



# American Academy of Pediatrics Section on Critical Care Medicine

MAY 2007

## A Note from the Chair by: Alice Ackerman



As I look at the calendar I realize it has been almost a year since the last SOCC newsletter. This has been another exciting year for the section. Our session at the 2006 NCE held in Atlanta was well-attended. At that time, the executive committee worked on further development of the strategic plan, which has since been published on our section's website.

We presented our Distinguished Career Award to Dr. David Nichols, who made an eloquent speech that was stimulating and upbeat. At this NCE we introduced a new format for the "business meeting" that had usually occurred over lunch. Instead, we had a nicely attended reception, while the poster presentations were up, and we were able to update the group on section issues while folks enjoyed a glass of wine and some substantial hors d'oeuvres. In addition, we held drawings for door prizes (American Express gift cards) which were well received. In all, this reception provided the opportunity for folks to mingle, for the executive committee to meet with the membership, and for much appreciated time to relax and get to know one another. We plan to make this reception an ongoing part of our future programs. Each year the abstracts presented get better and better. Please encourage your fellows and colleagues to submit their best work to the section program for next year, which will be back in San Francisco.

The executive committee is happy to welcome our two new members: Ed Conway, who is the liaison from the Society of Critical Care Medicine, where he serves as Chair of the Pediatric Section; and Megan McCabe, currently a pediatric critical care fellow at Johns Hopkins, who joins us as the post-residency fellow member of the executive committee.

The other exciting news to tell you about is the coming to fruition of a several-year dream that Tim Timmons, and a group of pediatric intensivists have been working on, supported by the section. This is the advent of what will be called PREP-ICU, an AAP-sponsored product for life-long learning and ongoing self-assessment. The team has been hard at work for a few months now, and you should see the official product become available shortly. We wish to thank Tim and his group for their ongoing efforts. This will be a professionally developed educational tool that will be of immense help to practicing intensivists who are in the process of maintenance of certification. You will be able to access it through the Pedialink page on the AAP-members only website.

A new organization, the Council of Pediatric Subspecialties, is under development. It is composed of two representatives of each official pediatric subspecialty and is currently supported by AMSPDC (the pediatric chairs group) and the APPD (the pediatric program directors). The initial representatives to this organization as it started up were myself, representing the AAP, and Donald Vernon, representing the ABP. One member must be a program director. At the recent SCCM pediatric fellowship director's meeting in Orlando, Richard Mink was elected to serve as the program director representative, and will serve as the SCCM member. In October at our next section meeting, the AAP representative will be elected.

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This is the newsletter of the Section on Critical Care of the American Academy of Pediatrics. The opinions expressed herein do not necessarily reflect the opinions of the American Academy of Pediatrics.

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## A Note from the Chair

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That election will give you yet another reason to attend the coming NCE. We have a dynamic program planned. The first day of our section's program (October 28, 2007) will see a morning on "disaster preparedness," the afternoon will be the traditional abstract presentations, and the distinguished career award presentation, followed by the reception and abstract awards ceremony. The following day (October 29) we are planning a joint program with the sections on emergency medicine and child abuse on "the abused child in the hospital."

I strongly encourage you all to make plans to join us in San Francisco, and to encourage your fellows and colleagues to submit abstracts for presentation. If you come, be sure to plan to stay for the reception, where we will vote for the new representative to the Council on Pediatric Subspecialties, hold the raffle for the door prizes, and present the awards for best abstracts.

The AAP is a great organization, but our section can remain vibrant only if we have the interest and participation of the entire population of pediatric intensivists. We welcome new faces and will find a way to help you get and stay involved in section activities. This year the section election will be conducted by e-mail. Please watch your mailboxes for the ballot which should reach you in a few weeks.

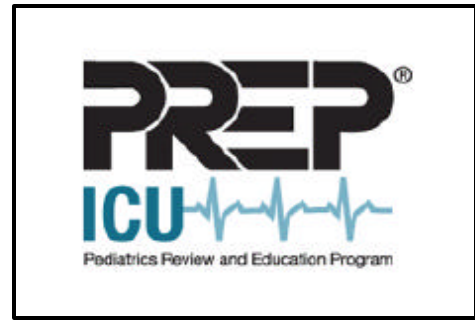
I look forward to seeing you all in October. As always your executive committee wants to hear from you. Please feel free to contact us with your ideas, concerns and projects.

Sincerely,

Alice D. Ackerman, MD  
aackerman@carilion.com



## PREP ICU



The American Academy of Pediatrics (AAP) is pleased to announce the upcoming release of PREP ICU, a life-long review and education series for pediatric intensivists. PREP ICU is the product of an ongoing collaboration between members of the Section on Critical Care and the AAP Department of Education.

