

Focus

Pediatrics



March 2016

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If you have any suggestions for how we could enhance the newsletters moving forward or any corrections, comments, or suggestions for articles of interest, please do not hesitate to contact any of the Career Services Committee members.

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Connect with the Department of Pediatrics

John C. Duby, M.D., chair



medicine.wright.edu/pediatrics

From the Chair: John C. Duby, M.D.



John C. Duby, M.D. is the chair of the Department of Pediatrics at Boonshoft School of Medicine and Dayton Children's Hospital. He has served as medical director of the child development program, medical director of rehabilitation services, medical director for children at the Stillwater Center in Dayton and clinical professor at Wright State University, from 1990-2000. More recently, he has served as professor of pediatrics since 2008 and professor of clinical pediatrics from 2000-2008 at Northeast Ohio Medical University. Dr. Duby's interest in medical students is apparent in any conversation with him. He has personally uploaded a number of documents on the Career Essentials Pilot site to aid students in preparing for a career in pediatrics.

When did you first know you wanted to be a pediatrician?

I decided to be a pediatrician in the seventh grade! I recall that my science class that year introduced me to the world of human anatomy and physiology, and thought that a career in medicine would be a great way to pursue that interest. At that time in my life, my only experience with doctors was with my pediatrician. So I think the combination of those two experiences started me down the path toward my career.

Why did you choose developmental pediatrics?

All through medical school and residency, my plan was to practice general pediatrics. When I finished my residency at Texas Children's Hospital and Baylor College of Medicine in Houston, I joined a private practice in the Houston suburbs. Within three months, it was clear to me that my training had not prepared me for the questions and concerns that families raised on a daily basis in primary care. The gaps I identified were in child development, school health and learning, and adolescent health.

I finished my residency in 1982. We were still entrenched in the biomedical model of training. The concept of the biopsychosocial model of health and disease was only emerging, and definitely not emphasized in my residency. After a year of practice, I had the opportunity to move to Boston, and decided to pursue additional training to fill the gaps I had found. My goal for the two years of fellowship training was to become an outstanding general pediatrician who would be well prepared to support families with concerns about their children's development, behavior, and learning, as well as their illnesses. I returned to general pediatric practice in Boston for the next five years, and found that I enjoyed the challenges of developmental-behavioral pediatrics, and have practiced as a specialist for the past 25 years.

Most recently, it has been exciting to see the evolution of the biopsychosocial model to the ecobiodevelopmental model, recognizing the dynamic interplay between a child's biology, including epigenetics and neuroplasticity, and their social environment, which influences development and behavior over time. The recognition of how early childhood experiences set the stage for adult health provides a huge opportunity for pediatric professionals to work with other child-focused professionals to promote lifelong health and wellness.

Duby continued

Did you have any mentors? If so can you give an example of how they helped you?

I have had numerous mentors throughout my career, even today. They have often seen potential in me that I might not have seen myself, and pushed me to do things that I might not have considered otherwise. They offer guidance, encouragement, and a sounding board.

You have done extensive research. Can you comment on your plans for enhancing opportunities in pediatric research for students?

I have primarily considered myself a clinician-educator, while collaborating with others in research initiatives over time. More recently, I have developed a special interest in evaluating the impact of quality improvement learning collaboratives to support primary care providers in addressing the developmental and behavioral concerns of their patients. This ties in with my roots in general pediatrics, while using my specialty training and expertise. My advice to students when considering research activities is to choose an area that generates personal passion and excitement, and stay focused.

We are in the midst of a research strategic planning process at Dayton Children's Hospital with the goals of building the infrastructure to expand clinical research while also supporting our faculty to devote time to their passions for inquiry and innovation. We are recruiting faculty who have interests and track records in research as well. These efforts will lead to expanded opportunities for medical students to join us in these efforts over the next few years.

Since you are involved in the cutting edge work on the future of pediatrics, do you have any advice for future pediatricians?

The pediatrician of the future must make a commitment to interprofessional collaboration and team-based care that focuses on health promotion, especially as it relates to early brain and child development. The ecobiodevelopmental framework will drive us toward innovative models of prevention that include partnerships with home visiting programs, parent training programs, medical-legal partnerships, and other supports for families experiencing adverse stressors, while coordinating linkages with community supports that address the social determinants of health. While fewer children will be hospitalized, children with chronic conditions, including mental health concerns, will require higher levels of coordinated care in the community.

Interview with Dr. Megan B McDonald, Capt., USAF, MC, Chief Resident, Pediatrics

What drew you to pediatrics in particular?

