

American Society of Pediatric Nephrology

May ~ June 2019

President's Corner

Dear Colleagues,

Thank you all for a most successful ASPN/PAS annual meeting! We have much to celebrate as a society. Congratulations to Dr. Bruder Stapleton (St. Geme Award), Dr. Brad Warady (ASPN Founder's Award and Dr. Joseph Flynn (Henry L. Barnett Award). Also, Kudos to our trainee research awardees- Drs. Tahagod Mohamed (Basic Science) and Stephanie Benoit (Clinical Science).

Speaking of trainees- in follow-up to my previous Kidney notes section and the ASPN presidential address we will be focusing on our workforce issues at the upcoming June Council meeting. Thank you for the input from our general members. Some of the suggestions have included; petitioning for a 2-year clinical fellowship to the ABP, focusing on loan repayment for trainees, improving salary standards and increasing our exposure to students and residents through a variety of mechanisms. I believe we will need a multipronged approach. Given the critical nature of our workforce, we will need an all hands on-deck approach as we move forward. We will also be reviewing our strategic plan for the next 5 years. Dr. Michael Somers- president-elect will be focusing on this moving forward.

I would like to mention the deepfelt gratitude for our outgoing treasurer Dr. Stuart Goldstein. Stu was a steady and trusted hand moving us through some of the changes that we have gone through over the last few years including moving to Degnon as our management company. We are in a strong financial position moving forward. Dr. Adam Weinstein has assumed the treasurer's portfolio and I am sure will do a stellar job. Thanks Stu!

I wish you all a happy, healthy and amazing summer!

Sincerely, Patrick Brophy Patrick Brophy@urmc.rochester.edu

ASPN Corporate Liaison Board



Please send us (<u>info@aspneph.org</u>) announcements and photos of pediatric nephrologists receiving awards, giving important lectures and news of other accomplishments so we can share them in *KidneyNotes*.



Committee Updates

Certification Committee Update

Keeping Current in General Pediatrics While Working as a Nephrologist – Using the ABP's "Question of the Week" for Fun and Continuing Certification:

Many pediatric nephrologists (in fact, most of us, according to the American Board of Pediatrics) no longer maintain certification in general pediatrics. But the truth of the matter is that we serve in the role of primary care provider for many of our complex patients. Additionally, general pediatrics remains of interest too, and we are intrigued by new developments, guidelines, and research findings – after all, we loved pediatrics often long before we loved nephrology.

Several years ago I was asked to participate in the pilot of a new ABP product known as "Question of the Week". And I'm still doing it! Each Wednesday, I receive an email with a link to a short abstract and a question. After I answer the question to the best of my (frequently not so great) ability, I read a page or two of information adding background and additional discussion about the original abstract, after which I answer the question a second time – almost always to a successful outcome. The reward (in addition to MOC Part 2 points) is a "Pearl" of additional knowledge, often a taste of the historical or the unusual. In truly only 5 minutes a week, I touch my roots as a general pediatrician and get Part 2 credit (yes, this counts for nephrologists!).

I encourage you to join too - for more information and to sign up (it's easy!!): https://www.abp.org/content/question-week-qow

Submitted by Vicky Norwood, MD on behalf of the ASPN Certification Committee

NEW MOC OPPORTUNITY: 2019 PEDIATRIC NEPHROLOGY SELF-ASSESSMENT

Intended audience: Nephrologists Estimated time to complete: 6 hours MOC credit: 10 MOC Part 2 points Description: 20 online questions Sponsor: American Board of Pediatrics CME credit: 6 credits

Cost: Free with MOC enrollment

How to access: Login into ABP website, click on ABP Portfolio, Go to My MOC Dashboard, click on Find Self-assessment activities (Part 2), search Nephrology Self-Assessment

Submitted by Richard Blaszak, MD, on behalf of ASPN Certification Committee

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Research Committee Update

As spring turns to summer, the PAS/ASPN meeting has stimulated the idea centers in the brain, and the abstract deadline for ASN's Kidney Week fast approaches, we on the research committee want to help you turn your new or refined research idea into a successful grant or manuscript. Below we include a few helpful resources for grantwriting and manuscript publication. Additionally, one of our goals is to maintain an up-to date list of pediatric nephrology research consortia which includes approximate numbers of member sites, numbers of past and current studies, as well as coordinator contact information. The list is located on our ASPN Research Committee website, but you must be logged in through the members only section to view (<u>https://www.aspneph.org/committees/research-committee/</u>). If you would like your research consortium listed, or wish to update anything about your consortium, feel free to contact one of the research committee co-chairs.

