



PULSE

THE QUARTERLY PUBLICATION OF THE AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS

FALL • 2011

OMED Meeting Features 26 Valuable And Interesting CME Hours

By Arnold Melnick, DO, FACOP

More than 26 CME hours await registrants at the OMED AOA/ACOP Pediatric Track in Orlando on October 30 - November 2, according to the Program Chair, Marta S. Diaz-Pupek, DO, FACOP. The meeting will be held at the Orlando Convention Center.

Speakers from all over the country will cover a wide variety of subjects, of interest to almost every ACOP member.

Opening the seminar will be Neonatal/Perinatal Day, covering such important and interesting topics as Breastfeeding, Treatment with PDA, Infrared Spectroscopy and Retinopathy of Prematurity.

A wide variety of other topics will

be available: Athletes and Heart Disease, Hyperlipidemia, Rheumatoid Disorders, Acute Abdomen, Urology Update and Pediatric Injuries.

In addition to the wonderful sights of Orlando and plenty of opportunity to visit with DO colleagues and their families, members will be able to enjoy the planned social events of the AOA and the ACOP, including the ACOP Members Luncheon and the AOA Dinner Seminar.

Members are advised to check the Pediatricians box on their AOA registration form in order to receive their syllabi.

See you there!

[CLICK HERE](#)



To View the 2011 AOA/ACOP Pediatric Track Program Offerings

2011 AOA/ACOP PEDIATRIC TRACK

October 30 -
November 2, 2011
Orlando Convention Center

[CLICK HERE](#) to Register

Remember to check the PEDS box on the registration in order to receive your syllabus.

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President's Message

James E. Foy, DO, FACOP
ACOP President



James E. Foy, DO,
FACOP

It was my pleasure to recently attend the annual AOA House of Delegates meeting in Chicago, representing the ACOP. The meeting was a very interesting experience. The House of Delegates is composed of 623 members, representing the 50 states and 23 osteopathic specialty organizations. One of their main responsibilities at the annual meeting is to approve resolutions concerning medicine, healthcare and the osteopathic profession. Resolutions are used by the AOA's standing committees and media experts to advance the viewpoints of osteopathic physicians. The resolutions also cement relationships with other medical institutions.

At the meeting, I presented two ACOP resolutions that were developed by our Wellness Committee. Prior to the meeting, each resolution is initially reviewed by an AOA oversight committee. Then all approved resolutions are reviewed by one of the House resolution committees. Finally all resolutions are reviewed and voted upon by the entire House of Delegates.

Our first resolution recommended support for the federal Healthy, Hunger-Free Kids Act. The guiding principal of this act is to improve the nutritional quality of federal free and cost-reduced meals at school. This act is expected to have an impact on the link between childhood obesity and poverty. It passed the reference committee with full support, and was approved by the House by consent agenda.

Our second resolution recommended support and recognition for the ACOP Wellness Campaign, which recommends BMI determinations for all children over 2 years of age, healthy life style changes and utilization of the 5-2-1-0 "Prescription." The "Prescription" recommends at least five (5) servings of fruits and vegetables daily, two (2) hours or less a day of television and/or electronic device time, at least one (1) hour of exercise each day, and zero (0) calories a day from sweetened drinks.

The Resolution Committee on Public Affairs reviewed our second resolution. At this resolution committee hearing, committee members seemed unfamiliar with the concept. I explained that the 5-2-1-0 "Prescription" is posted on the ACOP web site, with a link

from the AOA and AOFPP websites, and noted the number of "hits" that we had received and the convenience of the free "Prescription" to educate parents. I was fairly sure that the Committee members understood our Wellness Campaign.

However, the next day, the AOA reference committee recommended not accepting the resolution and referring it back to the ACOP for more definition and clarification. I was disappointed.....what should I do? Accept the resolution back, reword it and bring it back in 2012? Or push the issue..... after all, we are in the midst of an obesity epidemic in the U.S., and there is a strong link between pediatric and adult obesity.

I chose the latter strategy, and presented the ACOP Pediatric Wellness Campaign to the entire house, noting the AOA obesity efforts, the convenience of the "Prescription" and the sound basis of the four recommendations made on the "Prescription." After I presented my arguments in favor of the resolution, I made a motion not to refer the resolution. The Speaker then called for a second to my motion, and seconds echoed throughout the House. He then called the question and the resolution passed resoundingly on voice vote

of the House.

After the session, several delegates approached me and thanked us for using our pediatric expertise and representing the needs of children. It was a refreshing experience, and underscored the ACOP Board's view that we should be the pediatric experts and policy makers for our profession!

My thanks to the Wellness Committee Chair, Nancy Monaghan Beery DO, and her Committee members, for developing these two important resolutions. I encourage members at large and members of other ACOP Committees to be involved with the resolution process. By making our voice heard, we enhance the image of the ACOP and AOA, while potentially improving the health and well-being of children.

The remainder of the meeting involved speeches, AOA updates and the election of new AOA officers. One AOA initiative announced before the meeting involved using paid non-physician reviewers for inspection of osteopathic residency programs, replacing the volunteer physician inspectors that we have used for many years. The ACOFP and ACOP had jointly written a resolution to object to this new program and maintain physician involvement in the residency review process.

This resolution proved to be unnecessary. At an AOA Board meeting just before the House of Delegates meeting, the Board Trustees withdrew the program, and opted to let each specialty college maintain its physician reviewers if they so choose.

This demonstrates that the democratic process is still alive! I look forward to representing the ACOP at next year's House of Delegates meeting. I learned a lot this year.

Prescription Pads are Available to ACOP Members

These prescription pads can be used to deliver clear, consistent messages to your patients during the well child exam. This simple tool can help you get your patients and families to start making changes. You can help educate, motivate and encourage all patients to live healthy lifestyles.

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(BODY MASS INDEX)

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MELNICK at large

By Arnold Melnick, DO, FACOP

Are We Doing Our Part?

I present the following numbers, without comment:

From the Substance Abuse and Mental Health Services Administration:

- 14.7 % of kids ages 12 to 17 drank alcohol in the last month; 8.8 % reported binge drinking.
- 11.6 % of kids ages 12 to 17 used tobacco.
- 10 % of kids ages 12 to 17 used illicit drugs in the last month, up from 9.3 % in 2008. Most used marijuana (7.3 %), followed by prescription drugs (3.1 %), inhalants (1 %), hallucinogens (0.9 %) and cocaine (0.3 %).

From the Monitoring the Future survey (2010) of 50,000 American teens by the University of Michigan:

By the time kids graduate from high school ...

