., **Levison, J.**, Clark, R., Henderson, H., Schmidt, N., Rosenthal, S., Martin, D., and Kissinger, P. Patient-delivered treatment and *Trichomonas vaginalis* repeat infection among HIV-infected women. *Sexually Transmitted Disease* (2010), 37(8):502-5.

**8) Levison, J.**, Gillespie, S., and Montgomery, E. Think twice before recommending pre-masticated food as a source of infant nutrition. *Maternal and Child Nutrition* (2011), 7, 104.

9) Kissinger, P., Mena, L., **Levison, J.**, Clark, R. A., Gatski, M., Henderson, H., Schmidt, N., Rosenthal, S., Myers, L., and Martin, D. The influence of bacterial vaginosis on the response to *Trichomonas vaginalis* treatment among HIV-infected women. *Sexually Transmitted Infections* (2011), 87(3):205-208.

10) Coleman, M.A., **Levison, J.**, and Sangi-Haghpeykar, H. HPV vaccine acceptability in Ghana, West Africa. *Vaccine* (2011) May 23. 29(23):3945-3950.

**11) Levison, J.**, Williams, L., Moore, A. McFarlane, J., and Davila, J. Educating professionals in obstetrics and gynecology regarding rapid human immunodeficiency virus (HIV) testing in labor and delivery: A local initiative. *Maternal and Child Health Journal* (2012), 16(9), 1748-1753.

12) Robicheaux McKinney, J., Halpern, M., **Levison, J.**, Callender, G., Lerebours-Nadal, L., and Fernandez-Esquer, M.E. Factors influencing use of family planning services among HIV-positive women in the PMTCT program at Clinica Familia La Romana in the Dominican Republic. *Sexuality and Research* (2013), 10(3):200-207.

13) Nacius, L., **Levison, J.**, Minard, C., Spence, L., and Davila, J. Serodiscordance and disclosure Among HIV-Positive Pregnant Women. *AIDS Patient Care and STDs* (2013), 27(4):242-7.

14) Kissinger, P., Adamski, A., Clark, R., Mena, L., **Levison, J.**, and Martin, D. Does antiretroviral therapy interfere with the treatment of *Trichomonas vaginalis* among HIV+ women? *Sexually Transmitted Diseases* (2013), 40(6):506-7.

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Accepted or in press:

2. ***Other full papers***

a. published without review by peer group

**Levison, J.** Prevention of Perinatal Transmission of HIV in 2008. *Research Initiative/ Treatment Action* (2008), 13(2), 41-46.

b. in preparation

3. ***Abstracts:*** none

4. ***Books:*** none

5. ***Other works communicating research results to scientific colleagues:***

6. ***Other works communicating research results to general public***

HIV and pregnancy. *Houston Chronicle* 1-18-07.

Rapid HIV testing. KUHf Houston public radio 3-9-07.

<http://www.kuhf.org/site/News2?page=NewsArticle&id=19620>

### III. TEACHING INFORMATION

#### A. Didactic course work

## **BCM**

2000-present

Lectures on topics including abnormal Paps, contraception, infertility, and abnormal uterine bleeding to Family Medicine residents (minimum of two per year)

2003- present                      Annual lecture

Women's Health section of International Health, BCM International Health track class (two to three hour seminar for 40-50 second year medical students)

2007-present                      Annual lecture

Women's Issues in International Health (focus on obstetric fistula, female genital cutting and HIV). BCM International Health track (one hour lecture to 30-40 first year medical students)

2012-present                      Semi-annual lecture

Gynecologic and Obstetric Care of Women Living with HIV in Low Resource Settings. BCM National School of Tropical Medicine.

2013 and 2014 Women's Health: A Focus on Female Genital Cutting. BCM first year medical school women's health elective.