Grantwriting/Research Development:

ASPN Grant Management Workshop: Are you preparing for an upcoming grant submission? Every year at ASN Kidney Week, investigators can receive feedback on their draft grant applications. Submission of a Specific Aims page is required, and drafts of Research Strategy (and Career Development Plan for K-awards) are encouraged. Experienced reviewers are paired with funded junior or mid-career scientists seeking to gain experience reviewing grants, and together will provide feedback in an NIH-style Mock Study Section. If interested in having a grant application reviewed, please contact one of research committee co-chairs.

Manuscript Submissions: In efforts to standardize reporting of original research in hopes of avoiding missing and incomplete information, many journals have adopted the use of guidelines established by experts for reporting specific types of research. Links to many different guidelines can be found at <u>http://www.equator-network.org/</u>. This resource also contains specialty specific information including some renal specific guidelines as well as pediatric specific guidelines. We hope you will use these resources to get your next big idea funded or published.

Submitted by Laurel Willig MD, MS on behalf of the ASPN Research Committee

Announcements

SAVE THE DATE

ASPN 2019 Board Review Course September 13-15 Nationwide Children's Hospital Columbus, OH <u>Registration Now Open!</u>

ASPN Marketplace

APSN Marketplace is the place to advertise employment opportunities in Pediatric Nephrology. To place an advertisement, go to <u>https://www.aspneph.org/employment-ads/</u>.

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Congratulations!

Julie Goodwin has been elected to the Eastern Society of Pediatric Research Council!

The National Kidney Foundation and KIDney Notes

The National Kidney Foundation (NKF) is excited and grateful for the invitation to contribute periodically to ASPN's KIDney Notes. This starts a collaboration between our two organizations, with the aim of increasing access to educational materials and resources for families living with chronic kidney disease (CKD).

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The NKF supports patients and clinicians in preventing, diagnosing, and treating kidney disease. We offer a vast array of educational <u>materials</u> <u>and resources</u> to help patients with all aspects and all stages of kidney disease.

Our <u>professional offerings</u> include CME meetings and programs, peer-reviewed journals, resources for all allied nephrology health care professionals, and the NKF annual <u>Spring Clinical Meetings</u>, the only conference of its kind that focuses on translating science into practice for the entire healthcare team.

The ASPN website now enables direct access to numerous short NKF <u>articles</u> on many aspects of kidney disease in children.

We are looking forward to working with ASPN toward improving care for pediatric nephrology patients. Toward doing this effectively, NKF has launched a Family Survey for parents whose kids have kidney disease. We hope you will share this <u>Survey</u> link with your families and visit us through the ASPN site and directly at <u>https://www.kidney.org/</u> !

Month of Military Child

The U.S. military moves their people each summer, and orders went out this April, which was the Month of the Military Child. There are 2.1 million children in the Military Health System, and over 2/3 are cared for by you and your colleagues. If you are caring for a military-connected child covered by TRICARE and they are moving to the greater Washington DC area (Maryland/Virginia/DC) this summer, please contact me so we can arrange a warm handoff. The Walter Reed service can also help with handoffs to other locations as a child with kidney disease will limit where the family can be stationed.

CAPT Greg Gorman (gregory.gorman@usuhs.edu) and COL Brent Lechner (brent.lechner@usuhs.edu) Phone 61-KIDNEY-62 and email renal@nccpeds.com



Quality Improvement Coaching Conference

Atrium Health's Levine Children's Hospital is currently accepting applications for our sixth annual Quality Improvement Coaching Conference (LCH QuICC) for fellows October 14 - 16, 2019 in Charlotte, NC. This pediatric QI conference is an opportunity for intensive QI coaching to advance physician knowledge and skills in improvement science, with an emphasis on QI methodology and tools. Fellows will present their current QI projects, get expert critiques, and benefit from collaboration with both QI faculty and participants. The course group is limited to approximately 20 fellows to ensure one-onone coaching and optimize the learning environment. More than one fellow from your institution may submit an application. The program encourages project submissions at all stages of development; QI novices and/or early projects are welcome to apply. If you are unsure whether your project fits the improvement science framework, please contact Sarah Mabus at sarah.mabus@atriumhealth.org. Project submissions must be sent to sarah.mabus@atriumhealth.org by the submission deadline of May 30, 2019. Invitations to participate will be extended in July. Those fellows selected for presentation will have transportation, lodging (shared rooms assigned), and most meal expenses provided by Atrium Health Levine Children's Service Line. There is no conference fee. To allow for maximal coaching and to accommodate as many fellows as possible, we require attendance for the entire conference. Arrangements cannot be made for family attendance. Please click here for the application.