- 71 % have consumed alcohol
- 54 % have gotten drunk at least once
- 48 % have tried illegal drugs
- 25 % have tried illegal drugs other than marijuana

ARE WE DOING OUR PART?

By THE NUMBERS

Antibiotic Resistance

By Robert G. Locke, DO, MPH, FACOP

1	One organism, MRSA, kills more Americans every year than HIV/AIDS, Parkinson's, emphysema, and homicide combined.
2 = 50,000	Two common hospital acquired infections, sepsis and pneumonia, resulting in 50,000 US deaths/year.
3 vs. 16	New antibiotic approvals estimated for 2008-2012 versus 1983-1987.
20 ≠ 2	In 1990, there were 20 pharmaceutical companies with large antimicrobial R&D budgets. In 2010, there were two.
64	Countries with known drug-resistant TB.
1927	The year Alexander Fleming discovered the first antibiotic, Penicillin.
\$8 Billion	Annual cost of hospital acquired sepsis and pneumonia.
\$30 Billion	Additional cost of treating antibiotic-resistant organisms vs. antibiotic-sensitive infections.
\$802 Million	The estimated cost to bring a new drug to market
1	One-minute educational videos demonstrating the biology of antibiotic resistance (FDA). CLICK HERE



Historical Highlights

In 1990, ACOP President Michael E. Ryan, DO, FACOP suggested to his Board that ACOP should publish their 50-year history (1940 to 1990). They hired an excellent writer, Robert Phillip Bomboy, who produced and published an outstanding ACOP history. It was a significant milestone for the College.

2011-2013

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Osteopathic Pediatricians

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PULSE is published four times a year in conjunction with the American College of Osteopathic Pediatricians, 2209 Dickens Road, Richmond, VA 23230-2005; (804) 565-6333 or fax (804) 282-0090.

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ACOP Promotes Breastfeeding

The ACOP is a member of the United States Breastfeeding Committee (USBC <http://www.usbreastfeeding.org>). ACOP's representatives, Stephen Snyder, DO, FACOP, and Robert Locke, DO, FACOP, are the only osteopathic physicians among the representatives from 40 health organizations and seven governmental agencies. Dr. Snyder has been instrumental in the growth and development of the USBC. Dr. Robert Locke currently serves on the Board of Directors. As mentioned in the *2011 Surgeon General's Call to Action to Support Breastfeeding*, the "United States Breastfeeding Committee (USBC) provides a forum for non-governmental organizations and liaisons from the federal government to collaborate on joint initiatives in support of breastfeeding."

Examples of Recent Activities of the USBC Include:

Publications and Toolkits:

- *The Joint Commission Core Measure on Exclusive Breast Milk Feeding*
- *Core Competencies in Breastfeeding Care and Services for All Healthcare Professionals*
- *Statement on Lactation Accommodations in the Workplace Position*
- *Statement on Infant/Young Child Feeding in Emergencies*
- *Journal of Perinatal Education* guest editorial, *A Road Map for Change: Ensuring That Women Have Breastfeeding Support*

Collaborations, Expert Testimony, Advocacy

- Key component of the **Surgeon General's Call to Action to Support Breastfeeding**
- Partnered with The Joint Commission on Speak Up campaign, *What You Need to Know About Breastfeeding*
- Co-sponsored congressional briefing, *Improving the Health of Families: How Employers and the Economy Benefit*, with the American Dietetic Association
- Advised the Department of Labor on Workplace Accommodations
- The CDC Division of Nutrition and Physical Activity and the United States Breastfeeding Committee co-host a series of Bi-Monthly State Breastfeeding Coalitions Teleconferences. The teleconferences bring together state/territory/tribal breastfeeding coalitions to share best practices and news and to network and collaborate on issues of national significance
- Co-hosted "Listening Sessions" with DOL and NPWF about workplace support
- Advised and submitted comments to the Dept. of Labor RFI about Break Time for Nursing Mothers
- Assisted with the successful change by the IRS to recognize breast pumps as part of a preventative medicine strategy and support of maternal-infant health care standards.
- Representation at the DHHS OWH expert panels addressing breastfeeding support in hospitals and universities/schools
- Breastfeeding workshop hosted in partnership with the Association of State & Territorial Public Health Nutrition Directors (ASTPHND): *Building Effective Collaborations: Implementation of the SGCTA*

[CLICK HERE](#) 

To visit the USBC website for more information

STUDENT CLUB NEWS

OUHCOM Wins “Club of the Year”

By Meredith Merkley, OHUCOM, OMS II

Ohio University College of Osteopathic Medicine

“I’m exercising *and* having fun!” No, this is not a quote from a textbook or from a health promotions website. This is quote is from an elementary student who participated in the OUHCOM (Ohio University Heritage College of Osteopathic Medicine) Pediatrics Club’s obstacle course at a local health fair. I was amazed and encouraged by this girl’s wonderful attitude and enthusiasm. I was reminded that night of how fortunate I am to be a part of a club that is involved in the community and is setting a great example for the kids and their families.

The OUHCOM Pediatrics Club has been participating in health fairs within Athens, Ohio and the surrounding areas throughout the year. During these events, we demonstrated to the kids how to stay healthy and active. We also ran an event at a local school called, *The Little People’s Hospital*. This was such a fun day where we set up different stations for the children and their families. At each station, the kids learned about their bodies, and what it takes to stay healthy. The kids even had a chance to play doctor with one of our simulated patients.

After a great year of hard work, our pediatrics club was thrilled to receive the Club of the Year Award at the OUHCOM’s annual DOC awards ceremony. This was a wonderful honor, and we are very grateful for all of the school’s support in our events and activities.

This upcoming year will be filled with many more great activities, and all of us in the OUHCOM Pediatrics Club are excited to continue to reach out to the school and surrounding community. I personally am looking forward to hear many more great quotes from some insightful kids!



Brian Sammons (OUHCOM Pediatric Club President) receiving the “Club of the Year” award.

LMU-DCOM Hosts “Kids’ Day in the Park”

By Kirstin Hesterberg, LMU-DCOM, OMS II

Pediatrics Medicine Club President

On April 30th, 2011, the Pediatrics Medicine Club at Lincoln Memorial University-DeBusk College of Osteopathic Medicine, Harrowgate, TN, had our annual Kids’ Day at the Park – full of fun and education. Over 200 children from Claiborne, Bell and neighboring counties learned about healthy eating habits, hygiene, staying active and first aid. The kids had an amazing time and even got their faces painted. In previous semesters, volunteers from the Pediatrics Medicine Club went to a local school to teach sex education to middle school aged children and held a fundraiser to send a child to muscular dystrophy camp.

