



# KIDney NOTES

## *Fifteenth Congress of the IPNA will be held in New York City*

We are pleased to announce that the Fifteenth Congress of the IPNA will be held in New York City from August 29th - September 2nd, 2010. Rick Kaskel will Chair. Richard Fine will serve as the Co-Chair, and Ira Greifer, the Past Secretary General of IPNA, will be the Honorary Chairman. The ASPN and the members of the Organizing Committee are looking forward to an outstanding scientific and social venue in NYC.

## **Housing and Registration for the 2005 PAS Annual Meeting is now open!**

**For substantial savings REGISTER BEFORE MARCH 15, 2005 for the May 2005 ASPN Annual Meeting in Washington, D.C.**

**For additional meeting information and to register, visit the PAS web site at:**

**[www.pas-meeting.org](http://www.pas-meeting.org)**

**Be sure to indicate when you register and make your reservation that you are an ASPN member. This will automatically place you in our headquarters hotel - Renaissance Washington D.C.**

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### *President's Corner*

Dear Colleagues:

Thanks to all of you who responded to the Clinical Affairs Committee questionnaire. Joseph Flynn has compiled the data and will be sharing that with you. If you did not have an opportunity to respond please contact Joseph as he can still incorporate your information. These data about our clinical practices will be used by a number of our committees as they go about their tasks.

I thought that our participation in the recent American Society of Nephrology Meeting in St. Louis was quite a success. Our members were well represented and continue to be leaders in nephrology research. Elsewhere in this edition of the Newsletter you will see our broad representation on ASN committees, a tribute to the recognition our colleagues have earned.

Also in this edition are articles describing Bruce Morgenstern's work with the new common fellowship application process and Eileen Brewer's attendance at several meetings as the ASPN representative. Importantly, she and Barb Fivush, along with Jennifer Shevchek, attended Centers for Medicare and Medicaid Services (CMS) meetings regarding the Fistula First Project and the new facility billing structure for case-mix which allows improved reimbursement for facilities dialyzing children, without requiring a pediatric exception. It will be important that we work closely with CMS to see that this policy is implemented in a way that benefits our patients.

Another significant accomplishment is that ASPN member Ruth McDonald has worked with UNOS to develop criteria for enhancing assignment of kidneys to children. This, too, is detailed in this issue. Our Research and Public Policy Committees will be working on initiatives to help maximize appropriations for NIH in this era of severe budget constraints at the federal level. It will be very important to continue the strong support that our research portfolio has received in recent years.

Finally, I want to wish each of you a happy holiday season and all the best for the new year.

*Sandy*

## Common Form to be Implemented for 2007 Fellowship Applicants

Plans are moving forward to begin using ERAS, the Electronic Residency Application Service as a common application template for applicants to our fellowship programs. This system will open in July 2005 for applicants for training starting July 2007. Programs will be able to access applications in December 2005, so that interviews can be scheduled in January, 18 months before the start date. If you are unfamiliar with the ERAS system, either ask the residency coordinator of your institution's general Pediatrics training program or look at what is available at <http://www.aamc.org/programs/eras/programs/start.htm>. The tours on the right side of this webpage may be most helpful. Look at the FindAResident link as well. This tool can be used to find open positions by residents who make a late choice to seek nephrology training.

In the next few months, program directors should receive a packet from the ERAS group. Read this carefully. You will have an opportunity to put data about your program into the system so that potential applicants can access this information from within ERAS. It is in your best interest to make certain that the information is correct.

If you are part of a Med-Peds nephrology program, please note that Med-Peds programs will be listed in ERAS as 'tracks' of the main program. If you run the "Peds" part of a Med-Peds fellowship, when you complete the ERAS data for your program, remember to include this as a type of training offered by your program. As our internist colleagues are also moving to ERAS, you might want to coordinate with your partner program to ensure that the Med-Peds track is included in just one of your ERAS listings. We will try to make the Peds site the place where this information will be consistently found. We will be sending letters to the general Pediatrics and the Med-Peds program directors in a few months asking that they let their residents know of this upcoming change, which will affect primarily first-year Pediatrics residents and 2<sup>nd</sup> year Med-Peds residents.

