

AAP Resident Section September 2008

District Two

From New York City to
Montauk Point
From Yonkers to
Buffalo
The great Empire State
NEW YORK



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Upcoming Meetings:

---District 2 Meeting in
Jamaica, NY: September
7, 2008

---NCE in Boston, MA:
October 11-14, 2008

---Immunization Summit
in Mohonk, NY:
November 7-9, 2008

Check the District 2
website for additional info:
<http://www.aapdistrictii.org/>

THE NCE IS COMING

The 2008 AAP National Convention and Exhibition is coming!!! This year, the annual meeting will be held at Hynes Convention Center in Boston between October 11th and October 14th. Each year, the Resident Section holds its annual meeting to provide education, elect new leadership, and craft new resolutions to bring change to the AAP. In addition, there are many interactive lectures, hand-on courses, and special events. There is a family and kids program for guests. Finally, the exhibition hall gives everyone an opportunity to interact with vendors from many branches of pediatric care.

The Resident Section looks forward to having each program's delegate and other resident members join us at the meeting to meet them and learn about each program. You will have the opportunity to break away into separate districts to concentrate on local issues. In addition, Friday's PEDS21 program will focus on oral health. Program delegates from each program are offered a travel grant through the Dyson Foundation to help offset the cost of attending. Ask your Program Director for more information.

But it's not all work...You can get the opportunity to mingle with the President of the AAP at the President's Welcome Reception. Network with free food and drinks at the Welcome Reception, Experience Boston at the Boston Public Library, and watch local Pediatric Residents compete in the Pediatric Bowl!! For more information, visit <http://www.aapexperience.org>.

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Open Leadership Opportunities for Residents

Are you interested in becoming a leader in the American Academy of Pediatrics (AAP) Resident Section? Each year the section recruits interested residents into leadership positions. The following positions are open:

- **District coordinator**
(beginning October 2008)
10 positions open, 1 representing each district of the AAP
(1-year term)
- **Assistant district coordinator**
(beginning October 2008)
10 positions open, 1 representing each district of the AAP
(1-year term)
- **Section secretary**
(beginning October 2008)
(1-year term)
- **Section vice chairperson**
(beginning October 2008)
(3-year term: 1 as vice chair, 1 as chair, and 1 as immediate past chair)
- **Section liaisons**
(All liaison positions are 2-year terms)

Community Access to Child Health (CATCH)
Medical Student Subcommittee Chair (AMSA liaison)
Section on Administration & Practice Management
Section on Epidemiology
Section on Hospital Health
Section on Pediatric Dentistry/Steering Committee on Oral Health



AAP Smoking Advocacy – www.aap.org/richmondcenter FDA tobacco bill resident advocacy

TELL CONGRESS: Protect Children from the Harms of Tobacco! The American Academy of Pediatrics supports giving the Food and Drug Administration (FDA) strong authority to regulate tobacco products and tobacco marketing to children and adolescents. The Family Smoking Prevention and Tobacco Control Act (H.R. 1108/S. 625), will adopt a science-based approach to protecting children and the public from the dangers of tobacco. For more information, and to contact your representatives regarding this legislation, please visit <http://aap.grassroots.com/fdatobacco/> now and show your support for the bill!

AROUND THE DISTRICT

News and Notes from Program Delegates

The biggest news from around the district is the start of the new resident classes. We welcome them to their pediatric training as well as the AAP. We look forward to training future pediatricians and to developing future leaders and advocates.

Don't forget to send your program delegate the latest news and get recognized throughout the district!!

Hot Off the Presses – New Position Statement on Infant Hearing Loss

The Joint Committee on Infant Hearing (JCIH) endorses early detection of and intervention for infants with hearing loss. The JCIH has recently released a position statement describing "Principles and Guidelines for Early Hearing Detection and Intervention Programs." The summary below describes highlights made since the JCIH 2000 statement.

1. The definition of Targeted Hearing Loss has been expanded from congenital permanent bilateral, unilateral sensory or permanent conductive hearing loss to include neural hearing loss in infants admitted to the neonatal intensive care unit.
2. NICU babies admitted for greater than 5 days are to have auditory brainstem response (ABR) included as part of their screening so that neural hearing loss will not be missed. For infants who do not pass automated ABR, referral should be made to an audiologist for re-screening of both ears (even if only one failed) and, when indicated, comprehensive evaluation including ABR. For readmissions in the first month of life (NICU or well baby) when there are conditions with potential hearing loss, a repeat hearing screen is recommended before discharge.
3. Audiologists with skills and expertise in evaluation newborn and young infants with hearing loss should provide audiology diagnostic and auditory habilitation services. At least one ABR is recommended before age 3 years. The timing and number of hearing re-evaluations for children with risk factors should be customized and individualized depending on the relative likelihood of subsequent delayed-onset hearing loss. For families of infants with hearing loss who elect amplification, the device should be fitted within 1 month of diagnosis.
4. For infants with confirmed hearing loss, a genetics consultation should be offered. Evaluation by an otolaryngologist and ophthalmologist should be completed in infants with confirmed hearing loss.
5. Infants with any degree of bilateral or unilateral permanent hearing loss should be considered eligible for early intervention provided by professionals with expertise in hearing loss, including educators of the deaf, speech-language pathologists, and audiologists. Both home-based and center-based intervention should be offered.
6. Regular surveillance of developmental milestones, auditory skills, parental concerns, and middle ear status should be performed in the medical home. Infants who do not pass the speech-language portion of a global screening should be referred for speech-language evaluation and audiology assessment.
7. The birth hospital should ensure that hearing screening results are conveyed to the parents and medical home. Appropriate follow-up and resource information should be given to the parents, and the hospital should ensure each infant is linked to a medical home. All communication should be performed in a culturally sensitive and understandable manner and occur promptly both to the state and medical home.
8. States should implement data-management and tracking systems as part of an integrated child health information system. The quality of the services rendered should be monitored and recommendations given to improve the system.