As osteopathic medical students, OMT is an important part of our education. Our club partnered with UAAO to have a pediatric OMT workshop. Students and faculty

brought their children and we learned many useful techniques. Additionally, a group of first year medical students partnered with a local church to run a 13-week health and wellness camp for local children. The program coincided with the church’s *Biggest Loser* program to promote health and wellness for local community members.





The Groggs (Stanley and Steven)

By Arnold Melnick, DO, FACOP

Chalk up another great father-son duo in the ACOP.

Achieving the Presidency of ACOP (2000-2002) was just one of the many accomplishments of the father, Stanley E. Grogg, DO, FACOP. His story is replete with success in many areas.

From a degree in Zoology at the University of Cincinnati, he went to the Kirksville College of Osteopathic Medicine for his DO (1971). His internship was at Still Osteopathic Hospital, Jefferson City, MO, and he served a pediatrics residency at the Oklahoma Osteopathic Hospital from 1972 to 1974.

His proclivity toward medical education soon became apparent. He joined the faculty of OKCOM and became active on the staff of Tulsa Regional Medical Center, now named OSU-Medical Center. He has since served the latter as Director of its Pediatrics Residency Program, Chairman of the Pediatrics Department and as a member of its Board.

At the OSU Center for Health Services, Stan is currently Professor of Pediatrics, Associate Dean for Clinical Research and Medical Director of Service Learning. He has also held the positions of Interim President and Dean, Interim Provost and Dean, President of the Faculty Senate.

He is a Past President of the Kirksville COM Alumni Association and the Oklahoma Osteopathic Association, which bestowed on him its Distinguished Service Award in 1998.

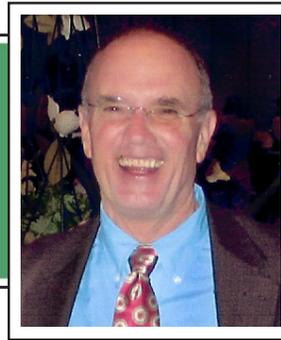
In addition to his ACOP presidency, he was honored with the Harold H. Finkel, DO, Pediatrician of the Year Award in 2008. A member of the American Osteopathic Board of Pediatrics, he also represents ACOP and AOA on the U.S. Advisory Committee on Immunization Practice (ACIP). He has served in numerous positions and on many committees in these groups, as well as in the AOA, other professional societies and community groups.

His deep interest in infectious diseases in Pediatrics has taken him into a number of grant-supported research projects (37), published papers (30) and abstracts (12).

Evidences of his broad interests are his activity in the World Christian Movement (and its missionary aspects) and in travel medicine, a field in which he is certified. Those interests have resulted in his visiting 142 different countries, as of March, 2011.

A few years ago, in PULSE, we wrote, "His desire for diagnostic challenges, especially for working with children who could not give you their history, drew him to pediatrics in the first place. Does he still like pediatrics? Enthusiastically, and with fervor, he replied, "I love it!"

Still on the threshold of a promising career, his son, Steven Ray Grogg, DO, FACOP, has achieved the distinction of double-certification: in Pediatrics from the AOBP and in Internal Medicine



Stanley R. Grogg,
DO, FACOP



Steven R. Grogg,
DO, FACOP

from the American Board of Internal Medicine. After undergraduate studies at the University of Arizona, he took his DO training at Oklahoma State University College of Osteopathic Medicine, graduating in 1996. He then served a joint residency at the University of Texas's Houston Medped Residency Program, finishing in 2000. He now practices both Pediatrics and Internal Medicine in Florida and is an Assistant Clinical Professor at Florida State University College of Medicine.

As a physician still early in his practice, Steve is dedicated to his patients and to his profession. Asked about what in his father's activities and practice influenced or inspired him, Steven replied, "My father was always enthusiastic about pediatric care and I admired his emphasis on continuing education and promotion of his specialty."

Stan's record is heavy on his accomplishments and Steven is well on his way. Both are proud members of ACOP. And we are proud of both of them.



Don't Miss the October Issue!

The next edition of the ACOP *eJournal* is coming your way in October. The edition's theme will deal with adolescent medicine and will include the following:

- Dr. Jones Hicks will address the topic of mental health in young adults.
- Dr. Tyree Winters, Chair of our Minority Committee, will discuss obesity in the minority populations.
- Dr. Tami Hendriksz will complete the subspecialty section with a manuscript entitled: *Bridging the Gap: Finding Creative Ways to Match Nutrition Recommendations and Actual Nutrient Intake Among Adolescents.*

In Addition:

The *eJournal* is packed with things to do, like earning free CME, getting sideline tips about sport medicine, trying to beat Dr. Marshall in his corner and figuring out the vaccine committee's picture quiz. See you online.

APPELLATION ? ? ? ? ? ? ? *Answers* ... Whose name is it?

McBurney's Point

A point one-third of the way between the anterior superior iliac spine and the umbilicus

Charles Heber McBurney, MD (1845-1913)

While his name is synonymous with the landmark and physical examination maneuver that corresponds to acute appendicitis, he was first known for his improved surgical technique for common bile duct stones.

Dr. McBurney studied at Harvard University for BA and Masters Degrees prior to entering medical school at Columbia University in New York City, where he graduated with his MD in 1870. After an internship at Bellevue Hospital in New York, he received surgical training in Vienna, Paris and London, before returning to the United States in 1872. Dr. McBurney taught at the College of Physicians and Surgeons, Columbia University, New York City. He was appointed Professor of Surgery in 1889.

A large charitable gift allowed him to build a model surgical pavilion named for its financial supporter, *The Syms Operating Pavilion*. Along with William Halsted, MD, his surgical colleague at Johns Hopkins, Dr. McBurney was the first to require the surgical team to wear sterile gloves during surgical procedures.

Dr. McBurney is best known for his landmark discovery that the dermatome associated with an acutely inflamed appendix, located at T11 and T12, was the best location to find rebound tenderness when examining patients with early appendicitis. Dr. McBurney subsequently described an improved operative approach to appendicitis that was different from his surgical predecessors. He was also the first to promote the concept that earlier operative intervention was better for patient outcomes than the traditional wait-and-see approach.

Dr. McBurney died of heart disease in Brookline, Massachusetts.

-John Graneto, DO, FACOP



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for the latest issue of eJACOP

VISIT

www.ACOPeds.org FOR MEMBER INFORMATION!

MEMBER NEWS?

If you have information about your own or other ACOP member's activities that you wish to share, send it to ACOPublications@gmail.com.

ATTENTION! ALL RESIDENCY PROGRAM DIRECTORS

PULSE would like to highlight your program. Please send in information on your program, application process, activities, photos, etc. to ACOPublications@gmail.com.