- Bruce Morgenstern

## ASPEN Attends "Fistula First" Meeting

CMS (Centers for Medicare and Medicaid Services) held a "Fistula First Breakthrough Initiative" meeting on the morning of November 19, 2004, followed by an afternoon ESRD Open Door Forum meeting. "Fistula First" is the name given to the National Vascular Access Quality Improvement Project now being conducted by all 18 ESRD Networks to promote the use of A-V fistulas in all suitable dialysis patients. CMS designation as a "breakthrough initiative" means that all of the agency's resources, not just the ESRD segments, will be used to provide national publicity, educational materials, follow-up and statistical analysis. CMS is partnering with all 18 ESRD Networks, dialysis providers, nephrologists, vascular access surgeons, interventional radiologists, nephrology nursing, dialysis technicians, and other caregiver and patient groups. ASPEN was invited to participate and provide comments on the pediatric perspective of "Fistula First." Eileen Brewer and Barbara Fivush attended for the ASPEN and provided public comments about the unique aspects of vascular access in children. Tentative plans are to launch the national campaign early next year, likely at the end of February or March, 2005.

- Eileen Brewer

## Dialysis Survey Update

Over 75 responses to the dialysis survey have been received to date. Results are expected to be presented at the ASPEN lunch at the PAS meeting. If your center has not yet returned the survey, please do so as soon as possible so that your data can be included.

## ASPEN Attends Open Door Forum with CMS

At the ESRD Open Door Forum meeting, the ASPEN had the opportunity to thank CMS for including pediatric patients, ages <18 years, in the new case-mix adjustments to the ESRD facility composite rate payments and to clarify that this rate will be applied automatically to any pediatric patient <18 years old, whether in a pediatric or adult or combined dialysis unit. If a pediatric facility has an exception to reimbursement, the exception rate, and not the case-mix adjustment rate, will apply unless CMS/intermediary is informed otherwise. The ASPEN also stated its concern that no recommendations were attached regarding what pediatric services should be provided with case-mix adjusted funds, i.e. higher nurse/patient staffing, dietitian and social worker with pediatric expertise, facilitation of school attendance, attention to growth and development and consultation with pediatric nephrologists. ASPEN continued its offer to partner with CMS in developing of appropriate recommendations for care of pediatric dialysis patients.

- Eileen Brewer

## ASPEN Research Survey-Database Now Online

The ASPEN research database can be easily updated, browsed, and searched by all members. This should facilitate identifying colleagues with similar research interests, potential abstract/manuscript reviewers, etc. However, we ask all members to restrict the use of the database expressly for their own purposes.

To maximize the utility of the website, we ask each of you to:

1. Log in. The survey site URL is (<http://www.aspneph.com/interests.html>). The "user name" and the "password" are the same as for entry into the members-only portions of the ASPEN web site but need to be entered separately here.

2. Complete the form with your entries. An automatic notification will be sent to the ASPEN office each time an entry is made.

3. Browse the site....try to "search" for some info and become familiar with the options.

Should you have any questions, please contact the aspn office at: [aspn@northwestern.edu](mailto:aspn@northwestern.edu) <<mailto:aspn@northwestern.edu>> .

While we plan to monitor the content of this database, ASPEN is not responsible for inaccuracies or for changes that are incorrectly applied. Use of the information contained in this electronic database for commercial or solicitation purposes is expressly prohibited.

## Board defines requirements for scholarship in subspecialty training

The American Board of Pediatrics has developed a 7<sup>th</sup> "competency" for fellowship training, and it relates directly to the scholarly activity of the fellows. For all the specifics, go to the ABP site at <http://www.abp.org/abpfr1024.htm> and follow the link for the new subspecialty training requirements under the Training column. Pay careful attention to item 2, A through E. A recent meeting in Stanford sponsored by the ABP and the Federation of Pediatric Organizations was designed to offer programs hints as to how to best comply with these new rules. These processes will be the subjects of some external review, although the process is not yet known. There was also talk of generating "report cards" on programs over time, but the nature of these comparisons has not been determined. Nephrologists who were present for most of the sessions include: Bruce Morgenstern, Rick Kaskel, Richard Fine, Russ Chesney, Ora Yadin and Steve Alexander (forgive me if I missed your name). If you have questions about these standards, please feel free to contact these individuals.

- Bruce Morgenstern

## RPA Sponsors Symposium on CKD Coverage

The 2<sup>nd</sup> Annual Symposium of the National Coverage Advisory Panel (nCAP) sponsored by the Renal Physicians Association (RPA) was held in New York City on October 9-11, 2004. The nCAP mission is to ensure that coverage policies for chronic kidney disease are appropriate to provide optimal patient care and to promote effective interchange between local and regional nephrologists and the RPA. The purpose of this symposium was to provide dialogue and exchange of information about important nephrology payment coverage issues relating to Medicare, Medicaid and private insurers. Broad representation of nephrologists from around the country as well as representatives from CMS, an intermediary and the private sector were in attendance. Eileen Brewer represented the ASPN and pediatric nephrology. Breakout sessions focused specifically on current issues with Medicare, Medicaid, transplant medicine and private payers. The group recognized that pediatric nephrology has unique issues and invited Dr. Brewer to give comments about specific pediatric issues. She discussed the impact of the new G-codes on pediatric peritoneal dialysis reimbursement, problems with exception for reimbursement for pediatric