## **University of Texas School of Public Health**

2005-2008 Lecture on prevention of perinatal HIV transmission to Dr. Richard Grimes' Masters in Public Health class

2012 Lecture on HIV and women to Dr. Sheryl McCurdy's PhD class on global issues related to HIV

## **B. Non-didactic teaching**

### **1. Resident teaching**

2001-present

Precept Family Medicine residents in consultative Ob/Gyn and HIV-associated Ob/Gyn as part of their two month Women's Health rotation (20-26 hours/week)

2005-2010

Precept Obstetric and Gynecology residents in consultative Ob/Gyn and HIV-related Ob/Gyn as part of an elective in HIV Ob/Gyn (20 hours/week about 6 months per year)

2003-2011

Precept pediatric residents on infectious disease rotation in prenatal HIV clinic (about 12 half day sessions per year)

Resident mentoring: Ob/Gyn resident research projects (see research information above)

Celestine Tung 2006  
Anitra Beasley 2007  
Monica Mendiola 2008-9  
Aba Coleman 2009-10  
Amy Kung 2009-11  
Robaab Siddiqui 2010-2011  
Karen Sargent 2012-2014  
Stephanie Smeltzer 2013-2016  
Chioma Erondy 2016-2017  
Emily Bowman 2018-2019

Physician assistant mentoring: Research project  
Lori Nacius 2010-2011  
Scott Braddock 2015-2016

**2. *Clinical fellow training***

2003-2011  
Precept pediatric infectious disease fellows on retrovirology rotation in prenatal HIV clinic (about 4-6 half day sessions/year)  
2015-present  
Precept maternal fetal medicine fellow in prenatal HIV clinic (1-2 weeks/year)

**3. *Research fellow training:***

2017-present  
Post-doc research coordinator who coordinated multiple clinical research projects

**4. *Graduate student training***

--Have had eight to ten visiting physicians and nurses from Lesotho, Swaziland, Botswana, and The Netherlands attend my HIV clinics (up to 12 hours/week each for 4-6 weeks during 2003-2006)  
--Precepted Aitebureme Aigbe, DrPH candidate in at UT School of Public Health 2012-2014  
--Multiple MPH students 2014-2018

**5. *Medical student mentoring***

Lee Bar-Eli MS3 2006-7: precepted in clinic and supported her in obtaining Fogarty fellowship for international experience in Lesotho (scheduled for 2008)

Jennifer M. Lopez MS3 2007-8: precepted in clinic and supervised her on trip to La Romana, Dominican Republic 7-08

Jennifer Robicheaux McKinney/ Class of 2014: precepted in clinic, was mentor from 2000-2014, co-authored study on contraception among HIV-positive teens



2009-present

Precept medical student on core ob/gyn rotation one half day per week year round

2010-2016

Precept third year medical student on LACE rotation one half day per month year round

2013-2016

Precept first year medical student in PPS course one half day every two-three weeks year round

2016-present

Precept second year physician assistant students 1-3 days per month

## **6. Curriculum development**

2002-present

Developed reading list for two month Family Medicine residency Women's Health rotation and one month Ob/Gyn elective in a community health center

2007-2012

Liaison between BCM Dept of Ob/Gyn and resident/medical student elective in La Romana, Dominican Republic. With Columbia University on site physician, annually revamp schedule for visiting student or resident experience in outpatient HIV clinic, public hospital, and private clinic (average of 2 per year)

2010-2011

Worked with Family Medicine, Internal Medicine, and Emergency Department faculty and 6-8 medical students in the International Track to restructure the second year International Track curriculum. Recruited two professors from the University of Texas School of Public Health to present information on development of public health interventions as well as methods to monitor and assess interventions; they are now an integral part of the program.

2012-present

Development of online tool to educate clinicians, nurses, and social workers about diagnosis/management of HIV in pregnancy/in labor, management of the HIV-exposed newborn, routine HIV screening in a gynecology practice, and prevention of congenital syphilis (2 hours CME and CNE for physicians, nurses, and social workers).

Perinatal HIV Prevention. Course #1029521. <https://tx.train.org>

## **C. Lectures**

### **1. International**

Practical Management of HIV in Pregnancy. Mbabane, Swaziland. March 2004.

Frankfurt, Germany. Perinatal transmission of HIV and vaginal delivery: the Houston experience. German Austrian AIDS Congress. June 30, 2007.



Katmandu, Nepal. Prevention of Mother to Child HIV Transmission/Training of Trainers. UNICEF/Baylor International Pediatric AIDS Initiative. June 21-25, 2010.

**Levison, J.**, Aagaard, K., and Antony, K. Saving Lives at Birth: Being Born Too Soon. March of Dimes-sponsored lecture to clinical officers, nurses, and health workers at the Baylor-Malawi Center for Excellence, Lilongwe, Malawi. May 9, 2015.

**Levison, J.**, Aagaard, K., and Antony, K. HIV, Pregnancy, and Preterm Birth. March of Dimes-sponsored lecture to clinical officers, nurses, and health workers at the Baylor-Malawi Center for Excellence, Lilongwe, Malawi. May 9, 2015.