ATTENTION! ALL RESIDENTS & STUDENTS!

Do you need a list of all osteopathic pediatric residencies? Do you want details about any or all of them?

Visit www.ACOPeds.org, then click on STUDENTS, and then on RESIDENCY PROGRAMS. Do it now. Start collecting all the information you can; it will make your decision-making much easier.

For more specific, pertinent information, contact those programs directly.

ATTENTION! ALL STUDENT CLUBS

PULSE wants to know about your club activities. If you would like to publicize what you are doing to inspire others, please send a short article, photos (no more than two) and be sure to include captions for any photos sent in. These can be sent to the PULSE editor by email at ACOPublications@gmail.com.

Comments Decrease Antibiotic Push

Doctor’s positive, supportive comments during visits for a URI considerably reduce the number of parents who receive inappropriate antibiotic prescriptions.

Children’s visits for URI, in which the doctor made any comments referring to potential problems from a URI, resulted in 27% more inappropriate antibiotic prescriptions than when only ‘no problem’ comments were made.

Reducing Inappropriate Antibiotic-prescribing: The Role of Online Commentary on Physical Examination Findings, by John Heritage, PhD, Marc N. Elliott, PhD, Tanya Stivers, Ph.D, and others in *Patient Education and Counseling* 81(1), pp. 119-125, 2010.

Finkel Continues Book Success

ACOP Past-President Martin A. Finkel, DO, FACOP, is well on his way to becoming what is believed to be the most successful medical author in AOA history. His book, *Medical Evaluation of Child Sexual Abuse*, was twice published commercially and then picked up by the American Academy of Pediatrics, which published the third edition – by a DO author (a first)! This sentinel work has now been translated into Chinese and Japanese and is under consideration for publication in India.

Martin is professor of pediatrics at the School of Osteopathic Medicine of the University of Medicine and Dentistry of New Jersey, and medical director and co-founder of its Child Abuse Research and Education and Service (CARES). He continues to lecture all around the world on his work, and to train international doctors who visit his institute.

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Tribute to Arnold Melnick, DO

By Martin Finkel, DO FACOP

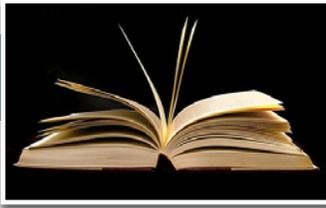
When one looks at the success of today’s ACOP, one quickly sees the energy and commitment of its leaders, as they continually shape the direction of our college to improve its educational programs, enhance relevance to its members and create a collegial and inclusive organization. These objectives, however, are not new for an organization that aims for longevity. It is worth taking the time to remember that today’s success is built on a foundation established by earlier and equally passionate hard-working colleagues who confronted obstacles unknown to our membership today. In this forward-thinking world, it is too easy to forget individuals who were critical to establishing our roots. Every time I read the ACOP PULSE, I am reminded of an esteemed colleague who has unselfishly dedicated his lifetime to plotting and building the foundation of the ACOP. This remarkable individual is Arnold Melnick, DO, FACOP. Dr. Melnick’s voice has been heard by our membership for over 65 years in one form or another. For those who don’t know Dr. Melnick personally and only know him through his column in the PULSE, there may be a few things you would like to know about this ACOP icon. You may not see him as frequently at ACOP meetings, as getting around is physically challenging, but at the young age of 91, there is still nothing too intellectually challenging for Dr. Melnick to tackle.

Dr. Melnick loves the ACOP and dedicated much of his professional activities to help form the ACOP in the early days. Indeed, his thumbprint is everywhere. A sea of change in the quality of ACOP educational programs can be directly attributed to Arnold’s passionate desire to ensure that our members had access to quality CME, when allopathic CME was closed to our members. He was so respected that many prominent MDs welcomed his invitations to speak at our annual meetings. For our youngest members, it might be hard to conceive of DO pediatricians being barred from anything, but it was precisely the efforts of Dr. Melnick and others that helped

break down barriers and facilitated our acceptance into mainstream medicine.

Recently, I had an opportunity to visit with Dr. Melnick in Philadelphia, and from the moment I greeted him, I found myself barraged by provocative questions. He wanted to know what I was writing about, what kind of research I was engaged in, what I thought about the latest controversies regarding abusive head trauma. He immediately assigned me several tasks and then went on to tell me about the too-numerous-to-count activities in which he was involved. Dr. Melnick is a prolific writer with seven books, three monographs, and over 210 published articles and still writing! When not practicing medicine and teaching, he was writing and editing. He was the President of the American Medical Writers Association, a first for a DO. This was one of many “firsts” in his career: first DO appointed to the faculty of the University of Pennsylvania School of Medicine, first DO appointed to full attending staff of the Children’s Hospital of Philadelphia, first DO officer of the Philadelphia Pediatric Society and in 1960, was a member of the first group of DO representatives invited to a White House Conference on Children and Youth!

Generations of DO’s and other health professionals owe their careers to his leadership as the Founding Dean of the Southeastern College of Osteopathic Medicine in 1980, one of Dr. Melnick’s most significant achievements. His visionary leadership developed SECOM into the Nova Southeastern University Health Professions Division, for which he served as Executive Vice Chancellor and Provost. I could continue, but for me I have been blessed to have known “Uncle Arnold” since my childhood and have him as an exceptional role model. In many ways he has been the ACOP’s “Uncle Arnold,” the uncle who is always looking over your shoulder, interested in your continued growth and is always there for you. The ACOP is fortunate to have been the beneficiary of Dr. Melnick’s passionate commitment. We all owe Dr. Melnick a huge debt of gratitude!



BOOK REVIEW

By Robert Locke, DO, MPH, FACOP

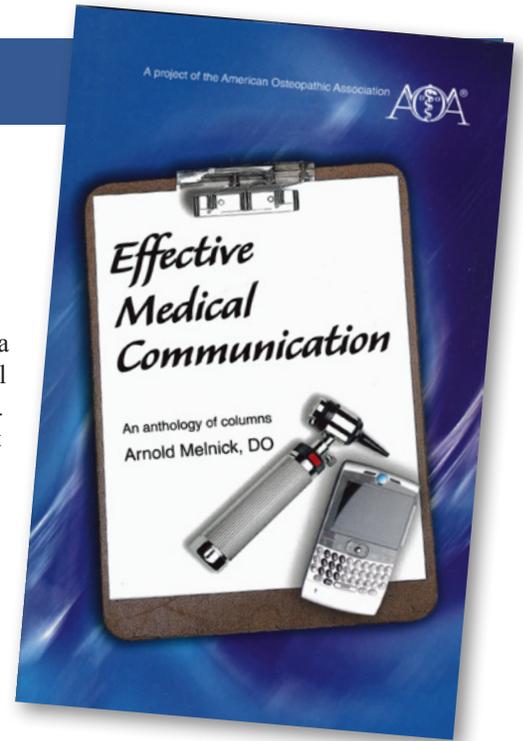
Stepping Up Your Medical Communications Game

Author: Arnold Melnick, DO, FACOP

Unambiguous, amusing, and content-rich, *Effective Medical Communication* is a collection of Dr. Arnold Melnick's columns for the *DO Magazine* (2004-2010). You will want to read this text before your next presentation, patient conversation or authored paper. *Effective Medical Communication* is a practical, easy-to-read resource and an excellent choice as the AOA's first book publishing venture.