dialysis facilities, limited coverage for adolescents transitioning to adult care, and the problems of coverage for children with long-term transplants. The meeting concluded with a list of action items for the next year, which include publishing a training manual for nephrologists to understand decision-making by local carrier advisory committees (CAC), collating a list of insurers by region, publishing an analysis of each state's Medicaid coverage policies for ESRD, publishing toolkits for EPO and IV iron advocacy and continuation of workgroups on Medicare, Medicaid, transplant medicine, private insurers and pediatrics.

## Online Fellowship Directory

Presently we are asking fellowship program directors to post data in the ERAS system. In the near future, we will ask you to populate a database that will be available to potential applicants to Nephrology programs listed on the ASPN web site. We hope to create a database that will offer "one-stop shopping" to make it easier for potential nephrologists to identify and investigate programs. You will hear more from Bruce, Robyn and Bill in the near future.

## Policy Revisions to Optimize Timely Kidney Transplants for Children

The OPTN/UNOS Board of Directors, at its semi-annual meeting in November, adopted policy revisions to optimize the chance for children to receive timely kidney transplants. The new policies restructure the way pediatric candidates are considered for kidney organ offers.

The revised kidney policy replaces an earlier system of allowing children extra allocation points based on their age. Children (listed before age 18) will receive priority ahead of adult candidates and paybacks for kidneys from donors younger than age 35, immediately upon listing, with several exceptions. For zero mismatch offers, children continue to get priority immediately after the highly sensitized candidates ( $\geq 80\%$  PRA). Children and adults who are highly sensitized (PRA  $\geq 80\%$ ), any candidates awaiting other organs in addition to a kidney, and candidates who previously have been a living organ donor also receive priority.

Other changes in the policy include elimination of the Time Goal Policy that prioritizes children according to time on the list, since children will get immediate priority upon listing. Pediatric Points will be eliminated except for zero ABDR mismatch and for candidates less than 11 years old who receive 1 point for mismatch kidneys from donors less than 35 years old, to maintain a preferential differential for the younger vs. adolescent candidates. This policy will apply to all OPO's including those that use alternative allocation systems.

**Ruth McDonald**, Medical Director of Solid Organ Transplantation at Children's Hospital and Regional Medical Center, Seattle, was very involved in this policy change and presented the proposal at the UNOS Board Meeting. She has been on the UNOS Pediatric Committee since 1994 and served as Chair from 2002-2004. The revisions will be made effective after programming into the computerized organ matching system. "Extensive research and modeling to study the likely effects of this policy was done by the OPTN/UNOS Pediatric and Kidney Pancreas Committees," said Ruth. "We found that these revisions will increase transplant rates for children without shifting large numbers of donated organs away from adults."



## ***WASHINGTON UPDATE***

*Domenic Ruscio and Jennifer Shevchek, ASPN Washington Representatives*

### **Research Funding Growth Slows, Gloomy Forecast Predicted**

On December 8, the President signed in to law H.R. 4818, the Consolidated Appropriations Act of Fiscal Year 2005. The \$388 billion package includes \$28.6 billion for the National Institutes of Health (NIH). However, that amount will be reduced by a 0.8% government-wide across-the-board reduction, as well as set-asides for program evaluations and NIH's contribution to the Global AIDS Fund. Specifically, the bill provides \$1.73 billion for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), a \$56 million increase over fiscal year 2004. This amount will also be subject to the reductions mentioned above.

In an effort to cut the \$413 trillion federal deficit in half by 2008, the President along with lawmakers are looking at future budget cuts for most federal programs. Preliminary reports suggest that the proposed fiscal year 2006 budget for NIH will include a cut of slightly more than 1%. The difficult task for the research community during these projected gloomy budget years is to convince Congress that research funding should be exempt from budget cuts, by proving that adequate federal research dollars are the catalyst for medical research success.

### **CMS Responds to ASPN Comments**

On November 15, the Centers for Medicare and Medicaid Services (CMS) published the 2005 Medicare Physician Fee Schedule Final Rule. Viewed as a victory for ASPN, the rule addressed ASPN's formal comments regarding the Society's concerns over the lack of a case-mix adjustment for pediatric ESRD patients, and the need for new data sources to establish such an adjustment.

In response, CMS revised the basic-case mix adjustment system to address the costliness of treating pediatric ESRD patients, and will provide a temporary single adjustment to facilities that treat pediatric ESRD patients. Based on calculations derived from 20 providers, each of which sought and received an atypical service exception, the case-mix adjustment factor will be 1.62.

