



Department of Pediatrics



Pediatric Developments

VOLUME 3 ISSUE 3

MARCH 2017

Department of Pediatrics

Chair's Corner: Highlights from the Association of Pediatric Department Chairs Annual Meeting

Children's

Dayton

Values

- Safety
- Compassion
- Ownership
- Collaboration
- Innovation
- Value Creation

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The annual meeting of the Association of Medical School Pediatric Department Chairs (AMSPDC) was held from March 1-4, 2017. There were a number of important presentations that I would like to highlight briefly.

Precision Health was a hot topic. This includes the use of large sets of real world data for both research and clinical use. The use of predictive analytics for clinical care was emphasized in a number presentations. The value of biomedical informatics for medical decision making, diagnosis, care redesign, public health management, and future clinical trials was emphasized. Boston Children's Hospital Computational Health Informatics Program provides an example of where we can be headed.

Piter Dorrestein shared his research on the use of mass spectrometry to develop rapid microbial diagnostic testing. He showed how analyzing sputum in patients with cystic fibrosis can identify microbial communities that standard cultures miss, allowing for precision treatment.

<u>Marie Lynn Miranda</u> highlighted developments in geospatial health informatics, including

data on lung development and exposure to air pollution based on proximity to major highways.

Diana Bianchi, director of NICHD, which funds 18% of NIH pediatric research, emphasized the growing importance of data science, and the availability of the NICHD Data and Specimen Hub. NICHD DASH is a centralized resource for researchers to store and access de-identified data from NICHD-funded research studies for the purposes of secondary research use. It serves as a mechanism for NICHD-funded extramural and intramural investigators to share research data from studies.

David Nichols, President and CEO of the American Board of Pediatrics reported that the American Board of Medical Specialties officially recognized subspecialty certification for Pediatric Hospital Medicine in October 2016. eligibility requirements are under development, but new specialists will be required to complete a 2 year fellowship that includes scholarly activity similar to other fellowship programs.

The Education Committee

shared data on the growing trend for medical students to be advised to apply to 20 or more residency programs in order to be assured of matching. Data reveals that very few graduates are unable to secure a pediatric residency even though 99.5% of slots filled in the most recent match. 80% match into 1 of their top 3 choices, and almost 100% match if they apply to 8-9 programs. Students who do not match are readily identified due to risk factors such as poor academic performance, failed USMLE exams, poor communication skills, and rank in the bottom 25% of their class.

Recommendations were made that residency programs eliminate waiting lists for interviews and may need to increase the number of interview slots in the short term. Basic science and clerkship faculty need to identify and counsel at risk students early to eliminate surprises at match time. Medical schools should work with at risk students early to develop appropriate action plans. The bottom line recommendation was that applying to 8-9 programs should be enough for solid students. We should keep this in mind as we advise students.

John Roll MD

PAGE 2 PEDIATRIC DEVELOPMENTS

Gogi Kumar promoted to Associate Professor of Pediatrics

Congratulations to Gogi Kumar for her recent promotion to Associate Professor of Pediatrics. Gogi has demonstrated sustained contributions in education, scholarship, and leadership.

She has served as Course Director for 3 pediatric neurology courses and received a medical education teaching award for her commitment to resident education. She has made an extensive commitments to structured medical student education, including teaching in the Neuroscience course for 2nd year medical students. Since 2011, students have provided universally exemplary evaluations of Dr. Kumar during the Neurology Clerkship. She has given many Grand Rounds at Dayton Children's Hospital and contributes to the Annual Acute Care Symposium and noon conference series for pediatric residents with consistently strong evaluations. In addition, she serves as the Dayton Children's Hospital site director for the WSU Boonshoft School of Medicine, Neurology Residency Program. She is leading efforts to de-



termine the feasibility of beginning a Child Neurology residency.

She has been appointed to the American Academy of Neurology workgroup for the development of child neurology quality measures and to the Electrical Status Epilepticus in Sleep work group of the Pediatric Epilepsy Re-

search Consortium. She has seven publications in peer reviewed national journals since her appointment to assistant professor. She is collaborating with colleagues at Cincinnati Children's on an R01 study entitled myogenic satellite cells and GSK3 signaling in congenital and adult myotonic dystrophy.

Dr. Kumar has been a leader in achieving Level 3 certification by the National Association of Epilepsy Centers. In addition, she established and leads the Ketogenic Diet Program at Dayton Children's, which adds a much needed treatment for children with epilepsy. She has pursued additional expertise in Clinical Neurophysiology at Wayne State University during her tenure here.

Please join me in recognizing this important milestone in Gogi's career!

Health Care Symposium at University of Dayton, March 25th, 2017

The University of Dayton and Miami Valley Hospital are hosting the Eighth Annual Health Care Symposium entitled Building a Healthy Dayton: Steps on Saturday, March 25, 2017 from 8:00 AM to 1:30 PM in that John F. Kennedy Memorial Union ball room at the University of Dayton.

Dayton Children's Hospital and hard, Department of Pediatrics will be well represented at the symposium. Jessica Saunders and Kate Cauley will be among a great group presenters.

