



# District III Resident Newsletter

December 2007

District of Columbia, Maryland, West Virginia, Pennsylvania, Delaware, and New Jersey



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Hello District III!

I bring you warm greetings from the American Academy of Pediatrics Resident Section and District III Resident Section Leadership. I hope that you all had a wonderful Thanksgiving and are gearing up for the winter holiday season. The AAP District III Resident Section is preparing for another great year and looks forward to your support and involvement.

I would first like to take this opportunity to thank Chisara Asomugha, MD, MPH for her dedication and commitment to the AAP Resident Section in her 2 years of service as the Assistant and District III Coordinator. Your energy and hard work did not go unnoticed and were greatly appreciated. Best wishes in your new role as a Robert Wood Johnson Fellow. Always remember that although you are now part of District II, District III will always remain your home. On that same note, I would like to welcome Lanre Omojokun, MD, a 3<sup>rd</sup> year resident at Children's National Medical Center in Washington, DC, as the new Assistant District III Coordinator. She is extremely enthusiastic and excited to be working in the AAP Resident Section with many great ideas for the year.



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For those who were unable to attend the AAP National Conference and Exhibition (NCE) in San Francisco, you missed a wonderful experience of interacting with medical students, residents, and fellows from across the nation as well as in the district. Thank you to those in attendance and volunteering for leadership roles within the district.

Along with the annual Resident Section advocacy project regarding pediatric mental health awareness and education, monthly District III conference calls, and the quarterly newsletter, the District III leadership also plans to adopt a yearlong initiative to encourage and promote fellowship amongst medical students, residents, and fellows in the district. The NCE is typically the first encounter of many members within the district: It is our goal to foster an opportunity to network amongst each other to share ideas and experiences in a less formal environment. Be on the look out for future announcements regarding district social gatherings throughout the year.

Please feel free to contact us with your thoughts, ideas, and concerns, as we are here to represent and serve you. On behalf of Lanre and myself, we wish you a wonderful, safe, and healthy holiday season!

Tyler K. Smith, MD  
District III Resident Coordinator

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## Recap from the NCE

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As a big fan of the NBC show "The Office," the District III ADC wants to share a great quote from the show...

"I don't get why parents are always complaining about how tough it is to raise kids. You joke around with them, you give them pizza, you give them candy, you let them live their lives. They're adults for God's sake."

-Michael Scott

It was great to see everyone at the National Conference and Exhibition in San Francisco this year. The attendance was record-breaking, with over 200 residents at the Peds-21 Symposium! Here are just a few highlights from the meeting:

- We have **new leadership** in the resident section. See the last page for contact information. Congratulations to everyone who was elected. The AAP also has a new president, Dr. Renee Jenkins, from right here in District III!
- Residents were especially active this year with proposing **resolutions** on a range of issues, from advocacy training in resident curricula to the creation of child health "report cards" for political candidates. Of the 40 resolutions that passed, 2 were from District III. One asked that the Academy establish standards for physical education requirements, based on research demonstrating that physical education is related to academic achievement (from **Sheila Ravendhran, JHU**). The other resolution from District III proposed that the Academy create a curriculum for resident education in transitioning children with special healthcare needs to adult care (from **Kitty O'Hare, CHOP**). The top 10 resolutions will be chosen this month and forwarded to the Annual Leadership Forum.
- The Resident Section advocacy topic for this year is **Mental Health**. A presentation has been designed to be shown at each program, and each program is encouraged to plan advocacy and awareness activities. More details to follow!

### Surfing the Site

Been to the AAP website lately? Check out these features – some are new, others are staples.

- **Young Physicians Network (YPN)** has regular updates on AAP Resident and Young Physician activities and ways to stay connected. [www.aap.org/yypn](http://www.aap.org/yypn)

- **AAP Policy Statements** can help guide how you educate your patients on climate change, hearing screening, and the effects of TV on behavior. [www.aappolicy.aappublications.org](http://www.aappolicy.aappublications.org)

- **Pedialink**: PREP questions, career planning, and more! [www.pedialink.org](http://www.pedialink.org)

During the District meeting at the NCE, each resident presented the advocacy and community activities going on in his or her program. Each program is doing such impressive things that we chose to publicize these activities, to motivate us all to stay active in giving a voice to children -- and perhaps even replicate some of these programs. We'll feature at least 1 program in each newsletter. **Please email Lanre or Tyler if you have an advocacy project to publicize!**



### Fitness Circle Johns Hopkins Hospital



Combating the growing obesity epidemic among children and youth has been a top advocacy priority for the AAP in recent years. Currently, at least 1 in 5 children and adolescents in the United States is overweight or obese, and minority youth residing in the inner city are disproportionately affected.