From the trusted Pediatric Review and Education (PREP) program developed by the AAP to help pediatricians prepare for the American Board of Pediatrics Program for Maintenance of Certification in Pediatrics® (PMCP®), PREP ICU was developed to meet the specific education needs of pediatric intensivists.

This web-based self-assessment and review series will offer eight peer-reviewed questions and critiques monthly. Members of the PREP ICU Advisory Board include:

- Dana Braner, MD
- Susan Bratton, MD
- Edward Conway, MD
- Richard (Tad) Fiser, MD
- Bradley Fuhrman, MD
- Mary Lieh-Lai, MD
- Anthony Pearson-Shaver, MD
- Ann Thompson, MD
- Jeremy Garrett, MD, Co-Editor
- Otwell Timmons, MD, Co-Editor

PREP ICU will be available late summer 2007. For more information, contact Monique Evelyn at (847) 434-4728 or [mevelyn@aap.org](mailto:mevelyn@aap.org).

## SOCC New Investigator Research Award Update

One of the unique benefits of AAP SOCC membership for fellows and junior faculty in academic practice is the New Investigator Award from the Section, now in its 10<sup>th</sup> year. This competitive award, from \$7,500 to \$10,000, is available to fellows in Pediatric Critical Care or faculty within 2 years of completing their fellowship who are members of the Section. The applications have been judged on the criteria of innovation, significance, approach, environment and aptitude of the investigator. New for 2007, we will include "financial need" as a metric. We recognize many young investigators are already supported in a senior scientist's large lab; such projects would likely proceed with or without this award. We would like to be able to make a more substantive impact this year, by including financial need as a factor. In addition, many of the projects funded in the past have been bench research endeavors. In subsequent years, we would like to especially encourage applicants with clinical research or non-traditional research projects to apply as well.

The table is a list of all previous New Investigator Award winners and their project titles. We're sure you'll recognize a number of these individuals who are well on their way to establishing productive investigative careers.

AAP SECTION ON CRITICAL CARE NEW INVESTIGATOR RESEARCH AWARD		
Year	Recipient	Title of Abstracts
1996	Heidi V. Connolly, MD University of Rochester School of Medicine, Rochester, NY	"Tissue Oxygen Delivery: Implications for Cellular Hypoxia"
1996	Paula Ann Chorazy, MD Medical College of Wisconsin	"Modulation of Oxyradical Toxicity by Glutathione Redox Elements"
1997	Jeannette C. Cocabo, MD Washington University School of Medicine St Louis, MO	"Neurophysiological Consequences of Aborted Apoptosis"
1998	JoAnne E. Natale, MD, PhD Johns Hopkins Hospital Baltimore, MD	"Glutamate Transporters in Newborn Cerebral Hypoxia-Ischemia"
1999	Scot Bateman, MD Harvard School of Public Health Boston, MA	"Neutrophil and Platelet Sequestration in Diffuse Lung Injury"
1999	Neal Thomas, MD Penn State University College of Medicine Hershey, PA	"Collectins and Inflammation in Multiple Organ Dysfunction"
2000	Sree Chirumamilla, MD Medical College of Virginia Children's Medical Center, Richmond, VA	"Traumatic Brain Injury Induced Cell Proliferation in the Mammalian CNS"
2001	Lara Primak, MD University Hospital of Cleveland Cleveland, OH	"Vasopressin Antagonism following Cardiopulmonary Bypass"
2002	Melissa C. Evans, MD Medical College of Virginia Richmond, VA	"Use of Protein Synthesis Inhibitors for Metabolic Down-Regulation in Shock"
2003/ 2004	No award/funding not available	
2005	Janet Rossi, MD Children's Memorial Hospital Chicago, IL	"The Role of Myosin Light Chain Kinase in Acute Lung Injury and Sepsis"
2006	Eman Al-Khadra, MBBS, MPH Brigham & Women's Hospital Boston, MA	"Role of Pantone-Valentine-Leukocidin in the virulence of Community-Associated MRSA"

## SECTION ON CRITICAL CARE EDUCATIONAL PROGRAM SCHEDULE

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**Sunday, October 28, 2007**

### **SOCC Educational Program**

**8:00 am – 12:00 pm**

“Disaster Management: The PICU Perspective ”

8:00 – 8:10 am

Introduction  
**John P. Straumanis, MD, FAAP**

8:10– 8:55 am

Disaster Management: What Makes Children Different?  
**Joan E. Shook, MD, MBA, FAAP**

8:55 – 9:40 am

Hurricane Katrina: A PICU Perspective and Lesson  
**Lutifat A. Kashimawo, MD, MB, ChB, FAAP**  
**Leron J. Finger, MD, FAAP**

