



KIDney NOTES

Letter to ASPN Membership from Susan Newton, ASPN Strategic Planning Consultant

As many of you know, the ASPN began a strategic planning process this past fall. I was flattered to be selected to guide the process. To begin, I interviewed members of the Council and a number of other members (32 people in all). I was pleased with the candor and insights people provided that will allow the organization to review its goals and mission and prioritize future initiatives. I have recently summarized the data in a very raw fashion and will begin the process in March, with Council, of looking at the data as a foundation for creating the blueprint that will become ASPN's strategic plan.

Please know that this process has already "grown" from where it began based on input from the membership. As people suggested others who should participate and be interviewed, I went to Council to let them know that these requests were being made. They heartily approved my interviewing additional people. I went through the database to select new members, old members, young members, fellows... and the final list of interviewees is known only to me. That allows for Council and you, as members, to focus on what has been learned without caring about who said it. The integrity of the data is preserved while people's thoughts and ideas are welcomed.

In the next step, I will meet with Council to begin the process of looking at the environment (external realities and trends) and your internal and external needs as defined in the interviews. The data are rich and provide a lot of information from which to work. The results of the March meeting will be shared with all of you to confirm that the strategic goals and objectives, as well as ASPN's mission, are the right ones, based on all of your input. Some of you who have already participated will probably hear from me again, and others will also be asked for their input.

I applaud the organization for embracing such an encompassing process. This ensures that this plan is developed with and for its members. One of the most consistent pieces of data that came from the interviews was the tremendously high level of commitment and passion all of you have for the organization's focus and role in caring for children. That is not always true in organizations and it makes this project a very exciting one for me.

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Dear Colleagues,

Greetings! With this edition of *KIDney NOTES*, we are looking forward to two very important events. One is the ASPN Annual Meeting, to be held in conjunction with the PAS meeting at the Marriott Hotel and the Moscone Convention Center in San Francisco, April 29-May 2. The list of related events and committee meetings begins on page 2 of this issue. Please note that, at several times, we are running or co-sponsoring concurrent sessions. The Program Committee recognized that this may force some hard choices, but felt that it is important to provide opportunities to discuss the many facets of our profession.

As important as the Annual Meeting is the ASPN strategic plan review that is underway. Elsewhere on this page is a letter to the membership from Susan Newton, the superb consultant that we have engaged to facilitate this process. Susan has interviewed a cross section of the membership. We will be sharing her results and reports with you, and inviting further input, over the next few months. We want to assure that our Society is responsive to the needs and goals of our members.

I'm looking forward to hearing from you and seeing you in San Francisco!

