AAP SONS NEWSLETTER

2013-2014 Executive Committee

Michael D. Partington, MD, FAAP
Chairperson
St. Paul, MN
mpartington@gillettechildrens.com

John Ragheb, MD, FAAP
Incoming Chair
Miami, FL
jragheb@med.miami.edu

Philipp R. Aldana, MD, FAAP
Chair-Elect
Jacksonville, FL
Philipp.aldana@jax.ufl.edu

Andrew H. Jea, MD, FAAP
Secretary
Houston, TX
ahjea@texaschildrens.org

David P. Gruber, MD, FAAP
Spokane, WA
dgruber@neuroandspine.com

Joseph H. Piatt, MD, FAAP
Wilmington, DE
Joseph.piatt@nemours.org

Mark S. Dias, MD, FAAP
Immediate Past Chair
Hershey, PA
mdias@psu.edu

Message from the Section Chair by Michael Partington, MD, FAAP

Why AAP?

It seems that the number of professional organizations available for
neurosurgeons to join continues to expand exponentially. Will we ever get to the
point of the surgeons being outnumbered by them? Perhaps not, but we live in a time where the increasing demands on our time, combined with shifts in available resources, make it harder to belong to any and every group which offers us membership. As many neurosurgeons are aware, even the need to belong to two large general neurosurgical organizations is being increasingly called into question. We have been asking ourselves how these memberships benefit us, and our patients, and whether or not a continuing value exists for the neurosurgical subspecialist?

Having said that, I want to propose that sometimes the subspecialist neurosurgeon finds opportunities in other areas, and that these are worthy of consideration. In the case of the American Academy of Pediatrics (AAP), several factors come to mind, which might influence the decision to become a Specialty Fellow:

- With over 60,000 physician members, the AAP is the largest single organization with a principle interest is the health of children. The careful reader will note that it is the American Academy of Pediatrics, not Pediatricians, and so applies equally to all pediatric subspecialists
- As a result of the Academy’s size and focus, this organization has a greater reach in state and federal government affairs, as they pertain to our patients, the children. The AANS and CNS continue to represent our interests, but AAP can have a greater effect on child-centered matters
- Although the major meetings offered by AAP have limited direct offerings for neurosurgeons, the range of AAP-sponsored publications (including the
journal Pediatrics and references such as The Red Book) and their on-line resources are incomparable.

- Lastly, the membership of AAP represents a significant portion of our colleagues in our daily work lives, either as partners in our hospitals or as referring providers. We have relationships with many other specialties as well, but pediatricians are a key element of our professional lives.

If you are interested in exploring joining the Section on Neurological Surgery of the AAP, please see the “Membership” section below.

**Section History by Joseph H. Piatt, MD, FAAP**

The AAP began at a dinner in the home of Dr James Rosenfeld of Portland, Oregon, on 19 July 1929 after the annual meeting of the Section on Diseases of Childhood of the American Medical Association. The leaders of the day recognized the need for a national organization that represented all pediatricians, both in academic work and in community practice, to advance the field and to advance the medical and social welfare of children. The first annual meeting was held in Atlantic City in 1931, at which time there were 304 enrolled members. The AAP is now the leading professional organization in children’s health with a membership in excess of 62,000. Its membership includes general pediatricians and practitioners of all the medical and surgical pediatric subspecialties. In addition to serving the educational needs of its members, it is a leader in the definition of quality in child healthcare services, and it speaks for children in the halls of government and industry.

Curiously, the first neurosurgeon in the AAP was from Portland, Oregon, as well. Martin Johnson became a Specialty Fellow in 1972. In an era when pediatric
surgical subspecialists were almost unknown, Dr Johnson wished to differentiate himself from his neurosurgical colleagues by his dedication to the care of children, a desire that has brought many other neurosurgeons to the AAP over the succeeding years.

Neurosurgery's first representative in the AAP was Hector James. In the late 1970s, as pediatric neurosurgeons began to view themselves as practitioners of a subspecialty, Dr. James recognized the need to develop formal ties to organized pediatrics. A founding member of the American Society for Pediatric Neurosurgeons in 1978, the following year Dr James became a Specialty Fellow in the AAP. At that time the point of entry for neurosurgeons was the Section on Surgery, but at Dr James's instigation the Section on Neurology (SONu) eventually began accepting neurosurgical members. Other prominent neurosurgeons in the SONu in that era included Jack Walker, David McLone, Jack Laurent, Alex Sanford, and Derek Bruce.