**Levison, J.** HIV and Women: A Global Challenge. Lecture to physicians, clinical officers, and nurses at the Ethel Mutharika Maternity Wing, Kamuzu Central Hospital, Lilongwe, Malawi, January 23, 2016.

Smith, H, Eppes, C, Peters, Y, Deverson, C, Davis, V, and **Levison, J.** et al. Poster: Impact of Group Prenatal Care on Postpartum Retention in Care Among Women Living with HIV. Seventh International Workshop on HIV and Women. Seattle, WA, February 11-12, 2017.

**Levison, J.**, Pollock, L and Friedman, N. Disclosure of HIV Status to Partners. Seminar for practitioners attending Conference for Retroviruses and Opportunistic Infections. Seattle, WA, February 15, 2017.

Pollock, L., **Levison, J.**, and Matthews, L. Does U = U in the Perinatal Setting? Seminar for practitioners attending Conference for Retroviruses and Opportunistic Infections (CROI). Boston, MA, March 6, 2018.

Dilemmas in the Choice of Antiretroviral Therapy in Women. Roundtable hosted by the Clinicians Consultation Center, Conference for Retroviruses and Opportunistic Infections. Seattle, WA, March 5, 2019.

## ***2. National***

Annual Northwest Obstetrics and Gynecology Conference. HIV in Pregnancy. Everett, Washington, April 1, 2004.

Annual Northwest Obstetrics and Gynecology Conference. Metabolic Syndrome and Ob/Gyn. Everett, Washington, April 1, 2004.

Grand Rounds presentation to the Department of Obstetrics and Gynecology, Santa Clara Valley Medical Center, San Jose, California. HIV in Pregnancy: Prevention of Perinatal Transmission. April 2005.

Santa Clara Valley Medical Center, San Jose, California. International Challenges: Prevention of Perinatal HIV Transmission. April 2005.

IV Cumbre de Educadores de Tratamientos del VIH/SIDA. Prevencion de la Transmision Perinatal de VIH. Houston, Texas, June 19, 2008 (presented in Spanish).

Centers for Disease Control, invited panelist, for campaign to educate gynecologists about routine HIV screening. Atlanta, Georgia, March 25, 2009.

Office of Family Planning/Office of Population Affairs HIV Prevention Project Annual Technical Support Conference. Reproductive health needs of HIV-positive women. New Orleans, Louisiana, March 16, 2011.

2012 Federal Training Centers Collaboration Meeting. Preconception and Reproductive Health for Women and Men Living with HIV. Dallas, Texas, April 24-26, 2012.

Reproductive Health and HIV: Preconception Care, Family Planning, and Safer Conception. Teleconference sponsored by FXB Center at UMDNJ, Drexel University, Jefferson School of Medicine, and Baylor College of Medicine and supported by Centers for Disease Control. May 15, 2012.

2012 Elimination of Mother-to-Child HIV Transmission Stakeholders' Meeting. Invited speaker on breastfeeding among HIV-positive women in the United States. Sponsored by FXB Center, Centers for Disease Control, and Health Research and Educational Trust (HRET). Washington, D.C. September 13, 2012.

2013 American Conference for the Treatment of HIV (ACTHIV) annual conference. Invited speaker on Preconception Care, Contraception, and Safer Conception for Women, Men, and Couples Living with HIV. Denver, Colorado, March 21-23, 2013.

2014 HIV/STD Update: Advances in Care and Prevention. Invited speaker on Reproductive Health and HIV. Sponsored by Midwest AIDS Training and Education Center. Indianapolis, Indiana, May 9, 2014.

2014 What Is New in the Perinatal Guidelines? Recommendations for Use of Antiretroviral Drugs in Pregnant HIV-1-Infected Women for Maternal Health and Interventions to Prevent Perinatal HIV Transmission in the United States. CDC's Elimination of Mother-to-Child (EMCT) Stakeholders Group, in collaboration with the François-Xavier Bagnoud (FXB) Center and AETC National Resource Center. National webinar, May 20, 2014.

Introduction to CenteringPregnancy/HIV. Presentation at CDC-sponsored Elimination of Maternal Child Transmission of HIV Panel. Washington, DC, May 29, 2014.

New Frontiers in Safe Sex. National Hemophilia Foundation Annual Meeting, Grapevine TX, August 15, 2015.