The keynote address will feature Nick Buettner, whose presentation is entitled "The Blue Zones Project: Building Healthier Communities." Nick will provide an intriguing and entertaining presentation about the work that began in 2004 when Dan Buettner teamed up with National Geographic and the world's best longevity researchers to identify



pockets around the world where people lived measurably better.

Nick Buettner has first-hand knowledge of the Blue Zones - plac-

es that have the greatest life expectancy and where more people reach age 100 than anywhere else in the world. Nick is the Community and

Corporate Program Director for Blue Zones Project and is responsible for taking the Blue Zones' lessons to 27 communities, impacting 1.6 million people's health across the United States.

Using National Geographic photography and a dynamic, storytelling delivery, Nick will take you to these longest-lived cultures, sharing his observations from the field, and will provide you with ideas to immediately increase your own healthy longevity and well-being.

Register at:

https://udayton.edu/artssciences/ initiatives/healthcare-symposium/ index.php VOLUME 3 ISSUE 3 PAGE 3

The American Health Care Act

On March 6, 2017, the U.S. House of Representatives leadership proposed the replacement for the Affordable Care Act (ACA). According to Health Affairs' Timothy Jost's blog from March 7, 2017, virtually all of the ACA is left intact with the exception of the insurance affordability provisions, individual and employer mandates, taxes, and Medicaid reforms.

The American Health Care Act legislation would repeal the ACA's employer and individual mandates and replace them with refundable tax credits for individuals to purchase health insurance and cost-sharing reductions with tax credits that vary by age and income.

The AHCA would also delay the tax on high-value employer-sponsored health plans known as the "Cadillac" tax

In addition, the legislation proposes to restructure Medicaid and preserve some of the more popular provisions of the ACA, including protections for people with pre-existing conditions and allowing young adults to stay on their parent's health insurance until age 26, and maintains caps on out of pocket expenses, life time and annual limits.

The legislation outlines many changes to Medicaid, including transitioning federal Medicaid funding to a per-capita cap basis by 2020.

It also appropriates an additional \$422 million for community health centers for 2017.

It prohibits federal funding for Planned Parenthood for one year beginning with the enactment of the law.

Jost summarizes the bill as follows:

"In summary, the legislation's tax cuts will be very attractive to

Pediatric Journal Club

April 27, 2017 Thursday 5-6 PM OPC-C July 18, 2017 Tuesday 12-1 PM OPC-C October 11, 2017 Wednesday 5-6 PM OPC-C January 23, 2018 Tuesday 12-1 PM OPC-C



State: Ohio
County: Montgomery

ACA tax credit in 2020: **\$480** House tax credit in 2020: **\$2,000**

\$ change from ACA to House tax credit: **\$1,520** % change from ACA to House tax credit: **316%**

Kaiser Family Foundation

wealthy Americans and health insurers and providers, who would get a trillion dollars in tax breaks. It could cause consternation for Medicaid recipients and state Medicaid programs, which would see federal funding for Medicaid steadily diminish, potentially thinning out coverage. The legislation could be bad news for recipients of current tax credits who are older, sicker, and poorer, and who live in areas where care is expensive. They may be able to afford low actuarial value coverage with the tax credits the bills would provide them, but they are unlikely then to be able to afford the cost sharing that coverage will impose.

Higher-income younger people, on the other hand, would find coverage much more affordable than it is now under the legislation—the tax credits might fully cover their premiums and leave extra for their health savings accounts. Some insurers could find the state reinsurance money and continuous coverage requirement enough of an incentive to stay in the market, but others may not."

It is still early in the process and the AHCA is being considered by both the House Committee on Energy and Commerce, with jurisdiction over Medicaid, and the House Committee on Ways and Means, with jurisdiction over taxes. If the bill makes its way through those Committees, the House Committee on the Budget will consider it before it is sent to the House floor for a vote. The Senate must also debate and pass any legislation approved by the House.

For a detailed comparison of the Affordable Care Act and the American Health Care Act, check out the interactive table and map available at the <u>Kaiser Family Foundation</u>.

Once you have formed an opinion, I encourage your to contact your legislator to share your perspective.

Senator Rob Portman

Senator Sherrod Brown

8th District Rep<u>resentative Mike Turner</u>

1st District Representative Steve Chabot:

Find your district

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Department of Pediatrics



Faculty Recognized for Outstanding Resident Education

Our pediatric residents recently attending evaluations for July through December 2016.

Congratulations to those faculty who received superior overall ratings of 4.75 or higher on a 5 point scale:

Sherman Alter
Gary Bixler
Craig Boreman
Susan Henry
Abiodun Omoloja
Joseph Ross
Stephen Wolf

Many thanks to all of our faculty who give of their time and talent to make our medical student and resident education programs great!



Vision for Pediatric Research at Dayton Children's Hospital

To be a model community of innovation in pediatric research and medical care.

Strategic Imperatives

- •Establish research leadership for building capability, focus and access to support
- •Transform culture to value research, embracing the spirit of innovation and discovery required
- •Build infrastructure through collaborations and dedicated staff and resources required to support research endeavors.
- •Develop a financial model that leverages multiple sources of funds to launch and sustain a center of research excellence
- •Identify areas of focus that strengthen programs of distinction, enhance patient experience (safety and quality) and improve children's health and wellbeing