This factor will be applied to each facility's composite payment rate per treatment for outpatient maintenance dialysis services furnished to pediatric patients. Notwithstanding this case-mix adjustment per treatment factor of 1.62, facilities that otherwise qualify will be permitted to seek an exception to this rate if they believe their circumstances warrant a higher payment rate under the atypical services exception. The adjustment factor

for the 18-44 age category is 1.223. Ultimately, CMS wants the same methodology to apply to both pediatric and non-pediatric ESRD patients.

The final rule also included the following ESRD related proposals:

- \* Inclusion of G-code visits 2 through 4 to the Medicare telehealth benefit,

- \* Implements a service code for venous mapping to allow clinicians, other than operating surgeons, to provide this service,

- \* Allows non-MCP physicians who provide services in the observation setting to bill CPT code 90935, and Revises partial month payment scenarios by adding patients who experience a permanent change in the MCP physician to the previous list of eligible partial month payment scenarios (transient patients, home patients, and patients who are hospitalized, transplant, or pass away in the course of the month).

For more details regarding ESRD related proposals included in the 2005 CMS Physician Fee Schedule Final Rule, please visit the public policy section of the ASPN website at <http://www.aspneph.com/>

### **Keeping Specter at Helm of NIH Funding**

On December 8, during floor debate on the Intelligence Reform and Terrorism Prevention Act of 2004, Senator Arlen Specter (R-PA) stated the following:

"On the Appropriations Committee on which I serve, we have structured a new intelligence subcommittee. In the line of seniority, I may have the opportunity to chair that subcommittee. That is something I am thinking about. I am reluctant to give up the subcommittee on Labor, Health and Human Services, and Education, but when we move forward from this point on the restructuring of the national intelligence community, this is a very significant period and is something to which I am giving personal consideration."

Everyone involved in advocacy on behalf of the National Institutes of Health knows that Chairman Specter remains our strongest champion. In the most recent appropriations negotiations, it was his tireless efforts that resulted in additional funds being added to the final NIH budget. ASPN members are encouraged to email or send a letter to Chairman Specter, thanking him for his long-standing leadership in the hope he will continue to chair the Labor-HHS-Education subcommittee. In particular, ASPN members in Pennsylvania are encouraged to contact Chairman Specter.

## *ASPN at the ASN 2004 Annual Meeting in St. Louis*

At the recent American Society of Nephrology Annual Meeting, ASPN members participated in all aspects of the program. An important part was our continued effort to host residents interested in a potential career in pediatric nephrology. Eleven residents representing nine different training programs attended, participating in a welcoming reception as well as the scientific meetings.

The ASPN continues to be well represented in the operations of the ASN. The table to the right lists the members of our society currently serving on various ASN committees. Feel free to contact them with your comments and suggestions. ASPN members participate in the leadership of a number of kidney-related professional organizations. Over the next few issues of *KIDney NOTES* we will be highlighting these roles and our colleagues who fill them.



L-R: Samir El-Dahr, Vicky Norwood, resident attendee Vik Rajan, and Bill Smoyer

### *ASPN Members on ASN Committees as of 10/04/04*

<i>Secretary-treasurer</i>	Alan Krensky
<i>Board of Advisors</i>	Lisa Satlin
<i>Awards Committee</i>	Alan Krensky (chair) Julie Ingelfinger
<i>Homer W. Smith Award Committee</i>	Lisa Guay-Woodford
<i>Acute Renal Failure Advisory Group</i>	Norman Siegel
<i>Basic Science Committee</i>	H. William Schnaper
<i>Clinical Science Committee</i>	Susan Furth
<i>Dialysis Advisory Group</i>	Stuart Goldstein
<i>Hypertension Advisory Group</i>	Ronald J. Portman
<i>Transplant Advisory Group</i>	Robert Ettenger Sharon Bartosh Minnie Sarwal
<i>Policy &amp; Public Affairs Committee</i>	
Research/NIH	Fredrick Kaskel
Regulatory/CMS	Barbara Fivush
<i>Grants Review Committee</i>	Fangming Lin Norman Rosenblum
<i>Renal Informatics Committee</i>	Susan Conley
<i>Training Program Dirs. Committee</i>	Bradley Warady David Kershaw
<i>Publications Committee</i>	Alan Krensky
<i>UpToDate Review Committee</i>	Keith Hruska
<i>Finance Committee</i>	Alan Krensky
<i>2005 Program Committee</i>	Norman Rosenblum Lisa Guay-Woodford



