



American Society of Pediatric Nephrology

January ~ February 2020

President's Corner



Dear Colleagues

Welcome to the New Year! I hope that you all had a wonderful, happy, health and safe Holiday season. As we move into a new year, I am hopeful that we will continue to strengthen our society and focus on a strong advocacy agenda for our patients, families and our profession.

In my home stretch as the ASPN president, I am reminded of all of the amazing work that our membership has and continues to do. As we plan for our annual meeting at the 2020 PAS in Philadelphia, I ask you all to continue our focus on our trainees and

ensuring they are guided to the resources they need to develop our next generation of Pediatric Nephrologists. We have engaged many stakeholders and as we move forward, I hope to present an implementable strategy for assuring our trainee and workforce pipeline is continuing to develop and grow. Our focus remains to reduce the perceived and actual barriers facing our workforce. We are also working on strengthening our already strong relationship with the ASN in terms of developing Pediatric focused components of the "Advancing America's Kidney Health" initiative. More to come on this great collaboration as we engage the ASN leadership to help better represent our Pediatric patients.

I would like to highlight the Maintenance of Certification opportunities through our regularly held webinars. These are easy to engage with and relevant to our practice of medicine. It also allows us to collaborate on our learning platforms. If you have questions, please drop us a note at info@aspneph.org.

Our partners in the ASPN foundation continue to work hard to provide a strong giving platform opportunity in order to secure the needed resources to provide critical trainee travel grants and beyond. I strongly encourage all members to give to our foundation so we can continue to get our trainees to key meetings related to Pediatric kidney health. I would also like to welcome our new members to the Corporate Liason Board (CLB). Our society continues to grow and develop and I couldn't be more proud to be a member. I want to remind you all that your dues help drive our professional agenda and society, so please don't forget to renew your membership and also recruit our graduating fellows. We are stronger together!

Again, thank you all for what you do for our patients and their families.

Sincerely,

Patrick Brophy, MD, MHCDS President, ASPN

Patrick Brophy@urmc.rochester.edu

P.S. The ASPN receives frequent requests to disseminate surveys and endorse products and organizations. If members are interested in ASPN sponsoring or disseminating a survey or project, they should discuss their request with the relevant ASPN committee leader and must obtain approval from the committee council liaison. All requests will be considered in terms of their concordance with the ASPN mission and goals.

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

To help simplify the MOC process, ASPN Certification Committee will begin a regular feature written by an ASPN member describing how they successfully obtained MOC credit. The majority of these will relate to MOC Part 4 – Improving Professional Practice – Quality Improvement.

My Success with MOC

Laura Hesemann, MD, MSCI, FASN, University of Missouri-Columbia

There are a huge number of MOC Part 4 opportunities available online from a variety of sponsors. Most often, these take the form of some online module that requires the user to collect and upload data specific to this project. But did you know that you can receive MOC Part 4 credit for QI work you have already completed? There are options for QI projects completed by small groups of physicians (1-10 physicians) or larger groups. This option requires 3 sets of data points to include pre-intervention and post-intervention. There is a fee of \$75 per project submitted. Approved projects will earn 25 MOC Part 4 credits. Recall that ongoing MOC participation requires 40 Part 4 credits every 5 years.

I successfully submitted a project this way. My institution undertook a project to improve vaccination rates in our nephrology patients. We had previously collected baseline data detailing rates for influenza and pneumococcal disease in CKD, transplant, and dialysis patients. We then designed our intervention – nursing review of records and discussion with families – then collected follow-up data at 6 months and 18 months. At the time I submitted this project for MOC, the project had already been completed as part of departmental QI. The only effort needed for me to get MOC credit was to enter the information in the online application and to pay the fee. I spent less than 1 hour on this process and received notification in less than 1 month that my project was approved.