In the mid-1990s, Hector James and Jack Walker perceived an opportunity to move toward a more formal presence for neurosurgery within the AAP. A number of factors contributed to this action, including increasing numbers of pediatric neurosurgeons, enough to establish a separate Section on Pediatric Neurosurgery, and the creation of both the American Board of Pediatric Neurological Surgery (ABPNS) and the Accreditation Council for Pediatric Neurosurgical Fellowships (ACPNF). Pediatric neurosurgeons regarded the AAP as powerful ally in their efforts to establish the credibility of their subspecialty, as realized in the ABPNS and the ACPNF. Finally organized pediatric neurosurgery came to appreciate and endorse the altruism and advocacy inherent in the AAP's mission on behalf of children.
A Provisional Section on Neurological Surgery was formed and consisted of approximately 40 neurosurgical Specialty Fellows led by an executive committee that included Dr Walker (Chair), Dr. James (Secretary), Robin Humphreys, Gordon McComb, Hal Rekate, and Joe Piatt. In 2002 the Section on Neurological Surgery (SONS) was officially recognized. Dr. Walker continued as Chair through 2004, and was succeeded in subsequent terms by Joe Piatt, Mark Dias, and Michael Partington. Succeeding members of the executive committee have included David Adelson, Tom Luerssen, Andrew Parent, John Ragheb, David Gruber, Philipp Aldana, and Andrew Jea. Other Fellows who have labored in the mission of the Academy by speaking, writing, committee work, or volunteering as liaisons to state chapters have included Rick Abbott, Jeffrey Blount, Rick Boop, Robin Bowman, Michael Burke, Al Cohen, Richard Coulon, Doug Brockmeyer, Tina Duhaime, David Frim, Tim George, Lilliana Gouemnerova, Bermans Iskandar, Nalin Gupta, Michael Handler, Stephen Huhn, David Jimenez, Cormac Maher, Tim Mapstone, Arnold Menezes, Cheryl Muszynski, Jerry Oakes, Ian Pollack, Mark Proctor, Jim Rutka, Nate Selden, Ed Smith, Mark Souweidane, Michael Turner, Elizabeth Tyler-Kabara, Michael Vassilyadi, and Shokei Yamada. This list is necessarily incomplete; hopefully it will be augmented soon by new names of neurosurgeons seeking opportunity for contribution and leadership in the American Academy of Pediatrics.

Section Achievements by Mark S. Dias, MD, FAAP

Since its inception the SONS has witnessed considerable growth, allowing increasingly frequent opportunities for SONS members to provide important
information to pediatricians. The SONS has contributed talks annually at the AAP National Conference on Exhibits (the annual meeting) on topics such as Spina Bifida: A Neurosurgical Perspective; Lumps, Bumps, and Dimples: Congenital Dysraphic Malformations; the Funny Shaped Head: Craniosynostosis, Craniofacial Syndromes, and Occipital Plagiocephaly; Arachnoid Cysts; Hydrocephalus, Shunts and Endoscopy; and Traumatic Brain Injury and Abusive Head Trauma. Each year, the AAP accepts offerings from the SONS for such talks; these offer an important venue for SONS members to update our pediatric colleagues about current pediatric neurosurgical topics.

SONS members have also provided a number of written educational materials on various pediatric neurosurgical topics for pediatricians through AAP Grand Rounds, AAP News Focus on Subspecialties, and Pediatrics on topics such as innocent coccygeal dimples and lumbosacral dermal sinus tracts; transitions in pediatric neurosurgical care; concussions and concussion guidelines; the use of molecular therapies to treat hereditary metabolic central nervous system disorders; cervical spine clearance in young children; and updates on prenatal myelomeningocele closure. These are particularly helpful in educating pediatricians on topics of importance to pediatric neurosurgeons.