Jose Strauss addressing ASPN Breakfast Meeting

## Marketplace

**Mary Bridge Children's Hospital in Tacoma, WA**, is recruiting a full-time clinical pediatric nephrologist to make a two physician team caring for a full range of pediatric nephrology patients, including prenatal/neonatal to young adults, ESRD and post-transplant patients. Current affiliations with Children's Hospital in Seattle as well as two adult facilities provide creative options that allow for the provision of end stage renal care to the kids in our referral area. Our growing tertiary care community-based hospital is an exciting place to work, and our patients appreciate our outreach clinics as well. A regionally unique Lifestyle's Clinic with exercise specialist for hypertension/obesity patients is thriving under the care of our nurse practitioner. Family practice and pediatric residents and University of WA medical students provide wonderful teaching opportunities. There is 24-hr hospitalist and PICU/NICU/ER attending level coverage at the hospital. Interest in clinical research welcomed. Quality of life and natural setting in the Puget Sound area are wonderful. For more information, please contact Niki Becker, M.D., at (253) 403-5298.

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**The Division of Pediatric Nephrology, Department of Pediatrics at Stanford University School of Medicine** seeks candidates for appointment as a full-time faculty member at the Assistant or Associate Clinical Professor level in the Clinician-Educator Line of the Professoriate. The predominant criteria for appointment in the Clinician-Educator Line are major commitments to clinical care and clinical teaching, with appropriate scholarly contributions in the field. Candidates should be board eligible (excluding publication requirement) or certified by the Sub-Board of Pediatric Nephrology of the American Board of Pediatrics by the date of their availability. Formal training in clinical research and evidence of prior accomplishment in clinical investigation are desirable but not required. The successful candidate will spend 75% time in clinical care with the remainder of his/her time devoted to clinical research and other scholarly activities. Teaching is a high priority, as evidenced by the fact that the members of the Division of Pediatric Nephrology collectively received the 2003 Stanford Pediatric Housestaff Teaching Award.

Lucile Packard Children's Hospital (LPCH) at Stanford is a 220-bed free-standing children's hospital located on the campus of Stanford University within a medical center complex that includes Stanford Hospital and Clinics and Stanford Medical School.

Stanford University is an equal opportunity, affirmative action employer. Interested candidates should send curriculum vitae and a brief letter outlining their interests to: Steven R. Alexander, MD; Professor and Chief, Pediatric Nephrology; Department of Pediatrics, Room G 306; Stanford University Medical Center; 300 Pasteur Drive; Stanford, CA; 94305-5208. Submission by electronic mail to: [sralex@stanford.edu](mailto:sralex@stanford.edu) is encouraged.

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**The Division of Pediatric Nephrology at Driscoll Children's Hospital in Corpus Christi, Texas and Texas A&M University College of Medicine** are recruiting a full-time pediatric nephrologist to join 2 other practicing pediatric nephrologists in the multi-specialty pediatric group at the Children's Hospital.

The Division of Pediatric Nephrology is part of a pediatric multi-specialty practice and offers complete clinical programs for infants, children, and adolescents with congenital and acquired acute and chronic kidney disease including end-stage renal disease. Inpatient consultation is provided to large PICU and NICU populations. The division supplies a full range of renal services including all ESRD, pre-transplant and post-transplant management, dialysis, CRRT and plasmapheresis services. The division is actively involved in medical student education and the large well-established Pediatric Residency Program at Driscoll Children's Hospital. Candidates must be board-certified/eligible in pediatrics and pediatric nephrology or equivalent and licensed or licensable to practice medicine in the state of Texas. Candidates with strong interest and background in clinical nephrology and clinical research are preferred.

Driscoll Children's Hospital is a 200 bed primary Children's Hospital located on the Texas Gulf Coast in the small (300,000 population) resort city of Corpus Christi near beautiful beaches, excellent fishing and many outdoor activities. Corpus Christi provides an excellent environment for both physician and family.

Candidates may submit their CV and inquiries by e-mail or regular mail to Dr. Allen at [William.allen@dchcc.org](mailto:William.allen@dchcc.org) or 3533 South Alameda Street, Corpus Christi, Texas 78411. Nephrology Division secretary telephone: 361-694-6852 and Driscoll Children's Hospital operator: 361-694-5000.

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**The Department of Pediatrics at the University of Arizona Health Sciences Center in Tucson, AZ**, has two positions available in Pediatric Nephrology, including the position of Section Chief. Positions are open at the Assistant or Associate or Professor level (open rank). Responsibilities include patient care, program development, medical student and resident education. Candidates must be BC/BE in Pediatrics and Pediatric Nephrology. Research interest is desirable and is available at the Steele Memorial Children's Research Center, which is one of eight centers of excellence at the University of Arizona College of Medicine. Excellence benefit and retirement package is offered as well as incentive opportunities. Tucson offers almost year round recreational activities.

