



KIDney NOTES



PRESIDENT'S CORNER

Dear Colleagues,

Once again, I thought that participation by the pediatric nephrology community in the recent American Society of Nephrology meeting in Philadelphia proved to be quite a success. I think our activity and leadership at the meeting exceeded the proportion of our numbers, and is a testament to both the quality of our efforts and the inclusiveness of ASN.

We are excited about the upcoming ASPN Annual Meeting, part of the PAS meeting in San Francisco, April 29 through May 2, 2006. A preview of the program is on page two. All ASPN members are invited to attend all of the hotel-based events (see page three for schedule) including committee meetings and other special events such as the reception and luncheons. New this year, what was formerly the ASPN Presidential Address, Business Meeting and Awards Luncheon has been split into two luncheon events on consecutive days.

I'd like to draw your attention to two important activities of the ASPN. As I mentioned in the last President's Corner, the Council is conducting a review of our activities and direction to ensure that we continue to anticipate the needs of the membership and meet new challenges as they come up. We have engaged an outside expert to interview a cross-section of the membership. If you are contacted, please make every effort to participate. If you are not contacted but wish to express your opinion regarding priorities for the Society, please communicate your thoughts to Robyn at the ASPN office.

The second initiative is that ASPN is participating through an umbrella organization called Kidney Care Partners in an effort to respond to the current movement toward quality-based approaches to reimbursement for care provided. A separate committee, chaired by Barbara Fivush and composed primarily of ASPN Clinical Affairs Committee members, was established to address concerns related to pediatric renal care. A major issue for us is that adult indicators of quality are unlikely to be relevant to children; indeed, defining appropriate markers for children has been difficult and is a major research focus of our profession. Things are moving fast in this field and we are doing our best to represent and protect the interests of our patients. Again, if you have concerns in this area, please address them to Barb.

Finally, I want to offer each of you best wishes for a happy and successful new year.

Sandra

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Housing and Registration for the 2006 PAS Annual Meeting is now open!

For substantial savings REGISTER BEFORE MARCH 1, 2006 for the ASPN Annual Meeting in San Francisco, CA

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

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 - San Francisco Marriott

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 Awards Luncheon</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 Business Meeting, Box Luncheon and Presidential Address</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

Nominations for the 2006 ASPEN Founder's Award are now being accepted.

The deadline for nominations is Sunday, January 15, 2006.

Criteria for nominations are: 1) Must be an active or emeritus member of the ASPEN; 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 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. **Previous year awardees can be found at <http://www.aspneph.com/founders.html>**

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

Award Announcements—Continued

**TRAINEE TRAVEL AWARD PROGRAM
2006 ASPN/PAS ANNUAL MEETING**

The ASPN will sponsor residents and selected other non-fellow trainees to attend the upcoming 2006 ASPN/PAS meeting from April 29-May 2, 2006 in San Francisco, CA.

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 1, 2006** 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 2006 AWARDS

The winners in 2005 were:

- [The John P. Peters Award](#) Eric G. Neilson, MD, FASN
- [The Belding H. Scribner Award](#) William M. Bennett, MD, FASN
- [The Homer W. Smith Award](#) Walter F. Boron, MD, PhD
- [The Young Investigator Award](#) Raghu Kalluri, PhD

Learn more about each award by visiting <http://www.asn-online.org/awards/awardsindex.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. **The deadline for all ASN awards nominations is Tuesday, January 31, 2006. Nomination letters should be faxed to 202-659-0599 or emailed to sowens@asn-online.org.** *Note: Beginning in 2006, awards nomination letters will be limited to a total of 3 letters/ per candidate. Additional letters will not be considered.*

American Society of Pediatric Nephrology

**2006 Hotel-Based Events
San Francisco Marriott**

Function	Date	Day	Begin
HOTEL			
ASPN Training & Certification Committee	4/29/06	Saturday	7:00 AM
ASPN Clinical Affairs Committee	4/29/06	Saturday	12:00 PM
ASPN Member Reception	4/29/06	Saturday	8:00 PM
ASPN Research Committee	4/30/06	Sunday	7:00 AM
ASPN Workforce Committee	4/30/06	Sunday	7:00 AM
ASPN Awards Luncheon	4/30/06	Sunday	12:00 PM
ASPN Public Policy Committee	5/1/06	Monday	7:00 AM
ASPN Business Meeting and Presidential Address	5/1/06	Monday	12:00 PM
ASPN Program Committee	5/2/06	Tuesday	12:00 PM
Public Policy 102--ASPN Public Policy Initiatives: A History and Where We Are Heading	5/2/06	Tuesday	7:00 AM

Please note: When more information (room numbers and/or names) is available, it will be sent out to the ASPN members via email.