Announcements

Global Opportunities in Pediatric Nephrology brought to you by the ASPN Global Health Committee

Teach and Train

- Engage in established educational programs aimed at advancing • nephrology in the developing world:
 - IPNA teaching courses: conducted by nephrologists o with outstanding teaching credentials; sessions are held all over the world (Russia, Jordan & Philippines coming up in 2019!)
 - o ISN educational ambassadors: expert led, hands on training sessions funded for 1-4 weeks
- "Reverse" fellowships for nephrologists from well resourced settings to travel to and train staff in a low or middle income country for 1 year

Join A Global Effort

- 0-by-25: launched by ISN with the goal of eliminating preventable • deaths from AKI worldwide by 2025
- Saving Young Lives: collaboration to develop sustainable peritoneal dialvsis for AKI in sub-Saharan Africa and SE Asia
- ISN's Renal Disaster Relief Task Force: provides care to those affected by natural disasters
- World Kidney Day: March 12, 2020 it's not too early to think about • how you might participate to raise awareness about kidney health

Partner Across Borders

IPNA and ISN sister programs: funding for experienced centers to partner with and mentor developing renal units in less resourced places

ASPN Global Health Committee

Email info@aspnneph.org to join the emailing list and stay up-to-date on opportunities for ASPN members to engage in global work.



The 24th Annual American Kidney Fund Calendar Art Contest is here!

The American Kidney Fund is looking for 13 talented artists to be published in our 2020 Calendar distributed nationwide and we need your help to find them!

Who is eligible?

Children who are 18 and younger and who:

- Have kidney disease
- Are on dialysis or have received a kidney transplant Live in the United States

Put your imagination to work!

Let your creativity shine

All winners will receive a great prize and the cover artist will win a free trip to Washington, D.C. to be honored at the American Kidney Fund's annual gala, The Hope Affair, on October 2, 2019.

The opportunities are endless

Art is more than just drawings! Here are a few ideas of things you can create:

- Create a drawing or painting
- Write and perform a song
- Choreograph and perform a dance
- Make a short film Write a poem or short story
- The art can be about kidneys, strength and empowerment, patriotic themes, season, things that make you happy, ways you stay healthy, or whatever else you would like!

Meet the 2019 Cover Artist!



De'Nahri M. Age 7 | Jackson, Mississippi "Kidneyman: Gives Us Magic Water to Save Our Kidneys'



Questions?

Call the American Kidney Fund at 240-292-7047 or email Lianna Purcell at lpurcell@kidneyfund.org

Visit www.kidneyfund.org/contest to download the application and learn more!





In Memorium - John K. Orak

Robert Othello Hickman passed

peacefully from natural causes on April 4, 2019. He was born in Monticello, Utah on September 27, 1926, the youngest of five children of Othello and Mary Helen Bunker Hickman. He was reared and educated in Logan, Utah, served in the U.S. Air Force from 1945 to 1946, followed by an LDS Mission to France from 1947 to 1949. He married Lucy Jean Whitesides on August 18,



1950. After receiving a degree in anatomy from the University of Utah, Bob headed east to obtain his medical degree from the University of Maryland. He completed an internship with the University of Utah in pediatrics at County General Hospital in Salt Lake City, followed by residency training in pediatrics at the University of Washington from 1958 to 1960. During his residency he joined with Dr. Belding Scribner and, under his tutelage, was involved in placing the first child in the world on both long-term hemodialysis and home hemodialysis.