Follow the link below to view the ABP Page on using your own QI project for MOC Part 4. https://www.abp.org/content/your-own-qi-project

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Public Policy Committee Update

Negotiations on FY 2020 Spending Ongoing as Next Spending Deadline Approaches

At press time, there were fourteen calendar days until the continuing resolution (CR) funding the government expires on December 20. Despite an agreement being reached on the spending allocations for all twelve appropriations bills, disagreements still remain on a number of policy issues including funding for the President's border wall and Title X contraception funding. Negotiations on these issues are ongoing, but it is unclear whether a deal can be reached in time for appropriators to finalize all of the spending bills before the current CR expires. Members of Congress may be forced to decide between passing another CR and shutting the government down right before the holidays. It is also unclear whether the President would agree to sign another CR.

The length of another CR, if necessary, is unclear – some have speculated that it could run into the spring while others believe a better course of action is passing a full year CR. Stakeholders, like ASPN, have advocated against a full year CR because of the inefficiencies and uncertainties they create for federal agencies. These concerns are particularly acute for the National Institutes of Health (NIH) and other grant making agencies.

CMS Finalizes Physician Payment Rules for CY 2022

On October 31, the Centers for Medicare & Medicaid Services (CMS) issued a <u>final rule</u> that includes updates and revisions to the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) for calendar year 2020. The final rule also updates requirements for the ESRD Quality Incentive Program (QIP). CMS finalized the majority of the policies it proposed over the summer. Of note, the agency did highlight that the next Technical Expert Panel (TEP) meeting will be addressing the topic of pediatric dialysis.

In the final rule for the Medicare Physician Fee Schedule (PFS), published on November 1, CMS finalized its policy to make the major changes to the documentation of and reimbursement for evaluation and management (E/M) services. This policy will be implemented in CY 2021 to allow providers and the larger healthcare system to familiarize themselves with these changes. The agency also recognized ESRD monthly services as being closely tied to the outpatient E/M services that were used as building blocks in the valuation of these services. CMS will address their valuation and those of other services closely tied to E/M services in future rulemaking.

ASPN Meets with CMS on Independent Living Donor Advocate Changes

ASPN joined with the American Society for Nephrology, the National Kidney Foundation, Rogosin Institute and the American Association of Kidney Patients at a meeting with CMS Administrator Seema Verma to discuss our concerns with recent changes to the agency's interpretive guidance of the Conditions of Participation for Transplant Program that were finalized on May 24, 2019. We shared how the changes would have the unintended consequence of creating a barrier for willing living organ donors, and the agency will be reviewing these changes based on feedback received at the meeting.

Committee Updates

Research Committee Update

My Experience with the ASPN Research Committee's Longitudinal Research Mentorship Program

I have been participating in the ASPN Research Committee's Longitudinal Research Mentorship Program for the past year. As a junior faculty member embarking on research in a new direction, this program has been so important for my development as a clinician researcher.

Enrollment in the program was simple. I responded to the ASPN request for interested mentees and shared my areas of research interests. Senior members of the Research Committee provided suggestions for possible mentor clinician researcher pediatric nephrologists across the country. The research committee initiated contact with mentors to inquire about their availability for external mentorship. My mentor (David Askenazi, MD, MSPH) and I began our first meeting at Pediatric Academic Societies Annual Meeting where we established clear goals and expectations for our mentormentee progress. We have since met on a monthly basis via phone conference discussing manuscripts, grant applications, and career goals. I have secured several internal research grants and will be moving forward with an NIH grant application with the support of my ASPN Research Committee mentor.