WASHINGTON UPDATE

Domenic Ruscio and Jennifer Shevchek, ASPN Washington Representatives

Congress Ends Predominantly Fractious Year

Congress adjourned on December 22, capping a frantic finish to a tumultuous year. In its last official act, Congress extended the USA Patriot Act for five weeks shortly after it adopted the Defense Department appropriations bill, a measure that also contained funding for avian flu prevention, hurricane relief and reconstruction, the Labor-HHS-Education appropriations bill and a one percent across-the-board reduction to discretionary programs.

The Senate is scheduled to re-convene January 18; the House will return for a pro forma session on January 3, then recess until January 31. The president's budget request for fiscal year 2007 is due to be transmitted to Congress on February 6, when the process begins all over again.

Still to be wrapped up is a final vote in the House on the \$39.7 billion, five year deficit reduction package, the budget reconciliation bill. The measure includes spending cuts in college student loans, Medicaid, child support enforcement and the food stamp program as well as a Medicare physician payment freeze, and a 1.6 percent increase to the composite rate for End-Stage Renal Disease facilities in FY2006. The reconciliation bill had passed the House December 20 by a vote of 212 to 206; the budget-cutting measure passed the Senate 51 to 50, with Vice President Cheney casting the tie-breaking vote. But Democrats used procedural tactics that sent the bill back to the House for another vote.

Labor, Health and Education Programs Hard-hit

The road to final passage for the Labor-HHS-Education appropriations bill was especially difficult this year. Saddled with a tight budget allocation that set the bar about \$1.3 billion lower than last year's program level, House and Senate negotiators in November were forced to cut back spending on several fronts, including No Child Left behind education programs, health professions training, maternal and child services, rural health and substance abuse treatment. In order to avoid even deeper cuts to services, in fact, lawmakers reluctantly agreed to forgo their traditional congressional earmarks.

Reflecting wide dissatisfaction with the funding levels, on November 17, 22 House Republicans joined with Democrats to defeat the conference report on the measure, a rare occurrence in a year when party-line votes have typically won the day.

A second House-Senate conference was convened in early December, but negotiators were not granted any additional funds to work with. The appropriators reallocated funding to boost rural health care and training programs, and in a second try on December 14, the House narrowly approved the measure by a vote of

215 to 213, leading the way to Senate passage on late December 20, as part of the Defense appropriations bill.

ASPN is happy to report that the final Labor-HHS-Education appropriations bill includes the Society's report language urging the National Institute of Diabetes and Digestive and Kidney Disease (NIDDK) to support research focused on the pathogenesis, prevention, and treatment of kidney disease in children. The Society's language also urges the National Institute of Child Health and Human Development to support research towards understanding the physiologic mechanisms responsible for kidney disease, hypertension, and the progression of chronic kidney disease from birth to early adulthood.

House Approval of Medicare Physician Payment Freeze Lingers

The deficit reduction package that awaits final approval by the House includes a provision that forestalls the planned 4.4 percent cut to physician payments, due to take effect January 1, 2006. The freeze in payments, which alone costs \$7.3 billion, represents another temporary fix to a problem Congress seems reluctant to address.

During final discussions on the measure, negotiators at the last minute dropped plans to link physician payments to quality performance measures. Lawmakers heard from a variety of organizations that shifting to a pay-for-performance system before a solid structural design is in place would be disastrous. Negotiators agreed instead to task the Medicare Payment Advisory Commission to develop recommendations for replacing the current payment system, and report back to Congress by March, 2007.

The American Medical Association, along with other medical specialty societies, is urging the House to approve the deficit reduction package immediately, so that Medicare beneficiary access to physician services will not be harmed.