My mom has been a neonatal intensive care nurse for the past 31 years, and I always enjoyed visiting her at work growing up. I knew I wanted to be a doctor around the age of 12 and my mom was integral in getting me great shadowing opportunities with doctors she knew from work as well as outpatient pediatricians she had known. When deciding between caring for adults or kids, I didn't feel as empathetic toward adults as I felt a doctor should, and I just enjoyed my time taking care of children so much more. Plus pediatrics gives me a good excuse to keep up on all the latest children's books and TV shows!

What advice do you have for students trying to figure out if they are interested in pediatrics?

Spend as much time with as many different age groups as you can. Pediatrics never gets boring because caring for a two-week old is so very different than caring for a two year old or a 12 year old. Figure out if you like the little bit of extra detective work that often goes into diagnosing children as their stories are typically told second hand. Spend time inpatient and outpatient, and pay attention to your mood at the end of the day—if you are tired but happy and look forward to work, pediatrics might be the specialty for you!

What advice do you have for students trying to match in pediatrics?

No matter where you end up, you've chosen a fantastic specialty with consistent job satisfaction across the board. You are going to be helping to shape the next generation and your influence extends farther than you'll ever know.

What is your favorite thing about pediatrics? What's your least favorite?

My favorite thing is getting to spend a few moments each visit trying to connect with the patients, whether that be talking about dinosaurs, or princesses, or the latest *Hunger Games* movie, it's always fun to try to get a smile in early. My least favorite part is when you're caring for a very sick child and they don't make it. It's luckily few and far between, but losing any child, even when expected, is very tough on everyone.

Do you have any general advice for medical students?

Enjoy every day, even if you're rotating in an area you don't think you enjoy. Find something fun about each day (there's always something!) and know that taking care of patients beats learning from a book any day.

What topics did you wish you learned more about in medical school?

Neurology still puzzles me more often than not—there's just so much we don't know about the brain. It's a very interesting topic that I wish made more sense, and I admire those that understand it!

What are your practice plans for the future?

I will be moving to Ellsworth Air Force Base in Rapid City, South Dakota, in August. I'll be the only pediatrician there in an outpatient clinic, which will be quite different than the past four years. But I'm looking forward to this new challenge and spending more time in clinical medicine. I hope to one day do an infectious disease fellowship but that will depend on what the Air Force needs at the time. Either way, I'll be taking care of some amazing children, and I consider myself pretty lucky for that.

Children make your life important.

—Erma Bombeck, American humorist

Interview with Patrick Motz, D.O., Chief Resident



Patrick Motz, D.O., is a graduate of Nova Southeastern University and is the civilian chief resident at Dayton Children's Pediatric Residency Program. He is originally from Sacramento, California; did his undergrad

of Linfield College in McMinnville, Oregon, which incidentally was D3 football champs during his sophomore year; and attended medical school in Fort Lauderdale, Florida, at Nova Southeastern University. He came to Dayton Children's to do his pediatric residency along with his wife, a flight surgeon at Wright-Patterson Air Force Base.

What drew you to pediatrics in particular?

Dr. Motz wanted to become a pediatrician since he was five years old, but tried to keep an open mind while in medical school. He felt that pediatrics was the most fun; stressed being an educator and teacher on two levels, both on the parental and patient level; required building long term relationships and "kids are really cute." As far as disease exposure, he said that pediatric diseases are more interesting and can generally be managed by the primary care physician. He felt it was important for pediatricians to enjoy long-term relationships through many stages of development and periods of transition. His plans for the future are to do a neonatology fellowship in Seattle, Washington. Although he has always felt that pediatrics was the perfect specialty for him, it was not until he was in his third year of medical school, and especially during a rotation in the newborn nursery, that he knew for sure. He enjoys neonatology because a neonatologist cares for critically ill children who are sometimes on the edge of what is medically possible. In the NICU, you still have the opportunity to see newborns progress through stages of development, which is an important facet of the specialty to him.

What advice do you have for students trying to figure out if they are interested in pediatrics?