To address this problem in teenagers living in the Baltimore area, Senior Social Worker Carrie Vick and Dr. Alan Joffe, clinic director at the time, founded the Fitness Circle Program at Johns Hopkins Hospital Adolescent Clinic in 1998.

The Fitness Circle is an 8-week program designed specifically to address the needs of overweight adolescents. The program empowers young people to make informed, creative choices concerning diet, physical activity, and managing stress.

The goals of the program are to provide participants with the tools they need to improve their health, fitness, self-esteem, and sense of well-being, and to lay the foundation for a healthy lifestyle. Participants are also given incentives and go on trips (grocery store tours, hiking, retreats, etc.) to motivate and enhance their learning experience. Parental participation is strongly encouraged.

Pediatric residents at Johns Hopkins play an integral role in the instruction and physical activity of the participants. By volunteering with the Fitness Circle, residents are advocating for inner city youth to have access to weight

management programs that have proven outcomes. As in most urban areas, the majority of their patients could not afford to join a gym. The Fitness Circle is free to participants, helping to overcome the problem of low socioeconomic status as a barrier to accessing healthy living programs. Insurance does not cover the visits, so funding is provided through the Children's Center Special Projects funds and generous donations from the community.

Fitness Circle has served hundreds of teens, and with the collaboration of physicians, social workers, and community members, the program will continue to provide much-needed services to the youth of Baltimore in the years to come.

Thanks to Sheila Ravendhran, pediatric resident at Johns Hopkins Hospital, and to Carrie Vick for providing information on the Fitness Circle for the newsletter. The current medical director of the program is Dr. Maria Trent.

#### *Learning Points from the Fitness Circle, as you are starting or maintaining your own advocacy project:*

- Partner with non-physician staff in your hospital, as they often have the connections and resources to make advocacy programs successful.
- Create programs that teach decision-making skills that will last long after the youth have completed the program.
- Break out of the hospital walls: Incorporate activities that take participants into their own communities, so they can practice their newly-learned skills in grocery stores, for example.

## Speaking out on Federal Advocacy

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As Congress started reworking the SCHIP reauthorization bill after the President's veto, another bill came up for renewal: the Labor, Health, & Human Services (HHS) Appropriations Act, which funds, among many programs, Children's Hospitals' Graduate Medical Education around the country. **Shubhada Hooli, a resident at Children's National Medical Center** and District III member, spoke at a hearing with Senator Harry Reid and 2 other invited speakers in support of expanded Labor-HHS-Education funding. Below is an excerpt of the speech she made to an audience of legislators and media.

My clinic is a Federally Qualified Health Center, one of the many areas of healthcare funded by the Labor-HHS-Education Appropriations Act. FQHCs provide access to underserved citizens. Regular access to healthcare means healthier children and fewer catastrophic illnesses down the road. In my own clinic, my patients are the kids on Medicaid, SCHIP, and without insurance. My uninsured patients are from working families that just can't afford the rising costs of healthcare. Because my clinic is federally funded, we're able to see uninsured patients on a sliding scale, but it's the referral services and prescriptions that become hardships, especially for the kids with asthma, diabetes, and other chronic illnesses. Their parents often ask me which medication their child can safely go without, and I don't know what to tell them, because they need them all.

Prevention is the cornerstone of pediatrics. We've seen dramatic decreases in the prevalence of deadly illnesses such as meningitis, Haemophilus epiglottis, and secondary bacterial infections due to influenza. Remarkably polio is now a rare illness. Our country is an international leader in vaccinations and public health. It is the research and health surveillance funded by the National Institutes of Health and CDC that have kept the United States strong. Do not forget the looming threats of MRSA and an Influenza pandemic. It is vital to our national security to appropriately fund these programs.

"The devastating effects of a poor public health system are so clearly seen in our children."

How can we hope for a healthier, more prosperous nation, when we deny ourselves adequate public health? The devastating effects of a poor public health system are so clearly seen in our children. A sick child is a child deprived of opportunity, a child kept home from school, with a family that's unable to work in order to care for their child. But in this harsh reality of the state of children's health in our country, there is still hope. We can choose to appropriately fund our Department of Health and Human Services. We can choose to be a healthier, safer and more prosperous nation.