As of now, the Centers for Medicare and Medicaid Services (CMS) is ready to go forward with a 4.4 percent cut to physician payment. However, CMS has assured the Medicare provider community that unlike previous years, it has developed a plan that will allow the agency to implement a congressional change to the physician payment formula more efficiently and appropriately. Accordingly, if there is an effective change by January 1 or shortly thereafter, it will take about 2 to 3 weeks to have the payers and carriers on board with the change. CMS recommends physicians hold claims during this time. Dependent on whether the House approves the deficit reduction package, ASPN will provide more detailed information about the agency's plans on managing physician claims and payment.

WASHINGTON UPDATE—Continued

(CMS Releases 2006 Medicare Fee Schedule Final Rule

On November 2, CMS published the final rule on the 2006 Medicare Fee Schedule in the Federal Register. CMS maintains its stance that it does not have the authority to change the sustainable growth rate formula, and thus the much-discussed 4.4 percent reduction in physician payment is still part of the rule. This results in a conversion factor of \$36.17 for 2006, as opposed to the 2005 conversion factor of \$37.89.

There are limited code-level RVU changes affecting nephrology. Therefore, payment changes in high volume nephrology codes are primarily due to the conversion factor changes. Nephrology, like most specialties, is slated for an approximate 4 percent reduction in 2006, unless the House votes to approve the deficit reduction package. More information on the 2006 Medicare Fee Schedule will be included in the next *KIDney NOTES*.

NEWS AND ANNOUNCEMENTS

NIH Electronic Grant Submissions Timetable

NIH timetable for implementing the electronic grant submissions process can be found at <http://era.nih.gov/ElectronicReceipt/>. Everyone should familiarize themselves with this process well in advance.

Seek ASPN Member Representatives for All States, Canadian Provinces and Puerto Rico

To improve communications between ASPN Council and its members, the Workforce Committee is compiling a roster of ASPN members willing to serve as State (and Province) Liaisons. If you receive a letter of invitation, please respond within two weeks to allow us to finalize the list as soon as possible.

ASPN Stone and Bone (S&B) Club

A one hour informal meeting will be held during the 2006 ASPN Annual Meeting in San Francisco to set the foundations of the ASPN Stone and Bone (S&B) Club. ASPN members interested in attending the meeting and/or sharing ideas about the club please e-mail Uri Alon at ualon@cmh.edu. Further information will be announced later.

Clinically Speaking....

The ASPN Clinical Affairs Committee has finalized a draft brochure on nutrition in pediatric CKD patients that will soon be published

by the NIDDK Clearinghouse. It will contain concise, pediatric-specific recommendations on many aspects of nutritional management of children with CKD and once approved, should be a useful patient education handout (for examples of the adult nutrition brochures, visit <http://kidney.niddk.nih.gov/>). We have also been following up with the National Kidney Disease Education Program regarding creating a pediatric consult template letter, and reporting of creatinine clearance on lab reports. Stay tuned for updates on these and other issues in future issues of *KIDney NOTES*.

Launch of "BoardWalk" Column

This column launches a new joint initiative between the ASPN and the Nephrology Subboard of the American Board of Pediatrics designed to keep members of the ASPN up to date on issues of education, certification, and maintenance of certification. We plan to highlight the missions and scope of the subboard, the "big board" (ABP), and the American Board of Medical Subspecialties so that members of the ASPN can better understand the workings of these bodies and participate more completely in the issues of the day. We will also provide opportunities for questions from the ASPN membership that appear broadly applicable, and look forward to this avenue of communication strengthening the

connections between ASPN and the Board. The next issue of *KIDney NOTES* will begin this new column with a description of the Subboard of Pediatric Nephrology, its members, its responsibilities, and its position within the larger Board. You are invited to forward questions or comments for the column to Vicky Norwood at: yfn6t@virginia.edu.

pFeNa Has A Night Out in Philadelphia

At the American Society of Nephrology's 2005 Renal Week in November, the Pediatric Fellows in Nephrology Association (pFeNa) hosted a group of pediatric nephrology fellows, pediatric and internal medicine residents, and medical students at Monk's Café, and the Fox and Hound pubs in downtown Philadelphia. Also making a guest appearance were pediatric nephrologists Dr. Bruce Morgenstern from Phoenix Children's Hospital, Dr. Vicky Norwood from Children's Medical Center at the University of Virginia, and Dr. Deepa Chand from the Cleveland Clinic. Over food and drink, a good time was enjoyed by all. Networking is a crucial part of our small community. In that respect, the officers of pFeNa are organizing a social event at the American Society of Pediatric Nephrology/Society for Pediatric Research Annual Meeting in San Francisco from April 29-May 2, 2006. Stay tuned for upcoming details!