Medical students who are interested in pediatrics need to ask themselves if they are comfortable being around children and if the pediatric rotation excites them. Being a pediatrician is part being a showman. You need to be able to entertain the children while still being able to get a good physical exam. Most important though, you have to be passionate about the field. Pediatrics is getting more competitive, it is not the highest paying field, and you have to be ready to work long hours. Students wanting to match into

pediatrics do not necessarily have to have the highest class rank and board scores in the class, but they need to be adequate to compete. The residency review committees will be looking at what you are doing with your extracurricular time, particularly in the pediatric field; what your letters of recommendation say, for example, does your letter writer know you well and indicate that you would be a good person to work with; and whether you have a basic level of research experience. He summarized his advice for medical students by saying they should pursue what they are passionate about. Sometimes the students who failed a class or the boards the first time end up being the best physicians because they have had to work so hard to succeed and are really passionate about the field. He suggested that students get involved in clinical volunteering early so they can remain excited about their medical career as they complete their basic science coursework.

What is your favorite thing about pediatrics? What's your least favorite?

Dr. Motz said that his favorite thing about the field of pediatrics is the teaching aspect, both patient and resident. He is currently serving as staff attending and moonlighting in the emergency department. It is frustrating to him to see patients who could have been saved a hospital visit by receiving a little more preemptive education on their disease. His least favorite aspect of pediatrics is when you cannot convince parents to do something that you know is good for their child, the patient. An example he gave was receiving the HPV vaccine.

What topics did you wish you learned more about in medical school?

Dr. Motz ended the interview with timely advice for students selecting their electives. He said that a better understanding of nutrition is very important. Electives involving the dietary department are invaluable for future pediatricians. A better understanding of nutrition will allow the medical professionals to aid their patients in gaining weight as well as helping to prevent excess weight gain.

—Poston

What if I am interested in pediatrics?

Where do I begin?

MS1:

- Begin taking the self-assessments on the AAMC Careers in Medicine webpage
- Work on your CV and have it reviewed by Dr. Poston
- Join the Pediatric Interest Group! Attend meetings! Begin networking now!
- Consider a scholarly project

MS2:

- Review self-assessments
- Go onto Career Essentials Pilot page and begin researching the specialty

MS3:

- Meet with your mentor(s)
- Review competitiveness data (see handouts on Pilot)
- Complete the Specialty Indecision Scale if you are undecided or having difficulty deciding
- Network during your pediatric clerkship
- Seek advice from fourth-year students going into pediatrics
- Meet with Dr. Poston to work on your CV, and personal statement and do a mock interview

What to do next:

- Continue to develop skills in both leadership and building patient relationships.
- Formulate a plan of where to focus your efforts
- Get involved with pediatric physician organizations
 - Ohio Chapter of American Academy of Pediatricians (Ohio AAP)
 - American Academy of Pediatricians (AAP)

Interview with Dr. Ann Burke, WSU Pediatrics Residency Program Director



What drew you to pediatrics in particular?

I enjoyed hearing people's stories and the friendly atmosphere. I also liked the responsibility that the pediatric residents gave

me during my medical school clerkship experience in pediatrics.

What is your favorite part about pediatrics?

The culture of having kids around makes us adults be better adults. Who knows, maybe if we treated adults more like we do kids (having a play room, bright colored hospital, visiting cartoon characters, etc.), we could help them more when they're sick. Counseling in pediatrics includes preventative medicine, vaccinations, diet, and school. I appreciate and enjoy being there to guide families with some common knowledge to help them help their kids. Kids tell you by the way they're acting that they are sick. When they are fussy, something might be wrong. When they start playing, they're getting better. The parents are great, and many times parents/caregivers try harder for the interest of their kids' health than they do for themselves.

What is your least favorite aspect of pediatrics?

Keeping up with all the knowledge that's growing so quickly in a primary care field. I suppose it is better than in some specialties, in terms of information explosion; but it's still difficult to continue to keep up with all of the new advances.

What is something that people may not know about pediatrics?

Unfortunate to hear about, but burnout is increasing in all specialties. Fortunately, pediatrics is on the low end of that spectrum. Pediatrics is always near the top for career satisfaction on AMA surveys over the years. The parents are great. Many students ask about "how do you deal with the parents"? I enjoy it, and most pediatricians do, too! However, the additional dynamic of mental health, whether it be the children or their parents,

and the effect that may have on delivering the best care can sometimes make caring for children more challenging.

What advice do you have for students trying to determine if they are interested in pediatrics?

Put more stock in what you enjoy rather than the projected salary for the field. Do electives in what you might like and see where you feel the happiest and how you fit in, both with the patients and the people you work with. I perceive that "Oh this is so cool," often comes across the minds of third year students, but think about doing that each day for the rest of your life, not just if it's fancy and high tech. If you can answer the questions easily (how you fit in, are you at your best and happy), great, but tease out whether you want to see patients of that sort or type for the rest of your life.