Retention in Care After Delivery among Women Living with HIV: Innovation Approaches. Elimination of Mother to Child Transmission Stakeholders Group. Washington, DC, July 28, 2016.

Pre-Exposure Prophylaxis: What Obstetricians and Gynecologists Need to Know. With Carey Eppes, MD and Kevin Ault, MD. Webinar sponsored by the American College of Obstetricians and Gynecologists and CDC's Expert Panel on HIV Reproductive Health and Preconception Care, October 26, 2016.

Update in Perinatal Guidelines 2016. Presentation to the Clinicians Consultation Center with Lisa Rahangdale. University of California San Francisco, November 9, 2016.

What is New in the 2016 Perinatal HIV Treatment Guidelines? With Lisa Rahangdale. National webinar sponsored by the Elimination of Mother to Child Transmission Stakeholders Group, December 7, 2016.

HIV and Women. AIDS Clinical Conference series. University of Washington, Seattle, April 18, 2017.

Post-exposure Prophylaxis in Women/New Frontiers in Safe Sex. Women and HIV International Clinical Conference (WHICC). San Antonio, TX, June 11-12, 2017.

Update on Women Living with HIV. Presented to Project LEAP (HIV community leadership training), sponsored by the Ryan White Program at the Harris County Public Health and Environmental Services, June 17, 2017.

CenteringPregnancy: Adapted for Women Living with HIV. National webinar sponsored by the Centering Health Institute (Boston), October 10, 2017.

The Controversy Surrounding Breastfeeding among Women Living with HIV in High Resource Countries. Mountain West AIDS Education and Training Center webinar, November 2, 2017.

Pregnancy Management and HIV. Southeast AIDS Education and Training Center webinar, January 10, 2018.

What is New in the Guidelines November 2017. Clinicians Consultation Center, webinar for University of California San Francisco clinical staff, January 24, 2018.

Update in the Perinatal Guidelines. National webinar, February 27, 2018.

Reproductive Decision Making, Sexual Health, and HIV. Presentation at ACT HIV, Chicago, IL, April 24, 2018.

Innovations in Prenatal Care of Women Living with HIV. Presentation at CityMatch, Portland, OR, September 12, 2018.

Evaluation of HIV-Adapted CenteringPregnancy Group Prenatal Care Among Women Living with HIV in Houston, Texas. Poster at the Society for Maternal Fetal Medicine, Las Vegas, NV, February 15, 2019.

Approaching HIV Epidemic from a Reproductive Justice Framework. 2019 Washington State HIV Conference. Spokane, WA, May 17, 2019.

Management of Pregnancy for Women Living with HIV. Mid-Atlantic States AIDS Education Center Training webinar. May 22, 2019.

Evaluation of HIV-Adapted CenteringPregnancy Group Prenatal Care Among Women Living with HIV in Houston, Texas. Oral presentation by Jennifer McKinney, Infectious Disease Society of Obstetrics and Gynecology, Big Sky, MT, August 8, 2019.

### **3. *Regional***

Women and HIV International Clinical Conference. Office Gynecology and the HIV+ Woman. San Antonio, Texas, March 7, 2007.

Panelist and facilitator for CDC workshop. Implementation of HIV Screening in Acute Care Settings. San Antonio, Texas, February 25-26, 2008.

16<sup>th</sup> Texas HIV/STD Conference. HIV Perinatal Transmission Prevention Projects in Texas—presented in collaboration with Jenny McFarlane from the Texas Department of State Health Services, Austin, Texas, May 19, 2008.

Women and HIV International Clinical Conference (WHICC). Office Gynecology and the HIV+ Woman. Dallas, Texas, April 30, 2008.

AIDS Education Training Center conference. Rapid HIV Testing in Labor and Delivery...and Beyond. Amarillo, Texas, June, 2008.

Triangle AIDS Network 21<sup>st</sup> AIDS Update Conference. Prevention of Perinatal HIV. Beaumont, Texas, October 13, 2008.

Valley AIDS Council 16<sup>th</sup> Annual HIV-AIDS Update Conference. Rapid Testing in Labor and Delivery. South Padre Island, Texas, October 30, 2008.

Kaleidoscope: 26<sup>th</sup> Annual Perinatal Nursing Symposium. Rapid HIV Testing in Labor... and Beyond. Galveston, Texas, February 18, 2009.