The columns are organized into three sections: *Medical Speaking*, *Medical Writing*, and *Patient Communication*. Browse by sections or by individual columns. The book does not have to be read at once or in chapter order. Sample column-chapter topics include: when to open with a joke, optimizing communication with slides, overcoming trouble getting started with writing a talk or lecture, effective communication through progress notes and formal letters, improving your office's communication to your patients/families – what is out of your sight may not be out of your patient's minds, and clarifying grammatical conundrums.

Whether a novice or an experienced communicator, *Effective Medical Communication* is a valuable resource. The next time you are giving a talk, listening to a patient or presenting formally or informally to colleagues, think about ways you could improve that conversation. It's all in Dr. Melnick's book. As Gilbert D'Alonzo Jr, DO, AOA Editor in Chief, states in the book's introduction, "It will help you step-up your game to the next level."



Dr. Melnick's book is available in hard copy, soft copy and eReader versions.

Please see related article on teaching effective medical communication during medical school training in the DO Magazine.

CLICK HERE



to view the article

Welcome to our New Members!

Intern

Maria V. Bravo, DO..... Lake Worth, FL
Vicki P. McGowan, DO..... West Palm Beach, FL
Ryan J. Skarbek, DO Royal Palm Beach, FL

Pediatric Student Club

Michael Bernard Hattiesburg, MS
Kate Brady Hattiesburg, MS
B. J. Burns Hattiesburg, MS
Richard Calderone..... Slidell, LA
Dabi Chung..... Hattiesburg, MS
Harriet Crockett..... Hattiesburg, MS
Megan Dodge Hattiesburg, MS
David J. Freestone Peoria, AZ
Brandi Hyatt Hattiesburg, MS
Shanique Jarrett Hattiesburg, MS
Kristen Kilcrease Hattiesburg, MS

Jacob Mahaffey Tulsa, OK
Brittany McClure..... Hattiesburg, MS
Elaine M. Peterson Mount Vernon, WA
Cavatina Pham..... Petal, MS
Nicholas J. Pytel Glendale, AZ
Akhila Rajaram..... Hattiesburg, MS
Aishwarya Raju Hattiesburg, MS
Naila Rashid Hattiesburg, MS
Thomas P. Wolski, Jr. Fairlawn, OH
Cynthia Wozow Hattiesburg, MS

Resident

Michael R. Borchetta, DO Green Acres, FL
Kristen M. Borchetta, DO Lake Worth, FL
Megan L. Stilwill, DO Wellington, FL

Contact Gregg Leasure with any membership questions at greg@ACOPeds.org

MEMBERS ...in the News!

ACOP-ers Speak at ROME Conference

As part of the ACOP's commitment to providing increased numbers of quality osteopathic pediatric CME, two ACOP leaders traveled recently to Seward, Alaska, to participate in a ROME meeting.

Immediate Past-President Margaret A. Orcutt Tuddenham, DO, FACOP, and Past-President Robert W. Hostoffer, Jr., DO, FACOP, presented five papers at the meeting. The Regional Osteopathic Medical Education (ROME) conference was co-sponsored by the Alaska Osteopathic Medical Association.



Margaret A. Orcutt
Tuddenham, DO,
FACOP



Robert W. Hostoffer,
Jr., DO, FACOP

Dr. Tuddenham spoke on *Risky Business* and *Small Patients, Big Emergencies*. Dr. Hostoffer presented lectures on *Food Allergies, Anaphylaxis* and *Insect Hypersensitivities*.

Dr. Hostoffer commented that AOA-sponsored ROME meetings, of which there are several a year in various parts of the country, are a chance to pick up a few more pediatric CME credits, and an opportunity for ACOP members to get invited to speak.

Dr. Stiles is Re-elected

Laura S. Stiles, DO, FACOP, has been re-elected to the Board of Trustees of the Texas Osteopathic Medical Association (TOMA). She is an active TOMA member, serving on multiple committees and in the House of Delegates. In 2008, TOMA awarded Dr. Stiles with a life membership in recognition for her service to the osteopathic profession and her patients. Dr. Stiles earned her Doctor of Osteopathic Medicine (DO) degree in 1975 from Kirksville College of Osteopathic Medicine in Kirksville, Missouri. She is the chair of ACOP's Government Relations Committee.

Enquiring Minds Want to Know!

Do you know any interesting news or information concerning your fellow ACOP members? We would also like to know: ACOPublications@gmail.com.

Osteopathic Education

Bringing Osteopathy to Clinical Pediatric Education

By Tami Hendriksz, DO, FACOP

Ensuring exposure to osteopathy is a challenge to the clinical curriculum. Osteopathic medical students have a variety of experiences at multiple training sites during their clinical rotations. To help address this issue, among other challenges, the Pediatric Department at the Touro University College of Osteopathic Medicine in California (TUCOM-CA) has recently implemented web-based didactics as part of a broader effort to standardize the education experience that students receive during their third year core pediatric rotation. The new pediatric requirements for TUCOM-CA students include the completion of ten pre-selected *Computer-Assisted Learning in Pediatric Program* (CLIPP) cases during their six-week rotation. The CLIPP cases are interactive virtual pediatric patient cases designed to encompass the learning objectives of the *Council On Medical Student Education in Pediatrics* (COMSEP) curriculum. The cases are an excellent learning tool that promotes a consistent quality educational experience while students train at different rotation sites.

An important aspect not addressed in the CLIPP cases is the application and utilization of appropriate *Osteopathic Principles and Practices* (OPP). OPP knowledge that can improve patient care and health outcomes is a differential advantage that osteopathic medical students have compared to their allopathic colleagues. All of the third-year students at TUCOM-CA are required to attend five weekly didactic sessions during their six-week core pediatric rotation. These interactive didactic sessions involve the presentation, discussion and analysis of a particular CLIPP case, with an additional osteopathic principle perspective component. During these interactive didactic sessions, members of the TUCOM-CA Osteopathic Manipulative Medicine Department and other DO faculty share OPP and OMT knowledge that is applicable for each CLIPP case.