The SONS has also contributed substantially to a number of AAP policies and technical reports through the years. The list is too numerous to include all of them, but examples include guidelines for referral to pediatric surgical specialists; the determination of brain death in children; pre-hospital termination of resuscitation in children; febrile seizures; microcephaly; spasticity; technical report on abusive head
trauma; occipital plagiocephaly guidelines; Pediatric Traumatic Brain Injury guidelines; boxing injuries; soccer injuries; cheerleading injuries; trampoline use; sports concussions; healthcare supervision for children with Down’s syndrome; healthcare transitions for children with chronic diseases in the medical home; and the role of the pediatrician in providing medical care for children with spina bifida. The section has also developed an occipital plagiocephaly brochure for parents and a report on motocross injuries, guidelines for management of incidental findings on neuroimaging, and clinical guidelines for the identification and management of craniospinal dysraphic malformations (currently in press).

SONS also partnered with the Pediatric National Surgical Quality Improvement Project (Pediatric NSQIP) to measure and improve the quality of pediatric surgical care in the United States. This project has more recently been incorporated as a project of the Joint Section on Pediatric Neurosurgery of the AANS and CNS.

The SONS leadership has also worked hard over the last several years to increase benefits for its members. Members received in 2008 a CD-ROM containing all AAP policies, guidelines and technical reports of interest to pediatric neurosurgeons. In 2009 members all received an AAP monograph on Inflicted Childhood Neurotrauma, the results of an NIH sponsored conference in 2002. In 2011, members had an opportunity to receive a free six month subscription to Child Abuse Quarterly. The section developed a survey of pediatric neurosurgical trainees’ perceptions of benefits and barriers to a pediatric neurosurgical career that was published in Journal of Neurosurgery: Pediatrics in 2013.
Beginning in 2008, the section sponsored an annual SONS lecture at the Joint Pediatric Neurosurgery Section meeting with the intent of educating our members about non-neurosurgical topics of importance to pediatric neurosurgeons. The topics have included the organization and advocacy of the AAP on behalf of pediatric surgical specialists; the effects of anesthesia on the developing brain; the neonatal brain and the pathophysiology of neonatal brain injury; developing a pediatric surgical subspecialty, and other topics.

AAP SONS Award:

This new annual award will be given by the Section on Neurological Surgery of the American Academy of Pediatrics (AAP SONS) at the Annual Meeting of the AANS/CNS Joint Section on Pediatric Neurosurgery. This award is bestowed to the presenter of an oral research presentation whose findings broadly impact and improve the health of children by influencing pediatric health care practice through the application of pediatric neurosurgical knowledge.

This award is open to both members and non-members of the AAP SONS. Similar to the Hydrocephalus and Shulman awards, the presenters will have the option to signify during the abstract submission process if they wish their work to be considered for this award. A group of AAP SONS fellows will be judging the presentations during the plenary sessions of the meeting.

The prize consists of an award plaque and cash prize of $500 or one year AAP
fellowship dues to be given to the presenter of the paper.

**AAP SONS Lecturer:** This year’s AAP SONS Lecturer is David Wood, MD, MPH, FAAP. Dr. Wood is a Professor of Pediatrics of the University of Florida, College of Medicine – Jacksonville. Since 2006, he has been the Medical Director of the Jacksonville Health and Transition Services Program (JaxHATS), which serves as the medical home for young adults with chronic diseases of childhood, including spina bifida, hydrocephalus, brain tumors, sickle cell disease as they transition into adult care. He also serves a consultant to the Florida Department of Health’s Office of Health Care Transition through Children’s Medical Services. He will share his insights gained from dealing with transition patients with neurosurgical disease and collaborating to develop systems of transitional care in his home institution and the state of Florida.

**Future Directions by John Ragheb, MD, FAAP**

Your Section on Neurological Surgery (SONS) of the AAP continues to look for opportunities to use the power of the AAP and its 60,000 plus membership to improve the care of children through education, advocacy and outreach. For those of you actively involved in the SONS, you see the benefits to our patients. For those on the sidelines, hopefully I can convince you to step up and get involved. Let me tell you why.