For further information, please contact Mehul Dixit, MD, DM Associate Professor, PO BOX 245073, 1501 N Campbell Avenue, Tucson, AZ 85724. Ofc: (520) 626-6182, Fax: (520) 626-4141. [mdixit@peds.arizona.edu](mailto:mdixit@peds.arizona.edu) referencing JOB # 31307. The University of Arizona is an EEO/AA Employer-M/W/D/V.

## Marketplace—Continued

***The Department of Pediatrics, Tulane University Health Sciences Center and The Tulane Hospital For Children, New Orleans, Louisiana*** (<http://www.tulane.edu>) is recruiting for a full time faculty member to join 2 others in the Division of Pediatric Nephrology.

The appointment will be at the Assistant or Associate Professor level. Expertise in clinical pediatric nephrology, dialysis, and transplantation are required. The division provides the complete spectrum of care for infants, children, and adolescents with acute and chronic kidney disease, as well as active teaching in a well-established Pediatric Residency Program. The successful candidate should have experience in teaching, and possess interest in conducting clinical research. Candidates must be Board Certified/Eligible in Pediatrics and Pediatric Nephrology or equivalent and licensed or licensable to practice medicine in the state of Louisiana.

Applications received by October 20, 2004 or thereafter until position is filled, will receive full consideration. Interested candidates should send curriculum vitae and references to: Samir El-Dahr, M.D., Chief, Section of Pediatric Nephrology, Tulane University School of Medicine, SL-37, 1430 Tulane Avenue, New Orleans, LA 70112.

Tulane University is an AA/EOE with a strong institutional commitment of excellence through diversity.

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***The Department of Pediatrics at the University of Minnesota Medical School*** seeks a faculty member at the rank of Associate Professor for the Division of Nephrology. This division, which now includes ten faculty members, has a long tradition of excellence in research, patient care, and academic training, with strong relations in adult nephrology, transplant surgery and the basic sciences.

The selected candidate will establish and carry out an independent research program (clinical or basic), and will be involved in direct patient care and the training/teaching of medical students, pediatric house officers and renal fellows.

Essential qualifications include an M.D. degree and board certification or eligibility in Pediatrics and Pediatric Nephrology. Candidates should have demonstrated evidence of accomplishment in research through peer-reviewed publications and success in achieving independent grant support. Additionally, candidates should have strong patient care and teaching qualifications, and will need to have licensure in the State of Minnesota by the start date. This appointment is at the tenure-track Associate Professor level, but qualified Assistant Professors may be eligible.

Applications will be reviewed beginning December 1, 2004, and will be accepted until the position is filled. The anticipated start date is September, 2005.

Applicants should send a letter of interest and Curriculum Vitae to: Michael Mauer, M.D.; Chair, Search Committee; c/o Julie Legg; University of Minnesota; Mayo Mail Code 391, 420 Delaware Street SE; Minneapolis, MN 55455

*The University of Minnesota is an Equal Opportunity Educator and Employer.*

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***The Mayo Clinic Department of Pediatric and Adolescent Medicine*** is recruiting a Board Certified/Board Eligible academic nephrologist to expand our Division of Pediatric Nephrology.

We provide the full range of pediatric nephrology care, including acute and chronic dialysis, transplantation, and consultative nephrology. Availability of a clinical renal testing laboratory as well as close working relationships with pediatric urology, transplantation surgery, pediatric radiology, and renal pathology enrich the practice. Strong programs in pediatric urolithiasis, cystic kidney diseases, and transplantation are in place. There are ample opportunities to develop individual academic interests and research.

The Mayo Clinic provides comprehensive medical and surgical care for pediatric patients. The campus includes an 85- bed children's hospital that supports regional, national, and international tertiary care. Mayo Clinic offers excellent teaching opportunities with our pediatric residency and the Mayo Medical School. Academic rank at the Mayo Clinic College of Medicine will be granted commensurate with experience. Applicants of all academic rank will be considered.

Our large outpatient clinical base and strong institutional commitments to education and research provide excellent career opportunities for the successful candidate. Mayo Clinic offers the advantages of a renowned medical center with a successful integrated group practice in a very attractive midwestern city. The pediatric nephrologist staff works in close collaboration with the 85-member, multispecialty Department of Pediatric and Adolescent Medicine and with the 40 members of the Nephrology Division of the Department of Internal Medicine allowing great integration of academic interests. The institution has an excellent infrastructure for basic and clinical research including a General Clinical Research Center, the multidisciplinary William von Liebig Transplant Center, and the Rochester Epidemiology Project, all of which are NIH-funded.