Triangle AIDS Network CME for physicians, nurses and social workers. Rapid HIV Testing in Labor and Delivery. Beaumont, Texas, March 17, 2009.

St. David's Hospital CEU for nurses, social workers. Rapid HIV Testing in Labor and Delivery...and Beyond. Round Rock, Texas May 21, 2009.

Valley Baptist Hospital Harlingen CEU for nurses, social workers. Rapid HIV Testing in Labor and Delivery...and Beyond. Harlingen, Texas July 23, 2009.

St Luke's Baptist Hospital CEU for nurses, social workers. Rapid HIV Testing in Labor and Delivery...and Beyond. San Antonio, Texas, September 3, 2009.

Rio Grande Valley Perinatal Symposium Rapid HIV Testing in Labor and Delivery. Harlingen, Texas, November 7, 2009.

Women and HIV International Clinical Conference (WHICC). Panelist – Update on HIV Testing of Pregnant Women. Houston, Texas, January 25, 2010.

17<sup>th</sup> Texas HIV/STD Conference. The Journey to Change Texas HIV Testing of Pregnant Women. Austin, TX May 25, 2010

Update on Texas HIV Testing Requirements for Pregnant Women:

2-19-10 St. Joseph Medical Center, Houston

4-9-10 HIV Update Conference, Panhandle AIDS Support Organization (PASO), Amarillo

4-26-10 Beaumont Baptist Hospital, Beaumont

6-29-10 Cypress Fairbanks Hospital, Houston

7-1-10 Christus-St. Elizabeth Hospital, Beaumont

11-23-10 Nagadoches Medical Center, Nacogdoches

Jasper-Newton County Medical Society. Reproductive Health Needs of HIV-Positive Women/Routine HIV Testing. Jasper, Texas, October 17, 2012.

Amarillo Area HIV/STDs Symposium 2013. Reproductive Health Needs of HIV-Positive Women. Amarillo, Texas, April 12, 2013.

American College of Obstetricians and Gynecologists District 11/Texas Association of Obstetricians and Gynecologists (TAOG). Update on STDs. San Antonio, Texas, September 28, 2013.

2014 Women and HIV International Clinical Care. Invited speaker on Reproductive Health and HIV: Reproductive Health: Preconception Care, Contraception and Safer Conception. Sponsored by Texas Oklahoma AIDS Education and Training Center. Webinar (Dallas, Texas), May 16, 2014.

Houston Global Health Consortium. Challenges to Developing Health Care Programs...Wherever You Are. Presented with Jennifer Robicheaux McKinney. Baylor College of Medicine, May 2014.

Women's Health Symposium. So You Have HIV and You Want to Have a Baby? Houston, TX, May 21, 2015.

PrEPHouston: HIV Prevention Summit. New Frontiers in Safe Sex including PrEPception. Presented in Houston, TX, February 5, 2016.

2018 Texas HIV/STD Conference. Sex, Reproductive Health, and HIV. Austin, TX, November 29, 2018.

Women and HIV 2019: Reproductive Decision Making and Sexual Health. University of Texas Medical Branch, Galveston, TX, March 14, 2019.

Abnormal Cervical Cytology in 2019: What Do I Do Next? Primary Care Update 2019. Baylor College of Medicine, Houston, TX, March 23, 2019.

#### 4. *Local*

Obstetrics and Gynecology Grand Rounds presentation. Baylor College of Medicine Prevention of Perinatal Transmission of HIV. January 29, 2003.

Obstetrics and Gynecology Resident Research Day, discussant of presentation on high false positive rate of ELISA testing in a predominantly Hispanic prenatal population (Zacharias, N.), May 2003.

Guest lecturer for Dr. Richard Grimes' course on HIV/AIDS, University of Texas School of Public Health. Women and HIV. September 29, 2003.

Obstetrics and Gynecology Grand Rounds presentation, Baylor College of Medicine. Women and HIV. February 25, 2004.

Infectious disease physicians and staff conference at Thomas Street Clinic, Houston, Texas. HIV in Swaziland. June 29, 2004.

Guest lecturer for Dr. Richard Grimes' course on HIV/AIDS, University of Texas School of Public Health. HIV in Pregnancy. September 28, 2004.

Obstetrics and Gynecology Grand Rounds presentation. Baylor College of Medicine. International Challenges: Prevention of HIV Transmission. January 19, 2005.

Guest lecturer for Dr. Richard Grimes' course on HIV/AIDS, University of Texas School of Public Health. Women and HIV. September 2005.