Bob is most well known in the medical world for the part he played in developing the Hickman catheter, used widely with cancer patients to deliver intravenous nutrition and chemotherapy as well as for blood draws. It was a godsend to the patients and the nurses caring for them. His efforts were recognized by UW Medicine in 2011 when he received its Legacy Inventor Award. But, he will be most remembered by his colleagues for being kind and compassionate, and by his patients for his singular devotion to them, especially the children. For his contributions to medicine and his dedication to both his colleagues and patients, he was selected to receive the University of Maryland Medical Alumni Association's Honor Award and Gold Key in 2007, awarded for outstanding medical accomplishment and distinguished service to mankind.

Along with his professional pursuits, Bob will be remembered for his faithful service as a member of The Church of Jesus Christ of Latterday Saints. During his tenure as Bishop, Stake President, Patriarch, Temple Sealer, and Mission President in both Haiti and North Carolina, he led by example, more than words, and did all he could to support and encourage those within his influence in their spiritual journey.

When he wasn't working, or serving in church, Bob loved to ski. He instilled that love in his children at an early age and used his passion for the sport as a way to bring his children and grandchildren together for fun and memorable family gatherings year after year. He doted on his grandchildren and took great pride in their accomplishments.



Paul T. McEnery, MD, MBA,

Professor Emeritus, University of Cincinnati College of Medicine, passed away on March 28, 2019 at home after a long battle with heart failure.

After completing a pediatric residency and nephrology fellowship at Cincinnati Children's Hospital Medical Center (CCHMC), Paul became the second nephrology faculty in 1970, joining Dr. Clark West in launching one of the most successful programs in pediatric nephrology



During his illustrious career, Paul made numerous unique contributions to CCHMC including introducing the percutaneous renal biopsy technique in 1969 and starting the dedicated pediatric dialysis unit in 1972. This unit was one of the very first in the nation that included hemodialysis and home training for peritoneal dialysis for children. He was also the Director of the Nephrology Clinical Laboratory for several years, and oversaw the development of complement assays that are still in use today. He pioneered and directed the Kidney Transplantation program, which grew into one of the busiest in the country. In addition, Paul was very active in many hospital committees, the Cincinnati Pediatric Society, the American Society for Pediatric Nephrology, and International Pediatric Nephrology Association. He served as the President of the American Society for Pediatric Nephrology in 1983. To advance his administrative skills he obtained an MBA from Xavier University in 1989. He authored more than 70 peer-reviewed publications, including game-changing works in membranoproliferative glomerulonephritis, nephrotic syndromes, and chronic kidney diseases that are still taught to trainees today.

Always the quintessential gentleman, Paul will be deeply missed by his wife Charlotte, his daughters, Christina Dumont MD, Jennifer Finn and Emily Moriarty, his many friends, colleagues and patients.

ASPN Webinars

We are continuing the Nephrology Part II pathology and imaging webinar series, which allows members to have the opportunity to claim MOC 20 Part II points. Please note, claiming credit for the 2017 webinar series has closed and we will move forward with the 2018-2019 Academic Year webinar series. ASPN members will continue to have access to the content through the ASPN website.

If you are interested in claiming MOC 20 Part II credit in the upcoming 2018-2019 academic year series, you must complete 10 webinars and answer a total of 50 question/answers (5 per webinar) via REDCap. For this series, unlike the previous one, you will be required to remit payment of \$50 (credit card or cash) to the Children's Hospital of Philadelphia (to cover the cost of managing the MOC points). The REDCap link will be available on the webinars as well as the ASPN website in the Members Only version of the Member Education Committee page. Please address any questions to Rebecca Ruebner, and Ben Laskin, emails: <u>rruebne1@jhmi.edu</u> and <u>LaskinB@email.chop.edu</u>.

ASPN Renal Pathology Webinar

Date: Monday, June 3, 3pm ET Topic: TBD

The ASPN Member Education Committee invites all members to attend our monthly renal pathology interactive webinars/discussions. These will feature a new case each month with pathology presented by Dr. Patrick Walker of Nephropath and a content expert from the ASPN membership. The sessions will typically be the 1st Monday of each month at 3PM Eastern. Watch for an email from ASPN with call-in details.

John E. Lewy Foundation (JELF) Scholars

The JELF Advocacy Scholars Program

For the 2019 year, the JELF scholars program has initiated an enhanced curriculum and mentorship program. Two interactive webinars have occurred with guest faculty to introduce the scholars to the program and to the US health care system. Scholars have didactic and reading assignments regarding health care policy, mentors have been assigned for ongoing participation, and scholars are expected to engage with the policy experts at their home institutions, all of which are designed to expand the policy and advocacy experiences of the scholars beyond the field of pediatric nephrology.