Sandy

**ASPEN Annual Meeting****April 29–May 2, 2006**

Moscone West Convention Center and San Francisco Marriott

Saturday, April 29	Sunday, April 30	Monday, May 1	Tuesday, May 2
<p>8:00am – 11:00am ASPEN/IPHA/PAS Mini Course</p> <ul style="list-style-type: none"> Management of Childhood Hypertension: Guidelines and Controversies <p>9:45am – 11:45am ASPEN Workshop</p> <ul style="list-style-type: none"> Clinical Trials and Observational Studies <hr/> <p>12:00pm – 1:00pm ASPEN Fellows Box Luncheon</p> <ul style="list-style-type: none"> Renal Pathology—Battle of the Brains <p>1:00pm – 3:00pm ASPEN/PAS Original Science Abstracts</p> <ul style="list-style-type: none"> Nephrology Platform Session <p>3:15pm – 5:15pm ASPEN/IPHA/LWPES/PAS Topic Symposium</p> <ul style="list-style-type: none"> Mechanisms of Hypertension in the Molecular Era <p>5:15pm – 7:15pm ASPEN/PAS Posters I, Exhibits and PAS Opening Reception</p> <ul style="list-style-type: none"> Nephrology <hr/> <p>7:15pm – 8:30pm PAS Presidential Reception</p> <p>8:00pm – 10:00pm ASPEN Social Event/Dinner</p> <ul style="list-style-type: none"> Fellow Awards Welcome Residents 	<p>7:00am – 8:00am Meet the Professor Breakfast (for trainees and junior faculty)</p> <p>8:00am – 10:00am ASPEN Symposium I</p> <ul style="list-style-type: none"> Renal Pathology—It's Still Not Just Little Adults <p>10:15am – 12:00pm APS Presidential Plenary and Awards</p> <hr/> <p>12:00pm – 1:30pm ASPEN Business Meeting, Box Luncheon and Presidential Address</p> <p>2:00pm – 4:00pm ASPEN/PAS Original Science Abstracts</p> <ul style="list-style-type: none"> Nephrology Platform Session <p>4:15pm – 6:15pm ASPEN Symposium II</p> <ul style="list-style-type: none"> Systemic Lupus: Implications of Recent Developments for Management of Children with Lupus Nephritis 	<p>8:00am – 10:00am ASPEN/LWPES/PAS Topic Symposium</p> <ul style="list-style-type: none"> Pediatric Fluids and Hyponatremia: Are We Giving Too Much Water? <p>10:15am – 12:10pm SPR Presidential Plenary and Awards</p> <hr/> <p>12:00pm – 1:00pm ASPEN Awards Luncheon</p> <p>1:00pm – 2:45pm March of Dimes Prize in Developmental Biology Lectures</p> <p>3:00pm – 5:00pm ASPEN Symposium III</p> <ul style="list-style-type: none"> Molecular Control of the Formation of the Renal Collecting System <p>5:15pm – 6:45pm ASPEN/PAS Posters II and Exhibits</p> <ul style="list-style-type: none"> Nephrology 	<p>8:00am – 10:00am ASPEN Symposium IV</p> <ul style="list-style-type: none"> Inflammation in Uremic Pathophysiology <p>10:00am – 12:00pm ASPEN/NAPRTCS Workshop</p> <ul style="list-style-type: none"> Pay for Performance: The Pediatric Perspective - Hemodialysis <hr/> <p>1:45pm - 3:45pm ASPEN/NASPGHAN/PAS Topic Symposium</p> <ul style="list-style-type: none"> Autosomal Recessive Polycystic Kidney Disease (ARPKD): New Insights and Clinical Perspectives

AWARD ANNOUNCEMENTS***Founder's Award Recipients Announced***

Dr. Barbara Cole and Dr. Adrian Spitzer have been selected to share the 2006 Founder's Award. This award is given each year to an ASPEN member in recognition of their unique and lasting contribution to the field of pediatric nephrology. The recipients of the Founder's Award have also contributed significantly to the ASPEN 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. Dr. Cole and Dr. Spitzer will be recognized for their contributions during the ASPEN Awards Luncheon on Monday, May 1.

Trainee Research Award Recipients

This is the first year that this award was made available to all trainee levels and this year a resident was among the Trainee Research Award recipients. The ASPEN Research Committee evaluated the abstracts based on their scientific merit and the quality of the work in two categories, clinical and basic science. Four awards were given this year due to a tie in scores. The recipients are: Janis Dionne, MD, Fellow, British Columbia Children's Hospital in Vancouver, BC; David Hains, MD, Resident, Children's Hospital in Columbus, OH; Karen McNiece, MD, Fellow, UT Houston Medical School in Houston, TX; and Mai Nguyen, MD, Fellow, Cincinnati Children's Hospital in Cincinnati. They will be recognized at the ASPEN Social Event/Dinner, Saturday, April 29 from 8:00 to 10:00 PM.

**American Society of Pediatric Nephrology****2006 Hotel-Based Events****San Francisco Marriott**

Function	Date	Day	Begin	Room
Saturday				
ASPN Training & Certification Committee	4/29/06	Saturday	7:00 AM	Pacific Suite E
ASPN Clinical Affairs Committee	4/29/06	Saturday	12:00 PM	Pacific Suite E
ASPN Member Reception	4/29/06	Saturday	8:00 PM	View Lounge (Top of Marriott)
Sunday				
ASPN Research Committee	4/30/06	Sunday	7:00 AM	Pacific Suite D
ASPN Workforce Committee	4/30/06	Sunday	7:00 AM	Pacific Suite E
IPHA Business Meeting	4/30/06	Sunday	7:00 AM	Sierra Suite A
ASPN Business Meeting, Luncheon and Presidential Address	4/30/06	Sunday	12:00 PM	Yerba Buena Gardens Salon 7
Monday				
ASPN Public Policy Committee	5/1/06	Monday	7:00 AM	Sierra Suite C
ASPN Stone and Bone Club	5/1/06	Monday	7:00 AM	Sierra Suite B
ASPN Awards Luncheon	5/1/06	Monday	12:00 PM	Yerba Buena Gardens Salon 7
Tuesday				
ASPN Public Policy 102: Public Policy Initiatives A History and Where We Are Heading	5/2/06	Tuesday	7:00 AM	Sierra Suite A