Guest lecturer for Dr. Richard Grimes' course on HIV/AIDS, University of Texas School of Public Health. Women and HIV. September 2006.

Harris County Hospital District Annual HIV conference, Houston, TX. International Challenges in HIV. December 2005.

2005-2008 Multiple talks to physicians and nurses on Rapid HIV testing in Labor and Delivery (part of research projects above) at Ben Taub General Hospital, BCM Department of Obstetrics and Gynecology residents lecture series, LBJ Hospital, Houston Perinatal Task Force—4 to 6 presentations per year

Global Coalition of UNAIDS, University of Texas School of Public Health. Prevention of Perinatal HIV Transmission. June 12, 2006.

Harris County Hospital District coders, LBJ Hospital, Houston, TX. Coding and Gynecology: What Does the Gynecologist Really Do? July 2006.

Baylor Pediatric AIDS Initiative (BIPAI) first Pediatric AIDS Corps (PAC) physicians orientation. Prevention of Perinatal HIV Transmission—in the U.S. and Beyond. July 2006.

Association of AIDS Nurses (ANAC), Houston, TX. Women and HIV. August, 2006.

Obstetrics and Gynecology Resident Research Day, discussant of presentation on factors influencing breastfeeding intentions among low income Hispanic women (Champion, S.), May 2007.

University of Texas School of Public Health. World AIDS Day. HIV and Pregnancy: What is Happening in Houston? December 1, 2008.

Infectious disease physicians and staff conference at Thomas Street Clinic, Houston, Texas. The Serodiscordant Couple. December 2, 2008.

Texas Children's Hospital Women's Services Nursing leadership. Update on Texas HIV Testing Requirements for Pregnant Women. Houston, TX. November 18, 2009.

Thomas Street Health Center – staff conference. Update on Texas HIV Testing Requirements for Pregnant Women. Houston, TX. December 3, 2009.

Obstetrics and Gynecology Grand Rounds presentation. Baylor College of Medicine Update on Texas HIV Testing Requirements for Pregnant Women. Houston, TX. February 10, 2010.

Harris County Hospital District/AIDS Education Training Center/Department of State Health Services. Fundamentals of HIV Treatment and Disease Management: Managing Special Populations. Houston, TX. September 10, 2011.

Obstetrics and Gynecology Grand Rounds presentation. Baylor College of Medicine. Reproductive Health and HIV. Houston, TX. October 10, 2012.



Houston Department of Health and Human Services/Center for AIDS Research. Why do women drop out of care after they have their babies? Community Scientific Forum. Houston, TX. April 22, 2014.

Rice University Department of Bioengineering class. Update on Challenges to Developing Health Care Programs...Wherever You Are. Houston, TX. September 16, 2014.

AIDS Research Forum. New Frontiers in Safe Sex: HIV, Serodiscordant Couples, and PrEPception. Baylor College of Medicine, Houston, TX, February 15, 2016.

What is New in HIV Testing. Lecture to Maternal Fetal Medicine fellows. Texas Childrens Hospital Pavilion for Women, Houston, November 4, 2016.

Innovations in Retention in Care Among Women Living with HIV. Lecture to Adolescent Medicine fellows. Texas Childrens Hospital, Houston, November 4, 2016.

New Frontiers in HIV: What Do Obstetrician/Gynecologists Really Need to Know? Department of Ob/Gyn Grand Rounds, Baylor College of Medicine, January 25, 2017.

HIV and Women: CROI 2017 Update. Thomas Street Health Center, Houston, TX, March 7, 2017.

Women and HIV. Project LEAP (community education program). Harris County Department of Health and Environmental Services, Houston, TX, June 21, 2017.

Women and HIV: 2018 Update from the Conference for Retroviruses and Opportunistic Infections, Thomas Street Health Center, Houston, TX, April 2, 2018.

Breastfeeding and HIV in the United States: A Reasonable or Unreasonable Option? Department of Neonatology, Texas Children's Hospital, Houston, TX March 15, 2019.

What Women Around the World Have Taught Me. National Perinatal Association Student Society. Baylor College of Medicine, Houston, TX, February 12, 2019.

Women and HIV: 2019 Update. Thomas Street Health Center, Houston, TX, April 30, 2019.

Going Beyond (what is expected of physicians). University of Houston, Faculty Senate Partnerships conference, Houston, TX, October 4, 2019.