The program is excited about these expanding opportunities and deeply appreciates the educational, mentoring, and financial support provided by members of the ASPN. To help us grow, please consider supporting us at: <u>http://www.aspneph.com/JohnELewyFoundation/howtodonate.asp</u>

To learn more about the John E Lewy Fund, the Advocacy Scholars Program, or the Perlman Program for Perpetual Participation, contact David Hains (<u>dhains@iu.edu</u>) or visit: <u>http://aspneph.com/JohnELewyFoundation/JELFMain.asp</u>



-Vicky Norwood University of Virginia

Transplantation Update

OPTN/UNOS NEWS:

We continue to move toward complete elimination of the use of DSA (donor service areas) or regions in allocation policy at the direction of HRSA in order to be compliant with The Final Rule https://optn. transplant.hrsa.gov/governance/about-the-optn/final-rule/. The Kidney Committee of UNOS/OPTN, in collaboration with representatives from the pediatric community, is in the process of evaluating the responses to the "Concept Document" that was presented to stakeholders in the community through the UNOS/OPTN Spring public comment process https://optn.transplant.hrsa.gov/governance/public-comment/. The next step in this process is further modeling of different potential options for kidney and pancreas deceased donor organ allocation that may move kidney allocation closer to the approved framework of Continuous Distribution in response to public comment. In general terms, the public comment was in favor of the hybrid model over the fixed distance circles. The current modeling efforts are aimed at various circle sizes and various proximity points within the hybrid model structure. OF MAJOR **IMPORTANCE**, the modeling will also include options that **MOVE** THE PEDIATRIC DD CANDIDATES ABOVE THE 98-99% HIGHLY SENSITIZED candidates. Presently the children awaiting DD kidneys are AFTER the highly sensitized (98-100%). This new modeling will look at how children might fare if placed below the 100% sensitized but above the 98-99% sensitized. In general terms, all the hybrid variations modeled thus far, even without moving where children are in Sequence A (KDPI kidneys 0-20%) and Sequence B (KDPI kidneys 20-34%), are projected to increase pediatric DD kidney volume compared to the current kidney allocation system (KAS). We are encouraged by the willingness of the adult kidney community to revisit this part of KAS that has placed our pediatric candidates at a disadvantage. The timeframe for this project is: April-June 2019 SRTR modeling; June-July 2019 development of policy language and proposals to go out for next public comment period; August-October 2019 policy proposal out for Public Comment: December 2019 to UNOS/OPTN Board of Directors for final approval.

Pediatric Program Requirements

"Applications are Still Coming"...... The new timeline for applications to be sent by UNOS to your programs will be this summer. The application will be sent to all member transplant programs that have had at least one pediatric patient on their waiting list in the last five years. Members declining to apply will need to complete an opt-out notice. If for some reason your program does not get an application, please let me or your Regional UNOS representative know. It is anticipated that the 90 day application period will open in Summer 2019. All applications for pediatric transplant programs will be reviewed by the MPSC (Membership and Professional Standards Committee) of UNOS/ OPTN. At this point, the likely timeline for decisions to be made will be Fall/Winter 2019/2020 with BOD approval anticipated at either the June 2020 or December 2020 BOD meeting. ALL PROGRAMS, WHETHER YOU ARE FREESTANDING OR NOT, WILL NEED TO COMPLETE THIS APPLICATION PROCESS IF YOU WISH TO CONTINUE DOING PEDIATRIC KIDNEY TRANSPLANTS AFTER 2020. ALL PROGRAMS WILL BE ABLE TO CONTINUE TO OPERATE AS USUAL DURING THE APPLICATION PROCESS AND THE REVIEW OF APPLICATIONS. I will keep you updated as more regarding the timeline becomes available. The policy can be found at https://optn.