Upcoming Fall Movies:

SEPTEMBER

Burn After Reading
Appaloosa
Ghost Town
Lakeview Terrace
Eagle Eye
Choke
Blindness

OCTOBER

Religulous
Beverly Hills Chihuahua
Nick and Norah's Infinite Playlist
How to Lose Friends and Alienate People
City of Ember
Body of Lies
Max Payne
W.
High School Musical 3
Saw 5
Zack and Miri Make a Porno

NOVEMBER

Madagascar 2: Escape 2 Africa
Quantum of Solace
Australia
Soul Men
Bolt
Twilight
The Road
Milk
Transporter 3



Long Island Wineries:

Specialties:

Merlot, Chardonnay, Cabernet
Sauvignon, Red Blends

Acres of Vineyard:

1,930

Bonded Wineries:

43

Growing Season:

215-233 days

Grape Production:

4,000 tons

Ackerly Pond Vineyards- Peconic, New York
Bedell Cellars- Cutchogue, NY
Castello di Borghese Vineyard & Winery-
Cutchogue, NY
Comtesse Therese- Aquebogue, New York
Corey Creek Vineyards- Southold, NY
Duck Walk Vineyards- Water Mill, NY
Jamesport Vineyards- Jamesport, NY
Lieb Family Cellars- Mattituck, NY
Long Island Meadery- Holbrook, NY
Macari Vineyards & Winery, Ltd.-
Mattituck, NY
Martha Clara Vineyards- Riverhead, NY
Medolla Vineyards- Peconic, NY
Miceli Vineyards- Mattituck, NY
Osprey's Dominion Vineyards- Peconic, NY
Palmer Vineyards- Aquebogue, NY
Paumanok Vineyards- Aquebogue, NY
Peconic Bay Winery- Cutchogue, NY
Pellegrini Vineyards- Cutchogue, NY
Pindar Vineyards- Peconic Bay, NY
Raphael- Peconic, NY
Roanoke Vineyards- Riverhead, New York
Scarola Vineyards- Southold, NY
Sherwood House Vineyards- Mattituck, NY
Shinn Estate Vineyards- Mattituck, NY
The Tasting Room- Peconic, NY
Vineyard 48- Cutchogue, New York
Waters Crest Winery- Cutchogue, New York
Wölffer Estate- Sagaponack, NY
Baiting Hollow Farm Vineyard-
Baiting Hollow, NY
Bouké Wines- Mattituck, NY
Channing Daughters Winery-
Bridgehampton, NY
Clovis Point Winery- Jamesport, NY
Croteaux Vineyards- Southold, NY
Diliberto Winery- Jamesport, NY
Duck Walk North Vineyards- Southold, NY
East End Vineyards LLC- Mattituck, NY
Harbes Family Vineyard- Mattituck, NY
Jason's Vineyard- Peconic, NY
Laurel Lake Vineyards- Laurel, NY
Loughlin Vineyards, Inc.- Sayville, NY
Manor Hill Vineyards- Cutchogue, NY
Premium Wine Group- Mattituck, NY
Pugliese Vineyards- Cutchogue, NY
Red Fern Cellars- Lawrence, NY
Sparkling Pointe- Southold, NY
Ternhaven Cellars- Greenport, NY
The Grapes of Roth- Sag Harbor, NY
The Lenz Winery- Peconic Bay, NY
The Old Field Vineyards- Southold, NY

<https://www.uncorkny.com>

New Product Available for Residents

We have great news for all pediatric residents for the 08-09 academic year. Starting in August 2008, the AAP will provide free of charge to all pediatric residents a 1-year subscription to Pediatric Care Online (<http://www.pediatriccareonline.org>) where the *Bright Futures for PDA* can be downloaded along with a host of great resources from the Academy. Also, find evidence-based recommendations about what to do and when to do it!!

Amidst concerns that adolescent medicine training needs to be improved,
Residents Respond About Their Adolescent Training

The AAP Adolescent Health Partnership Project recently completed an assessment on residents' perspectives on their adolescent health competencies and related issues to caring for adolescents. The results will be used to develop adolescent health training resources and activities targeted for residents and residency programs.

Over 300 residents completed the assessment during January- April 2008. The respondents were of nearly equal proportion between PGY1, PGY2, and PGY3, with a smaller proportion of the respondents from the PGY4 level. The majority of the residents felt comfortable caring for adolescent patients; however the enjoyment level decreased as the age of the adolescent increased. The respondents also rated their skill level for managing adolescent patients and a broad number of adolescent health issues.

PS: Don't forget to check out the Resident Section Website for the latest news and information!! <http://www.aap.org/ypn>

Funding Opportunities

- 1) Community Access to Child Health Program (CATCH)
<http://www.aap.org/catch>
- 2) Healthy Tomorrows Partnership for Children Program (HTPCP)
<http://www.aap.org/commpeps/htpcp/index.html>
- 3) Visiting Professorships in Community Pediatrics
<http://www.aap.org/catch/vp.htm>
- 4) Mentorship and Technical Assistance Program (MTAP) Grants
<http://www.aap.org/sections/socp/mtap.html>
- 5) Funding Opportunities for Chapters: on AAP's Member Site
- 6) The National Center for Medical Home Initiatives
<http://www.medicalhomeinfo.org/grant/funding.html>
- 7) The Grantsmanship Center <http://www.tgci.com/funding.shtml>
- 8) The Chronicle of Philanthropy
<http://philanthropy.com>