**D. Visiting professorships:** none



#### **IV. MEDICAL AND SERVICE INFORMATION**

##### **A. Patient care responsibilities at BCM**

###### **1. *Department –wide***

Division of time:

- 50% direct patient care for HIV+ women at Thomas Street Clinic and Northwest Health Center including 24/7 on call for clients and personally attending the deliveries of Women's Program clients (at Ben Taub General Hospital and Texas Childrens Hospital Pavilion for Women). 15-20 patients per week seen as outpatients. 60-70 deliveries per year. Quality indicators include less than 1% transmission of HIV from mother to child and increase in annual Paps from 25% to 75% in HIV+ female population at Thomas Street Clinic.
- 20% direct patient care/Ob/Gyn consultative service for the Department of Family Medicine at Northwest Health Center. 20-35 patients per week.
- 10% Rapid HIV Testing education for professionals. Includes development of computer modules for education of physicians and nurses regarding HIV testing and prevention of perinatal HIV transmission and development of FIMR-HIV methodology for Texas to assess causes of cases of perinatal HIV transmission.
- Consultant for the University of California, San Francisco (UCSF) Clinicians Consultation Center (real time advising clinicians nationally on management of HIV in pregnancy)
- Other: supervision of Ob/Gyn residents on Labor and Delivery 3 times per month (7-12 deliveries per 14 hour shift) and in surgery once or twice per month (3-5 major and minor cases per session)
- Supervision of Family Medicine residents in clinic
- 2012-present Development of a CenteringPregnancy model tailored to the needs of HIV-positive pregnant women

###### **2. *Section or specialty:***

Development of global health initiative and research (Malawi) 10% time 2011 through 2017

**B. Clinical lab responsibilities at BCM:** none (though work closely with Harris Health Laboratory in the interpretation of equivocal HIV tests)

##### **C. National education or voluntary health organization participation:**

2006-present

Member, Doctors for Change (local advocacy group) [www.doctorsforchange.org](http://www.doctorsforchange.org)

April 2007

Participated in UT United We Serve volunteer day

2009-2011

President, Doctors for Change (local advocacy group) [www.doctorsforchange.org](http://www.doctorsforchange.org)

2012-present

Pro bono examinations for Tahirih Justice Center asylum seekers

2013 and 2014

Houston Refugee Center clinic health fair volunteer

2013-present

Member, Board of Directors, Doctors for Change (see above)

2017-present

Member, Advisory Board, Schweitzer Fellowship Foundation, which provides chosen students with leadership in community health project planning

**D. Administrative assignments at BCM:** Institutional Safety committee 2007- present

**E. Other pertinent information**

1985 – 1986

Chair, Department of Obstetrics and Gynecology  
Providence General Hospital of Everett  
Everett, Washington

1986 – 1995

Medical Director  
Prenatal Care Center (providing care for low-income women)  
General Hospital Medical Center of Everett  
Everett, Washington

2003-present

Physician coordinator, Harris County Hospital District Women's Program\*\*, providing obstetric and gynecologic care for women with HIV

2005-2008

Chair, Harris County Hospital District HIV OB Task Force

2007-present

Chair, Perinatal Task Force (public and private hospital consortium with primary focus on bringing rapid HIV testing to Labor and Delivery and educating clinicians statewide)

2008-present

Member, Texas Consortium for Perinatal HIV Transmission—affiliate of Department of State Health Services/Division of HIV/STD—developed guidelines for legislation passed 6-5-09 and enacted 1-1-10 regarding timing of HIV testing in pregnancy  
<http://www.aidseducation.org/documents/PerinatalHIVGuidelines.pdf>

2013-present

Initiator/PI of CenteringPregnancy/HIV: first in the U.S. group prenatal care program for HIV-positive pregnant women. Part of a research study to assess 1) changes in knowledge/attitudes toward HIV and 2) retention in care one year postpartum. We predict higher fund of knowledge, more positive self-image, and higher rate of retention in care one year postpartum after group intervention (compared to controls).

\*\*The Harris Health System Women's Program offers:

- Prenatal care for HIV+ women
- A unique collaboration between BCM and UT Health Science Center
- A multidisciplinary team approach to care involving physicians, nurses, nurse practitioner, nurse educator, social worker, and case managers with weekly review of ongoing clients
- Personalized care for a vulnerable population
- Resident and medical student opportunities for clinical rotations and research