ANNUAL MEETING INFORMATION (COMMITTEE AGENDAS, SPECIAL EVENTS, ETC.)**ALL ASPN MEMBERS ARE ENCOURAGED TO ATTEND COMMITTEE MEETINGS**

ASPN Congressional Advocacy 102: A History of our Public Policy Initiatives and Where We Are Going—Target Audience: All American Society of Pediatric Nephrology members and trainees.

Actions taken by Congress and the federal government affect the practice of pediatric nephrology. Building upon last year's *Lobbying 101* symposium, this session will discuss the history of the Society's public policy efforts, and how ASPN's ongoing advocacy efforts continue to improve the diagnosis, treatment, and prevention of pediatric kidney disease. The aims of this session are to educate ASPN members about the political process, and identify future goals for the Society's public policy agenda.

pFeNa Social Event—All medical students, residents and pediatric nephrology fellows are all invited to join the members of pFeNa (Pediatric Fellows in Nephrology Association) for a social event in San Francisco. pFeNa serves as an educational and networking resource for those in training in pediatric nephrology, as well as recruitment resource to encourage residents and medical students with an interest in a career in pediatric nephrology. The exact day and time of the event has not yet been determined but when it is, one of the pFeNa officers will contact the trainees with the details.

ASPN Public Policy Committee Agenda (subject to change)

- 1) Washington Update
 - a) Federal Budget
- 2) Medicare physician payment/Pay-for-Performance
 - a) Congressional action?
 - b) Kidney Care Partners and Kidney Care Quality Alliance
 - i) Pediatric Workgroup (Barbara Fivush)
- 3) Medicare Part D Update
- 4) Appropriations update
 - a) Biomedical research funding
 - b) ASPN research report language
 - c) Meetings with key NIH directors and staff
- 5) Review and Discussion of ASPN's 2006 legislative issue briefs
 - a) Biomedical Research Funding
 - b) Medicare Physician Payment/Pay-for-Performance
 - c) Improving the viability of pediatric kidney transplantation under the Medicare program
- 6) New Business

Workforce Committee Meeting in SF will take place on Sunday, 4/30 at 7:00am., Pacific Suite A in the Marriott San Francisco. The committee meeting is open to all ASPN members. Please e-mail suggested agenda items to Uri at ualon@cmh.edu.

**ANNUAL MEETING INFORMATION (COMMITTEE AGENDAS, SPECIAL EVENTS, ETC.)—CONTINUED****ASPEN Research Committee Agenda**, (subject to change)

- 1) Updates
 - a) Trainee Research Award Review (Furth)
 - b) Research Committee Report Language (Satlin)
 - c) AKI Network (Devarajan)
 - d) Multicenter trials and cohort studies
 - i) FSGS- Gipson
 - ii) CKiD- Furth
 - iii) RIVR- Matoo
- 2) Discussion
 - a) Symposia for 2007 Annual Meeting (Satlin)

Training/Certification Committee Meeting

The Training/Certification Committee meeting in San Francisco will occur on Saturday, April 29, at 7:00 AM in the Pacific Suite E. We will transition leadership-- Bruce Morgen-

stern will rotate off and Vicky Norwood will continue to work with Kathy Jabs. The agenda for the meeting will be to review where we are with regard to the fellowship application process. We will get updated information from the ABP, including exam results, workforce, and some other data. We will discuss what we have learned from the meetings regarding maintaining certification, and consider mechanisms to share important information regarding training program accreditation issues. Action items for 2006-2007 will be identified.

Resource Center—Once again this year, there will be an ASPEN Resource Center/Booth located in the Moscone West Convention Center, First Level, Booth 528. We encourage you to stop by and meet Council members who will be at the booth for brief periods of time to answer questions. On hand at the booth will be informational materials related to ASPEN activities.