Keia Sanderson, MD MSCR University of North Carolina Kidney Center

If you are interested in participating in the ASPN Longitudinal Research Mentoring Program, please reach out to us with the following information:1) Contact Information; 2) Research Interest; 3) Mentorship needs (grant writing/development; career guidance; work-life intersection; other) Tammy Brady, Brad Dixon, Michelle Denburg ASPN Research Committee Co-Chairs ResearchCommChair@aspneph.org ResearchMentoring@aspneph.org

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Therapeutics Development Committee Update

The ASPN is interested in improving access to clinical research trials for all of our patients, and the Therapeutics Development and Research Committees have together declared AY2020 to be "The ASPN Year of Clinical Trial Site Readiness" as part of their educational mission. Toward this end, the TDC and the RC together developed a survey to assess the interest and the needs of the Pediatric Nephrology community for involvement in prospective clinical research. The survey is supported by ASPN Council, and is now open. You should have received an email invitation from the ASPN via Noel Howard (Clinical Research Coordinator at Texas Tech University Health Sciences Center). Responses will be collected thru January 31, 2020.

Survey results will be used to design the workshop to be held at the 2020 ASPN meeting in Philadelphia, "Secrets to Developing (and Sustaining) a Clinical Research Program that Every Institution Wants." Aggregate anonymized survey results will be made available on the members-only section of the ASPN website, and may be shared with ASPN's industry partners, and hopefully will be published in a peer reviewed journal. Individual responses will NOT be shared outside of the ASPN's TDC and RC, and will be held strictly confidential.

You will be able to start the survey and return at a later time, if necessary. Many of the survey questions will require some research - so we recommend printing out the PDF version the survey and completing as a division / section (We recommend completing this at a division meeting). A link to the PDF is available at the beginning of the survey. Please answer questions with respect to your institution or practice (as opposed to you personally as an individual). If your division includes individuals who practice internal medicine, answers would apply only to the pediatric nephrology part of the practice

The Therapeutics Development Committee has also published a Toolkit to help sites improve their readiness for participation in clinical trials, available online in the members-only section of the ASPN website. We recommend reviewing and referring to the Toolkit in preparation for completing this survey.

If you have misplaced your email invitation to the survey, or if your email invitation never made it thru your institution's spam filters, please contact me or Noel Howard at noel.howard@ttuhsc.edu for another invitation.

Scott Wenderfer
On behalf of the Therapeutics Development Committee

Committee Updates

Workforce Committee Update

The ASPN workforce committee aims to support the practicing pediatric nephrologist by organizing educational webinars on clinical practice topics not routinely addressed in much detail during fellowship training. Past topics have included dialysis billing and setting up an ABPM program. We would like your input to define key topics and practice areas to address in our future webinars. We are also looking for interested junior and senior ASPN members who would like to volunteer as webinar moderators and content experts, respectively. Please fill out this brief survey https://www.surveymonkey.com/r/CCTZQLT and we will contact you with more details.

Thank you!

Isa Ashoor, MD on behalf of the ASPN Workforce Committee

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Membership Committee Update

Welcome New Members:

Reham Alamri
Hadeel Badawi, MD, SPB
Morgan Bily, BS
Sarah Burnett, DNP
Peace Imani, MB ChB, MMED, MPH
Elizabeth Onugha, MD
Julia Tzeng, MD

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: rruebne1@jhmi.edu and LaskinB@email.chop.edu.

ASPN Pathology Webinar

Date: January 6, 2020

Topic: 12 Year Old with Elevated Creatinine

All pathology and imaging webinars can be viewed online on the ASPN website under the Member Education Committee page. You can earn up to 20 Part II MOC points by participating in the webinars! You can either participate live or watch online. Then answer 5 questions on the REDCAP Database (link below). You can earn 20 MOC points if you answer a total of 50 questions from 10 webinars. https://redcap.chop.edu/surveys/?s=WAEWFTLPD9

Transplant Update

OPTN/UNOS NEWS:

New Kidney Allocation Policy passed: The Kidney Committee of UNOS/OPTN, in collaboration with representatives from the pediatric community, put out for public comment Eliminate the Use of DSA and Region in Kidney Allocation Policy. This proposal will completely eliminate of the use of DSA (donor service areas) and 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/. ASPN did post a public comment with pediatric specific concerns. The overall public comment on this proposal was fairly negative from Regions and most constituencies, primarily related to concerns centered around increased organ and procurement team travel, increased risks of delayed graft function and the costs/logistics of broader sharing. Pediatric-specific concerns related to the projected increase in Kidney-Pancreas transplants and the potential increased negative effect this would have on children. As a result, the proposal was modified to change the distribution circle (around the donor hospital) from the proposed 500 nautical miles (NM) to 250 NM with proximity points changed from the proposed 4 and 8 to 2 (within the circle) and 4 (outside the circle). The modeling for this proposal projects an increase in kidney transplant rates for all age children (0-5, 6-10 and 11-18 yr olds). Additionally, in Sequence A and B, the children will be placed higher in the allocation sequence. Currently, pediatric kidney deceased donor candidates are after multiorgan transplants, sensitized patients (cPRA 98-100%) and prior living donors. In the proposal presented and passed by the OPTN BOD at their December meeting. children will still be after multiorgan transplants, prior living donors and sensitized patients, BUT only patients with cPRA of 100% will come before children in the 250 NM circle around the donor hospital. Another very important predicted consequence of this proposal, which has been passed, is a projected increase in Kidney Pancreas transplants nationwide by 240 (this is lower than the 300 per year that was predicted with a 500 NM circle around the donor hospital). We already have centers whose pediatric DD kidney candidates are being adversely affected by busy adult KP programs that preferentially take kidneys out of the pool. As a reminder, all multiorgan allocations (kidney pancreas, heart kidney, liver kidney) come prior to children. Kidneys allocated as multiorgan transplants tend to be from young healthy donors with KDPIs < 35 that would have otherwise been offered to our patients. This potential negative effect must be monitored carefully and the OPTN Pediatric Committee will be taking on responsibility for close monitoring of the effects of this new allocation policy on our patients.

Pediatric Transplant Program Requirements: Your administrators should have submitted your center's Pediatric Program Application by 12/3/19. Your center will be able to continue to function normally until the applications are reviewed by the MPSC (Members and Professional Standards Committee) and then voted on by the OPTN BOD in December 2020. If you submitted your application and you were short an observation of a pediatric transplant or a procurement, it is recommended that you submit an amendment to your application when you have completed what you were missing.

OPTN Pediatric Committee initiatives: The Pediatric Kidney Committee has completed an analysis of the effects of KAS on children at the 4 yr mark and will be presenting the analysis at ATC next May in Philadelphia. We are working on the manuscript. As you know, the implementation of KAS December 2014 led to children receiving a lower percentage of the total DD kidney transplants performed, and in the first 2 years of implementation the actual number of children being transplanted decreased. The key items of concern from the 4 vr KAS analysis for children are: a decrease in the DD transplant rates for the 0-5 yr olds and for pediatric candidates with cPRA 80-98, longer wait times to transplant for all children but particularly the 0-5 yr olds, and increased DGF rates for 6-18 yr olds. We also looked at pediatric donor kidneys to see where they are going. The vast majority of kidneys from adolescents are being allocated to adults and since the implementation of KAS even fewer adolescent donor kidneys are allocated to children. In general, our community would like to see more of these kidneys offered to children. As such, we are embarking on a project to "redo" the determination of KDPI since the original determination did not include pediatric recipients. It is important for us to know with better precision the outcomes of adult kidneys that are transplanted into children as well as the outcomes of pediatric donor kidneys that are transplanted into children. Once we have this information, we can propose appropriate allocation changes that more accurately match and predict outcomes of DD kidneys allocated to children.

ASPN TIG (Transplant Interest Group). We had our second meeting in Washington in conjunction with ASN. The projects we chose as priorities going forward are 1) submission of a transplant session proposal for consideration for ASPN 2021 in Vancouver, 2) examination of current pediatric fellowship training in the area of transplantation with the intention to create a recommended transplant curriculum for pediatric nephrology fellowship training, 3) create a "plain language" list of current UNOS primary pediatric personnel requirements for pediatric kidney transplant programs for those who desire to be qualified, 4) notify TIG group of availability within TIG to provide mentorship as well as clinical consultations on transplant related topics/protocols/etc.