Qualified individuals should forward their curriculum vitae and letters of interest to the chair of the search committee: James Gloor, MD; Chair, Pediatric Nephrology Search Committee; Mayo Clinic; 200 First Street, SW; Rochester, MN 55905; (507) 266-1045; [gloor.james@mayo.edu](mailto:gloor.james@mayo.edu)

*Mayo Clinic is an affirmative action and equal opportunity educator and employer.*

**Marketplace—Continued**

**The Department of Pediatrics at Children's Hospital and Regional Medical Center/ University of Washington School of Medicine** is recruiting one full-time academic board eligible or certified pediatric nephrologist at the Assistant or Associate Professor level in the Clinician Educator tract. The successful applicant will spend seventy-five (75%) of his/her time in clinical care and will have demonstrated strong interest and expertise in dialysis. He/she will also be appointed as the director of ambulatory services for the Nephrology Division. Clinical duties will be flexible and include weekly outpatient clinics as well as regular outreach clinics and inpatient attending responsibilities for the nephrology service. This position requires a strong commitment to teaching and education of medical students, pediatric residents, pediatric nephrology fellows, as well as other members of the multi-disciplinary Nephrology team.

Children's Hospital and Regional Medical Center serves as a tertiary referral center, with referrals from Washington, Alaska, Montana, Wyoming and Idaho. The hospital is currently undergoing significant expansion.

The University of Washington is building a culturally diverse faculty and encourages applications from female and minority candidates. The University of Washington is an Equal Opportunity/Affirmative Action Employer. Interested persons should contact Allison Eddy, MD, by January 31, 2005 at the following address: Professor of Pediatrics; Head, Division of Nephrology; Children's Hospital and Regional Medical Center; 4800 Sand Point Way, Northeast, MI-5; Seattle, Washington 98109 allison.eddy@seattlechildrens.org

## Award Announcements

### FOUNDER'S AWARD

**Nominations for the 2005 ASPN Founder's Award are now being accepted.**

**The deadline for nominations is Friday, January 28, 2005.**

Criteria for nominations are: 1) Must be an active or emeritus member of the ASPN; 2) Must be greater than 55 years of age; 3) Must have made significant clinical, scientific and/or leadership contributions to the field of pediatric nephrology; 4) Must have made a significant contribution to the ASPN by promoting its activities to assure a continuing role for its members in science as well as in specialized health care for children with kidney disease.

Nominations should include a curriculum vitae from the nominee and a letter describing the individual's contribution. Mail to: ASPN, Founder's Award, Northwestern University Feinberg School of Medicine; Pediatrics, W140; Ward 12-128; 303 East Chicago Avenue; Chicago, IL 60611.

### RESIDENTS' TRAVEL AWARD PROGRAM

#### 2005 ASPN/PAS ANNUAL MEETING

The ASPN will sponsor residents and selected other non-fellow trainees to attend the upcoming 2005 ASPN/PAS meeting from May 14-17, 2005 in Washington, D.C.

Awards of \$750.00 per trainee will be given on a competitive basis. In addition, the ASPN will pay the meeting trainee registration fee. Applicants may be medical students, 1st or 2nd year pediatric residents (PL1-PL2), or 1st, 2nd, or 3rd year med-peds resident (PGY1-PGY3) in an ACGM- accredited pediatric residency program.

Applications must include the following:

- Recommendation by a member of the ASPN who agrees to accompany the trainee to the meeting
- Recommendation by the chair of the department of pediatrics at the applicant's institution
- Applicant's curriculum vitae along with a 1-page statement from the candidate describing his/her interest and possible career plans in pediatric nephrology.

Applicants must commit to attend the 3-day meeting if selected. **Applications must be submitted by February 11, 2005** to: ASPN, Travel Program, Northwestern University Feinberg School of Medicine; Pediatrics, W140; Ward 12-128; 303 East Chicago Avenue; Chicago, IL 60611.