*UPDATE: Both houses of Congress passed the Act with bipartisan support, but it was vetoed by the President on November 13, 2007. A revision is in process. For more information on this bill, visit <http://appropriations.house.gov>*



You don't have to make speeches to be a federal advocate!  
All you need are 5 minutes and a computer.

Go to <http://aap.org/advocacy/washing/mainpage.htm> to browse federal advocacy issues, then click on the Member Center link to sign up for Federal Advocacy Action Network (FAAN) email alerts. You can write letters to your legislators and find details about your local Advocacy Day through the site.

[www.aap.org/sections/ypn/r/funding\\_awards](http://www.aap.org/sections/ypn/r/funding_awards)



## CATCH Grants

Community Access to Child Health (CATCH) Resident Funds program supports pediatric residents in the planning of community-based child health initiatives. Grants of up to **\$3,000** are awarded twice each year on a competitive basis for pediatric residents to address the needs of children in their communities. Application deadline is **January 31, 2008**. Email Kate Flecker ([kflecker@cnmc.org](mailto:kflecker@cnmc.org)), District III resident CATCH coordinator, for more info.



## CPTI Advocacy Training Grants

The mission of this program is to provide support to residency programs to build sustainable opportunities for residents to gain experience working on community-based child health initiatives that increase access to medical homes or specific health services not otherwise available. Grants of up to **\$12,000** will be awarded. A faculty member must oversee the project. Deadline is **December 10, 2007**.



## Resident Research Grants

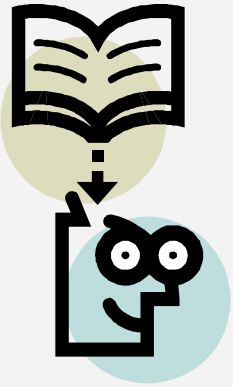
The goal of the RRG is to develop research skills among physicians in training. Applications will require a statement of purpose, a research plan, and a proposed budget. Applicants must also identify a project advisor who has an appropriate research background. Grants of up to **\$2,000** will be available. Application cycle will re-open this December. Check back at the Resident Section website.



## Resident Scholarships

The Resident Scholarship Program is designed to help allay financial difficulties for residents in good academic standing. The AAP annually grants a number of scholarships varying from **\$1,000 to \$5,000**. Application cycle will re-open this December. Check back at the Resident Section website.

Keep your eyes open for other grants and awards that will start a new cycle in the coming months, including the International Travel Grant, Anne E. Dyson Advocacy Award, and the Clinical Case award.



## Did You Know?

### New autism screening

guidelines from the AAP are now available on the home page!

### Fellowship Listings

are printed annually in the January edition of the Journal of Pediatrics, including contact info and deadlines.

## Upcoming Meetings

### AAP Legislative Conference

March 30-April 1, 2008

Washington, DC

At the Legislative Conference, you will visit with your member of congress and their staff, experience legislative process through hands-on work sessions, and begin building relationships with peers, politicians, and the press. At the conclusion of this conference, participants will understand the federal and state legislative process, acquire skills and techniques to successfully impact Congress and state legislatures, and develop strategies to utilize the media effectively. A limited number of resident scholarships are available. Resident/Faculty pairs who are awarded the CPTI Advocacy Training Grant will be funded to attend the Legislative Conference. Go to [www.aap.org/advocacy.html](http://www.aap.org/advocacy.html) for more information.

## Member Benefits

Please be sure to share this information with any of your residents & fellows who are not yet AAP members! With an AAP membership, you have access to:

**PedJobs**, online job database that allows you to advertise your CV to employers

**Pediatrics Review and Education Program (PREP)**, popular self-study program for CME and the Pediatric Board Exam.

**Community Access to Child Health (CATCH)** grants to fund community health programs

**PEDIATRICS**, one of the most widely cited journals in pediatric literature

**AAP News**, the monthly journal with the latest developments in pediatric practice, international child healthcare, and AAP advocacy issues

**Career enhancement** by becoming involved with the Academy at the national level and in the Academy's chapters and sections and councils

**Professional manuals**, such as *The Red Book*

... and many more, including local and national conferences, and discounts on travel (through ResX.com), car rentals, and insurance.

# District III Leadership Contact Information

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