Due to the varied locations of the core pediatric rotations, not every student is able to physically attend each weekly didactic session. For this reason, the TUCOM-CA Pediatric Department utilizes an online web conferencing solution (WebEx). This allows students and faculty from across the country to attend and participate in every didactic session. The weekly WebEx didactic sessions have permitted third-year students across the various training sites to receive ongoing high quality pediatric osteopathic exposure. This repeated exposure to OPP and OMT increases the confidence and ability of students to continue to utilize OPP with all of their patients. It is important for pediatric educators to continue to think outside of the box, creatively utilize the technological communication resources and share their ideas to ensure a comprehensive osteopathic experience for all osteopathic medical students.

Dr. Hendriksz is Assistant Professor of Pediatrics at Touro University College of Osteopathic Medicine in California.

ACOP COMMITTEE

Spotlight

ACOP Minority Committee Update

By Tyree M. S. Winters, DO
Chair, ACOP Minority Committee

The ACOP leadership commissioned the American College of Osteopathic Pediatricians Minority Committee for the purpose of addressing the unmet medical needs of the minority pediatric population. This at-risk population poses a challenge for the medical community due to deficiencies in financial, legislative and social support in preventative and therapeutic medical services. Despite legislative initiatives such as SCHIP, Medicaid and the recently passed healthcare reform, there are persistent morbidity and mortality health disparities involving the minority pediatric population.

Recognizing the need for the ACOP to become more proactive in addressing the unmet needs of the minority pediatric population, the ACOP Minority Committee was charged with the task of becoming advocates within the ACOP and the broader osteopathic

community. The committee consists of osteopathic pediatric attendings, residents and medical students from around the country. The committee typically meets monthly by telephone conference calls and in person during the ACOP semi-annual conferences. The committee will contribute to the ACOP *eJournal* with articles highlighting minority pediatric issues and provide position statements for ACOP and AOA consideration. If adopted, these position statements will be used for the continuing improvement of federal, state and local legislation to address minority pediatric medical needs.

The committee is open to new members and encourages any ACOP member, regardless of level in training, to join the committee. Interested members can contact the committee chair, Tyree M.S. Winters, DO, at tmswinters@gmail.com for additional information.

PUBLIC HEALTH

...and our kids

Something Has Fallen Inside!

By Cyril Blavo, MS, DO, MPH, TM, FACOP

Children in a small village in the West African nation of Ghana looked forward to the periodic field trip to a botanical garden, where they learned about exotic plants and sang nursery rhymes. Dr. Grimes, a botanist, missionary and child advocate established this program with the blessing of the village elders. Grimes quickly noticed a common presentation of weeping leg sores, distended abdomens and swollen extremities among some of the children. He ascribed the problem to a dietary deficiency of protein.

Dr. Grimes had recognized that the standard breakfast of the children, "coco" (porridge), consisted mainly of cornstarch and an occasional cube of sugar. He postulated that they had Kwashiorkor. He persuaded the village women to boil a broad bean he had been cultivating and to mix it into the porridge the children had for breakfast. The kids fondly named the new concoction, *Eko Egbeming* (something has fallen inside). The broad beans consequently served as projectiles at breakfast time, and the kids hardly consumed them.

Although sorely disappointed, Grimes devised another strategy. He donated a manually operated mill to the village, assigned a village laborer as the Miller, and in return for donating the machine, he implored the Miller to grind broad beans into every order of corn mill. Furthermore, to assure a steady supply of the bean, he introduced the new crop to the most successful corn farmer in the village and taught him how to cultivate it. A new enterprise was born and the nutritional deficiency of the children had finally been

resolved. The children had to resort to other games at breakfast!

The initiative undertaken by this altruistic botanist was exemplary. He established a relationship with the village, undertook a needs assessment of the community, prioritized the needs (in this case, the health of the children), sought the buy-in of their mothers, engaged key stakeholders (village elders), built the capacity of role players in the village (a laborer, a farmer) and assured sustainability of his efforts by finding local solutions to local problems.

We are in an era of altruism today that transcends our borders. Nutritional crises in Africa are as real now as they were then. Like Dr. Grimes, let's make our initiatives focused, purposeful, culturally competent and most of all sustainable.

Cyril Blavo, DO, FACOP, is a Professor of Pediatrics and Public Health at Nova Southeastern University and President of International Health Initiatives, Inc., a non-profit humanitarian organization. Dr. Blavo was a one of the beneficiaries of the Grimes initiative.

[CLICK HERE](#)



For further information on how to contribute
to the International Health Initiatives, Inc.



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ACOP would like
to thank the following
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MEMBER SPEAK

We Need to Take Action Now!

By Laura S. Stiles DO, FACOP

Our nation is facing a financial crisis that affects our profession and our patients. Government medical insurance is subject to a payment drop of up to 29%. Historically, “as the government insurance goes, so do other insurances,” meaning private insurers will likely drop their reimbursement. The current payment system – designed to adjust payments in accordance with a Sustainable Growth Rate (SGR) – is out-of-date. Physician practice costs have risen over 30% since 2001, while the SGR has not increased at all. The SGR is ultimately decided by the individual states. Whether you are an owner of your own private practice or in a salaried position, this discrepancy between the reimbursements and practice costs affects your income. If the payment to providers continues to decline, each of us will be affected.

The AOA is recommending that a fair and equitable reimbursement policy for primary care physicians and general surgeons be implemented, increasing Medicaid payments; permanently raising the Geographic Practice Cost Index (GPCI); and having a long-term competitive reimbursement strategy.

OTC products are used daily by our patients. The Affordable Care Act, by not allowing over-the-counter medications to be included as a tax benefit unless a prescription is written by the provider, will cause increased and unnecessary time spent by all – provider, pharmacist, and purchaser. OTC prescription writing increases provider liability.

Another active issue included is the

Help, Efficient, Accessible, Low-Cost, Timely Healthcare (HEALTH) Act of 2011 and the Healthcare Truth and Transparency Act of 2011. The HEALTH Act of 2011 keeps the punitive damages under control. The Healthcare Truth and Transparency Act requires all types of doctors to accurately identify their degrees and qualifications to patients and families. I encourage you to support both of these acts.

Another concern is that AOA medical schools are graduating almost twice the number of physicians as there are residency slots available. We need to think outside the box to increase potential residency training opportunities, e.g. office-based programs.