Do you have any general advice for med students?

Figure out how you best learn. Don't get discouraged about grades in basic science and frustrated with the amount of memorization, because one day very soon you'll be working with patients. Also, don't forget why you went into medicine in the first place and what you want to get out of it. Maybe that's not as helpful for a first year, but remember your mission through your clinical experiences and residency, and if you're ever feeling like a grouchy doctor during your career. Being a physician is a great honor and privilege—don't lose sight of that. Working with kids really helps me remember that fact! Look for opportunities for growth in areas/subject matter you love as well as ones that you do not. Keep self-assessing as you go through your career and be mindful!

—Ryan Brinn MS 3

Research: Pediatrics

With the arrival of the new pediatrics chair, Dr. John C. Duby, pediatrics is currently restructuring its medical student research resources. As Dayton Children's Hospital moves to become a center of pediatric research, the ability for medical students to be involved in innovative research will only grow. Currently, quite a few medical students do research at Dayton Children's, across many disciplines. To name just a few, there are projects in pediatric surgery, a few of which will support the initiative to become a Level 1 Trauma Center. There is also research in pediatric oncology, pediatric pulmonology, pediatric dermatology, and a myriad of case studies. There are great opportunities in pediatrics for many specialties. If you have questions or think you might like to become involved in research in pediatrics, you can contact **Amber McCurdy, medical student research coordinator, at amber.mccurdy@wright.edu**

A person's
a person,
no matter
how small.

—Dr. Suess

Interview with Dr. Erica Taylor, Third-Year Clerkship Director

What drew you to pediatrics in particular?

Pediatrics allows a physician to be a part of a person's extended family support system. We guide them through all the milestones of their childhood and provide information on their transition to adulthood. We celebrate their first tooth, first steps, first grade, their first date, all the way to graduation. Parents allow us to be a part of their child's journey. Whether it is a young parent with multiple questions on childcare or the experienced parent allowing a child to find their way, a pediatrician can be a great resource and guide. One of the most humbling and rewarding "paychecks" I get is a hug or a smile from a child. As a hospitalist, I see children at their most vulnerable. These children are in pain, scared, and confused. Many just want security and something familiar. We have the time to talk about their favorite toy, favorite game, or even their favorite song. I have even been known to dance a little. That bond you make with a child is therapeutic for both them and you. It is hard to have a bad day after hearing a child's laughter. Most of my mentors had some practice with children and the joy that they expressed to me about their career (many being in practice greater than 15 years or more), made my choice to care for children easy. We are able to see the child, not just the syndrome or the disease. In pediatrics, there are many roles, and responsibilities that you can choose, including community (both local schools and sports, public health) and clinic-based practice. You can choose to have a hospital-based specialty or subspecialize. All these opportunities are open to you.

What advice do you have for students trying to figure out if they are interested in pediatrics?

Do some research. First start with yourself. What do you want to accomplish with your career? Yes, all of us love children (or at least should). But what do you want to contribute to the field? Do you see yourself as a leader in the community? For example, the pediatricians in Flint, Michigan, were at the front of sounding the alarm about lead poisoning in the water. Do you see yourself caring for complex conditions? What gets you excited to go to work? Many of you won't know now but if you continue to reflect on your experiences, it may help guide your decisions.

Next, gather research information. Our interest group, the Peds Club, has great events (for everyone, not just people interested in peds) that you can participate in. This allows you to interact with your peers and upper classmen, share experiences and, have early exposure to the pediatric population and medical staff. We have an observership program to shadow various specialties in pediatrics that you may be of interest. The American Academy of Pediatrics has a section for medical students to join and gather great information.

Finally, gather your support "team." Look for mentors to guide you. Establish a relationship with your advisor to really compare and contrast your choice of careers. Many factors may play into your decision; take the time to reflect on them. Mentorship is a longitudinal relationship. Some of my mentors are not in my specialty but were instrumental in my development.

What advice do you have for students trying to match into pediatrics?

Similar to the information above with the addition of knowing what your academic package or "brand" looks like to a potential program director. Now is the time to take an honest assessment of your academic performance, your experiences, and discuss how they shape who you are today. Challenges early in your career don't necessarily mean that you are not going to achieve your dream, but knowing your limitations is vital. Once you make the decision, research programs and continue your relationship with your advisor and mentors. Work on your CV, your personal statement. Have the discussion about whether an away elective is beneficial or not. Work on your interview skills. Good eye contact and well-articulated, thoughtful answers go a long way. Practice is key. Make sure all communication is professional, respectful, and a true reflection of who you really are.