WASHINGTON UPDATE

Domenic Ruscio and Jennifer Shevchek, ASPEN Washington Representatives

Unique Challenges in New Year

Setting a federal agenda in any election year is a daunting challenge. Attempting it in a highly polarized Congress where control of one or both chambers could be at stake is, well, homicidal. Virtually every press conference, briefing and hearing will become the stage for a play that closes on election day; every proposal to spend, tax or borrow will be hotly contested, most likely leading to a stalemate—at least until after the campaign signs are taken down.

The task of doing “the people’s business” is made even more difficult by a compressed election-year legislative calendar. Both chambers have set a target adjournment date of October 6, designed to give lawmakers a month to campaign before Election Day. But every month between now and October is punctuated by congressional recesses, leaving less than 75 days devoted to legislative business.

House Approves Deficit Reduction Bill

On February 1, with strong advocacy from ASPEN’s membership, the U.S. House approved S. 1932, the Deficit Reduction Act by a vote 216- 214. The bill, among other things, includes a provision replacing the 4.4 percent cut in Medicare physician payments, with a freeze in pay-

ments reflecting last year’s level. Once signed by the President, the law will be effective immediately and CMS has indicated that it will automatically adjust claims filed between January 1, 2006 and the new law’s enactment. The legislation also provides a 1.6 percent increase in the ESRD composite rate for dialysis facilities effective January 1, 2006. ASPEN thanks its members for their efforts in reaching out to their representatives regarding their support for this bill.

Shaping the 2006 Legislative Agenda

On January 31, President Bush used his State of the Union address to unveil and in some instances dust off a series of legislative proposals he hopes Congress will approve. His scaled-down blueprint for governing included a renewed call for the development of alternative energy sources, a math and science initiative to support America’s competitive advantage in the global economy and a set of incremental measures to save on health care costs.

Pundits may argue over whether the President’s address outlined a realistic agenda for getting things done, or set the equivalent of a campaign platform for Republicans running for election. In either case, one

very real issue will dominate virtually every decision made in Washington this year: the federal budget deficit. As evidence of that, the first vote the House took after the President’s speech was to approve a \$39.7 billion budget bill that cuts spending for Medicare, Medicaid, college student loans and child support enforcement.

But the deficit reduction bill was just an opening salvo. Little more than a week before President Bush addressed Congress and the nation, the White House projected that the deficit will exceed \$400 billion for the fiscal year that ends in September, prompting several lawmakers to call for more and deeper cuts in federal funding.

First Steps in the Battle over Medical Research Funding

As a member of the Ad Hoc Group for Medical Research Funding, ASPEN is working to identify next steps in turning the proposed FY2007 NIH budget around. Keep in mind that the President’s budget is only the first step in a long legislative process that probably won’t be completed until after the November elections. So as dire as the situation may appear right now, those who care about medical research will have opportunities to weigh in with forceful arguments as to why NIH funding should not be frozen. The key here is to get involved early!
(continued next page)

WASHINGTON UPDATE—Continued

First Steps in the Battle (continued)

In Congress, the first official action taken on the budget is the development of overall spending limits by aggregate government function (e.g., health, education, transportation, agriculture, etc). Those ceilings are initially developed by the House and Senate Budget Committees, then incorporated into the budget resolution that the full Congress must approve. Once adopted, the spending ceilings are parceled out to the House and Senate Appropriations Committees.

In the past few years, as we have all seen, asking the Appropriations Committees to boost medical research funding after Congress has adopted a very tight spending ceiling for health programs is a non-starter. By then, increasing medical research without doing it at the expense of other, equally meritorious programs is an uphill fight that most lawmakers will avoid.

Therefore, the Ad Hoc Group for Medical Research is teaming with Research!America, the Campaign for Medical Research, the National Health Council and FASEB to hold meetings with key

congressional offices to discuss how best to avert this problem. One approach would be a bipartisan amendment to the budget resolution that explicitly increases the spending ceiling for health. If adopted, that would afford the Appropriations Committees more leeway to adequately fund NIH and other public health programs.

In the coming days, ASPN expects to have more to tell its membership about a specific strategy, and how each of you can help in this important effort.