Another issue is the crisis in our nation’s schools. We are seeing excellent teachers with years of experience being asked to step down in order to save school districts money. School systems do not optimize the nutritional offerings nor often allow adequate support for physical activity and exercise. Please help to think outside the box on how to help solve these problems.

Whether you agree or disagree, please call and provide your state and federal legislators with your professional opinion. If you do not call your legislators, then the amateurs will out number us in providing policy makers with their opinions.

Laura Stiles, DO, FACOP is the Chair for ACOP’s Government Relations Committee. The opinions expressed in this Member Speak Column are her own and do not necessarily represent the opinion and viewpoint of the ACOP.

VISIT

www.ACOPeds.org FOR MEMBER INFORMATION!

AOA/ACOP PEDIATRIC TRACK



American College of
Osteopathic Pediatricians

2209 Dickens Road
Richmond, VA 23230-2005
(804) 565-6333 • kim@acoped.org
www.acoped.org

Registration is available at
www.osteopathic.org/inside-aoa/events/omed-2011

You must check the **Pediatricians Box** when you register
in order to receive your syllabus.

October 30 - November 2, 2011
Orlando Convention Center

AOA 116TH ANNUAL CONVENTION AND SCIENTIFIC SEMINAR

October 30 – November 2, 2011

Orlando Convention Center • Orlando, FL

AOA OMED/ACOP PEDIATRIC TRACK

Welcome to the AOA OMED/ACOP Pediatric Track in Orlando, Florida

The CME Committee has created an exciting education program that will focus on cardiology, rheumatology, ingestions and surgery. Other exciting topics include breastfeeding, food allergies, concussion, rehabilitation of pediatric injuries, pediatric palliative care, update on diabetes mellitus and maintenance of certification and the always popular hands on OMT workshop.

Test your visual diagnostic skills by participating in the hour long interactive visual diagnosis lecture. Pictures and images that are helpful in making the diagnoses for various pediatric conditions will be presented. For the first time, we will use an audience response system to anonymously compare answers to patient care questions.

The conference also includes a neonatal/perinatal day which promises to be a great educational experience with lectures on the latest treatments for patent ductus arteriosus and for retinopathy of prematurity. Other topics include palliative care and ethical dilemmas in the NICU, breastfeeding the preterm neonate, the late premature infant and uses of infrared spectroscopy in the NICU.

The ACOP is committed to teach, inspire and train students and residents. We invite students and residents to attend this conference and participate in the special meetings that we have set up for them.

We invite everyone to continue their commitment to stay fit and participate in the Fun Run/Walk on Tuesday, Nov 1st. Reconnect with your medical school classmates during the Alumni lunches and evening events. Join us at the Trick or Treat activity in the Exhibition Hall on October 31st.

Orlando offers a wide variety of opportunities to have fun. Whether you visit one of the Disney theme parks, enjoy shopping in Downtown Disney, the nightlife in any of the various clubs or a fabulous cuisine in one of the area's great restaurants, your experience is sure to be 'magical'.

With education, connecting with colleagues and former classmates, enchantment and earning CME, what could be a better way to spend a week. Join us in Orlando!

Marta S. Diaz-Pupek, DO, FACOP, FAAP
Program Chair
Co-Chair of CME Committee

Michael Hunt, DO, FACOP, FAAP
Program Co-chair

Ed Spitzmiller, DO, FACOP, FAAP
Co-Chair of CME Committee

Education Mission Statement

The ACOP's Continuing Medical Education (CME) is designed to meet the objectives and purposes of the College and the needs of the membership.

The objective of the ACOP is "to foster measures and conduct activities to increase the effectiveness of the specialty of pediatrics and pediatric education at all levels." The ACOP Committee on CME has as its main function the implementation of programs that will improve the quality of health care for children. Through surveys of its members during the year and at the CME Meeting, educational needs are identified. The scope of pediatric topics presented in the CME programs is based on these surveys.

Accreditation and Designation

During OMED 2011, DOs will be able to earn up to 26 hours of *Category 1-A CME credit* for attending the didactic programs of the specialty colleges and the conference's closing joint session. However, it is possible to earn extra credit(s) by attending the Sunday sessions, breakfast sessions, and the AOA dinner session.

ACOP sessions comprise a total of 26 Category 1-A Credit Hours as follows:

Sunday, October 30 – 7 credit hours (*We anticipate being approved for 7 AOA Category A-1 CME credits for Sunday's program.*)

Monday, October 31 – 6 credit hours

Tuesday, November 1 – 6 credit hours

Wednesday, November 2 – 7 credit hours

Please contact ACOP at (804) 565-6333 or email kim@ACOPeds.org with questions regarding this conference.

Americans with Disabilities Act

The American College of Osteopathic Pediatricians has fully complied with the legal requirements of the ADA and the rules and regulations thereof. If any participant in this educational activity is in need of special accommodations, please contact ACOP headquarters at (804) 565-6333 or via email to kim@ACOPeds.org.

Accommodations

The American Osteopathic Association (AOA) has arranged for special group rates during this Conference with a variety of hotels located close to Orange County Convention Center. To view hotels and make your reservation, please visit www.omedconference.org/.

Discounted flights are available through United Airlines. To book, call (800) 521-4041 and use discount code 550KM.



AOA/ACOP 2011 PEDIATRIC TRACK

Program Chair: Marta S. Diaz-Pupek, DO, FACOP, FAAP

Program Co-Chair: Michael Hunt, FACOP, FAAP

SATURDAY, OCTOBER 29, 2011

5:00 pm – 9:00 pm ACOP Board of Trustees Meeting

SUNDAY, OCTOBER 30, 2011

PERINATAL/NEONATAL

Co-Chairs: James Kirk, DO, FACOP; Shannon Jenkins, DO, FACOP, FAAP

Moderator: Shannon Jenkins, DO, FACOP, FAAP

- 6:30 am – 7:45 am **AOA Breakfast Seminar** (must sign in)
- 7:00 am – 5:00 pm **AOA Registration**
- 8:00 am – 9:00 am **Breastfeeding the Premature Infant**
Joan Meek, MD
- 9:00 am – 10:00 am **Practical Uses of Near Infrared Spectroscopy in the NICU**
Travis Anschutz, MD
- 10:00 am – 4:00 pm **AOA Exhibits**
- 10:00 am – 10:30 am **Break**
- 10:30 am – 11:30 am **Novel Treatments for Retinopathy of Prematurity**
Eric Romriell, DO
- 11:30 am – 12:30 pm **PDA: Evaluation and Treatment in the NICU**
Marc R. Belcastro, DO, FACOP
- 12:30 pm – 1:30 pm **AOA Lunch and Learn:** Exhibit Hall
- Moderator:** James Kirk, DO, FACOP
- 1:30 pm – 2:30 pm **The Late Premature Neonate**
William R. Driscoll, DO
- 2:30 pm – 3:30 pm **Ethical Dilemmas in the NICU**
Alissa Swota, PhD
- 3:30 pm – 4:30 pm **Neonatal Palliative Care**
Kelly Komatz, MD
- 6:00 pm – 9:00 pm **AOA Opening Reception** (Peabody)

Registration is available at

www.osteopathic.org/inside-aoa/events/omed-2011

 You must check the **Pediatricians Box** when you register in order to receive your syllabus.