transplant.hrsa.gov/governance/public-comment/establish-pediatrictraining-and-experience/ . It is important that you understand that, in addition to the transplant volume requirements (they differ depending on the pathway you are choosing to apply under), <u>you must have</u> <u>documentation of observation of three kidney procurements and three</u> <u>pediatric kidney transplants.</u> Many of us do not have this operating room experience despite many years of taking care of transplant patients and even those fresh out of fellowship do not uniformly have this volume. The pediatric component at a designated kidney transplant program must have a primary pediatric physician who meets all of the requirements described in Section E.3: <u>Primary Kidney Transplant</u> <u>Physician Requirements</u>. In addition, the <u>primary pediatric transplant</u> <u>physician</u> must have completed at least one of the training or experience pathways listed below:

1. The 3 yr Pediatric Nephrology Fellowship Pathway

- a. Training must contain at least 6 months of clinical care for transplant patients
- b. Direct involvement in the primary care of at least 10 newly transplanted recipients for at least 6 months from transplant and followed 30 transplant kidney recipients for at least 6 months. Care must be documented in a log.
- c. Experience must be at a program that does an average of 10 pediatric kidney transplants per year
- d. Direct involvement, during the fellowship, in the evaluation of 25 potential kidney recipients including participation in selection committee meetings
- e. Observation of at least 3 kidney procurements (at least 1 LD and 1 DD)
- f. Observation of at least 3 kidney transplants involving a pediatric recipient
- g. Currency: direct involvement in kidney transplant patient care within the past 2 years.
- h. 4 letters: supervising qualified transplant physician and surgeon of the fellowship, transplant fellowship director, self

2. The 12 month Pediatric Transplant Nephrology Fellowship Pathway

- a. Board certified or eligible in peds nephrology
- Direct involvement in the care of at least 10 newly transplant recipients and continued outpatient follow up of these recipients for a minimum of 3 months post transplant and follow 30 transplant recipients for at least 6 months
- c. Experience must be at a program that does an average of 10 pediatric kidney transplants per year
- d. Direct involvement in the evaluation of 25 potential kidney recipients including participation in selection committee meetings (during the 4 yr period, 3 yr peds nephrology fellowship, 1 yr peds transplant fellowship).
- e. Observation of at least 3 kidney procurements (at least 1 LD and 1 DD)
- f. Observation of at least 3 kidney transplants involving a pediatric recipient
- g. Currency: Direct involvement in kidney transplant patient care within the past 2 years.
- h. 4 letters: as above in 1h.

Transplantation Update

3. The Combined Pediatric Nephrology Training and Experience Pathway

- a. Board certified or eligible in peds nephrology
- b. Minimum of 2 yrs of experience during or after fellowship
- c. Direct involvement in the care of at least 10 newly transplant recipients and continued outpatient follow up of these recipients for a minimum of 3 months post transplant and follow 30 transplant recipients for at least 6 months
- Direct involvement in the evaluation of 25 potential kidney recipients including participation in selection committee meetings
- e. Observation of at least 3 kidney procurements (at least 1 LD and 1 DD)
- f. Observation of at least 3 kidney transplants involving a pediatric recipient
- g. Currency; Direct involvement in kidney transplant patient care within the past 2 years.
- A letters: supervising qualified transplant physician and surgeon, fellowship training program's primary physician and transplant program director, self
- 4. The conditional approval pathway (the surgeon must be fully approvable) (24 months with possibility of another 24 month extension)
 - a. Minimum of 2 yrs of experience during or after fellowship
 - b. During the minimum of 2 yrs of experience they have had direct involvement in the primary care of at least 5 newly transplant kidney recipients and followed 15 newly transplanted recipients for at least 6 months from transplant
 - c. Observation of at least 3 kidney procurements (at least 1 LD and 1 DD)
 - d. Observation of at least 3 kidney transplants involving a pediatric recipient
 - e. Currency: Direct involvement in kidney transplant patient care within the past 2 years.
 - f. Letters: supervising qualified transplant physician and surgeon, fellowship training program's primary physician and transplant program director, self

The UNOS staff are currently working on creating an implementation toolkit to assist in the application process. Included in the toolkit will be a FAQ document, a link to sample primary personnel applications, and a list of pertinent educational offerings in UNOS Connect. Members with questions may contact the UNOS Membership Analyst for your Region at 804-782-4800. You can also contact your Regional UNOS representative directly:

Regions 1, 4, 5,	Tierra Yuille	tierra.yuille@unos.org
Regions 2, 3, 10	Christi Manner	<u>christi.manner@unos.org</u>
Regions 6, 7, 9, 11	Nadine Drumn	nadine.drumn@unos.org

4 year analysis of KAS: The 4 yr analysis that is not pediatric specific can be found at <u>http://www.lidsen.com/journals/transplantation/</u><u>transplantation-03-01-041</u> We are in the process of doing a "deeper dive" into the 4 yr pediatric kidney transplant outcomes under KAS.