9:40 – 9:55 am

Coffee Break

9:55– 10:40 am

Triaging Mass Casualties: Who Gets in the PICU  
**J. David Roccaforte, MD**

10:40 – 11:25 am

Avian Flu: Can PICUs Be Prepared  
**Richard A. Schieber, MD, MPH, FAAP**

11:25 –12:00 pm

Panel Discussion

### **SOCC Scientific Abstract Presentation Session**

**1:00 – 6:00 pm**

1:00 – 1:30 pm

Presentation of Distinguished Career Award  
Recipient: **Ashok P. Sarnaik, MD, FAAP**  
Presented by: **Mary Lieh Lai, MD, FAAP**

1:30 – 2:45 pm

ABSTRACT SESSION I (Moderators: TBA)

2:45 – 3:00 pm

**Coffee Break and Poster Review**

3:00 – 4:15 pm

ABSTRACT SESSION II (Moderators: TBA)

4:15 – 4:30pm

2006 New Investigator Research Award: Presentation and Findings  
Role of Pantone-Valentine-Leukocidin (PVL) in the Virulence of Community-Associated  
Methicillin Resistant S. Aureus (MRSA)  
**Eman Al-Khadra, MD, MPH, FAAP**

4:30 – 6:00 pm

SOCC Reception/Poster Review and Awards Ceremony  
Outstanding Abstract Awards

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**American Academy of Pediatrics**  
**National Conference & Exhibition**  
**October 27 - 30, 2007 San Francisco, CA**



## **SECTION ON CRITICAL CARE EDUCATIONAL PROGRAM SCHEDULE**

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**Monday, October 29, 2007**

### **Joint Educational Session:**

### **Sections on Critical Care, Child Abuse and Neglect, and Emergency Medicine**

**8:00 am – 11:00 am**

“The Abused Child in the Hospital:  
Issues for Emergency Physicians, Intensivists and Hospitalists”

Moderators:

**Vincent J. Palusci, MD, MS, FAAP** and **John P. Straumanis, MD, FAAP**

8:00 am

The Abused Child in the Emergency Department  
**Robert A. Shapiro, MD, FAAP**

9:00 am

The Abused Child in the Intensive Care Unit  
**Heather T. Keenan, MD, FAAP**

10:00 am

The Abused Child in the Hospital  
**Michael E. Ruhlen, MD, FAAP**



# Preparing for Life in Academics

## Survival Skills for Fellows & Young Faculty

**Friday, October 26, 2007**

### Schedule

- 8:00 AM Introduction
- 8:10 AM Sibling, Parent, Spouse and Me: Balancing Academic and Home Life
- 9:10 AM Moving up the Academic Food Chain
- 10:00 AM Break
- 10:15 AM The Teaching Portfolio- How Not to Sell Yourself Short
- 11:00 AM Research - Humans, Animals or Cells - Where do I Begin? Where do I want to go?
- 12:00 PM Lunch
- 1:30 PM Don't Get Sick in July – The Case for Simulation-Based Orientation and Skills Training
- 2:30 PM The Good, The Bad, and The Ugly - Providing Evaluations and Feed-back
- 3:30 PM Break
- 3:45 PM Effective Presentations and PowerPoint
- 4:30 PM Panel Discussion: Getting Promoted - Life Experiences
- 5:30 PM Reception
- 6:30 PM Adjourn

Preparing for Life in Academics is a one day seminar developed specifically for those preparing to enter academic medicine or just starting their academic career. The course brings together academic leaders from a number of medical disciplines to discuss many of the issues not covered during traditional fellowship training. In this course, participants will learn the promotion and tenure process, strategies for providing evaluations and feedback to trainees, how to design slides and give effective presentations, disclose errors/reduce malpractice risk, and understand the basic science of clinical research and funding research.

### Faculty

*Bonita Stanton, MD, FAAP*  
*Ann Thompson, MD, FAAP*  
*Mary Lieh-Lai, MD, FAAP*  
*Jeffrey Blumer, MD, PhD, FAAP*  
*Jeff Clark, MD, FAAP*  
*Franklin Medio, PhD*  
*Steve Schexnayder, MD, FAAP*

### Panel

*Barry Markovitz, MD, MPH, FAAP*  
*Michele Moss, MD, FAAP*  
*Rich Salerno, MD, MS, FAAP*  
*Don Vernon, MD, FAAP*

*Sponsored by the AAP Section on Critical Care*

### Registration Information

Please visit: <http://www.aap.org/nce> to register; c600  
Note: Course is open to NCE registrants only. An additional fee of \$100 is required. Breakfast, lunch, breaks, and a reception are provided.