President Bush Proposes Health Care Initiatives

In his State of the Union Address on January 31, President Bush discussed several strategies to address health care cost and coverage concerns, including increasing the availability of health saving accounts (HSAs), passing medical liability reform, creating a bipartisan Social Security, Medicare, and Medicaid commission, and improving our nation's health information technology infrastructure.

Specifically, the President called on

Congress to make the medical liability system more fair and predictable by enacting legislation that reduces frivolous lawsuits against doctors. While the House has been successful in this endeavor, the Senate still lacks the 60 votes necessary to overcome a filibuster by medical liability reform opponents. The challenge facing the Senate is how its Republican leadership can muster up enough votes to overcome a filibuster. The answer is not simple. Lawmakers realize that unless current liability reform legislation is revised, it is unlikely to garner the necessary votes for passage. ASPN will continue to monitor and work with relevant lawmakers to promote reform that includes reserving punitive damages for egregious cases where they are justified, and limiting non-economic damages to reasonable amounts.

In his address the President also spoke to the need for improving the nation's health information technology (HIT) system. The Administration plans to expand the use of HIT to lower costs, reduce medical errors, and improve quality of care.

President Releases Fiscal Year 2007 Budget

On February 6, President Bush sent Congress his \$2.7 trillion budget proposal for fiscal year 2007, a budget, he says, that would cut the deficit in half by 2009. In it he calls for holding government spending for discretionary programs (other than defense and homeland security) below a nominal freeze that does not allow for inflation. To that end, the President proposes eliminating or substantially reducing 140 federal programs, producing savings amounting to \$14.5 billion, or about 0.005 percent of the budget.

In reality, the President and Congress are limited in what they can do to stem the flow of red ink. This year, about two-thirds of the federal budget is taken up by entitlements and payment on the national debt—items that are not easily changed. In an effort to rein in some of these entitlement costs, the President is proposing that Congress take steps to curb Medicare costs. His budget calls for reducing projected Medicare payments to hospitals and other health care providers by \$35.9 billion over the next five years (\$105 billion over 10 years), and will seek further increases in Medicare premiums for high-income people, beyond those already scheduled to take effect. No cuts are proposed for Medicaid.

The President proposes \$28.6 billion for National Institutes of Health (NIH), nominally freezing NIH at the FY2006 funding level and about \$63 million below the FY2005 level. Taking into account that biomedical research inflation is at 4.1 percent in FY2006 and is projected to be 3.8 percent in FY2007, the reduction runs even deeper. The proposed budget will support 37,671 research project grants, or 656 fewer grants

than currently estimated for this year. NIH estimates the budget will fund 9,337 new and competing grants, or 275 more than this year, at an average cost of \$350,000 per grant. No increases will be provided for inflation.

For the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), the President's FY2007 budget proposes \$1.84 billion, a reduction of \$11 million below the FY2006 funding level and \$20 million less than FY2005. If enacted by Congress, NIDDK would fund 3,213 research project grants in FY2007, or 78 fewer grants. The number of new grant awards would increase from 493 to 506. The breakdown of such grants follows:

	FY2006	FY2007
Research Projects:		
Noncompeting	2398	2301
Admin. Supplements	(200)	(200)
Competing:		
Renewal	260	267
New	493	506
Supplements	0	0
SBIR	140	139
Centers	77	77
Amount	\$91,030,000	\$87,590,000
Training Awards		
Individual	168	168
Institutional	945	931

NEWS AND ANNOUNCEMENTS

Workforce Committee Report

State/Province liaisons - A list has been compiled of one ASPN member from each state/province, to serve as conduits for information. In particular, we would like to determine the availability and nature of clinical services and the people who provide them. Council and Co-Chairs of the committee thank all members who agreed to this 3-year term. The next goal will be to identify and characterize all Pediatric Nephrology centers in the US and Canada. Stay tuned.

From ABP Tracking data—There are currently 122 Pediatric Nephrology fellows in training, as follows: Year 1 - 39, year 2 - 45, year 3 - 32, year 4 - 6. (The total number of fellows last year was 116). Further analysis of data will be provided during the annual meeting.

From the ABP, Pediatric Nephrology Sub-Board: Certification exam - taken by 52, passed 35 (67.3%); Recertification exam - taken by 29, all passed (100%).