SAVE THE DATE: Next IPTA meeting 4/17-4/20 2021 in Prague!

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

ASPN Foundation



Please take a few minutes to look at the <u>History of the International Pediatric Nephrology Association: A Lifecourse Journey</u>, a presentation given by Rick Kaskel, MD., PhD, Chief Emeritus, Children's Hospital at Montefiore, Albert Einstein College of Medicine, at the 18th IPNA Congress, Venice, Italy, October 17-21, 2019.

John E. Lewy Foundation Advocacy Scholars Program

JOHN E. LEWY FOR CHILDREN'S HEALTH

A Decade of Accomplishment

November was a busy month for the John E. Lewy Foundation Advocacy Scholars Program! After traveling to Capitol Hill to participate in Kidney Community Advocacy Day on November 6th, current and former JELF Scholars came together to share testimonies, memories, and successes with both the Lewy family and their fellow pediatric nephrologists at the ASPN Business Meeting a few days later. Notable JELF accomplishments include:

- Nationwide impact. The first decade saw nine classes of scholars representing 14 states, with a total of 21 scholars completing the program. Scholars have advocated on Capitol Hill over 10 times, and seven of the scholars have also participated in state and local advocacy events.
- Meaningful education. JELF Scholars interact not only with their senators and representatives, but also with leaders in CMS, the NIH, and industry leaders in the nephrology space (such as Baxter)
- Preparing the next generation of pediatric nephrology leaders. Many scholars have gone on to lead ASPN committees, and all participate in at least one committee. Scholars also participate in the American Academy of Pediatrics Legislative Conference, providing exposure to advocates for the health of all children nationwide.

None of this would be possible without the support of the Lewy family and ASPN members, who have donated nearly \$90,000 to sustain the program over the past decade. Thank you so much for your support! And if you haven't yet renewed your ASPN membership, please do that now, and consider donating to the JELF program as part of your dues renewal!



ASPN Online Board Review Course Registration Now Open!

Please register online at: https://apps.aspneph.org/brconline2019/

Online Course Includes:

- Videotaped lectures, case-based discussion, panel Question and Answer sessions and board-style question sessions led by expert faculty
- Study material formatted to the content specifications
- Question bank
- ♦ These items can be downloaded, but not printed and will expire October 31, 2021.

Course Fee:

♦ ASPN Fellow-in-Training Member*: \$325

ASPN Member*: \$745Non-member: \$955

*ASPN membership must be current in order to register for the member price. Fellows must also be registered as a member to receive the fellow member price. Fellows who are graduating and will be attending physicians at the time of the course are eligible to register at the fellow rate. Early registration is encouraged. Fellows will be required to provide the name and contact information for their Training Program Director.

Questions: Contact Sarah Duran (sarah@aspneph.org).

Upcoming Meeting Dates*

Meeting	Place	Meeting Dates	Abstract deadline	Online registration opens	Early bird registration ends	
Annual Dialysis Conference, 2020	Kansas City, Missouri	February 8-11, 2020	Oct 7, 2019	Open now	January 25, midnight, CST	
PAS 2020 meeting	Philadelphia, PA	April 29-May 6, 2020	Jan 6, 2020	Nov 5, 2019	March 5, 2020	
American Transplant Congress (ATC) 2020	Philadelphia, PA	May 30- June 03, 2020	Dec 6, 2019, 11:59 PST	Jan 2020	April 29, 2020	

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

ASPN Ethics Webinar

Initiating, Withholding, and Withdrawing Dialysis
Aaron Wightman, MD & Aviva Goldberg, MD
Tuesday, January 21 3pm ET

Save the Date

6th Pediatric Renal Nutrition Academy

Introductory Level Certificate Program

February 7, 2020

Kansas City, MO

Preceding the Annual Dialysis Conference*

Venue TBD

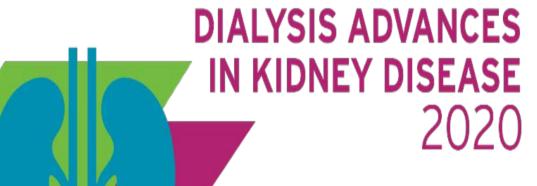
A 1-day educational program highlighting nutritional management of pediatric renal disease for the introductory level practitioner.