### ASN REQUESTS NOMINATIONS FOR ITS 2005 AWARDS

The winners in 2004 were:

*The John P. Peters Award*--Charles B. Carpenter

*The Belding H. Scribner Award*--Philip J. Held, Friedrich K. Port, and Robert A. Wolfe

*The Homer W. Smith Award*--Thomas J. Jentsch

*The Young Investigator Award*--Jeffrey H. Miner

Learn more about each award by visiting <http://www.asn-online/awards/awards.aspx> and clicking on the underlined award title. If you would like to nominate individuals for these awards, you can submit the nominations directly as described on the website or make suggestions to the ASPN Awards committee at [asn@northwestern.edu](mailto:asn@northwestern.edu). **The deadline for submitting awards nominations for 2005 will be Friday, January 28, 2005.**

## *Meeting Announcements*

### *National Kidney Foundation 2005 Clinical Meetings*

*May 5 - 8, 2005*

*Special Courses offered May 4, 2004*

*Marriott Wardman Park Hotel; 2660 Woodley Road, NW; Washington DC*

Online registration is now available at [www.kidney.org](http://www.kidney.org)

The National Kidney Foundation (NKF) provides the most comprehensive, multidisciplinary educational opportunity for professionals caring for the chronic kidney disease (CKD) patients across all stages including transplantation. The Clinical Meetings are hands-on workshops, interactive sessions and lectures designed to provide cutting-edge knowledge in the field of nephrology for physicians, nurses, dietitians and social workers.

The National Kidney Foundation is a major voluntary health organization dedicated to preventing kidney and urinary tract diseases, improving the health and well-being of individuals and families affected by these diseases, and increasing the availability of all organs for transplantation.

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### *Coordinating Hemodynamic, Filtration, and Reabsorptive Functions of the Kidney*

*A satellite symposium of the XXXV International Congress of Physiological Sciences/FASEB Meeting*

*San Diego, CA, March 29-30, 2005*

This two-day conference will bring together international experts in the fields of kidney hemodynamics, modeling, epithelial transport, tubulo-glomerular feedback, urinary concentration, and blood pressure around a "systems" approach to understanding kidney function.

Travel grants for trainees will be awarded with funds provided by the American Society of Nephrology.

Co-sponsored by Amgen.

For information about the tentative program, registration, and travel scholarships see <http://cme.ucsd.edu> and click under 'conferences'

## *Other Announcements*

### **2005 CERTIFYING EXAMINATION IN PEDIATRIC NEPHROLOGY**

**Examination Date:** November 29, 2005.

**Registration for first-time applicants:** February 1, 2005, through May 2, 2005.

**Registration for re-registrants:** March 14, 2005, through June 16, 2005.

**The final month of each registration requires payment of a late fee.**

Applicants must complete applications online during the registration periods for new applicants. The requirements for online applications are found on the ABP Web site: [www.abp.org](http://www.abp.org). Additional information including eligibility requirements is found on the ABP Web site. Each application will be considered individually and must be acceptable to the ABP.

**AMERICAN BOARD OF PEDIATRICS**

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**Web site: [www.abp.org](http://www.abp.org)**

### **KUFA Scholarships**

Kidney and Urology Foundation of America (KUFA) announces the availability of scholarships to support the academic goals for college-bound dialysis patients. Funds can support tuition or other educational needs. More information regarding this program can be obtained from KUFA at [www.kidneyurology.org](http://www.kidneyurology.org) or (212) 629-9770.

**Other Announcements, Continued*****UNEXPECTED 2005 FELLOWSHIP OPENING***

The Pediatric Nephrology Unit  
 MassGeneral Hospital for Children at  
 Massachusetts General Hospital  
 Boston, MA 02114  
 Please contact: Harald Jueppner, M.D.  
 HJueppner@partners.org  
 617 726-2908

***Condolences***

We regret to report that Dr. Peter Shaw recently lost his 17-month battle with leukemia. Peter did his residency at the University of Alabama at Birmingham and his fellowship at Harvard, and was on staff at Phoenix Children's Hospital since 2002. We extend our condolences to his family and friends.

**KIDney NOTES**

Bi-monthly Membership Newsletter of the  
**American Society of Pediatric Nephrology**

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ASPN  
 Northwestern University/Feinberg School of Medicine  
 Pediatrics W 140, Ward 12-128  
 303 E. Chicago Avenue  
 Chicago, IL 60611-3008

Robyn Mann, Office Coordinator  
 312-503-4000  
 312-503-1181 Fax

Please contact committee chair(s) with suggestions or concerns:

**Clinical Affairs:** Barbara Fivush, Joseph Flynn, Steven Wassner

**Public Policy:** Eileen Brewer, John Foreman, Rick Kaskel

(Washington Representatives: Dominic Ruscio and Jennifer Shevchek)

**Research:** Vicky Norwood, Lisa Satlin

**Training/Certification:** Bruce Morgenstern, Kathy Jabs

**Workforce:** Uri Alon, Elaine Kamil

**IT IS IMPORTANT THAT WE HAVE YOUR CORRECT E-MAIL ADDRESS!**

**The KIDney NOTES newsletter is NO LONGER being sent to the ASPN membership through the US Postal Service.** The newsletter will ONLY be available through a broadcast e-mail message that will be sent to the membership and on the ASPN web site (www.aspneph.com).