Monitoring Medicare Part D

It's not just for senior citizens – Medicare Part D prescription drug coverage is also applicable to “dual eligible” pediatric ESRD patients – those covered by both Medicare and state Medicaid programs. Enrollment in Medicare Part D became mandatory for these patients as of January 1, 2006. Unfortunately, this process did not go smoothly and several

ASPN members have reported that their patients have been having trouble with their prescription drug coverage. The Clinical Affairs Committee has been monitoring developments related to Medicare Part D, and posting information on the ASPN web site as it has become available. We encourage ASPN members and their social workers to not only check the ASPN web site from time to time, but also to make use of other on-line resources, such as CMS’s Medicare Prescription drug Coverage page (<http://www.medicare.gov/pdphome.asp>). We also ask ASPN members to let us know about problems that your patients may be having, and what other assistance ASPN can provide.

Training/Certification Committee Update

We have spent the past year working to standardize and improve the process by which people apply to and are accepted into Pediatric Nephrology fellowship programs. This was the first year that ERAS was made available for applicants. We plan to roll out all the changes and then assess their efficacy from the perspective of both fellows and program directors.

We have continued to address the issues relating to maintaining certification. During the upcoming PAS-SPR meeting, the committee will host representatives of the American Board of Pediatrics, the American Academy of Pedi-

atrics, and interested ASPN members to develop mechanisms to implement the upcoming recertification requirements for documentation of life-long learning and performance in practice.

Fistula First Breakthrough Initiative

A brochure is now available in downloadable format on the Medlearn Products web page located on the CMS website http://www.cms.hhs.gov/ESRDQualityImproveInit/04_FistulaFirstBreakthrough.asp

Fact Sheet for Prescribers on Part D Transition and Exceptions/Appeals Process

The Centers for Medicare & Medicaid Services has assembled a fact sheet for use in prescriber's offices regarding the new transition policy, as well as the exceptions and appeals process for the Medicare Prescription Drug Benefit. This resource fact sheet is designed to provide ready-links to tools that will streamline the prescribing process under the new benefit. They continue to work with groups representing physicians, pharmacists, patients and Part D plans to simplify and standardize the information that physicians need to provide to plans. The URL for the Physician Fact Sheet is: <http://www.cms.hhs.gov/MedlearnProducts/downloads/PartDResourceFactsheet.pdf>

The ASPN wishes to continue to acknowledge the generosity of the following corporate and session sponsors for the 2005 annual meeting. Their unrestricted educational grants have significantly benefited the Society and its efforts.

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MEETING ANNOUNCEMENTS

A Rationalized Approach to Incontinence Issues in Children: From Primary to Tertiary Care

For more information or to register, please visit: <http://www.cme.hsc.usf.edu/iccs/>

***Early Discounted Registration Ends January 17, 2006.

March 2-5, 2006; Sheraton Sand Key Resort; Clearwater, Florida

Course Description

This course is designed to present clinicians with the most current diagnostic and therapeutic approaches relating to urinary and fecal incontinence in children. The International Children's Continence Society (ICCS) is an international organization dedicated to investigating, understanding and promoting the most advanced treatment in children with urinary incontinence. The panel of international experts assembled for this course will present and interactively discuss the evidence based data relating to the diagnosis and treatment of incontinence disorders in children.

Target Audience

Pediatricians, developmental pediatricians, pediatric urologists, pediatric nephrologists, primary care physicians, pediatric nurse practitioners, pediatric nurses, physical and occupational therapists, family practitioners and pediatric specialists who are involved with children affected by incontinence disorders

Objectives

Upon the completion of this program, attendees should be able to:

Demonstrate appropriate diagnostic approaches to identifying and diagnosing urinary and fecal incontinence in children.

Evaluate comorbidity factors associated with this incontinence, including urinary tract infections, voiding disorders and developmental / behavioral / psychological issues.