New process for policy-related questions in place at UNOS/OPTN.

It is common for pediatric transplant programs to have questions related to waiting time, listing, multiple listing, pediatric priority, etc. Examples of questions you might have: How are points assigned to kidney candidates? How much time waiting time can my patient accrue while "inactive" on the deceased donor kidney waiting list? UNOS/OPTN has a new streamlined process for responding to your questions about policy and policy-related resources and education. Questions can be directed to this toll-free number **844-395-4428** or sent to member.questions@ unos.org. The responsibility for responding to general member questions is moving from Regional Administrators to a new team of staff. Staff will be available to respond to your questions Monday-Friday, 9:00am to 5:00pm eastern. You can expect to receive a response the same day.

SAVE THE DATE: Next ATC meeting June 1-5, 2019 in Boston! https://atcmeeting.org

Respectfully submitted, Sharon M. Bartosh, MD, smbartosh@wisc.edu





Support the ASPNF

I am a second year Pediatric Nephrology fellow at Children's Mercy in Kansas City and had the wonderful opportunity to attend the 46th Pediatric Nephrology Seminar in Miami. This was the first time I attended the conference and I was thrilled to receive the travel grant partially sponsored by ASPNF. The grant also covered the registration fee for the conference. The first thing that impressed me about the conference was the warmth and friendliness of the organizers, especially Dr Gaston Zilleruelo.

What attracted me to the conference was the wide range of topics that were covered, virtually all of which I thought were very relevant for fellows. It was a good mix of basic science topics as well as recent clinical advances, tailored for trainees such as residents and fellows, as well as for advanced learners. There were speakers of national and international reputation. As it was a smaller group of speakers compared to other national conferences, we had the chance to interact with them one on one during and at the end of the sessions.

I especially liked the round table sessions with the Professors, in which the trainees had the opportunity to interact with some of the pioneers and legends of Pediatric Nephrology in a very relaxed manner. The CRRT workshop was also very educational and was a great hands-on experience.

I also found it to be a great forum for fellows from different programs to discuss collaboration on research studies, and a place to receive information regarding potential faculty positions post- graduation.

I would absolutely recommend this conference for fellows and residents interested in pediatric nephrology, as it definitely reinforces why I selected this subspecialty and it provides a unique opportunity to meet the brilliant group of physicians who are our role models.

Please consider supporting the ASPN Foundation so that other fellows can attend this conference.

Submitted by Nisha Singh, MD, Children's Mercy Hospital

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7th Annual Multidisciplinary Symposium will be held in Las Vegas, NV on September 12-13, 2019

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program@ipna2019.org www.ipna2019.org



The 2nd International Congress of Hypertension in Children and Adolescents 24-26 May, 2019 | Warsaw, Poland

Upcoming Meeting Dates*

Meeting	Place	Meeting Dates	Abstract deadline	Online registration opens	Early bird registration ends
ATC 2019	Boston, Massachusetts	June 1-5	November 30, 2018, 11:59 PM PST	January 2019	Member rates if member dues for 2019 paid by May 24 th , 2019
IPNA 2019	Venice, Italy	Oct 17-21, 2019	May 31st, 2019	Open now	June 17, 2019
ASN Kidney Week 2019	Washington DC	Nov 5-10, 2019	April 3-May 30, 2019 (2:00 pm. EDT)	June 12, 10:00 am EDT	September 5, 11:59 p.m. EDT

*Please verify dates on the individual meeting websites as they are subject to change.





When you become a member, you will have access to a special section on our website giving you access to useful and valuable resources and tools:

- Employment Center
- Practice Management resources
- Legislation, Regulation and Compliance
 information
- Patient Care resources and education



To join, visit www.renalmd.org.

ASPN Central Office

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KIDney NOTES The Bi-Monthly Newsletter of the American Society of Pediatric Nephrology

ASPN Leadership

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> Secretary Jodi Smith, MD (2020) Seattle Children's Hospital jodi.smith@seattlechildrens.org

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