What's your favorite thing about pediatrics? What's your least favorite?

Pros: Joy every day! I laugh often and much. I am honored to work with families and have them trust me with their most precious possession, their child. I learn something new every day. New evidence, studies, and breakthroughs are just being

released. I am constantly trying to keep up to date for my patients and students. I am constantly being challenged.

Cons: Not all cases/patients have a happy ending. Sometimes doing the best you can, still has a negative outcome. You have to grieve too. In today's economic climate, resources may be limited for some of your patients. You will have to know the social system well. Your patient population will eventually leave you. Many practices stop seeing patients at 21 or 22 years of age. You will have to transition them to an adult provider.

Do you have any general advice for med students? (Anything you wish you knew that you now know?)

- 1. Know how you learn.** Everyone learns differently. Are you an auditory learner? Visual? Kinetic? Use that to grasp concepts and material
- 2. Everyone needs support.** Family members, religious groups, support groups, and friends are all instrumental in supporting you through this time
- 3. Avoidance will not help you.** If you are struggling, whether it is academic, mentally or socially be proactive. BSOM has support programs in place. People should not have to search for you. It doesn't help in the end, and you may miss out on great opportunities.
- 4. Medical School is a developmental journey.** You won't excel at everything. There are good pearls in constructive feedback. Be willing to listen. Take notice of repeated comments. Look for trends.
- 5. Take some time for yourself.** Go to a movie, take a walk in the park, go to a concert. The work will still be there. Decompression is needed sometimes.

What do you like to do for fun?

Music, concerts, movies, and amusement parks. I sky dived in medical school (two jumps) and want to go back eventually.

—Will Trautman MS2

Fourth-year Perspective: Adrienne Kirby

When did you first know you wanted to be a pediatrician?



My first memory of being interested in medicine was a car ride with my dad when I was about 11 years old that involved questioning him about the mechanism of jaundice in babies (this is true and very strange, I know). After that my interest grew and from then on it's always been my intention to pursue medicine and, for me, going into pediatrics really went hand in hand with that decision. Every job I've ever loved prior to entering medical school involved working with kids and apart from a brief moment of panic that involved a two-month stint in the business school at Ohio State I've never thought of becoming anything other than a pediatrician.

What advice would you give students considering pediatrics as a career choice?

Really use your third-year rotations to guide your decision. If you've found a specialty where you're excited to go to work in the morning and find yourself thinking about work when you're home I think you've found where you belong.

What is your favorite thing about pediatrics?

Apart from the kids (because of course everyone's favorite part is working with kids) I really love the intricacy of it all. I like how much it challenges me to think because as fast as kids can get better they can also do the opposite just as fast.

If there is one thing you could do differently throughout medical school what would it be?

I would have loved to be more involved with research. I think I was so focused on book studying and convincing myself I didn't have time for other things that I limited myself in some other opportunities. Research is great for letting you experience a different aspect of your field choice that you can't get from studying books.

What is one thing most people don't know about pediatrics?

What I found most surprising was how much the field truly consists of a network of peers who are all willing to help you in any way.

—Alex Cook, MS2

Did you have any mentors along the way who helped shape your path?

I found my first true mentor after entering medical school in Dr. Toussaint. Prior to that I had people who helped guide me along the way but never really anyone who impacted my passion for this career choice as much as him. He believed in me more than I did at times, pushed me when he knew I could go farther and, most importantly, let me guide my own journey into the field (with the occasional nudge when I was a little too off track).

How did rotations affect your decision?

I think rotating in each specialty was the best thing to happen to someone like me. I came to school knowing I wanted to go into pediatrics, but without having given other specialty choices a fair shake. Each rotation at times both challenged my decision and helped solidify the reasons why I was pursuing pediatrics.

Happiness is
mostly a
byproduct of
doing what
makes us
feel fulfilled.
— Benjamin Spock

Alumni Interview with Dr. David Roer, Pediatric Associates of Dayton

How did you choose pediatrics as your specialty?

I knew I wanted to do something that helped children. Having done research in college in the field of genetics, plus the fact that my wife says I am just a big kid, I decided pediatrics was the field that would make me most happy.

What experiences influenced your decision to pursue this field over others?

As above, my research in genetics, with a focus on Down's Syndrome, influenced my decision. I went to OSU graduate school to pursue human genetics but the department never really provided that for me. So, medical school was the best option at that time.