## Drug Update - Summer 2007

### I. MEDICATION ERRORS

1. Vials of propofol and rotaglide look alike. Rotaglide is a lipid-based emulsion of egg yolk, olive oil and glycerin used for atherectomies, knee arthroplasty and to lubricate cardiac stents. The vial looks like propofol manufactured by Baxter and is the same size as the 200 mg/20 mL vial of propofol. An anesthesiologist picked up the vial of rotaglide thinking it was propofol. However he could not aspirate the drug and upon rechecking, realized it was rotaglide.
2. Vials of norepinephrine and bumetanide (Bedford Laboratories) look alike. An order of 1 mg of bumetanide was written for a patient. Instead he was given 4 mg of norepinephrine. The patient developed chest pains, ventricular tachycardia and ST elevation and required admission to the ICU.



Rotaglide labels (left) looks like propofol (right), especially when the vials are turned.



Look alike vials have similar labels and caps.

3. Instead of 0.9% NaCl, 23.4% NaCl was used to mix with a chemotherapeutic agent. The 2-year-old died.
4. A 44-year old woman died after receiving 8000 mg of phenytoin IV instead of 800 mg. The nurse actually had to draw up the medication from 32 vials (50 mg/mL, 5 mL)
5. Errors from Opiates
  - Look alike names and packages – hydromorphone (Dilaudid) and morphine: confusion arises from look-alike
    - dose packaging, name similarity and the misconception that dosing of the 2 drugs is similar on a mg/mg basis
    - Equianalgesic Dose (mg/kg/dose) 0.1 mg of IV morphine = 0.015 mg IV of hydromorphone
  - Dosing errors –
    - increasing continuous opiate infusion rates to provide a bolus dose and forgetting to turn the rate back
    - Inaccurate use of opiate patches
    - Oversedation of patients when PCA is used “by proxy”
  - Respiratory Failure –
    - failure to monitor for respiratory depression
  - Confusing  $\text{MSO}_4$  (morphine sulfate) and  $\text{MgSO}_4$  (magnesium sulfate): these abbreviations should not be allowed.

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## II WARNINGS

1. Heparin sodium injection 10,000 units/mL and Hep-Lock 10 units/mL. The two solutions have been mistaken for each other. Three infant deaths reported when the 10,000 units/mL solution was used instead of the 10 units/mL Hep-Lock solution.
2. Parenteral use of promethazine or Phenergan. Promethazine is commonly used to treat nausea and vomiting. It also has antihistamine and sedative effects. However, it is formulated with phenol and has a pH of 4 and 5.5. It is a known vesicant and is highly caustic to the intima of blood vessels. There are a number of case reports of promethazine being injected intravenously and of accidental intra-arterial injections. The resulting tissue necrosis and gangrene necessitated amputations.



3. Use of cough and cold medications for infants – 3 infants found dead in their homes has high levels of pseudoephedrine in post-mortem blood samples.
4. Smoking is hazardous to your health: An employee used an alcohol-based hand sanitizer and went outside to smoke. As he was lighting the cigarette, his hands burst into flames.
5. Do not inject topical thrombin intravenously. A physician injected topical thrombin into the track of a recently-removed central venous catheter and the patient died. Another patient died after he was given 5000 units of thrombin IV during surgery.
6. The FDA has banned the use of unapproved cough and cold remedies that contain carbinoxamine – an older sedating antihistamine. Carbinoxamine has been linked to 21 deaths in children < 2 years of age.

Source: ISMP Medication Safety Alert



A procedure note found in a chart:  
**“Lumbar puncture attempted by  
three pricks”**

( [REDACTED] ).

The individual’s names were blacked  
out for their protection.

## picucourse Update

The picucourse website continues to grow. The contents of the website have now been translated to German and Portuguese. The second set of post-test questions is being used by many pediatric residency programs. Mohan Mysore submitted data from the picucourse for presentation at the Critical Care Medicine World Congress in Geneva, and the abstract was accepted for poster presentation.

The third set of post-rotation questions should be ready for posting in July 2007. We are attempting to have one set of pre-rotation test questions and a second set of questions at the end of the ICU rotation. Apparently, having this format is not as easy to do.

There are a number of new presentations that are in the pipeline for posting. These include:

1. Arrhythmias
2. Toxicology
3. Coma
4. Spinal Cord Injury
5. Endocrine Emergencies

Unfortunately, there have been quite a number of personnel changes at SCCM, and this had led to a bit of a backlog. We will continue to work with SCCM in getting new presentations and the 3rd set of questions posted.

Please contact Ken Tegtmeyer or Mary Lieh-Lai if you have any suggestions. Once again, I would like to thank all those who have contributed presentations and questions to the course.



## ACGME Residency Review Committee

The Pediatric RRC has continued to revise general subspecialty and individual subspecialty requirements, and the program information forms (PIF). Revisions are made with input from the AAP, AMA, ABP membership. As the requirements are finalized, they are posted on the [acgme.org](http://acgme.org) website.