REGISTER



22ND INTERNATIONAL CONFERENCE ON



January 21-24, 2020



We are excited to announce that the abstract submission site is now open. Submit your abstract for the 22nd International Conference on Dialysis - Advances in Kidney Disease Week 2020. This conference will take place January 21-24, 2020 at the Loews Hollywood Hotel in Los Angeles, CA.

Start your submission now



Pediatric Academic Societies Meeting

April 29-May 6, 2020 | Philadelphia, PA

April 29-May 1 • Pre-Conference Events | May 2-5 • PAS Meeting | May 6 • Post-Conference Events

American Society of Pediatric Nephrology (ASPN) Schedule at a Glance

Saturday, May 2 Sunday, May 3 Monday, May 4 Tuesday, May 5 7:00 am-8:00 am 7:30 am-9:00 am 7:00 am-7:45 am 7:30 am-9:30 am* ASPN Resident/Student **Expert Roundtables** ASPN Pediatric Nephrology in a Poster Session IV Membership Breakfast with **Breakfast & Networking** Small Group Setting Breakfast Pediatric Nephrology Fellows PAS Lab: ASPN Scholarly and Faculty 8:00 am-10:00 am 8:00 am-10:00 am Rare but Not Forgotten: PPC Legislative IPHA Workshop: 8:00 am-10:00 am Breakfast Coming Ashore: Early Results Innovations in Rare Genetic From the SHIP-AHOY Study The Use of "Intra"-Corporeal Kidney Diseases **Diagnostics and** (346211-IPHA) 9:30 am-11:30 am (346697)Extracorporeal Therapies in Is It Something I Ate? Critical Care Nephrology Exploring the Adherence to treatment: Barriers 9:45 am-11:45 pm (346701-CC) Relationship Between to making it stick Using TOD²AY to Improve Gastrointestinal and (346708-ASPN Indep) Tomorrow's Renal Outcomes 10:00 am-10:30 am Kidney Health in Childhood Diabetes PAS Welcome Coffee Break (346698-Indep) **Original Science Abstracts** (346699)**Platform Presentations** 10:30 am-12:00 pm **IPHA** Scholarly Session: Nephrology II: 12:15 pm-2:15 pm PAS Opening General The Role of ABPM in the **Basic Science** Secrets to Developing Session Assessment of Children (....and Sustaining) a Clinical (Includes presentation of the and Adolescents 9 am-1 pm Research Program that **SPR Presidential Plenary Every Institution Wants** Joseph St. Geme (346218)and Awards (9-11:30/11:30-1) (346713)Leadership Award) 10:15 am - 11:45 am 12:00 pm-1:00 pm **APS Presidential Plenary** 10:30 am-12:30 pm and Awards PAS Complimentary Are the Kids Really Alright? A Opening Luncheon Life-Course Evaluation of the 11:30 pm-1:00 pm Long-Term Kidney Effects of 12:00 pm-1:00 pm ASPN Awards Luncheon Childhood-Onset Diseases ASPN CPC Fellows (346692-ASPN Indep) Luncheon: Battle of the 1:00 pm-3:00 pm Lupus Nephritis: Bevond **Brains** 1:00 pm-3:00 pm the Beans to Bad Bones Urine in the Know Advocacy: Past, Present, and 1:15 pm-2:30 pm* and Brains (346652) Nephrology Poster Session I **Future Perspectives** 1:00 pm-4:00 pm (346715)2:30-4:30 pm **AAP Presidential Plenary** Coming Up Short: Improving and Annual Silverman 3:30 pm-5:30 pm Access to Kidney Transplant Lecture **Original Science Abstracts** in Children **Platform Presentations** (346678-ASPN Indep) 3:30 pm-5:30 pm **Nephrology III:** ASPN Presidential **Clinical Science** 4:45-6:45 pm Address & Business The Chesney Memorial Meeting 5:45 pm-7:30 pm* Session: Nephrology Poster Session III (en)Trust me: Understanding 3:45 pm-5:45 pm and Surviving Competency-APA Membership Meeting **Based Medical Education** (346711)**APA Debate**