NEWS AND ANNOUNCEMENTS—CONTINUED***Training and Certification Committee Update***

In 2005, we continued to lay the groundwork for more work with the American Board of Pediatrics (ABP) and other stakeholders to make it easier for our members to meet the new requirements for maintenance of certification. The deadline for having each component in place (1. Licensure [this one is easy], 2. Life-long learning/self-assessment, 3. Secure examination, and 4. Performance in practice) is fast approaching. The next year or two will see the development of specific modules for items 2 and 4 above. We will work with the ABP to keep you abreast of these developments – see the announcement of the new *BoardWalk* column on page 5.

The committee also worked with the training program directors this year to attempt to codify, to a reasonable degree, the process by which potential fellows should apply, interview and be accepted into Pediatric Nephrology training programs. ERAS, the electronic application system, is being used this year. General guidelines for applicants have been developed. These will soon be posted

to the ASPN web site and will be distributed to all the general Pediatrics residency program directors so that they can spread the word to their residents. We believe that making the system transparent and comprehensible to the applicants is the best approach to take for both programs and trainees. We'll let you know when the materials are posted, so you can look them over. We appreciate the input from the pFeNa (our fellows association) in developing these guidelines.

Speaking of the pFeNa, Council and the Training/Certification committee helped make that group a bit more "official" this year. We encourage all fellows to join, and encourage all training program directors to encourage the membership of their respective fellows. See Brad Dixon's article and announcement on page 5.

International Effort to Standardize and Investigate Acute Kidney Injury

The first meeting of the Acute Kidney Injury Network was convened in Amsterdam in late September by delegates from over 25

international societies in Nephrology and Critical Care. ASPN was represented by Prasad Devarajan; and the global pediatric nephrology community was also represented by Aysin Bakkaloglu of Turkey and Arvind Bagga of India. The goals were to clarify the current state of knowledge regarding Acute Kidney Injury (previously known as Acute Renal Failure), review current clinical and basic research, define terminology, establish a collaborative network for research and clinical care, and identify key questions to be answered by this network. Three working groups explored (1) uniform standards for definition and classification of AKI; (2) joint conference topics; and (3) development of a collaborative network. Of particular importance to pediatrics, it was noted that criteria for staging and severity of AKI in adults were unlikely to be relevant to young children. Thus, before embarking upon interventional studies in pediatric patients, it would be important to establish such criteria. The report will be circulated among participating organizations and a position paper will be developed by the participants.

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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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>

MEETING ANNOUNCEMENTS

4th International Conference on Pediatric Continuous Renal Replacement Therapy (PCRRT) Feb. 23 – 25, 2006, Zurich, Switzerland

This conference brings together in one forum caregivers of children who require extracorporeal therapies including CRRT and plasmapheresis. The course will discuss basics, use of PCRRT in sepsis, acute renal failure, multiorgan dysfunction syndrome and non-ARF indications. Research in drug clearance, nutrition, liver support and outcome will be presented. There will be a call for abstracts that will be published in Pediatric Nephrology.

Sponsors for the program are University of Zurich, University of Alabama School of Medicine, DeVos Children's Hospital, Grand Rapids, Michigan; and PCRRT Foundation. Physician and Nursing credit will be available.

For preliminary information go to www.pcrtr.com and click on 2006 program or contact timothy.bunchman@spectrum-health.org or cmalone@pclnet.net

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:



Meeting Announcements—continued

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).

KIDney NOTES

BI-MONTHLY MEMBERSHIP NEWSLETTER OF THE AMERICAN SOCIETY OF PEDIATRIC NEPHROLOGY

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Bruce Z. Morgenstern, M.D.
Victoria F. Norwood, M.D.

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

Robyn Mann, Administrative Coordinator
312-503-4000 Phone
312-503-1181 Fax
aspn@northwestern.edu
www.aspneph.com

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