FACULTY

Michael Allshouse, DO, FACS, FAAP
Medical Director, Pediatric Surgery & Trauma
Children's Hospital Central California
Madera, CA

Travis Anschutz, MD
Neonatologist
Madison Memorial Hospital
Idaho Falls, ID

Marc R. Belcastro, DO, FACOP
Neonatologist
Miami Valley Hospital
Dayton, OH

Dave Boesler, DO
Chair, Department of Neuromusculoskeletal Medicine
Nova Southeastern University
Fort Lauderdale, FL

Marta Diaz-Pupek, DO, FACOP, FAAP
A.I. DuPont Hospital for Children
Wilmington, DE

- Continued -

MONDAY, OCTOBER 31, 2011

- 6:30 am – 7:45 am **AOA Breakfast Seminar** (Peabody)
7:00 am – 4:30 pm **AOA Registration**
8:00 am – 9:30 am **AOA Opening Session** - Keynote Speaker
9:30 am – 4:30 pm **AOA Exhibits**

Moderator: Marta S. Diaz-Pupek, DO, FACOP, FAAP

- 9:30 am – 10:30 am **Screening Athletes for Heart Disease**
Frances R. Zappalla, DO, FACC, FAAP
10:30 am – 11:30 am **Lipidemias: Diagnosis and Treatment**
Frances R. Zappalla, DO, FACC, FAAP
11:30 am – 12:00 pm **Hypertension**
Frances R. Zappalla, DO, FACC, FAAP
12:00 pm – 1:00 pm **AOA Lunch and Learn: Exhibit Hall**
1:00 pm – 2:00 pm **Breastfeeding: Victories and Challenges**
Joan Meek, MD
2:00 pm – 3:00 pm **Common Household Ingestions**
Michael D. Reed, PharmD
3:00 pm – 3:30 pm **AOA Trick or Treat:** Exhibit Hall
3:30 pm – 4:15 pm **The Most Common Prescribed Medications Ingestions**
Michael D. Reed, PharmD
4:15 pm – 5:00 pm **Medical Management of Common Poisons**
Paul Smith, DO
5:00 pm – 7:00 pm Pediatric Education Leadership Committee
(*Department Chairs*)
Vaccine Committee Meeting
Resident Meeting
Student Meeting
Evening: **AOA Affiliated Organizations Events**

TUESDAY, NOVEMBER 1, 2011

- 6:00 am **AOA Fun Run/Walk**
6:30 am – 7:45 am **AOA Breakfast Seminar** (Peabody)
7:30 am – 3:30 pm **AOA Registration**
Moderator: R. Edwin Spitzmiller DO, FACOP
8:00 am – 9:00 am **Pediatric Palliative Care**
Cassandra Hirsh, DO
9:00 am – 9:45 am **Review/Update: Rheumatology**
Maureen Leffler, DO
9:45 am – 10:15 am **Break**
10:15 am – 11:00 am **New Therapies for Rheumatoid Disorders**
Maureen Leffler, DO

FACULTY

William R. Driscoll, DO
Assistant Professor, Pediatrics
University of Florida
College of Medicine
Jacksonville, FL

Michael J. Erhard, MD
Medical Director, Division of Pediatric
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Michael D. Reed, PharmD
Director, Rebecca D. Considine Re-
search Institute
Children's Hospital Medical
Center of Akron
Akron, OH

Eric Romriell, DO
Retinal Specialist
Idaho Eye Center

- Continued -

TUESDAY, NOVEMBER 1, 2011

11:00 am – 12:00 pm	Food Allergies Robert W. Hostoffer, Jr., DO, FACOP
12:00 pm – 1:00 pm	Alumni Luncheons (Hotels)
1:30 pm – 2:30 pm	Do You See What I See? Visual Diagnosis Marta Diaz-Pupek, DO; Maureen Leffler, DO
2:30 pm – 4:00 pm	OMT Workshop Dave Boesler, DO
4:00 pm – 5:30 pm	CME Committee Meeting Residency Directors Committee Meeting <i>eJournal</i> Meeting
Evening:	Alumni Events

WEDNESDAY, NOVEMBER 2, 2011

6:30 am – 7:45 am	AOA Breakfast Seminar (Peabody)
8:00 am – 12:00 pm	AOA Registration
Moderator: Michael G. Hunt, DO, FACOP, FAAP	
8:00 am – 9:00 am	Maintenance of Certification Fernando Gonzalez DO, FACOP
9:00 am – 10:00 am	Acute Abdomen in Children Michael Allshouse, DO, FACS, FAAP
10:00 am – 10:30 am	Break
10:30 am – 11:30 am	Anorectal Malformations Michael Allshouse, DO, FACS, FAAP
11:30 am – 12:30 pm	Urology Update Michael J. Erhard, MD
12:30 pm – 2:00 pm	ACOP Lunch/Posters
2:00 pm – 3:00 pm	Concussions in Children Mary L. Solomon, DO
3:00 pm – 4:00 pm	Rehabilitation of Common Pediatric Injuries Mary L. Solomon, DO
4:00 – 5:00 pm	Urology Update Michael J. Erhard, MD
6:00 pm – 9:00 pm	AOA Dinner Seminar (Peabody)

FACULTY

Idaho Falls, ID

Paul G. Smith, DO
Community Medical Center
Missoula, MT

Mary L. Solomon, DO
Rainbow Babies & Children's Hospital
Cleveland, OH

Alissa Swota, PhD
Bioethicist, Wolfson
Children's Hospital
Associate Professor
University of North Florida
Jacksonville, FL

Frances Zappalla, DO, FACC, FAAP
Pediatric Cardiologist
A.I. DuPont Hospital for Children
Wilmington, DE

26+

**Category 1-A
Credit Hours**

**Registration is
available at**

**[www.osteopathic.org/
inside-aoa/events/
omed-2011](http://www.osteopathic.org/inside-aoa/events/omed-2011)**

You must check the **Pediatricians Box** when you register in order to receive your syllabus.