My initial involvement with the AAP and an opportunity to witness the organizations power to influence change dates back to 2005. I was asked to represent neurosurgery (have you seen Forrest Gump?) on an AAP committee
advocating for Federal legislation to create incentive for the development of pediatric specific devices, much has they had in the past for pediatric drugs. The committee had representation from nearly every pediatric specialty and surgical sub-specialty and in a limited number of in person meetings provided opportunity to input from all. With surprising efficiency and within one year a Pediatric Devices Act was passed and funded. I was a believer.

The SONS is asked for input whenever the AAP creates policy, or takes a stand on an issue important to children. Additionally, we are asked each year for topics that we feel are important to the health of children. SONS can suggest topics we feel are of important educational value for pediatricians or that we feel should be taken up as issues by the AAP. Each year we in SONS along with the Section on Neurology provide topics and speakers to the AAP National Conference and Exhibition. Topics in the recent past have included occult dysraphism, positional molding, and concussion. For 2015 national meeting I have proposed neurologic and neurosurgical emergencies directed at practicing pediatricians.

We all have many demands on our time, both in our professional and personal lives. I’ve always felt that the time spent away from our practices and our families could be better spent talking to the pediatricians who take care of our patients. I hope those of you on the sidelines of the SONS, or who are not even members, will consider getting involved.

**Membership by Andrew Jea, MD, FAAP**

FAAP and You
The FAAP designation after a pediatric neurosurgeon’s name stands for Fellow of the American Academy of Pediatrics. It signifies to colleagues and patients that rigorous qualifications for fellowship have been met. Pediatric neurosurgeons who maintain their FAAP designation have obtained board certification in pediatric neurosurgery and made an ongoing commitment to lifelong learning and advocacy for children.

As a member, you can be a voice for children and pediatric neurosurgery. What are the benefits of fellowship?

• **Prestige**

  Use of the FAAP distinction

  Inclusion in the Academy’s online directory of Fellows

• **Annual Meeting Benefits**

  Significantly discounted Academy **meeting registration fees**

  Stay on top of the latest in scientific research

  The best in Continuing Education (CE)

• **Publications**

  **Pediatrics**, a monthly official peer-reviewed journal of the American Academy of Pediatrics containing papers on the clinical and basic science aspects of pediatrics

  AAP News, the official monthly newsmagazine of the American Academy of Pediatrics

• **Professional Camaraderie**

  A place where you can learn from others and share your own experiences
Access to local chapters make it easy to keep in touch through social functions and study between regular Annual Meetings.

Ability to join one or more of the Sections and Special Interest Groups devoted to various areas of focus.

How do I join AAP SONS?

There are three levels of Section on Neurological Surgery (SONS) membership:

1. **Post Residency Training Members** who meet the following criteria:
   - Have completed training in an accredited neurological surgery residency program **and**
   - Who are presently enrolled in an accredited pediatric neurological surgery fellowship program.

   **Applicants must submit:**
   - Completed application form and any necessary fees
   - Sponsor letter from the Training Program Director

2. **Candidate Members** who meet the following criteria:
   - Have completed a Fellowship in pediatric neurological surgery and are awaiting certification of the American Board of Neurological Surgery and/or the Royal College of Physicians and Surgeons of Canada **OR**
   - Whose practice is at least 75% pediatric neurological surgery and are awaiting certification of the American Board of Neurological Surgery and/or the Royal College of Physicians and Surgeons of Canada

   **Applicants must submit:**
• Completed application form and any necessary fees

3. Specialty Fellows who meet the following criteria:

• Certified by the American Board of Neurological Surgery and/or by the Royal College of Physicians and Surgeons of Canada and

• Be certified by the American Board of Pediatric Neurosurgery and/or devote seventy-five percent (75%) or more of their practice in the neurosurgical care of infants, children, and adolescents through age 21 and

Applicants must submit:

• Completed application form and any necessary fees.

• A photocopy of your certificate(s) of board certification.

* If not certified by the American Board of Pediatric Neurosurgery, a case list of all (adult and pediatric) operations performed in the one year prior to application, certified by the chief of surgery from each hospital in which you practice.

See more at: http://www.aap.org/en-us/about-the-aap/Committees-Councils-Sections/Membership-Criteria/Pages/Neurological-Surgery.aspx