There is increasing emphasis on the development of appropriate goals and objectives for the training program. It is important to design goals and objectives that are measurable. Again, on the ACGME website, there are modules available to help with formulating goals and objectives and curriculum design. In addition, programs should ascertain that their trainees are evaluated according to the 6 competencies. Obtaining 360° evaluations for the fellows are important as well. This includes evaluations from allied health personnel (nurses, respiratory therapists, etc.) and from the families of patients or the patients themselves.



**34th Annual  
National EMS Week  
May 20-26, 2007**

[www.acep.org](http://www.acep.org)

## Pediatric Critical Care Scientist Development Program

### A. PCCSDP-K-12 Update

What is the PCCSDP? The Pediatric Critical Care Scientist Development Program (PCCSDP) is a national faculty training program that develops successful pediatric critical care physician scientists. The goal of the PCCSDP is to increase the number of highly trained, successfully funded, and sustainable pediatric critical care physician scientists who will do research to enhance the scientific understanding, clinical management, and rehabilitation of critical illness in children. The PCCSDP is funded by the National Institute for Child Health and Human Development (NICHD).

- a. Eleven Scholars have been admitted to the program since its inception, which is ahead of schedule and this reflects the high caliber of the candidates.
- b. Mike Dean has hired a consultant, Bautista Consulting, who will be systematically contacting Departments around the country to try to identify candidates, and to help us try to let younger people know about the program prior to them becoming faculty.
- c. National Advisory Committee: Jeffrey Blumer, Ph.D., M.D. , Jeffrey Burns, M.D. , Jeffrey Fineman, M.D., Thomas Green, M.D., Patrick Kochanek, M.D., Mary Lieh-Lai, M.D., George Lister, M.D., M. Michel Mariscalco, M.D., Carol Nicholson, M.D., Daniel Notterman, M.D.
- d. Contact information: <http://www.pccsdp.org/>  
Program Director: J. Michael Dean, MD, MBA Email: [mike.dean@hsc.utah.edu](mailto:mike.dean@hsc.utah.edu)

### B. Match Update

1. There continues to be problems with the PCCM Fellowship Match. The consensus is that it should continue. However, there was also wide agreement that the most egregious offense is for a program to claim to be in the MATCH and yet to be offering applicants positions outside of the MATCH. The chair of the Fellowship Directors committee (Jeff Burns) will contact all programs to ask them if they are participating in the match. A list of those programs participating and not participating in the MATCH would be published. In addition, the Chair will directly contact the program directors of programs reported to have offered positions outside the match, and yet claiming to be in the match, to confirm the MATCH violation allegation and to discuss immutable adherence to the MATCH rules.

Match Candidates:

- i. Fellow applicants who ***must enter*** the MATCH:

Anyone who seeks three years of fellowship training, whether for ABP eligibility or an international applicant who does not seek ABP certification but seeks three years of training. Candidates pursuing two fellowships in series. Fellows seeking a second fellowship after completing a first over three years, though the ABP pathway at least, need only complete two years in the second fellowship, regardless of where they train. These fellow applicants ***ARE NOT*** exempt from the MATCH if they are seeking to do a second fellowship, as the second fellowship can occur at any institution. Thus, as they have no prospectively approved program for integrated training at one institution by the appropriate board granting agency, these candidates must go through the MATCH for both the first and second fellowship.

- ii. Fellow applicants who ***are exempt*** from the MATCH:

- Fellows with prospective approval to integrate two fellowships (i.e. shorten the duration of training). Combined fellowship proposals (where the candidate seeks prospective approval by the ABP to reduce the total years of training by merging two fellowships at one institution) ***ARE*** exempt from the Match. For example, a fellow seeks to do a Cardiology-Pediatric Critical Care Fellowship at one institution for a total of 4 years instead of the usual 5. The ABP prospectively approves this proposal, but only if it occurs under the circumstances prospectively planned by two program directors at the same institution. With that letter of approval from the ABP in hand, the fellow applicant couldn't possibly go into the MATCH until all programs have a common MATCH deadline (let alone the logistical burden on the applicant to arrange prospective letters from multiple program directors at all institutions they might apply to that would all have to be prospectively approved by the ABP to make the MATCH sorting among different programs feasible.

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- Spouses (often, not always). If the applicant's spouse must live in a certain city, and as long as there is only one ACGME certified pediatric critical care fellowship training program within reasonable commuting distance, the applicant is exempt from the MATCH.
- Military scholarships. The U.S. Military presently awards scholarships for fellowship training in December of the year prior to the July start of fellowship training (i.e. well after the MATCH cycle). Thus, those applicants already awarded a military scholarship are exempt from the MATCH.