Did you have any mentors along the way who helped shape your decision to go into pediatrics?

No, not really. Going into medicine was always a thought—my mother was an R.N. and my uncle was a pathologist, so medicine was always on my mind.

What's one aspect of pediatrics that medical students may not know?

They may think that it is always about screaming kids but pediatrics is also about learning how to deal with parents as well. You also have to be very adept at making diagnoses because in most cases the patient can't tell you what is wrong with them. It really takes more skill than many would think.

What aspects of pediatrics have you found to be most unique? Likewise, what aspects have you found to be most rewarding or challenging?

To me the most unique thing is the ability to form lasting relationships with families and patients. These children are with you from birth and you get to watch them grow up and develop. You become part of their family. This is also what makes it the most rewarding—the relationships you make. The most challenging is having to deal with a tragedy like a severe illness or even the death of a child. As high as you may feel when a child gets better from something you fixed, the low is as deep as you can imagine when one passes away.

If you were talking to a student looking to go into pediatrics, what's one piece of advice you would give them?

My best advice is to choose a field the makes you happy and rewards you, not financially, but with the joy that comes from helping others. I know that sounds a bit corny but if you are not happy at what you do, money will not make up for that.

—Uma Jasty MS1

Play is the
highest form
of research.

—Albert Einstein

Pediatrics Club

Here is a list of all the bigger events we do in the Pediatrics Club! We are always looking to add more and love to let our members bring their interests and passions to light by creating new events in the community reaching out to the pediatric population both in the medical and non-medical setting. This year alone we had lots of firsts including: cohosting a 5K, Christmas caroling at Dayton Children's Hospital, sending members to the American Academy of Pediatrics Conference, and adopting a family during the holiday season.

Our current board is:

Alex Cook: cook.224@wright.edu

Lauryn Zielinski: zielinski.5@wright.edu

Sydney Shepherd: shepherd.85@wright.edu

American Academy of Pediatrics Rep:

Ginny Shelley: shelly.14@wright.edu

First Year Reps:

Jarrod Wurm: wurm.3@wright.edu

Jordan Brauner: brauner.2@wright.edu

Halloween Parade at Children's

Dress up and walk around the hospital with hospital staff and some of the patients to visit patients and hand out stickers, pencils, etc.

When: Friday afternoon around Halloween

Dinner with the Docs

Dinner held at Dayton Children's Hospital where students get to talk to and hear from a variety of pediatric specialists and physicians.

When: November

Dig for Dreams Volleyball Tournament

A volleyball tournament, raffle, and silent auction to raise money for A Special Wish, which grants a wish to a child being treated for a life-threatening illness at Dayton Children's. This year we sponsored Beau, a 4-year-old boy with congenital heart disease, to go to Disney World. Last year we raised over \$2,000. Hoping for another successful year!

When: February 28

Dinner with the Patients

Dinner held at Dayton Children's giving students an opportunity to get to know some of the children who have been treated at Children's and listen to their stories.

When: April 21



Match Panel

Opportunity for M1-M3 students to talk with and receive advice from fourth year medical students who have matched into pediatrics.

When: after the match

Childlife Volunteering

Spend an evening at Dayton Children's in a non-medical way getting to know patients through play and craft time.

When: March 7, April 4, May 2

Observership Program

Unique partnership with Dayton Children's allowing medical students to spend time shadowing in a number of pediatric departments and specialties.

Contact person: Rebecca Elofskey

When: Throughout the year

"In It for the Long Run" 5K

First year working with the Heme/Onc Interest Group as well as Boonshoft Running Club to put together a 5K to raise money for the Heme/Onc department at Dayton Children's Hospital.

When: April 9

Intubation Lab

Held at the Cox Institute, this opportunity gives students hands-on experience practicing intubation and emergency procedures with pediatric patients.

When: October

Inspire Tutoring

Students work with elementary school children on reading level improvement at an after school program at Faircreek Church.

When: ongoing

Christmas Caroling at Children's

Pediatrics Club is in a new partnership with Tuneshoft, singing in the atrium of Dayton Children's Hospital.

When: December

American Academy of Pediatrics

This was the first year we brought on a new board position, a representative for the American Academy of Pediatrics, and sent a group of students to the national conference in Washington, D.C., to learn about pediatric medicine and represent Boonshoft.

When: October

Adopt-a-Family

This past Christmas was the first year we, as an organization, adopted a local family in need to shop for Christmas gifts for the children and parents.

When: December