Employ the necessary tools required for initiating and maintaining a voiding disorder clinic

Cite the various pharmacologic, physiologic and behavioral treatment options available to managing this incontinence in a pediatric population

Jointly Sponsored By: USF Health and International Children's Continence Society

PEDIATRIC NEPHROLOGY SEMINAR XXXIII

Wyndham Miami Beach Resort, Miami Beach, Florida

March 10-14, 2006

Registration cost is \$540 for Physicians in Practice and \$190 for Physicians in Training, Nurses, and Allied Health Professionals. We have various types of **Grants** (Tuition and/or Travel) for Medical Students, Pediatric Residents, Fellows in Pediatric Nephrology, and Young Faculty (for the 2005 Seminar, 75 granted). The Grant Application deadline is December 1, 2005. The special hotel price is \$219 and is applicable three days before, during, and three days after the Seminar.

As many of you know, the Seminar **Guest Faculty (about 30)** is composed mostly of ASPN/ASN Members who donate their time and pay for their own expenses, as do all other Faculty (including about 20 **Local Faculty**). From the Seminars beginning (1974), our emphasis has been on timely subjects presented by the best available people who can connect the subject to its scientific base and clinical situations, do so in a clear manner, and include suggestions for relevant research. The Seminar is geared for Pediatric and Internal Medicine Nephrologists, Pediatricians, Internists, General Practitioners, Renal Pathologists, Neonatologists, Geneticists, Nutritionists, Nurses and other health-related Professionals.

Seminar **Registrants** are a dynamic international mix of those well-established in the field and beginners (in 2005, from 29 different countries and 28 different US States). Previous participants have described the Seminars as "Almost a comprehensive review of Pediatric Nephrology"; "The best place to meet distinguished faculty from around the world in an informal, friendly, and scientific atmosphere"; "The relationships started at the Seminar will change your life and your work forever and for the better".

For **information** about the Seminar, contact José Strauss, M.D., Founder and Program Chairman, Division of Pediatric Nephrology, University of Miami Miller School of Medicine, P.O. Box 565874, Miami, FL 33256-5874, telephone and FAX# 305-667-3031, e-mail stainter@bellsouth.net and jstrauss@med.miami.edu; website (for Registration and Grant Application Forms/Brochure) www.pediatricnephrology.med.miami.edu/seminar.

For **hotel accommodations** contact the Wyndham Miami Beach Resort, 4833 Collins Avenue, Miami Beach, FL 33140, telephone 305-532-3600 or 1-800-WYNDHAM, FAX 305-538-2807, website www.wyndhammiami beachresort.com (We have a list of alternative hotels which will be sent to you if requested).

**Meeting Announcements—continued****40th Meeting of the European Society of Paediatric Nephrology
October 7-10, 2006; Palermo, Italy****Abstract Submission Deadline: April 14th, 2006**

The Scientific Committee is working hard to provide a stimulating scientific programme and will be exploring new ways to satisfy the demand for Continuous Medical Education in paediatric nephrology. The local Organizing Committee will offer you warm hospitality with the traditional welcome of our Sicilian people. Palermo is one of the oldest cities in Europe with beautiful pieces of art. Sicily is the largest island in the Mediterranean Sea and has been the meeting place for many Mediterranean civilizations.

It is hoped that the combined effort of ESPN with AfSPN and IPNA will start a programme of scientific collaboration amongst countries in the Mediterranean area. Please visit <http://www.espn2006.org> for more information regarding abstract submissions, registration and housing.

**Fourth International Conference on Children's Bone Health****June 21-25, 2007****Montreal, Canada**

We are pleased to announce that ICCBH #4 will be held June 21-24, 2007, in beautiful Montreal, Canada, immediately preceding IBMS 2007.

ICCBH is the only international conference devoted exclusively to the field of pediatric bone health and disease. Come explore new innovations, the latest technologies and participate in an enhanced dialogue with your colleagues from around the world!

Please visit our website at www.iccbh4.org. Be sure to bookmark it & check back regularly as we update with conference details, travel information and online registration. In the meantime, please feel free to send us an email at info@iccbh4.org with any questions or comments you may have.

We hope to see you in Montreal!

MARKETPLACE

If you would like to view the listing of jobs, you may visit the Marketplace webpage on the ASPN website by clicking on the following link: <http://www.aspneph.com/market.html>

KIDney NOTES

BI-MONTHLY MEMBERSHIP NEWSLETTER OF THE

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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: Susan Furth, Lisa Satlin

Training/Certification: Kathy Jabs, Bruce Morgenstern, Vicky Norwood

Workforce: Uri Alon, Elaine Kamil