#### NRMP Update

- a. No decision has yet been made about a combined Pediatrics fellowship match.
- b. To quote the Director of the NRMP in a recent email exchange with me, "If we move forward, however, there likely will be two matches, one that runs roughly January-June and a second that runs July-December. I am hoping the new Council of Pediatric Subspecialties will take the lead on this issue."
- c. For 2007-2008 all programs should plan on Quota change deadline late September 2007, Rank order list deadline early October 2007, and Match day early November 2007.

### C. Fellowship Survey Data

Wynne Morrison, the Associate Director Fellowship Director at CHOP presented her findings from a survey of our program directors over the past year. One encouraging finding is that both large and small programs are preserving the necessary research time for fellows.

For further details please contact Wynne at [morrisonw@email.chop.edu](mailto:morrisonw@email.chop.edu).

### D. Program on Professionalism at Children's Hospital of Los Angeles

1. Niurka Rivero, Fellowship Director at CHLA, gave a presentation of an interesting program on professionalism that they have developed for their fellows.
2. The purpose of their course is to increase professional effectiveness by focusing on leadership and professionalism.
3. Consider the idea that our influence in our medical context comes from our credibility, our ability to effectively lead and develop alignment with others.
4. Look at dimensions of leadership including character, emotional intelligence, community, culture, and organizational context, uses of power, as well as effective styles of leadership.
5. Topics will focus upon the person as leader and the organizational structure that supports his/her leadership.
6. Building leadership competence and professional maturity through personal change and leading our organizational structures to patient and organizational health.
7. Training in professional networking and development of a career plan.
8. Contact Niurka at [JJMNRMD@aol.com](mailto:JJMNRMD@aol.com) or Randall Wetzel at [rwetzel@chla.usc.edu](mailto:rwetzel@chla.usc.edu) for further details.

### E. Web-Based Video Lectures Project

Design, Development and Implementation of the Program:

1. The design will be similar to the principles of the American Association of Medical College's MedEdPORTAL: structured as a traditional print journal having an editor and 5 member editorial board, maintaining a peer review policy, following a rigorous process and using invited expert reviewers.
2. Original copyrights are not transferred but remain with authors of the video lecture.
3. The project will follow a three phase process: establish core competencies; articulate template for each video presentation; identify expert teachers for each competency; invite peer-reviewed outline of the proposed presentation; record and publish video presentation on the web; each presentation will be updated every three years  
The objectives of this program are:
  1. To enhance pediatric critical care fellowship education across the nation by identifying outstanding teachers and posting their lectures on the Web using streaming video.
  2. To advance the field of pediatric critical care medicine by identifying core educational concepts and providing a resource help learn these concepts.
  3. To encourage ongoing collaboration among pediatric critical care fellowship programs.
  4. To recognize educational scholarship by providing a forum for innovative formats for teaching.

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Obstacles:

1. Video-based lectures are inherently limited by the inability to the teacher to interact with students. The program will still be a useful resource. Programs can supplement the video-based lecture with the views on each topic of local faculty and allow for the give-and take between teacher and students not possible with videotaped presentations alone.
2. Is the core curriculum intended to replace individual fellowship program priorities and objectives? No. This program is intended as a supplement to enhance all programs. Moreover, it is not intended to be a mandatory requirement for pediatric critical care fellows.
3. Where will we get the support to develop and sustain such a program?
  - Jeff Burns will make a five year commitment of 10K per year from the Division of Critical Care Medicine at Children's Hospital Boston, if we are unable to obtain other funds.
  - Please note, funding support from one institution is not to interfere in anyway with Web location, editorial independence, or the promotion of institutional or individual objectives.
4. Where do we go next?

Jeff Burns will draft a more detailed protocol for the development of this project and e-mail it to the membership, and will follow this up with a telephone call.

F. CCM Fellowship Program Directors Meeting Minutes by Jeff Burns

Nominations for next Chair of Fellowship Program Director's Committee

Next year's meeting will mark the end of Jeff Burn's second term as Chair of the Pediatric Critical Care Medicine Fellowship Director's committee. Following discussion with Ed Conway, the current Chair of the Pediatric Critical Care Executive Committee, it was agreed upon that it was best to solicit nominations for the next Chair of the Fellowship Director's committee, to begin his or her duties at the end of next year's meeting. If you are interested, or would like to nominate someone else, please e-mail Jeff Burns ASAP at: [Jeffrey.Burns@Childrens.Harvard.EDU](mailto:Jeffrey.Burns@Childrens.Harvard.EDU).

## Infant CPR Anytime

A self-directed 22-minute program that teaches the core skills of **infant CPR** and relief from choking is now available for families, friends, grandparents, siblings and others caring for **infants**.