ASPN Meetings at PAS

Meeting	Day	Date	Start	End	Location
ASPN Leadership Development Program		5/1/2020	8 a.m.	5 p.m.	TBD
ASPN Program Committee	Friday	5/1/2020	8 a.m.	6 p.m.	TBD
ASPN Council Meeting	Friday	5/1/2020	8 a.m.	6 p.m.	TBD
ASPN Resident/Student Membership Breakfast with Pediatric Nephrology Fellows and Faculty	Saturday	5/2/2020	7 a.m.	8 a.m.	TBD
ASPN Communications Committee	Saturday	5/2/2020	12 noon	1 p.m.	TBD
ASPN Member Reception	Saturday	5/2/2020	7 p.m.	9 p.m.	TBD
ASPN Member Education Committee	Sunday	5/3/2020	7 a.m.	8 a.m.	TBD
ASPN Public Policy Committee	Sunday	5/3/2020	7 a.m.	8 a.m.	TBD
ASPN Therapeutics Development Committee	Sunday	5/3/2020	7 a.m.	8 a.m.	TBD
ASPN Transplant Interest Group	Sunday	5/3/2020	7 a.m.	8 a.m.	TBD
ASPN Membership Committee	Sunday	5/3/2020	8 a.m.	10 a.m.	TBD
ASPN Awards Luncheon	Sunday	5/3/2020	11:30 a.m.	1 p.m.	TBD
ASPN Presidential Address and Business Meeting	Sunday	5/3/2020	3:30 p.m.	5:30 p.m.	TBD
ASPN Fellow Job Search Speed Mentoring Event	Sunday	5/3/2020	7 p.m.	8:30 p.m.	TBD
ASPN Pediatric Nephrology in a Small Group Setting Breakfast	Monday	5/4/2020	7 a.m.	8 a.m.	TBD
ASPN Research Committee	Monday	5/4/2020	7 a.m.	8 a.m.	TBD
ASPN Certification Committee	Monday	5/4/2020	11:30 a.m.	12:30 p.m.	TBD
ASPN Workforce Committee	Monday	5/4/2020	11:30 a.m.	12:30 p.m.	TBD
ASPN Clinical Affairs Committee	Monday	5/4/2020	12 noon	1 p.m.	TBD
ASPN Global Health Committee	Monday	5/4/2020	12 noon	1 p.m.	TBD
ASPN Training Program Directors Committee		5/4/2020	12 noon	1 p.m.	TBD
ASPN Foundation Board Meeting		5/4/2020	12 noon	1 p.m.	TBD
ASPN CPC Fellow's Luncheon: Battle of the Brains	Monday	5/4/2020	12 noon	1 p.m.	TBD

52nd ANNUAL
SCIENTIFIC MEETING OF
THE EUROPEAN SOCIETY FOR
PAEDIATRIC NEPHROLOGY

16-19 September 2020 Ljubljana, Slovenia



ASPN members are warmly invited to the ESPN Congress in 2020 in Ljubljana, Slovenia, September 16-20, with Keynote Speakers, Pierre Ronco and Arvind Bagga. ASPN Speakers will be announced shortly.

-submitted by Priya Verghese (ASPN Liaison to the ESPN)

Fellows can join RPA for FREE!

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.

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KIDney NOTES

The Bi-Monthly Newsletter of the

American Society of Pediatric Nephrology

ASPN Leadership

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