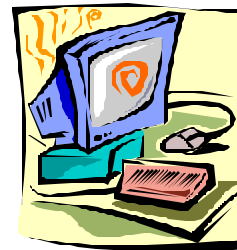
**Infant CPR Anytime** was developed by the Academy in coordination with the American Heart Association and uses the technology of Laerdal Medical. Research has shown the program to be equivalent to a traditional **CPR** course for learning the core skills of **CPR**.

The program uses the American Heart Association's "practice-while-watching" technique for learning **CPR** skills. Users practice **CPR** on a mannequin while watching skills being taught and performed on the DVD.

The kit contains everything necessary to learn **infant CPR** and relief from choking, including a personal, inflatable baby mannequin; **CPR** skills practice DVD; fold-out quick reference guides (two sizes); and sanitizing wipes and a replacement lung for the mannequin.



To order, visit the AAP online bookstore at [www.aap.org/bookstore](http://www.aap.org/bookstore) or call 888-227-1770.

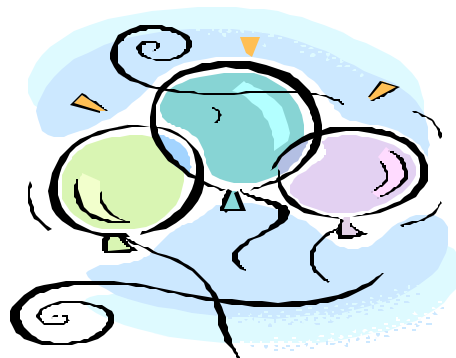


## Welcome New Section Members April 2006 to April 2007

Edgar Acevedo MD  
Allesandro Acosta, MD  
Dennis Basila MD  
Diane Begany MD, FAAP  
Judith Brill MD, FAAP  
Rebecca Carchman MD, FAAP  
Enrique C Carrion-Vargas MD, FAAP  
William Ching MD, PhD  
Jennifer Cohen MD, FAAP  
William Cutrer MD  
Mihaela Damian MD  
Sanjeev Datar MD, PhD, FAAP  
Bridget Donell MD  
Eric Exelbert MD, FAAP  
Alireza Fathi MD, FAAP  
Jordana Fenik MD  
Jill Fitch MD, FAAP  
Megha Fitzpatrick MD  
Richard Fox MD, FAAP  
Stuart Friess MD, FAAP  
Karen Gerdes MD, FAAP  
Aaron Godshall MD, FAAP  
Monika Goyal MD  
Jyoti Gupta MD  
William Harmon MD, FAAP  
Jeremy Hertzig MD  
Patrick Hines MD, PhD  
Bert Johansson MD, PhD, FAAP  
Asif Kazmi MBBS, FAAP

Steven Kernie MD, FAAP  
John Kheir MD  
Jane Kiff MD, FAAP  
Jason Knight MD, FAAP  
Ravishankar Koppada MD  
Anastassios Koumbourlis MD, MPH, FAAP  
Ranjit Kylathu MD, FAAP  
Ann Marie LeVine MD, FAAP  
Christopher Mastropietro MD, FAAP  
Christine Mikesell MD  
Kelly Miller MD, FAAP  
Philip Millet MD  
JoMaryam Naim MD, FAAP  
Anne Natale MD, PhD, FAAP  
Akira Nishisaki MD, FAAP  
Clinton Pietz MD, FAAP  
Michael Ponaman MD, FAAP  
John Pope MD, FAAP  
Katherine Potter MD  
Erin Reade MD  
Michelle Schober MD, FAAP  
Jamie Schwartz MD, FAAP  
Mahesh Sharman MD, FAAP  
Jama Sy MD, FAAP  
Susan Tourner MD  
David Turner MD, FAAP  
Mark Uhl MD, FAAP  
Kiran Upadhyay MD  
Jenny Wang MD, FAAP

*Welcome New Members*



Articles Authored by SOCC Members  
AAP Grand Rounds



<http://www.pedsccm.org/>

CALENDAR OF EVENTS

**5th World Congress on Pediatric Critical Care**

June 24-28, 2007  
Geneva, Switzerland  
[Http://www.pcc2007.com](http://www.pcc2007.com)

**American Board of Internal Medicine (ABIM)  
Critical Care Self-Evaluation Process (SEP)  
Module Review**

August 5-6, 2007  
The Fairmont Chicago  
Chicago, Illinois  
<http://www.sccm.org>

**Critical Care Academy:  
Your Official Source for Board and Pep and Review**

August 5-11, 2007  
The Fairmont Hotel  
Chicago, Illinois  
<http://www.sccm.org>

**Adult & Pediatric Multiprofessional Critical Care Review**

August 7-11, 2007  
Chicago, Illinois  
<http://www.sccm.org>

**AAP National Conference & Exhibition (NCE)**

October 27-30, 2007  
San Francisco, CA  
[http://s23.a2zinc.net/clients/aap/nce2007/public/  
MainHall.aspx](http://s23.a2zinc.net/clients/aap/nce2007/public/MainHall.aspx)

**Society of Critical Care Medicine's 37th Annual Critical  
Care Congress**

February 2-6, 2008  
Honolulu, Hawaii  
<http://www.sccm.org>

**5th Annual Canadian Critical Care Conference and  
17th Annual Pediatric Critical Care Colloquium**

February 20-23, 2008  
Wistler, BC Canada  
[www.canadiancriticalcare.ca](http://www.canadiancriticalcare.ca)



- Susan L. Bratton  
**Rocky Mountain Spotted Fever: Diagnosis Difficult, Treat Presumptively**  
*AAP Grand Rounds*, May 2007; 17: 52 - 53.
- Susan L. Bratton  
**Decreasing Catheter-Related Bloodstream Infections in the ICU**  
*AAP Grand Rounds*, Mar 2007; 17: 27.
- Susan L. Bratton  
**Intra-abdominal Hypertension and Abdominal Compartment Syndrome**  
*AAP Grand Rounds*, Feb 2007; 17: 19.
- Susan L. Bratton  
**Organ Donation After Cardiac Death: Provider Attitudes**  
*AAP Grand Rounds*, Feb 2007; 17: 22.
- Armand H. Matheny Antommaria and Nanette C. Dudley  
**Should Families Be Present During CPR?**  
*AAP Grand Rounds*, Jan 2007; 17: 4 - 5.
- Elizabeth Saarel  
**Sudden Death and Long-QT Syndrome**  
*AAP Grand Rounds*, Dec 2006; 16: 62 - 63.
- Susan L. Bratton  
**Fluid Therapy for Acute Lung Injury**  
*AAP Grand Rounds*, Nov 2006; 16: 53 - 54.
- Susan L. Bratton  
**Computerized Provider Order Entry Redux**  
*AAP Grand Rounds*, Oct 2006; 16: 42.
- Susan L. Bratton  
**Outcome of Ventricular Fibrillation in Children**  
*AAP Grand Rounds*, Oct 2006; 16: 41 - 42.
- Karen Booth  
**Surgical Outcome for Hypoplastic Left Heart Syndrome**  
*AAP Grand Rounds*, Sep 2006; 16: 29 - 30.
- Susan L. Bratton  
**Fatality in Hemolytic Uremic Syndrome**  
*AAP Grand Rounds*, Jul 2006; 16: 80.
- Susan L. Bratton  
**Humidity Treatment Does Not Improve Croup in the ED**  
*AAP Grand Rounds*, Jun 2006; 15: 65 - 66.
- Gitte Larsen  
**Insulin Therapy in the ICU**  
*AAP Grand Rounds*, Jun 2006; 15: 73 - 74.

## Section on Critical Care Membership

- √ Advocacy
- √ Educational Programs
- √ Networking
- √ Leadership opportunities
- √ Awards / New Investigator Research Grant (for SOCC members only)
- √ Abstract Submission
- √ Biannual Newsletter
- √ Eligible for election to the SOCC Executive Committee
- √ Access to SOCC website (<http://www.aap.org/sections/critcare>) and Listserv

### How to Join?

It's easy! Go to <http://www.aap.org/moc/memberservices/sectionform.cfm> (AAP Members Only Channel, Member Services) to complete a fast-track online application or call AAP Membership at 800/433-9016. Annual dues are \$35 for AAP Fellows; \$10 for Residents.

### SOCC Executive Committee 2007-2008

Chairperson: Alice Ackerman, MD  
Ed Conway, Jr, MD  
Dave Jaimovich, MD  
Barry Markovitz, MD, MPH  
Megan McCabe, MD  
Vicki Montgomery, MD  
Don Vernon, MD  
Ex-Officio: Michele Moss, MD

Newsletter Editor: Mary Lieh-Lai, MD  
Program Chair: John Straumanis, MD  
Web Site Editor: Barry Markovitz, MD, MPH  
COPEM Liaison: Tom Bojko, MD, MS  
SCCM Liaison: Ed Conway, Jr, MD  
ACCM Board Liaison: Tim Yeh, MD  
Transport Medicine Liaison: Michele Moss, MD  
AAP Staff: Sue Tellez

### Section on Critical Care Strategic Plan

To view the Section's Strategic Plan including current objectives, visit the SOCC Members Only website at:  
<http://www.aap.org/moc/displaytemp/soccstrategicplan0708.pdf>